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Administrator

DEPARTMENT OF HEALTH AND HUMAN SERVICES AGING AND DISABILITY SERVICES

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Draft Meeting Minutes

Name of Organization: Nevada Commission on Aging

(Nevada Revised Statute [NRS] 427A.034)

Date and Time of Meeting: July 16, 2019

1:00 p.m. until adjournment

This meeting will be in person at the following locations:

Carson City: Aging and Disability Services

3416 Goni Road, Building H Conference Room

Carson City, NV 89706

Las Vegas: Aging and Disability Services

1820 East Sahara Avenue Las Vegas, NV 89104

If you are unable to attend in person, you can also call into the meeting for your comments to be heard (888) 363-4735, Access code 5517730

1. Roll Call and Verification of Posting – Dena Schmidt called the meeting to order at 1:05 pm.

Members: Jose Tinio, Jeffrey Klein, Barry Gold, Mary Liveratti, Leilani Kimmel Dagostino, Niki Rubarth, Stacy York

Staff: Dena Schmidt, Shannon Sprout, Jeff Duncan, Cheyenne Pasquale, Wendy Thornley

- 2. Public Comment No public comment.
- 3. Discussion of Membership: Two vacancies, one for member of governing city, one for member of governing county. Dena stated that, due to some last-minute emails, some members would not be able to vote during this meeting and the Governor's office has been contacted. This was Joe Tinio's last meeting and Dena thanked him for his service. Chris Giunchigliani is no longer a county commissioner, however, she can fill Joe Tinio's position and Dena will reach out for a replacement, possibly Michael Naft, and someone from Elko and Clark County.
- Approval of the Minutes from the April 18, 2019 Meeting Joe Tinio moved to approve, Barry Gold seconded. There were a few corrections noted from Mary Liveratti.
- 5. Subcommittee Updates and Recommendations for action by the Commission (For Possible Action)
 Legislative Subcommittee Jeff Klein, NV Senior Services Jeff Klein gave a post-session review that will be posted on the website. He felt that it was a pretty good session with impact. There will also be an after-action bill list that will be posted on the website. He did not feel good about the guardianship issues that were decided. He stated that there needs to be follow up on the regulatory side. He stated that there was homework for the Commission regarding issues that need follow up during the interim period including the minimum wage. The committee has been asked to weigh in on an analytic and determine what the interim looks like. The committee will be asking AARP and the Alzheimer's Association for input as well. He will have an action plan at the next meeting.

Dena stated that the Division realizes that they could have used the Interim Session more effectively and plans to do so this Interim.

Mary stated that the Commission needs more of a presence in the meetings and may need to testify.

Jeff stated that the changes at the federal level will impact the Commission's planning.

Joe stated that SB455 (Residential Facilities), has been of interest to the Commission for the last six years. He would like it brought up somehow. Dena mentioned that this would likely be a topic during the Interim.

Barry mentioned that the Patient Protection Commission will have eleven voting members appointed, two of which, will be patient advocates. He would like someone from ADSD to be at those meetings. Dena stated that Carrie Embree

will be at those meetings. Jeff suggested Nicole Cannizzaro and Barry will reach out.

- 6. Review subcommittee recommendations -Strategic Plan Accountability Subcommittee - Connie McMullen, Subcommittee Chairperson - Connie was not in attendance
- Senior and Disability RX Program changes review and approval (For Possible Action)
 Subsidy only program as of January 1, 2020

La Tonya stated that the Senior and Disability Prescription Drug Program is a pharmaceutical assistance program for low income seniors and individuals with disabilities, that do not qualify for other services. The program provides two types of benefits to eligible members for their prescription medication costs. The first benefit is the Medicare Part D premium subsidy which subsidizes up to \$27.08 toward the members' Medicare Part D monthly premium. The second benefit is the Gap Coverage Benefit which provides medication coverage during the member's gap phase of that benefit. With the passage of the Affordable Care Act in 2010, the gap began closing and will be totally closed in 2020. With the closure, our senior and disability prescription drug program will have to transition to a Part D premium subsidy only program, effective January 1st, 2020. The Part D premium subsidy will increase and will depend on the various plans.

