



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

Administrative Office
3416 Goni Rd, Ste D132
Carson City, NV 89502

(775) 687-4210 • Fax (775) 687-0576
adsd@adsd.nv.gov

RICHARD WHITLEY
Director

JANE GRUNER
Administrator

BRIAN SANDOVAL
Governor

MEETING NOTICE AND AGENDA

Name of Organization: Nevada Commission on Services for Persons with Disabilities (CSPD)

Date and Time of Meeting: February 11, 2016
9:30 a.m.

Location: State Capitol Building
Guinn Room
101 N. Carson St
Carson City, NV 89701

Video Conference Location: Grant Sawyer State Office Building
Governor's Conference Room
555 East Washington Ave. Suite 5100
Las Vegas NV 89101

To join this meeting by phone dial 1-888-251-2909, then enter Access code 8985078 when prompted.

Minutes

Members present: Brian Patchett, Gary Olsen, Karen Taycher, David Daviton, Shelley Hendren, Jon Sasser, Jim Osti, Nicole Schomberg, Mary Bryant

Guests: Jeff Beardsley, Judith Kholer, Shirley Campbell, Ed Guthrie, Tom Brundige, Amanda Slabaugh, Mechelle Merrill, Sherry Manning, George McKinley, Scott Youngs, Shannon Sprout, Megan Comlossy, Laura Valentine, Renee Bordenelle, Tammy Ritter, Mary Evilsizer, Jennifer Frischmann, Mark Olson

Staff: Jane Gruner, Rique Robb, Brook Adie, Desiree Bennett, Tanya Keith

I. Welcome and Introductions

Brian Patchett, Commission Chairperson

- II. 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. Public comment at the beginning and end of the agenda may be limited to three minutes per person at the discretion of the chairperson. Members of the public may comment on matters not appearing on this agenda or may offer comment on specific agenda items. Comments may be discussed by the Board but no action may be taken. The matter may be placed on a future agenda for action)

Mr. Guthrie commented that all the services for seniors and adults with disabilities have had no rate increase for almost 12 years and believes it is a potential violation of Medicaid law. People who are providing services are leaving the state. Medicaid requires that services be available to people receiving the services funded by Medicaid and have the same accessibility to those services as people who have those services funded by other sources. It may also be a violation of the Olmstead decree. The Olmstead decree by the U.S Supreme Court says that individuals should have access to community based services and not just institutional services. By keeping rates for services artificially low; seniors and individuals with disabilities might have to be petitioning for placement in institutional placement because no service provider will provide those services at the rates the state is now paying. It is an important issue for the Commission to address. Mr. Guthrie asked that the Commission put this issue on the legislative agenda for the upcoming session.

Mr. Olsen commented that he would like to bring the concept of the interpreter training program to the Commission and asked that it would make it on to the Commission's legislative agenda.

Mr. Daviton asked ADSD to implement their own permanent video conference room because the agency has so many boards and commissions and accessibility can sometimes be a problem.

Mr. Beardsley commented that interpreters are concerned about the job announcement from the state for the interpreter pool because it is a contracted position without any benefits.

- III. Approval of Minutes from the November 12, 2015 Meeting (For Possible Action)
Brian Patchett, Commission Chairperson

Mr. Sasser made a motion to approve the minutes. Ms. Bryant seconded the motion. Motion passed.

- IV. Update and Discussion on the Eligibility Criteria of the ABLE Act in Nevada and Update on the Strategic Plan with Possible Recommendations from the Commission (For Possible Action)

Jane Gruner, Administrator, ADSD

Ms. Gruner stated that the ABLE Act became federal law in December 2014. With help from legislators and Commission members, the Act was made into a bill at the last Legislative session.

She presented to the Commission an update on ABLE Act accounts (attachment A). The accounts are established in the section of 529A qualified ABLE programs. They are qualified saving accounts that receive preferred federal tax treatment. They enable eligible individuals to save for disability related expenses and are expected to be available in at least some states by the middle of this year.

