

The meeting was called to order by Chairman Bennett at 5:10 p.m. with the following members and guests present:

PRESENT: Chairman Bennett  
Vice Chairman Chaney  
Mr. Bergevin  
Mrs. Ham  
Mr. Mello  
Mr. Nicholas  
Mr. Thompson

Please see attached guest register for guests present.

First item on the agenda was AB 185.

AB 185 - Makes administrative changes relating to medical laboratories.

Present to testify was Mr. Paul Cohen, Administrative Services Officer with the Division of Health. He explained that he was present at the meeting of this committee when they first discussed this measure and had submitted amendments for their review. He stated they are still interested in having those amendments adopted (see attached Exhibit I), and proceeded to go through the proposed amendments. The amendments are: On line 3 and 4, delete the words "a reasonable fee in the amount prescribed by the board" and insert "such fee as may be determined by regulations of the state board of health." On Line 5 they recommended deleting the word "board" and inserting "health division". Lines 6 through 16 they requested be deleted and a new section added which says, "Money received from applications for a license, registration or certification or renewal thereof must be forwarded to the state treasurer for deposit in the state general fund."

The majority of the discussion at the last meeting dealt with the items on page 2 as well as the Advisory Board and the questions raised on lines 19 and 20 where they requested that the Health Division State Lab be exempt from the law. They explained at that time that they license themselves. A question was raised about leaving that provision in the bill and they stated, at that time, that it could be, provided that was the intent of this legislative body. They did not want to be in violation of the law by licensing themselves and their own director, but if the committee deems it is necessary to have an outside party, then they want to know how we want to have that accomplished.

Lines 33 through 41 are clean-up language and they have no problems with leaving that as it presently exists. On page 1, regarding the advisory board, if the committee feels that the

advisory board should be retained, under NRS 652.100, then this bill must be referred to Ways and Means as there would be a fiscal note attached. That was what was presented originally and they still feel that is what they are supporting.

Dr. Paul Fugazzotto, Nevada Bureau of Labs and Research, confirmed his stand as the same as the last meeting and had no objections to the statements made by Mr. Cohen. He called attention to line 20 on page 2 stating he has already expressed himself on that but reminded the members that he feels that is a risky thing to leave in the law. Lines 21 through 28 should be returned as they will strengthen the law. He added there is a definite need for the laboratory advisory committee as there are at least two dozen items that should be addressed by the advisory committee which will then be taken up by the Board of Health.

There was no action taken on this bill.

AB 247 - Increases excise tax on liquor and directs use of increased revenues for treatment of alcoholism.

Chairman Bennett stated for the benefit of the audience that a meeting had been held that afternoon by members of the committee and a vote was taken at that time to recommend "do pass with re-referral to the Committee on Ways and Means."

AB 307 - Provides flexibility for meetings of state board of health.

Testifying in support of this measure was Phillis Otten, a technical writer with the State Health Division, who presented attached Exhibit II titled, "Statutory Meeting Requirements for Selected State Boards." She stated the purpose of this bill is to change the meeting requirements for the board. The present statutes require they meet specifically in July and January, and they would like that to be deleted and allow the board to maintain a more convenient and efficient schedule. Although the law requires the board to meet only twice a year, in actual practice the board meets regularly every six weeks, except in compliance with the law, the interval has to be reduced to five weeks or expanded to seven weeks. This changing of the schedule sometimes causes problems that could be avoided if these two months were not mandatory. The schedules contained in the Exhibit show that their request is consistent with what is required with comparable boards.

There was no action taken on this bill at this time.

SB 144 - Amends certain provisions relating to public health.

Mr. Dan Miles, Deputy Fiscal Analyst with the Legislative Counsel Bureau, explained that this bill is the result of a interim study by the legislature under the Sunset Review. Last session in AB 523 the legislature established a sunset review procedure

and one of the agencies designated for termination this coming July was the Bureau of Community Health Services within the Health Division.

In the interim period a subcommittee was appointed to review the need for and the efficiency of the Bureau of Community Health Services and SB 144 is a resulting bill from that review.

