

Joe Lombardo
Governor

Richard Whitley, MS
Director



**DEPARTMENT OF
HEALTH AND HUMAN SERVICES**
PATIENT PROTECTION COMMISSION
Helping People. It's who we are and what we do.



Joseph Filippi
Executive Director

Dr. Ikram Khan
Commission
Chairman

MEETING MINUTES
NEVADA PATIENT PROTECTION COMMISSION (PPC)
MAY 15, 2024

The Nevada Patient Protection Commission (PPC) held a public meeting pursuant to NRS 241.020(3)(a) online and by phone on Wednesday, May 15, 2024, beginning at 9:00 AM. The agenda and meeting materials are available online at <https://ppc.nv.gov/Meetings/2024/PPC2024/>.

- 1. Call to order: Roll call**
By: Marlyn Kirkpatrick, Vice Chair

The meeting was called to order at 9:00am by Vice Chair Marilyn Kirkpatrick. Executive Director Joseph Filippi proceeded with roll call, and it was determined that a quorum of the PPC was present.

Commission Members Present

Jalyn Behunin
Dr. Bayo Curry-Winchell
Walter Davis
Flo Kahn
Marilyn Kirkpatrick
Dr. Andria Peterson
Bethany Sexton
Wendy Simons

Commission Members Absent

Dr Ikram Khan - Excused

Advisory Commission Members Present

Scott Kipper, Insurance Commissioner; Richard Whitley, Director, Nevada Department of Health and Human Services (DHHS); Celestena Glover, Executive Officer, Public Employees Benefits Program (PEBP); Russell Cook, Executive Director, Silver State Health Insurance Exchange

Staff Present

Joseph Filippi, Executive Director, Nevada Patient Protection (PPC)

Others Present

Adam Plain, Insurance Regulation Liaison, DOI; Thomas Sargent, Insurance Actuarial Analyst II, DOI; Glenn Shippey, Chief Insurance Examiner, DOI; Jack Childress, Insurance Actuarial Analyst III, DOI; Reida Wagner,

Actuarial Analyst II, DOI; Autumn Blattman, Regional Coordinator, ADSD; Dena Schmidt, ADSD Administrator, ADSD; Carrie Embree, Governor's Consumer Health Advocate, ADSD; Dawn Yohey, Clinical Program Planner III, DHHS; Alexia Benshoof, Health Bureau Chief, DHHS; Michelle Shuman, Administrative Assistant III, DHHS; Maria Tello Magana, Executive Assistant, DHHS; Shannon Jenkins, Administration Assistant II, DHHS; Shannon Litz, Deputy Program Director, DHHS; Sebastian Iza, Family Service Specialist I, DHHS; Gabriel D. Lither, Senior Deputy Attorney General, HHS; Janel Davis, Chief Operations Officer, SSHIE; Kareen Filippi, Management Analyst III, WIC; Medeline Burak, Legislative Director; Megan Comlossy, Director of Public Affairs and Policy, School of Public Health, University of Nevada, Reno (UNR) ; Nathan Orme, Public Information Officer, DPBH; Sandie Ruybalid, Deputy Administrator, DHCFF; Stacie Weeks, Administrator; DHCFF; Madison Lopey, Management Analyst IV, DHCFF; Thomas Sargent; Vance Farrow, Healthcare Industry Specialist, GOED; Andrea Gregg, CEO, High Sierra Area Health Education Center (AHEC); Colleen Camenisch, Executive Director, Nevada Physician Wellness Coalition; Dr. Sara Hunt, Executive Director, BeHERE Nevada, University of Nevada, Las Vegas (UNLV); Dr. Michelle Paul, Executive Director, UNLV PRACTICE, University of Nevada, Las Vegas (UNLV); Alexandria Cannito; Annette Logan; Areli Alarcon; Ashley Kennedy; Amy Shogren; Brian Evans; Cathy Dinauer, Executive Director, State Board of Nursing; Cody Hoskins; Cassidy Wilson; Cynthina Alejandre; Dan Musgrove; DuAne Young; Eileen Colen; Elyse Monroy-Marsala; Elissa Secrist; Gabriele McGregor; Gina Stroughter; Helen Foley; Jacqueline L. Nguyen; Jason Flynn; Jerianne Gerloff; Jesse Wadhams; Joanna Jacob; Dr. John Packham; Kimberly Arguello; Kristine Absher; Lea Case; Lea Tauchen; Lisa Scurry; Luiza Benisano; Mari Nakashima Nielsen; Marissa Brown; Melodie Osborn; Maya Holmes; Nancy J Bowen; Patrick Kelly; Russell Rowe; Samantha Barnes; Sarah Watkins; Shannon Groppenbacher; Shelly Capurro; Steve Messinger; Stephanie Woodard; Tom Clark; Tray Abney; Allison Genco; Carissa Pearce; Ferrari Reeder; Jake Matthews; Jalyn Behunin; Jessica Kinstler; Jimmy Lau; Mike Hillerby; Morgan Biaselli; Natalie Gautreaux; Paul Klein; Sam Anastassatos; Stacie Sasso; Tori Supple

