



NEVADA STATE PLAN FOR AGING

2025 - 2029

ABSTRACT

Nevada's trends, strategic focus, and goals in supporting older adults and family caregivers for the next four years.

Nevada Aging and Disability
Services Division

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Executive Summary

The Nevada Aging and Disability Services Division's (ADSD) State Plan for Aging covers the period October 1, 2024 to September 30, 2029. This plan has been updated to be a four-year plan, from the previous plan which was submitted as a three-year plan. This plan outlines Nevada's efforts, in line with the Older Americans Act priorities, to ensure the effective provisions of services and supports to older Nevadans. Long term services and supports (LTSS) occur through collaborations of many partners including state agencies, local governments, for profit providers, and non-profit organizations.

Based on data available from the American Community Survey, Nevada's population of older adults, age 60 and older increased by 42% between 2012 and 2022. The growth of Nevada's older adult population is expected to continue in this trend, resulting in increased demand for services. To address the ongoing growth in the older adult population in Nevada, this plan sets Nevada's strategic focus in four critical areas:

- *Inclusion* of all populations and communities in service planning and implementation.
- *Health in Aging* as a policy throughout programs.
- *Protection and Advocacy* of all vulnerable Nevadans, ensuring equity in access for all populations.
- *LTSS Infrastructure* that has the capacity and resources to support growing needs within Nevada.

Continuing efforts to stabilize services after the COVID-19 pandemic, ADSD recognizes the ongoing need to strategically focus on the above four areas that are inclusive of equitable services, the intersection of health and social services, and gaps in the LTSS infrastructure to support the needs of older adults. Underlying these focus areas is the intersection between advocacy and protection programs, such as the Adult Protective Services program and the Long-term Care Ombudsman program to complement LTSS services. These Strategic Focus Areas helped to shape Nevada's goals, objectives and strategies.

This plan has established the following five goals:

- Goal 1: Promote and encourage older Nevadans and their families to make informed choices through a coordinated No Wrong Door (NWD) network.
- Goal 2: Promote age friendly community for older Nevadans and their families throughout Nevada.

- Goal 3: Lead efforts to strengthen equity in service delivery statewide for American Indian/Alaska Natives, the LGBTQ+ community and underserved populations.
- Goal 4: Build capacity of community providers through partnership and leveraging resources.
- Goal 5: Increase advocacy and protection, including legal assistance, for adults who are vulnerable.

Nevada uses this plan, along with state agency reports, demographic trends, and stakeholder feedback, to shape policy recommendations and develop programming to support older Nevadans and family caregivers.

Efforts under this plan are monitored and reported annually throughout the duration of the plan. Due to numerous initiatives, such as the release of several Final Rules, including the Older Americans Act Final Rule (published February 2024), ADSD anticipates a significant update to this plan within the next two years.

Introduction

The Nevada Aging and Disability Services Division (ADSD) has set forth this state plan with four overarching priorities for older adults, people with disabilities, and care partners:

1. Inclusion
2. Health in Aging
3. Protection & Advocacy
4. LTSS Infrastructure

The Nevada State Plan on Aging details these priorities as the key Strategic Focus Areas for the State Plan. Nevada’s demographic trends, state agency reports, stakeholder feedback, and the COVID-19 crisis all demonstrate these goals are necessary to support older Nevadans and their family caregivers as outlined under the Older Americans Act of 1965 as reauthorized in 2020.

ADSD utilizes this state plan to help coordinate long term services and supports (LTSS) for older adults and family caregivers to live in the setting of their choice. This plan is largely a continuation of the previous state plan, given recent efforts to develop an ADSD Olmstead Plan as well as current discussions related to Nevada undertaking the development of a Multi-Sector Plan on Aging.

LTSS Network and Structure

ADSD is one of 5 divisions under the Department of Health and Human Services. ADSD is the designated state unit on aging and disability services and serves as the single area agency on aging for Nevada. ADSD is comprised of 8 units:

Nevada Early Intervention Services	Services for families with children under the age of three. Individualized Family Services focused on the family’s priorities and concerns.
Autism Treatment Assistance Program	Provides temporary assistance and funding to pay for evidenced based treatment such as Applied Behavior Analysis (ABA) for children on the Autism Spectrum, who are under the age of 20.
Developmental Services	Programs and services for individuals with intellectual and/or developmental disabilities of any age.

