

Legislative Committee on Persons With Disabilities



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LEGISLATIVE COMMITTEE ON PERSONS WITH DISABILITIES

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SUMMARY OF RECOMMENDATIONS

LEGISLATIVE COMMITTEE ON PERSONS WITH DISABILITIES

Nevada Revised Statutes (NRS) 218.53791

This summary presents the recommendations approved by Nevada's Legislative Committee on Persons With Disabilities at its final meeting on August 9, 2006. These recommendations will be transmitted to the 74th Session of the Nevada State Legislature.

RECOMMENDATIONS TO DRAFT LEGISLATIVE MEASURES

1. Draft legislation to remove part of Chapter 656A of NRS, move those provisions under Chapter 426 of NRS, and add language calling for regulations. This recommendation would delete the provisions of NRS that currently require an interpreter and a realtime captioning provider to have at least a high school diploma or a general equivalency diploma and to have a certain level of certification. These provisions would be replaced by a requirement that a person who wishes to engage in the practice of interpreting or realtime captioning in this State first be registered with the Office of Disability Services (ODS), Department of Health and Human Services (DHHS), for inclusion on the list of certified interpreters and realtime captioning providers. The ODS will be required to establish, by regulation, an adequate level of professional certification for interpreters and realtime captioning providers, which will be required for an interpreter or realtime captioning provider to be included on the list and establish specific regulations concerning the professional certification required for interpreters working in educational, legal, and medical settings. The ODS will be authorized to collect a maximum annual fee of \$50 from an interpreter or realtime captioning provider to be included on the list. The ODS will also be authorized to use money in the Account for Services for Persons with Impaired Speech or Hearing to administer the list. The provisions in this recommendation would be effective on July 1, 2008, or when the ODS adopts regulations, whichever occurs first, unless a later date is specified in the regulations. **(BDR 54-295)**
2. Draft legislation to require the ODS to establish in regulations a tier system for interpreter certification. This Tier Level System would address the need of new and/or inexperienced interpreters entering the interpreting profession in order to gain the necessary training and experience essential to become a certified interpreter. The Tier Level System will create a more standardized approach for novice interpreters to expand their skills and knowledge without jeopardizing the health, safety, and welfare of the individuals who are deaf and hard of hearing that they serve. It also provides clarification to those persons responsible for the hiring of interpreters as to the level of skill of the individual interpreter. **(BDR 54-295)**

3. Draft legislation to amend NRS to reflect the realities associated with court operations in Nevada. *Nevada Revised Statutes* 656A.100 is so restrictive as to make compliance virtually impossible by the overwhelming majority of Nevada's courts. Thus, NRS will be amended to reflect that the courts will make every attempt, and document such attempts, to locate certified sign language interpreters for defendants, jurors, and witnesses, and the presiding judge will make the determination as to the availability of certified interpreters. Noncertified interpreters may be used only when a certified interpreter cannot be found for a given proceeding without a significant delay to the proceeding, not as a cost-saving measure. The courts may elect to provide interpreters for spectators when appropriate, such as for the deaf spouse of a criminal defendant. **(BDR 54-295)**
4. Draft legislation to require the use of "people first" language in NRS and the *Nevada Administrative Code* when referring to people with disabilities. The acceptable language to use in describing people with disabilities has changed over time, and will likely continue to change. Instead of "disabled person," "person with a disability" should be used. Instead of "wheelchair user," "person who uses a wheelchair" is preferred. **(BDR-297)**
5. Draft legislation to require the Division of Mental Health and Developmental Services to provide to the State's designated protection and advocacy agency copies of all serious incident reports generated by the Division and/or by private providers, to the extent authorized by federal law, on a regular and ongoing basis, but at least quarterly. Nevada Disability Advocacy and Law Center is Nevada's designated protection and advocacy system. **(BDR 39-298)**
6. Draft legislation to commend and support the work of the Rehabilitation Division of the Department of Employment, Training and Rehabilitation (DETR). The Committee urges DETR to seek private contributions to use as the non-federal share of the matching requirements to utilize the entire federal allotment for vocation rehabilitation. **(BDR R-296)**

RECOMMENDATIONS TO INCLUDE A STATEMENT IN THE FINAL REPORT

7. Include a statement in the final report encouraging the State Board of Education and the school districts in the State of Nevada to set up the structure for "model regional" school-based programs for students with deafness, as funds are available. Education needs of children with deafness are very specialized. This creates challenges for Nevada where one student, or a group of students across grade levels, may be in need of these specialized educational services. It is recommended that there be a consolidation of deaf education services of pre-Kindergarten to grade 12 through the development of regional "model" programs for Nevada. **This issue is of high priority to the Legislative Committee on Persons With Disabilities Advisory Committee.**

