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TRANSCRIPT MINUTES

MEETING OF THE
STATE OF NEVADA
BOARD FOR THE ADMINISTRATION OF THE
SUBSEQUENT INJURY ACCOUNT FOR
SELF-INSURED EMPLOYERS

Wednesday, December 9, 2020
10:00 a.m.

3360 West Sahara Avenue, Suite 250
Las Vegas, Nevada, 89102
in the Executive Video Conference Room

(Due to concerns with COVID-19,
the meeting was conducted via telephone.)

A P P E A R A N C E S

For the Board:

Cecilia Meyer (phone)
Board Chair, Board Member

Suhair Sayegh (phone)
Board Member

Sharolyn Wilson (phone)
Board Member

Donald Bordelove, Esq. (phone)
Deputy Attorney General
Board Counsel

For the Division of Industrial Relations:

Christopher A. Eccles, Esq. (phone)
Counsel for DIR

For the Administrator of the DIR:

Vanessa Skrinjaric (Las Vegas)
Compliance Audit Investigator
Division of Industrial Relations
Workers' Compensation Section

Also Present:

Kasey McCourtney (phone)
CCMSI

Kim Price, Esq. (phone)
Lewis Brisbois Bisgaard & Smith

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1 WEDNESDAY, DECEMBER 9, 2020, 10:00 A.M.

2 -oOo-

3 BOARD MEMBER MEYER: All right. So we will
4 call this meeting to order. And today is Wednesday,
5 December 9th, and this is the meeting of the Board of
6 Administration for the Subsequent Injury Account for
7 Self-Insured Employers.

8 We're going to have roll call. Vanessa, would
9 you do roll call for us?

10 MS. SKRINJARIC: Sure. So this is Vanessa
11 Skrinjaric on behalf of the Division of Industrial
12 Relations.

13 Cecilia Meyer?

14 BOARD MEMBER MEYER: Here.

15 MS. SKRINJARIC: Suhair Sayegh?

16 BOARD MEMBER SAYEGH: Here.

17 MS. SKRINJARIC: Sharolyn Wilson?

18 BOARD MEMBER WILSON: Here.

19 MS. SKRINJARIC: Christopher Eccles?

20 MR. ECCLES: Here.

21 MS. SKRINJARIC: Donald Bordelove?

22 MR. BORDELOVE: Here.

23 MS. SKRINJARIC: And we have Kasey McCourtney
24 for CCMSI?
25

1 MS. MCCOURTNEY: Here.

2 MS. SKRINJARIC: And Kim Price from Lewis
3 Brisbois?

4 MR. PRICE: Yes, good morning.

5 MS. SKRINJARIC: Okay. And is there anybody
6 else on the phone?

7 Okay.

8 BOARD MEMBER MEYER: All righty. Item number 2
9 is public comment. The opportunity for the public
10 comment is reserved for any matter listed below on the
11 agenda as well as any matter within the jurisdiction of
12 the Board. No action on such an item may be taken by
13 the Board unless and until the matter has been noticed
14 as an agenda item. Comment from the public is limited
15 to three minutes per person.

16 Do we have anyone from the public who wishes to
17 speak?

18 MS. SKRINJARIC: Not here.

19 BOARD MEMBER MEYER: Okay. All right. We'll
20 move on to the approval of the agenda. Did everybody
21 get a copy of the agenda?

22 BOARD MEMBER WILSON: This is Sharolyn. Yes.

23 BOARD MEMBER SAYEGH: This is Suhair. Yes.

24 BOARD MEMBER MEYER: Okay. And does everybody,
25 or is there any questions or comments or anything about

1 the agenda?

2 BOARD MEMBER WILSON: This is Sharolyn. I have
3 none.

4 BOARD MEMBER SAYEGH: Suhair. I have none.

5 BOARD MEMBER MEYER: Does somebody want to make
6 a motion to accept the agenda?

7 BOARD MEMBER SAYEGH: This is Suhair. I'll
8 make the motion to accept the agenda for today's
9 Subsequent Injury Board meeting, December 9th, 2020.

10 BOARD MEMBER WILSON: This is Sharolyn. I'll
11 second that motion.

12 BOARD MEMBER MEYER: All righty. All in favor,
13 say "aye."

14 (Board members said "aye.")

15 BOARD MEMBER MEYER: So item number 4 is the
16 approval of the minutes from the November 10th, 2020
17 meeting. And did everybody get a copy of the minutes?

18 BOARD MEMBER WILSON: This is Sharolyn. Yes.

19 BOARD MEMBER SAYEGH: This is Suhair. Yes.

20 BOARD MEMBER MEYER: And is there any changes,
21 comments or questions about the minutes?

22 BOARD MEMBER WILSON: This is Sharolyn. I have
23 none.

24 BOARD MEMBER SAYEGH: Oops.

25 BOARD MEMBER MEYER: Bless you.

1 BOARD MEMBER SAYEGH: Sorry. This is Suhair.
2 I have none. Thank you.

3 BOARD MEMBER MEYER: I have none, either. Can
4 I have as motion to accept the minutes?

5 BOARD MEMBER WILSON: This is Sharolyn. I'll
6 make a motion that we accept the minutes from the
7 Subsequent Injury, the Subsequent Injury meeting from
8 November.

9 BOARD MEMBER MEYER: 10th.

10 BOARD MEMBER WILSON: 2020.

11 BOARD MEMBER MEYER: All in favor -- oh, I'm
12 sorry. We need a second.

13 BOARD MEMBER SAYEGH: Yes, this is Suhair.
14 I'll second that motion.

15 BOARD MEMBER MEYER: Okay. Thanks. All in
16 favor, say "aye."

17 (Board members said "aye.")

18 BOARD MEMBER MEYER: All right. We'll move
19 down to item 5 with the first claim being --

20 BOARD MEMBER SAYEGH: Hold on. Excuse me.

21 MS. SKRINJARIC: Hold on. Excuse me. This is
22 Vanessa. Prior to the meeting, Mr. Price was willing to
23 allow numbers, item number 7 to go first, because it's a
24 supplemental.

25 BOARD MEMBER MEYER: Okay.

1 MS. SKRINJARIC: So if you all don't mind.

2 BOARD MEMBER MEYER: Okay. Yes, that is fine.

3 So we will jump ahead to item number 7. And this is
4 claim number 14475E615437 for City of Sparks.

5 Vanessa, do you want to go over that for us?

6 MS. SKRINJARIC: Sure, if you want to do your
7 disclosures first?

8 BOARD MEMBER MEYER: Oh, yes. For Carson City,
9 CCMSI is the third-party administrator for our
10 self-insured account, but that will not affect my
11 decision today.

12 BOARD MEMBER WILSON: This is Sharolyn. I have
13 the same disclosure regarding CCMSI being the
14 third-party administrator for Washoe County, but that
15 will not affect my decision today.