Requirements for the ABLE accounts: each eligible individual may have one ABLE account, designated beneficiary is the account owner, and total annual contributions may not exceed federal gift tax contribution (currently \$14,000). Eligibility for an ABLE account beneficiary is that the individual must be disabled before the age of 26 and dependent on the severity of the disability. Medicaid benefits will not be suspended if the ABLE account amount exceeds \$100,000.

What's next?

ADSD will meet with Linda English from the Treasurer's office and start identifying which programs Nevada will be aligning up with. Nevada will be buying into another state's program. The Treasurer's office will also be instrumental in informing the public about this program. Mr. Gruner estimated that it could take seven to eight months.

V. Discussion and Follow up on Nevada Medicaid Managed Care Proposals and The Division of Health Care Financing Policy Autism Services Funding, Possible Recommendations Made by the Commission (For Possible Action)

Jane Gruner, Administrator, ADSD
Jennifer Frischmann, DHCFP

Ms. Gruner presented and answered questions on the Nevada Medicaid Managed Care Proposals PowerPoint (Attachment B). ADSD is looking at what the best service delivery model for the state will be. Medicaid and ADSD is travelling across the state to conduct listening sessions intended to obtain as much public comments as possible on what is working and what isn't. Medicaid will be hiring a vendor that is experienced in setting up managed care organizations within states.

Ms. Gruner clarified that the work being completed within the next year is what will be presented to the legislature.

Mr. Sasser commented that he would like to know how managed care is currently working or not working from one population to the next. The Interim Committee on Healthcare will be addressing Medicaid issues at their meeting in April. That meeting would be the best chance to educate the committee on the any issues the Commission has about managed care.

What is the future of managed care?

Options that Nevada is considering; is expanding managed care statewide, expanding the populations served, increasing the number of managed care plans to offer greater choice of flexibility of services.

Ms. Gruner stated that the Listening sessions will have focus groups and are looking for people interested in participating.

Mr. Olsen made a motion for the Commission to give designated members the ability to attend focus groups or Legislative committee Meetings and represent the commission. Mr. Osti seconded the motion. Motion passed.

Mr. Olsen made a motion to submit a letter to the Division of Healthcare Finance and Policy and relevant legislative committees outlining statements of the concerns of the CSPD. Mr. Sasser seconded the motion, motion passed. Mr. Osti, Mr. Patchett, Ms. Taycher, Mr. Sasser and Mr. Olsen will work on drafting the letter. Issues to address in the letter will include:

1. Before making any decisions on adding additional populations to managed care, review data on how current populations are being handled.
2. Decisions being made in the focus groups are after looking at each population individually.
3. Rates of providers.

Ms. Sprout clarified questions from the Commission that as of January 14, 2016 Applied Behavioral Analysis services became effective with Nevada Medicaid. Under that, the autism program did submit their state plan for the policy and rate methodology to CMS. It is still under review. Exact numbers of children receiving services will not be available to the Commission until mid-April.

Ms. Gruner commented that the Autism Treatment Assistance program with ASD receives about 60 referrals a month, with 45 percent Medicaid eligible. The ATAP program has a set number of funds designated in the budget to bill Medicaid for services.

ATAP is also trying to become enrolled as a provider in order to provide services directly through their own board certified behavioral analysis (BCBA) and work with providers to get them enrolled under the ATAP umbrella.

Ms. Gruner updated the Commission that the recent Olmstead report was not representative of what was needed for seniors or for behavioral health. An executive summary has been added along with recommendations in certain service gaps. A review of the Olmstead report will be presented at the upcoming Olmstead Subcommittee meeting on March 1st.