8. Include a statement in the final report requesting Nevada's Department of Education (NDE) to prepare standardized educational interpreter guidelines, as funds are available. It is recommended that a Nevada State Educational Interpreter's Handbook be developed to serve as a guideline to school districts regarding the hiring and use of interpreters in educational settings. There are many examples of these handbooks from other states available on the Internet. These previously published manuals can serve as templates for Nevada, thereby decreasing the cost.
9. Include a statement in the final report encouraging school districts to provide bonuses for new teachers of the deaf, as funds are available. In order to recruit more qualified teachers of the deaf into the state, a recruitment incentive is recommended. This would provide a supplemental signing bonus for new teachers of the deaf in addition to funds already available for new teacher bonuses.
10. Include a statement in the final report encouraging school districts to provide "training stipends" for existing teachers of the deaf, as funds are available. In order to retain existing teachers of the deaf and provide continued training to enhance their instructional skills, a yearly "training stipend" is recommended to engage in university coursework in deaf education.
11. Include a statement in the final report encouraging the NDE to establish a statewide mentoring program for teachers of the deaf and the mentoring positions, as funds are available. Teachers of students with deafness are located throughout the State and often isolated due to their low numbers. In order to promote retention of these teachers and to overcome their isolation and limited access to ongoing training, a "mentoring a teacher" support network is recommended. The Committee urges the expansion of support and improvement to the existing deaf and hard of hearing programs by strategically locating three leadership/specialist positions, distributed throughout the State, that provide ongoing mentoring, training, and technical assistance with a multidisciplinary team approach that ensures "best practice" for all students in all deaf and hard of hearing programs.
12. Include a statement in the final report supporting the Western Interstate Commission for Higher Education (WICHE) budget proposal to use out-of-state slots for Nevada students to pursue degrees in other states that offer degrees designed to prepare teachers to work with students who are deaf or hard of hearing. In the event the budget proposal does not pass, the Committee urges WICHE to replace existing out-of-state slots used for other degrees with courses of study designed to prepare teachers to work with students who are deaf or hard of hearing.
13. Include a statement in the final report urging institutions within the Nevada System of Higher Education (NSHE) to offer and publicize non-credit, community education courses in sign language at a free or reduced cost to families of children who are deaf or hard of hearing, as funds are available.

The Committee was informed that 90 percent of parents with children who are deaf or hard of hearing do not use sign language. The Committee believes it is essential that parents are able to communicate with their children.

14. Include a statement in the final report urging the NSHE to develop and/or expand its training programs for teachers of the deaf, as funds are available. Due to the lack of such programs for teachers of the deaf, it is recommended that an increased number of training programs be available in the State.
15. Include a statement in the final report urging the NSHE to review the possibility of increasing funding for training of interpreters and urging a change concerning full time enrollment requirements for American Sign Language (ASL) courses and interpreting courses. It is recommended that the NSHE review for possible inclusion in their 2008-2009 budget the necessary funding for the development and training of sign language interpreters.
16. Include a statement in the final report urging the NDE and the school districts in the State of Nevada to establish foreign language classes in ASL, as funds are available, and as allowed under current Nevada law.
17. Include a statement in the final report encouraging school districts, the State Board of Education, and appropriate State agencies, when preparing annual reports and summaries of accountability information to the NDE concerning the population of students with disabilities, to report students who are deaf or hard of hearing and who are blind as separate categories.
18. Include a statement in the final report urging the Governor and the DHHS to prioritize funding in their 2008-2009 budget for Positive Behavior Support (PBS) technical assistance for agencies serving individuals with behavioral issues. Positive Behavior Support is a service philosophy that has shown to provide better results than negative interventions. The University of Nevada and the DHHS have partnered to form a program called PBS Nevada, which provides education and technical assistance to any public or private agency wanting to implement PBS strategies.
19. Include a statement in the final report urging courts in Nevada to clarify qualifications of legal interpreters. It is recommended that additional specific requirements be included for sign language interpreters in legal settings addressing the concerns of the Administrative Office of the Courts in regards to the scarcity of qualified interpreters under the current NRS.
20. Include a statement in the final report urging the Governor and the DHHS to prioritize the State Medicaid Program's budget request to add autism behavioral services to the Mental Retardation/Related Conditions Medicaid waiver. This policy change will enable the Division of Mental Health and Developmental Services to begin offering desperately needed assistance to children with autism. Early intervention for many kids

with autism can permanently change their lives by giving them the skills they need to compensate for their disability. In such cases, this could eliminate the future need for special education services, vocational rehabilitation services, welfare, or Medicaid. **This issue is a high priority to the Strategic Plan Accountability Committee (SPAC).**

21. Include a statement in the final report encouraging the DHHS, the Executive Budget Office, and the Legislative Counsel Bureau to change their budgets and provide Medicaid with the budget flexibility needed to shift payments between institutional and community-based settings, based upon the care choices made by service recipients. This issue is a cornerstone to the U.S. Supreme Court's *Olmstead v. L.C. ex rel Zimring* (1999) decision. Leadership of the U.S. Department of Health and Human Services supports the idea of removing the institutional bias in Medicaid service funding. However, they note that a lack of available case management staff could still pose a barrier to offering services to more people through Medicaid waivers. The SPAC believes that implementing this recommendation will give the State its strongest evidence to-date that Nevada is in the process of complying with the *Olmstead* decision.
22. Include a statement in the final report urging the DHHS to raise the unearned income eligibility limit for the Medicaid buy-in program (Health Insurance for Work Advancement [HIWA]), as funds are available. Also, include a statement urging the Governor to include in his budget a level of funding for HIWA at least equal to the amount that was requested in the Governor's 2006-2007 budget, adjusted for population and cost increases. The SPAC believes the unearned income limit should initially be raised to at least 150 percent of the Federal Poverty Level (\$1,225 a month).
23. Include a statement in the final report encouraging the Governor to permanently fund a percentage of the 2-1-1 telephone system budget through the State General Fund and encouraging the manager of 2-1-1 Nevada to continue soliciting community sponsorships.
24. Include a statement in the final report supporting an amendment to State law by the ODS (proposal will be in an agency bill draft request) that would add Traumatic Brain Injury (TBI) applicants to certain reporting requirements to help them avoid institutionalization. The amendment would require the director of the DHHS to determine the amount of State funding that would be necessary each biennium to make available community-based services to provide minimum essential personal assistance to residents of this State with TBI who would not, without the provision of that assistance, be able to live safely and independently in their communities outside of an institutional setting. The amendment would also require the director of the DHHS to consider this information during the budget process and to report this information to each regular session of the Legislature.
25. Include a statement in the final report urging the DHHS to establish a State Traumatic Brain Injury Registry no later than July 1, 2007, and to use the gathered data to direct