Office of Community Living	Provides home and community-based services for older adults, people with disabilities, and family caregivers. Includes case management for two Medicaid Home & Community Based Services (HCBS) waivers, several state and federal HCBS programs, and Older Americans Act (OAA) programs. This unit also leads community engagement, strategic planning, and no wrong door efforts for the Division.
Adult Protective Services	Receives and investigates reports of abuse, neglect, exploitation, isolation, or abandonment of vulnerable persons age 18- 59 as well as older adults over 60, and provides and arranges for services to alleviate and prevent further maltreatment
Office of Long-Term Care Ombudsman	Advocacy and Investigation of violations against resident’s rights and complaints regarding residents of long-term care facilities, including homes of individual residential care, residential facilities for groups, nursing homes and adult day centers regardless of age. Education regarding long-term care provided for families and staff of long-term care settings.
Advocacy Attorney	Nevada Attorney for the Rights of Older Persons and Persons with a Physical Disability, an Intellectual Disability or a Related Condition pursuant to NRS 427A.1234. Serves as the Legal Assistance Developer under the OAA.. This position also offers public education and legislative support, and aids elder legal protections Title VII programs, legal aid providers, and other stakeholders serving vulnerable populations.
Administrative Unit	Fiscal, information technology, human resources, and quality assurance services for all units within ADSD.

The Office of Community Living (OCL) has primary responsibility for oversight and management of Title III programs of the Older Americans Act (OAA), as well as the Senior Community Service Employment Program (SCSEP). The state SCSEP grant serves Clark County only, while the national SCSEP grant administered by AARP covers the remainder of the state. The SCSEP State Plan guides Nevada partners in the administration of the program and includes goals for additional coordination with other OAA services. Action the Nevada SCSEP team will take to coordinate activities with other OAA services include:

- ADSD will survey all funded partners biannually to assess the employment needs partners have and the skills needed for those position types. A document will be created to be accessible to SCSEP providers in the development of training opportunities.

- Using ADSD’s list of funded partners each state fiscal year, SCSEP providers will develop a recruitment plan for potential host agencies, especially in rural and frontier areas of the state that are historically under-enrolled.
- ADSD will provide a quarterly overview of funded partner supportive services offered that eligible SCSEP participants may be able to access. Funded partners may be selected to share their service information to enrolled participants and SCSEP providers directly via in-person or virtual quarterly meetings.
- Distribute SCSEP information to rural and frontier partners quarterly for posting within their buildings or to send to their consumers.

LTSS Partnerships

The mission of ADSD is to ensure the provision of effective services and supports to meet the needs of individuals and families, helping them lead independent, meaningful, and dignified lives. Critical to this mission are a variety of partnerships and collaborations which includes:

State LTSS Partners

- Division of Healthcare Financing and Policy
- Division of Public and Behavioral Health
- Division of Welfare and Supportive Services
- Division of Child and Family Services
- County & City Governments

Community Providers

- Non-profit organizations
- Personal Care Agencies
- Long Term Care Facilities including Group Homes
- Adult Day Care/Health Centers
- Legal Aid Providers and pro-bono attorneys

Healthcare and Protection Agencies

- Office of Attorney General
- Office of Consumer Health Assistance
- Local Law Enforcement

Commission on Aging

Established in 1983, the Nevada Commission on Aging (COA) serves as an advisory body for the Division relevant to Nevada’s older adults. The Commission on Aging duties include evaluating the needs of older adults in Nevada, establishing priorities for the work of the Division, review and approve the state plan, evaluate existing programs, and evaluate and recommend legislation affecting older adults. In state fiscal year

2019, the Commission on Aging developed a new Policy subcommittee to help the Division and sister agencies evaluate policies to better support older adults through public programs. This subcommittee continues to meet quarterly to offer policy recommendations for consideration by the Division and other state partners.

[Nevada's Tribal Network](#)

There are 27 tribes across the state. According to the U.S. Census 2020 data estimates, 1.4% (roughly 43,000) of Nevada's population is American Indian/Alaska Native. The Nevada Department of Health and Human Services is committed to partnering with the Tribes within the State of Nevada through a Tribal Consultation Process Agreement. This coordination establishes and strengthens relationships with the Tribal Governments as well as provides education and outreach. A network of Liaisons represents each Division within the Department. Within ADSD, the Public Information Officer and newly established Regional Coordinators serve as Tribal Liaisons for the Division.

