

**State of Nevada - Budget Division  
Budget Highlight - 2015 - 2017 Biennium  
AGENCY REQUEST - All DU Type - Compact  
with DU Synopsis and Justification**

**Department:** 40 DEPARTMENT OF HEALTH AND HUMAN SERVICES  
**Division:** 402 DHHS - AGING AND DISABILITY SERVICES DIVISION

BA Priority	Dept. Priority	BA	BA Description	Dec Unit	General Fund FY 2016	Other FY 2016	Total 2016	General Fund FY 2017	Other FY 2017	Total 2017	FTE FY 2016	FTE FY 2017
0	0	3140	HHS-ADSD - TOBACCO SETTLEMENT PROGRAM	B000	0	5,177,900	5,177,900	0	5,177,900	5,177,900	0.00	0.00
<p>This request continues funding for sub-grantees and associated operating costs. One-time expenditures have been eliminated and partial year costs have been annualized.</p> <p>This request continues allocations from the Fund for a Health Nevada via the Independent Living Grants to sub-grantees for provision of comprehensive support services enabling older persons to remain at home and avoid institutional placement, as well as provide administrative support for division staff to maintain these sub-grants.</p>												
0	0	3140	HHS-ADSD - TOBACCO SETTLEMENT PROGRAM	M150	0	1,033,754	1,033,754	0	1,033,754	1,033,754	0.00	0.00
<p>This request adjusts base expenditures including eliminating one-time expenditures such as equipment, and adjusts for partial year costs for the continuation of programs.</p>												
<b>Total for Budget Account: 3140</b>					0	6,211,654	6,211,654	0	6,211,654	6,211,654	0.00	0.00

BA Priority	Dept. Priority	BA	BA Description	Dec Unit	General Fund FY 2016	Other FY 2016	Total 2016	General Fund FY 2017	Other FY 2017	Total 2017	FTE FY 2016	FTE FY 2017
0	0	3151	HHS-ADSD - FEDERAL PROGRAMS AND ADMINISTRATION	B000	3,642,434	17,007,647	20,650,081	3,667,732	17,163,005	20,830,737	118.51	118.51
<p>This request continues funding for 118.51 Full-Time Equivalent staff and their associated operating costs. One-time expenditures have been eliminated and partial year costs have been annualized.</p> <p>The state General Fund appropriation supports division administration, provides the required match for federal funds, and supplements older volunteer, senior transportation, and rural senior services programs. Federal funds are received from the Administration on Aging (AoA) under Title III and Title VII of the Older Americans Act (OAA). Additional federal funds are also received from AoA for Senior Medicare Patrol, the Department of Labor under Title V for the Senior Community Service Employment Program and the AoA Administration on Community Living for the State Health Insurance Assistance Program (SHIP). Other funding is received from the Taxicab Authority to operate the Taxi Assistance Program in Clark County.</p> <p>Staff includes Resource Development, Elder Rights' Long-Term Care Ombudsmen, the Elder Rights Attorney, and division administration (Human Resources, Information Technology, Fiscal staff, and the Administrator and associated staff).</p> <p>The Supportive Services Unit, which includes Resource Development, is responsible for grants administration, community resource development, the Taxi Assistance Program and Community Advocates for Elders Program. Other programs organizationally falling under the Supportive Services Unit include the State Health Insurance Assistance Program, the Senior Medicare Patrol Program and the Aging and Disability Resource Centers.</p> <p>The Elder Rights Unit is responsible for the Long-Term Care Ombudsman Program established under Title VII of the Older Americans Act. The Long-Term Care Ombudsman Program receives, investigates, and resolves complaints made by or on behalf of residents 60 years of age or older living in long-term care facilities.</p>												

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			<p>The Elder Rights Attorney was established in 1989 pursuant to NRS 427A.122 et seq., to comply with assurances required by the OAA. Funding for the Elder Rights Attorney consists of OAA administrative funds and state General Fund. The main responsibilities of this position include: elder rights policy review; analysis and advocacy; facilitating the development of legal services for older persons; coordination of elder abuse prevention programs and reporting of elder abuse; education of older persons and others regarding the rights of older persons; and support of the Elder Protective Services and Ombudsman programs.</p>									
0	0	3151	HHS-ADSD - FEDERAL PROGRAMS AND ADMINISTRATION	M150	-66,696	1,241,965	1,175,269	-59,257	1,385,517	1,326,260	0.00	0.00
			<p>This request adjusts base expenditures including eliminating one-time expenditures such as equipment, and adjusts for partial year costs for the continuation of programs.</p> <p>The number of people and the services they receive are phased in over the course of the biennium. This request adjusts fiscal year 2014 (Base Year) expenditures so services can be maintained for all individuals receiving services throughout the current biennium. Other adjustments include longevity pay, annualizing staff travel, contract rate changes, lease rate changes, equipment purchases, and data purchases.</p>									
0	0	3151	HHS-ADSD - FEDERAL PROGRAMS AND ADMINISTRATION	M100	1,776	97,072	98,848	1,776	88,651	90,427	0.00	0.00
			<p>This request reflects rate changes for internal service funds such as the Attorney General, Motor Pool, information technology services, state-owned building rent, vehicle insurance, personnel assessments, and property and contents insurance.</p>									
0	0	3151	HHS-ADSD - FEDERAL PROGRAMS AND ADMINISTRATION	M200	371,462	0	371,462	432,019	0	432,019	7.00	7.00
			<p>The purpose of this decision unit is to request caseload growth for the Long-Term Care Ombudsman program. This program has not previously had a Legislatively approved caseload; however, in working the Budget Division, this was deemed appropriate to allow the program to maintain desired levels of service. This request includes seven additional Full-Time Equivalent staff: one Social Work Supervisor, four Administrative Assistants to act as intake coordinators, and two quality assurance positions. The caseload is projected to increase from 6,983 average monthly activities and cases at the end of Fiscal Year 2014 to 7,547 average monthly cases at the end of Fiscal Year 2017, an increase of 8.1 percent. This will translate into a staffing ratio of one staff member per 37 average activities/cases per month, versus the current workload of 61 average activities/cases per month.</p> <p>Assuring that residents of long term care facilities have regular and timely access to an Ombudsman allows residents to resolve complaints and concerns before they become bigger issues. Ombudsmen work with the residents to assist them and their families to advocate for themselves and work with facilities to resolve conflicts.</p> <p>Research shows that implementation of quality management programs assists agencies to identify weaknesses, faults, areas for improvement and strengths. This information provides the program the ability to set policy and procedure, make adjustments as needed, offer greater customer service to program participants, and to provide community education about the program's service delivery.</p>									

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			<p>4 Administrative Assistant 3's and a Social Work Supervisor 1 are critical to the Division to ensure timely access to Elder Rights programs and to provide quality customer service to the public. Call centers across the nation use a mathematical equation known as the Erlang-C calculation. Using the calculation ADSD is in need of an additional 4 Administrative Assistant III's and a Social Worker Supervisor I in order to answer calls placed to the intake line with a live person 98% of the time. When callers do not reach a live person, response times for seniors and vulnerable adults in high risk situations is delayed and can result in serious harm or even death.</p>									
27	9999	3151	HHS-ADSD - FEDERAL PROGRAMS AND ADMINISTRATION	E550	0	48,284	48,284	0	146,124	146,124	3.00	3.00
			<p>The purpose of this decision unit is to add three additional Full-Time Equivalent information technology positions in support of migration of Nevada Early Intervention Services to the Harmony Information System platform used by other programs within the division. This is a companion decision unit to E550 in budget account 3208 and E550 in budget account 3266.</p> <p>The Division has no information technology positions available to support the additional growth of the Developmental Services case management system. As Nevada Early Intervention Services will also be implementing the same model, this request will facilitate adequate coverage for agency information technology staffing needs. Additionally, these new state positions will reduce the Division's usage of contract programmer staff, which costs the State significantly more on a per hour basis. These costs are reduced in companion decision unit E550 in budget account budget account 3266.</p>									
28	9999	3151	HHS-ADSD - FEDERAL PROGRAMS AND ADMINISTRATION	E225	23,921	153,145	177,066	39,817	155,660	195,477	5.00	5.00
			<p>The purpose of this decision unit is to add five additional Full-Time Equivalent information technology and administrative staff to support the agency staff and providers. This also helps reduce the reliance on contracted programmers for maintenance and support. The Division requests to add one Administrative Assistant 2, one IT technician 6 and three IT Professional 2.</p> <p>Currently, contract programming staff are developing and supporting the Social Assistance Management System (SAMS) application for the Division. These positions help ADSD conform with Department of Health and Human Services Temporary Employment Services policy and moves these ongoing duties to state positions. The Division has no information technology positions available to support the additional growth of the Developmental Services case management system. As Nevada Early Intervention Services will also be implementing the same model, this request will facilitate adequate coverage for agency information technology staffing needs. This is a companion decision unit with budget account 3266 E227.</p>									
31	9999	3151	HHS-ADSD - FEDERAL PROGRAMS AND ADMINISTRATION	E228	0	73,000	73,000	0	73,000	73,000	0.00	0.00
			<p>The purpose of this decision unit is to maintain support for the Alzheimer's Commission. The Division processed a work program in state fiscal year 14 to start the program in state fiscal year 15; therefore, the cost of supporting the commission is not contained in the base budget.</p>									

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Budget Highlight - 2015 - 2017 Biennium  
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			Per NRS 439.5083 the Department of Health and Human Services was required to create an Alzheimer's task force to monitor/update an established five year strategic plan. Historically, the Division has provided state staff to assist the task force but lacks the man power to adequately support them. The part time contracted support staff will relieve some of the work load for state staff. The requested travel funding will allow for 10 members to meet 4 times per year to discuss strategic planning of the Alzheimer's Program within the Division. The funds will be used to pay for meeting space, travel for the members, interpreters when needed, operating supplies and one part-time contracted staff member. These duties will include; setting meetings, creating and posting agendas, otherwise assuring compliance with open meeting laws, and developing/maintaining documentation/progress reports.									
33	9999	3151	HHS-ADSD - FEDERAL PROGRAMS AND ADMINISTRATION	E278	88,359	0	88,359	97,282	0	97,282	2.00	2.00
			The purpose of this decision unit is to convert two contracted administrative positions to state positions. This will add one Administrative Assistant 1 and one Administrative Assistant 2 to the State Health Insurance Assistance Program (SHIP).									
			These positions are crucial to assure the Nevada SHIP Medicare toll free helpline is answered by a live person, and that support to the SHIP Director, staff and volunteers is consistent with the increasing needs of the program. Last year NV SHIP assisted 36,698 callers using the toll free helpline and backup number statewide. Nevada has approximately 410,000 Medicare beneficiaries and the SHIP program served 18,523 people in 2013. There is substantial need for the program to have Benefit Counseling staff available to serve more people in a neutral manner. Providing beneficiaries with their choices in healthcare and helping them understand the complexities of insurance with frequently changing rules will result in better health for the increasing Medicare population in Nevada. This assistance saves many Medicare consumers thousands of dollars in less expensive premiums and more appropriate benefit levels. This, in turn, potentially saves Nevada money by reducing the need for additional services because of a lack of resources these individuals may otherwise experience with higher out of pocket insurance and health care costs. Federal funding provided to SHIP does not sustain the staffing needs to meet the increased number of Medicare beneficiaries aging into Medicare or the current number of beneficiaries in Nevada. As the rules change within Medicare and Medicaid, beneficiaries, their families and new beneficiaries need to speak with someone to help navigate the system, assist in interpreting the rules and facilitate health care options, once provided with choices. This decision will allow the program to have sufficient infrastructure to continue to serve this population within the available federal grant funds by increasing state support.									
35	9999	3151	HHS-ADSD - FEDERAL PROGRAMS AND ADMINISTRATION	E805	3,765	25,198	28,963	3,808	25,486	29,294	0.00	0.00
			The purpose of this decision unit is to re-classify information technology positions to better align them with the duties that they actually perform. The Division requests to re-classify three IT Professional 2's to IT Professional 3's and one IT Technician 4 to a IT Technician 5.									
			Currently the information systems unit has staff that are performing higher level duties that are not aligned with their class specifications. This is required due to the heavy workloads of higher classified staff. Additionally, the current grade for these positions makes it difficult to recruit and hire staff qualified for these duties.									
38	9999	3151	HHS-ADSD - FEDERAL PROGRAMS AND ADMINISTRATION	E720	9,708	22,480	32,188	0	0	0	0.00	0.00
			The purpose of this decision unit is to request video conferencing equipment for the Aging and Disability Services Division offices in Carson City that do not currently have this capability.									

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			Establishing additional video conferencing capabilities throughout the state will allow for more accessibility, especially for the rural communities to better assist with outreach, trainings, one on one counseling, staff consultation and staff collaboration.									
39	9999	3151	HHS-ADSD - FEDERAL PROGRAMS AND ADMINISTRATION	E710	26,422	30,091	56,513	21,789	26,400	48,189	0.00	0.00
			The purpose of this decision unit is to maintain the 5 year equipment replacement plan for personal computers. This will help ensure that that personal health information is protected.									
			Maintaining the 5 year equipment plan is crucial to maintain high productivity. Using old and outdated technology reduces productivity and efficiency, not to mention increases the risk of compromising personal health information. See equipment schedule.									
40	9999	3151	HHS-ADSD - FEDERAL PROGRAMS AND ADMINISTRATION	E229	1,677	11,223	12,900	1,677	11,223	12,900	0.00	0.00
			The purpose of this decision unit is to request additional funding for information technology staff to attend technology specific training. Three Information Technology Staff will take part in various IT training plans.									
			Historically, the Division has not provided for information technology specific training. As new technology is released and adopted by the Division, training is needed to maintain and repair these systems and abide by HIPAA regulations. There are no travel costs associated with these training plans.									
47	9999	3151	HHS-ADSD - FEDERAL PROGRAMS AND ADMINISTRATION	E232	4,946	19,230	24,176	4,561	16,913	21,474	0.00	0.00
			The purpose of this decision unit is to request additional travel funding for Division Administration, Information Technology staff, and Fiscal staff.									
			Historically, information technology staff have not requested travel funding in the their budget. This funding will ensure that they are able to travel when needed for equipment repairs, deployment of equipment and meetings. Fiscal services management is in need of providing support and leadership to fiscal services staff in Las Vegas.									
			Administration needs to attend out of state conferences to stay abreast of current issues concerning the aging and those with disabilities.									
48	9999	3151	HHS-ADSD - FEDERAL PROGRAMS AND ADMINISTRATION	E711	918	1,662	2,580	1,836	3,324	5,160	0.00	0.00
			The purpose of this decision unit is to replace the van that is utilized by the IT unit in Las Vegas.									
			The van is a 1997 Ford JS31 and had 95,805 miles as of May 20, 2014. It will be driven approximately 500 miles per month and will exceed the 100,000 mark in approximately February 2015. Its age and increasing mileage warrant replacement.									