service resources to the most needed areas, as funds are available. Nevada has a trauma registry, which provides basic data about individuals who receive traumatic injuries, including TBI. It does not, however, offer a picture over time of the needs of people with TBI or the ability of the system to meet those needs. Many states have addressed this concern through the development of a comprehensive data registry for TBI. Much of the data needed for such a registry already exists in Nevada; it simply needs to be extracted and coordinated to provide needed information.

26. Include a statement in the final report urging the DHHS to transition 20 percent of the Early Intervention Services (EIS) caseload to private agencies and to have an independent evaluator gather data on the effectiveness of all EIS provided. Since its consolidation, Nevada's EIS has struggled to provide timely and quality services to young children with disabilities. This is especially worrisome because the window of opportunity to steer young children with disabilities on the right course is very small.
27. Include a statement in the final report urging the DHHS to continue using EIS vacancy savings to contract with private provider agencies until at least 20 percent of the EIS caseload is being privately served. In Fiscal Year 2006, the EIS had several unfilled staff vacancies that made it difficult to fully serve their client base. In an effort to remedy the problem, the EIS proposed a work program to use their vacancy savings to contract with private provider agencies.
28. Include a statement in the final report urging the DHHS to transfer the EIS compliance and monitoring function to a line of responsibility that is entirely separate from that of the EIS service delivery function. Agencies often struggle with objectively monitoring the quality of their services. For those programs with a high level of client satisfaction, the issue is not often apparent but, for those with a dissatisfied client base, there becomes a need for an objective third party to monitor a program. The EIS is funded to undertake compliance and monitoring functions. Unfortunately, that function reports to the same person responsible for overseeing the delivery of EIS services. This conflict of interest could influence the objectivity of performance evaluations and quality assurance monitors.
29. Include a statement in the final report encouraging the Interagency Transition Advisory Board (ITAB) to continue its work and to make specific recommendations for system improvement as soon as possible. The ITAB was created by the 2005 Legislature to spearhead improvement in the transition of students from school to adult life. The group has met regularly during the past year, but has yet to make any recommendations for system improvement. A major barrier to moving forward has been a lack of data in pre- and post-transition systems. Nonetheless, the work of ITAB is vital, and it is encouraged to move forward in formulating actionable recommendations. While formulating their recommendations, the Committee encourages ITAB to study and review issues relating to:

- A. Data collection to facilitate a research-based pilot project to assist transition programs;
- B. Opportunities for public education and employment of people with disabilities in community settings;
- C. State personnel training for adult service providers, including understanding disabilities, disability awareness, empowerment, customer service, self determination, higher education counseling, job development, strategies specific to persons with disabilities, independent living, and job coaching skills;
- D. Common competencies that hold personnel in organizations accountable for ensuring youth are prepared for and participating in activities assisting them in achieving their post-school goals;
- E. An external review of the Bureau of Vocational Rehabilitation and the Rehabilitation Division, DETR, the findings of which will inform policy and decision-makers at the federal and State levels of the policies and practices of identifying youth who are transitioning from school to work and the major obstacles in the current process;
- F. The publication of information related to students with disabilities, including:
 - age,
 - ethnicity,
 - referral source,
 - services provided,
 - community-based assessment locations,
 - time in service, and
 - service outcomes in terms of competitive employment, completion of higher education, sheltered workshops, wages and benefits, self-employed, not working or reason for unsuccessful closure, and the number of total closures for transition-aged youth, their placement location and percentage of successful closures;
- G. Utilization of the data from the external review (E and F) to develop future standards based on needed services;
- H. Compiling a single report from various appropriate agencies regarding the alignment of resources to meet the needs of youth and employers; and
- I. Encouraging organizations to have shared data systems, or provisions for sharing data, while fully maintaining confidentiality.

30. Include a statement in the final report encouraging the Bureau of Vocational Rehabilitation, Rehabilitation Division, DETR, to continue improving their services to people who are disabled and need mobility equipment. The Committee received testimony from various people stating that it takes many months to obtain mobility equipment.
31. Include a statement in the final report supporting the Aging and Disability Resource Center Program in the Aging Services Division, DHHS. In September of 2005, the State of Nevada was awarded a three-year federal grant in the amount of \$750,000 to establish a resource center program providing citizen-centered “one-stop” entry points for individuals who need long-term support.

