



Meeting Minutes

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

Date and Time of Meeting:
April 28th, 2021
10:00am until adjournment

1. Call to Order/Roll Call

Jeff Klein called the meeting to order at 10:11am

Subcommittee Members Present:

Jeff Klein
Mary Liveratti
Diane Ross
Barry Gold

Subcommittee Members Absent:

Larry Weiss

Staff:

Melanie Gross, Administrative Assistant III, ADSD
Jennifer Richards, Chief Elder and Disability Rights Attorney, ADSD
Tammy Sever, Social Services Chief, ADSD
Miles Terrasas, Executive Assistant, ADSD

Presenters:

Jessica Flood, MSW, Northern Regional Behavioral Health Coordinator, Nevada Rural Hospital Partners

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

- No opening public comment.

3. Approval of Minutes of the March 4, 2021 meeting

Mary Liveratti moves to approve. Diane Ross seconds the motion. The motion passes unanimously.

4. Review and approve Subcommittee support and tracking of bills to the Commission on Aging

- A. SB93 – Revises provisions relating to Medicaid. (BDR 38-193)
- Connie McMullen, Senior Spectrum Newspaper

Connie notes that this is the bills second time sound. Senator Settlemeyer is the sponsor of this bill. It was previously introduced in the last legislative session but did not have a great understanding of the ISO at the time. This legislatives session there was an exemption placed on it and it has a fiscal note of around four hundred thousand each year of the biennium. There is no Request for Proposal (RFP) at this time for this particular program. This bill extends the ISO program. Duane Young the Deputy Administrator at the Division of Health Care Finance and Policy is starting this pilot program if it passes through this session. It will be placed in area in the state where Nevadans are having difficulty obtaining services. This bill stemmed from a personal experience of Senator Settlemeyer knowing a gentleman who could not get a care giver out to his home in rural Nevada. This gentleman is a high functioning quadriplegic who was unable to get care out to his home. His wife was unable to take care of him all the time. Because he was unable to get care in his home he was forced to go to a skilled nursing facility nearby his home. When the state of Nevada has the services but is unable to provide them and the person is institutionalized because of this it becomes an Olmstead issue. Connie noted that this bill was brought back this Legislative session. Many states are taking the ISP program and expand it under the 1915 Waiver C or K. This allows for the person who needs the services to be their own manager of caregivers. Under the current program that we have in Nevada, guardians or legal representatives like a spouse cannot be paid for the caregiving services they provide. The 1915 K waiver would allow for spousal, neighbor or friend compensation. The complaint was that these people were unable to be paid enough to get these services out to rural areas so this instead of paying these caregivers under the table they would like to use Medicaid funding and get the approval to pay out of pocket beyond that if needed. The Division of Health Care Finance and Policy has devised a program fix under 1915 K. This will need to go through CMS approval to change the waiver. This program will not come out of Medicaid Services, but instead out of the WIN waiver for physical disabilities. If passed, it will begin in January 2022 with potentially eleven individuals. Connie reviews the salary and monetary details.

Mary Liveratti asks since Medicaid is required to provide the services and find providers, why is it taking Legislation to make this change? Is it because of the needed funding? Mary notes there used to be an ISO Program. Connie replies that there is still the ISO program and there are over 400 people on it. Mary asks the clarifying question, what is this new adjustment doing that the ISO program does not do? Connie clarifies that this program will pay the legal representative of the individual receiving the care - whomever it is. Under the current ISO program, a wife of guardian cannot be paid to provide for caregiving. Connie notes that this is expanding options for rural Nevadans who cannot find caregivers. Mary asks if the Nevadans on this program would have to try other means before getting the ability to pay a spouse or relative? Connie notes that this is why there is the fiscal intermediary to combat fraud that could result. Mary adds that in the past the fiscal intermediary were the legal employer so the individual did not have to act as the employers and take on those additional employer responsibilities. Mary and

Connie review the caregiver rates that they will be paid if this passes. Mary asks how these rates compare to the rates we are currently paying personal care givers through companies? Connie states that the current personal caregiver rates are the lowest they have ever been around sixteen dollars. Jeff Klein adds that minimum wage will impact these provider rates in the program. Mary Liveratti voices her concern about creating a competition within the caregiving program – ISO program and caregiving businesses. Connie adds that she has been advocating for a rate increase for three sessions now for providers. Personal care is the lowest paid providers out there and have been overlooked the past legislative sessions.