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49	9999	3151	HHS-ADSD - FEDERAL PROGRAMS AND ADMINISTRATION	E233	1,767	11,828	13,595	1,209	8,091	9,300	0.00	0.00
			<p>The purpose of this decision unit is to increase the bandwidth in the Elko office.</p> <p>During business hours, the Elko office's bandwidth is insufficient to adequately perform job functions in a timely manner. The bandwidth needs to be upgraded to allow staff to use computer and video resources effectively.</p>									
53	9999	3151	HHS-ADSD - FEDERAL PROGRAMS AND ADMINISTRATION	E722	918	1,662	2,580	1,836	3,324	5,160	0.00	0.00
			<p>The purpose of this decision unit is to request a vehicle for the information technology unit to utilize in Northern Nevada.</p> <p>IT staff provide support for Carson City, Reno and rural communities. They often transport IT equipment with them and need a vehicle with sufficient cargo space.</p>									
55	9999	3151	HHS-ADSD - FEDERAL PROGRAMS AND ADMINISTRATION	E712	88,351	204,572	292,923	43,961	101,789	145,750	0.00	0.00
			<p>The purpose of this decision unit is to replace equipment and software as needed and to adhere to the state 5 year equipment replacement plan for information systems infrastructure. This includes such items as routers, switches, Microsoft Office 365 licenses, backup tapes, etc. Such items will also help the Division maintain the security of personal health information.</p> <p>Maintaining the 5 year equipment plan is crucial to maintain high productivity. Using old and outdated technology reduces productivity and efficiency, not to mention increases the risk of compromising personal health information. See equipment schedule.</p>									
57	9999	3151	HHS-ADSD - FEDERAL PROGRAMS AND ADMINISTRATION	E282	100,000	0	100,000	0	0	0	0.00	0.00
			<p>The purpose of this decision unit is to request \$100,000 to update the expired Strategic Plan for Senior Services. This Plan is used for the development of service program revisions and additions that are congruent with identified current needs and that allow for service provision in the community rather than in an institution.</p> <p>The Aging and Disability Services Division (ADSD) is now a life-span agency responsible for the development of program initiatives for both Senior Services and for Persons with Disabilities that promote services in the most integrated setting. ADSD needs renewed and facilitated strategic input from stakeholders to assure needs of Nevada citizens and family care givers are met. Additionally, ADSD needs to prepare for an increasing number of senior citizens requiring services and access assistance to home and community services rather than to pay for expensive medical and institutional services.</p>									
58	9999	3151	HHS-ADSD - FEDERAL PROGRAMS AND ADMINISTRATION	E808	7,292	11,405	18,697	7,629	11,932	19,561	0.00	0.00

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			<p>The purpose of this decision unit is to reclassify six Administrative Assistant 1's to Administrative Assistant 2's.</p> <p>The role of the incumbents has increased in responsibilities and complexity over the years as programs have grown and expanded. The incumbents are required to have increased knowledge of the various programs that have multiple eligibility criteria and services. The incumbents participate in covering intake calls and provide information and referrals as well as routing calls or visitors to various units for more in depth issues. The individuals seeking services have complex medical, social and behavioral needs that must be considered. The incumbents must be adept at skills involving use of specialized software, web based programs, Microsoft Office, data entry and word processing. Expertise and tasks required for the incumbents extends beyond general office duties. Knowledge of operations and resources as well as dealing with individuals across the life span that have a disability or are aging is required to promote independence in the community and avoidance of institutionalization.</p>									
61	9999	3151	HHS-ADSD - FEDERAL PROGRAMS AND ADMINISTRATION	E723	4,585	10,616	15,201	0	0	0	0.00	0.00
			<p>The purpose of this decision unit is to request video conferencing equipment for the Aging and Disability Services Division office in Las Vegas.</p> <p>Establishing video conferencing capabilities throughout the state will allow for more accessibility, especially for the rural communities to better assist with outreach, trainings, one on one counseling, staff consultation and staff collaboration.</p>									
66	9999	3151	HHS-ADSD - FEDERAL PROGRAMS AND ADMINISTRATION	E234	17,080	105,775	122,855	21,103	115,639	136,742	2.00	2.00
			<p>The purpose of this decision unit is to add two Full-Time Equivalent information technology (IT) staff to support project management. The Division is requesting a Business Process Analyst 3 and an IT Manager 1.</p> <p>Currently, Division IT staff are behind on providing proper project documentation and change controls with change management. Projects currently go into indefinite requirements gathering due to the lack of proper project planning upfront. MSA's are developing project requirements for SAMS which would transfer to state staff. These positions help ADSD conform with Department of Health and Human Services Temporary Employment Services policy and moves these ongoing duties to state positions. While the Division is transitioning to a single case management system, additional state staff are needed to provide ongoing project management as well as planning of an online community based resource portal. The Division has no information technology positions available to support the additional growth of the Developmental Services case management system. As Nevada Early Intervention Services will also be implementing the same model, this request will facilitate adequate coverage for agency information technology staffing needs. This is a companion decision unit with budget account 3266 E229.</p>									
67	9999	3151	HHS-ADSD - FEDERAL PROGRAMS AND ADMINISTRATION	E724	45,616	105,622	151,238	15,436	35,742	51,178	0.00	0.00
			<p>The purpose of this decision unit is add equipment and software necessary to ensure personal health information is properly protected, and to stay up to date with current technology.</p> <p>Providing this equipment is crucial to the Division in order to adequately safeguard customer health information, and to ensure productivity is met by staff. Using old and outdated technology increases data security risk and reduces productivity and efficiency. See equipment schedule.</p>									

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71	9999	3151	HHS-ADSD - FEDERAL PROGRAMS AND ADMINISTRATION	E809	9,090	0	9,090	9,046	0	9,046	0.00	0.00

The purpose of this decision unit is to reclassify a Social Services Chief 2 to a Social Services Chief 3 due to expansion and added complexity of the program being managed.

The requirements of the State Long Term Care Ombudsman (SLTCOP) is expressed through language in the Older Americans Act which mandates that the State Long Term Care Ombudsman Program represent the interests of residents before governmental agencies and seek administrative, legal, and other remedies to protect the health, safety, welfare, and rights of residents. The program continues to grow in scope and complexity requiring a higher level of program management by the Social Service Chief (SSC). Additionally, the SSC must analyze, comment on, and monitor the development and implementation of federal, state, and local laws, regulations and other governmental policies and actions, that pertain to the health, safety, welfare, and rights of long-term care residents with respect to the adequacy of long-term care facilities and services in the State. The SSC must recommend changes in such laws, regulations, policies and actions as appropriate and facilitate public comment. In addition, the programs must promote the development of and provide assistance to citizen advocacy groups that want to protect the well-being and rights of residents. This upgrade would align the position more closely with other Social Services Chiefs in the Department who are managing similar programs in complexity.

72	9999	3151	HHS-ADSD - FEDERAL PROGRAMS AND ADMINISTRATION	E810	0	2,818	2,818	0	2,938	2,938	0.00	0.00
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The purpose of this decision unit is to reclassify a Social Services Manager 1 to a Social Services Manager 2 due to expansion and added complexity of the program being managed.

The complexity of the SSML's position is expressed through language in the Older Americans Act which mandates that SLTCOPs represent the interests of residents before governmental agencies and seek administrative, legal, and other remedies to protect the health, safety, welfare, and rights of residents. Additionally, programs must analyze, comment on, and monitor the development and implementation of federal, state, and local laws, regulations and other governmental policies and actions, that pertain to the health, safety, welfare, and rights of long-term care residents with respect to the adequacy of long-term care facilities and services in the State. Programs must recommend changes in such laws, regulations, policies and actions as appropriate and facilitate public comment. In addition, the programs must promote the development of, and provide assistance to, citizen advocacy groups that want to protect the well-being and rights of residents.

Furthermore, per statutory authority, the Division Administrator has directed staff to advocate for all persons within skilled nursing facilities, regardless of age. Providing advocacy to residents under the age of 60 adds an additional layer of complexity wherein the SSML must acquire and maintain knowledge of different acute medical conditions, programs and services available, along with monitoring regulations or laws that impact this population.

75	9999	3151	HHS-ADSD - FEDERAL PROGRAMS AND ADMINISTRATION	E814	949	10,912	11,861	983	11,310	12,293	0.00	0.00
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The purpose of this decision unit is to upgrade a Personnel Officer 2 to a Personnel Officer 3.

In the 2013 legislative session, Developmental Services and Early Intervention Services merged into the Aging and Disability Services Division (ADSD). As part of the merger, staff was pulled from the different divisions as they reformed into Public and Behavioral Health and ADSD. At the time of the merger, ADSD had a much smaller organization. The Division now includes close to 900 employees across a wide variety of occupation groups. The Division also maintains a 24/7 facility for persons with intellectual disabilities. The level of complexity in the Division has grown and has prompted this request.

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76	9999	3151	HHS-ADSD - FEDERAL PROGRAMS AND ADMINISTRATION	E815	6,503	0	6,503	6,750	0	6,750	0.00	0.00
<p>The purpose of this decision unit is to upgrade a Social Services Chief 2 to a Social Services Chief 3.</p> <p>The current Social Services Chief 2 position oversees the Supportive Services Unit (SSU) which facilitates a complex variety of programs aimed at meeting the needs of seniors, caregivers and individuals with disabilities across the lifespan. Due to an increase in the complexity and changes across the aging and disability services system, the Social Services Chief 2 position should be upgraded. The duties of this position include exercising direct responsibility over budgets, policy and procedures, regulations, system planning and building and development/monitoring of all programs under the SSU.</p> <p>This position has gone through several expansions in scope and the addition of complex responsibilities over the past several years. Specifically, there have been changes to the vendor management and provider network oversight due to decreased funding along with population growth which requires prioritization and collaboration on multiple levels. This position also provides additional oversight of discretionary grants that has occurred over the past few years such as the Aging and Disability Resource Centers (ADRCs) program, respite/caregiver and Alzheimer's grants. This has also resulted in a need to utilize data systems and monitor reports for agency compliance. The incumbent has been required to understand several data systems to assure agency compliance. Lastly, this position now provides oversight of building operations for the Las Vegas office and supervision of one (1) additional Program Officer 2 position.</p>												
85	9999	3151	HHS-ADSD - FEDERAL PROGRAMS AND ADMINISTRATION	E285	76,076	0	76,076	76,076	0	76,076	0.00	0.00
<p>The purpose of this decision unit is to establish funding for the Governor's Taskforce on Integrated Employment that was established by Executive Order 2014-16.</p> <p>This taskforce shall be responsible for examining and evaluating current employment programs, resources, funding, available training and employment opportunities for individuals with intellectual/developmental disabilities, and shall provide a report to the Governor on or before July 1, 2015, setting forth their findings as well as a three, five and ten-year strategic plan for creating a more integrated workforce and expanding complete employment opportunities for individuals with intellectual/developmental disabilities.</p>												
86	9999	3151	HHS-ADSD - FEDERAL PROGRAMS AND ADMINISTRATION	E286	43,458	0	43,458	43,458	0	43,458	0.00	0.00
<p>The purpose of this decision unit is to establish funding in support of the Governor's Commission On Aging.</p> <p>The requested funding will allow for Committee and Sub Committee members to meet quarterly each state fiscal year and the Subcommittee on Legislative Issues to meet once per fiscal year. The funds will be used to pay for meeting space when needed, travel for the members, interpreters when needed and operating supplies.</p>												
88	9999	3151	HHS-ADSD - FEDERAL PROGRAMS AND ADMINISTRATION	E816	473	5,437	5,910	490	5,633	6,123	0.00	0.00
<p>The purpose of this decision unit is to upgrade a Personnel Technician 3 to a Personnel Analyst 1.</p>												

**State of Nevada - Budget Division  
 Budget Highlight - 2015 - 2017 Biennium  
 AGENCY REQUEST - All DU Type - Compact  
 with DU Synopsis and Justification**

BA Priority	Dept. Priority	BA	BA Description	Dec Unit	General Fund FY 2016	Other FY 2016	Total 2016	General Fund FY 2017	Other FY 2017	Total 2017	FTE FY 2016	FTE FY 2017
			<p>In the 2013 legislative session, Developmental Services and Early Intervention Services merged into the Aging and Disability Services Division (ADSD). As part of the merger, staff was pulled from the different divisions as they reformed into Public and Behavioral Health and ADSD. At the time of the merger, ADSD had a much smaller organization and utilized technicians as their primary personnel staff class. The Division now includes close to 900 employees across a wide variety of occupation groups. The Division also maintains a 24/7 facility for persons with intellectual disabilities. The level of complexity in the Division has grown and has prompted this request.</p>									
89	9999	3151	HHS-ADSD - FEDERAL PROGRAMS AND ADMINISTRATION	E231	3,946	45,385	49,331	4,593	52,825	57,418	1.00	1.00
			<p>The purpose of this decision unit is to add one additional Full-Time Equivalent Personnel Technician 3 within Aging and Disability Services.</p> <p>Because several agencies merged into the Division of Aging and Disability Services Division (ADSD) 7/1/13 which caused our HR office to be responsible for an additional 574 positions for Desert Regional Center, Nevada Early Intervention Services, and Aging Services in Southern Nevada. The personnel office needs additional staff to accommodate the increase in personnel transactions required; such as, recruitment, new hire paperwork and orientation, tracking part time hours for MSI and permanent status, maintaining personnel employee files, monthly evaluation tracking, copying and forwarding to Division, employee personal information updates, maintaining the position roster, alpha roster, action log, and organization chart, maintaining the evaluation due list, verifying with Central Records current and previous employment, fingerprinting and tracking fingerprinting due dates, processing requests for pre-employment physicals and two-step Tuberculosis tests, advising employees and supervisors of policy information and updates as needed.</p>									
91	9999	3151	HHS-ADSD - FEDERAL PROGRAMS AND ADMINISTRATION	E236	0	0	0	75,571	176,770	252,341	0.00	3.00
			<p>The purpose of this decision unit is to create a Rates and Cost Containment Unit with one Rates and Cost Containment Manger and two Management Analyst 3's.</p> <p>The Aging and Disability Services Division (ADSD) provides a number of services through contract providers in the community. Adequate rates of reimbursement are vital to ADSD's ability to implement its mission of providing for integrated services across the lifespan that support independence and choice. Establishing appropriate rates would assure a safety net for vulnerable populations; allow providers to offer competitive salaries and benefits so that employees remain on the job, gathering experience and providing a basis for consistency and continuity of care; compensate providers for professional development and ongoing training for their staff; and provide motivation for providers to develop best practices and specialized skills and expertise necessary to support people who have intensive support needs.</p> <p>Historically, rate tracking and development has been inconsistent in methodology. The Division does not currently have the capacity to track and update rates in order to adequately compensate providers. Furthermore, ADSD does not currently have the capacity to anticipate and plan for future rate adjustments. Finally, ADSD does not currently have the capacity to maximize revenue sources and determine what opportunities exist to strengthen our Federal funding sources.</p> <p>The proposed solution would be the formation of a small rates and cost containment unit. The unit would be led by a Rates and Cost Containment Manager (grade 41) and include two new Management Analysts. Two existing management analysts who monitor and track contracts and provider agreements would be folded into this unit. This unit would be tasked with maintaining contracts, monitoring rates for services, proposing changes to rates, and monitoring revenue sources to ensure the Division is maximizing revenue whenever possible.</p>									
92	9999	3151	HHS-ADSD - FEDERAL PROGRAMS AND ADMINISTRATION	E502	0	0	0	0	0	0	0.00	0.00

**State of Nevada - Budget Division  
Budget Highlight - 2015 - 2017 Biennium  
AGENCY REQUEST - All DU Type - Compact  
with DU Synopsis and Justification**