2. Opening Remarks and Member Introductions

Marilyn Kirkpatrick, Vice Chair, thanked everyone for their presence and emphasized the importance of everyone serving on the board and reminded the community that if you are in crisis or know someone in crisis, you can dial 988 for assistance. Vice Chair Kirkpatrick requested members to introduce themselves and afterward, opened the meeting up to public comment.

3. Public Comment *(No action may be taken upon a matter raised under public comment period unless the matter itself has been specifically included on an agenda as an action item).*

Dan Musgrove, representing Nathan Adelson Hospice of Clark County, stated that there has been a large influx of in-home hospice care in Clark County from California's moratorium due to increased fraud and abuse taking place. Those operators have now come into the states of Nevada, Arizona, and Texas. The in-home hospice operators are signing up families and not providing the services they expect, which has led to an increase in transfers that Nathan Adelson Hospice typically sees from four a year to about two to four transfers per week. A moratorium of the governor has been requested and a letter can be provided for the record and could be proposed as a future agenda item for further discussion.

Carissa Pearce, Health Policy Manager of Children's Advocacy Alliance, stated that she was present and is in support of the work in item nine that is presented by Dr. Michelle Paul and Dr. Sarah Hunt who have been bolster degree programs and post degree training programs. She continued to state that there are many amazing programs in Nevada though they are in need of more investment to recruit students at Bachelor's, Master's and Doctoral levels in order to improve our ability to deliver care by growing our own providers and strategizing retention of practitioners in Nevada. Nevada Medicaid is currently working on improving the licensure practice

for practice, but there are other strategies to be reviewed such as practice scope for physician’s assistants (PA), state level leadership and centralizing information through a data hub related to PAs in Nevada. A resource has been submitted to explain further how scope of practice has expanded in other states and how Nevada should consider modeling the scope of practice. Written comment was also submitted with further information regarding state level leadership and centralized information.

Andrea Gregg, CEO of High Sierra Area Health Education Center (AHEC), provided written testimony detailing the work and positive impact that their programs are making to meet Nevada’s healthcare workforce needs. AHEC is working on community needs by forming academic and community partnerships that aim to recruit, train and develop our healthcare workforce, starting as early as fifth grade. AHEC is also an approved community health worker training provider, currently serving as a talent acquisition partner. Ms. Gregg encouraged others to view Nevada AHEC not just as a program option, but also a strong partner in shaping the future of health care workforce development.

4. Presentation on the Commission's Purpose, Responsibilities and Duties
By: Joseph Filippi, Executive Director, Patient Protection Commission

Joseph Filippi shared a presentation on the Purpose, Responsibilities and Duties of the Patient Protection Commission (PPC) which is available on PPC meeting webpage or by clicking [here](#). The commission is comprised of twelve voting members appointed by the Governor from across the health care spectrum and includes advocates, providers, and industry professionals dedicated to improving health care in Nevada as well as four non-voting members. Currently, there are three vacancies on the Commission. The Commission reviews issues related to the quality, accessibility, and affordability of health care in Nevada and may request legislative changes through Bill Draft Requests. The Commission was recently tasked by the Governor, through Executive order 2024-002, with providing recommendations to address Nevada’s health care workforce shortages.