REPORT TO THE 74TH SESSION OF THE NEVADA STATE LEGISLATURE BY THE LEGISLATIVE COMMITTEE ON PERSONS WITH DISABILITIES

I. INTRODUCTION

The Legislative Committee on Persons With Disabilities, in compliance with *Nevada Revised Statutes* (NRS) 218.5379 through 218.53797, provides for legislative review of: (1) programs and services for persons with disabilities, including the *State Strategic Plan for People with Disabilities*; (2) ways to enhance such programs or services and ensure that persons with disabilities are receiving services in the most appropriate setting; (3) federal and State laws concerning persons with disabilities, including compliance with such laws and ways to more fully implement the federal Americans with Disabilities Act (ADA); (4) the availability of relevant information and data to make decisions, plan budgets, and monitor cost and outcomes; and (5) transition services for students with disabilities.

The Committee was established in 2003 by Senate Bill 137 (Chapter 484, *Statutes of Nevada 2003*), as recommended by the Legislative Commission's Subcommittee to Study the State Program for Providing Services to Persons With Disabilities during the 2001–2003 interim. During the 2005 Legislative Session, S.B. 134 (Chapter 271, *Statutes of Nevada 2005*) was passed, requiring the Committee to study the manner by which school districts can meet the needs of pupils who are deaf or hard of hearing and the manner by which accessible communication can be provided and improved for all residents of this State who are deaf or hard of hearing. In accordance with Section 11 of S.B. 137, the Committee is scheduled to sunset on June 30, 2007. (See Appendix A for a copy of NRS 218.5379 through 218.53797 and Appendix B for a copy of S.B. 134.)

The Committee held a total of seven meetings this interim: one in 2005, and six in 2006. The members received overview presentations by Nevada's Department of Education (NDE); the Department of Employment, Training and Rehabilitation (DETR); the Department of Health and Human Services (DHHS); and the Nevada System of Higher Education (NSHE). Other entities making presentations included the Nevada State Rehabilitation Council and various school districts. The Committee heard briefings on the U.S. Supreme Court's decision in *Olmstead v. L.C. ex rel Zimring* (1999), the *State Strategic Plan for People with Disabilities*, the 2-1-1 telephone system, transition services for students with disabilities, ADA compliance, early childhood issues, and issues related to people who are deaf or hard of hearing.

Members of the Committee during the 2005-2006 interim included the following legislators:

Senator Barbara K. Cegavske, Chairwoman
Assemblywoman Ellen M. Koivisto, Vice Chairwoman
Senator Bernice Mathews
Senator Maurice E. Washington
Assemblywoman Susan I. Gerhardt
Assemblywoman Valerie E. Weber

An Advisory Committee appointed by the Committee (NRS 218.53796) held three meetings during the 2006 interim and studied issues related to people who are deaf or hard of hearing, particularly as they relate to educating children who are deaf or hard of hearing. The recommendations of the Advisory Committee were presented to the Committee for its consideration. The creation of the Advisory Committee and its membership are codified in NRS 218.53796, contained within Appendix A. The list of the Advisory Committee members is contained within Appendix C.

Legislative Counsel Bureau staff services for the Committee and the Advisory Committee were provided by:

Michelle L. Van Geel, Principal Research Analyst
Bob Guernsey, Principal Deputy Fiscal Analyst
Rick Combs, Program Analyst
Leslie K. Hamner, Principal Deputy Legislative Counsel
Yvonne M. Goodson, Senior Deputy Legislative Counsel
Ricka Benum, Senior Research Secretary
Sandra Gibbons, Senior Research Secretary

The Committee also received regular reports from the Strategic Plan Accountability Committee (SPAC), and, as required by NRS 218.53797, reports were received from the DHHS on the provision of health insurance to persons with disabilities, assessments of people with disabilities pursuant to the *State Strategic Plan for People with Disabilities*, and changes to the State Medicaid Plan to cover the costs of community-based services to certain persons with disabilities. The Committee also worked with the DHHS on a number of issues affecting persons with disabilities, including early childhood services and cost-effective care to persons with traumatic brain injury (TBI). The Committee also worked with DETR to improve opportunities related to federal vocational rehabilitation funding and transition services for students with disabilities. Additionally, the Committee and Advisory Committee spent much time studying education issues and interpreter certification issues as they relate to residents in Nevada who are deaf and hard of hearing.

Members of the Committee adopted 31 proposals with regard to persons with disabilities. The major recommendations adopted include proposals to:

- Support ongoing State programs for TBI rehabilitation programs;
- Support the continuation of the 2-1-1 telephone system in Nevada;
- Support the continued work of the Interagency Transition Advisory Board (ITAB) to oversee and coordinate transition services provided to students with disabilities to ensure positive postsecondary outcomes;

- Urge DETR, the NDE, the NSHE, and others to better coordinate services and data collection for students with disabilities to facilitate the transition from high school to postsecondary education or work;
- Draft legislation to require identifying the person first when referring to people with disabilities (“people first” language) in NRS and the *Nevada Administrative Code*;
- Draft legislation to require the Office of Disability Services (ODS) to establish a tier system for interpreter certification and make various other changes affecting people who are deaf or hard of hearing; and
- Draft legislation to require the Division of Mental Health and Developmental Services to provide to the State’s designated protection and advocacy agency copies of all serious incident reports generated by the Division and/or private providers.

II. BACKGROUND

The Legislative Committee on Persons With Disabilities was one of two new standing committees created during the 2003 Session. The creation of the Committee was the result of a recommendation from the Legislative Commission’s Subcommittee to Study the State Program for Providing Services to Persons With Disabilities during the 2001-2002 interim.

