Steve Sisolak Governor

Richard Whitley, MS Director



DEPARTMENT OF

HEALTH AND HUMAN SERVICES

AGING AND DISABILITY SERVICES DIVISION Helping people. It's who we are and what we do.



Dena Schmidt Administrator

MEETING MINUTES

of the Nevada Commission on Aging

The Commission on Aging held a public meeting on Tuesday, May 17, 2022, at 1:00 p.m. at the following location: **Virtual, Microsoft Teams Meeting**

1. ROLL CALL

Chair Schmidt called the meeting to order at 1:03 p.m.

Present:

Dena Schmidt Assemblywoman Clara Thomas Senator Joe Hardy Chris Vito Barry Gold Dorothy Edwards Niki Rubarth Stan Lau Wendy Simons

Staff:

Cynthia Maraven, Executive Assistant, ADSD Kristy Zegenis, Program Officer, DPBH Jeff Duncan, Social Services Chief, ADSD Carrie Greeley, Social Services Manager II, HCBS, ADSD Tammy Sever, Manager, APS, ADSD Jennifer Williams-Woods, Manager, LTCOP, ADSD

Absent:

Lisa Erquiaga Esther Gregurek

2. PUBLIC COMMENT

No public comment.

3. Approval of the February 2021, Meeting Minutes

Mr. Gold moved to approve the minutes. Mr. Lau seconded the motion. The motion passed unanimously.

4. Welcome and Introduction of New Members and Member Updates

Senator Joe Hardy, Assemblywoman Claire Thomas and Wendy Simons provided introductions to the Commission.

Chair Schmidt announced current and upcoming membership vacancies and encouraged members who are eligible for a second term to apply through the governor's website.

The following vacancies were discussed:

- (2) Governing Body of a County
- (2) Governing Body of a City (as of July 1st)
- (4) Person with experience (as of July 1st)

5. Updates to the American Rescue Plan Act (ARPA) Home and Community Based Services (HCBS)

Ms. Coulombe provided updates related to the American Rescue Plan Act and explained the impacts to Nevada's Medicaid population under section 9817 that allowed additional enhanced Federal Medical Assistance Percentage (FMAP. She provided an overview of the submission of the spending plan that outlined 10 initiatives, the implementation of the initiatives and the supplemental payments issued to home care workers that provide personal care services in the home and also to workers providing services for the intellectual disability waiver and supportive living arrangements. She continued the Medicaid supplemental payments were issued to restore a rate cut that had almost occurred to waiver providers during the special legislative session in 2020. Medicaid used the ARPA money to restore the funds without an impact on the providers.

Ms. Coulombe continued Medicaid is working on supplemental payments to home health care providers, PCs, providers, adult daycare, adult day healthcare, as well as the intellectual disability waiver providers. She explained the supplemental payments are about 15% for home health and personal care services and the ID Waiver is slightly larger based on a rate study that was completed. ARPA allows issuance of payments retroactively back to April 1st, 2021. Medicaid provided supplemental payments in March that went back from April to February and going forward, will issue quarterly supplemental payments. Medicaid has utilized the language "Supplemental Payment" since the ARPA funding is temporary, and any type of continued funding would require a budget request.

In response to Mr. Gold's question, Ms. Coulombe responded changes were made to the waiver application to pull back the 6% and update their system. The 6% occurred for that six-month period to waiver providers as of July of 2021, and the 6% was essentially restored back in their system. The percentage hasn't impacted any providers since that period as of July 1st of last year, then the rate was restored back to what it was before the cuts.

In response to Assemblywoman Thomas's question, Ms. Coulombe responded there are two separate initiatives with the ARPA funding. One is to issue a \$500 payment to the workers. She explained the workers are not directly enrolled in the Medicaid system. Medicaid opened an application period for the providers that were interested in applying on behalf of their workers to submit applications. The payment would then be issued to the provider to pay out the worker. The second initiative was a 15% supplemental payment to the providers with the intent the providers would issue the payment or a percentage directly to the workers.

In response to Mr. Gold's question, Ms. Coulombe stated the Medicaid website list all the providers that applied on behalf of their workers. The providers also had to have been in good standing with Nevada Medicaid to receive the supplemental payment.

In response to Mr. Vito's question, Ms. Coulombe stated she would check with their administration in terms of the Medicaid budget.

