



Meeting Minutes

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

Date and Time of Meeting:

August 11, 2020

1:00 pm until adjournment

1. Call to Order/Roll Call

Dena Schmidt called the meeting to order at 1:01pm

Commission Members Present:

Dena Schmidt
Stan Lau
Daniel Corona
Jeffrey Klein
Barry Gold
Mary Liveratti
Leilani Kimmel Dagostino
Niki Rubarth
Esther Gregurek
Lisa Erquiaga

Commission Members Absent:

Senator Chris Brooks
Assemblywoman Susan Martinez
Natalie Mazzullo

Staff:

Jeffrey Duncan, Social Services Chief, PAC
Crystal Wren, Social Services Chief, CBC
Tammy Sever, Social Services Chief, APS
Jennifer Richards, Attorney
Jennifer Williams-Woods, Social Services Manager, LSCO
Cissy Garic, MA III, CBC
Chuck Duarte, Policy Subcommittee Chair

2. Public Comment None

(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.)

3. Welcome and Introduction of New Members

Lisa Erquiaga stated she is the Executive Director at William and Pennington Life Center in Fallon, Nevada which is the coalition for senior citizens in Churchill county and is striving to become multi-generational to cover the entire community and has been with the center a little over 4 years.

Stan Lau stated he is a City Councilman in Fernley, Nevada. He has been on council for one full term and half a term, six years total. He is originally from Winnemucca and graduated from UNR.

Esther Gregurek expressed she is very interested in this focus. This would really help with what is going on in the community and expressed her interest in serving on the board. She used to work for Jeff Klein when she first moved to Las Vegas and received her Master's in Social Work and is currently a Social Worker for ADSD. She was also the President for a woman's organization with women and girls in the community and has the experience with running an organization and is expanding her horizons to make more of an impact within the community.

4. Approval of Minutes

Ms. Schmidt asked for any corrections to the meeting minutes of April 14, 2020, June 29, 2020, and July 13, 2020.

Ms. Liveratti stated corrections for the June 29th minutes on Page 3 of 6 correction to AB 90 failed to pass – to include “in the 2019 legislative session.”

Ms. Liveratti moved to approve with the corrections. Mr. Gold seconded the motion. The motion passed unanimously.

Ms. Liveratti stated corrections for the July 13th minutes on page 3 of 3 under public comment with Nikki Rubarths comments the fourth line down “Critical services are currently, and funding is at risk.” There is a word missing. Ms. Rubarth stated current critical services are currently being offered virtually and are still available.

Ms. Rubarth moved to approve the April 14th as is and July 13th minutes with corrections. Mr. Gold seconded the motion. The motion passed unanimously.

5. Subcommittee Updates

A. May 18, 2020 Policy Subcommittee Meeting

Mr. Duarte, Chair of the Policy Subcommittee stated they went over a number of items and one that made it for a recommendation for a policy change.

He discussed the following updates from the Subcommittee:

- Overview of UNR team on AB122 gave an update on feasibility study to establish a single license for an adult day care.
- Presentation on Homemaker services. He stated the division has been extremely transparent regarding funding and services and thanked Dena and her team for that.
- Division of Health Care Financing and Policy (DHCFP) Electronic Visit Verification (EVV) system. The product is called AuthentiCare is being used for Personal Care Services (PCS) to verify jobs are being completed.

- Managed Care Organization (MCO) Request for Proposal (RFP) – The extension of skilled nursing care beyond 46th day of admission. Previously became nursing home level of care managed care would cover for 45 days and the 46th would become fee for service. Extension beyond the 46th day means that anyone who becomes nursing facility level of care eligible would stay under MCO coverage for that time. One of the concerns expressed are nursing home rates are partially funded by provider tax every time there's a reduction in nursing home bed days in the fee for service Medicaid program, the revenue for provider tax funded component of reimbursement goes down and asked them to look at that and make sure there's no problem.
- Created a motion to have the DHCFP cover Current Procedural Terminology (CPT) Code 99483, which allows payment to physicians to provide care planning and other services such as cognitive assessments available. He appreciates Dena and her team for forwarding and presenting the recommended change to the Legislative Committee for Seniors, Veterans and Adults with Special Needs.
- ADSD Budget update
- Presentation by Jeff Duncan on respite, dementia services and gaps in services

The next meeting on August 17 will review COVID-19 related requirements and recommendations for congregate care settings. Margot Chappel will be presenting from Division of Public and Behavioral Health (DPBH) on what they are doing with nursing facilities, assisted living facilities, adult day care and adult day health care facilities and how they are working with those different facility types to make sure it's safe for residents and visitors.