16 MS. SKRINJARIC: Okey-doke. So it is the
17 Administrator's recommendation to accept this second
18 supplemental request pursuant to NRS 616B.557 for the
19 right shoulder.

20 The total amount requested for reimbursement is
21 \$84,823.68. The amount of reimbursement, after costs
22 were verified, is \$84,559.19. An explanation of the
23 disallowance is attached to this recommendation memo.

24 This request was received from CCMSI on
25 October 19th, 2020. This claim was originally approved

1 by the Board on July 20th, 2016.

2 This request contained reporting, payment
3 and/or billing for the following expenses:

4 PPD performed by Dr. Cestkowski on
5 February 18th, 2019, bill not paid until August 6, 2019;

6 Vocational rehabilitation services from
7 May 2nd, 2019 through July 27, 2020;

8 Vocational rehabilitation maintenance payments
9 from May 22nd, 2019 to September 27, 2020;

10 Vocational rehabilitation schooling from
11 June 3rd, 2019 through February 25th, 2020.

12 This employee began an online program with
13 Keiser University to be a security consultant. He
14 started on June 3rd, 2019. The program was to last 12
15 months. Job placement was to occur from June 2nd, 2020
16 to June 29th, 2020. Tuition was to be \$28,512.00. Due
17 to no fault of his, the employee was unable to take
18 courses from September 30th, 2019 to November 24th,
19 2019. An extension of his vocational rehabilitation
20 program was requested and granted. The employee was
21 expected to finish his final class on August 30th, 2020
22 with job placement to occur on August 31, 2020 to
23 September 27, 2020. In the last report submitted by the
24 vocational counselor on July 27, 2020, the employee had
25 applied for a security manager position with Tesla. As

1 this employee took a PERS disability retirement, any job
2 he applies for must be approved through the PERS Board.

3 That's all.

4 BOARD MEMBER MEYER: Thank you, Vanessa.

5 Do the Board members have any questions about
6 this?

7 BOARD MEMBER WILSON: This is Sharolyn. I do
8 not.

9 BOARD MEMBER SAYEGH: Suhair. I do not.

10 BOARD MEMBER MEYER: All right. Would somebody
11 please make a motion on this claim.

12 BOARD MEMBER SAYEGH: This is Suhair. I'll
13 make a motion to accept this second supplement's request
14 on claim number 14475E615437 in the amount of
15 \$84,559.19.

16 BOARD MEMBER WILSON: This is Sharolyn. I'll
17 second that motion.

18 BOARD MEMBER MEYER: All in favor?

19 (Board members said "aye.")

20 MS. MCCOURTNEY: Thank you. This is Kasey.
21 I'm going to jump off now.

22 MS. SKRINJARIC: Thanks, Kasey.

23 BOARD MEMBER MEYER: Okay. Thanks. Thank you.

24 MS. MCCOURTNEY: Happy holidays. Bye-bye.

25 BOARD MEMBER MEYER: You as well.

1 BOARD MEMBER SAYEGH: Yeah, bye.

2 BOARD MEMBER MEYER: All right. So shall we
3 jump back to item 5?

4 MS. SKRINJARIC: Yes, please.

5 BOARD MEMBER MEYER: All right. This is for
6 Sparks Nugget's claim number MGLA-0035.

7 Vanessa, do you want to chat about that one?

8 MS. SKRINJARIC: Sure. Does anyone have any
9 disclosures regarding York Risk Services, et al.,
10 anyone?

11 No? Okay. It is the Administrator's
12 recommendation to deny this request pursuant to NRS
13 616B.557(3) and (4) and 616B.560(1)(a), (1)(b), (1)(c)
14 and (2) for the left shoulder.

15 The total amount requested for reimbursement is
16 \$53,566.60. The amount that should have been requested
17 is \$53,512.60 due to a \$54 error on the calculator
18 tapes. The amount of reimbursement, after costs were
19 verified, is \$39,305.37. An explanation of the
20 disallowance is attached to this recommendation memo.

21 This request was received from Kim Price, Esq.,
22 of Lewis Brisbois Bisgaard & Smith on August 30th, 2019.

23 The employee's prior history is taken from the
24 August 18, 2014 PPD report of Dr. Barainca and specific
25 medical records as noted.

1 On September 18, 2007, an MRI of the employee's
2 left shoulder showed tendinosis of the supraspinatus
3 tendon as well as the bicipital tendon, joint effusion,
4 left shoulder soft tissue biceps tenodesis with superior
5 labral debridement, subacromial decompression, and
6 arthroscopic rotator cuff repair.

7 On December 16, 2008, Dr. Smith noted: One,
8 scaphoid nonunion with secondary advance collapse,
9 advanced arthrosis involving radiocarpal and midcarpal
10 compartments, multiple interlaminar osteochondral
11 bodies, extensive erosive and cystic changes throughout
12 the carpals, joint effusion and synovitis; two, advanced
13 first carpal metacarpal arthrosis; three, intramuscular
14 edema in thenar eminence. Imaging appearance suggest
15 subacute denervation change although the median nerve is
16 normal in signal intensity.

17 On January 24th, 2013, the employee was working
18 as a snow removal driver for the State of Nevada,
19 Department of Transportation. He slipped and fell,
20 injuring his left shoulder upon which he had received a
21 prior surgery.

22 On November 1, 2013, Dr. Malcarney performed a
23 left shoulder arthroscopy, revision subacromial
24 decompression, arthroscopic rotator cuff repair,
25 including subscapularis, global labral debridement and

1 chondroplasty.

2 On July 16, 2014, a functional capacity
3 evaluation was performed in which the employee was
4 determined to be capable of light/medium work. The copy
5 provided by the applicant is of very poor quality and
6 the actual lifting requirement at line 4 cannot be
7 determined.

8 The employee saw Dr. Malcarney on July 22nd,
9 2014 to review the findings of the FCE. She agreed with
10 the findings and vocational rehabilitation was
11 recommended. His current work restrictions were
12 extended, although the report does not state what those
13 restrictions are. The report does state the employee
14 was using, quote, "25-pound dumbbells on his own at the
15 gym," end quote.

16 On August 18, 2014, Dr. Barainca performed a
17 PPD evaluation in which she found 5 percent whole person
18 impairment for the left shoulder. As the employee had a
19 prior nonindustrial injury, 50 percent of the impairment
20 was apportioned. This left 2.5 percent whole person
21 impairment which was rounded up to 3 percent whole
22 person impairment.

23 Present claim. The employee was hired as a
24 painter/drywaller on February 10th, 2016.

25 On November 7, 2016, the employee, a painter

1 for the employer, was looking for a light switch in a
2 darkened steak house when he tripped over a bunch of
3 napkins or towels, landing on his outstretched left arm.
4 He reported it that same day.