Mr. Miles distributed copies of Exhibit III which contains information on the review and the subsequent findings. This bill recreates the Bureau of Community Health Services and Mr. Miles advised that he is in support of the bill.

The Bureau of Community Health Services provides health care in the 15 rural counties and they provide a great deal of assistance to the residents thereof. He enumerated many of the programs and explained that all of those services would be terminated without the passage of this bill.

The bill does carry a fiscal note because AB 523 prohibited the budget director from including any funds within the Governor's budget for any of the programs within the Bureau of Community Health Services as a way of making certain the termination would take place if this session decides to make the termination. The fiscal note details what funds would have to be placed back into the budget upon recreation of these programs. That includes: \$843,000 for FY 1981-1982 and \$890,000 in FY 1982-1983; these amounts are from the General Fund. In addition, there are federal fund amounts that would be added. He explained that in the Executive Budget review, they were aware of this recommendation, and therefore, these funds have gone through all the review that any budget goes through.

He went over the bill with the committee in the event there were any questions.

Mr. Paul Cohen, Health Division, spoke in support of the bill and called attention to three areas: 1. The five programs involved (the emergency medical services, immunization, VD, TB and Community Health Program) go beyond just the rural counties. In many of their budgets they have funds under "aid to counties" to be allocated to both Clark and Washoe District Health Departments under inter-agency cooperative agreements (NRS 277); in addition, the EMS program has in it the funds that are used for contracting on a statewide basis for both the urban and rural emergency medical technician volunteers around the State of Nevada as well as the licensed ones in Clark and Washoe. Also it has the funds allocated for the state communication board which are flow-through funds to offset expenses incurred for the microwave system for the hardware for the EMS in the area.

He definitely urged the committee to pass this bill as it does directly affect five programs that are essential.

THIS PAGE IS MISSING FROM BOTH THE ORIGINAL  
MINUTES AND THE MICROFICHE.

Speaking next was Mr. Jim Begbie, representing Washoe County Health Department, who supports the bill. He explained that he has worked with Mrs. Chappell and is in complete agreement with the provisions contained in it.

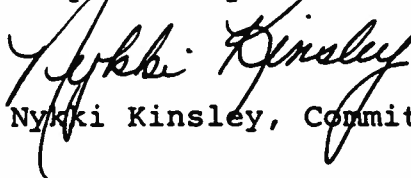
There was no action taken on this measure.

A bill request\* was submitted and explained by Dr. Lonnie Hammargren who was representing the Spinal Injury Program of Nevada. He stated that the big impetus right now is the acute treatment of the spinal cord injured. He submitted some proposed language that would address the problem on which he was speaking.

A motion was made by Mr. Mello, seconded by Mr. Nicholas for a committee introduction per the request of Dr. Hammargren. The motion carried unanimously.

There being no further business, the meeting was adjourned.

Respectfully submitted,



Nykki Kinsley, Committee Secretary

\* AB 655 (BDR 38-1956)



STATE OF NEVADA  
DEPARTMENT OF HUMAN RESOURCES  
DIVISION OF HEALTH  
OFFICE OF STATE HEALTH OFFICER  
505 EAST KING STREET  
CARSON CITY, NEVADA 89710

TELEPHONE (702) 885-4740

March 4, 1981

TO: Assembly Committee on Health & Welfare

FROM: State Health Division  
Paul Cohen, Administrative Services Officer

SUBJECT: Amendment to AB 185

The State Health Division proposes the following amendment to AB 185:

1. Lines 3 and 4: delete "a reasonable fee in the amount prescribed by the board"  
insert "such fee as may be determined by regulations of the state board of health."
2. Line 5: delete "board"  
insert "health division"
3. Lines 6 through 16: delete
4. Add new subsection: "Money received from applications for a license, registration or certification or renewal thereof must be forwarded to the state treasurer for deposit in the state general fund."