La Tonya stated that State Health Insurance Assistance Program (SHIP) counselors will be available to help members choose the appropriate insurance plan for each of them.

She referred to the donut hole handout. During the initial coverage phase, members are paying 25% of their brand name and generic prescription drugs. During the closing of that gap, the members will still be responsible for 25% of the cost of the drugs, until they move into the catastrophic phase of their coverage, at which point they will be responsible for 5% of the prescription drug costs.

Barry asked what the range of Part D premiums are in Nevada and La Tonya will get him that information.

Mary asked if the program only deals with Medicare.

LaTonya stated that if the member is not on Medicare, then, no, this program only covers Part D.

Joe asked what is considered low-income for this program.

LaTonya stated that there are two different income levels; for single persons, it is \$29,869 per year. For married couples, it is \$39,816 per year.

Barry stated that there used to be a dental benefit and then the funding was taken out and asked what the current statutory status is.

Dena stated that the statute allows the program to pay for dental. She also stated that dental, vision and hearing aids were taken out. The program will be able to do more, possibly \$75 per month for premiums and allow a better health plan choice. Most other states have gone this route.

Jeff stated that in this partnership with state insurance assistance program to be a good opportunity for the members to look at their plan during open enrollment and work with the counselors to choose a plan.

Mary suggested that the committee take part in "Listening sessions", to hear about the public's experiences with insurance companies and premiums.

Dena stated that this will be an informational item and the next IFC meeting in August to update the legislature, it was mentioned in the budget presentations.

Barry would like to get more information on what the number would go to and what the range of premiums would be. How many plans would be covered completely?

Mary requested that the information get sent to the members as soon as it is available instead of at the next meeting in November.

Dena offered to have a follow up conference call, once the information is available, to discuss any action.

8. Administrator's Report/2019 Legislative Session Implementation Plans (For Possible Action)

Dena presented on the following: The 2019 Legislative Session ended June 4, 2019.

This was an exceptionally successful session for the Aging and Disability Services Division. New funding will enable the creation of 165 new positions that will come into being during the biennium.

A summary of some of the accomplishments of the ADSD division this session.

ADSD's final budget included the following items;

- 165 New Positions
- 3 New budget accounts and over 100 PCN transfers

Rate increases for providers in:

- Supportive Living Arrangement (SLA) services
- Personal Assistance Services
- Home delivered meals

Congregate meals

Barry expressed concern that the rate increases have not improved the number of meals being delivered. There was discussion about waitlists and when the planning for funding was done. Jeff gave information on the impact of the rate increases on the waitlists. Once the new applications are submitted, he can give that information to Dena and she can make fiscal decisions regarding the meals. He clarified that the waitlist is comprised of individuals who have been referred, are eligible, and there is no spot for them in the program. Dena explained that the waitlists fluctuate.

Funding to address waitlists for services in:

- Autism Treatment Assistance Program (ATAP)
- Home and Community Based Waiver for the Frail Elderly
- Home and Community Based Waiver for the Physically Disabled
- Home and Community Based Waiver for Individuals with Intellectual and Developmental Disabilities
- Respite services

Program Expansion

 The expansion of our Elder Protective Services (EPS) to Adult Protective Services (APS). The program now accepts and investigates reports of abuse, neglect and exploitation of all vulnerable adults age 18 and over. Prior to this change Nevada was one of only three states not providing this service.

The following bills were passed and will have an impact on ADSD programs or the individuals we serve.