- VI. Report from the Subcommittee on Legislative Issues, Discussion and Possible Recommendations from Commission **(For Possible Action)**
- Review of Bills Passed During Legislative Session 2015
AB5, SB13, SB419, AB200
 - List of Recommendations for Interim Committees
Jon Sasser, Subcommittee Chair

The Legislative Subcommittee met on January 27th. Mr. Sasser read through the recommendations the committee discussed for each interim committee (Attachment C). The full Commission discussed which meetings to attend that would be appropriate to discuss children's mental health, adult mental health and Ms. Comlossy stated that the Interim Committee on Healthcare, Chaired by Assemblyman Oscarson, will have a meeting April 20th with the broad theme of insurance. There will be some presentations at the meeting, but one of the best ways to get the information that is being discussed at the CSPD meetings in front of the Healthcare Committee is through public comment after each agenda item. The agenda is still being developed. Ms. Comlossy will send a list of future meetings and their themes to the Commission.

Mr. Patched proposed that the CSPD Legislative Subcommittee meet monthly over the next couple of months during the Legislative Interim.

Mr. Sasser made a motion that the Full Commission support the general agenda to

1. Work with the Committee on Seniors, Veterans, and Adults with Special Needs on providing adequate rates for providers of services to people with disabilities and to make the legislature accessible to the deaf.
2. Work with the Committee on Healthcare to close the 500 births loophole for certain hospitals. Discuss concerns around Medicaid managed Care, provider rates, implementation of Medicaid payment of ABA and to support children's mental health issues coming forward. Support continued funding for mental health through Medicaid.
3. Work with the committee on Education to support the Federation of the Blind legislation
4. Funding of independent living services.
5. Support possible BDR's that may be needed for the CSPD Taskforce on Integrated Employment Workgroup.

Mr. Osti seconded the motion. The Commission had one opposition and one abstention. Motion passed.

Ms. Robb stated that due to the passing of SB419 section 22, the issue of CSPD members terming out in September has been resolved. The Commission can determine if the new termination schedule will work for them. The proposed staggered term end dates are as follows:

Brian Patchett 6/30/2018
Mary Bryant 6/30/2017
David Daviton 3/1/2021
Gary Olsen 6/30/2016
Jim Osti 3/31/2021
Jon Sasser 6/30/2017
Nicole Schomberg 4/31/2018
Karen Taycher 6/30/2016
Shelley Hendren 6/30/2020

Ms. Bryant stated that she would switch term her term end date to 2016 so Ms. Taycher would term out in 2017. Mr. Sasser made a motion to approve the proposed term ending dates with the switch between Ms. Bryant and Ms. Taycher and to also propose to the Director of DHHS a second 3 year term for Ms. Bryant when she is eligible to do so. Mr. Olsen seconded the motion. Motion passed.

Ms. Bryant stated that SB128 passed in 2015 addressing the new power of attorney for persons with disabilities. So far nothing has happened with it because people do not know about it. She made a motion asking the Commission's permission to ask for the help of the Nevada Disability Advocacy and Law Center to develop a legal form and put it on their website. Mr. Osti seconded the motion. Motion passed.

- VII. Report from the Subcommittee on Communication Services, Discussion and Possible Recommendations From Commission (For Possible Action)
Julie Balderson, Social Services Program Specialist, ADSD

Ms. Balderson updated the Commission that at the last SOCS meeting on January 13th, the Subcommittee voted on recommendations to make to the CSPD Legislative Subcommittee.

- VIII. Update on Caseload Evaluation Organization Numbers, Discussion and Possible Recommendations from Commission (For Possible Action)
Jill Berntson, Deputy Administrator, ADSD

Ms. Gruner answered questions from the Commission on the ADSD Caseload Evaluation numbers. The ATAP waitlist continues to grow; ADSD receives an average of 60 referrals each month. ATAP continues to fund an average of 18 new children a month. Providers are currently transitioning to get the right certified, licensed and qualified staff to participate with Medicaid and to bill Medicaid for their services. The process to become a registered behavior technician is taking about 90-180 days, which is causing a lag in billing for services.

- IX. Discussion and Possible Recommendations on the Governor's Taskforce on Integrated Employment (For Possible Action)
Brian Patchett, Commission Chairperson
Shelley Hendren, Task Force Co-Chairperson

Mr. Patchett stated that there have been some delays with the Taskforce meeting and finding a facilitator. The plan is for the Taskforce to meet in-between CSPD meetings on the second Thursday of each month. ADSD staff will send out an email to everyone who has shown interest in participating on the Taskforce and

bring an update to the next Taskforce on Integrated Employment meeting on March 10th.