BA Priority	Dept. Priority	BA	BA Description	Dec Unit	General Fund FY 2016	Other FY 2016	Total 2016	General Fund FY 2017	Other FY 2017	Total 2017	FTE FY 2016	FTE FY 2017
			This decision unit corrects the funding for E902.									
93	9999	3151	HHS-ADSD - FEDERAL PROGRAMS AND ADMINISTRATION	E503	-173,386	173,386	0	-177,613	177,613	0	0.00	0.00
			This decision unit corrects the funding for E903.									
94	9999	3151	HHS-ADSD - FEDERAL PROGRAMS AND ADMINISTRATION	E226	1,355	15,577	16,932	1,355	15,577	16,932	0.00	0.00
			The purpose of this decision unit is to request additional resources for the Division's personnel unit to advertise on various media and social media outlets for vacant positions that are difficult to recruit.									
			Historically, the Division has had a very difficult time recruiting and retaining positions in the medical and social worker fields. These challenges are due to increased pressure from other public agencies and private entities who pay substantially more than the state offers. This has resulted in perpetual vacant positions which has increased caseload of existing staff substantially affecting how services are delivered to our clients. By advertising through various media outlets, the agency will have the ability to reach more potential candidates in our communities, throughout the state and nationwide.									
95	9999	3151	HHS-ADSD - FEDERAL PROGRAMS AND ADMINISTRATION	E902	0	66,677	66,677	0	68,987	68,987	1.00	1.00
			The purpose of this decision unit is to move a Management Analyst 1 from budget account 3156 - Senior RX and Disability RX to budget account 3151 - Federal Programs and Administration.									
			The duties carried out by this position cover multiple programs and would be more properly aligned with the Federal Programs and Administration budget account.									
96	9999	3151	HHS-ADSD - FEDERAL PROGRAMS AND ADMINISTRATION	E903	173,386	0	173,386	177,613	0	177,613	2.00	2.00
			The purpose of this decision unit is to move a Social Services Program Specialist 2 and a Social Services Chief 1 from budget account 3266 - Home and Community Based Services to budget account 3151 - Federal Programs and Administration.									
			The duties carried out by this position cover multiple programs and would be more properly aligned with the Federal Programs and Administration budget account.									
97	9999	3151	HHS-ADSD - FEDERAL PROGRAMS AND ADMINISTRATION	E490	0	-4,698	-4,698	0	-4,698	-4,698	0.00	0.00
			State Volunteer Engagement Plan grant is expired.									

**State of Nevada - Budget Division  
Budget Highlight - 2015 - 2017 Biennium  
AGENCY REQUEST - All DU Type - Compact  
with DU Synopsis and Justification**

BA Priority	Dept. Priority	BA	BA Description	Dec Unit	General Fund FY 2016	Other FY 2016	Total 2016	General Fund FY 2017	Other FY 2017	Total 2017	FTE FY 2016	FTE FY 2017
			<p>Since this funded a temporary position to develop training materials, recruitment materials, policies and procedures and a volunteer handbook for volunteers that are managed at the grantee level, and since this was all then handed off to local sites, the Division anticipates no impact to the Aging and Disability Resource Center program as a result of eliminating this funding.</p>									
98	9999	3151	HHS-ADSD - FEDERAL PROGRAMS AND ADMINISTRATION	E491	0	-148,462	-148,462	0	-148,462	-148,462	0.00	0.00
			<p>Money Follows the Person (MFP) grant has expired.</p> <p>This was established under a supplemental funding opportunity offered through the Center for Medicaid Services to enhance outreach efforts of the Money Follows the Person program administered by the Division of Healthcare Financing and Policy (DHCFP). This funding helped to build infrastructure for outreach and education for both the general public and service providers including outreach materials, transition handbooks for consumers, and an informational website imbedded into Nevada's Virtual Resource Center (<a href="http://www.nevadaadrc.com">www.nevadaadrc.com</a>). The loss of this decision unit will have a minimal impact on the overall maintenance of Nevada's Virtual Resource Center for any future support or maintenance needs associated with the web component developed under this project. Additionally, a portion of this funding supported direct service in the form of Options Counseling to help consumers plan for future long term needs. The impact to the availability of those services will be minimal as the state pursues additional funding options to maintain and increase the availability of this service.</p>									
99	9999	3151	HHS-ADSD - FEDERAL PROGRAMS AND ADMINISTRATION	E237	0	641,743	641,743	0	0	0	0.00	0.00
			<p>The purpose of this decision unit is to request additional authority for completion of the Balancing Incentive Payments Program (BIPP) Grant. In SFY 15, the division processed Work Program #31468 to request additional authority to begin bringing in the bulk of the funding to start the project. This decision unit is requesting the remaining funds that are available for SFY 16.</p> <p>The Division of Health Care Financing and Policy (DHCFP) has entered into an Interlocal Contract with the Aging and Disability Service Division to provide federal funding to develop enhancements to the Harmony Case Management System. These enhancements will provide timely financial eligibility determinations which will improve access to available services and support for the division's clients. Providing funding for this project is a benchmark of the grant that DHCFP received.</p>									
<b>Total for Budget Account: 3151</b>					4,516,151	19,991,252	24,507,403	4,522,536	19,730,313	24,252,849	141.51	144.51

BA Priority	Dept. Priority	BA	BA Description	Dec Unit	General Fund FY 2016	Other FY 2016	Total 2016	General Fund FY 2017	Other FY 2017	Total 2017	FTE FY 2016	FTE FY 2017
0	0	3156	HHS-ADSD - SENIOR RX AND DISABILITY RX	B000	0	3,443,465	3,443,465	0	3,448,982	3,448,982	3.00	3.00
			<p>This request continues funding for three Full-Time Equivalent positions and their associated operating costs. One-time expenditures have been eliminated and partial year costs have been annualized.</p> <p>This Nevada Senior RX and Disability RX programs assist eligible applicants in obtaining essential prescription medications by subsidizing the cost for medication and help with monthly premium payments.</p>									

**State of Nevada - Budget Division  
Budget Highlight - 2015 - 2017 Biennium  
AGENCY REQUEST - All DU Type - Compact  
with DU Synopsis and Justification**

BA Priority	Dept. Priority	BA	BA Description	Dec Unit	General Fund FY 2016	Other FY 2016	Total 2016	General Fund FY 2017	Other FY 2017	Total 2017	FTE FY 2016	FTE FY 2017
0	0	3156	HHS-ADSD - SENIOR RX AND DISABILITY RX	M150	0	-121,671	-121,671	0	-124,901	-124,901	0.00	0.00
<p>This request adjusts base expenditures including eliminating one-time expenditures such as equipment, and adjusts for partial year costs for the continuation of programs.</p> <p>The number of people and the services they receive are phased in over the course of the biennium. This request adjusts fiscal year 2014 (Base Year) expenditures so services can be maintained for all individuals receiving services throughout the current biennium. Other adjustments include longevity pay, annualizing staff travel, contract rate changes, lease rate changes, equipment purchases, and data purchases.</p>												
0	0	3156	HHS-ADSD - SENIOR RX AND DISABILITY RX	M100	0	260	260	0	260	260	0.00	0.00
<p>This request reflects rate changes for internal service funds such as the Attorney General, Motor Pool, information technology services, state-owned building rent, vehicle insurance, personnel assessments, and property and contents insurance.</p>												
2	9999	3156	HHS-ADSD - SENIOR RX AND DISABILITY RX	E710	0	2,591	2,591	0	288	288	0.00	0.00
<p>The purpose of this decision unit is to adhere to the state 5 year equipment replacement plan for personal computers.</p> <p>This request ensures that staff have updated technology to perform their jobs effectively and efficiently.</p>												
5	9999	3156	HHS-ADSD - SENIOR RX AND DISABILITY RX	E800	0	67,032	67,032	0	69,358	69,358	0.00	0.00
<p>This request adjusts the agency's cost allocation for supportive services.</p>												
6	9999	3156	HHS-ADSD - SENIOR RX AND DISABILITY RX	E902	0	-66,677	-66,677	0	-68,987	-68,987	-1.00	-1.00
<p>The purpose of this decision unit is to move a Management Analyst 1 position from budget account 3156 - Senior RX and Disability RX to budget account 3151 - Federal Programs and Administration.</p> <p>The duties carried out by this position cover multiple programs and would be more properly aligned with the Federal Programs and Administration budget account.</p>												
<b>Total for Budget Account: 3156</b>					0	3,325,000	3,325,000	0	3,325,000	3,325,000	2.00	2.00
BA Priority	Dept. Priority	BA	BA Description	Dec Unit	General Fund FY 2016	Other FY 2016	Total 2016	General Fund FY 2017	Other FY 2017	Total 2017	FTE FY 2016	FTE FY 2017
0	0	3166	HHS-ADSD - FAMILY PRESERVATION PROGRAM	B000	1,472,978	1,200,000	2,672,978	1,472,978	1,200,000	2,672,978	0.00	0.00

**State of Nevada - Budget Division  
Budget Highlight - 2015 - 2017 Biennium  
AGENCY REQUEST - All DU Type - Compact  
with DU Synopsis and Justification**

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			<p>This request continues funding for program operating costs. One-time expenditures have been eliminated and partial year costs have been annualized.</p> <p>The Family Preservation Program presently pays a monthly stipend established by legislative appropriation, for each fiscal year to all qualifying applicants (NRS 435.365).</p>									
0	0	3166	HHS-ADSD - FAMILY PRESERVATION PROGRAM	M150	96,118	0	96,118	96,118	0	96,118	0.00	0.00
			<p>This request adjusts base expenditures including eliminating one-time expenditures such as equipment, and adjusts for partial year costs for the continuation of programs.</p> <p>This decision unit adjusts the base to reflect the people phased in during Fiscal Year 14 and Fiscal Year 15, as projected by CLEO (617 people by June 30, 2015) at the Legislatively-Approved monthly payment amount of \$374.00 per month. The Legislatively Approved Fiscal Year 15 caseload for this program is 626 people by June 30, 2015. By statute (NRS 435.365), all eligible applicants must be included in the caseload and each participant must receive a monthly payment.</p> <p>This decision unit adjusts the beginning caseload as of July 2015, to 617, which is the latest updated CLEO projection. The amount is computed as follows: Fiscal Year 14 ending caseload of 601 families x \$374/mo x 12 months = \$2,697,288 less actual Fiscal Year 14 expense of \$2,672,978 = \$24,310; additional caseload projected Fiscal Year 15, 16 families x \$374/mo x 12 months = \$71,808; \$24,310 + \$71,808 = \$96,118.</p>									
0	0	3166	HHS-ADSD - FAMILY PRESERVATION PROGRAM	M200	43,758	0	43,758	128,282	0	128,282	0.00	0.00
			<p>This request funds caseload growth for the Family Preservation Program (FPP). Caseloads are projected to increase from a Legislatively approved 626 to 654 in fiscal year 2017.</p> <p>This decision unit provides funding for caseload growth during Fiscal Year 16 and Fiscal Year 17 at the Fiscal Year 07 Legislatively Approved rate of \$374. The caseload projection is based on the CLEO (DHHS - Caseload Evaluation Organization) methodology of using a linear regression 36 months ending June 2014. A linear regression is the midpoint of projected cases and as such, will be low 50% of the time and high 50% of the time.</p> <p>Caseload projections (CLEO) estimate that an additional 18 FPP participants will be added in Fiscal Year 2015-16 and another 19 participants in Fiscal Year 2016-17, a total of 37 participants, to be added over the 2015-17 biennium.</p> <p>The caseload is projected to increase from 601 at the end of fiscal year 2014 to 654 at the end of fiscal year 2017, and increase of 53 (8.8%).</p>									
<b>Total for Budget Account: 3166</b>					1,612,854	1,200,000	2,812,854	1,697,378	1,200,000	2,897,378	0.00	0.00

BA Priority	Dept. Priority	BA	BA Description	Dec Unit	General Fund FY 2016	Other FY 2016	Total 2016	General Fund FY 2017	Other FY 2017	Total 2017	FTE FY 2016	FTE FY 2017
0	0	3167	HHS-ADSD - RURAL REGIONAL CENTER	B000	8,065,417	6,758,597	14,824,014	8,086,964	6,794,531	14,881,495	36.28	36.28
			<p>This request continues funding for 36.28 positions and associated operating costs. One-time expenditures have been eliminated and partial year costs have been annualized.</p>									

**State of Nevada - Budget Division  
Budget Highlight - 2015 - 2017 Biennium  
AGENCY REQUEST - All DU Type - Compact  
with DU Synopsis and Justification**

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			Rural Regional Center operates a full-service developmental disabilities center that provides or purchases services for people with developmental disabilities and related conditions and their families. The center serves Nevada counties with the exception of Washoe, Clark, and parts of Nye and Lincoln Counties. Most services are funded by Medicaid Title XIX through the Home and Community Based Service (HCBS) Waiver and Targeted Case Management. Services purchased or provided include: service coordination, family supports, residential supports, jobs and day training, clinical services, and quality assurance.									
0	0	3167	HHS-ADSD - RURAL REGIONAL CENTER	M150	405,390	371,879	777,269	409,762	374,483	784,245	0.00	0.00
			This request adjusts base expenditures including eliminating one-time expenditures such as equipment, and adjusts for partial year costs for the continuation of programs.									
			Services for people are phased-in each month over the course of the biennium. M150 adjusts the base to support people phased in during both fiscal years of the biennium and continuing their services forward. Other adjustments include longevity pay, annualization of service coordination travel, contract rate changes, equipment purchases and data purchases.									
0	0	3167	HHS-ADSD - RURAL REGIONAL CENTER	M100	1,051	-11,630	-10,579	1,051	-11,630	-10,579	0.00	0.00
			This request reflects rate changes for internal service funds such as the Attorney General, Motor Pool, information technology services, state-owned building rent, vehicle insurance, personnel assessments, and property and contents insurance.									
0	0	3167	HHS-ADSD - RURAL REGIONAL CENTER	M200	1,657,358	1,237,698	2,895,056	3,172,490	2,594,927	5,767,417	8.25	10.76
			This request adds services and staff to support caseload growth based on the Case Load Evaluation Organization (CLEO) projections. Caseload is projected to increase from 660 at the end of fiscal year 2014 to 719 at the end of fiscal year 2017, an increase of 59 (8.9 percent). To support this caseload growth, this request adds 4.25 Full-Time Equivalent (FTE) Developmental Specialist IIIs, 3.51 FTE Quality Assurance Specialist IIs, 2.0 FTE Administrative Assistant IIs, 1.0 Psychiatric Nurse II; and community based services for projected caseload growth in fiscal years 2016 and 2017 based upon Caseload Evaluation Organization (CLEO) projections.									
			Demand for Rural Regional Center (RRC) services continues to grow and decision unit M200 requests funding to provide staff and services for the projected growth through the 2015-2017 biennium. Annual growth for the past five fiscal years has been: 2010 = 1.0%, 2011 = -1.9%, 2012 = -3.2%, 2013 = -4.2%, 2014 = 6.6%.									
			Overall, the caseload is projected to increase from 660 at the end of fiscal year 2014 to 719 at the end of fiscal year 2017, an increase of 59 (8.9%). The current staffing ratio for service coordinators to client is 52.0/1. The legislatively approved ratio is 45/1.									
			The agency is mandated to serve all qualified individuals who request services, and the initial service provided is targeted case management. This request includes staffing to bring actual caseload ratios in line with legislatively approved ratios.									
			These services are designed to serve individuals in their community in community based programs. Much of the funding for the community based programs are supported by Federal Medicaid funds which are matched by state general funds.									