Ms. Schmidt stated her area of interest is rapid testing. Mr. Duarte stated the expectation for rapid testing should be lowered due to technology barriers.

B. May 27, 2020 Legislative Subcommittee Meeting

Mr. Klein provided the following updates:

- Working with Senator Rosen's office and Congresswoman Titus's office. Currently focusing on three issues which include the submission of a bicameral bill, Senator Gillibrand being able to work with her office and Senator Rosen's office so it's both houses and it's bipartisan which would put 1.1 billion of Older American's Act (OAA) into Personal Protective Equipment (PPE), Nutrition Services, and resourcing for Long Term Care (LTC) facilities to address the COVID-19 issue. He went out and widely distributed last week and worked with Congresswoman Titus on funding rounds. The carve out dollars are not included in senate proposal and white house proposal.
- Focusing on Leadership Council of Aging Organizations (LCAO) document, working with congresswoman Titus and Rosen to build a Nevada case focusing on relief to the state budget, COVID-19 OAA components, and nutrition direct line item and SNAP. The problem is the Senate does not want to do anything due to internal political issues. The conversations have been good and very active.
- Issues associated with the notion of combined licenses for Adult Day Care, respite, and skilled nursing. The settings rule and how that needs to be addressed and the manner it needs to be addressed. Does not know how CMS will respond to a broad initiative. Seeking a desk ruling on it to see where CMS would go. New administration might take a different stance on the settings rule. Currently working with the committee to look at this and facilitate the conversation.
- Committee is starting to look forward with the session and look at areas not resolved in the last session to close the loop. The crisis with the budget will have a dramatic impact on it.

6. Presentation regarding Vulnerable Adult Protection Order

Jennifer Richards presented on the Vulnerable Adult Protection Order (See [Attachment A](#)).

Ms. Schmidt stated the next meeting of the Interim Committee on Adults, Veterans and Adults with Special needs is scheduled for September 1st; this is one of the work sessions agenda items.

7. Administrator Report

A. ADSD Continuing Operations Plans

Ms. Schmidt provided the following updates:

- Continuing to go through the process and evaluating each office and what it looks like to open. Staff are in most offices but on a rotating basis with less than 25% to reduce exposure to COVID-19. They anticipate continuing that for quite some time.
- The ADSD put in requests for CARES funding for safety measures such as barrier walls but have not received approval yet but are still working with the Governor's Office for when offices open.
- Looking at telecommuting and did some internal and external surveys. Explained survey satisfaction rate with continued virtual service delivery. Majority of client survey stated they recommend a virtual service delivery and staff like the flexibility from working from home. The ADSD has a workgroup looking at all space to reduce cost and create savings with leases. The goal is to find savings in leases than services and looking forward to putting those in concepts.

Ms. Rubarth asked if most people are contacted virtually via telephone or internet? Ms. Schmidt stated she will forward the survey results.

B. Update on Federal Funding Relief for the Aging Network

ADSD submitted several CARES relief funds but have not received anything.

Mr. Klein talked about the 6% Medicaid rate cut and the tracking of the Medicaid expenditures which could generate major Medicaid savings with Long Term Support Services (LTSS) between 40 and 70%. Adult day centers closed in southern Nevada which means Medicaid clients are not receiving services. Second issue, personal care because of direct impact of COVID-19 Personal Care Centers (PCC) that are open operating at 45 to 50 percent pre COVID, 6% rate cut has further impact on providers who are left. The aging network may collapse around the 6%, and the adult day care rate would go back to the rate in 2012. He expressed it is really important to look at implications of underutilization of Medicaid services due to COVID19. Ms. Schmidt added there has been discussions around what is the trend and how it will impact the MCO capitation rate. She can reach out to Data Analytics and see if they are tracking Medicaid expenditures and/or are producing a report to see what the trend looks like.

C. FY 20/21 Budget Update

Special session ADSD was fortunate on getting potential cuts back and is moving forward in Fiscal Year (FY) 21 with those in place. A lot of confusion with cuts specifically Medicaid cuts and Medicaid rates around personal care. Rate increases were reinstated; however, the rate cut was across the board. AB3 identified all services that are in the Medicaid fee schedule would take the 6% rate cut, which will impact all programs. Personal Care services are included in these cuts. These cuts did not impact ADSD programs PAS, COPE, and Homemaker as they are not Medicaid programs. Medicaid 6% rate reduction impacts all other ADSD services with a revenue reduction associated with the rate cut. Currently working on the 22/23 budget build, finalizing, and submitting over to the Director's Office and with current circumstances trying to maintain services and have not received the cap yet. The Governor's Recommended Budget

will decide what cap looks and additional potential reductions if any. As of now, they are continuing to submit within the budget cap.

