

EDUCATION, HEALTH, WELFARE AND
STATE INSTITUTIONS

FEBRUARY 16, 1977

The meeting was called to order at 8:12 a.m. in Room 323 on Wednesday, February 16, 1977, with Senator Jack Schofield in the Chair.

PRESENT: Chairman Jack Schofield
Vice-Chairman Joe Neal
Senator William Raggio
Senator Richard Blakemore
Senator Wilbur Faiss
Senator William Hernstadt

GUESTS: Dr. John Carr, Health Division, Dept. of Human Resources
Assemblywoman Sue Wagner
Carol Senary, Division of Mental Hygiene & Retardation
Dr. Wm. Edwards, Health Division, Dept. Of Hum. Resources
Susan Haase, N.A.R.C.
Carol Alldredge, Governor's Developmental Disability Council

A.B. 118 (Exhibit "A")

Dr. John Carr of the Health Division of the Department of Human Resources testified in behalf of this bill. Dr. Carr stated that NRS 442.115 already provides testing of infants for 'phenylketonuria', and A.B. 118 will provide for testing in other inborn areas of metabolism. Dr. Carr remarked that upon availability of facilities, Nevada would be able to have the tests conducted in Oregon for the cost of \$2.00 per test. Dr. Carr further remarked that the funding for these tests is requested in the executive budget as a \$20,000 allocation. Dr. Carr said this testing would include examining for 'hypo-thyroidism' which is twice as common in infants as 'phenylketonuria'.

Chairman Schofield asked Dr. Carr to explain what 'phenylketonuria' was. Dr. Carr said that the current test for this disease is performed on blood, and the problem begins when phenylalanine (amino acid) does not convert to another amino acid this piles up in the blood and becomes toxic and creates brain damage.

Senator Hernstadt asked what does the State currently test for in infants? Dr. Carr answered 'phenylketonuria' only.

Assemblywoman Sue Wagner who sponsored this bill testified that the testing was important because it traces diseases that are 'preventable', and makes the difference between a functioning human being and the institutionalization of the same.

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Ms. Carol Senary of the Division of Mental Hygiene and Retardation said that once discovered, the disease of 'phenylketonuria' can be cured with corrective diet, and usually cannot be traced after the child reaches the age of seven years. Ms. Senary said that currently in the Mental Health Institute they have one youth with hypo-thyroidism and four youths with 'phenylketonuria' and the projected cost for the next five years is \$136,875.00 per person for institutionalization, and most probably this could have been detected with an infant test for the cost of \$2.00.

Dr. William Edwards of the State Health Division said that he was representing the Governor's Developmental Disability Council, which strongly gives its support of this legislation.

Senator Neal arrived late for the hearing, and Dr. Carr explained to him the diseases and their symptoms.

Senator Hernstadt questioned why limit the testing program only to diseases concerned with mental retardation? Dr. Carr said that most of the diseases tested in new-born infants have as their primary manifestation, mental retardation.

Susan Haase of the Nevada Association for Retarded Citizens, and Carol Alldredge of the Governors Developmental Disability Council also stated that their agencies gave full support of the bill.

Senator Blakemore: Motion of Do Pass
Senator Hernstadt: 2nd the Motion

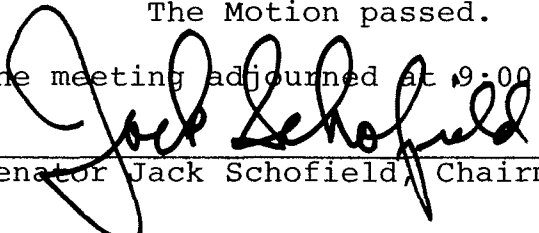
The Motion passed.

S.B. 194 (Exhibit "B") (Original copy of bill)

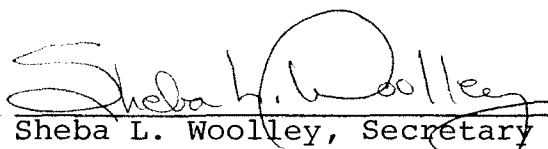
Senator Blakemore: Motion of Amend and Do Pass
(Exhibit "C"- Amendments)
Senator Neal: 2nd the Motion

The Motion passed.