5 On November 14, 2016, the employee sought
6 treatment at ARC Wellness and a C-4 Form was completed.
7 He was diagnosed with a left shoulder strain. The
8 employee informed ARC that his past history was positive
9 for two previous injuries and surgeries to the left
10 shoulder, one five years ago and one three years ago.
11 After the second surgery, the employee reported to ARC
12 that he had permanent restrictions of lifting less than
13 30 pounds with his left arm. X-rays of the left
14 shoulder were positive for surgical screws. This report
15 was received by the employer's third-party administrator
16 on November 16, 2016. The employee was referred for
17 physical therapy.

18 On December 23rd, 2016, the employee sought a
19 physiatry consultation with Dr. DeMordaunt. Due to
20 concerns about weakness in the shoulder-supporting
21 muscles, Dr. DeMordaunt requested cervical and left
22 shoulder MRIs and EMGs of the upper limbs to evaluate
23 for nerve injury.

24 On January 19 and 20, 2017, cervical and left
25 shoulder MRIs were performed. The left shoulder MRI

1 showed a full-thickness complete supraspinatus tendon
2 tear with significant retraction, high-grade
3 partial-thickness articular-sided tear of the
4 subscapularis tendon with marked atrophy of the
5 subscapularis muscle belly and moderate atrophy of the
6 supraspinatus muscle belly, partial-thickness
7 articular-sided tear of the infraspinatus tendon
8 involving approximately 25 percent of the width of the
9 tendon, and circumferential labral degeneration.

10 The EMG performed on January 23rd, 2017 showed
11 no radiculopathy or brachial plexopathy of the left
12 upper limb.

13 On March 15, 2017, the employee saw
14 Dr. Malcarney who recommended surgery. On May 1, 2017,
15 a second opinion by Dr. Kalisvaart also recommended
16 surgery.

17 On June 22nd, 2017, Dr. Malcarney performed a
18 left shoulder arthroscopy, revision subacromial
19 decompression, global labral debridement, chondroplasty
20 and revision rotator cuff repair. The employee
21 underwent post-op physical therapy from July 13 to
22 October 17, 2017. A repeat MRI was performed on
23 November 3rd, 2017 and upper extremity EMGs were
24 performed on February 20th, 2018. Both were essentially
25 normal given the previous surgery. On February 21,

1 2018, Dr. Malcarney released the employee as stable and
2 ratable. She placed him on a 10-pound lifting
3 restriction pending an FCE.

4 The FCE performed on March 19, 2018 placed the
5 employee in a sedentary work category with a lifting
6 restriction no greater than 5 pounds.

7 On May 22nd, 2018, the employee was seen by
8 Dr. Berg for a PPD evaluation. Dr. Berg noted that the
9 employee had a prior history of injury to the examined
10 body part. However, he was not provided any previous
11 medical records or PPD reports from which he could
12 apportion the prior injuries. At that time, Dr. Berg
13 recommended 13 percent whole person impairment for the
14 left shoulder, unapportioned.

15 It appears that Dr. Berg was asked to apportion
16 the employee's prior injuries based on medical records
17 provided after his initial PPD evaluation. It is
18 believed that he apportioned 7 percent whole person
19 impairment to the prior injuries. However, the
20 applicant did not submit Dr. Berg's addendum as part of
21 its submission. Upon request from DIR, the applicant
22 stated, quote, "it cannot be located at this time," end
23 quote.

24 On September 23rd, 2018, Dr. Berg was again
25 asked to further review the records after receipt of

1 Dr. Barainca's August 18, 2014 PPD report which assigned
2 a 5 percent whole person impairment to the prior
3 nonindustrial and industrial injury. Dr. Berg
4 determined that the injured employee had a net 4 percent
5 whole person impairment in either of two ways:

6 1. 7 Percent, from Dr. Berg's addendum, minus
7 3 percent, 2014 awarded PPD after apportionment, leaves
8 a net 4 percent; or

9 2. 13 percent, Dr. Berg 's original award,
10 minus 5 percent, 2014 award before apportionment, leaves
11 8 percent then apportion 50 percent leaves a net
12 4 percent.

13 The employee took the 4 percent whole person
14 impairment PPD award in a lump sum.

15 It should be noted that Dr. Berg's PPD was
16 incorrect. The employee should have received 8 percent
17 whole person impairment. Dr. Berg found 13 percent
18 whole person impairment less the prior awarded 5 percent
19 whole person impairment leaves a net 8 percent whole
20 person impairment. This is addressed in the Subsequent
21 Injury Fund review completed by Katherine Godwin, BSN,
22 RN, DIR Medical Unit Chief.

23 It does not appear that vocational
24 rehabilitation was offered in this claim.

25 Findings. The injured employee had a

1 nonindustrial left arthroscopic shoulder rotator cuff
2 repair in 2005. In 2013, he had a left shoulder
3 arthroscopy, revision subacromial decompression and
4 arthroscopic rotator cuff repair. At the time of his
5 accident in 2016, the surgery he required was a revision
6 subacromial decompression, global labral debridement,
7 revision rotator cuff repair. This involved more
8 intensive physical therapy. While no medical report was
9 provided stating such, the Administrator believes the
10 compensation was substantially greater as a result of
11 the combined effects of the preexisting injury and the
12 subsequent injury.

13 Therefore, NRS 616B.557, subsection 1, has been
14 satisfied.

15 On August 18, 2014, Dr. Barainca penned a PPD
16 report in which she awarded a 5 percent whole person
17 impairment for the left shoulder. This was apportioned
18 by 50 percent for a prior nonindustrial injury,
19 resulting in a net 2.5 percent whole person impairment,
20 which was rounded up to 3 percent whole person
21 impairment. This PPD was performed in Nevada under the
22 5th Edition of the Guides. The 5 percent whole person
23 impairment does not meet the 6 percent whole person
24 impairment requirement.

25 The applicant submits on the D-37 Form that the

1 prior impairment is 7 percent whole person impairment.
2 The applicant did not submit a report to substantiate
3 this. The applicant submitted an addendum by Dr. Berg,
4 who initially was not provided the prior 5 percent PPD
5 awarded by Dr. Barainca. It can only be assumed that
6 Dr. Berg tried to apportion the prior injury because he
7 initially did not have the appropriate records.
8 However, the following regulation is on point regarding
9 apportionment.

10 NAC 616C.490, apportionment of impairments.

11 Subsection 3. A precise apportionment must be
12 completed if a prior evaluation of the percentage of
13 impairment is available and recorded for the preexisting
14 impairment.