[Ongoing Efforts](#)

The Division Tribal Liaisons work with tribal senior service directors and social service programs to provide education about ADSD services, while also helping to gather information on the specific needs of tribal members. Through these efforts, tribes have connected with ADSD programs and community partners to address needs such as food security, Medicare, and Alzheimer's.

Since the COVID-19 pandemic, ADSD has been able to expand partnerships with tribal nations. Most notably, the Walker River Paiute Tribe received COVID-19 funding to start a homemaker program. This effort has continued through Older Americans Act funding and has expanded to include home modification/repair services as well as senior companion services. The Pyramid Lake Tribe continues to promote brain health and awareness of Dementia through Dementia-Friendly Nevada efforts. ADSD is also exploring opportunities with tribes to address hospital readmissions and diversion of nursing home placements.

The Division will continue to visit, educate and build relationships with tribal communities and leaders to increase access to services that promote independent, healthy living among tribal members.

[LGTBQ+ Considerations](#)

As Nevada examines the growing older adult population, particular focus must be given to the LGTBQ+ community. This community often remains invisible to the aging network and may not seek services due to experiences (and fear) of discrimination. Inclusion of this community in the development of older adult services is critical to

ensuring the aging network is inclusive, but more importantly, a safe space for this diverse community. ADSD recognizes there are unique challenges faced by this community, but an abundance of opportunity to be inclusive throughout the service delivery system. Over the course of the next four years, ADSD is committed to assessing the needs of the LGBTQ+ community, identifying resources, and designing services with this population in mind. This work will be accomplished through targeted engagement of the LGBTQ+ community, network education, and evaluation of efforts.

Trends

Nevada's population of older adults is rapidly increasing, particularly in rural areas. The aging population in Nevada is expected to continue growing at a rapid pace. Between 2011 and 2018, the population of adults aged 65 and older increased by 46% versus the U.S. population which only grew by 30% in this same period.

While migration to Nevada continues to be steady, a plateau is expected as housing costs continue to inflate, however it is worth noting that in the 2023 Elders Count Report the largest age group moving to rural communities was the 65-74 age group, a shift from the 2021 Report where the largest age group was the 55-64 range. Currently, 10 of 17 Nevada counties have a population age 65 and older of 20% or higher.

The COVID-19 pandemic highlighted mental health challenges across all populations, however social isolation and loneliness is a growing public health concern for older adult populations. According to the Meals on Wheels America 2023 Report “Effective Solutions to Address Social Isolation and Loneliness through Meals on Wheels Programs”, 23.3% of older adults receiving home-delivered meals in Nevada live alone. Nevada ranks 30th in the nation in terms of risk of social isolation for those age 65 and older.

As individuals age, social opportunities naturally shrink for a variety of reasons such as retirement, declining health, death, and other such factors. Addressing loneliness and social isolation is critical to ensuring more positive health outcomes among aging populations. Social engagement can improve physical and mental health among older adults, while reducing healthcare utilization.

According to the 2023 Profile of Older Americans published by the Administration for Community Living, approximately 33% of older adults (age 65 and older) reported having a disability. 13% of those reported having an independent living disability. According to the American Community Survey data, Nevada's population of older adults living with an independent living difficulty grew by 41%, nearly 3 times the rate of the U.S. population in the same age group.

Health Status

In terms of health status, Nevada's population follows national trends closely with heart disease and cancer being the leading causes of death. Additionally, 5 of 7 leading chronic conditions also correlate with heart disease in Nevada. Of particular concern is the growing percentage of older adults who are obese. According to state data from the Behavioral Risk Factor Surveillance System (BRFSS), obesity is a growing problem with the percentage of individuals ages 60 and older who are obese increasing by 10% from 2015 to 2018. Approximately 30.5% of people ages 65-74 are obese.