- X. Presentation from Assistive Technology Council on Status of State Website Initiative and Possible Recommendations from the Commission (For Possible Action)
Scott Youngs, NCED
George Mckinlay, NCED

Agenda item was tabled to the next meeting due to lack of time.

- XI. Presentation on the Unified State Plan Under the Workforce Innovation Opportunity Act (WIOA) with Possible Recommendations from the Commission (For Possible Action)
Shelley Hendren, Administrator, VR

Ms. Hendren gave a quick overview of how the Unified State Plan was put together and mandated under WIOA. The Governor's Strategic Vision for workforce programs in Nevada is included.

- XII. Discussion and Possible Determination of Issues and Agenda Items to be Considered or Deliberated at the Next Meeting (For Possible Action)
Brian Patchett, Commission Chairperson

- Update on managed care
- Presentation from Jim Osti on Healthy Southern Nevada and creating a Nevada Disability Compendium
- Legislative item
- NAMI (National Alliance on Mental Illness) and Mental health
- Olmstead update
- SOCS report on Captioning

- XIII. Confirm Dates for Future Meeting (For Possible Action)
Brian Patchett, Commission Chairperson

The next CSPD meeting is scheduled for May 12th

- XIV. Public Comment (May Include General Announcements by Commissioners) (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. Public comment at the beginning and end of the agenda may be limited to three minutes per person at the discretion of the chairperson. Members of the public may comment on matters not appearing on this agenda or may offer comment on specific agenda items. Comments may be discussed by the Board but no action may be taken. The matter may be placed on a future agenda for action)

Ms. Robb stated that at the April 13th SOCS meeting, there will be an Open Meeting Law training that all Commission members are welcome to join.

XV. Adjournment
Brian Patchett, Commission Chairperson

Commission on Services for Persons with Disabilities Members

Brian Patchett (Chair), Mary Bryant (Co-Chair), Gary Olsen, Jon Sasser, Karen Taycher, Nicole Schomberg, Shelley Hendren, James Osti, David Daviton

NOTE: Agenda items may be taken out of order, combined for consideration, and/ or removed from the agenda at the Chairperson's discretion. 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 Desiree Bennett at (775) 687-0586 as soon as possible and at least five days in advance of the meeting. If you wish, you may e-mail her at dabennett@adsd.nv.gov. Supporting materials for this meeting are available at: 3416 Goni Rd, D-132, Carson City, NV 89706 or by contacting Desiree Bennett (775) 687-0586 or by email at dabennett@adsd.nv.gov

Agenda Posted at the Following Locations:

1. Aging and Disability Services Division, Carson City Office, 3416 Goni Road, Suite D-132, Carson City, NV 89706
2. Aging and Disability Services Division, Las Vegas Office, 1860 East Sahara Avenue, Las Vegas, NV 89104
3. Aging and Disability Services Division, Reno Office, 445 Apple Street, Suite 104, Reno, NV 89502
4. Aging and Disability Services Division, Elko Office, 1010 Ruby Vista Drive, Suite 104, Elko, NV 89801
5. Nevada Community Enrichment Program, 6375 West Charleston Boulevard, Ste. L200 Las Vegas, NV 89146
6. Southern Nevada Center for Independent Living, 6039 El Dora Street H-8, Las Vegas, NV 89101
7. Disability Resource Center, So. E. Greg St., Suite 102 Sparks, NV 89431
8. Nevada State Library and Archives, 100 North Stewart Street, Carson City, NV 89706
9. Desert Regional Center, 1391 South Jones Boulevard, Las Vegas, NV 89146
10. Sierra Regional Center, 605 South 21st Street, Reno, NV 89431
11. Rural Regional Center, 1665 Old Hot Springs Road, Carson City, NV 89706
12. Northern Nevada Center for Independent Living, 999 Pyramid Way, Sparks, NV 89431
13. Dept. of Health and Human Services, 4126 Technology Way, Carson City, NV 89706
14. Early Intervention Services, 2667 Enterprise Road, Reno, NV 89512