15 Subsection 5. If precise apportionment is not
16 available, and the rating physician or chiropractor is
17 unable to determine an apportionment using the Guides as
18 set forth in subsection 4, an apportionment may be
19 allowed if at least 50 percent of the total present
20 impairment is due to a preexisting or intervening
21 injury, disease or condition. The rating physician or
22 chiropractor may base the apportionment upon x-rays,
23 historical records and diagnoses made by physicians or
24 chiropractors or records of treatment which confirm the
25 prior impairment.

1 As a prior rating of 5 percent whole person
2 impairment was available, was performed in Nevada, under
3 the 5th Edition of the Guides, it was appropriate to use
4 this as a definitive record of the employee's prior
5 impairment rather than attempting to discern it from
6 medical records.

7 Additionally, Katherine Godwin, BSN, RN, DIR
8 Medical Unit Chief, states, quote:

9 "The second question asks for an explanation
10 regarding why the insurer's reliance on the 7 percent
11 after the subsequent injury was incorrect to determine
12 if they qualify for subsequent injury relief of
13 6 percent whole person impairment, i.e., the prior
14 rating on record was documented at 5 percent whole
15 person impairment.

16 "It should be noted that Subsequent Injury fund
17 eligibility requires an initial injury meet at least a
18 6 percent whole person impairment. The first PPD report
19 indicates 5 percent whole person impairment was assigned
20 for the left shoulder. The insurer seems to rely on the
21 second rater's assignment of 13 percent whole person
22 impairment, which was originally apportioned 50 percent
23 resulting in 7 percent whole person impairment for the
24 subsequent injury. As the requirement relies on
25 impairment of the initial PPD, the subsequent PPD rating

1 is not used to establish the minimum of 6 percent whole
2 person impairment.

3 "There are significant apportionment errors
4 identified in the second rater's addendum submitted
5 after additional information was provided for review.
6 In the addendum, the rater calculates his rating two
7 different ways, both resulting in a net increase of
8 4 percent whole person impairment. Unfortunately,
9 neither of the methods he describes appropriately apply
10 NAC 616C.490. The regulation clearly allows a rater to
11 apportion at least 50 percent only if precise
12 information is not available. In this case, according
13 to subsection 3 of NAC 616C.490, a precise apportionment
14 must be completed if a prior evaluation, PPD rating, is
15 available and recorded for the preexisting impairment.
16 The previous PPD report is available and records
17 5 percent whole person impairment of the left shoulder.

18 "Therefore, in my opinion, the injured
19 employee's claim does not meet the requirements for
20 reimbursement by the Subsequent Injury Fund at this
21 time. The injured employee's first PPD impairment
22 rating was assigned 5 percent whole person impairment.
23 This does not meet the minimum of 6 percent whole person
24 impairment required for consideration.

25 "Emphasis added."

1 Therefore, NRS 616B.557, subsection 3, has not
2 been satisfied.

3 The D-37 completed by the applicant states the
4 employer became aware of the employee's permanent
5 physical impairment on April 11th, 2017. The employee
6 never returned to work for the employer after April 11,
7 2017. He remained on temporary total disability from
8 that time until May 1st, 2018. It does not appear that
9 the employee returned to work for the employer after
10 that time period.

11 Therefore, NRS 616B.557, subsection 4, has not
12 been satisfied.

13 Subsection 5 does not need to be satisfied in
14 order for this claim to be considered for reimbursement
15 since the date of injury is after the October 1, 2007
16 change in the requirements of the statute.

17 Therefore, NRS 616B.557 has been satisfied.

18 On January 4th, 2016, the employee filed online
19 to be an Engineer 1 at the Sparks Nugget. It appears
20 that a three-page handwritten application for Engineer
21 Drywall was completed by the employee. On page 1, the
22 date listed is 2-10-16. On page 3, the date signed by
23 the employee is May 3rd, no year. No explanation is
24 given for this discrepancy.

25 The employer also provided a form titled

1 General Interview Questions which appears to be
2 completed by Heidi, blank, on 1-6-16 or 1-7-16 which
3 purports to be an interview of the employee. Question
4 14 states, quote, "Are you aware of any physical
5 limitations that would prevent you from performing the
6 essential functions of the job? Go over job description
7 and licensing," end quote. Handwritten is the answer,
8 "No." After request by the DIR for the job description
9 and essential functions of the job as noted above, the
10 employer provided the essential job functions for
11 Engineer in the Engineering Department. It is unknown
12 if this was provided to the employee as his job
13 description is that of painter or drywall. The
14 essential functions provided for Engineer are, quote,
15 "Responsible for the safe and proper operation of all
16 equipment throughout the facilities. Performs a variety
17 of semiskilled maintenance work such as inspecting,
18 lubricating, cleaning and replacing belts, valves and
19 gaskets. Under supervision operates heating, air
20 condition, ventilating and pumping equipment such as
21 motors, burners, fans, pumps and compressors," end
22 quote.

23 This job description appears to be for a person
24 who does HVAC and equipment work and not painting or
25 drywall.

1 It is unknown if the essential job functions of
2 Engineer in the Engineering Department were provided to
3 the injured employee at the time he applied as it was
4 not attached to the interviewer's questions in January
5 2016. It was not signed by the injured employee nor
6 does it appear to be in line with his job duties of
7 painting or drywall.

8 The employee had physical restrictions of no
9 lifting greater than 30 pounds, according to the
10 employee's statement to ARC after the subsequent injury.
11 It is unknown what the restrictions are for a painter
12 for the employer. From the documents provided, it
13 cannot be determined that the employee knowingly made a
14 false representation as to his physical condition at the
15 time he was hired by the self-insured employer.

16 Therefore, NRS 616B.560(1)(a) has not been
17 satisfied.

18 There is no documentation that supports that
19 the employee made a false statement to the employer
20 about his prior physical condition. While it is true
21 the employee had physical restrictions of no lifting
22 greater than 30 pounds after his 2013 job accident,
23 according to his statement to ARC, no documentation was
24 submitted which showed that the employer provided him
25 with the lifting requirements for the job of painter or

1 drywall. Therefore, the employer does not anything to
2 rely upon.

3 Therefore, NRS 616B.560(1)(b) has not been
4 satisfied.

5 The file does not contain any medical
6 documentation that supports that this employee's left
7 shoulder condition contributed or caused the accident.
8 In fact, the employer's own physician, Dr. Rosen,
9 states, in reporting dated May 18th, 2018, quote:

10 "After reviewing both functional capacity
11 reports, do you feel employee's left shoulder injury on
12 11-7-2016 was the result of the working beyond his
13 permanent restrictions given in 2014? Employee appears
14 to have been working beyond his work restrictions.
15 However, there is documentation made of a traumatic
16 injury when he slipped and fell, landing on his
17 outstretched hand. And, therefore, within a reasonable
18 degree of medical probability, I cannot attribute the
19 shoulder injury on 11-7-16 to him having worked beyond
20 his permanent work restrictions. This assumes that the
21 injury was occurred at time of an accident and was
22 documented in that he reported it to his employer at the
23 time or shortly thereafter. If there were no injury, it
24 could be expected that employee might eventually had to
25 undergo the surgery as performed by Dr. Malcarney and

1 may require other surgeries secondary to chronic rotator
2 cuff arthropathy, given the findings of atrophy present
3 on the MRI scan done after the injury. The atrophy,
4 which might lead to the need for further surgery and
5 impairment cannot be related to the 11-7-16 incident."