In the 2003 Legislative Session, several bills were introduced as a result of recommendations from the Subcommittee, including S.B. 164 (Chapter 429, *Statutes of Nevada 2003*) creating the ODS within the Department of Human Resources (DHR, now DHHS); and Senate Concurrent Resolution No. 10 (File No. 64, *Statutes of Nevada 2003*) expressing support for the *State Strategic Plan for People with Disabilities*. Senate Bill 137 was also a product of the Subcommittee due to the importance placed upon implementing the *State Strategic Plan for People with Disabilities*, as well as monitoring and improving State and other services for persons with disabilities.

Several legislative measures also were introduced during the 2005 Session, based on recommendations from the Legislative Committee on Persons With Disabilities. Senate Bill 22 (Chapter 377, *Statutes of Nevada 2005*) established an advisory committee to oversee the transition of pupils with disabilities from school, and S.B. 23 (Chapter 83, *Statutes of Nevada 2005*) authorized certain persons with disabilities to use signature stamps. Additionally, S.B. 134 (Chapter 271, *Statutes of Nevada 2005*) states, in part, that the Legislative Committee on Persons With Disabilities must study the manner by which school districts can meet the needs of pupils who are deaf or hard of hearing and the manner by which accessible communication can be provided and improved for all residents of this State who are deaf or hard of hearing.

III. REVIEW OF MAJOR ISSUES AND COMMITTEE ACTIVITIES

The Legislative Committee on Persons With Disabilities considered a wide range of topics relating to persons with disabilities, including the 2-1-1 telephone system, transition services for students with disabilities, ADA compliance, early childhood issues, and issues related to people who are deaf or hard of hearing.

A. *State Strategic Plan for People with Disabilities*

The genesis of the *State Strategic Plan for People with Disabilities* was the U.S. Supreme Court's 1999 decision in the *Olmstead* case. The plaintiffs in *Olmstead* questioned whether the prohibition against discrimination in Title II of the ADA required the placement of persons with mental disabilities in community-based settings rather than institutions. In the decision, the U.S. Supreme Court answered with a qualified "yes," holding that a state is required to provide community-based treatment when:

- Treatment professionals determine that community placement is appropriate;
- The transfer from institutional care to a less restrictive setting is not opposed by the affected person; and
- The community-based placement can be reasonably accommodated, taking into account the resources available to the state and the needs of others with mental disabilities.

The U.S. Supreme Court also indicated that a state can demonstrate compliance with the *Olmstead* decision by showing that it has a comprehensive and effective plan for placing persons with disabilities in less restrictive settings and maintains a waiting list that moves at a reasonable pace, free from the pressure to maintain full populations in state institutions.

Due to the *Olmstead* decision and the lack of a comprehensive plan in Nevada, the *State Strategic Plan for People with Disabilities* was developed by the DHR (now the DHHS) and the Task Force on Disability, in conjunction with the Subcommittee during the 2001-2002 interim, and approved by the Legislature in 2003. The plan consists of a detailed inventory of current populations of persons with disabilities and available State services and programs, as well as an analysis of the plan's relationship to the *Olmstead* decision and barriers to implementation. The *State Strategic Plan for People with Disabilities* also sets forth nine goals and 94 objectives to achieve its mission of maximizing the placement of persons with disabilities in less restrictive settings and avoiding unnecessary institutionalizations. The *State Strategic Plan for People with Disabilities* may be viewed in its entirety on the DHHS Web site at: <http://www.hr.state.nv.us/>.

Through an Executive Order from Governor Kenny C. Guinn (contained in Appendix D) dated November 18, 2003, the DHHS convened SPAC that meets regularly to monitor

implementation of the *State Strategic Plan for People with Disabilities*, identifies priorities, and coordinates statewide efforts. A listing of the members of SPAC, as of December 2006, is contained in Appendix E.

B. Reports to the Committee from the Department of Health and Human Services

Nevada Revised Statutes 218.53797 requires a number of reports to be submitted to the Committee from the DHHS.

The first report due from the DHHS on October 1, 2005, addressed the expansion of the program in NRS 422.2715—a program set up by Senate Bill 207 (Chapter 461, *Statutes of Nevada 2001*) within the Division of Health Care Financing and Policy in the DHHS to give medical assistance to certain persons with disabilities who are employed. The report covered the progress towards the January 2008 goal of providing comprehensive health care coverage to certain persons with disabilities. As a result of employment, these individuals have incomes above the federally designated poverty level and who are unable to obtain health insurance except from a program of public assistance, including the Health Insurance for Work Advancement (HIWA) Program. Also covered in the report was the impact of assessments on persons with disabilities pursuant to the *State Strategic Plan for People with Disabilities* to determine if they are living in unnecessarily restrictive residential environments, including any cost savings from such assessments. The full report may be found at <http://www.leg.state.nv.us/73rd/Interim/StatCom/Disabilities/exhibits/18711F.pdf>.

A second report from the DHHS (Appendix F) was received in 2006 and addressed the expansion of the program in NRS 422.2715—the program within the DHHS to give medical assistance to certain persons with disabilities who are employed. The report discussed the hiring of a facilitator to provide guidance with planning sessions, the HIWA Advisory Group meetings, and related activities. The report also indicated that the HIWA Group has developed five work groups: Bylaws, Recruitment, Outreach, Strategic Planning, and Legislative. It was also reported that the primary challenge for HIWA is the need to increase program enrollment. Also covered in the report was the Money Follows the Person Rebalancing Initiative Grant, which ended in September 2006.