**State of Nevada - Budget Division  
Budget Highlight - 2015 - 2017 Biennium  
AGENCY REQUEST - All DU Type - Compact  
with DU Synopsis and Justification**

BA Priority	Dept. Priority	BA	BA Description	Dec Unit	General Fund FY 2016	Other FY 2016	Total 2016	General Fund FY 2017	Other FY 2017	Total 2017	FTE FY 2016	FTE FY 2017
			<p>Funding for projected growth in community based services is also included. These services help individuals live as independently as possible in their community and include: Supportive Living Arrangements, Jobs and Day Training, and Self-Directed Family Supports (Respite).</p> <p>Caseload increases are as follows:</p> <p>Category 11 (Supported Living Arrangement): 93 persons in fiscal year 2016; 12 persons in fiscal year 2017; total of 105 persons over the biennium.</p> <p>Category 18 (Respite/POS): 25 persons in fiscal year 2016; 5 persons in fiscal year 2017; total of 30 persons over the biennium.</p> <p>Category 36 (Jobs and Day Training): 88 persons in fiscal year 2016; 10 persons in fiscal year 2017; total of 98 persons over the biennium.</p> <p>Clients on the waitlist greater than 90 days are added during the first year of the biennium. For this reason, the additional caseload added during the first year of the biennium is greater than the additional caseload added during the second year of the biennium.</p> <p>Approval of this decision unit will provide sufficient staffing to manage the increased caseload we are mandated to serve and provide funding for community based services to help individuals live as independently as possible in their community.</p>									
1	9999	3167	HHS-ADSD - RURAL REGIONAL CENTER	E710	116,546	0	116,546	74,728	0	74,728	0.00	0.00
			<p>This request replaces computer hardware and associated software per Enterprise Information Technology Services' recommended replacement schedule.</p>									
3	9999	3167	HHS-ADSD - RURAL REGIONAL CENTER	E250	536,555	515,077	1,051,632	1,186,366	1,164,115	2,350,481	0.00	0.00
			<p>ADSD recognizes that a strong provider network is essential to maintain quality in community care and develop the service system to support persons with intellectual disabilities and related conditions. Establishing appropriate rates would assure a safety net for vulnerable populations; allow providers to offer competitive salaries and benefits so that employees remain on the job, gathering experience and providing a bases for consistency and continuity of care; compensate providers for professional development and ongoing training for their staff; and provide motivation for providers to develop best practices and specialized skills and expertise necessary to support people who have intensive support needs.</p> <p>This initiative proposes an adjustment to the provider rates for the services where ADSD contracts for direct service provision. Currently, the rate paid by ADSD is less than the approved Medicaid rate for these services offered under the waiver program. The proposal is to adjust the rates by 7.5% in the first year, and 7.5% in the second year (for a total of 15% over the biennium) in order to narrow the gap between the approved Medicaid rate and the current rate. This adjustment will not raise provider's rates up to the Medicaid rate; which is currently 30% higher on average across the service types than the current rate paid by ADSD. This will be the first step toward analyzing and developing fair and equitable rates for providers, many of whom have not seen a rate increase in over 10 years. The lack of provider rate adjustments has negatively impacted Nevada's providers. During this time the minimum wage has increased to \$8.25 per hour along with a consistent increase in Social Security benefits. Several residential service providers in urban areas have closed or significantly reduced the numbers of individuals they serve. It has also been almost impossible to maintain and retain provider organization and staff qualified to work in Rural Nevada.</p>									

**State of Nevada - Budget Division  
 Budget Highlight - 2015 - 2017 Biennium  
 AGENCY REQUEST - All DU Type - Compact  
 with DU Synopsis and Justification**

BA Priority	Dept. Priority	BA	BA Description	Dec Unit	General Fund FY 2016	Other FY 2016	Total 2016	General Fund FY 2017	Other FY 2017	Total 2017	FTE FY 2016	FTE FY 2017
4	9999	3167	HHS-ADSD - RURAL REGIONAL CENTER	M800	-1,427	-1,121	-2,548	-1,384	-1,087	-2,471	0.00	0.00
<p>This request adjusts the agency's cost allocation for supportive services.</p>												
5	9999	3167	HHS-ADSD - RURAL REGIONAL CENTER	E800	11,869	9,326	21,195	13,519	10,622	24,141	0.00	0.00
<p>This request adjusts the agency's cost allocation for supportive services.</p>												
6	9999	3167	HHS-ADSD - RURAL REGIONAL CENTER	E248	40,000	0	40,000	40,000	0	40,000	0.00	0.00
<p>This request adds a UNR Extern that was eliminated in a prior budget due to budgetary constraints.</p> <p>The purpose of the externship is to provide a qualified psychology graduate student with a rich variety of supervised clinical experiences in a rural setting. The externship student will participate in selected clinical functions such as diagnostic evaluations, counseling and consultation under the supervision of a licensed clinical psychologist. The externship program also provides opportunities for students to gain experience in the specialty field of intellectual disabilities and related conditions that may encourage them to remain in this field and possibly address a recruitment and retention issue for a difficult to fill position.</p>												
7	9999	3167	HHS-ADSD - RURAL REGIONAL CENTER	E805	4,826	0	4,826	4,978	0	4,978	0.00	0.00
<p>This decision unit proposes to reclassify PCN 328, a 1.0 FTE Management Analyst 1 to a 1.0 FTE Management Analyst 2 position.</p> <p>The agency believes that the duties performed by this position more accurately reflect the duties of a Management Analyst II rather than a Management Analyst I.</p>												
<b>Total for Budget Account: 3167</b>					10,837,585	8,879,826	19,717,411	12,988,474	10,925,961	23,914,435	44.53	47.04

BA Priority	Dept. Priority	BA	BA Description	Dec Unit	General Fund FY 2016	Other FY 2016	Total 2016	General Fund FY 2017	Other FY 2017	Total 2017	FTE FY 2016	FTE FY 2017
0	0	3208	HHS-ADSD - EARLY INTERVENTION SERVICES	B000	28,210,739	4,437,702	32,648,441	28,583,044	4,427,050	33,010,094	208.37	208.37
<p>This request continues funding for 208.37 Full-Time Equivalent positions and associated operating costs. One-time expenditures have been eliminated and partial year costs have been annualized.</p> <p>Nevada Early Intervention Services identifies infants and toddlers who are at risk for or have developmental delays; provides services and support to families to meet the individualized developmental needs of their child; and facilitates the child's learning and participation in family and community life through the partnership of families, caregivers and service providers.</p>												

**State of Nevada - Budget Division  
Budget Highlight - 2015 - 2017 Biennium  
AGENCY REQUEST - All DU Type - Compact  
with DU Synopsis and Justification**

BA Priority	Dept. Priority	BA	BA Description	Dec Unit	General Fund FY 2016	Other FY 2016	Total 2016	General Fund FY 2017	Other FY 2017	Total 2017	FTE FY 2016	FTE FY 2017
0	0	3208	HHS-ADSD - EARLY INTERVENTION SERVICES	M150	-624,640	24,999	-599,641	-623,682	26,460	-597,222	0.00	0.00
<p>This request adjusts base expenditures including eliminating one-time expenditures such as equipment, and adjusts for partial year costs for the continuation of programs.</p> <p>The number of people and the services they receive are phased in over the course of the biennium. This request adjusts fiscal year 2014 (Base Year) expenditures so services can be maintained for all individuals receiving services throughout the current biennium. Other adjustments include longevity pay, annualizing staff travel, contract rate changes, lease rate changes, equipment purchases, and data purchases.</p>												
0	0	3208	HHS-ADSD - EARLY INTERVENTION SERVICES	M100	2,758	25	2,783	2,758	25	2,783	0.00	0.00
<p>This request reflects rate changes for internal service funds such as the Attorney General, Motor Pool, information technology services, state-owned building rent, vehicle insurance, personnel assessments, and property and contents insurance.</p>												
0	0	3208	HHS-ADSD - EARLY INTERVENTION SERVICES	M200	995,417	49,243	1,044,660	1,536,157	73,762	1,609,919	2.02	2.02
<p>This requests early intervention services for 289 additional children (over Fiscal Year 14) in Fiscal Year 2016 and 403 additional children (over Fiscal Year 14) in Fiscal Year 2017 based on projected caseload growth rate prepared by the Aging and Disability Services Division from the Tracking Resources and Children (TRAC) database in consultation with the Director's Office Economist.</p> <p>Nevada Early Intervention Services identifies infants and toddlers who are at risk for or have developmental delays; provides services and support to families to meet the individualized developmental needs of their child; and facilitates the child's learning and participation in family and community life through the partnership of families, caregivers and service providers.</p> <p>Child Abuse Prevention and Treatment Act (CAPTA), Section 106 (b)(2)(A)(xxi) requires child welfare agencies to refer children under the age of three who have been substantiated as having been abused or neglected, have possible drug screen at birth or children under the age of three found in need of early intervention services per federal Part C, IDEA regulations. When receiving a mandated CAPTA referral from state and county child protective agencies, early intervention programs will screen, determine eligibility and provide early intervention services to eligible infants and toddlers.</p> <p>NRS 442.750 requires that early intervention programs screen children for autism at 18 and 24 months following the recommendations of the American Academy of Pediatrics.</p>												
1	9999	3208	HHS-ADSD - EARLY INTERVENTION SERVICES	E710	150,477	0	150,477	133,950	0	133,950	0.00	0.00
<p>The purpose of this decision unit is to replace equipment as needed and for information systems infrastructure to adhere to the state 5 year equipment replacement plan. Additionally, this will help the Division maintain the security of personal health information.</p> <p>Maintaining the 5 year equipment plan is crucial to maintain high productivity. Using old and outdated technology reduces productivity and efficiency, not to mention increases the risk of compromising personal health information. See equipment schedule.</p>												
3	9999	3208	HHS-ADSD - EARLY INTERVENTION SERVICES	E550	1,421,057	0	1,421,057	507,300	0	507,300	0.00	0.00

**State of Nevada - Budget Division**  
**Budget Highlight - 2015 - 2017 Biennium**  
**AGENCY REQUEST - All DU Type - Compact**  
**with DU Synopsis and Justification**

BA Priority	Dept. Priority	BA	BA Description	Dec Unit	General Fund FY 2016	Other FY 2016	Total 2016	General Fund FY 2017	Other FY 2017	Total 2017	FTE FY 2016	FTE FY 2017
			<p>This decision unit requests to add additional support for the migration of Nevada Early Intervention Services (NEIS) to the Harmony Information System platform used by other programs within the Division. (companion to E550 in BA3151)</p> <p>NEIS requires an automated, integrated case management and fiscal system to replace the manual, cumbersome and paper based processes that are currently in use by NEIS's 265 users. NEIS uses two systems, neither of which are functioning case management systems. Additionally, NEIS is continuously monitored and evaluated to ensure that appropriate and evidence-based services are provided. This increases the need for comprehensive data analysis and reporting. The system must satisfy various State and Federal mandates and billing standards (HIPAA, FERPA, Health Information Exchange, CAPTA, IDEA Part C).</p>									
5	9999	3208	HHS-ADSD - EARLY INTERVENTION SERVICES	E712	89,439	0	89,439	88,347	0	88,347	0.00	0.00
			<p>The purpose of this decision unit is to adhere to the state 5 year equipment replacement plan for personal computers for state staff and contractors. Additionally, this will help the Division maintain the security of personal health information.</p> <p>Maintaining the 5 year equipment plan is crucial to maintain high productivity. Using old and outdated technology reduces productivity and efficiency, not to mention increases the risk of compromising personal health information. See equipment schedule.</p>									
13	9999	3208	HHS-ADSD - EARLY INTERVENTION SERVICES	M800	-12,576	-2,099	-14,675	-12,198	-2,035	-14,233	0.00	0.00
			<p>This request adjusts the agency's cost allocation for supportive services.</p>									
14	9999	3208	HHS-ADSD - EARLY INTERVENTION SERVICES	E800	157,044	26,141	183,185	287,040	47,836	334,876	0.00	0.00
			<p>This request adjusts the agency's cost allocation for supportive services.</p>									
24	9999	3208	HHS-ADSD - EARLY INTERVENTION SERVICES	E714	15,201	0	15,201	0	0	0	0.00	0.00
			<p>The purpose of this decision unit is to replace video conferencing capabilities for the Early Intervention Elko office.</p> <p>Video conferencing enables Early Intervention staff in Elko to have more productive and informative meetings with statewide staff.</p>									
25	9999	3208	HHS-ADSD - EARLY INTERVENTION SERVICES	E715	15,201	0	15,201	0	0	0	0.00	0.00
			<p>The purpose of this decision unit is to replace video conferencing capabilities for the Early Intervention Reno office.</p> <p>Video conferencing enables Early Intervention staff in Reno to have more productive and informative meetings with statewide staff.</p>									

**State of Nevada - Budget Division**  
**Budget Highlight - 2015 - 2017 Biennium**  
**AGENCY REQUEST - All DU Type - Compact**  
**with DU Synopsis and Justification**

BA Priority	Dept. Priority	BA	BA Description	Dec Unit	General Fund FY 2016	Other FY 2016	Total 2016	General Fund FY 2017	Other FY 2017	Total 2017	FTE FY 2016	FTE FY 2017
26	9999	3208	HHS-ADSD - EARLY INTERVENTION SERVICES	E716	15,201	0	15,201	0	0	0	0.00	0.00
			<p>The purpose of this decision unit is to replace video conferencing capabilities for the Early Intervention Las Vegas office.</p> <p>Video conferencing enables Early Intervention staff in Las Vegas to have more productive and informative meetings with statewide staff.</p>									
27	9999	3208	HHS-ADSD - EARLY INTERVENTION SERVICES	E720	14,490	0	14,490	13,500	0	13,500	0.00	0.00
			<p>The purpose of this decision unit is to request new equipment that is needed to improve Information Technology infrastructure. This includes an Air Conditioning unit for the server room at the Las Vegas Office, network monitoring statewide, and a firewall router for the statewide network.</p> <p>The improvements to the infrastructure of the divisions' IT network will improve efficiency and stability.</p>									
28	9999	3208	HHS-ADSD - EARLY INTERVENTION SERVICES	E717	9,192	0	9,192	0	0	0	0.00	0.00
			<p>The purpose of this decision unit is to replace four laminators at the Early Intervention offices in Reno, Las Vegas, Elko and Carson City.</p> <p>The current laminators are over 15 years old and have exceeded their useful life. They are used weekly by developmental specialists, speech and language pathologists, and behavioral aides. Early Intervention staff create pictures, social storybooks and song cards to be used for communication, behavioral skills teaching and individual and group developmental activities. The laminator protects these picture cards, instructional equipment, and books so a child and family in their home environment can use these communication tools multiple and repeated times to enable the child to communicate his functional needs to his family and other caregivers.</p>									
29	9999	3208	HHS-ADSD - EARLY INTERVENTION SERVICES	E718	75,325	0	75,325	0	0	0	0.00	0.00
			<p>The purpose of this decision unit is to provide replacement audiology equipment that is over 7 years old and visual reinforce audiometry equipment which is over 15 years old for Reno and Las Vegas.</p> <p>The Auditory Brainstem Response/Otoacoustic Emissions (Audiological Instrument) is over 7 years old. According to the vendor (HCl Instruments), the typical life of this equipment is 7-8 years. It can be difficult to obtain technical support past 7 years, and instrument models are often no longer supported once they are older than 7 years.</p> <p>Visual reinforcement audiometry is where a sound is presented through earphones/headphones or a speaker, and every time the child turns to the sound, they are reinforced by a toy/video/lights. The current visual reinforce system consists of two animated toys that play drums in a box and is well over 15 years old. The noise of the drums sometimes startles and scares children, which limits the amount of responses the audiologists can obtain. The toys also do the same thing over and over, so a child can fatigue of them quickly. The replacement equipment has video monitors with constantly changing visual stimuli and music, which has been shown to keep a child's interest longer and elicit more responses.</p>									
30	9999	3208	HHS-ADSD - EARLY INTERVENTION SERVICES	E721	45,555	0	45,555	0	0	0	0.00	0.00