6 Since no false representation has been
7 supported, there can be no causal connection established
8 force the subsequent injury.

9 Therefore, NRS 616B.560(1)(c) has not been
10 satisfied.

11 On November 14, 2016, the employee sought
12 treatment at ARC Wellness and a C-4 Form was completed.
13 The employee informed ARC that his past history was
14 positive for two previous injuries and surgeries to the
15 left shoulder, one five years ago and one three years
16 ago. After the second surgery, the employee reported to
17 ARC that he had permanent restrictions of lifting less
18 than 30 pounds with his left arm. This report was
19 received by the employer's third-party administrator on
20 November 16, 2016, and presumably the employer as well.

21 The employer completed a C-3 Form on
22 November 15, 2016, listing the employee's occupation as
23 painter and doubting the validity of the claim as it was
24 not witnessed. This form was received by the employer's
25 third-party administrator on November 16, 2016.

1 The third-party administrator performed an ISO
2 check of the employee on November 23rd, 2016.

3 The employer did not submit a notice to the
4 Subsequent Injury Account until June 9th, 2017, received
5 on June 15, 2017. This is 206 days from receipt of the
6 medical reporting on November 16, 2016 in which the
7 third-party administrator for the employer and the
8 employer were informed that the employee had two prior
9 surgeries to the injured left shoulder. Additionally,
10 this reporting stated the employee had some permanent
11 restrictions, although line 4 cannot be read for
12 certainty as to the amount, regarding his left arm.
13 X-rays of the left shoulder were positive for surgical
14 screws. The applicant submits on its D-37 that its
15 knowledge of the false representation occurred on
16 April 11, 2017. The applicant submits an April 11, 2017
17 faxed application of employment as proof of knowledge on
18 this date. However, this employment application was in
19 the employer's possession as of January 4th, 2016, the
20 date it was processed, or at least as of the date of the
21 medical report of November 16, 2016.

22 Therefore, NRS 616B.560, subsection 2, has not
23 been satisfied.

24 That's all.

25 BOARD MEMBER MEYER: Thanks, Vanessa.

1 Board members, do you have any questions
2 regarding this claim?

3 BOARD MEMBER WILSON: This is Sharolyn. I do
4 not.

5 BOARD MEMBER SAYEGH: This is Suhair. I would
6 like to hear from -- I believe, Mr. Price is
7 representing the employer?

8 BOARD MEMBER MEYER: Yes.

9 BOARD MEMBER SAYEGH: Okay. If we can hear
10 from him first, before making our decision, with regard
11 to some of the discrepancies noted in Vanessa's summary.

12 BOARD MEMBER MEYER: Mr. Price --

13 MR. PRICE: Well --

14 BOARD MEMBER MEYER: -- can you fill us in?

15 MR. PRICE: Shall I respond?

16 BOARD MEMBER MEYER: Yes, please.

17 MR. PRICE: Based upon the education that I
18 received at last month's hearing that new evidence or
19 evidence and testimony would not be accepted at this
20 hearing, I have no statement to offer.

21 I tried to do it last --

22 BOARD MEMBER MEYER: I --

23 MR. PRICE: I tried to do, I tried to cooperate
24 and do things the way we've always done them, and last
25 month, you said under no circumstances would you

1 entertain argument or evidence. So there's no point for
2 me to make a statement. Thank you.

3 MR. BORDELOVE: This is Donald Bordelove.

4 BOARD MEMBER SAYEGH: If I'm --

5 MR. BORDELOVE: That's an incorrect
6 representation of the last meeting, just for the record.

7 BOARD MEMBER SAYEGH: And this is Suhair. If I
8 remember correctly, there was a witness in that that he
9 wanted to testify. And, I believe, that's why there was
10 some objection.

11 But in this case, Mr. Price, I'm just simply
12 asking for your feedback with regard to some of the
13 issues that were raised in this verbal summary this
14 morning. But if you don't want to --

15 MR. PRICE: Well, I --

16 BOARD MEMBER SAYEGH: -- that's fine, sir. We
17 can --

18 MR. PRICE: Last month, I was educated that I
19 can't even discuss evidence. That is not the purpose of
20 this hearing. That's what the State argued. That's
21 what the Board decided, is that at this hearing I am not
22 permitted to discuss evidence, and I'm not permitted to
23 discuss testimony.

24 MR. BORDELOVE: Again, this is --

25 MR. PRICE: I'm disappointed at that, but

1 that's a decision that the Board made last month.

2 MR. BORDELOVE: Again, this is Donald
3 Bordelove. That's an inaccurate representation of the
4 last meeting. You're free to present argument. This is
5 not a hearing. This is not a contested case. And
6 according to the regulation, which we've discussed, on
7 its plain language, you're allowed to request a hearing
8 within 30 days. Based on Board practice, as the Board
9 member asked, you're allowed to make argument and an
10 explanation before the Board decides on the report.

11 MR. PRICE: So last month, when I was citing to
12 evidence, and you told -- and you objected, and the
13 Board ruled that I was not allowed to discuss evidence,
14 now you're changing back to now I can discuss evidence?

15 MR. BORDELOVE: That is not what I said, and
16 that's an inaccurate representation. I did not make an
17 objection. You're allowed to discuss whatever you want.
18 You are not allowed to call witnesses, because this is
19 not a hearing. You can discuss and argue whatever you'd
20 like right now.

21 MR. PRICE: But that's not true. You objected
22 because I cited to evidence, evidence that the DIR
23 submitted, and you objected and said this is not the
24 hearing to take testimony or to take evidence, to argue
25 evidence. This is strictly for the SIA Board to decide

1 up or down on the DIR's recommendation. That's what was
2 argued and the SIA Board decided last month.

3 MR. BORDELOVE: Again, misrepresenting the
4 prior, prior meeting. But, you know, the --

5 MR. PRICE: How so, counsel, how so am I
6 misrepresenting that, please?

7 MR. BORDELOVE: You're saying that we said
8 you're not allowed to make any argument. That's
9 incorrect. You can make whatever your argument you
10 want, it's based on -- which is based on Board practice,
11 as I will remind you, it's actually not provided in the
12 regulations whatsoever. You were not allowed, you were
13 simply not allowed to call witnesses, because this is
14 not a hearing and not a contested case, until you
15 request a hearing pursuant to the plain language of the
16 regulation which has the force of law.

