



**BRIAN SANDOVAL**  
Governor

STATE OF NEVADA  
DEPARTMENT OF HEALTH AND HUMAN SERVICES  
AGING AND DISABILITY SERVICES DIVISION

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**MICHAEL WILLDEN**  
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Administrator

## MINUTES

Name of Organization: Nevada Commission on Services for Persons with Disabilities (Nevada Revised Statute [NRS] 426.365)

Date and Time of Meeting: October 7, 2013  
9:00 a.m.

Location: Child Behavior Services  
2655 Enterprise Road  
Reno, NV 89512

Desert Regional Center – Administration Building  
1391 South Jones Blvd  
Las Vegas, NV 89146

This meeting was video-conference at the above locations.

I. Welcome and Introductions  
Mary Bryant, Vice-Chair

Members attended in person and by videoconference.

**Members Present:** Bill Heavilin, Karen Taycher, Mary Bryant, Jon Sasser, Jodi Sabal

**Staff Present:** Julie Kotchevar, Carissa Wilson, Grace Tyler, Brook Adie, Nicole Batien, Tammy Ritter, Michelle Ferral, Jane Gruner

**Guests:** Chelsea Szklany, Southern Nevada Adult Mental Health Services; Ellen Richardson-Adams, Public and Behavioral Health; Corrine Veewig, RAVE; Elizabeth Aiello, Division of Health Care Financing and Policy; Matt Stoll, Desert Regional Center

A quorum being present Ms. Bryant called the meeting to order.

II. Public Comment

There were no comments from the public

III. Approval of Minutes from the August 5, 2013 Meeting **(For Possible Action)**  
Mary Bryant, Vice-Chair

Mr. Sasser made a motion to approve the minutes from August 5, 2013. Ms. Taycher seconded. All in favor none opposed. The motion carried.

IV. Update on the Status of Nevada's Olmstead Plan and Possible Recommendations for Plan Revision **(For Possible Action)**  
Bill Heavilin, Commission Member

Ms. Kotchevar stated she spoke with Mr. Wilden and he stated it was not intentional that the State of Nevada did not respond to the survey from the Senate. No one in the Department of Health and Human Services had seen it. Also, he would like the Commission on Services for Persons with Disabilities to work on updating the Olmstead Plan.

Mr. Sasser suggested speaking with Tony Richards for any funding.

There was discussion regarding the Sub-Committee. Mr. Heavilin, Mr. Sasser, and Ms. Taycher are interested in forming the work group with Mr. Heavilin acting as the Chair.

V. Update on Changes to the Intermediate Care Facility  
Matt Stoll, Desert Regional Center

Mr. Stoll talked about the changes that have taken place to improve quality of services. He stated the following:

- Five new positions currently hiring for.
- Staff training is continuing to keep up with changing population.
- Continue increase of monitoring in homes.
- There is a supervisor on shift 24-7.
- Developed a resident counsel and a parent council meeting is coming up soon.
- Focusing on increasing activities on weekends and structured activities in the home and building.
- Furniture improvements to make the facility look nicer.

Mr. Stoll stated that when there is an allegation of abuse or neglect a supervisor is notified immediately and parents are notified in a timely matter. Follow up will take place within 24 hours to confirm that guardian/family members have been notified.

Ms. Taycher expressed concern regarding the amount of allegations of abuse and neglect.

Mr. Stoll will provide data regarding the amount of allegations and notifications to family members verses agency guardians at next meeting.

VI. Update on Consolidation of Home and Community Based Waivers

Elizabeth Aeillo, Division of Health Care Financing and Policy

1915C Medicaid Waivers – Federal Government has an entitlement for institutional care for individuals, for people who need a higher level of support in the community above what Medicaid pays for, you have to ask for a waiver for Medicaid to provide those additional services. Social security act 1915C.

1915C Waivers:

- Home and Community Based Waiver for Persons with Mental Retardation and related conditions has changed to the Intellectual Disabilities Waiver.
- Home and Community Based Waiver for Persons with Physical Disabilities.
- Home and Community Based Waiver for Persons in Assisted Living.
- Home and Community Based Waiver for the Frail and Elderly.

1915C Waivers are:

- Alternatives to institutions.
- Designed to allow states to be more flexible providing healthcare options.
- Allowing states to save money and gives patients to have more freedom of choice.
- Statewide.
- Comparability of services. Every person on Medicaid is eligible for all services on the Medicaid plan.