STATUTORY MEETING REQUIREMENTS FOR SELECTED STATE BOARDS

NRS	BOARD	REQUIREMENTS
381.002	Museums & History	quarterly
385.040	Education	four meetings annually
422.110	Welfare	once each quarter
561.095	Agriculture	once every three months
624.080	Contractors	as necessary
630.100	Medical Examiners	twice a year
631.170	Dental Examiners	twice a year
633.231	Osteopathic	twice annually
634A.080	Oriental Medicine	once a year
634.070	Chiropractic	2nd Monday of September; 2nd Monday of March
636.095	Optometry	twice annually
637.050	Opticians	once annually
637A.040	Hearing Aid Specialists	on call of the chairman
637B.160	Audiologist	annually
638.060	Veterinarian	annually
639.050	Pharmacy	once every six months

## VI. BUREAU OF COMMUNITY HEALTH SERVICES

A.B. 523 terminates the Bureau of Community Health Services on July 1, 1981. In addition, the State Budget Director is prohibited from including any funds in the Executive Budget for the 1981-83 biennium for Community Health Services or its programs.

The Bureau of Community Health Services provides services primarily in the 15 rural counties of the state which include sexually transmitted disease control, tuberculosis control, immunization programs, public health nursing services, physical therapy services to underserved areas, and licensing and certification of ambulance services, ambulance attendants and emergency medical service personnel. The nursing staff provides many health services to numerous clientele groups in all rural counties of the state. The Clark and Washoe County Health Districts provide most of these same services to their own areas and are partly supported by state general funds distributed on a per capita basis.

The Legislative Commission's Subcommittee on Sunset Review requested that the Fiscal Analysis Division of the Legislative Counsel Bureau prepare a report reviewing the activities and programs of the Bureau of Community Health Services. The Fiscal Analysis Division report dealt with only those programs of the Bureau and did not address other programs or functions of the Health Division nor did it include any evaluations of the effectiveness of the medical services and procedures provided by the Bureau. The report used the review criteria of A.B. 523 as a basis for evaluation although those criteria do not specifically apply to service programs. The staff's findings on the specific review criteria contained in A.B. 523 can be found in Appendix D, pages 26 to 35. The subcommittee accepts and incorporates these findings on the review criteria as a part of its report. Many of the recommendations of the subcommittee originated with the staff report. For an expanded discussion of each of those findings and recommendations, a reference is given to the appropriate report which is included in the appendices of this report (Appendix D). In addition, the subcommittee reviewed several suggestions of the Health Division and included two of them in this report. The following are the recommendations of the subcommittee.



## FINDINGS AND RECOMMENDATIONS

Recommendation 1: The Legislature should repeal provisions of Chapter 688, 1979 (A.B. 523) that terminate the Bureau of Community Health Services of the Health Division and prohibit the State Budget Director from including funds for Bureau programs in the Executive Budget in order to continue those services for citizens of the state.

The subcommittee concluded after review of the report of the Fiscal Analysis Division (see Appendix D) and hearing testimony of the Bureau staff, Health Division and the public, that the termination of the programs and services of the Bureau could adversely affect the health and welfare of the general public and create the potential for medical crises. The subcommittee found that the services of the Bureau are primarily directed toward prevention of medical problems and that the public depends on programs of communicable disease control and immunizations and the licensure and certification of ambulance attendants and emergency medical technicians to protect it from epidemic diseases and incompetent emergency care. The services of the public health nurse and physical therapist are provided to rural localities and rural school districts where other medical services are not always available or adequate and the subcommittee believes elimination of these services could severely impact health care availability in these areas. The subcommittee did note that in some rural areas the services of the public health nurse may have expanded beyond the normal scope of identifiable bureau programs creating potential interference with the practices of private care providers.

The subcommittee found that the activities of the Bureau of Community Health Services in delivering services, generally do act to protect the public health and help prevent medical crises. The subcommittee found several areas of Bureau activities, however, that require legislative or administrative attention in order to promote the efficient use of Bureau resources. These findings and recommendations are included here in the balance of this section.

Recommendation 2: The Legislature should adopt specific statutory language for NRS 450B (Emergency Medical Services) establishing public policy and the purpose for regulation of emergency medical services (Appendix H, BDR 40-118).