The Centers for Disease Control notes the percentage of falls by older adults is 25.5% nationally. In Nevada, that is roughly 111,690 people who experience a fall each year. Falls are particularly dangerous after an acute care hospital stay and contribute to increased 30-day hospital readmission rates, particularly in older populations. For people ages 85 and older, 15.7% of readmissions within 30 days are due to two or more falls. In 2018, an estimated 16,672 older adults went to a hospital or clinic associated with a hospital due to a fall.

Interestingly, Nevada's rate of outpatient utilizations is significantly lower than national rates but has stayed stable over the last several years while nationally, outpatient utilizations have increased. Fortunately, the percentage of individuals who are delaying or did not get medical care due to cost has been on a downward trend (CDC, National Center for Health Statistics Data).

Food Security

In 2018, the Nevada Office of Food Security published a report "Nutrition Programs for Older Nevadans and Preliminary Recommendations" which examined food security of older adults in Nevada. Based on that initial report, it was estimated that 14.8% of older adults were food insecure. In talking about food insecurity, it is important to understand the multiple factors that culminate in creating the problem. Most notably, understanding the social determinants of health can lead to food insecurity. In Nevada, that includes factors such as the large land mass, resulting in a very rural/frontier landscape. In many of Nevada's rural/frontier counties the percentage of older adults is the highest in our state. In 8 of 15 rural counties, the percentage of older adults is above 20%.



In 2023, the Office of Food Security published a new strategic plan to address the ongoing and increased food insecurity among Nevada's population. Older adults continue to be especially vulnerable to food insecurity as a result of the unique challenges faced by this age group. This includes increased risk due to

poor health conditions, lack of reliable social support and transportation; low fixed incomes, and functional limitations that impact their ability to obtain or prepare food. According to the *2023 Food Security Strategic Plan*, 17% of survey respondents noted that high housing costs were barriers faced by individuals who are food insecure. Additional top responses were limited income, unexpected household expenses and unexpected healthcare expenses. The COVID-19 pandemic exacerbated many of these factors, particularly because of the increased susceptibility of older adults to become severely ill with the COVID-19 virus. Additionally, early data from the U.S. Census Bureau, Household Pulse Survey, indicated that food insecurity among older Nevadans aged 55-64 was even greater than that of 65 and older. This presents an ongoing concern as this group ages into Medicare eligibility.

The pandemic increased the awareness and utilization of senior nutrition programs, most notably, home delivered meals and social services such as home delivered groceries. While the pandemic and restrictions associated with the pandemic are easing across the state, demand continues to be high for the variety of meal and food services offered throughout the pandemic. The rate of attrition expected is not happening within these programs. This highlights the important and critical issue of food insecurity facing Nevada's older adults.

LTSS System

Within Nevada, the long-term services and supports (LTSS) system for older adults, people with disabilities and family caregivers consists of five key components:

- Long term care and planning
- Medicaid LTSS services
- Other LTSS services
- Primary and Chronic Care Coordination
- Advocacy and Protective Services

Nevada's efforts to streamline LTC planning, access to services and coordinate care across providers, through a no wrong door philosophy continue to evolve. The COVID-19 pandemic created an opportunity for Nevada to develop a rapid response effort that addressed immediate essential service needs (i.e., access to food), while also connecting individuals to long-term care planning through the Nevada Care Connection network. The lessons learned through this effort is helping Nevada to re-examine previous investments and strengthen efforts at cross-agency implementation of a no wrong door approach to LTSS. A grant from the Administration for Community Living has provided an opportunity to conduct a targeted assessment of existing access points, as well as develop a plan for full implementation, including the establishment of

a formal governance structure. Finally, the Divisions housed under the Department of Health and Human Services are collaborating to expand an existing application platform to include various programs across DHHS. This expansion will result in a more robust platform for Nevadans to identify public programs which they may qualify for as well as to complete referral applications into a broad range of programs offered by the Department.

The Aging and Disability Services Division (ADSD) along with the Nevada Department of Health and Human Services also recognizes the importance of the intersection of social services and health care services. Under the Department, ADSD along with our sister agencies are strengthening partnerships to promote health in aging across Nevada. The COVID-19 pandemic highlighted the importance and role of social service providers in connecting individuals to critical healthcare services. As we move forward from the pandemic and begin to look forward, managing chronic health conditions, supporting individuals living with dementia, and promoting physical and nutritional health will become more important than ever before. Key to these efforts is supporting expansion of collaborations across various sectors, such as housing, transportation, and workforce development agencies, to support social determinants of health and access to a sufficient LTSS workforce. While Nevada has been on a positive trajectory in many aspects, the long-term effects of the pandemic and impact to individual's health have not yet been realized.