Income and Resources:

- Allow persons on waivers to make the same income they would make if they were in an institution.

Requirements:

- Age for Elderly Waiver
- Must need an institutional level of care for nursing facility to be on the Elderly Waiver.
- ICF level of care to be on the Intellectual Disabilities Waiver.
- Must need waiver services to be on waiver program.
- Must be at risk for being in an institution to be on a waiver.
- Income requirements are subject to change annually.

Waitlist:

- Total persons currently on the waitlists are available online. Ms. Aeillo will email the link to Ms. Wilson to be passed out.

Goal:

- Long term support services across the continuum.
- Reduce current waiver programs from four to two.
  - One based on nursing facility level of care.
  - One based on ICFID level of care.
- One integrated system for Home and Community Based long term support services for Nevada

- Consistent program operations

Benefits to Recipients:

- No wrong door for needed services.
- Simpler and faster access to needed services.
- No need to complete multiple applications.
- More services available.
- No interruptions in services or need to transfer.

Benefits to Providers:

- One referral service setting.
- Once consistent service plan.
- No need for multiple provider numbers.
- Reduction in repetitive and duplicative processes.
- Consistency in policy interpretation and technical advice.
- Single coordinated quality management reviews.
- Bigger sample sizes.

Benefits to State Agencies:

- Increased consistency in administrative oversight program operations and personnel management.
- Single coordinated quality assurance reviews for compliance and qualifications.
- Strengthen quality management.
- Reduction in paperwork reporting requirements to CMS.
- Reduction in Waiver renewals.
- More flexibility in initiating services to recipients.
- Improved planning for future slots.
- Budget cost per eligible rate determination and staffing needs.
- Elimination of duplicative work.
- Single state wide case management software.

Mr. Sasser expressed concern regarding the waiting list and staffing needs.

There was a discussion regarding staffing slots.

Ms. Taycher asked if habilitative services, speech, and occupational therapy were available only to people who develop the disability later in life or if they are also available to persons who were born with a disability. This topic was discussed and decided that there are some services that are available to persons with a disability from birth but each case would need to be determined individually.

Ms. Aeillo was invited to return to the next meeting to further discuss this matter.

- VII. Update on Mental Health Discharge Process  
Ellen Richardson-Adams, Public and Behavioral Health  
Chelsea Szklany, Adult Mental Health Services

Ms. Szklany stated the following:

- Working on one state wide policy that will be consistent across the board.
- Consistent Standardize Service Delivery Models for discharge planning.
- Individual has to be stable for the community or the environment to which they will be discharged or transferred to another medical facility.
- If transferred to another facility then all the rules of COBRA are in compliance.
- Working on an intrastate collaboration for transfers/discharges out of state.
- Improved on the documentation of coordination, course of treatment, stabilization and aftercare provided.

Data will be provided regarding patients who have dual disabilities.

- VIII. Request for Letter of Support for Nevada Medicaid's application to CMS for the balancing Incentive Payment Program **(For Possible Action)**  
Julie Kotchevar, Aging and Disability Services Division

Ms. Aeillo stated that the federal government has offered to states under the healthcare reform a Balancing Incentive Payment Program. The federal government will give the state an extra 2% in federal match.

Mr. Sasser made a motion to approve the request for the letter. Mr. Heavilin seconded. All in favor none opposed. The motion carried.

- IX. Discussion and Possible Determination of Issues and Agenda Items to be Considered or Deliberated at the Next Meeting **(For Possible Action)**

- Olmstead
- Intermediate Care Facility for Individuals with Intellectual Disabilities regarding number of complaints and substantiations and data regarding family guardians.
- Medicaid regarding chapter 1700
- Follow up on collaboration for dual diagnosis with mental health and developmental services.
- Follow up on Early Intervention regarding Part C and ADSD with Laura Valentine and Michelle Ferrall.

- X. Set and Confirm Dates for Future Meetings **(For Possible Action)**  
Mary Bryant, Vice-Chair

Tuesday December 10, 2013 at 9:00am

- XI. Public Comment

There were no comments from the public.

- XII. Adjournment  
Mary Bryant, Vice-Chair

Mr. Sasser made a motion to adjourn the meeting. Ms. Taycher seconded. All in favor none opposed. The motion carried.