The meeting adjourned at 9:00 a.m.



Senator Jack Schofield, Chairman



Sheba L. Woolley, Secretary

A. B. 118

ASSEMBLY BILL NO. 118—ASSEMBLYMEN WAGNER, SCHOFIELD, JEFFREY, GOMES, ROBINSON, DEMERS, HAYES, BROOKMAN, WESTALL, COULTER AND KOSINSKI

JANUARY 20, 1977

Referred to Committee on Health and Welfare

SUMMARY—Provides for additional testing of newborn infants. (BDR 40-430)

FISCAL NOTE: Local Government Impact: No.
State or Industrial Insurance Impact: No.

EXPLANATION—Matter in *italics* is new; matter in brackets [] is material to be omitted.

AN ACT relating to maternal and child health; providing for additional testing of newborn infants for discovery of preventable mental disorders; and providing other matters properly relating thereto.

The People of the State of Nevada, represented in Senate and Assembly, do enact as follows:

- 1 SECTION 1. NRS 442.115 is hereby amended to read as follows:
2 442.115 1. Any physician, surgeon, obstetrician, midwife, nurse,
3 maternity home or hospital of any nature attendant on or assisting in
4 any way whatever any infant, or the mother of any infant, at childbirth
5 shall make or cause to be made an examination of [such] the infant,
6 including [a] standard [test,] tests to the extent necessary for the dis-
7 covery of phenylketonuria [.] and other preventable inheritable dis-
8 orders leading to mental retardation.
9 2. If the examination and [test] tests reveal the existence of such
10 [a condition] conditions in an infant, the physician, surgeon, obstetri-
11 cian, midwife, nurse, maternity home or hospital attendant on or assist-
12 ing at the birth of [such] the infant shall immediately:
13 (a) Report [such] the condition to the local health officer of the
14 county or city within which the infant or the mother of the infant resides,
15 and the local health officer of the county or city in which the child is
16 born; and
17 (b) Discuss the condition with the parent, parents or other persons
18 responsible for the care of the infant and inform [such person or per-
19 sons] them of the treatment necessary for the [cure] amelioration of
20 the condition.
21 3. An infant [shall be] is exempt from examination and testing if
22 either parent files [with the person or institution responsible for making
23 such examination a written statement objecting to the examination.]
24 a written objection with the person or institution responsible for making
25 the examination or tests.

S. B. 194

**SENATE BILL NO. 194—COMMITTEE ON EDUCATION,
HEALTH AND WELFARE AND STATE INSTITUTIONS**

FEBRUARY 4, 1977

Referred to Committee on Education, Health and Welfare
and State Institutions

SUMMARY—Establishes state health coordinating council and authorizes establishment of office of health planning and resources in department of human resources. (BDR 40-114)

FISCAL NOTE: Local Government Impact: No.
State or Industrial Insurance Impact: No.

EXPLANATION—Matter in *italics* is new; matter in brackets [] is material to be omitted.

AN ACT relating to health planning and facilities; establishing a state health coordinating council and authorizing establishment of an office of health planning and resources in the department of human resources; prescribing certain powers and duties of these agencies; abolishing the state comprehensive health planning advisory council; and providing other matters properly relating thereto.

*The People of the State of Nevada, represented in Senate and Assembly,
do enact as follows:*

- 1 SECTION 1. NRS 439A.010 is hereby amended to read as follows:
- 2 439A.010 As used in this chapter: ["council" means the state com-
- 3 prehensive health planning advisory council.]
- 4 1. "Council" means the state health coordinating council.
- 5 2. "Department" means the department of human resources.
- 6 3. "Federal Act" means 42 U.S.C. §§ 300k to 300t, inclusive.
- 7 4. "Health systems agency" means an organization in this state which
- 8 has been designated as a health systems agency by the Federal Govern-
- 9 ment.
- 10 SEC. 2. NRS 439A.020 is hereby amended to read as follows:
- 11 439A.020 [In order to provide state comprehensive health planning
- 12 in response to the enactment of 42 U.S.C. § 246, as from time to time
- 13 amended, there is hereby created a state comprehensive health planning
- 14 advisory council.] *The state health coordinating council is hereby cre-*
- 15 *ated to:*
- 16 1. *Promote equal access to quality health care at a reasonable cost;*
- 17 2. *Promote an adequate supply and distribution of health resources;*
- 18 3. *Promote uniform, effective methods of delivering health care;*