Strategic Focus Areas

The Division has laid out the following strategic focus areas for this State Plan. These focus areas helped to inform the Goals and Objectives in the next section and these principles are laced throughout the strategies of Nevada's plan.

Inclusion

Over the course of this state plan, the key focus is inclusion. For the older adults, people with disabilities, and family caregivers we serve, that means ensuring all populations and communities have access to basic services to promote well-being in terms of both their physical and mental health. It means continuing to build on the alliances and partnerships that were created during the COVID-19 pandemic to increase infrastructure throughout Nevada, inclusive of American Indian/Alaska Natives, the LGBTQ+ community, and traditionally underserved populations. Building upon innovation and flexible thinking to respond to the needs of the individuals we serve is critical to supporting the increased demand for services.

For the LTSS network, inclusion will be focused on creating natural connection points, and building systems to support access, while reducing administrative burden. Outside of the pandemic, the nation was also reminded of the many challenges faced by minorities and those traditionally underserved

communities. The importance of these conversations, and barriers these communities face are not overshadowed by the pandemic, but rather highlighted by the pandemic. We have a unique opportunity to increase support to the network through education, and to strengthen services through quality assurance activities.

The Inclusion focus area will be advanced through efforts under Goal 2 and Goal 3.



Health in Aging

In alignment with the Administration for Community Living, Strategic Framework for Action: State Opportunities to Integrate Services and Improve Outcomes for Older Adults and People with Disabilities, the Nevada Aging and Disability Services Division is committed to building programs and services that align health and social services. The intersection of these two systems not only will lead to improved opportunities for older adults to live healthy, independent lives, but it also presents an opportunity for our network of community-based organizations to

increase resources to address the social determinants of health in our population.

In addition to finding the common ground and intersection of healthcare and social services, Nevada recognizes the importance of supporting older adults in nutrition education, physical activity, and maintenance of chronic health conditions. Over the past several years, various investments into these areas have resulted in several interventions being made available to Nevadans. In this state plan, efforts will be focused on continued promotion of these existing activities, while also building cross sector collaborations and plans to address a wide range of issues impacting healthy aging including housing, transportation, caregiver support, and workforce development.

Health in Aging is interlaced throughout the goals and objectives of this state plan but will specifically be addressed through strategies in Goal 2.



Protection and Advocacy

Protection and advocacy services generally do not fall under the umbrella of long-term services and supports (LTSS) but are critical partners in a high functioning LTSS system. The Nevada Aging and Disability Services Division addresses these needs through a suite of programs including Adult Protective Services, the Office of Long-Term Care Ombudsman the Office of Consumer Health Assistance, and Older Adult Legal Assistance programs.

In the 2019, in the 80th session of the Nevada Legislature, Elder Protective Services expanded to Adult Protective Services (APS). Prior to this, Nevada was one of only three states that had not expanded protective services to all vulnerable adults.

Adult maltreatment is a significant public health and human rights problem. Transition to a full APS program was a significant step in elder justice. The expanded program highlighted the various challenges faced by vulnerable Nevadans as well as the opportunities to better serve this population and their unique needs.

Expanding the Adult Protective Services System allows vulnerable Nevadans to receive protective services earlier reducing long term suffering. Nevada APS mitigates abuse, neglect, and exploitation through investigating, providing and arranging services. These services alleviate and prevent further

maltreatment while safeguarding vulnerable adult civil liberties and rights for self-determination.

Based on 2021 data from the Nevada Adult Protective Services System, self-neglect was the most substantiated type of abuse of the 6 types of abuse investigated by APS. Self-neglect constituted 40.1% of substantiated cases. Self-neglect often stems from underlying health, cognitive, or physical limitations, where an individual does not have a support network to help manage needs. A pilot program to connect self-neglect cases to Resource and Service Navigation is underway in 2024. This pilot program is geared to helping individuals connect to long-term services and support beyond the APS intervention and reduce recidivism into the APS system.