C. Advisory Committee to Study Education Issues and Interpreter Certification Issues as They Relate to Deaf and Hard of Hearing Residents in Nevada

The 2005 Legislature passed S.B. 134, which made various changes related to the practice of interpreting and to providers of Communication Access Realtime Translation. Part of the final version of that bill required the Legislative Committee on Persons With Disabilities to study, during the interim, the needs of the deaf and the hearing impaired. Because this issue was going to take a significant amount of time, Chairwoman Cegavske requested that the Legislative Committee on Persons With Disabilities Advisory Committee (NRS 218.53796) study education issues and interpreter certification issues as they relate to deaf and hard of hearing residents in Nevada.

The Advisory Committee held three meetings during the 2006 interim and studied issues related to people who are deaf or hard of hearing, particularly as they relate to educating children who are deaf or hard of hearing. During the Advisory Committee's first meeting on April 11, 2006, Advisory Committee Chairwoman Karen Taycher appointed three work groups to research and study issues relating to: (1) interpreter certification; (2) oversight and licensure; and (3) education.

In conjunction with these work groups, the Advisory Committee identified three major concerns: training, retention, and recruitment. The issues associated with each of these concerns are summarized, as follows:

Training: It is necessary to develop a pool of qualified interpreters to meet the communication needs of individuals who are deaf and hard of hearing and reside in the State of Nevada. In addition, consideration must be given to training interpreters. It is critical that college administrators agree to support such training efforts despite full time enrollment (FTE) regulations that presently allow classes to be cancelled if a certain number of students have not enrolled.

Retention: Retaining current interpreters will depend on the districts or agencies where they are employed. Currently, the majority of interpreters working in the school districts are under qualified, leading to substandard services for students who are deaf and hard of hearing; therefore they are provided a less than adequate education. Current pay levels and job offerings must be reviewed and raised to market standards if the State wishes to retain the interpreters in these positions.

Recruitment: In order to attract qualified interpreters to the State of Nevada, recruitment efforts must be made nationwide. This process entails reviewing salaries paid to interpreters on a national scale and determining appropriate pay levels to attract certified interpreters. Recruitment of qualified interpreters is vital to the success of individuals who are deaf and hard of hearing in the State, until the State's training programs are well established and the students coming through these programs meet the qualification standards.

At its final meeting on June 6, 2006, the Advisory Committee voted to forward eight recommendations to the Legislative Committee on Persons With Disabilities. The recommendations of the Advisory Committee were presented to the Committee for its consideration on June 19, 2006.

D. Transition Services for Youth with Disabilities

Transition services for youth with disabilities were also a primary concern of the Committee and the subject of several presentations. Helping students with disabilities transition from high school to either postsecondary education or to the workforce is a national issue. Coordinating

the wide range of services and service providers is an ongoing challenge for all states. The Committee received numerous updates from DETR and the NSHE detailing the progress those agencies are making in the preparation and implementation of a comprehensive transition plan for students with disabilities.

Further, the 2005 Legislature enacted Senate Bill 22 (Chapter 377, *Statutes of Nevada 2005*), which, in part, created ITAB. The Board may study and comment on issues related to transition services for persons with disabilities, including, but not limited to, methods to enhance programs that ensure persons with disabilities are receiving transition services in the most appropriate settings, the availability of useful information and data relating to transition services, and compliance with federal requirements, which affect persons who are receiving transition services.

Additionally, NRS 426.264 requires an annual report to be submitted to the Committee from ITAB. The first report from ITAB was due on July 1, 2006, and summarized the availability and status of transition services and the need for those transition services in this State. The report also provided recommendations for legislation relating to transition services; recommendations to agencies and officers of the Executive Branch of State government relating to transition services; and recommendations to providers of community-based services that provide services to persons with disabilities relating to transition services. The full report may be found at <http://www.leg.state.nv.us/73rd/Interim/StatCom/Disabilities/exhibits/20404B.pdf>.

E. Other Committee Actions

The Committee also reviewed numerous other issues related to persons with disabilities, including:

- Efforts to improve the statewide 2-1-1 telephone system that provides one-stop access to health, welfare, and social services for persons with disabilities and others;
- Access issues related to the ADA;
- The scope of early childhood services;
- The provision of autism behavioral services pursuant to Medicaid's Mental Retardation/Related Conditions Waiver;
- Cost-effective care to persons with TBI;
- Mobility equipment and services for persons with disabilities;
- Aging and Disability Resource Centers (ADRC) Program in the Aging Services Division, DHHS;

- The expansion of income eligibility for the Medicaid buy-in program for persons with disabilities;
- The establishment of standards for implementing positive behavior support (PBS) by agencies serving individuals with behavior issues;
- Strategies for the provision of Nevada’s Medicaid services related to “Money Follows the Person”;
- Mandating reporting of the availability of accessible housing by property owners who receive funding from federal, State, or local jurisdiction funding to the online registry regarding accessible housing in Nevada for persons with disabilities; and
- Identifying the person first when referring to people with disabilities (“people first” language).

Another topic of great importance to the Chairwoman is concern with the use of long-term substitute teachers in classrooms for children with autism.