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DEPARTMENTAL
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AGING SERVICES
CHILD CARE SERVICES
HEALTH
MENTAL HYGIENE-
MENTAL RETARDATION
REHABILITATION
WELFARE
YOUTH SERVICES AGENCY

February 14, 1977

MEMO #47

TO: SENATOR SCHOFIELD, CHAIRMAN
SENATE HEALTH AND WELFARE COMMITTEE

SENATOR BLAKEMORE, CHAIRMAN
SPECIAL SUB-COMMITTEE ON S.B. 194

FROM: FRANKLIN M. HOLZHAUER, CHIEF
PLANNING, EVALUATION AND PROGRAM
DEVELOPMENT

SUBJECT: AMENDMENTS TO S.B. 194

Following are the amendments made to S.B. 194 and the rationale for the changes. These are the changes agreed upon by the Sub-Committee. Mr. Frank Daykin is changing some of the words for "clarification".

AMENDMENTS

1. Page 2, Section 3, Subsection 2, Line 23

Following the words "less than one half", add the words "and no more than 60%."

RATIONALE

To assure there will be provider representation on the Council and to avoid an over-predominance of consumer representation.

AMENDMENTS

2. Page 4, Section 6, Subsection 2, Line 13

Following the word "\$150,000.00" delete the word "lesser" and insert the word "an".

RATIONALE

"lesser" was felt to be too restrictive. At a future time, the department may wish to set a higher baseline to adjust to inflationary factors.

AMENDMENTS

3. Line 17

Following the words "(c) The", delete the words "addition of new or the alteration or expansion of existing services" and insert the words "change in bed compliment."

RATIONALE

To clarify the language and to make paragraph (c) specific to a change in the number of existing beds, "change" includes "addition", "alteration" and "expansion".

AMENDMENTS

4. Lines 18 and 19

Following the words "care facility" delete the words "home health agency."

RATIONALE

To make paragraph (c) specific to a change in number of existing beds.

AMENDMENTS

5. Line 20

Following the words "addition or", delete the words "conversion of one" and insert the words "deletion of five."

RATIONALE

"deletion" includes "conversion" and/or elimination of beds.

AMENDMENTS

6. Line 21

Following the word "beds" delete the words "or services" and following the words "or the relocation of" delete the word "one" and insert the word "five."

RATIONALE

The number of beds was changed to "five" because "one" is too restrictive. Historically, by regulation, changes in the number of beds without approval have been allowed for up to four beds. This has allowed facilities some degree of latitude without compromising the intent of the law.

AMENDMENTS

7. Line 23

Following the words "health care facility," add the words "home health agency."

RATIONALE

Makes paragraph (d) specific to services. Includes "home health agency" which was deleted from paragraph (c).

AMENDMENTS

8. Line 24

Following the words "health maintenance organization" add the words "in excess of \$150,000.00 or such an amount as the department may specify in regulations adopted pursuant to this chapter."

RATIONALE

\$150,000.00 establishes a baseline for decision making, but does allow the department latitude to deal with other baselines if needed.

The amendments to Section 6 make it such that Sub-section 2, paragraph (c) refers specifically to the number and types of beds in a health care facility and paragraph (d) refers specifically to the types of services offered. These two concepts were separated rather than being combined as in the original bill.

AMENDMENTS

9. Page 5, Section 8, Subsection 3, Line 7

Following the word "make" add the word "existing."

RATIONALE

The word "existing" protects the providers from undue, over-excessive demands/requests for information that may impose financial burdens on the providers.

F.M.H.