**State of Nevada - Budget Division  
Budget Highlight - 2015 - 2017 Biennium  
AGENCY REQUEST - All DU Type - Compact  
with DU Synopsis and Justification**

BA Priority	Dept. Priority	BA	BA Description	Dec Unit	General Fund FY 2016	Other FY 2016	Total 2016	General Fund FY 2017	Other FY 2017	Total 2017	FTE FY 2016	FTE FY 2017
			<p>The purpose of this decision unit is to provide new audiology equipment that accesses middle and inner ear function and is used to screen hearing for Reno, Las Vegas, Winnemucca, Elko and Ely.</p> <p>This is a combination tympanometry (which assesses middle ear function and indicates the presence of middle ear fluid) and OAE (which assesses inner ear function and is used to screen hearing). This equipment could be used for children in rural areas whose families cannot make it to Reno or Las Vegas. It could be used by audiologists, or other therapists/developmental specialists who have been trained on its use as well as in the community for Child Find activities. It can also be used for newborn hearing screen and hearing screen follow-up in the rural communities.</p>									
32	9999	3208	HHS-ADSD - EARLY INTERVENTION SERVICES	E719	3,880	0	3,880	0	0	0	0.00	0.00
			<p>The purpose of this decision unit is to replace the infant scale at the NEIS Clinic in Carson City.</p> <p>There are problems with the bucket style scale that is currently used at the Carson clinic. Obtaining accurate measurements has been difficult as the scale has not been averaging and "locking" the weight measure. Users have to estimate the best weight based on a flashing range of weight measures. An additional problem is the scale is not sensitive in gram differences with weights that exceed 25 lb. Decisions are made based on weight measurements, especially when evaluating serial measurements over time. Accurate data is essential for the assessment of growth patterns and making medical and nutrition related recommendations (tube feedings, fortifying expressed breastmilk, modifying formula concentration etc.).</p>									
33	9999	3208	HHS-ADSD - EARLY INTERVENTION SERVICES	E490	-194,014	-407,086	-601,100	-232,967	-408,562	-641,529	-3.51	-3.51
			<p>Remove positions associated with Maternal and Child Health (MCH) Block Grant as the portion of the grant awarded to ASD was terminated in July of 2014.</p> <p>Division of Public and Behavioral Health notified the Aging and Disability Services Division that the grant could no longer fund these positions and the sub-grant was terminated as of July 1, 2014.</p>									
34	9999	3208	HHS-ADSD - EARLY INTERVENTION SERVICES	E491	601,100	0	601,100	641,529	0	641,529	3.51	3.51
			<p>Restore positions associated with Maternal and Child Health (MCH) Block Grant and fund with General Fund. The portion of the grant awarded to ASD was terminated in July of 2014.</p> <p>NEIS has employed developmental pediatricians since the 1970's when the program was named the Special Children's clinic. These doctors specialize in infants and toddlers with disabilities and are responsible for diagnosing more rare or unusual conditions and advising families who have medically fragile children. During the economic downturn these previously general funded positions were transitioned to funding provided by the MCH block grant. Earlier this year, the Division of Public and Behavioral Health notified the Aging and Disability Services Division that the grant could no longer fund these positions and the grant was terminated as of July 1, 2014. The positions were covered with salary savings in the interim period.</p>									
35	9999	3208	HHS-ADSD - EARLY INTERVENTION SERVICES	E813	6,908	589	7,497	7,727	103	7,830	0.00	0.00
			<p>The purpose of this decision unit is to upgrade an Administrative Assistant 2 to a Administrative Assistant 4.</p>									

**State of Nevada - Budget Division  
 Budget Highlight - 2015 - 2017 Biennium  
 AGENCY REQUEST - All DU Type - Compact  
 with DU Synopsis and Justification**

BA Priority	Dept. Priority	BA	BA Description	Dec Unit	General Fund FY 2016	Other FY 2016	Total 2016	General Fund FY 2017	Other FY 2017	Total 2017	FTE FY 2016	FTE FY 2017
			<p>The position's duties have significantly increased in complexity and scope. Originally, the position performed general filing for the agency and entered data of children into the Part C database. This position is now responsible for conducting thorough intake of families eligible for Early Intervention Services, assisting with determining whether the child can be referred to community providers or must receive more specialized services offered only by the state agency (NEIS-NW).</p> <p>Other positions currently conducting similar work are classified as Administrative Assistant 4's. The position requires an understanding of NEIS policies, eligibility requirements for children to receive services, and the ability to work closely with families and contract providers.</p>									
37	9999	3208	HHS-ADSD - EARLY INTERVENTION SERVICES	E722	0	0	0	0	0	0	0.00	0.00
			<p>The purpose of this decision unit is to request seven vehicles for developmental specialists to utilize throughout the state.</p> <p>In fiscal year 2014, over \$50,000 was paid out for monthly mileage reimbursements for staff. These pay outs are excessive and should be minimized. By acquiring vehicles through the Fleet Services Division, ADSD can maximize its travel budget and increase the safety of the developmental specialists.</p>									
38	9999	3208	HHS-ADSD - EARLY INTERVENTION SERVICES	E805	12,000	1,024	13,024	13,451	178	13,629	0.00	0.00
			<p>The purpose of this decision unit is to reclassify a Developmental Specialist 3 to a Clinical Program Manager 1.</p> <p>NRS 442.750 requires that early intervention programs screen children for autism at 18 and 24 months following the recommendations of the American Academy of Pediatrics. As the number of children diagnosed with autism has increased so have the needs for specialized services. This reclassification will repurpose an existing Developmental Specialist position to employ a Board Certified Behavioral Analyst to oversee all programs and services for children with behavioral needs for NEIS statewide.</p>									
39	9999	3208	HHS-ADSD - EARLY INTERVENTION SERVICES	E807	7,042	601	7,643	7,457	99	7,556	0.00	0.00
			<p>The purpose of this decision unit is to reclassify a Developmental Specialist 3 to a Clinical Social Worker 2.</p> <p>This position provides services to infants and toddlers with disabilities in rural Nevada. Behavioral health services and case management for infants and toddlers experiencing mental and behavioral health concerns are limited in this area. This decision unit would reclassify an existing Developmental Specialist to a Clinical Social Worker to provide age appropriate services to children and families served by NEIS.</p> <p>Child Abuse Prevention and Treatment Act (CAPTA), Section 106 (b)(2)(A)(xxi) requires child welfare agencies to refer children under the age of three who have been substantiated as having been abused or neglected, have possible drug screen at birth or children under the age of three found in need of early intervention services per federal Part C, IDEA regulations. When receiving a mandated CAPTA referral from state and county child protective agencies, early intervention programs will screen, determine eligibility and provide early intervention services to eligible infants and toddlers.</p>									
<b>Total for Budget Account: 3208</b>					31,016,796	4,131,139	35,147,935	30,953,413	4,164,916	35,118,329	210.39	210.39

**State of Nevada - Budget Division**  
**Budget Highlight - 2015 - 2017 Biennium**  
**AGENCY REQUEST - All DU Type - Compact**  
**with DU Synopsis and Justification**

BA Priority	Dept. Priority	BA	BA Description	Dec Unit	General Fund FY 2016	Other FY 2016	Total 2016	General Fund FY 2017	Other FY 2017	Total 2017	FTE FY 2016	FTE FY 2017
0	0	3266	HHS-ADSD - HOME AND COMMUNITY BASED SERVICES	B000	11,722,195	12,592,681	24,314,876	11,733,486	12,847,290	24,580,776	149.00	149.00

This request continues funding for 149 positions and associated operating costs. One-time expenditures have been eliminated and partial year costs have been annualized.

This budget account includes Disability Services unit, Community Based Care, Homemaker program, and Elder Protective Services.

The Disability Services unit provides resources at the community level that assist people with severe disabilities and their families in helping them to live as independently as possible, and to live in an integrated setting.

The Community Based Care (CBC) unit provides service to those seniors and persons with disabilities most at risk through the Home and Community Based Waiver (HCBW) for the Frail Elderly (has absorbed the former Assisted Living Waiver), Community Service Options Program for the Elderly (COPE), Homemaker Program, and Personal Assistance Services to provide alternatives to nursing home placement.

The Title XX Homemaker program provides in home services for adults sixty years and older as well as adults with disabilities to avoid institutional placement. Social Workers provide administrative activities and care coordination. Direct services are provided by contracted providers and include homemaking tasks, grocery shopping, laundry, meal preparations and errands. In addition to homemaking tasks, direct service providers observe client behavior and environment, identifying deterioration, or improvement. They also observe and report evidence of abuse, neglect, exploitation, or isolation.

The Elder Protective Services (EPS) Program, which is part of the Elder Rights Unit, receives and investigates reports of abuse, neglect, self neglect, exploitation and isolation of persons aged 60 years and older. Older persons who are frail, dependent, and socially isolated are most at risk. EPS social workers take actions to safeguard the well being and general welfare of older persons in need of protection while safeguarding their civil liberties. This includes those who have physical, emotional, or mental impairments. These impairments may limit the older person's ability to manage their personal, home, social, and/or financial affairs. The social worker develops a case plan and offers services to support the older person with their consent and willingness to accept assistance. Referrals are made to law enforcement and regulatory agencies when necessary. The EPS program provides elder abuse training to community partners, grantees, and providers of healthcare and supportive services. Statewide statistics regarding elder abuse reports and investigations are made public annually.

0	0	3266	HHS-ADSD - HOME AND COMMUNITY BASED SERVICES	M150	331,508	795,259	1,126,767	389,882	485,926	875,808	0.00	0.00
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This request adjusts base expenditures including eliminating one-time expenditures such as equipment, and adjusts for partial year costs for the continuation of programs.

The number of people and the services they receive are phased in over the course of the biennium. This request adjusts fiscal year 2014 (Base Year) expenditures so services can be maintained for all individuals receiving services throughout the current biennium. Other adjustments include longevity pay, annualizing staff travel, contract rate changes, lease rate changes, equipment purchases, and data purchases.

0	0	3266	HHS-ADSD - HOME AND COMMUNITY BASED SERVICES	M100	1,231	21,039	22,270	-934	23,204	22,270	0.00	0.00
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This request reflects rate changes for internal service funds such as the Attorney General, Motor Pool, information technology services, state-owned building rent, vehicle insurance, personnel assessments, and property and contents insurance.

**State of Nevada - Budget Division  
 Budget Highlight - 2015 - 2017 Biennium  
 AGENCY REQUEST - All DU Type - Compact  
 with DU Synopsis and Justification**

BA Priority	Dept. Priority	BA	BA Description	Dec Unit	General Fund FY 2016	Other FY 2016	Total 2016	General Fund FY 2017	Other FY 2017	Total 2017	FTE FY 2016	FTE FY 2017
0	0	3266	HHS-ADSD - HOME AND COMMUNITY BASED SERVICES	M200	1,106,411	688,376	1,794,787	2,145,088	1,246,834	3,391,922	23.00	35.00

The purpose of this decision unit is to increase the number of seniors and persons with disabilities served by the Community Based Care Program. The caseload for the Community Service Options Program for the Elderly (COPE) is projected to increase from 48 at the end of fiscal year 2014 to 116 at the end of fiscal year 2017, an increase of 90%. The Homemaker Program is projected to increase from 317 at the end of fiscal year 2014 to 557 at the end of fiscal year, 2017, an increase of 75%. The Personal Assistance Program (PAS) is projected to increase from 150 at the end of fiscal year 2014 to 175 at the end of fiscal year 2017, an increase of 16%. The Home and Community Based Waiver (HCBW) is projected to increase from 1,775 at the end of fiscal year 2014 to 2,378, an increase of 35%. This request includes 35 additional Full-Time Equivalent staff: six Administrative Assistant 3, twenty-two Social Worker 2's, five Social Worker Supervisor 1's, one Social Service Program Specialist 3 and one Social Services Manager 2.

U.S. Supreme Court Olmstead Decision, Olmstead v. L.C., 527 U.S. 581 (1999).  
 The Olmstead decision specifies that States must have an effective comprehensive plan for placing qualified persons with disabilities in less restrictive settings and a waiting list that moves at a reasonable pace.  
 In addition, the ADA and the Olmstead decision extends to persons at serious risk of institutionalization or segregation and are not limited to individuals currently in institutional or other segregated settings. Compliance with the ADA and Olmstead is integral to Nevada's Strategic Plan for Seniors and People with Disabilities.  
 A strategy to achieve this goal is to ensure that waiting lists for services critical to community integration and avoidance of segregated service environments move at a reasonable pace, not to exceed 90 days.

0	0	3266	HHS-ADSD - HOME AND COMMUNITY BASED SERVICES	M201	11,422,953	0	11,422,953	20,222,493	0	20,222,493	23.00	36.00
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This requests funds for the Autism Treatment Assistance Program (ATAP) to provide services for 594 additional children (over Fiscal Year 14) in Fiscal Year 2016 and 987 additional children (over Fiscal Year 14) in Fiscal Year 2017 based on projected caseload growth rate prepared by the Aging and Disability Services Division in consultation with the Director's Office Economist. This request includes thirty-six additional Full-Time Equivalent staff: two Administrative Assistance 3's, two Administrative Assistance 4's, twenty-six Developmental Specialist 3's and six Developmental Specialist 4's.

In 2013, ATAP received additional funding to increase the number of children served and reduce the wait list by 25%. In Fiscal Year 13, ATAP received an average of eight new applications per month; this number has increased to an average of 25 new applications for Fiscal Year 14.

Based on projections, the ATAP waitlist will continue to grow by approximately 26 new children each month over the biennium. In order to maintain funding 25% of the wait list, ATAP will need to serve an additional 94 new children over the biennium above the 26 new monthly applicants. The overall ATAP caseload is projected to increase from 572 children at the end of FY15 to 897 at the end of Fiscal Year 16 and 1290 children at the end of Fiscal Year 17.

NRS 427A.875, established the Autism Treatment Assistance Program within the Division to serve as the primary autism program within the Department and to provide and coordinate the provision of services to persons with autism spectrum disorders through the age of 19.