D. Nevada COVID Aging Network

The Nevada CAN project is working with internal team and executive groups to transition to the Nevada Care Connections, which is partnering with 211. They are pairing the two together and keeping the tagline with Nevada CAN in it. Jeff Duncan stated they are working to edit a level 1 screen to incorporate Nevada CAN questions and hoping to be finished by October to have that live. Ms. Schmidt added the benefits of doing both will address emergent needs, short- and long-term needs and will continue to expand the no wrong door effort. Mr. Duncan added they are working with DPBH to work on behavioral health and suicide questions to add to the questionnaire and triage the immediate needs and long term supports. Ms. Schmidt stated the crisis counselors were added to the Nevada CAN project to help support people in crisis. There has been a lot of partnering with DPBH and she is excited to see the collaboration.

8. Program Updates and Information

A. Adult Protective Services

Tammy Sever reviewed the caseload information with the commission and stated corrections for the closed cases versus opened cases (See [Attachment B](#)). July, 647 opened, 563 over 60, 79 under 60 and 5 with an unknown date of birth. July of 2019 APS was given authority for the under 60 population and received grants, and with the ACL grant had money to help with a media campaign. In July they started with radio PSA, television PCA and she discussed time frames for the broadcast. The new webpage link is on the attachment and was done through the Nevada 211 page. Next, they will be working on a digital campaign starting work with google search and Facebook with ADSD.

Ms. Schmidt mentioned in Clark county abuse is the highest. Ms. Sever mentioned that self-neglect cases are not always substantiated and is due to the lifestyle the individual chooses.

B. Home and Community Based Services Caseload & Waitlist

Crystal Wren presented caseload and waitlist information (See [Attachment C](#)). Barry Gold stated a lot of states seen a dramatic rise in Medicaid applications since the pandemic. Common sense would say it is medical people who lost their job and would need insurance, it would not be a need for FE waiver. About the increased numbers from Medicaid, have you heard from Medicaid in general if the numbers are increasing and may affect the waivers but have a 3-6-month delay? Crystal Wren stated Medicaid has increased and normally the working age population due to income changes within households, so a lot have applied for Medicaid. They have not seen a huge increase, but it has been steady with applications for services. She continued there has been a big push from the community to support their own. Once businesses open back up, the support will go back to work. CBC received concerns from providers for rates and people not wanting staff in their homes and likes the idea of tracking information and once the natural supports go away the reliance will fall on the caregivers. All providers are mostly Medicaid providers, the rate reduction is not on the state program side so they will see their full reimbursement. Mr. Klein stated providers who have county contracts 99.9% are tied to a Medicaid rate which mean their county contracts go down and for the rural can be significant. He added to rethink the service delivery model. Discussion ensued on expanding service delivery,

one year of expansion of the waiver that allows flexibility of the services via virtual service delivery and alternative and introduced to the adult day care center, while they were closed to the public they could still offer the electronic connection.

C. Food Security

Ms. Schmidt stated there were updates from several entities on COVID and how they were addressing food insecurity. It was both sad and motivating to see the need and cross collaboration of providers. Jeff Duncan and Jeff Klein have got some great contracts in place particularly the Tivity contract which is a vendor who can deliver frozen meals. Some vendors were shut down and Tivity was able to step in and provide the support. There were no big action items. Mr. Duncan added they have updated numbers about CARES act and Family First emergency funding and to date with over 8 million dollars, they have sub awarded 5.2 million and 72% of that has went to nutrition. That has been the number one need for emergency funding identified by community partners.

D. Ombudsman Report

Jennifer Williams-Woods stated they opened 123 cases in July. They went off an idea from the State of Alabama who created an activity book in LTC settings. They updated with their logo and provided contact information. Long Term Care Ombudsman (LTCO) staff delivered outside the facilities along with poster and fliers for residents and received additional cases from outreach. They also sent to several facilities' electronic copies and provided two copies for each resident. She continued they are working with Seniors in Service and sub granted to purchase tablets for each facility. They are currently in the process of ordering 650 tablets that residents will be able to interact with families and LTCO to provide relief of isolation. Health Care Quality Control (HCQC) made tablets available to skilled nursing facilities too. Ms. Williams-Woods stated she is extremely proud of the approval of CARES funds for visitation booths for skilled nursing facilities including all of the rural areas. They will be organized by a schedule book for visitors, each resident will have some time with booths to see loved ones. Staff also have their advocacy, instead of face to face by contacting residents by phone and obtaining consent that way and Power of Attorney (POA) for those with or move forward in the resident's best interest and obtaining the proper records from the facility. Technology has been successful for care plan meetings, some limitation on visits, and are working on reentry plan working with local supervisors in both the south and the north and reviewing other state plans for reentry. She mentioned very few are back in facilities due to some states being hot spots. She has been attending the national association for LTCP and have copies of other states plans to reopen, and their ombudsman will be on a voluntary basis. Nine counties are resuming in door visit but those are counties not experiencing an increase in cases. The plan when it is in place will be managed on a week by week basis. She reviewed some information from white house, Washoe, Clark, and Elko county as hot spots from the white house perspective. They are purchasing additional PPE items to ensure residents and staff are as safe as possible. Ms. William's-Woods expressed she would hate to be the source of an outbreak.