NRS 450B governs the licensing of ambulance attendants, the permitting of ambulance services and certification of emergency medical technicians. The statute does not specify the

purpose of regulation nor does it set forth legislative policy regarding the goals or objectives of regulating emergency services. The subcommittee believes that the lack of specific purposes and goals impedes the evaluation of the effectiveness of programs and the law itself by the public and the legislative and executive branches of government. A statutory purpose would set the standard against which Board of Health regulations and activities of the Bureau could be measured and evaluated to insure that legislative intent is met (see Appendix D, page 11).

Recommendation 3: The Division should continue its investigation into fees for services performed for all types of Bureau services.

The Fiscal Analysis Division reported to the subcommittee that the Division had been investigating the possibility of creating a fee schedule for some of their programs and services. The subcommittee noted that Clark and Washoe Health Districts charged fees for certain services and that the Division had established fees and eligibility criteria for the family planning program (see Appendix D, page 13).

The subcommittee feels that in certain instances, fees for services may be appropriate provided program clientele do not become discouraged or are not prevented from receiving services. The subcommittee suggests, therefore, that the Division expand its evaluation to all Bureau services. The Division has indicated it will complete the evaluation and report their findings to the 1981 Legislature.

Recommendation 4: The Legislature should amend NRS 439 (Administration of Public Health) to provide authority for the State Board of Health to establish fees for programs or services of the Division (Appendix H, BDR 40-118).

In addition to recommending that fees be created where appropriate, the subcommittee feels that authority to establish such fees should be given to the State Board of Health. The subcommittee believes that the Board of Health, with input from the Health Division through the public hearing process required in the Administrative Procedures Act, is in an informed position to determine fee requirements and eligibility criteria. The Board of Health is also better prepared to deal with adjustments in fees that may be required as a result of changed conditions or clientele (see Appendix D, page 13).

Recommendation 5: The Health Division should monitor the "aid to counties" program for Clark and Washoe health districts and report to the 1981 Legislature the actual uses of the funds, whether additional federal funds were matched and if the funds caused local governments to exceed their spending limitations or to reduce property tax rates.

Since fiscal year 1973-74, the state has provided general fund aid to the Clark and Washoe Health Districts in order to increase the district's ability to attract and match additional federal funds. These funds are distributed to the districts on a per capita basis by the Health Division. In 1979, the Legislature agreed to substantially increase these grants provided the additional funds didn't cause the local government to exceed its spending limitation or cause property tax relief beyond that granted by the Legislature (see Appendix D, page 14).

The subcommittee found that although the Health Division distributed these funds to the health districts, no mechanism or procedures existed to determine the effects of the state grants on local spending limits and tax rates or whether the funds were achieving their stated purpose of matching additional federal funds. The subcommittee, therefore, believes the Division should monitor these funds and report routinely to each legislature through the budget process. The Division has indicated it will obtain all required information and prepare a report for the 1981 Legislature.

Recommendation 6: The Division should reimburse the general fund for the cost of the physical therapists' services for health facility certification from federal funds for both the current biennium and in the future.

The Fiscal Analysis Division reported that the physical therapist often performed work for the Bureau of Health Facilities on federally funded health facility certifications, but that reimbursement from federal funds was not always made (see Appendix D, page 19). The subcommittee feels that the Division should attempt to maximize federal reimbursements for Bureau personnel when they work on federal projects or programs. The Division has indicated they will eliminate this problem by proposing, through the budgetary process, that the physical therapist position be transferred to the Bureau of Health Facilities where the position will become approximately 65 percent federally funded.

Recommendation 7: The Legislature should amend NRS 441.240 to place grant authority with the Department of Human Resources and Health Division rather than the Board of Health (Appendix H, BDR 40-118).

The Fiscal Analysis Division reported that NRS 441.240 still places authority to accept federal grants for venereal disease control with the Board of Health. The Department of Human Resources and Health Division have actually acted in this capacity in recent years and do so for all other federal aid programs. The subcommittee feels this is an administrative function and should be a responsibility of the Department and Division rather than the Board of Health whose primary purpose is to set health policies and promulgate regulations (see Appendix D, page 21).

Recommendation 8: The Bureau should execute formal user agreements with each local agency or ambulance service to guarantee responsible maintenance of all locally assigned equipment purchased under the Fleischmann Foundation Grant for emergency communications.