5. Presentation on Nevada Open Meeting Laws
By: Gabe Lither, Deputy Attorney General, Nevada Attorney General’s Office

Gabe Lither shared a presentation of an overview of Nevada’s Open Meeting Law (OML) which is available on the PPC meeting webpage or by clicking [here](#). The presentation defined OML and highlighted main procedures in order to comply with OML such as meeting notices, agendas, minutes and public comment.

6. Presentation on Health Care Workforce Challenges Facing Nevada and Policy Considerations
By: Dr. John Packham, Nevada Health Workforce Research Center, Office of Statewide Initiatives, University of Nevada, Reno (UNR)

Dr. John Packham shared a presentation on Health Care Workforce Challenges Facing Nevada and Policy Considerations. The presentation is available on the PPC meeting webpage or by clicking [here](#). Dr. Packham provided an overview of Nevada’s health workforce demand. Due to predicted and current population growth, the two major drivers of workforce demand are demographic and economic. Dr. Packham’s presentation elaborated on general and major trends in the health workforce supply. An estimate was made that seven to ten Nevadans reside in a primary care health provider shortage area (HPSA), and seven out of our state’s fourteen rural and frontier countries are single primary care HPSAs, where any loss in the health care workforce has an immediate impact. Dr. Packham recommended policy measures to consider for the upcoming 2025 Legislative

Session. These recommendations included increasing the number and diversity of health programs graduate by increasing capacity of healthcare education programs, stretch the existing health care workforce without having to add additional workers, and take efforts to prepare additional individuals for licensure.

Scott Kipper, Insurance Commissioner stated the information presented by Dr. Packham will be shared with the Network Adequacy Advisory Committee (NAAC), who reviews and sets network adequacy standards in Nevada and is managed by the Nevada Division of Insurance. Mr. Kipper also stated, for further consideration, that AB 398 passed in 2023, which changed the way liability insurance would be created, drafted, and implementing, as well as address the issues around medical malpractice insurance that the division believes is significant and may be concerning for physicians and/or other healthcare professionals.

Commissioner Wendy Simons thanked Dr. Packham for his presentation and its clarity on topic areas that action can be taken on. Commissioner Simons stated that this was an opportunity to take some consideration on how the regulatory process can impact and create barriers for the continual education training and cited training requirement for our certified nursing assistants (CNAs) should be a future discussion topic with the PPC.

Commissioner Bethany Sexton inquired if the workforce data presented, accounted for licensed clinicians that are practicing within the state through telehealth but may reside elsewhere. Dr. Packham indicated that they are not accounted for but need to be. Commissioner Sexton also asked if there was any data or statistics around any program prior to college education such as K-12. Dr. Packham indicated that this would be covered by the upcoming presentations.

Commissioner Floreine Kahn inquired about what the greatest hinderance to the expansion of GME programs would be. Dr Packham responded there are multiple obstacles, but funding is the primary hinderance.

Dr. Bayo Curry-Winchell thanked Dr Packham for his presentation and asked if there was any data in the workforce for Northern Nevada regarding representation of demographics, specifically for the graduating medical students. Dr Packham stated that there is not data on the existing workforce but can provide to Joseph and the PPC some data on of the last ten years of graduates in terms of sex or gender and self-identified race and ethnicity. Dr. Curry-Winchell emphasized the importance of representation in the workforce as a reason for students to wish to remain and join the Nevada workforce.

Vice Chair Marilyn Kirkpatrick inquired as to what some of the best practices may be with apprenticeships as well as the possibility of subsidizing a person to go to school, in order to address the workforce shortages. Commissioner Kirkpatrick continued to inquire about the possibility of apprenticeships in the state since there are always positions open at the state level and the local level. Dr. Packham provided an example of the nurse apprenticeship program where it is premised on the idea that students can earn a living wage while pursuing education which could lead to remaining in that facility or at least the state.