17 MR. PRICE: Last month, you objected, when I
18 said please turn to DIR exhibit page 35. And you
19 objected --

20 MR. BORDELOVE: But perhaps --

21 MR. PRICE: -- that this is not the hearing to
22 take, to argue about evidence. You argued this is
23 strictly a hearing for the SIA Board to vote up or down
24 on the DIR's recommendation.

25 MR. BORDELOVE: Again, that's not --

1 MR. PRICE: That's what the SIA Board told me
2 last month. I objected strenuously. But that's what
3 the SIA Board decided.

4 It sounds to me now like, I mean, that that
5 hearing last month has been amended. Is that accurate?
6 Am I allowed now to discuss the DIR's exhibits?

7 MR. BORDELOVE: You can discuss whatever you
8 want.

9 MR. PRICE: Because last month, you wouldn't
10 let me.

11 MR. BORDELOVE: I don't know if you're
12 confusing --

13 MR. PRICE: Last month, you would not let me
14 discuss anything.

15 MR. BORDELOVE: -- in that discussion, what I
16 said, but the record and the hearing, excuse me, the
17 meeting will clearly show what was said last meeting.
18 Perhaps you're confusing what I said versus what DIR's
19 counsel said, and that's understandable. But you can
20 discuss whatever you want, which is, again, based on
21 Board practice. It's not in the regulation, but because
22 it's based on Board practice to allow you to discuss
23 whatever you want, that is what the Board practice is.

24 MR. PRICE: The Board practice last month was
25 that I wasn't free to discuss it. And Board practice

1 this month is that I'm free to cite the evidence,
2 correct?

3 MR. BORDELOVE: Again, incorrect. That was not
4 what was said last meeting. I don't know what DIR's
5 objections was last month, and I'm not going to try to
6 recall them sitting here. But that is not correct, and
7 that is not an accurate representation of what I said
8 last month in any sense.

9 MR. PRICE: Well, I offer no statement. Thank
10 you.

11 BOARD MEMBER MEYER: Board members, would
12 somebody like to make a motion.

13 BOARD MEMBER WILSON: This is Sharolyn. I will
14 make a motion that we accept the recommendation of the
15 Administrator regarding claim number MGLA-0035, date of
16 injury 11-7-2016, denying the request for Subsequent
17 Injury Fund release.

18 BOARD MEMBER SAYEGH: This is Suhair. I'll
19 second that motion.

20 BOARD MEMBER MEYER: All in favor?

21 (Board members said "aye.")

22 BOARD MEMBER MEYER: Thank you.

23 And we will move on to item 6, which is for
24 LVMPD and claim number 02D34B901770.

25 And before you get started, Vanessa, I have one

1 question.

2 MS. SKRINJARIC: Sure.

3 BOARD MEMBER MEYER: In the first paragraph,
4 well, the paragraph entitled Amount of Reimbursement,
5 you indicate the total amount requested for
6 reimbursement was amended to \$53,917.83. Is this the
7 verified amount?

8 MS. SKRINJARIC: So if you just let me read the
9 recommendation, and then we --

10 BOARD MEMBER MEYER: Okay.

11 MS. SKRINJARIC: -- can have a discussion on
12 what happened in this case, because the Board will need
13 to make a decision on how much needs to be reimbursed,
14 because --

15 BOARD MEMBER MEYER: I understand.

16 MS. SKRINJARIC: -- there's an issue on missing
17 documentation, basically.

18 BOARD MEMBER MEYER: Okay. Perfect.

19 MS. SKRINJARIC: Okay.

20 BOARD MEMBER MEYER: I'm sorry. Please go
21 ahead.

22 MS. SKRINJARIC: Yes, okay. So I assume that,
23 just in terms of disclosures, again, CCMSI for you and
24 Sharolyn. Correct, Cecilia?

25 BOARD MEMBER WILSON: Yes.

1 BOARD MEMBER MEYER: That is correct. Thank
2 you.

3 MS. SKRINJARIC: Okay. All right. So it is
4 the Administrator's recommendation to accept this
5 request pursuant to NRS 616B.557 for the lumbar spine.

6 The total amount requested for reimbursement is
7 \$68,084.83. Once the applicant was notified that there
8 was subrogation involved in this claim, the total amount
9 requested for reimbursement was amended to \$53,917.83.
10 An explanation of the disallowance is attached to this
11 letter.

12 As stated, there was subrogation on this case.
13 On February 4th, 2004, CCMSI sent Liberty Mutual a
14 notice of lien on behalf of the employer. Additionally,
15 on that same day CCMSI sent the injured employee and his
16 attorney a notice of lien which, quote, "specifically
17 disavows the application of the Breen Formula on any
18 part of its recovery," end quote.

19 The applicant submitted a check which was made
20 out to the injured employee, his attorney and OHMS, the
21 employer's TPA, in the amount of \$42,500. The applicant
22 has no documentation in its file as to how much money
23 was actually received other than to say it believes the
24 distribution, quote, "would be a 1.3 split," end quote,
25 or the sum of \$14,167.00.

1 If the Board chooses to accept the applicant's
2 analysis of the recovered subrogation cost as a
3 one-third of the \$42,500.00 check, \$14,167.00, the
4 amount of recommended reimbursement, after verified
5 costs, is \$52,441.20.

6 This request was received from Kim Price, Esq.
7 on August 6, 2020.

8 This employee was hired on March 14, 1988 as a
9 police officer. On December 21, 1999, he was involved
10 in a motor vehicle accident in which he was rear-ended.
11 The prior history will be taken from the November 28,
12 2001 permanent partial disability evaluation penned by
13 Dr. Borselli.

14 The employee was initially seen at UMC where he
15 was diagnosed with cervicothoracic strain and rib pain.
16 He was prescribed NSAIDs.

17 In May 2000, the employee saw Dr. Dunn for
18 intractable low back pain. He was given prescriptions
19 for Oxycontin and Lortab. The diagnosis was disc
20 disruption at L4-5 and L5-S1, superimposed on
21 preexisting degenerative spondylosis.

22 In June 2000, Dr. Dunn noted that discograms
23 confirmed pain generators at L4-5 and L5-S1. The
24 employee was continued on Oxycontin and Percocet.

25 On September 26, 2000, Dr. Dunn performed an

1 anterior complete discectomy at L4-5 and L5-S1, anterior
2 interbody fusion using composite bone graft, anterior
3 instrumentation using cages and left anterior iliac
4 crest bone graft harvest through separate skin incision.
5 The postoperative diagnosis was severe disc disease at
6 L4-5 and L5-S1. The employee began postoperative
7 physical therapy on October 17, 2000.