The state has purchased, with Fleischmann Foundation funds, components to implement a statewide radio system for emergency vehicles and hospital emergency rooms. Much of the equipment will be in public and private ambulances and hospitals throughout the state. The Bureau has obtained written commitments from these users to maintain the equipment. The subcommittee feels that this commitment should be affirmed in formal user agreements to insure maintenance responsibility (see Appendix D, page 24).

The subcommittee also feels that the cost of maintaining the system at the mountaintop state microwave sites should be borne by the state. The Division testified that the state had agreed in principle to this maintenance responsibility when it negotiated the grant with the Fleischmann Foundation.

Recommendation 9: The Bureau should consider changing its standard contract with the Community Colleges from lump sum to a payment of tuition for all noncredit enrollees up to a maximum dollar amount in order to insure maximum effectiveness of limited training dollars.

The Bureau currently contracts with the various Community Colleges to present emergency medical education programs. The Bureau pays a lump sum amount for each class and the Community College conducts the course free of charge for all enrollees unless the individual desires credit, in which

case the college charges tuition. The lump sum payment method offers no guarantee that the maximum number of students are being served from the Bureau's funds. The subcommittee, therefore, has suggested changing the method of payment to a per student basis and the Bureau has indicated this will be accomplished for the 1980-81 fiscal year (see Appendix D, page 24).

Recommendation 10: The Bureau should create a mechanical inspection checklist form to be completed every six months by a qualified mechanic for each ambulance licensed by the state.

Current Board of Health regulations require a statement from each ambulance service operator in the state every six months that each licensed ambulance is in good mechanical condition. The Fiscal Analysis Division report recommended the Bureau supplement this inspection by requiring that staff field representatives perform a minimal mechanical inspection when they inspect the emergency medical equipment required to be on board each ambulance. The Bureau proposed an alternate solution to insure proper mechanical condition by requiring the qualified mechanic who inspects each ambulance pursuant to existing regulation, to complete a formal inspection checklist to be filed and maintained by the Bureau. The Bureau would then have documentation that each ambulance serving the public in Nevada met minimum mechanical standards (see Appendix D, page 25).

The subcommittee agreed with the alternative proposal by the Bureau and the Bureau indicated it would develop such a checklist form.

Date: March 26, 1981

PLEASE PRINT YOUR NAME	PLEASE PRINT WHO YOU REPRESENT	I WISH TO SPEAK		
		FOR	AGAINST	BILL NO.
Paul Fugazotto	Mr. Parnell ... Research	?	?	SB 144
DAN MILES	Legislative Council Bureau	—	—	SB 144
George Reynolds	Health Division			SB 144
Paul Cohen	Health Division	✓	AB 307	AB 307
Reba Shoykell	Health Division	✓		SB 147
Phyllis Otten	Health Division	✓		AB 307
LONNIE HAMMARLEN	SPIRIT CONTROL INTERPRETING	✓		NEW BILL
Kirby Ryan	SPIRIT CONTROL INTERPRETING			NEW BILL
DAVID HAGEN	U.S. BREWERS ASSN		✓	AB 247
SIKE BERT				
PAT GOTHBERG	NEVADA NURSES ASSN	✓		SB 147
Ann M. Hill	New Nurses	✓		SB 144

ASSEMBLY

AGENDA FOR COMMITTEE ON...Health...and...Welfare.....

Date...Thurs...Mar...26...1981...Time...5:00...pm...Room...316.....

Bills or Resolutions  
to be considered

Subject

Counsel  
requested\*

- | Bills or Resolutions<br>to be considered | Subject   | Counsel<br>requested* |
|--|---|-----------------------|
| A.B. 185-                                | Makes administrative changes relating to medical laboratories.                                    |                       |
| A.B. 247-                                | Increases excise tax on liquor and directs use of increased revenues for treatment of alcoholism. |                       |
| A.B. 307-                                | Provides flexibility for meetings of state board of health.                                       |                       |
| S.B. 144 -                               | Amends certain provisions relating to public health.  |                       |
| S.B. 147 -                               | Provides for intermediate emergency medical technicians.  |                       |