Within Nevada, the rate of nursing home residents is 17.9 residents per 10,000 people, approximately half of the national rate. Nevada's Office of Long-Term Care Ombudsman is continuing efforts to reform long-term care facilities, supporting residents' rights, increasing person-centered choice within facilities, and increasing safety standards. Efforts to expand training, particularly in terms of cultural competence will continue in this state plan. They are also working to increase awareness and outreach in facilities and building partnerships to promote systems advocacy for NV nursing home residents.

Further expanding ADSD efforts to support the rights of older adults and increase the intersection between health and social services, was the movement of the Office of Consumer Health Assistance to the Division in 2021. This program provides advocacy, education, and information regarding healthcare rights and responsibilities. This structural move has enabled ADSD to increase awareness about services available, as well as expand efforts to support both healthcare and social services for our populations.

Finally, the Division provides for the coordination of legal assistance to older individuals within the State as required under the Older Americans Act. The Division gives priority to legal assistance related to income, healthcare, long-term care, nutrition, housing, utilities, protective services, abuse, neglect, and age discrimination. and The Advocacy Attorney also provides advice and technical assistance in the provision of legal assistance to older individuals within the State and serves as an advocate to protect the rights of older adults across multiple systems.

Strategies addressing protection and advocacy, including equity, are the cornerstone of Goal 2 and Goal 5.

[LTSS Infrastructure](#)

Throughout Nevada, the rural nature of the state, low Medicaid reimbursement rates, and workforce shortages place a strain on the long-term services and

supports (LTSS) network. As a result of the COVID-19 pandemic, providers and community partners alike have come together to ensure Nevada's older adults were able to stay safe throughout the pandemic. However, opportunities continue to build a stronger infrastructure of support throughout Nevada.

Increasing opportunities for outreach and education to both for profit providers and our non-profit providers is needed to increase coordination of services and quality of services in Nevada.

The Aging and Disability Services Division is also looking at ways to support community partners in building business acumen. The COVID-19 pandemic has not only highlighted the need for creative, flexible service delivery, but also the need for diversifying resources and revenue to deliver services. As the nation and the state work towards recovery, this need will continue to be at the forefront of efforts in supporting the LTSS network.

The strategies throughout all of the Goals in this plan are focused on building infrastructure to support older adults, and family caregivers.



Quality Management

The Nevada Aging and Disability Services Division will monitor and report data measures (outlined in Appendix B) annually. Annual reports will be published on the Division's website by January 1, following each year of the plan.

The Division currently tracks data using the Wellsky Aging and Disability Application (formerly SAMS) as well as various internal tracking mechanisms for outreach, training, etc.

Additionally, the Division continues to engage with the network and consumers through quarterly Regional Planning Groups, focus groups, and advisory bodies. This allows for the Division to gather information about problem areas and make changes to programming accordingly to help address gaps. A team of Regional Coordinators expands these efforts by coordinating agency outreach, building community partnerships, and making recommendations for policy changes.

Finally, ADSD has developed a Policy team within the agency. This team,

coupled with the Quality Assurance team, will provide ongoing opportunities for continuous improvement in serving Nevada’s older adults, people with disabilities and family caregivers.

Duration of Plan

The duration of this state plan will run from October 1, 2024 to September 30, 2029.



Goals and Objectives

Goal 1: Promote and encourage older Nevadans and their families to make informed choices through a coordinated No Wrong Door (NWD) network.

Objective 1.1 Promote Nevada Care Connection as the point of entry for information and assistance to access LTSS options.

Strategy 1.1a Strengthen NWD efforts through an agreed upon, cross-sector plan and clear objectives and outcomes.

Strategy 1.1b Expand outreach efforts to underserved populations using PSAs, local news, and public broadcasts to increase awareness of Nevada Care Connection.

Objective 1.2 Increase Nevada Care Connection capacity throughout Nevada training and expanded collaboration.

Strategy 1.2a Identify additional partners and duplication of efforts to streamline information and assistance efforts.

Strategy 1.2b Develop and implement training curriculum to support services for targeted populations.

Measures:

1.a Number of outreach events, PSAs, and public broadcasts by NWD team each year.

1.b Number of individuals and family caregivers served through Nevada Care Connection each year.