8 On December 7, 2000, the employee remained on
9 Percocet and Oxycontin. There was a concern for
10 narcotic dependency.

11 The employee continued to see Dr. Dunn for
12 medication refills in 2001. Dr. Dunn gave a diagnosis
13 of failed back syndrome in June 2001.

14 A CT scan on July 11, 2001 revealed no
15 significant abnormalities except for some degeneration
16 at the L3-4 disc above his fusion.

17 On September 24, 2001, Dr. Dunn noted residual
18 back pain due to multilevel disc disruption. He was
19 continued on Percocet.

20 On November 28, 2001, Dr. Borselli determined
21 the employee had a 5 percent whole person impairment
22 under the 4th Edition of the Guides. That was further
23 apportioned by 50 percent, leaving a net impairment of
24 2.5 percent.

25 The employer offered a 5 percent whole person

1 impairment. The employee appealed this offer ultimately
2 to the Appeals Officer where it was settled for a
3 7.5 percent whole person impairment. See below under
4 employer documents.

5 Present claim. While continuing to work for
6 this employer in the narcotics division, on November 1,
7 2002, the employee was rear-ended in a motor vehicle
8 accident while participating in surveillance activities.

9 The history will be taken from Dr. Perry's PPD
10 evaluation penned on November 22nd, 2004, except as
11 otherwise noted.

12 The employee had an MRI on November 21, 2002
13 which revealed postsurgical changes at L4-5 and L5-S1
14 with a small disc herniation at L5-S1 to the right.

15 The employee continued to treat monthly for
16 narcotic medication refills, Oxycontin and Flexeril,
17 with Dr. Dunn, whom he saw for his prior injury in 1999.
18 In March 2003, Dr. Dunn recommended a transfer of care
19 to a physiatrist.

20 On April 15, 2003, the employee saw Dr. Kong
21 for chronic low back pain secondary to a herniated
22 nucleus pulposus status postdiscectomy and fusion,
23 reaggravated by low back pain secondary to motor vehicle
24 accident.

25 On May 28th, 2003, the employee was seen by

1 Dr. Schifini. On May 30, 2003, Dr. Schifini performed
2 left L5-S1 transforaminal epidural steroid injection
3 under fluoroscopic guidance. A second injection was
4 performed on June 27, 2003. The employee received very
5 little relief from the injections and Dr. Schifini did
6 not recommend further injections.

7 On July 7, 2003, Dr. Kong recommended the
8 employee switch his high dose opiates to methadone but
9 the employee did not want to do so based on the stigma
10 of methadone users.

11 On September 2nd, 2003, Dr. Kong recommended
12 the employee enter a pain management program for his
13 dependence on opioids.

14 On October 8th, 2003, the employee was seen by
15 Dr. Levy who recommended acupuncture, transfer to a pain
16 management anesthesiologist, methadone and complete
17 detox in an inpatient setting.

18 On October 30th, 2003, Dr. Schifini noted the
19 employee had been in two recent motor vehicle accidents
20 in the last four to six weeks and questioned whether it
21 was related to his opioid use.

22 The employee remained under the care of
23 Dr. Schifini from November 18, 2003 to December 28, 2004
24 while he transitioned from Oxycontin to methadone. As
25 of December 28th, 2004, the employee remained on

1 methadone and soma which would need to be covered under
2 his private insurance at the time of claim closure.

3 On November 22nd, 2004, Dr. Perry recommended
4 the employee receive a 21 percent whole person
5 impairment, under the 5th Edition of the Guides. He
6 believed apportionment was proper. As the employee
7 previously received a 7.5 percent whole person
8 impairment, this was subtracted for a net 13.5 percent
9 whole person impairment. The employee took this in a
10 lump sum.

11 No temporary total disability was paid in this
12 claim.

13 Medical reporting supports a substantial
14 increase in the costs of the claim due to injections and
15 medications paid under the claim which is above and
16 beyond what would normally be paid for a simple lumbar
17 strain/sprain.

18 Therefore, NRS 616B.557, subsection 1, has been
19 satisfied.

20 The injured employee was rated and paid for a
21 7.5 percent whole person impairment for the lumbar spine
22 under his 12-21-99 claim.

23 Therefore, NRS 616B 557, subsection 3, has been
24 satisfied.

25 The applicant submitted numerous documents for

1 review to show written knowledge of the permanent
2 impairment. The Administrator finds the following to be
3 the most persuasive:

4 Request for a Rotating Physician or
5 Chiropractor, Form D-35, dated November 1, 2001, faxed
6 from LVMPD Health and Safety, which shows a body part of
7 "lumbar" to be evaluated.

8 Stipulation and Order Regarding Settlement and
9 Dismissal filed August 2nd, 2002, with a Certificate of
10 Mailing to Moreen Lasiter, LVMPD, 400 East Stewart
11 Avenue, Las Vegas, Nevada 89101, which describes a
12 settlement of the contested PPD issue for 7.5 percent
13 whole person impairment.

14 The above documents show the employer had
15 knowledge of a 7.5 percent whole person impairment prior
16 to the subsequent injury and continued to employ the
17 injured employee.

18 Therefore, NRS 616B.557, subsection 4, has been
19 satisfied.

20 The applicant submitted a letter November 22nd,
21 2002, which is directed to the Administrator and
22 provides notice of an injury on 11-1-2002. This is
23 three weeks after the subsequent injury.

24 Therefore, NRS 616B.557, subsection 5, has been
25 satisfied.

1 That is all for this claim.

2 So if you have questions regarding the
3 recommended reimbursement, we can discuss those now.

4 BOARD MEMBER MEYER: Well, this is Cecilia. I
5 think, that is my question, is you've got the total
6 amount requested for reimbursement was amended to
7 \$53,917.83.

8 MS. SKRINJARIC: Correct.

9 BOARD MEMBER MEYER: So my question is, is that
10 the verified amount you're recommending?

11 MS. SKRINJARIC: Okay. So, initially, this
12 claim was submitted to me a6 68, blah, blah, blah.

13 BOARD MEMBER MEYER: Right.

14 MS. SKRINJARIC: They did not initially submit
15 the subrogation documents until I informed them there
16 was obviously subrogation on this claim. So it was
17 amended to \$53,917. That was based upon their belief
18 that the subrogation would be a one-third split.

19 The issue is they could provide no actual
20 documentation of what they actually received and if it
21 was a one-third split. It's just based on their belief
22 that it would be a one-third split.

23 So I really have to leave it to the Board on
24 whether they choose to accept that analysis or not.

25 BOARD MEMBER MEYER: Board members, questions

1 and comments?

2 MS. SKRINJARIC: And this is Vanessa again.
3 And the reason I have to do that is because there is no
4 documentation for me to say, yes, it is a one-third
5 split. So it's really up to you to determine if you
6 want to go with that.