Notice of this meeting was posted on the Internet at: <http://www.adsd.nv.gov/> and <https://notice.nv.gov>

Nevada Able Accounts

Able Accounts

- are established in the Section 529A Qualified Able Program
- are qualified savings accounts that receive preferred federal tax treatment
- enable eligible individuals to save for disability related expenses
- are expected to be available in some states by mid-2016

Assets in and distribution for qualified disability expenses will be disregarded or given special treatment in determining eligibility for most federal means-tested benefits.

Requirements of Able accounts:

- Each eligible individual may have only one Able account
- "Designated beneficiary" is the account owner (person such as a parent or guardian may be allowed signature authority over the account).
- Total annual contributions may not exceed the federal gift tax contribution, which is currently \$14,000 (this will periodically be adjusted for inflation).
- Multiple individuals may make contributions to an Able account.
- Aggregate contributions may not exceed the state limit for 529 savings accounts, Nevada's limit is \$370,000.

Eligibility for being an Able account beneficiary:

To be eligible, individuals must meet two requirements:

- Age requirement: must be disabled before age 26
- Severity of disability:
 - Have been determined to meet the disability requirements for Supplemental Security income (SSI) or Social Security disability benefits (Title XVI or Title II of the Social Security Act) and are receiving those benefits,

Or

 - Submit a "disability certification" assuring that the individual holds documentation of a physician's diagnosis and signature, and confirming that the individual meets the functional disability criteria in the Able Act (related to the severity of disability described in Title XVI or Title II of the Social Security Act).

Able accounts may be used for the following:

- Distributions from an Able account may be made for "qualified disability expenses".
- "Qualified disability expenses" are expenses that relate to the designated beneficiary's blindness or disability and are for the benefit of that designated beneficiary in maintaining or improving his or her health, independence, or quality of life.

- The term “qualified disability expenses” should be broadly construed to permit the inclusion of basic living expenses and should not be limited to:
 - expenses for items for which there is a medical necessity, or
 - which provide no benefits to others in addition to the benefit to the eligible individual.

Example of qualified disability expenses:

- Education
- Housing
- Transportation
- Employment training and support
- Assistive technology and personal support services
- Health, prevention, and wellness
- Financial management and administrative
- Legal fees
- Expenses for oversight and monitoring
- Basic living expenses (NPRM)
- Funeral and burial expenses
- Any other expenses approved by the Secretary of the Treasury under regulations consistent with the purpose of the program.

Distributions for non-qualified expenditures will be subject to tax consequences and may affect eligibility for federal means tested benefits.

Impact on eligibility for federal benefits:

Able assets will be disregarded or receive favorable treatment when determining eligibility for most federal means-tested benefits:

- Supplemental Security Income (SSI): For SSI, only the first \$100,000 in Able account assets will be disregarded.
 - SSI payments (monthly cash benefit) will be suspended if the beneficiary’s account balance exceeds \$100,000, but SSI benefits (eligibility) will not be terminated. Funds above \$100,000 will be treated as resources.
 - Housing expenses intended to receive the same treatment as all housing costs paid by outside sources.
 - Medicaid: Able assets are disregarded in determining Medicaid eligibility.
 - Medicaid benefits are not suspended if the Able account balance exceeds \$100,000 (that only applies to the SSI cash benefit)
 - Medicaid payback: Any assets remaining in the Able account when a beneficiary dies, subject to outstanding qualified disability expenses, can be used to reimburse a state for Medicaid payments made on behalf of the beneficiary after the creation of the Able

account (the state would have to file a claim for those funds)

Tax implications:

- Contributions to an Able account are made with post-tax dollars.
- Federal taxation: In general, Able programs are exempt from taxation. Distributions from Able accounts for qualified disability expenses are exempt from taxation. The exception is distributions not used for qualified disability expenses are taxable and subject to an additional 10% tax.
- State taxation: Nevada has not made this decision. It is assumed Nevada will give the same incentives as contributions given to 529 accounts.