2	9999	3266	HHS-ADSD - HOME AND COMMUNITY BASED SERVICES	E226	0	170,647	170,647	0	200,496	200,496	3.00	3.00
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The purpose of this decision unit is to establish an interpreter oversight and training program within ADSD. To accomplish this, the division would add 3 additional positions that include one Social Services Program Specialist 3, a Social Services Specialist 2 and an Administrative Assistant 3.

**State of Nevada - Budget Division  
Budget Highlight - 2015 - 2017 Biennium  
AGENCY REQUEST - All DU Type - Compact  
with DU Synopsis and Justification**

BA Priority	Dept. Priority	BA	BA Description	Dec Unit	General Fund FY 2016	Other FY 2016	Total 2016	General Fund FY 2017	Other FY 2017	Total 2017	FTE FY 2016	FTE FY 2017
			Per NRS 656A, the division is required to monitor and train interpreters and ensure they register with the interpreter registry. The Division has struggled due to lack of resources to maintain compliance with this statute and an internal audit revealed that 85% of interpreters were out of compliance with the registry.									
7	9999	3266	HHS-ADSD - HOME AND COMMUNITY BASED SERVICES	E230	0	63,000	63,000	0	63,000	63,000	0.00	0.00
			The purpose of this decision unit is to continue to fund the Autism Commission that was established by Executive Order 2011-21 and is obligated to meet and to advise on the development and improvement of services to Nevadans with Autism. Funding for the commission was established in Fiscal Year 15 by a work program.									
			In 2007, Assembly Bill 62 passed, creating the Nevada Autism Task Force and appropriating \$2,000,000 in general funds for support of pilot programming and planning. In 2008, the Nevada Autism Task Force delivered an Action Plan for Nevada's Legislators and Policymakers, which included 146 recommendations. This same year, the Governor established the Nevada Commission on Autism Spectrum Disorders (ASD) through executive order. The purpose of the commission was to advise on the development and improvement of services to Nevadans with ASD. In July of 2011, Governor Sandoval reaffirmed the existence of the Commission and added several other members. The Commission must deliver a progress report to the Governor on or before June 30 and December 31 each year. While the Governor's Executive Order noted that the Nevada Department of Health and Human Services should provide administrative support as necessary for the commission and its subcommittees, it has been difficult to perform these duties without a dedicated person who understands the work of the Commission. In December 2013, the Commission proposed to update the original 146 recommendations through a strategic planning process that will require extra assistance by DHHS to accomplish an updated action plan by the 2015 Legislative Session. The Director of DHHS appointed ADSD as the agency to oversee the administrative support of the Commission beginning in fiscal year 2015. ADSD needs renewed and facilitated strategic input from stakeholders to assure needs of Nevada citizens and family care givers are met. Overseeing the Commission on Autism will allow for greater collaboration on and development of policy and services.									
8	9999	3266	HHS-ADSD - HOME AND COMMUNITY BASED SERVICES	E231	76,715	0	76,715	46,200	0	46,200	0.00	0.00
			The purpose of this decision unit is to request funding for the development and implementation of a five-year plan for the Communication Access Service Program for the deaf and hard of hearing for services in compliance with NRS 427A.750. Once implemented, funds will be used to conduct ongoing review and changes to the plan and associated services to best meet the needs of the people that receive services noted in the plan.									
			SB-61 passed in May 2013, requiring the Subcommittee on Communication Services for Persons who are Deaf or Hard of Hearing and Persons with Speech Disabilities of the Nevada Commission on Services for Persons with Disabilities to create and annually review a five-year strategic plan consisting of short-term and long-term goals for services provided by or on behalf of the Division. In creating and reviewing any such plan, the Subcommittee must solicit input from various persons, including, without limitation, persons with communications disabilities.									
10	9999	3266	HHS-ADSD - HOME AND COMMUNITY BASED SERVICES	E710	35,192	19,336	54,528	34,790	19,114	53,904	0.00	0.00
			The purpose of this decision unit is to adhere to the state 5 year equipment replacement plan for personal computers for state staff and contractors.									
			This request ensures that staff will have updated technology to perform their jobs effectively and efficiently. See equipment schedule.									
11	9999	3266	HHS-ADSD - HOME AND COMMUNITY BASED SERVICES	M540	27,874	0	27,874	52,958	0	52,958	0.00	0.00

**State of Nevada - Budget Division  
Budget Highlight - 2015 - 2017 Biennium  
AGENCY REQUEST - All DU Type - Compact  
with DU Synopsis and Justification**

BA Priority	Dept. Priority	BA	BA Description	Dec Unit	General Fund FY 2016	Other FY 2016	Total 2016	General Fund FY 2017	Other FY 2017	Total 2017	FTE FY 2016	FTE FY 2017
			<p>The purpose of this decision unit is to ask for additional general fund for the Independent Living Assistance Program. The caseload is remaining constant, but additional funds are needed to keep current with the increasing cost of goods and services used by the program to support individuals with physical disabilities in need of home and vehicle modifications to remain independent in the community.</p> <p>The Olmstead Decision of 1999 is a Federal Supreme Court ruling which mandates that states serve people with disabilities in community settings whenever possible. In addition, it calls for waiting lists to move at a "reasonable pace", which has been defined as ninety days in Nevada. Cases are prioritized to serve individuals at risk of institutional placement before all others.</p>									
14	9999	3266	HHS-ADSD - HOME AND COMMUNITY BASED SERVICES	E711	25,187	13,839	39,026	20,010	10,994	31,004	0.00	0.00
			<p>The purpose of this decision unit is to replace equipment as needed and to adhere to the state 5 year equipment replacement plan for information systems infrastructure.</p> <p>The Division wants to ensure that staff have updated technology to perform their jobs effectively and efficiently. See equipment schedule.</p>									
16	9999	3266	HHS-ADSD - HOME AND COMMUNITY BASED SERVICES	E807	3,016	3,016	6,032	3,184	3,184	6,368	0.00	0.00
			<p>The purpose of this decision unit is to upgrade two Administrative Assistant 1's to Administrative Assistant 2's.</p> <p>The role of the incumbents have increased in responsibilities and complexity over the years as programs have grown and expanded. The incumbents are required to have increased knowledge of the various programs that have multiple eligibility criteria and services. The incumbents participate in covering intake calls and provide information and referrals as well as routing calls or visitors to various units for more in depth issues. The individuals seeking services have complex medical, social and behavioral needs that must be considered. The incumbents must be adept at skills involving use of specialized software, web based programs, Microsoft Office, data entry and word processing. Expertise and tasks required for the incumbent extends beyond general office duties. Knowledge of operations and resources as well as dealing with individuals across the life span that have a disability or are aging is required to promote independence in the community and avoidance of institutionalization.</p>									
18	9999	3266	HHS-ADSD - HOME AND COMMUNITY BASED SERVICES	M800	-25,036	-21,274	-46,310	-24,281	-20,633	-44,914	0.00	0.00
			<p>This request adjusts the agency's cost allocation for supportive services.</p>									
19	9999	3266	HHS-ADSD - HOME AND COMMUNITY BASED SERVICES	E800	314,378	267,157	581,535	343,866	292,217	636,083	0.00	0.00
			<p>This request adjusts the agency's cost allocation for supportive services.</p>									
24	9999	3266	HHS-ADSD - HOME AND COMMUNITY BASED SERVICES	E808	4,196	0	4,196	4,136	0	4,136	0.00	0.00

**State of Nevada - Budget Division  
Budget Highlight - 2015 - 2017 Biennium  
AGENCY REQUEST - All DU Type - Compact  
with DU Synopsis and Justification**

BA Priority	Dept. Priority	BA	BA Description	Dec Unit	General Fund FY 2016	Other FY 2016	Total 2016	General Fund FY 2017	Other FY 2017	Total 2017	FTE FY 2016	FTE FY 2017
			<p>The purpose of this decision unit is to reclassify the Social Services Chief 1 to a Social Services Chief 2. This decision unit is tied to decision unit E903. If E903 is approved, this decision unit needs to follow the position to budget account 3151.</p> <p>The Social Service Chief position must be equitable with other positions with similar high levels of management over complex supportive service programs. The current position is responsible for organizing and setting objectives across multiple disability programs. To meet these objectives, this position is responsible for supervision over programs and the Social Service Program Specialists who manage the programs as well as the support staff that assist. Programs include: Communication Access Services (CAS), Traumatic Brain Injury (TBI) Assistive Technology/Independent Living (AT/IL), and the Senior and Disability Prescription programs. In addition, this position supports and provides oversight to non-funded program initiatives which include: Housing, Respite, and Alzheimer's.</p> <p>In order to provide appropriate oversight authority, and supervision to program staff, this position must understand a significant amount of federal and state regulations and federal funding tied to the above program areas. This position must collaborate with diverse stakeholders to develop and/or expand public and private partnerships to expand access to persons with disabilities, including federal funding to support these initiatives. To build successful partnerships and funding opportunities, this position requires knowledge in federal laws and regulations related to: education, childhood development, medical issues across the lifespan, development and physical disabilities, housing and community development requirements and initiatives, assistive technology and independent living requirements, medical issues across the lifespan, etc. This position must use diverse information to draft appropriate legislation and manage reporting requirements of all programs within the Disability Services Unit, including developing and/or updating required regulations, policies and procedures.</p>									
27	9999	3266	HHS-ADSD - HOME AND COMMUNITY BASED SERVICES	E282	100,000	0	100,000	0	0	0	0.00	0.00
			<p>The purpose of this decision unit is to request funds to update the expired Strategic Plan for Persons with Disabilities. This plan is used for the development of service program revisions and additions that are congruent with identified current needs and that allow for service provision in the community rather than in an institution. This Plan is also used to develop Nevada's Olmstead Plan which assures compliance with the Americans with Disabilities Act (ADA) and addresses the state's need to avoid or remedy discrimination caused by unnecessary segregation and institutionalization.</p> <p>The Aging and Disability Services Division (ADSD) is now a life-span agency responsible for the development of program initiatives for both Senior Services and for Persons with Disabilities that promote services in the most integrated setting. ADSD needs renewed and facilitated strategic input from stakeholders to assure needs of Nevada citizens and family care givers are met. Additionally, ADSD needs to prepare for increased service need and access assistance to home and community services rather than to pay for expensive medical and institutional services. This activity will address the state's need to comply with the tenets of the ADA and Olmstead Decision.</p>									
28	9999	3266	HHS-ADSD - HOME AND COMMUNITY BASED SERVICES	E225	54,106	0	54,106	63,222	0	63,222	1.00	1.00
			<p>The purpose of the decision unit is to request an Elder Rights Specialist for the Elder Protective Services program in Elko.</p> <p>The Elko office covers approximately 43,000 square miles. There is currently no available staff to conduct outreach regarding elder protective services to all the remote counties of the state, including Elko, Humboldt, Lander, Eureka, White Pine, and surrounding Tribal communities. Travel to some areas can take anywhere from 2-6 hours for the travel time alone making it impossible for the social worker assigned to elder protective services in the Elko office to conduct other outreach activities needed to support the program.</p>									
32	9999	3266	HHS-ADSD - HOME AND COMMUNITY BASED SERVICES	E809	4,545	4,545	9,090	4,523	4,523	9,046	0.00	0.00

**State of Nevada - Budget Division**  
**Budget Highlight - 2015 - 2017 Biennium**  
**AGENCY REQUEST - All DU Type - Compact**  
**with DU Synopsis and Justification**

BA Priority	Dept. Priority	BA	BA Description	Dec Unit	General Fund FY 2016	Other FY 2016	Total 2016	General Fund FY 2017	Other FY 2017	Total 2017	FTE FY 2016	FTE FY 2017
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The purpose of this decision unit is to upgrade a Social Service Chief 2 to a Social Service Chief 3.

The programs managed and directed by this position are complex and comprehensive requiring a large staff of professional licensed social workers statewide to operate the programs and provide options and choice to meet the needs of people who prefer to get long-term care services and supports in their home or community, rather than in an institutional setting.

This position exercises direct control over budget, policy and program development and implementation; system planning; quality assurance; development and implementation of automated systems such as Social Assistance Management Software (SAMS); and provider agreements, management of contracts and site reviews for qualifications and compliance to policy, monitoring and operations of five Home and Community Based programs including: Home and Community Based Waiver (HCBW) for the Frail Elderly (FE); HCBW for Assisted Living (AL); Community Service Options Program for the Elderly (COPE); Personal Assistance Services (PAS) Program; and Homemaker Program. These programs have varied eligibility, services, funding sources, target populations, federal laws, regulations, and policies that must be considered for efficient and proper operations. This position will be responsible for the transition and integration of the Waiver for Independent Nevadans (WIN) operations and staff from the Division of Health Care Financing and Policy (DHCFP) to ADSD.

38	9999	3266	HHS-ADSD - HOME AND COMMUNITY BASED SERVICES	E277	654,331	0	654,331	654,331	0	654,331	0.00	0.00
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The purpose of this decision unit is to request restoration of advocacy funding that was eliminated for Advocacy Centers.

The Aging and Disability Services Division needs funding to restore advocacy services provided by the centers for deaf and hard of hearing persons operated by the state. Question has been raised about whether the funds are provided for in NRS427A.797 2(b) via telephone surcharge collected by the Public Utilities Commission (PUC). As a result, the PUC has not funded this activity for the past two fiscal years, creating the need to request the funds from another source.

39	9999	3266	HHS-ADSD - HOME AND COMMUNITY BASED SERVICES	E810	3,676	0	3,676	3,856	0	3,856	0.00	0.00
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The purpose of this decision unit is to upgrade an Administrative Assistant 1 to an Administrative Assistant 2.

The role of the Administrative Assistant 1 (AA1) has increased in responsibilities and complexity over the years as programs have grown and expanded. The AA1 incumbent requires increased knowledge of the various programs that have multiple eligibility criteria and services. The incumbent covers intake calls, and provides information and referrals, as well as routes calls or visitors to various units for more in depth issues. The individuals seeking services have complex medical, social and behavioral needs that must be considered. The incumbent must be adept at skills involving use of specialized software, web based programs, Microsoft Office, data entry and word processing. Expertise and tasks required extends beyond general office duties.

40	9999	3266	HHS-ADSD - HOME AND COMMUNITY BASED SERVICES	E813	3,227	0	3,227	3,390	0	3,390	0.00	0.00
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The purpose of this decision unit is to upgrade an Administrative Assistant 2 to an Administrative Assistant 3.