7 BOARD MEMBER MEYER: I understand.

8 Suhair and Sharolyn.

9 BOARD MEMBER WILSON: This is Sharolyn. So
10 when I look at a copy of the Liberty Mutual check, it's
11 made out to the attorney and his client, it says, and
12 not the client's name, and the workers' comp
13 administrator. So that would indicate to me that three
14 parties were written on the check. And, I think, it's
15 reasonable to conclude that they received a one-third
16 split. That would be my comment.

17 BOARD MEMBER SAYEGH: Yeah. I concur with
18 that. To me, that should be enough evidence to show
19 that they received a third of the subrogation
20 settlement.

21 BOARD MEMBER MEYER: Okay. And I agree with
22 that as well. Does somebody want to make a motion, or
23 do we have further questions or discussion?

24 MS. SKRINJARIC: Okay. So this is Vanessa.
25 Just, so assuming you guys agree with the one-third

1 split, the amount of verified costs then would be
2 \$52,441.20.

3 BOARD MEMBER MEYER: I'm sorry. Vanessa, could
4 you repeat that number.

5 MS. SKRINJARIC: Sure. It would be the very
6 last line, \$52,441.20.

7 BOARD MEMBER MEYER: Okay. Perfect. Thank
8 you.

9 BOARD MEMBER WILSON: Okay. This is --

10 BOARD MEMBER MEYER: All right. Board members.

11 BOARD MEMBER WILSON: This is Sharolyn. I'll
12 make a recommendation that we accept the DIR's
13 recommendation to accept claim number 02D34B901770, date
14 of injury 11-1-2002, in the amount of verified costs of
15 \$52,441.20.

16 BOARD MEMBER SAYEGH: And this is Suhair. I'll
17 second that motion.

18 BOARD MEMBER MEYER: All in favor?

19 (Board members said "aye.")

20 MR. PRICE: Thank you all for your time. I
21 wish you all happy holidays, and we'll see you next
22 year.

23 BOARD MEMBER MEYER: Same to you, Mr. Price.

24 BOARD MEMBER SAYEGH: Thank you, Mr. Price.

25 Same to you.

1 BOARD MEMBER MEYER: Thank you.

2 MR. PRICE: Good day.

3 BOARD MEMBER MEYER: All right. We'll move on
4 to item 8, additional items.

5 a. is general matters of concern to Board
6 members regarding matters not appearing on the agenda.
7 Do we have any concerns and matters to discuss?

8 BOARD MEMBER WILSON: This is Sharolyn. I have
9 none.

10 BOARD MEMBER SAYEGH: This is Suhair. Any
11 updates from the Governor's Office regarding applicants?

12 MS. SKRINJARIC: This is Vanessa. I haven't
13 heard anything since we -- Cecilia and I had had a
14 couple of people who were contacted, but we haven't
15 heard anything, I haven't heard anything since then.

16 BOARD MEMBER MEYER: I've not heard anything,
17 either. And, I think, the last discussion was that the
18 board, the Governor's boards commission, I believe you
19 said, Vanessa, had reached out to you with two names.

20 MS. SKRINJARIC: Yes, that's correct.

21 BOARD MEMBER MEYER: Correct?

22 MS. SKRINJARIC: That's correct.

23 BOARD MEMBER MEYER: Yes. And I've not heard
24 from anybody, either.

25 BOARD MEMBER SAYEGH: Are we allowed to know

1 those names yet?

2 BOARD MEMBER MEYER: I only knew one of them,
3 only because she had reached out to me, but I cannot
4 remember who that person is. And let me see if I can
5 dig it up in an email.

6 BOARD MEMBER SAYEGH: Because at this point,
7 there's really no sense in encouraging other people to
8 apply if everything being bottlenecked at the Governor's
9 Office.

10 BOARD MEMBER MEYER: That's correct.

11 BOARD MEMBER SAYEGH: Yeah, so any new
12 applicants would have the same issue.

13 BOARD MEMBER MEYER: Correct. All I have is
14 that one is Leanne Kares with the Douglas County School
15 District.

16 BOARD MEMBER SAYEGH: Okay. I don't know her.

17 BOARD MEMBER MEYER: Yeah. And the last thing
18 I heard from her was dated Thursday, October 22nd, that
19 she stated she had received a response from Camber at
20 the boards and commissions the previous day, 10-21. She
21 says, "It basically said they are accepting and
22 processing applications, and I will be notified when an
23 appointment has been made."

24 BOARD MEMBER SAYEGH: October or November.
25 Okay. All right. I have nothing further. Thanks for

1 the update, Cecilia.

2 BOARD MEMBER MEYER: Okay. Item b., old and
3 new business. I have nothing there.

4 BOARD MEMBER SAYEGH: This is Suhair. I have
5 nothing.

6 BOARD MEMBER WILSON: This is Sharolyn. I have
7 nothing.

8 BOARD MEMBER MEYER: Okay.

9 BOARD MEMBER WILSON: Sorry.

10 BOARD MEMBER MEYER: No problem.

11 c., schedule of next meetings. And we have
12 them all listed here. I believe that we actually
13 calendared those during last month's meeting.

14 Is anybody aware of any changes to any of these
15 dates at this point in time?

16 BOARD MEMBER SAYEGH: None from me.

17 BOARD MEMBER WILSON: No, I have none.

18 BOARD MEMBER SAYEGH: Yeah, I'm okay with the
19 dates so far.

20 BOARD MEMBER MEYER: Okay. All right. Then,
21 item number 9, public comment. The opportunity for
22 public comment is reserved for any matter within the
23 jurisdiction of the Board. No action on such item can
24 be taken by the Board unless and until the matter has
25 been agendized as an action item. Comment from the

1 public is limited to three minutes per person.

2 I'm assuming that no public have appeared since
3 the beginning of this meeting?

4 MS. SKRINJARIC: No.

5 BOARD MEMBER MEYER: All right. Okay. Then, I
6 will accept a motion to adjourn.

7 BOARD MEMBER SAYEGH: This is Suhair. I will
8 make the motion to adjourn today's meeting.

9 BOARD MEMBER WILSON: This is Sharolyn. I'll
10 second that motion.

11 BOARD MEMBER MEYER: All right. All in favor?
12 (Board members said "aye.")

13 MS. SKRINJARIC: Thanks, everyone.

14 BOARD MEMBER MEYER: All righty. Thanks,
15 everybody.

16 BOARD MEMBER SAYEGH: Thanks, everybody.

17 BOARD MEMBER MEYER: And have nice holidays.

18 BOARD MEMBER WILSON: Merry Christmas. Happy
19 Easter.

20 BOARD MEMBER SAYEGH: Happy holidays.

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