1.c Number of NWD strategies implemented each biennium.

1.d Number of people completing Resource & Service Navigation training each year.



Goal 2: Promote age friendly community for older Nevadans and their families throughout Nevada.

Objective 2.1 Promote healthy living, health equity and evidence-based health promotion programs throughout Nevada.

Strategy 2.1a Explore cross-sector planning and strategies to support healthy aging.

Strategy 2.1b Increase access to evidence-based health promotion programs each biennium.

Objective 2.2 Improve access to social determinants of health which includes food security, housing, and transportation.

Strategy 2.2a Partner with existing initiatives to increase food security among older adults.

Strategy 2.2b Expand and promote programs to reduce social isolation throughout Nevada.

Strategy 2.2c Increase coordination with existing transportation initiatives to remove duplication of efforts and expand capacity of transportation services.

Strategy 2.2d Educate and partner with existing housing initiatives to promote the needs of older adults to ensure safe, affordable housing options.

Measures:

2.a Number of published strategies in the Nevada Multi-Sector Plan on Aging.

2.b Number of completers of evidence-based health promotion programs each year.

2.c Number of people served through programs to address social isolation each year.

2.d Decrease in the percentage of older adults who report being food insecure by the end of the plan.

Goal 3: Lead efforts to strengthen equity in service delivery statewide for American Indian/Alaska Natives, the LGBTQ+ community and underserved populations.

Objective 3.1 Increase efforts to promote cultural awareness and inclusion of underrepresented populations (i.e., Deaf and Hard of Hearing, LGBTQ, American Indian/Alaskan Natives, and Minorities)

Strategy 3.1a Ensure program policies promote inclusion of American Indian/Alaska Natives, LGBTQ+ and underserved populations.

Strategy 3.1b Seek and support partnerships to increase access of services by Nevada Tribes, LGBT+ and underserved populations.

Strategy 3.1c Provide cultural competency training to ADSD staff and community partners at least once each year.

Objective 3.2 Expand efforts to support home and community-based services

for Older Nevadans with cognitive impairment and/or dementia.

Strategy 3.2a Coordinate efforts with the Division of Public Health in response to the Healthy Brain Initiative and other initiatives to advance person-centered planning and support individuals living with dementia in the setting of their choice.

Strategy 3.2b Continue to partner and promote existing dementia friendly efforts, like person-centered planning, throughout Nevada in alignment with the Nevada State Plan to Address Alzheimer's Disease.

Measures:

3.a Number of American Indian/Alaska Natives served each year.

3.b Number of LGBTQ+ people served each year.

3.b Number of minorities served each year.

3.c Number of people with cognitive impairment served each year.

Goal 4: Build capacity of community providers serving older adults and family caregivers.

Objective 4.1 Build capacity of the long-term services and supports network through diversified partnerships and advocacy with state and local partners.

Strategy 4.1a Increase education and advocacy to state and local decision makers.

Strategy 4.1b Explore opportunities to incorporate HCBS Quality Measures in OAA programs.

Strategy 4.1c Ensure state policies and practices support coordination of services across providers.

Objective 4.2 Support innovative, progressive, and equitable service delivery models with community partners.

Objective 4.3 Strengthen all levels of the workforce (informal, volunteers, paraprofessional, and professional) to increase access to services.

Measures:

4.a Number of people receiving services each year as reported in the state performance report.

4.b Amount of state general funds available for services each year.

4.c Amount of program income reported each year on the state performance report.

4.d Number of trainings provided to the workforce each year.

Goal 5: Increase advocacy and protection services, including legal assistance, for adults who are vulnerable.

Objective 5.1 Increase awareness of advocacy and protection services across Nevada.

Strategy 5.1a Promote preventive services through Medicare Assistance Programs in partnership with the Nevada Health Insurance Exchange and other partners.

Strategy 5.1b Continue outreach and education activities for Adult Protective Services, Office for Consumer Health Assistance, and the Office of Long-Term Care Ombudsman.

Objective 5.2 Expand capacity of advocacy and protection services across Nevada.

Strategy 5.2a Provide high quality Legal Assistance services to older adults.

Strategy 5.2b Streamline advocacy and protection services to coordinate services and remove duplication of efforts.