**State of Nevada - Budget Division  
Budget Highlight - 2015 - 2017 Biennium  
AGENCY REQUEST - All DU Type - Compact  
with DU Synopsis and Justification**

BA Priority	Dept. Priority	BA	BA Description	Dec Unit	General Fund FY 2016	Other FY 2016	Total 2016	General Fund FY 2017	Other FY 2017	Total 2017	FTE FY 2016	FTE FY 2017
			<p>Because of the expansion of the Disability Services Unit, the Administrative Assistant has taken on additional and more complex duties. This position supports several programs including the Deputy Administrator, the Chief of Disability Services and four (4) overarching programs, whether as primary support or back-up. Programs include Assistive Technology/Independent Living, Communication Access Services, and the Senior and Disability Prescription programs. Additional administrative support is provided for Respite, Traumatic Brain Injury and other services that are administered within the Disability Services Unit. This requires the position to communicate with a variety of external entities and have knowledge of a broad array of disability topics. In addition, this position conducts all meetings logistics, including travel, interpreter services, scheduling as well as developing agendas, transcribing meeting minutes, and acting as the central repository for all communication that comes from commission members in preparation for meetings. In addition, this position will be responsible for ensuring accuracy of billing/invoices and assisting with policy and procedure development and maintenance, including the development of desk procedures for administrative staff within the Disability Services Unit. This requires this position to have independent initiative and judgment to determine the priority of assignments, council/commission tasks, and to structure program and administrative objectives within established schedules and timelines.</p>									
43	9999	3266	HHS-ADSD - HOME AND COMMUNITY BASED SERVICES	E903	-173,386	0	-173,386	-177,613	0	-177,613	-2.00	-2.00
			<p>The purpose of this decision unit is to move a Social Services Chief 1 and a Social Services Program Specialist 2 from budget account 3266 - Home and Community Based Services to budget account 3151 - Federal Programs and Administration.</p> <p>The duties carried out by this position cover multiple programs and would be more properly aligned with the Federal Programs and Administration budget account.</p>									
46	9999	3266	HHS-ADSD - HOME AND COMMUNITY BASED SERVICES	E235	72,223	0	72,223	87,720	0	87,720	1.00	1.00
			<p>The purpose of this decision unit is to add one Health Program Manager 3 to the Autism Treatment Program to manage increased needs of the program.</p> <p>This is in response to the increase in staff necessary to meet the needs of the program growth; including structural changes. The structural changes include one new Health Program Manager 3 to oversee the entire program. This position will be responsible for planning and projections; managing funding sources and budgets; supervising staff and implementing policies, regulations and statutes. This position will report to the Deputy Administrator, supervise five Developmental Specialist 4's, one Management Analyst 1 and one Clinical Program Manager 1. ATAP is a statewide clinical program that has significantly increased in size since its creation as a pilot program in 2009.</p>									
47	9999	3266	HHS-ADSD - HOME AND COMMUNITY BASED SERVICES	E236	0	0	0	435,614	0	435,614	0.00	16.00
			<p>The purpose of this decision unit is to convert 16 contracted autism care managers to state employees.</p> <p>This decision unit is designed to create consistency in the staff case managing children and families in the Autism Treatment Assistance Program (ATAP). Currently a mix of state and contract staff are performing the same functions. This will permit ATAP to operate similarly to other Divisional program which use Developmental Specialist 3's for service coordination and consequently are able to bill Medicaid for Case Management - something ATAP is not currently able to do.</p>									
52	9999	3266	HHS-ADSD - HOME AND COMMUNITY BASED SERVICES	E900	973,971	973,972	1,947,943	995,393	995,393	1,990,786	25.00	25.00

**State of Nevada - Budget Division  
Budget Highlight - 2015 - 2017 Biennium  
AGENCY REQUEST - All DU Type - Compact  
with DU Synopsis and Justification**

BA Priority	Dept. Priority	BA	BA Description	Dec Unit	General Fund FY 2016	Other FY 2016	Total 2016	General Fund FY 2017	Other FY 2017	Total 2017	FTE FY 2016	FTE FY 2017
			This decision unit requests the transfer of 25 staff positions that work in the Waiver for Independent Nevadans program (WIN) from the Long Term Support Services Unit at the Division of Health Care Financing and Policy to the Aging and Disability Services Division (ADSD). These positions will work in conjunction with the Home and Community Based Waiver for Persons with Physical Disabilities program. ADSD will be assuming responsibility for the administration of the WIN waiver beginning in state fiscal year 2016.									
53	9999	3266	HHS-ADSD - HOME AND COMMUNITY BASED SERVICES	E901	215,303	215,304	430,607	261,505	261,505	523,010	8.00	8.00
			This decision unit requests the transfer of eight new staff positions in the Waiver for Independent Nevadans (WIN) program from the Long Term Support Services at the Division of Health Care Financing and Policy unit to the Aging and Disability Services Division to support the addition of 137 new slots for the WIN program.									
54	9999	3266	HHS-ADSD - HOME AND COMMUNITY BASED SERVICES	E501	-34,448	34,448	0	-41,841	41,841	0	0.00	0.00
			The purpose of this decision unit is to adjust the revenues for decision unit E901.									
56	9999	3266	HHS-ADSD - HOME AND COMMUNITY BASED SERVICES	E500	-155,835	155,835	0	-159,263	159,263	0	0.00	0.00
			The purpose of this decision unit is to adjust the revenues for decision unit E900.									
57	9999	3266	HHS-ADSD - HOME AND COMMUNITY BASED SERVICES	E227	-3,251	-4,922	-8,173	-39,342	-78,489	-117,831	0.00	0.00
			The purpose of this decision unit is to reduce the costs for contract programmers as their functions will be performed by the requested four new information technology (IT) staff and one administrative staff in Budget Account 3151, Decision Unit E225. It is the agency's intention to reduce the reliance on contracted programmers for maintenance and support of IT initiatives.									
			Currently, contract programmers are developing and supporting the Social Assistance Management System (SAMS) application for the division. These positions help ADSD conform with Department of Health and Human Services Temporary Employment Services policy and moves these ongoing duties to state positions. The Division has no information technology positions available to support the additional growth of the Developmental Services case management system. As Nevada Early Intervention Services will also be implementing the same model, this request will facilitate adequate coverage for agency information technology staffing needs. This is a companion decision unit with budget account 3151 E225. If E225 in budget account 3151 is not approved, this reduction decision unit should also not be approved as the functions will still need to be performed.									
58	9999	3266	HHS-ADSD - HOME AND COMMUNITY BASED SERVICES	E229	-4,164	-8,702	-12,866	-12,493	-26,104	-38,597	0.00	0.00
			This decision unit reduces costs for contract programmers whose functions will be assumed by the additional information technology (IT) staff requested in budget account 3151, decision unit E234. That decision unit requests a Business Process Analyst 3 and an IT Manager 1. If decision unit E234 in budget account 3151 is not approved, this decision unit should also not be approved as the Division will still need those functions to be performed by the contract staff.									

**State of Nevada - Budget Division  
 Budget Highlight - 2015 - 2017 Biennium  
 AGENCY REQUEST - All DU Type - Compact  
 with DU Synopsis and Justification**

BA Priority	Dept. Priority	BA	BA Description	Dec Unit	General Fund FY 2016	Other FY 2016	Total 2016	General Fund FY 2017	Other FY 2017	Total 2017	FTE FY 2016	FTE FY 2017
			<p>Currently, Division IT staff are behind on providing proper project documentation and change controls with change management. Projects currently go into indefinite requirements gathering due to the lack of proper project planning upfront. Contract programmers are developing project requirements for SAMS which would transfer to state staff. These positions help the Division conform with Department of Health and Human Services Temporary Employment Services policy and moves these ongoing duties to state positions. While transitioning to a single case management system, additional state staff are needed to provide ongoing project management as well as planning of an online community based resource portal. The Division has no information technology positions available to support the additional growth of the Developmental Services case management system. As Nevada Early Intervention Services will also be implementing the same model, this request will facilitate adequate coverage for agency information technology staffing needs. This is a companion decision unit with budget account 3151 E234.</p>									
59	9999	3266	HHS-ADSD - HOME AND COMMUNITY BASED SERVICES	E233	0	0	0	-9,951	-17,890	-27,841	0.00	0.00
			<p>This decision unit reduces costs for contract programmers whose functions will be assumed by the additional information technology (IT) staff requested in budget account 3151, decision unit E235. That decision unit requests two IT Technician 6's. If decision unit E235 in budget account 3151 is not approved, this decision unit should also not be approved as the Division will still need those functions to be performed by the contract staff.</p> <p>The Division intends to reduce dependence on contract programming staff, which typically costs the State much more than full-time state staff positions on a per hour basis. The positions requested in companion decision unit E235 in budget account 3151 are hybrid positions and will provide support for more advanced teams such as System engineering and Application support. These positions will assist in supporting approximately 2,000 end users including 900 providers.</p>									
60	9999	3266	HHS-ADSD - HOME AND COMMUNITY BASED SERVICES	E550	-6,684	-12,180	-18,864	-26,445	-45,369	-71,814	0.00	0.00
			<p>This decision unit reduces contract programmer costs as a companion to E550 in budget account 3208 and E550 in budget account 3151.</p> <p>The Division has no information technology positions available to support the additional growth of the Developmental Services case management system. As Nevada Early Intervention Services will also be implementing the same model, this request will facilitate adequate coverage for agency information technology staffing needs. Additionally, these new state positions will reduce the Division's usage of contract programmer staff, which costs the State significantly more on a per hour basis. These costs are reduced in companion decision unit E550 in budget account 3266.</p>									
<b>Total for Budget Account: 3266</b>					26,749,434	15,971,376	42,720,810	37,013,484	16,466,299	53,479,783	231.00	272.00

BA Priority	Dept. Priority	BA	BA Description	Dec Unit	General Fund FY 2016	Other FY 2016	Total 2016	General Fund FY 2017	Other FY 2017	Total 2017	FTE FY 2016	FTE FY 2017
0	0	3279	HHS-ADSD - DESERT REGIONAL CENTER	B000	51,472,123	49,905,568	101,377,691	51,861,153	49,967,398	101,828,551	303.11	303.11
			<p>This request continues funding for 303.11 positions and associated operating costs. One-time expenditures have been eliminated and partial year costs have been annualized.</p>									

**State of Nevada - Budget Division  
 Budget Highlight - 2015 - 2017 Biennium  
 AGENCY REQUEST - All DU Type - Compact  
 with DU Synopsis and Justification**

BA Priority	Dept. Priority	BA	BA Description	Dec Unit	General Fund FY 2016	Other FY 2016	Total 2016	General Fund FY 2017	Other FY 2017	Total 2017	FTE FY 2016	FTE FY 2017
			Desert Regional Center (DRC) operates a full service developmental disabilities center governed by NRS chapters 433 and 435. The center provides or purchases services for people with intellectual disabilities and related conditions and their families. The center serves Clark County and portions of Lincoln and Nye Counties. The center's goals are community inclusion, greater self-sufficiency and productivity.									
0	0	3279	HHS-ADSD - DESERT REGIONAL CENTER	M150	2,515,766	4,251,546	6,767,312	2,374,592	4,477,685	6,852,277	0.00	0.00
			This request adjusts base expenditures including eliminating one-time expenditures such as equipment, and adjusts for partial year costs for the continuation of programs.									
			The number of people and the services they receive are phased in over the course of the biennium. This request adjusts fiscal year 2014 (Base Year) expenditures so services can be maintained for all individuals receiving services throughout the current biennium. Other adjustments include longevity pay, annualizing staff travel, contract rate changes, lease rate changes, equipment purchases, and data purchases.									
0	0	3279	HHS-ADSD - DESERT REGIONAL CENTER	M100	18,111	16,362	34,473	18,111	16,362	34,473	0.00	0.00
			This request reflects rate changes for internal service funds such as the Attorney General, Motor Pool, information technology services, state-owned building rent, vehicle insurance, personnel assessments, and property and contents insurance.									
0	0	3279	HHS-ADSD - DESERT REGIONAL CENTER	M101	949	1,624	2,573	903	1,572	2,475	0.00	0.00
			This request reflects inflation adjustments for costs associated with the Intermediate Care Facility for the Intellectually Disabled (ICF/ID) including: pharmaceuticals and food for the in-home cooking program.									
0	0	3279	HHS-ADSD - DESERT REGIONAL CENTER	M200	3,013,814	1,600,803	4,614,617	6,340,324	4,417,749	10,758,073	26.00	31.00
			This request adds services and staff to support caseload growth based on the Case Load Evaluation Organization (CLEO) projections. Caseload is projected to increase from 4,088 at the end of fiscal year 2014 to 4,632 at the end of fiscal year 2017, an increase of 544 (13 percent). To support this caseload growth, the request adds thirteen Developmental Specialist IIIs, two Developmental Specialist IV's, five Quality Assurance Specialist IIs, one Psychiatric Nurse III, two Psychiatric Nurse IIs, one Mental Health Counselor II, one Licensed Psychologist I, three Administrative Assistant IIs, one Health Information Coordinator I, one Management Analyst II, and one Auditor II.									
			Demand for Desert Regional Center (DRC) services continues to grow and decision unit M200 requests funding to provide staff and services for the projected growth through the 2015-2017 biennium. Annual growth for the past five fiscal years has been: 2010 = 6.0%, 2011 = 5.6%, 2012 = 5.0%, 2013 = 3.4%, 2014 = 4.7%.									
			The agency is mandated to serve all qualified individuals who request services and the initial service provided is case management. This request includes staffing to bring actual caseload ratios in line with legislative approved ratios.									
			These services are designed to serve individuals in their community in community based programs. Much of the funding for the community based programs are supported by Federal Medicaid funds which are matched by state general funds.									

**State of Nevada - Budget Division  
Budget Highlight - 2015 - 2017 Biennium  
AGENCY REQUEST - All DU Type - Compact  
with DU Synopsis and Justification**

BA Priority	Dept. Priority	BA	BA Description	Dec Unit	General Fund FY 2016	Other FY 2016	Total 2016	General Fund FY 2017	Other FY 2017	Total 2017	FTE FY 2016	FTE FY 2017
			<p>Funding for projected growth in community based services is also included. These services help individuals live as independently as possible in their community and include: Supported Living, Jobs &amp; Day Training, and Self-Directed Family Supports (Respite).</p> <p>Supported Living (SLA) - Caseload projections indicate an additional 152 individuals will need SLA services over the course of the 2015-2016 biennium. To balance out the workload the total increase is spread evenly over the entire biennium.</p> <p>Jobs &amp; Day Training (JDT) - Caseload projections indicate an additional 260 individuals will need JDT services over the course of the 2015-2016 biennium. This increase is spread evenly over the entire biennium to balance out the workload.</p> <p>Self-Directed Family Supports (Respite) - The agency authorizes services quarterly and this request adds the additional demand in the same manner. Each year's projected growth is spread evenly over the four quarters.</p> <p>Approval of this decision unit will provide sufficient staffing to manage the increased caseload and provide funding for community based services to help individuals live as independently as possible in their community.</p>									
1	9999	3279	HHS-ADSD - DESERT REGIONAL CENTER	E250	3,088,559	2,910,849	5,999,408	6,524,895	6,218,229	12,743,124	0.00	0.00
			<p>ADSD recognizes that a strong provider network is essential to maintain quality in community care and develop the service system to support persons with intellectual disabilities. Establishing appropriate rates would assure a safety net for vulnerable populations; allow providers to offer competitive salaries and benefits so that employees remain on the job, gathering experience and providing a bases for consistency and continuity of care; compensate providers for professional development and ongoing training for their staff; and provide motivation for providers to develop best practices and specialized skills and expertise necessary to support people who have intensive support needs.</p> <p>This initiative proposes an adjustment to the provider rates for the services where ADSD contracts for direct service provision. Currently, the rate paid by ADSD is less than the approved Medicaid rate for these services offered under the waiver program. The proposal is to adjust the rates by 7.5% in the first year, and 7.5% in the second year (for a total of 15% over the biennium) in order to narrow the gap between the approved Medicaid rate and the current rate. This adjustment will not raise provider's rates up to the Medicaid rate; which is currently 30% higher on average across the service types than the current rate paid by ADSD. This will be the first step toward analyzing and developing fair and equitable rates for providers, many of whom have not seen a rate increase in over 10 years. The lack of provider rate adjustments has negatively impacted Nevada's providers. During this time the minimum wage has increased to \$8.25 per hour along with a consistent increase in Social Security benefits. Several residential service providers in urban areas have closed or significantly reduced the numbers of individuals they serve. It has also been almost impossible to maintain and retain provider organization and staff qualified to work in Rural Nevada.</p>									
2	9999	3279	HHS-ADSD - DESERT REGIONAL CENTER	E805	14,139	0	14,139	14,680	0	14,680	0.00	0.00
			<p>This decision unit requests to reclassify three Psychiatric Case Worker 2 (PCW -2) positions to Developmental Specialist 3 (DS 3).</p> <p>Desert Regional Center (DRC) employs 100 DS-3s and three PCW-2s. Reclassifying these three PCW-2 (grade 33) positions to DS-3 (grade 35) will align them with all other DRC positions performing the same job functions. The work Performance Standards for the PCW-2 and DS-3 are exactly the same and both positions are evaluated based on the same criteria.</p>									