IV. FINDINGS AND RECOMMENDATIONS

At its work session on August 9, 2006, the Committee adopted 31 recommendations, including six recommendations to be combined into bill drafts for consideration by the 2007 Legislature. More detailed information regarding the work of the Committee is contained in its minutes and exhibits, which are available on the Legislature’s Web site at <http://www.leg.state.nv.us/73rd/Interim/StatCom/Disabilities/>.

For many of the recommendations, the Committee depended upon the work of SPAC and its priorities in implementing the goals and objectives of the *State Strategic Plan for People with Disabilities*. The July 2005 and 2006 annual reports of SPAC, titled *Nevada’s Strategic Plan for People with Disabilities*, may be found at <http://www.leg.state.nv.us/73rd/Interim/StatCom/Disabilities/exhibits/18711E.pdf> and in Appendix G, respectively. The Committee also relied heavily upon the recommendations from the Legislative Committee on Persons With Disabilities Advisory Committee when formulating the recommendations concerning education issues and interpreter certification issues as they relate to deaf and hard of hearing residents in Nevada. The full text of the Advisory Committee’s report to the Legislative Committee on Persons With Disabilities may be found at <http://www.leg.state.nv.us/73rd/Interim/StatCom/Disabilities/exhibits/20404H.pdf>.

An overview of the recommendations adopted as a result of the Committee’s work during the 2005-2006 interim follows. Subsequent to the Committee’s work session, portions of the recommendations have been rewritten to more accurately reflect the actions of the Committee.

A. Recommendations to Draft Legislative Measures

Recommendations one through three were part of the group of recommendations from the Legislative Committee on Persons With Disabilities Advisory Committee. Representatives of Nevada's court system requested changes to the NRS 656A.100, indicating that statute is very restrictive and makes compliance by the overwhelming majority of Nevada's courts virtually impossible. Additionally, various members of the Advisory Committee spent significant time in discussions with staff of the ODS preparing the following recommendations before they were presented to the Committee:

1. **Draft legislation to remove part of Chapter 656A of NRS, move those provisions under Chapter 426 of NRS, and add language calling for regulations. This recommendation would delete the provisions of NRS that currently require an interpreter and a realtime captioning provider to have at least a high school diploma or a general equivalency diploma, and to have a certain level of certification. These provisions would be replaced by a requirement that a person who wishes to engage in the practice of interpreting or realtime captioning in this state first be registered with the ODS, DHHS, for inclusion on the list of certified interpreters and realtime captioning providers. The ODS will be required to establish, by regulation, an adequate level of professional certification for interpreters and realtime captioning providers, which will be required for an interpreter or realtime captioning provider to be included on the list and establish specific regulations concerning the professional certification required for interpreters working in educational, legal, and medical settings. The ODS will be authorized to collect a maximum annual fee of \$50 from an interpreter or realtime captioning provider to be included on the list. The ODS will also be authorized to use money in the Account for Services for Persons with Impaired Speech or Hearing to administer the list. The provisions in this recommendation would be effective on July 1, 2008, or when the ODS adopts regulations, whichever occurs first, unless a later date is specified in the regulations. (BDR 54-295)**
2. **Draft legislation to require the ODS to establish in regulations a tier system for interpreter certification. This Tier Level System would address the need of new and/or inexperienced interpreters entering the interpreting profession in order to gain the necessary training and experience essential to become a certified interpreter. The Tier Level System will create a more standardized approach for novice interpreters to expand their skills and knowledge without jeopardizing the health, safety, and welfare of the individuals who are deaf and hard of hearing that they serve. It also provides clarification to those persons responsible for the hiring of interpreters as to the level of skill of the individual interpreter. (BDR 54-295)**

3. **Draft legislation to amend NRS to reflect that the courts will make every attempt, and document such attempts, to locate certified sign language interpreters for defendants, jurors, and witnesses, and the presiding judge will make the determination as to the availability of certified interpreters. Noncertified interpreters may be used only when a certified interpreter cannot be found for a given proceeding without a significant delay to the proceeding, not as a cost-saving measure. The courts may elect to provide interpreters for spectators when appropriate, such as for the deaf spouse of a criminal defendant. (BDR 54-295)**

This recommendation was proposed by SPAC and originated with the People First organization. While it is impossible to legislate language preferences, SPAC believes that the person should always be identified first when referring to people with disabilities. Therefore the Committee voted to:

4. **Draft legislation to require identifying the person first when referring to people with disabilities (“people first” language) in NRS and the *Nevada Administrative Code*. The acceptable language to use in describing people with disabilities has changed over time, and will likely continue to change. Instead of “disabled person,” “person with a disability” should be used. Instead of “wheelchair user,” “person who uses a wheelchair” is preferred. (BDR-297)**

Nevada Disability Advocacy and Law Center (NDALC) is Nevada’s protection and advocacy system. The NDALC was designated by the Governor of the State of Nevada to provide protection and advocacy services for Nevada citizens who have mental, developmental, and/or physical disabilities. An important component of the NDALC’s mandate is to investigate allegations of abuse and neglect and to monitor facilities and other supervised living arrangements of individuals with disabilities to ensure living environments are free from abuse and neglect. The NDALC exercises its authority to investigate abuse and neglect and to monitor facilities and other supervised living arrangements pursuant to the Developmental Disabilities Assistant and Bill of Rights Act, 42 *United States Code* (U.S.C.) § 15041, et seq., 45 *Code of Federal Regulations* (C.F.R.) § 1386; the Protection and Advocacy for Individuals with Mental Illness Act, 42 U.S.C. § 10801, et seq., as amended, 42 C.F.R. § 51; the Protection and Advocacy for Individuals with Traumatic Brain Injury Act, 42 U.S.C. § 300d-52; and the Protection and Advocacy for Individual Rights Act, 29 U.S.C. § 794e.