Connie mentions SB240 also. This bill brings the union into the mix to provide further support. During the pandemic, some caregiving companies were charging people to get the proper training. This opens up people to go through unlicensed companies like Care.com who have less restrictions on licensed staff. Many are unlicensed which is not allowed and should be turned in as being unlicensed caregivers. SB240 establishes a volunteer board and do investigations on people who are turned in and companies that complaints are filed against.

Track SB390 and SB340 per Connie McMullen's recommendation. Barry Gold agrees that SB240 is trackable as many do have an end effect on the Older Adult populations of Nevada. Connie notes that a large care provider in Las Vegas is no longer in service and it is a major blow to caregiving services in Southern Nevada. It took months to place all the people that were left without caregivers when they left Nevada. Jeff Klein adds that over 300 staff from this provider were serving Clark County and other that, they were also providing services to non-profits in Southern Nevada. He agrees it is a big loss.

Mary Liveratti moves to track SB93 and SB340. Diane Ross seconds the motion. The motion passes unanimously.

B. AB141 – Revises provisions relating to evictions. (BDR 3-569)
- Jennifer Richards, Chief Elder & Disability Rights Attorney, ADSD

Jennifer Richards opens up the discussion to the Legislative Subcommittee for any questions they have. Jennifer Richards notes that she submitted a letter when this legislation was being considered. She continues and says that broadly that this impacts Older Adults in this state disproportionately as they are affected by insecurity in housing. There face additional barriers to access housing and are at a higher risk of eviction. This can be seen from date in the Elders Count and national data from Justice in Aging Coalition. Jennifer also notes that the Pandemic has had an impact. Mary Liveratti asks if this bill offers protections and overall, what the bill does. Jennifer Richards replies that AB161 would have provided additional protections but has since been turned into a study. Jennifer Richards reviews the eviction process in Nevada and how it is up to the tenant to pursue their right to not be evicted. This can directly impact an Older Adult who may have a more difficult time than most to exercise their right and make sure they are not being unlawfully evicted. Nevada also has a no clause eviction so AB161 would have allowed for more time. Jennifer continues that AB141 is providing a way to automatically seal evictions that have occurred during the pandemic. This could be beneficial to Older

Adults because having evictions on your rental history can be a barrier to accessing future housing.

Mary Liveratti moves to add AB141 to track. Barry Gold seconds. The motion passes unanimously.

Mary Liveratti moves to amend above to follow the AB161 study in the interim. Should be bring that suggestion to the Commission on Aging? Barry Gold agrees. This motion passes as amended.

C. SB70 – Revises provisions governing mental health. (BDR 39-418)

- Jessica Flood, Northern Regional Behavioral Health Coordinator, Nevada Rural

Jessica Flood introduces herself and reviews the Northern Nevada region that she covers. SB70 is a Northern Regional Health Policy Boards Bill and it can be characterized as part two of trying to modernize the involuntary mental health crisis hold process. This project started in 2017 when the statewide mental health crisis hold workgroup was developed. The stakeholders in Jessica's region pointed out a need for clarifying involuntary mental health crisis hold process. The work group identified that some major changes were needed in legislation to make the law work with the current system so SB70 modernized the older legislation. Jessica Flood shares a handout on SB70 with the Legislative Subcommittee. Barry Gold notes that there are 11 fiscal notes. Jessica clarifies they are all zero but Division of Public and Behavioral Health (DPBH) put a twenty million dollar fiscal note on it. The language was adjusted with the collaboration of DPBH and the fiscal note has since been removed. Jessica uses the handout to identify the five major changes that this bill makes.

Mary Liveratti makes a motion to track as well as support SB70. Barry Gold seconds. The motion passes unanimously.

5. 2021 Legislative Report on Senior Issues. Discussion and approval of recommendations to the Commission on Aging

Mary Liveratti notes that all bills the Legislative Subcommittee have chosen to track and support are listed in the previous meeting minutes. She continues that there have been some bills that have come up that members of the Legislative Subcommittee have been active with and should we add these to and updates the list. New bills to consider or any that members would like to include:

AB76 – Veterans adult day care services

AB344 – Transition from Hospital

SB396 – Prescription drug group purchasing

AB177 – Prescription pill bottle language

AB217 – Training of unlicensed caregivers in designated facilities

SB171 – Disallow PBMs that people can only get prescription drugs by mail

SB380 – Prescription drug reporting

Jeff Klein asks that we review the bills that the Legislative Subcommittee are recommending to the COA to support. Mary reviews the bills the Subcommittee has

already voted to support: AB35, AB76, AB142, AB190, AB216 and SB5. Jeff Klein the reviews that at today's meeting the Subcommittee identified these additional bills to recommend to support: SB70, AB344, SB396, SB171, AB177, AB217. Barry Gold moves to support all five of these bills. Mary Liveratti seconds the motion. The motion passes unanimously. Barry Gold makes a motion to also include SB200 for the Legislative Subcommittee to recommend support. Mary Liveratti seconds the amended motion. The motion passes unanimously. Mary has a closing comment that if we encourage people to take control of their own retirement than we can change the need for older adults relying on state services. Barry Gold agrees that this bill and the outcome can have a direct impact on the need for services through the state.