Strategy 5.2c Promote volunteer opportunities within the Office of the Long-Term Care Ombudsman

Strategy 5.2d Increase Long-Term Care Ombudsman efforts to advocate for individuals in supported living arrangements.

Measures:

5.a Number of outreach events each year.

5.b Number of people served with legal assistance by case type and legal assistance provider.

5.c Number of volunteers trained by the Long-Term Care Ombudsman program.

Appendix A – Division Accomplishments

The 2025-2029 State Plan on Aging is largely a continuation of activities from the 2021-2024 Plan. The Division has several accomplishments and activities underway that support the goals and objectives within this plan. These projects will enhance ADSD efforts in various ways. The Division anticipates a two-year update to this plan as a result of several of these initiatives, as well as in response to updates required in the newly published Older Americans Act Final Rule.

- Completion of a statewide assessment of access points and completion of a NWD implementation plan, to include a stable governance structure for ongoing administration and implementation.
- Business Process Re-Engineering Project to identify opportunities for improvement in the areas of outreach, intake, and quality improvement within ADSD.
- Implementation of the HCBS Final Settings Rule, and the HCBS Access Rule, in coordination with the state Medicaid agency.
- Establishment of the ADSD Community Engagement team, consisting of Regional Coordinators who are charged with coordinating outreach efforts among ADSD programs, as well as bringing forth policy recommendations and increasing collaborations among network partners.
- Launched an ADSD re-branding project to include consistent messaging statewide, new branding, and an updated website related to ADSD programs and services.
- Ongoing investments under the Lifespan Respite Care program to increase awareness and access to respite services in Nevada. Includes the passage of legislation requiring ADSD to pilot an evidence-based caregiver assessment.
- Passage of AB208 in the 82nd Legislative session establishing a new Medicaid waiver to provide structured family caregiving support to waiver recipients with a dementia diagnosis.
- Workforce development efforts related to training, recruitment, and retention; including participation in the Direct Care Workforce Strategies Center national Learning Collaborative.
- SB298 passed in the 82nd Legislative session increasing requirements to provide residents with information regarding their rights related to residing in a residential facility for groups. This bill also establishes eviction protections for residents.
- Transition of the Money Follows the Person and other care transition services to ADSD from the state Medicaid agency.

Appendix B – State Plan Measures

- 1.a** Number of outreach events, PSAs, and public broadcasts by NWD team each year.
- 1.b** Number of individuals and family caregivers served through Nevada Care Connection each year.
- 1.c** Number of NWD strategies implemented each biennium.
- 1.d** Number of people completing Resource & Service Navigation training each year.
- 2.a** Number of published strategies in the Nevada Multi-Sector Plan on Aging.
- 2.b** Number of completers of evidence-based health promotion programs each year.
- 2.c** Number of people served through programs to address social isolation each year.
- 2.d** Decrease in the percentage of older adults who report being food insecure by the end of the plan.
- 3.a** Number of American Indian/Alaska Natives served each year.
- 3.b** Number of LGBTQ+ people served each year.
- 3.c** Number of minorities served each year.
- 3.d** Number of people with cognitive impairment served each year.
- 4.a** Number of people receiving services each year as reported in the state performance report.
- 4.b** Amount of state general funds available for services each year.
- 4.c** Amount of program income reported each year on the state performance report.
- 4.d** Number of trainings provided to the workforce each year.
- 5.a** Number of outreach events each year by advocacy and protection programs.
- 5.b** Number of people served with legal assistance by case type and legal assistance provider.
- 5.c** Number of volunteers trained by the Long-Term Care Ombudsman program.

Appendix C – Supporting Reports

The following list of reports were referenced throughout this plan and helped to inform Nevada’s strategies.

1. ALC Strategic Framework for Action: [State Opportunities to Integrate Services and Improve Outcomes for Older Adults and People with Disabilities](#).
2. Nevada Office of Food Security: [Nevada Food Security Plan](#)
3. Nevada Aging and Disability Services Division: [Elders Count Nevada 2023](#).
4. Nevada Aging and Disability Services Division: [General Service Specifications](#).
5. Nevada Aging and Disability Services Division: [Senior Community Service Employment Program State Plan](#)
6. ADSD Olmstead Plan: [ADSD Olmstead Plan 2023](#)