**State of Nevada - Budget Division  
Budget Highlight - 2015 - 2017 Biennium  
AGENCY REQUEST - All DU Type - Compact  
with DU Synopsis and Justification**

BA Priority	Dept. Priority	BA	BA Description	Dec Unit	General Fund FY 2016	Other FY 2016	Total 2016	General Fund FY 2017	Other FY 2017	Total 2017	FTE FY 2016	FTE FY 2017
			Historically, PCW-2 positions are difficult to fill and are filled for only short periods of time before the employee applies for and is promoted to a DS-3 to earn the same pay as their coworkers. These employees continue with the same duties and case load despite the change in classification. DRC management desires to establish equality among all employees performing the same job functions by reclassifying all Psychiatric Case Worker II positions to Developmental Specialist IIIs.									
3	9999	3279	HHS-ADSD - DESERT REGIONAL CENTER	E710	263,225	0	263,225	251,893	0	251,893	0.00	0.00
			This request replaces computer hardware and associated software per the Enterprise Information and Technology Services recommended replacement schedule. It also replaces vehicles, custodial and maintenance equipment, and furnishings.									
4	9999	3279	HHS-ADSD - DESERT REGIONAL CENTER	E720	4,900	0	4,900	10,900	0	10,900	0.00	0.00
			This requests funds for network data management tools to control data traffic and ensure safety of protected health information.									
5	9999	3279	HHS-ADSD - DESERT REGIONAL CENTER	M425	50,057	0	50,057	283,774	0	283,774	0.00	0.00
			Landscape Renovations - Convert approximately 180,000 - 200,000 square feet of turf (lawn) to desert (xeriscape) landscaping to conserve water and reduce utility costs.									
			Maintaining lawn in the desert climate of Las Vegas is costly due to the price of water and labor to maintain it. The continued population growth and drought conditions in Las Vegas dictates a high priority to conserving water and the Southern Nevada Water Authority (SNWA) continues to offer incentives to convert lawn to desert landscaping (currently offering a rebate of \$1.50 per square foot for conversion.) The SNWA is also increasing their water rates as an incentive to conserve. Reference: Facility Condition Analysis Report, March 2013. LANDSCAPE RENOVATIONS - Project Index #: 9993SIT6 The existing landscaping on the site consists of a large amount of lawn interspersed with trees and shrubbery. The maintenance staff noted that the lawn is a maintenance problem due to the cost of water and labor to maintain it in the desert climate of Las Vegas. This project would provide for removal of most of the lawn and replacement with a xeriscape landscape while preserving the more mature trees and shrubbery.									
			This project has been requested in each biennial budget submission since 2008. With increasing water costs DRC has reviewed the type of landscaping throughout the campus and how each area is used. The areas used for activities by the people served at DRC will remain lawn while areas serving mainly an aesthetic purpose will be converted to desert landscaping with ground covers and plants suited for the Las Vegas climate.									
6	9999	3279	HHS-ADSD - DESERT REGIONAL CENTER	M800	-13,598	-12,283	-25,881	-12,818	-12,283	-25,101	0.00	0.00
			This request adjusts the agency's cost allocation for supportive services.									
7	9999	3279	HHS-ADSD - DESERT REGIONAL CENTER	E800	113,449	101,868	215,317	128,304	116,938	245,242	0.00	0.00
			This request adjusts the agency's cost allocation for supportive services.									

**State of Nevada - Budget Division  
 Budget Highlight - 2015 - 2017 Biennium  
 AGENCY REQUEST - All DU Type - Compact  
 with DU Synopsis and Justification**

BA Priority	Dept. Priority	BA	BA Description	Dec Unit	General Fund FY 2016	Other FY 2016	Total 2016	General Fund FY 2017	Other FY 2017	Total 2017	FTE FY 2016	FTE FY 2017
<b>Total for Budget Account: 3279</b>					60,541,494	58,776,337	119,317,831	67,796,711	65,203,650	133,000,361	329.11	334.11

BA Priority	Dept. Priority	BA	BA Description	Dec Unit	General Fund FY 2016	Other FY 2016	Total 2016	General Fund FY 2017	Other FY 2017	Total 2017	FTE FY 2016	FTE FY 2017
0	0	3280	HHS-ADSD - SIERRA REGIONAL CENTER	B000	19,434,380	16,858,936	36,293,316	19,443,694	16,947,395	36,391,089	67.02	67.02

This request continues funding for 67.02 positions and associated operating costs. One-time expenditures have been eliminated and partial year costs have been annualized.

Sierra Regional Center (SRC) operates a community based developmental disabilities center governed by NRS chapters 433 and 435. The center provides or purchases services for people with developmental disabilities and related conditions and their families. The center serves Washoe County and provides backup services to northern rural counties. The center's goals are community inclusion, greater self-sufficiency and productivity.

0	0	3280	HHS-ADSD - SIERRA REGIONAL CENTER	M150	-176,570	1,265,092	1,088,522	-170,943	1,271,314	1,100,371	0.00	0.00
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This request adjusts base expenditures including eliminating one-time expenditures such as equipment, and adjusts for partial year costs for the continuation of programs.

Service to people is phased in each month over the course of the biennium. M-150 adjusts the base to support people continuing in service from June 30, 2015 forward. Other adjustments include longevity pay, annualization of service coordination travel, contract rate changes, equipment purchases, and data purchases.

0	0	3280	HHS-ADSD - SIERRA REGIONAL CENTER	M100	-4,324	0	-4,324	-3,603	0	-3,603	0.00	0.00
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This request reflects rate changes for internal service funds such as the Attorney General, Motor Pool, information technology services, state-owned building rent, vehicle insurance, personnel assessments, and property and contents insurance.

0	0	3280	HHS-ADSD - SIERRA REGIONAL CENTER	M200	1,566,865	1,179,566	2,746,431	3,106,091	2,591,771	5,697,862	6.02	7.53
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This request adds services and staff to support caseload growth based on the Case Load Evaluation Organization (CLEO) projections. Caseload is projected to increase from 1,282 at the end of fiscal year 2014 to 1,362 at the end of fiscal year 2017, an increase of 80 (6.2 percent). To support this caseload growth, this request adds 2.51 FTE Developmental Specialist IIIs, 3.51 FTE Quality Assurance Specialist IIs, 1 FTE Developmental Specialist IV, .51 Licensed Psychologist I; as well as community based services for projected caseload growth in fiscal years 2016 and 2017, based upon Caseload Evaluation Organization (CLEO) projections.

Demand for Sierra Regional Center (SRC) services continues to grow and decision unit M200 requests funding to provide staff and services for the projected growth through the 2015-2017 biennium. Annual growth for the past five fiscal years has been: 2010 = 2.8%, 2011 = 5.4%, 2012 = 1.3%, 2013 = 0.5%, 2014 = 4.3%.

Overall, the caseload is projected to increase from 1,282 at the end of fiscal year 2014 to 1,362 at the end of fiscal year 2017, an increase of 80 (6.2%). The current staffing ratio for service coordinators to client is 46.44/1. The legislatively approved ratio is 45/1.

**State of Nevada - Budget Division  
 Budget Highlight - 2015 - 2017 Biennium  
 AGENCY REQUEST - All DU Type - Compact  
 with DU Synopsis and Justification**

BA Priority	Dept. Priority	BA	BA Description	Dec Unit	General Fund FY 2016	Other FY 2016	Total 2016	General Fund FY 2017	Other FY 2017	Total 2017	FTE FY 2016	FTE FY 2017
			<p>The agency is mandated to serve all qualified individuals who request services, and the initial service provided is targeted case management. This request includes staffing to bring actual caseload ratios in line with legislatively approved ratios.</p> <p>These services are designed to serve individuals in their community in community based programs. Much of the funding for the community based programs are supported by Federal Medicaid funds which are matched by state general funds.</p> <p>Funding for projected growth in community based services is also included. These services help individuals live as independently as possible in their community and include: Supportive Living Arrangements, Jobs and Day Training, and Self-Directed Family Supports (Respite).</p> <p>Caseload increases are as follows:                      Category 11 (Supportive Living Arrangement): 101 persons in fiscal year 2016; 17 persons in fiscal year 2017; total of 118 persons over the biennium.</p> <p>Category 18 (Respite/POS): 31 persons in fiscal year 2016; 5 persons in fiscal year 2017; total of 36 persons over the biennium.</p> <p>Category 36 (Jobs and Day Training): 84 persons in fiscal year 2016; 13 persons in fiscal year 2017; total of 97 persons over the biennium.</p> <p>Clients on the waitlist greater than 90 days are added during the first year of the biennium. For this reason, the additional caseload added during the first year of the biennium is greater than the additional caseload added during the second year of the biennium.</p> <p>Approval of this decision unit will provide sufficient staffing to manage the increased caseload and provide funding for community base services to help individuals live as independently as possible in their community.</p>									
1	9999	3280	HHS-ADSD - SIERRA REGIONAL CENTER	E710	178,928	0	178,928	79,416	0	79,416	0.00	0.00
			<p>This request replaces computer hardware and associated software per Enterprise Information Technology Services' recommended replacement schedule.</p>									
4	9999	3280	HHS-ADSD - SIERRA REGIONAL CENTER	E250	1,262,692	1,246,638	2,509,330	2,671,692	2,680,188	5,351,880	0.00	0.00
			<p>ADSD recognizes that a strong provider network is essential to maintain quality in community care and develop the service system to support persons with intellectual disabilities. Establishing appropriate rates would assure a safety net for vulnerable populations; allow providers to offer competitive salaries and benefits so that employees remain on the job, gathering experience and providing a bases for consistency and continuity of care; compensate providers for professional development and ongoing training for their staff; and provide motivation for providers to develop best practices and specialized skills and expertise necessary to support people who have intensive support needs.</p>									

**State of Nevada - Budget Division  
 Budget Highlight - 2015 - 2017 Biennium  
 AGENCY REQUEST - All DU Type - Compact  
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			<p>This initiative proposes an adjustment to the provider rates for the services where ADSD contracts for direct service provision. Currently, the rate paid by ADSD is less than the approved Medicaid rate for these services offered under the waiver program. The proposal is to adjust the rates by 7.5% in the first year, and 7.5% in the second year (for a total of 15% over the biennium) in order to narrow the gap between the approved Medicaid rate and the current rate. This adjustment will not raise provider's rates up to the Medicaid rate; which is currently 30% higher on average across the service types than the current rate paid by ADSD. This will be the first step toward analyzing and developing fair and equitable rates for providers, many of whom have not seen a rate increase in over 10 years. The lack of provider rate adjustments has negatively impacted Nevada's providers. During this time the minimum wage has increased to \$8.25 per hour along with a consistent increase in Social Security benefits. Several residential service providers in urban areas have closed or significantly reduced the numbers of individuals they serve. It has also been almost impossible to maintain and retain provider organization and staff qualified to work in Rural Nevada.</p>									
5	9999	3280	HHS-ADSD - SIERRA REGIONAL CENTER	M800	-2,482	-2,115	-4,597	-2,408	-2,051	-4,459	0.00	0.00
			<p>This request adjusts the agency's cost allocation for supportive services.</p>									
6	9999	3280	HHS-ADSD - SIERRA REGIONAL CENTER	E800	20,653	17,593	38,246	23,523	20,038	43,561	0.00	0.00
			<p>This request adjusts the agency's cost allocation for supportive services.</p>									
8	9999	3280	HHS-ADSD - SIERRA REGIONAL CENTER	E730	18,566	0	18,566	0	0	0	0.00	0.00
			<p>This request provides funding for State Public Works Board recommended deep cleaning of Agency Owned buildings. It also provides for recommended HVAC cleaning, which has not been done in at least the last 10 years.</p> <p>Facility cleaning is strongly recommended to ensure the health and safety of employees, clients and visitors.</p>									
10	9999	3280	HHS-ADSD - SIERRA REGIONAL CENTER	E276	1,500	0	1,500	1,500	0	1,500	0.00	0.00
			<p>The purpose of this Decision Unit is to provide funding for up to two out of State trips per year, to allow for staff travel to evaluate clients currently being cared for out of state.</p> <p>Children and adults receiving intensive services out of state have a need for transition planning. It is important to assure that appropriate supports are in place prior to them returning to their home community and to assess their eligibility for programs and services upon their return.</p>									
11	9999	3280	HHS-ADSD - SIERRA REGIONAL CENTER	M425	8,000	0	8,000	0	0	0	0.00	0.00
			<p>Replacement of Sierra Regional Center concrete sidewalks.</p> <p>This project would provide for the replacement of the concrete sidewalk which parallels the entrance road in front of buildings 325, 335 and 345. These sidewalks have deteriorated to the point that they are a safety hazard.</p>									

**State of Nevada - Budget Division**  
**Budget Highlight - 2015 - 2017 Biennium**  
**AGENCY REQUEST - All DU Type - Compact**  
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			<p>The concrete sidewalk which parallels the entrance road in front of buildings 325, 335 and 345 has settled to the point where there is a minimum of a one inch difference in elevation between the curb and walkway. This is a tripping hazard along the traveled walkway. This project would provide for the removal and replacement of 200 linear feet of concrete walk. The estimate includes the removal and disposal of the existing concrete.</p>									
12	9999	3280	HHS-ADSD - SIERRA REGIONAL CENTER	M426	77,000	0	77,000	0	0	0	0.00	0.00
			<p>This decision unit would provide funding to replace the carpet in buildings 605 and 606.</p> <p>The carpet in building 605 and building 606 is showing extreme signs of wear. Replacement of this carpet has been recommended as the existing carpet has long exceeded its useful life. It is between 15 and 18 years old. If this carpet is not replaced, it will continue to deteriorate and could possibly become a safety issue for staff and visitors who might trip and fall on lifting seams and bare spots.</p>									
<b>Total for Budget Account: 3280</b>					22,385,208	20,565,710	42,950,918	25,148,962	23,508,655	48,657,617	73.04	74.55
<b>Total for Division: 402</b>					157,659,522	139,052,294	296,711,816	180,120,958	150,736,448	330,857,406	1,031.58	1,084.60
<b>Total for Department: 40</b>					157,659,522	139,052,294	296,711,816	180,120,958	150,736,448	330,857,406	1,031.58	1,084.60
<b>Grand Total :</b>					157,659,522	139,052,294	296,711,816	180,120,958	150,736,448	330,857,406	1,031.58	1,084.60