- AB122 Requires the Department to conduct a feasibility study related to establishing and operating an assisted living facility in rural areas that also provides respite care and adult day care.
- AB129 Requires first responders to receive training regarding identifying and interacting with persons with developmental disabilities.
- AB130 Moves all responsibilities for ABLE Savings account program to the Treasurer's office.
- AB228 Requires certain facilities to post instructions on how to make complaints to the Ombudsman or an advocate.
- AB234 Requires Division of Welfare and Supportive Services (DWSS) to make changes to the reimbursement rates for childcare to include an enhanced rate for children with disabilities.
- AB362 Expanded the option to request a court order to maintain certain personal information as confidential to social workers providing child welfare, child protective services or tasks that expose them to comparable dangers.

- AB469 Requires the Department to establish regulation limiting the amount a provider of health care may charge a person who has health insurance for certain medically necessary emergency services provided when the provider is out of network (a.k.a. balanced billing).
- AB471 Clarified the role of Supported Living Arrangement Services and allows for individuals served to have secondary mental health diagnosis.
- AB480 Enacted provision governing supported decision-making agreements. Allowing individuals to seek supported decision-making agreements in lieu of more restrictive option of guardianship.
- SB18 Revised the financial information that a provider of Jobs and Day Training services is required to submit to ADSD to be certified to provide such services.
- SB93 Revised the name and membership of the Nevada Commission for Persons who are Deaf, Hard of Hearing or Speech Impaired, created a full-time paid Director position to support the Commission.
- SB121 Creates a power of attorney for health care decisions for person with any form of dementia.
- SB174 Requires the Legislative auditor to conduct an audit of Applied Behavioral Analysis (ABA) services, to include the Autism Treatment Assistance program and the Division of Health Care Financing and Policy (DHCFP) services.
- SB202 Required the Department of Education to provide a report concerning services for children with disabilities. Requires the school district to provide information regarding ADSD services to parents or guardians of each pupil enrolled in the school district or charter school who has an IEP.
- SB216 Creates the Nevada Commission on Autism Spectrum Disorders to review data and information and advise the Governor regarding the needs of persons with autism spectrum disorders and their families, revising requirements concerning the assessment to determine whether a person has an autism spectrum disorder, and plan of treatment for participants.
- SB258 Shifts the responsibility for licensing, registering, and discipline from ADSD to the Applied Behavioral Analysis Board.
- SB362 Requires certain facility for groups to meet certain requirements before accepting or retaining certain residents with Alzheimer's disease or other severe dementia.
- SB370 Requires Division of Healthcare Financing and Policy to provide Applied Behavioral Analysis benefits for screening and treatment of fetal alcohol spectrum disorder.
- SB443 Increase the reimbursement rate for congregate meals

SB500 – Provides flexibility to ADSD in the use of Funds for Healthy Nevada designated to expand assisted living facilities in Nevada. Unused funds may now be redirected to address Independent Living services waitlists.

SB540 – Expands the Elder Protective Services program to Adult Protective Services.

SB544 – Established the Patient Protection Commission in the Office of the Governor to systematically review issues related to the health needs of Nevadans and the quality, accessibility and affordability of health care in this State.

9. Legislative Session Implementation Plan – Discuss and recommend changes to implementation plan, communication of plan and timeframe

Dena stated that the ADSD Deputy Administrator, Lisa Sherych, has taken a position with the Department of Public and Behavioral Health. So, ADSD has an opening for this position, Jessica Adams is in this position for the time being. Also, our Administrative Services Officer, Melissa Lewis, has gone to Medicaid and so ADSD is recruiting for that position as well. The executive team did a two-day retreat, facilitated by a third party. They looked at lessons learned, implementation plans and opportunities for the interim. They are creating policies and procedures for the next legislative session. Timeline planning. Where do they want to focus on, formalizing and standardization of the internal structures and strengthening policies. Jeff Haag will take over the oversite of the fiscal process. Developing a protection and advocacy unit that combines Adult Protective Services and Consumer Health Assistance unit.