7. Presentation on Hospital-Based Workforce Challenges and Policy Considerations

By: Patrick Kelly, CEO, Nevada Hospital Association

Blayne Osborn, President, Nevada Rural Hospital Partners

Blayne Osborn and Patrick Kelly shared a presentation regarding hospital-based workforce challenges and provided some policy solutions for consideration. The presentation is available on the PPC meeting webpage or by clicking [here](#). Health care facts regarding general health care, physicians, nurses, and specialist services were highlighted in the presentation along with ideas to help address hospital workforce needs. This included best practices that exist in other states. There is a high need to increase the in-state graduate medical education (GME) residency and fellowship programs. One innovative idea to increase these programs, that didn't pass last

legislative session, was Senate Bill (SB) 369. Sb 369 (2023) suggested to offer tax credits against the modified business tax for employers who are willing to make donations to these types of residency and fellowship programs. Another idea to consider is to incentivize students who attend medical school in Nevada to receive their GME. In 2019, the legislature, through Assembly Bill (AB) 122 completed “A Feasibility Study of Combined Licenses for Assisted Living Facilities, Adult Day, and Respite Care Services in Non-Urban Nevada.” The study is linked [here](#) and was encouraged to be read by the Commission. Ideas to consider when it comes to Nevada nursing schools is to increase the number of slots that are available, increase class size, and allow experienced nurses to teach or proctor students. A reoccurring idea, which has been discussed during several Legislative Sessions is for Nevada to enact the Nurse Licensure Compact (NLC). Currently, 41 states have joined the NLC, though Nevada is not one of them despite it being very beneficial. An additional idea to consider is implementing some bridge programs to increase registered nurses (RNs) such as military medic or paramedic to an RN. In Alabama, a law was passed and signed into law to start a tuition free public high school focusing on health careers that the Commission may wish to monitor.

Commissioner Andria Peterson requested elaboration on the concerns with the Nurse Licensure Compact. Mr. Osborn stated that a big opposition revolves around the nursing unions in the State. Mr. Osborn mentioned that there were ideas and compromises proposed last legislative session to address those. These included ensuring that any nurses coming into the state under the Compact will still have the opportunity to sit with those union representatives to learn about the benefits of union representation. This could ensure that facilities aren’t able to get around some of the collective bargaining of those types of concerns when utilizing compact nurses. Mr. Kelly explained that a lot of states have nursing’s unions that are part of the Compact and many think this Compact is a union busting bill, however it is not. Mr. Kelly stated there is always worry that nurses would be brought in through the Compact during a strike, but under federal law, the union must give ten days’ notice of the strike which allows plenty of time to bring them in, whether they are under the compact or not.

Commissioner Walter Davis wanted further information in regards to what licensing board licensed practical nurses (LPNs) fall under since many recruiting and hiring challenges were stemming from their board situation. Mr. Osborn believes that the authority over LPNs would be from the State Board of Nursing. Commissioner Davis stated he was interested in hiring LPNs in practices and was under the impression that it is difficult to do so due to a conflict and wanted to obtain further understanding in creating a LPN program within Nevada. Mr. Osborn referred Mr. Davis to Cathy Dinauer, Executive Director of the State Board of Nursing. Vice Chair Kirkpatrick ensured that a correct contact would be provided to Commissioner Davis in order to connect with the Board of Nursing.

Commissioner Sexton asked if virtual nursing would be a viable option, specifically in the rural communities, in terms of broadband and other technology infrastructure or if additional support would be needed. Mr. Osborn stated that most communities, especially the hospitals and schools, have appropriate bandwidth for the needed devices, but it is something to consider and be tested.

Commissioner Peterson questioned if there were any national organizations that endorsed virtual nursing as a standard of care to ensure the meeting of standards of care. Mr. Kelly expressed that national organizations are very involved such as Dignity Health, and HCA is also looking at other national companies.