6. Aging Vernacular Discussion and recommendations to the Commission on Aging

Table this item until the July Legislative Subcommittee meeting.

7. Review of Senior Issues Day 2021

Barry Gold reports that Senior Issues Day was a great success. Barry issues a thank you to all who helped with the setup of the virtual event. He notes that there were about one hundred people who attended. The speaker, the majority leader and the minority assembly leader were all able to attend and speak. They showed support for many of the noted senior issues. There were a variety of people who were able to attend. We had good interaction on what topics the public wanted to hear about and also had some good polls. There was a consensus that people did not want to be called Senior or Elderly anymore, that they prefer Older Adult. May want to change the day to Older Adults Day for upcoming Legislature events. Barry Gold suggest that moving forward and in all future Legislative Sessions that a virtual component needs to be included. A virtual platform allows people from all over the state to attend without travel.

8. Elder Abuse Fatality Review Team concept and approve recommendations to the Commission on Aging

Jennifer Richards and Tammy Sever bring up PowerPoint presentation on Elder Abuse Fatality Review Teams ([Attachment B](#)). Tammy outlines the Adult Protective Services (APS) program as a whole and the issue of Elder Abuse. We continue to see increased case numbers for APS in the state of Nevada. Tammy reviews the monthly cases so far this year and the numbers of people of over 60 years old. Tammy Sever next reviews the types of vulnerable adult abuses, clarifying APS definitions as well as the current NRS. Tammy elaborates and says that APS will work alongside law enforcement in situation and be the social service component. If any acts of abuse occur within a facility APS will make sure the proper procedures were following when reporting to ensure clients are safe. APS services are client driven so if the adult has the mental capacity to make a self-determination that they so want help APS is unable to force services. Tammy Sever reviews some statistics from the Center on Elder Abuse and the Center of Excellence on Elder Abuse and Neglect 2011. Tammy shares a few mock examples of a case of Adult Abuse that is still open with law enforcement.

Jennifer Richards reviews what an Elder Abuse Fatality Review Team (EAFRT) is with the Legislative Subcommittee. This review team would be used to review suspicious

deaths and suspicious circumstances. Jennifer Richards notes there are currently thirty five teams in thirteen states within the United States. Members who take part in the review teams are usually from a variety of agencies. Many stake holders such as APS, the medical examiners/ coroner's office, law enforcement and prosecutors are whom make up a large part of these review groups. The goal of these groups is not to blame a specific agency and is to really come up with a way to best serve our adult community by identifying gaps. Jennifer Richards reviews outcomes of EAFRT's. Nevada does have existing fatality review teams for Domestic Violence and Child Death. The question then becomes why do we not have these teams established for older adults and persons with disabilities and should we be looking to put this into place in the next legislative session?

Mary Liveratti makes the motion to report this information on Elder Abuse Fatality Review Teams to the Commission on Aging and the possibility of establishing one in Nevada. Barry Gold seconds. The motion passes unanimously.

9. Presentation on Dementia Holds and Medical Incapacity Holds. Discussion and approval for possible recommendation to the Commission on Aging

Jessica Flood presents ([Attachment A](#)) to the Legislative Subcommittee. Jessica differentiates between medical incapacity holds and Dementia holds as they pertain to two different populations. Jessica next reviews that there is a lack of Medical Incapacity law in the State of Nevada. Jessica and Barry speak about medical holds and other states legislation. Ms. Flood notes that a few years ago Homa Woodrum did a survey and found that there are multiple that did not exclude Dementia as a psych hold. Jessica Flood and Jennifer Richards plan to look into constitutional guidelines for holds and detainment.

Jeff Klein notes that hospitals are the experts when it comes to situations including delirium. Delirium and dementia are two very different situations. When speaking about frail and elderly populations that any institutionalization can be very disorienting. Casinos play off this effect but disorientation as a secondary issue can lead to different problematic situations. Jeff Klein thinks that it would be interesting to open up this discussion with hospitals. Mary Liveratti clarifies if dementia falls under the grouping of mental illness or not? Jessica replies that it is separate and more so a mental disorder or medical condition. It is specifically excluded from mental illness in Nevada. The mental health crisis hold notes a specific exclusion for dementia.