What is next?

Brian Sandoval
Governor

Richard Whitley, MS
Director



Marta Jensen
Acting Administrator

Tracey D. Green, MD
Chief Medical Officer

Department of Health and Human Services
Division of Health Care Financing and Policy

Managed Care in Nevada

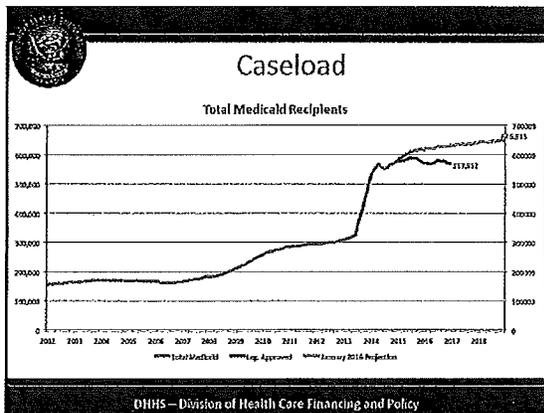
February 4, 2016

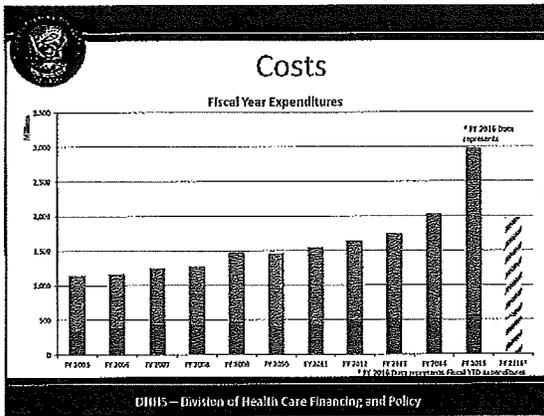


Background

- Centers for Medicare and Medicaid Services(CMS) established the Triple Aim
 - Better care for individuals
 - Improved population health
 - Reduced costs by improving health outcomes
- Ensuring Medicaid program sustainability
- Passage of SB514

DHHS – Division of Health Care Financing and Policy





Purpose Statement

The Department of Health and Human Services is evaluating alternative service delivery models aimed at achieving better care for patients, better health for our communities and lower costs through improved health outcomes.

DHHS – Division of Health Care Financing and Policy

Medicaid in Nevada

- ♦ Nevada Medicaid provides services under two different delivery models:
 - Fee-For-Service
 - Managed Care

DHHS – Division of Health Care Financing and Policy



What is Fee-for-Service?

- Individuals can receive services from any provider enrolled with Nevada Medicaid
- No referrals from a primary care physician are required to see a specialist
- Individuals must coordinate and manage their own care

DIHS – Division of Health Care Financing and Policy



What is a Managed Care Organization?

- A health care organization that:
 - Helps people find a primary care physician
 - Helps people navigate the health care system
 - Maintains a network of health care providers

DIHS – Division of Health Care Financing and Policy



Managed Care

- Managed Care Organizations:
 - Provide care coordination
 - Provide patient education
 - Provide preventative care
 - Connect individuals with specialty providers
 - Ensure the right service is provided at the right time

DIHS – Division of Health Care Financing and Policy



What Does Medicaid Managed Care Look Like in Nevada Today?

- All Medicaid recipients who live in urban Washoe County (Reno) or Clark County (greater Las Vegas area) who are not determined disabled by the Social Security Administration are mandated
- Medicaid currently contracts with two Managed Care Organizations:
 - Health Plan of Nevada
 - Amerigroup

DHHS – Division of Health Care Financing and Policy



What Services Are Currently In Managed Care?