10. APS Update

Tammy Sever or Elizabeth McCurdy -

Elizabeth McCurdy stated that Adult Protective Services (APS) reports are numerous in the first two and a half weeks, and the need for reports are very apparent. Social workers are getting used to the resources and service providers who are providing for the vulnerable population. The increase in cases will be known in a few months. Still perfecting the work performance standards.

Dena asked for a training update.

Elizabeth stated that the last one and a half months have been busy. They are perfecting the 4-day core training. This core training will be given to new employees and then on a yearly basis. There is a two-day training with Desert Regional Center (DRC) staff.

Dena stated that there had been a planning grant that allowed for a data system update, and hired NAPSA training, including a four-person team.

There was a discussion around the types of cases APA is seeing.

Dena will share data and keep this item on future agendas.

11. Home and Community Based Services (HCBS) Caseload and Waitlist - Crystal Wren

Waiver and Community Based Care Presentation

Community Based Care June Caseload Slide

HCBW-FE caseload was 2293 (Budget 2474) with 181 available slots. At 93% capacity

HCBW-PD caseload was 861, (Budget 904) with 43 available slots. At 95% capacity

COPE caseload was 56 (Budget 56) with 0 available slots. At 100% capacity

Homemaker caseload was 302 (Budget 306) with 4 available slots. At 99% capacity

PAS caseloads was at 150 (Budget 155) with 5 available slots. At 97% capacity

Community Based Care June Approvals Slide

HCBW-FE approvals for June was 71 clients with an average wait time for approval of 185 days. Closures for June was 44.

HCBW-PD approvals for June was 7 clients with an average wait time for approval of 268 days. Closures for June was 9.

COPE approvals for June was 4 clients with an average wait time for approval of 381 days. Closures for June was 0.

Homemaker approvals for June was 12 clients with an average wait time for approval of 47 days. Closures for June was 9.

PAS approvals for June was 4 clients with an average wait time for approval of 116 days. Closures for June was 8.

Home and Community Based Waiver Waitlist Slide

HCBW-FE wait list was 616 with an average wait time of 122 days (screened, pending and in process statuses).

41% waiting less than 90 days

59% waiting over 90 days

HCBW-FE wait list priority 1; was 15 with an average wait time of 72 days. HCBW-FE wait list priority 2; was 22 with an average wait time of 95 days. HCBW-FE wait list priority 3; was 60 with an average wait time of 93 days. HCBW-FE wait list priority 4; was 10 with an average wait time of 112 days. HCBW-FE wait list priority 5; was 9 with an average wait time of 97 days. HCBW-FE wait list priority 6; was 500 with an average wait time of 129 days.

HCBW-PD wait list priority 1; was 2 with an average wait time of 103 days. HCBW-PD wait list priority 2; was 13 with an average wait time of 104 days. HCBW-PD wait list priority 3; was 185 with an average wait time of 333 days. HCBW-PD wait list priority 4; was 47 with an average wait time of 159 days.

State Funded Programs not shown on slide

COPE wait list was 39 with an average wait time of 254 days.

Homemaker wait list was 5 with an average wait time of 42 days.

PAS wait list was 9 with an average wait time of 145 days.

THOSE IN REFERRAL STATUS ONLY

Community Based Care June Referral Status Slide

As of 7/1/2019:

HCBW-FE has 259 clients in referral status an average of 26 days.

HCBW-PD has 117 clients in referral status an average of 31 days.

COPE has 9 clients in referral status an average of 17 days.

Homemaker has 44 clients in referral status an average of 21 days.

PAS has 7 clients in referral status an average of 29 days.

Total in referral status for all programs was 436 clients.