Ms. Coulombe reported three more initiatives with the first being Medicaid conducting a study like the Intellectual Disability Waiver on the developmental disability waiver side and explained the rate study will give DHCFP a foundation on how to proceed with the rates based on a solid methodology. The second initiative is adding home delivered meals to the Frail Elderly (FE) Waiver and working on a system update to allow current providers the service delivery and make updates the Medicaid policy. The third initiative is adding an assessment to environmental adaptations on the Physical Disability (PD) Waiver. The challenge for the current environmental adaptations service is the travel distance and the time the contractor needs to determine what needs to be adapted at the individual's home to have them return to the community from a nursing facility. Ms. Coulombe stated the DHCFP is working on posting the FAQ's for their major initiatives to their website.

In response to Mr. Gold's question, Ms. Coulombe stated they are going to IFC trying to get double match funding and a study for needs assessment for value-based payments. Two were included in the

spending plan, 1) how to improve the service delivery for aged, blind and disabled 2) one on valuebased purchasing. The third is being added which is the PACE component. ARPA funding was set aside for the PACE program for all-inclusive care for the elderly and for implementation in Nevada. Ms. Coulombe continued DHCFP will be working closely with ADSD for updates to the incident management system and pending expansion of dental benefits for the service to be added to the intellectual and developmental disability waiver.

Lastly, Ms. Coulombe stated Nevada Medicaid is working on a second \$500 payment to the home care workers and is working closely with the Direct Home Care employment board from the SB340 that came out last session. The board is made up of providers, homecare workers and representatives of the services. Recommendations from the board are being considered before proceeding with the next \$500 supplemental payments.

6. Update on the COVID-19 Vaccination Response

Kristy Zegenis presented on the COVID-19 vaccine updates (See attachment A).

Mr. Gold shared information related to AARPs nursing home dashboard which holds data for vaccinations and booster shots. He shared Director Richard Whitley will be holding another meeting with agencies to discuss messaging for individuals in facilities.

The Commissioners discussed amendments to the EUA for the first booster and related age groups and discussed messaging for target groups, especially, the minority groups most affected.

Ms. Zegenis stated immunize Nevada does great on their messaging and has does a lot of work as far as finding champions in the communities to share the message. There is also a mobile vendor that is available for request, who has served many popup clinics within communities where transportation might be a barrier.

Mr. Gold shared the Nevada Vax equity coalition meets monthly and reviews disparities in different communities of color and how to reach them.

7. Presentation on the Northwest Drug Consortium

Dr. Slamowitz provided a presentation on the Northwest Drug Consortium (See attachment B) and Array Rx (See attachment C).

8. Visitation in Nursing Homes

Viva Wells presented on the visitation in the nursing homes (See attachment D).

Chair Schmidt stated ADSD had ARPA funds available and hired a third party company to provide infection control training for some of the smaller facilities who wouldn't normally have access.

Ms. Williams-Woods stated the Ombudsman staff have found that group homes and some assisted living facilities have "No Visitors" posted. Ms. Williams-Woods expressed there needs to be more guidance on what they can put up. The restrictions are still unclear and there are many new staff members that would like updates.

Ms. Wells stated the facilities with the signage up have been notified by non-long term care staff and infection preventionist. She asked if long term care staff in the field see signage to have them contact HCQC.

Mr. Gold stated that Director Whitley had recommended coming up with a booster shot rate on vaccination rates in the skilled nursing facilities was to post the vaccination and booster rates through the different facilities on the website since you already post the surveys.

Ms. Wells responded they are collecting that information federally and from CMS, and as to how it is shared, there will need to be a conversation with CMS and the agency to ensure adherence to all guidelines.

9. COA Legislative & Policy Subcommittee

Chair Chuck Duarte, of the Legislative and Policy Subcommittee introduced the item and provided an overview of the of the Legislative Subcommittee's meeting and presentations from Meredith Levine, an official at the Guinn Center and Neva Kaye, an official with the National Academy for State Health Policy. He highlighted the issues and solutions outlined by the presenters related to the structural problem Nevada has about personal care assistance and homes; and the Medicaid structured family caregiver program which addressed the long-term nationwide trend in terms of its care gap and how the Commission can support people in their homes through the support of family caregivers and better support family caregivers and be able to keep people in their homes with their families and out of nursing facilities.

Mr. Duarte informed the Commission the Subcommittee would like to review potential modifications to the existing Frail Elderly Waiver to accommodate the family care partner to be part of the care team.

Senator Hardy asked clarifying questions and Chair Duarte and Chair Schmidt provided those clarifications. Assemblywoman Thomas expressed she would like to sponsor the Bill Draft Request for the Family Care Program.

Chair Schmidt added during the pandemic the Center for Medicare and Medicaid Services (CMS) allowed the state to have legally responsible individuals provide supports and be paid. The agency is trying to create that flexibility as the agency reviews the waiver. She said Ms. Coulombe talked about the evaluation of the Frail Elderly Waiver and Physically Disabled Waiver earlier and that would certainly be a piece of that evaluation process. Legislation would be great because then it would require the state plan and the waivers to do that.