Commissioner Jalyn Behunin clarified that Southern Nevada doesn’t have virtual nursing yet but has virtual sitters that are safety sitters. Dignity Health does have a program and partners in Arizona are rolling out virtual nursing programs.

Vice Chair Marilyn Kirkpatrick requested to skip to agenda item 10 due to time constraints.

8. Presentation on the Health Care Workforce Pipeline Development Workgroup and the State Health Improvement Plan Policy Recommendations
By: Megan Comlossy, Director of Public Affairs and Policy, School of Public Health, University of Nevada, Reno (UNR)

Megan Comlossy shared a presentation on Nevada Health Care Workforce and Pipeline Development Workgroup and the 2023-2028 Silver State Health Improvement Plan (SSHIP) that is available on the PPC meeting webpage or by clicking [here](#). The Workgroup was funded by the Division of Public and Behavioral Health and in collaboration with Andrea Gregg and High Sierra AHEC aims to enhance, expand, and diversify the public health, behavioral health, and primary care workforces in Nevada. Objectives driving this mission include identifying and mapping workforce pipeline initiatives in education and the current workforce, raising awareness, fostering partnerships, and optimizing resources statewide for better health outcomes, and developing and executing workforce pipeline plans for public health, behavioral health, and primary care. Unique to this pipeline is the collaboration across sectors to dismantle silos and foster information sharing. Additionally, the Workgroup focused on the entire workforce pipeline, from vocational training to higher education. While the Workgroup no longer meets due to funding constraints, its initiatives continue through subcommittees and partner organizations. Ms. Comlossy also discussed Nevada's inaugural state health improvement plan, built upon the 2022 health needs assessment. This plan sets priorities, goals, and objectives to guide health care progress over the next five years, providing a roadmap for stakeholders to collectively enhance the health of Nevadans. Future steps include developing action plans for each objective, tracking implementation, and annually reviewing and revising the plan through 2028.

Commissioner Sexton inquired about the most impactful action the Commission could take from all the discussed workforce pipeline domains. Ms. Comlossy highlighted the behavioral health workforce, emphasizing access to care as the primary constraint. She also stressed that funding is a significant but limited resource, citing challenges in obtaining additional funding due to the tax structure in Nevada.

Commissioner Davis emphasized the importance of consolidating all workforce resources into one accessible area as a goal for the Commission, facilitating collaboration and progress. Clarifying the available resources will aid in this endeavor, Ms. Comlossy reiterated the significance of the workforce workgroup as a means to achieve this goal. She recommended that the PPC play a role in ensuring all information and resources are centralized. However, currently, resources are divided among subcommittees due to funding constraints. Therefore, determining how to create a data hub that aggregates all information is the optimal course of action for now.

Commissioner Kahn asked if there are other funding mechanisms through the private sector that have previously enabled programs to access additional federal or state money. Ms. Comlossy affirmed and provided an example with Medicaid, emphasizing the importance of optimizing federal funding utilization. She also mentioned that exploring the private sector and philanthropic funding are viable options.

Commissioner Peterson inquired whether Ms. Comlossy is aware of any plans to allocate Medicaid's Managed Care Profit Sharing towards workforce development in the next contract. Ms. Comlossy acknowledged that while she didn't have the answer, such inquiries are pertinent. Mr. Filippi concluded by expressing his intent to invite representatives from the Nevada Medicaid program to discuss potential initiatives in upcoming meetings.