<u>Home and Community Based Waiver – 240 FE Clients in Pending Status</u> waiting for Welfare approval

- 45% waiting less than 45 days
- 55% waiting over 45 days

Vacancies for June

Open positions:

Las Vegas

- 1 Social Workers (PCN-1012)
- 1 Healthcare Coordinator (PCN-2020)
- 1 Healthcare Coordinator 3 RN (PCN-2018)
- 3 Healthcare Coordinator 2 (PCN-2005; 2014; 2016)
- 1 Administrative Assistant 2 (PCN-2012)

Reno

- 2 Social Workers (PCN-1074; 1075)
- 3 Administrative Assistant 3 (PCN-0065; 0070; 0122)

Carson City

1 Social Workers (PCN-1068)

91% of Case Manager Positions are filled; this is an increase from last month.

Intake Social Worker (11) Total Caseload Average = 123

Referral average = 40 Waitlist (Screened, Pending, In Process) average = 83

Average Active Caseload per Social Worker

Waiver Services – 52 Non-Waiver Services – 49 Total Average - 51

Dena stated that she had a meeting with the Division of Welfare and Supportive Services, who have created a Medicaid for the Aged, Blind and Disabled, (MAABD) training academy and sent their entire staff. ADSD will be sending staff to the MAABD training academy. She stated that there will be an improvement in processing applications.

Jeff requested that in the future, could there be a period over period trend line on the volumes and the waitlists for the meeting. Crystal will provide that for the future meetings.

Crystal will send out her report to the group.

- 12. Next Meeting Date October 15, 2019
- 13. Approval of Agenda Items for Next Meeting (For Possible Action) Updates on:

Food Security Updates Waitlists Adult Protective Services Senior Rx Program

Home Delivered Meals

14. Public Comment

(No action may be taken upon a matter raised under public comment period unless the matter itself has been specifically included on an agenda as an action item. Comments will be limited to three minutes per person. Persons making comment will be asked to begin by stating their name for the record and to spell their last name and provide the secretary with written comments.)

Joe stated that he received a question about autistic children over 15, receiving services.

Jeff stated that the school districts cover children until they are 24 years old, and that there are special units in the school districts.

15. Adjournment

Meeting adjourned at 2:50 pm.

<u>NOTE:</u> Items may be considered out of order. The public body may combine two or more agenda items for consideration. The public body may remove an item from the agenda or delay discussion relating to an item on the agenda at any time. The Public body may place reasonable restrictions on the time, place, and manner of public comments but may not restrict comments based upon viewpoint.

NOTE: We are pleased to make reasonable accommodations for members of the public who have disabilities and wish to attend the meeting. If special arrangements for the meeting are necessary, please notify Kate Lucier at (775)684-4210 as soon as possible and at least two days in advance of the meeting. If you wish, you may e-mail her at klucier@adsd.nv.gov

Supporting materials can be obtained by contacting Kate Lucier at (775)684-4210 or klucier@adsd.nv.gov and will be posted to the ADSD website: http://adsd.nv.gov/

Agenda Posted at the Following Locations:

Aging and Disability Services Division, Carson City Office, 3416 Goni Road, Suite D-132, Carson City, NV 89706 Aging and Disability Services Division, Las Vegas Office, 1860 East Sahara Avenue, Las Vegas, NV 89104 Aging and Disability Services Division, Reno Office, 9670 Gateway Drive, Suite 200, Reno, NV 89512 Aging and Disability Services Division, Elko Office, 1010 Ruby Vista Drive, Suite 104, Elko, NV 89801 State Legislative Building, 401 S. Carson Street, Suite 3138, Carson City, NV 89701 Grant Sawyer State Office Building, 555 E. Washington Ave., Suite 4401, Las Vegas, NV 89119 Department of Health and Human Services, 4126 Technology Way, Suite 100, Carson City, NV 89706 Nevada State Library and Archives, 100 North Carson Street, Carson City, NV 89701 Carson City Senior Center, 911 Beverly Drive, Carson City, NV 89706 Washoe County Senior Center, 1155 East 9th Street, Reno, NV 89512

Las Vegas Senior Center, 451 East Bonanza Road, Las Vegas NV 89101

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