Mr. Gold stated AARP sent a letter earlier this week to DHHS, DPBH and the Governor's Office and is glad that she is actively involved and understands there's complications and precautions needed but the reentry is something that needs to happen. The eyes on contact is so important and phone communication has its limitations and people can be very reluctant to share. He asked if Dena could share the letter with the COA? The letter talks about ombudsman reentry and what is needed to do that and adequate staffing in nursing homes and hopefully the state is watching that. Third, who in the state is monitoring the progress for eventually visitors going back in? Death rates are 40-50% in other states so we are doing something right. Fourth, testing of

staff and residents and visitors when allowed. How soon might it be happening if actively engaged in some of the planning? Ms. Williams-Woods stated she cannot put a timeframe on it but is starting those conversations now and has spoken with Paul Shubert and Margot Chappel with DPBH and HCQC to discuss how that will look. They will be looking at different plans, it will be a fluid document as they find out more information and things may change. Ms. Schmidt mentioned DPBH has a lot of detailed information on where the outbreaks are which will help determine which facilities we can go back into. Mr. Gold asked who would be the best advocate to make this happen quicker such as ADSD, DPBH, or the Governor's Office?

Ms. Williams-Woods responded it will be a collaborative effort between all of those and following the guidance put forward by CMS, but the unfortunate thing is CMS has not declared that ombudsmen are not essential care workers, they are categorized with visitors. It is very clear in documentation from CMS, surveyors are considered essential care worker. She mentioned Crystal Wren and Tammy Severs staff have not been in facilities because they are not considered essential health workers. Ms. Sever clarified there have been instances where they had to go into facilities/hospitals, but it has to be a real emergency and APS has continued to make home visits since March. Ms. Liveratti stated she is wondering if they have a rough idea of what percent the facilities will have for the booths. Ms. Williams-Woods responded they will order one for every skilled nursing facility so one hundred percent. They are working on logistics and working on a subgrantee, because it's not within ADSD, and sub granting that money out to have an outside entity and working with seniors in service to possibly include them too and then work on distribution. Ms. Liveratti asked about which percentage for facilities will receive the tablets? Ms. Williams-Woods replied 100% skilled nursing facilities, residential facilities for groups which includes assisted living and homes for individual residential care will receive them. Mr. Gold aging located a course to provide grants for virtual presentation and was wondering how many facilities got those grants and was there any follow up with what they did with it? Ms. Williams-Woods does not have that detail, but they received their money from the CARES funds and also mentioned to conduct window visits via telephone while fully equipped in PPE.

9. Approval of Agenda Items for Next Meeting

Keep the usual agenda items and if any are thought of to please send to Miles Terrasas.

10. Next Meeting Date November 10, 2020

11. Public Comment

- Jeff Klein stated we often focus on difficulties in front of us, and from a food security point of view they have responded to more urgent needs because of a COVID challenges and has been need to keep people fed in a matter of 1 day, 2 days and wants the Commission to know what a phenomenal job Mr. Duncan has done shepherding dollars, moving and working with Marcia Blake, Barbara Monroy, which required people to drop everything jump in and operationalize a solution and distribute. The division should be really proud for their work in this area. Dena Schmidt agreed and thanked him for his recognition of staff.
- Mary Liveratti stated she would like to applaud Jeff Duncan too. Since talking about visitation in nursing homes and assisted livings, I had a couple ladies that were family members that had contacted me about assisted living in Carson City. One was interested in trying to have a group thing going on because they are not letting the residents eat together and they are missing that socialization. I referred to Nevada CAN and maybe the NEST program will reach out to the facilities. She loves the creative process of people willing to try things to meet the needs and what the program people are doing in these tough situations. Ms. Schmidt stated she is happy to follow up with the NEST

collaborative and connect with the Carson assisted living facility.

12. **Adjournment** – Meeting adjourned at 3:06 pm.

Attachments:

- A. [Vulnerable Adult Protection Order Presentation](#)
- B. [Adult Protective Services Caseload](#)
- C. [CBC Caseload and Waitlist / CBC Presentation](#)