- Managed Care covers most of the services that are in the Medicaid-approved State Plan (not all-inclusive):
 - Physician/Hospital Services
 - Pharmacy
 - Behavioral Health Services
 - Personal Care Services
 - Home Health
 - Therapy Services
- Managed Care Organizations have the flexibility to offer additional services based on need and the plan selected

DHHS – Division of Health Care Financing and Policy



What is Not Currently Provided by Managed Care?

- Hospice
- Adult Day Health Care
- Non-Emergency Transportation
- Targeted Case Management
- Home and Community-Based Waiver Services
- Intermediate Care Facilities for Individuals with Intellectual Disabilities
- Nursing Facility Stays more than 45 days
- Orthodontia
- Residential Treatment Center stays more than 30 days

DHHS – Division of Health Care Financing and Policy



What is the Future of Managed Care?

- These are options that the State may consider:
 - Expanding Managed Care statewide
 - Including additional services that are not currently covered by managed care
 - Expanding the population served by managed care to include aged, blind, or disabled individuals
 - Increasing the number of Managed Care Plans to offer greater choice and flexibility of services

DHHS – Division of Health Care Financing and Policy



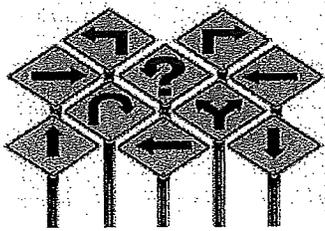
Next Steps

- Continue Stakeholder Input
- Re-procure current managed care contract
- Hire a contractor to assist in evaluating the various options
 - Final recommendation to Legislature and Governor late 2016

DHHS – Division of Health Care Financing and Policy



Feedback



DHHS – Division of Health Care Financing and Policy



Thank you!

- Information can be found online at:
www.dhcfp.nv.gov
- Email questions or comments to:
ManagedCareExpansion@dhcfp.nv.gov

DHHS – Division of Health Care Financing and Policy

CSPD Legislative Subcommittee outline January 27, 2016

Presentations/Proposals to interim Legislative Committees:

o **Committee on Seniors, Veterans and Adults with Special Needs** (Senator Hardy)

1. Captioning services at LCB hearings:

Rick Combs will be contacting the Committee Chair to set an agenda item allowing CSPD and Mr. Combs to discuss/ present what LCB is doing and the vision of the CSPD on captioning at the Legislature.

2. Medicaid rates for ABA:

o **Committee on Health Care** (Assemblyman Oscarson)

1. NRS 442.540, closing loop hole for rural hospitals:

Mr. Patchett made a motion for the CSPD Legislative Subcommittee to make a recommendation to the full Commission on February 11th to include an agenda item on the interim Committee on Health Care to ask for a bill draft to close the 500 births loophole.

2. Medicaid rates for ABA:

Mr. Sasser recommended that the Legislative Subcommittee ask the CSPD to express concern about the outdated rates for services to the interim committees. He asked that any providers, who believe they have inadequate rates, submit any information to Desiree at ADSD to distribute to the full Commission before the meeting on the 11th

3. Medicaid Managed Care:

Mr. Sasser added that the Interim Committee on Health Care's meeting in April will be focused on Medicaid. He suggested that the CSPD support Nevada Mental Health in requesting Assemblyman Oscarson to include on their agenda a report on the pros and cons of managed care

and how it is affecting populations who are currently using it.

4. Autism implementation and rates:

Mr. Sasser would like to add autism implementation and rates to the presentation to the Health Committee agenda in April.

5. Children's Mental Health Consortium priorities:

Children's Mental Health Consortium is finalizing their priorities by January 30th. Ms. Taycher will bring those priorities up at the full CSPD meeting.

o **Committee on Education** (Assemblywoman Woodbury)

1. SB13:

Mr. Patchett made a motion to recommend to the full Commission that the Interim Committee on Education place the implementation of SB13 and the National Federation of the Blind's (NFB) legislation on braille literacy on their agenda.

2. NFB- braille literacy legislation:

Mr. Patchett made a motion to recommend to the full Commission that the Interim Committee on Education place the implementation of SB13 and the National Federation of the Blind's (NFB) legislation on braille literacy on their agenda.