Chair Duarte thanked the Commission and informed them there were two other items the Department moved on without any action needed from the Commission or legislature. The first being changing the spousal impoverishment levels for community spouses who have a loved one in a nursing home to the highest-level allotment. The second being adding home delivered meals to the Frail Elderly Waiver.

Chair Schmidt stated she will put forward a list with a description of our current policy initiatives and email them to the members of the committee.

Senator Hardy moved to approved to add the structured family care program to the list of policy ideas supported by the Commission as presented and as discussed. Commissioner Simmons seconded the motion. The Motion was put to a vote and passed unanimously.

10. Administrator's Report

ARPA Funding:

Chair Schmidt provided ARPA funding updates and staff changes. She shared ADSD requested a new agency manager position that was granted at the last Interim Finance Committee (IFC) and announced Jeff Duncan as the new agency manager. She explained Jeff is responsible for the Community-Based Care Unit and the Planning, Advocacy, and Community Services Unit. She announced the ADSD Public Information Officer will be leaving the agency and transitioning to the Division of Welfare and Supportive Services.

Bill Draft Requests:

Chair Schmidt shared ADSD has submitted Bill Draft Requests to the Directors office including the Senior Rx and Disability Rx Program language revision. Three Adult Protective Services bills were submitted to Interim Committees: Vulnerable Adult Protection Order, Access Warrants, and the Elder Abuse Fatality Review Team.

Letters of Support:

The Commission agreed to review and approve the letters of support at the next meeting.

Reports:

Chair Schmidt stated the Home Community Based Services (HCBS) utilization report is not something Medicaid uses quarterly and are currently working with the Office of Data Analytics to generate that report and get the information that the Commission had requested regarding utilization of Home Community Based Services versus institutional care.

11. PROGRAM UPDATES AND INFORMATION

A. Adult Protective Services Update and Caseload Information

Tammy Sever presented the statistics for Adult Protective Services Statistics. (see attachment E)

Ms. Sever expressed concerns for staffing shortages across the APS program.

The Commissioners asked questions related to neglect versus self-neglect, the differences between allegations investigated and self-neglect for those individuals, and which agency collects data for APS. Ms. Sever provided answers to those questions.

B. Home and Community Based Care Services (HCBS) Caseload & Waitlist

Ms. Greeley presented on Home and Community Based Services statistics (see attachment F)

Ms. Greeley discussed the difference between the FE Wavier and PD Waiver The Community Service Options Program for the Elderly (COPE) mirrors the FE waiver, but it is fully state funded. The Personal Assistance Services (PAS) mirrors the PD waiver, it is also fully state funded and has no federal match. It is not a Medicaid based program. Both PAS and COPE have higher income limits increasing the ability to be eligible.

Ms. Greeley expressed the concern of staff shortages causing waitlist for the programs.

Mr. Gold asked if the COA could get the caseload statistics and Ms. Greeley provided him those statistics. (See attachment G)

C. Ombudsman Report

Ms. Williams-Woods gave an overview of the Long Term Care Ombudsman Program (LTCOP) and shared the program has filled 19 of their 20 positions after months of being at a 50% vacancy rate. Ms. Williams-Woods provided the caseload statistics for the LTCOP (see attachment H).

- 12. APPROVAL OF AGENDA ITEMS FOR NEXT MEETING
 - Update on the COVID-19 Vaccination Response
 - Updates to the American Rescue Plan Act (ARPA) Home and Community Based Services (HCBS)
 - HCBS Utilization Report
 - Assistance with Voting for Residence in Nursing Facilities
- 13. NEXT TENTATIVE MEETING DATE August 16, 2022
- 14. PUBLIC COMMENT- Jennifer Richards, Chief Rights Attorney, commented she is the State Legal Services Developer under the Older Americans Act (OAA). She shared she can send out the bimonthly newsletter which covers work on the legal services providers statewide. She shared two cases featured in the newsletter. She stated if the Commission is in interested in learning more about legal services information, she can provide information at future meetings.
- 15. ADJOURNMENT The meeting adjourned at 3:47 p.m.

ATTACHMENTS:

- A. <u>COVID-19 Vaccine Updates</u>
- B. <u>The Northwest Prescription Drug Consortium</u>
- C. <u>ArrayRX Discount Card</u>
- D. Nursing Home Visitation COVID-19
- E. Adult Protective Services SFY 2022 Stats
- F. Community Based Care March 2022
- G. Caseload Statistics CBC March 2022
- H. LTCOP Report