Jessica Flood moves on to dementia holds. The mobile outreach safety teams, law enforcement and hospitals all identified this as an issue. This is specific to those who have dementia and who are a danger to self or others and are unable to care for themselves. The issue is how to detain these individuals and transport them to a hospital. From the hospitals perspective the people that are brought in with dementia are placed on an inpatient psychiatric hold but the hospital identifies they do not meet the criteria for a hold. Often times also, law enforcement will bring them to jail not knowing where else they should go or walk away because they see no legal reasoning to detain. Jessica Flood identifies that per conversations with many different stakeholders that they across the board agree there are many missed opportunities to help those with dementia. She finds there is a lack of communication between the agencies and community regarding dementia. Jessica notes that not only is it important for the

community, law enforcement, hospitals and crisis centers to be able to identify dementia but to help families with tools to be able to stabilize dementias. Jessica Flood outlines the initial three conclusions. The term dementia hold is inaccurate and inappropriate. Jessica Flood ends on the point that a multi-system collaboration is needed to tackle this need.

Mary Liveratti proposes that this presentation and discussion be brought to the Commission on Aging. Mary notes that by bringing this up to the Commission on Aging it opens up the possibility to impact future policy or legislation.

Mary Liveratti makes a motion to report to the Commission on Aging the Legislative Subcommittee feels there needs to be collaboration and study on medical incapacity hold and dementia holds over the next interim so we can consider policy and legislative changes in the next legislative session. Diane Ross seconds. The motion passes unanimously. Jeff Klein further thinks that the Commission on Aging is a great place for this discussion and a good facilitator for further communication with the state agencies and hospitals.

10. Wait Time Data Recommendation in conjunction with waitlist totals recommendations to the Commission on Aging

Mary Liveratti starts off by clarifying that she is not asking for new legislation. She adds that often waitlist numbers are reviewed but we often overlook the wait times for these waitlists. Mary wants to flag this topic and bring up to the Commission on Aging to flag wait times. Barry Gold agrees, and notes that wait times are just as significant as wait list totals. It is important to know how many people on the waitlist but also to know how long they are waiting. Barry Gold adds that he would also like outcomes to be included. What happens to those who drop off the waitlist? He would like this data included moving forward as it keeps everyone informed of current situations.

Jeff Klein notes that what he is hearing is that we would like to bring on agenda item to the Commission on Aging that two separate items. The first being a discussion on incorporating wait times into the Commission on Aging tracking. Secondly tracking of outcomes for people that fall off of wait lists. Mary Liveratti adds that we should introduce reviewing wait times when building budgets in conjunction with the already looked at wait list totals. Jeff agrees and adds that timeliness is often a critical factor.

Barry Gold makes a motion that the Legislative Subcommittee recommend to the COA that ADSD include wait times, wait list numbers and outcomes of people who drop off the wait list before receiving services. The Legislative Subcommittee would recommend to the COA that these factors to be included future ADSD reports, when building budgets and within reports to the Legislature. Mary Liveratti seconds the motion. The motion passes unanimously.

11. Review, discuss and approve tentative agenda for the next meeting

Administrative Support to send over proposed July agenda to Jeff Klein, Chair for approval before July meeting.

12. Next Meeting Date

Administrative Support to send out a few potential dates and times to the Legislative Subcommittee for a July meeting date.

13. **Public Comment** (No action may be taken upon a matter raised under public comment period unless the matter itself has been specifically included on an agenda as an action item. Comments will be limited to three minutes per person. Persons making comment will be asked to begin by stating their name for the record and to spell their last name and provide the secretary with written comments.)
- Miles Terrasas confirms upcoming agenda items for the May Commission on Aging meeting with Legislative Subcommittee
 - Barry Gold requests that an update to the Commission on Aging on the outcome of Senior Issues Day 2021. Miles Terrasas confirms that Barry Gold will report on this at the May Commission on Aging meeting.
 - Barry Gold reports that the Legislature Building has opened in a limited capacity to the public. Some of the committee meetings are being held in the committee rooms. Public testimony is in person. If you want to participate or advocate in person it is suggested to call LCB to arrange it and needs to be the given guidance.
 - Miles Terrasas confirms that the Aging Vernacular item is tabled until the next Legislative Subcommittee meeting in July and will be removed from the May Commission on Aging agenda. Jeff Klein confirms and notes this can be handled in the interim and more importantly post session.

14. **Adjournment** – Meeting adjourned at 12:10pm.

Attachments

[Attachment A](#) – Medical Incapacity holds & Dementia holds presentation

[Attachment B](#) – Elder Abuse Fatality Review Teams presentation