9. Presentation on Behavioral Health Care Workforce Development Initiatives and Policy Considerations
By: Dr. Sara Hunt, Executive Director, BeHERE Nevada, University of Nevada, Las Vegas (UNLV) and Dr. Michelle Paul, Executive Director, UNLV PRACTICE, University of Nevada, Las Vegas (UNLV)

Dr. Sara Hunt and Dr. Michelle Paul shared a presentation on Behavioral Health Care Workforce Development Initiatives and Policy Considerations which is available on the PPC webpage or by clicking [here](#). Dr. Hunt began by discussing the Assembly Bill (AB) 37 from the 2023 Legislative Session, which authorizes the establishment of the Behavioral Health Workforce Development Center of Nevada within the Nevada System of Higher Education (NSHE). The bill aims to introduce mental and behavioral health career pathways in K-12 education, expand higher education training, and strengthen the transition to Nevada licensure post-graduation. During the fall and winter of 2023, efforts included hiring personnel, developing outreach strategies such as launching the BeHERE website, and meeting with NSHE institutions. Future priorities include continuing K-12 outreach, collaborating with NSHE programs, collecting mental health workforce data, pursuing federal grants, and submitting an annual legislative report in June 2024. Dr. Hunt stressed the importance of retention initiatives, business technical assistance, and ongoing funding discussions with NSHE for the upcoming fiscal year. The presentation was then handed off to Dr. Paul, who explained the UNLV PRACTICE acronym, representing Partnership, Research, Assessment, Counseling, Therapy, and Innovative Clinical Education, which provides quality mental health care and clinical training for students. Established in 2012, UNLV PRACTICE addresses major challenges in the mental health crisis. Dr. Paul outlined the organization's goals, including center of excellence, community care excellence, research growth, trainee workforce expansion, policy advocacy, and financial sustainability. She emphasized the importance of training more mental health providers in her conclusion about mental health policy considerations. Dr. Paul expressed her willingness to offer tours to showcase their work, processes, and what additional support is required for the State.

No questions were asked regarding presentation.

10. For Possible Action: Discuss the Governor's Executive Order 2024-002 and Identify Topics for Future Meetings

By: Joseph Filippi, Executive Director, Patient Protection Commission

Vice Chair Kirkpatrick asked the Commission to email future meeting topics for consideration to Dr. Ikram Khan and Joseph Filippi to ensure that they are added on future agendas along with a contact person if available.

11. For Possible Action: Discussion and Approval of Amended Commission Bylaws

By: Marilyn Kirkpatrick, Vice Chair

Vice Chair Kirkpatrick confirmed that this item requires a quorum and a vote. Executive Director Filippi explained that this an opportunity to discuss any questions or issues with the bylaws of the PPC and vote on the approval of those revised bylaws. Vice Chair Kirkpatrick stated she didn't have anything to adjust and asked if anyone on the Commission had any concerns or questions about the bylaws. No other members had concerns or questions.

Vice Chair Kirkpatrick motioned to approve the bylaws; Commissioner Sexton seconded the motion. None opposed. Motion passed unanimously.

12. For Possible Action: Discussion and Approval of Future 2024 Meetings Dates

By: Marilyn Kirkpatrick, Vice Chair

Executive Director Filippi stated that the next meeting is tentatively scheduled for June 21, 2024. This date appears to work for a majority of the Commission members, but it can be adjusted if needed to allow for more

availability. It was determined to plan for future meetings dates offline.

Vice Chair Kirkpatrick had to leave the meeting and designated Mr. Filippi to continue to agenda items 8, 9 and public comment.

Mr. Filippi reconfirmed that a majority of the members were still present and proceeded to agenda item 8.

13. Public Comment *(No action may be taken upon a matter raised under public comment period unless the matter itself has been specifically included on an agenda as an action item).*

Colleen Camenisch, the Executive Director of the Nevada Physician Wellness Coalition, thanked each presenter for their presentations. She recommended exploring health workforce well-being, noting that physicians experience a higher rate of suicide compared to other health care professions. In 2022, one in five physicians planned to leave their current practice, and one in three planned to reduce their work hours. While emphasizing the importance of creating a workforce pipeline, Ms. Camenisch suggested that the commission focus more on retention and explore the Lorna Breen Foundation, which is dedicated to protecting the well-being of physicians and healthcare workers.

14. Adjournment
By: Joseph Filippi, Executive Director, Patient Protection Commission

Executive Director Filippi thanked the PPC and those who attended the meeting and adjourned the meeting.

Meeting adjourned at 11:57 PM.