The NDALC previously requested the Division of Mental Health and Developmental Services to voluntarily provide Serious Incident Reports on an ongoing basis to the NDALC in order to monitor the health and safety of individuals living in community placements. The Division has denied this request. Periodically receiving serious incident reports generated by either the Division or private service providers will alert the NDALC to potential abuse/neglect incidents and allow the NDALC to more effectively provide oversight to the service delivery system and promote the shared goals of protecting individuals with disabilities from abuse/neglect. Therefore the Committee voted to:

5. **Draft legislation to require the Division of Mental Health and Developmental Services to provide to the State's designated protection and advocacy agency copies of all serious incident reports generated by the Division and/or by private providers, to the extent authorized by federal law, on a regular and ongoing basis, but at least quarterly. Nevada Disability Advocacy and Law Center is Nevada's designated protection and advocacy system. (BDR 39-298)**

The Rehabilitation Services Administration (RSA) allocates federal Section 110 funding based on disability population demographics. For the current federal year (October 1, 2005, through September 30, 2006—Fiscal Year [FY] 2006) the RSA allocated \$3 million more to Nevada than the Rehabilitation Division was able to match. At the required match ratio, an increase of approximately \$750,000 in funding would be required to match Nevada's FY 2006 Section 110 allotment. Preliminary planning targets issued by the RSA indicate that Nevada's allocation will be increasing by 7.5 percent per year. The following recommendation from SPAC was approved by the Committee:

6. **Draft legislation to commend and support the work of the Rehabilitation Division of DETR. The Committee urges DETR to seek private contributions to use as the non-federal share of the matching requirements to utilize the entire federal allotment for vocation rehabilitation. (BDR R-296)**

B. **Recommendations to Include a Statement in the Final Report**

The implementation of "model regional" school-based programs for students with deafness is an issue of the highest priority to the Legislative Committee on Persons With Disabilities Advisory Committee. School districts throughout the State can maximize the effectiveness of their deaf education programs by bringing children with deafness together at a minimum number of elementary, middle, and high schools, which offer specialized classes. These programs will be strategically located in existing schools in urban or rural centers. In urban locations, children from surrounding rural areas will be transported in or video linked. Students in remote rural areas will have access to deaf and hard of hearing services at rural regional programs or through video links to urban or rural schools. By implementing this "regional" model, students with deafness will have the benefit of inclusionary education while having a more focused pool of qualified teachers and interpreters, and more interaction with their deaf peers. The Committee also voted to:

7. **Include a statement in the final report encouraging the State Board of Education and the school districts in the State of Nevada to set up the structure for "model regional" school-based programs for students with deafness, as funds are available. Education needs of children with deafness are very specialized. This creates challenges for Nevada where one student, or a group of students across grade levels, may be in need of these specialized educational services. It is**

recommended that there be a consolidation of deaf education services of pre-Kindergarten to grade 12 through the development of regional “model” programs for Nevada.

One of the major concerns that was repeatedly brought to the attention of the Legislative Committee on Persons With Disabilities Advisory Committee was the need for school districts, especially those in rural areas, to have methods to oversee the hiring, supervising, and assessing the qualifications of educational interpreters. The Advisory Committee pointed out that the State of Colorado has a similar demographic make-up to Nevada, with large urban centers and expansive rural areas; the Advisory Committee recommended that Nevada closely follow the format and content of their handbook for hiring, supervising, and assessing the qualifications of educational interpreters. The full text of the *Educational Interpreter Handbook*, prepared by the Colorado Department of Educational Student Services, 2nd Edition, 2004 may be found at <http://www.leg.state.nv.us/73rd/Interim/StatCom/Disabilities/exhibits/20404I.pdf>. The Committee voted to:

- 8. Include a statement in the final report requesting the NDE to prepare standardized educational interpreter guidelines, as funds are available. It is recommended that a Nevada State Educational Interpreter’s Handbook be developed to serve as a guideline to school districts regarding the hiring and use of interpreters in educational settings. There are many examples of these handbooks from other states available on the Internet. These previously published manuals can serve as templates for Nevada, thereby decreasing the cost.**

Recommendations 9 and 10 were submitted by the Legislative Committee on Persons With Disabilities Advisory Committee. Because of a shortage of teachers of the deaf and because existing teachers need continued training to enhance their instructional skills, both of these recommendations urge monetary assistance to new and existing teachers of the deaf.

- 9. Include a statement in the final report encouraging school districts to provide bonuses for new teachers of the deaf, as funds are available. In order to recruit more qualified teachers of the deaf into the state, a recruitment incentive is recommended. This would provide a supplemental signing bonus for new teachers of the deaf in addition to funds already available for new teacher bonuses.**
- 10. Include a statement in the final report, encouraging school districts to provide “training stipends” for existing teachers of the deaf, as funds are available. In order to retain existing teachers of the deaf and provide continued training to enhance their instructional skills, a yearly “training stipend” is recommended to engage in university coursework in deaf education.**

The following recommendation also originated from the Legislative Committee on Persons With Disabilities Advisory Committee:

11. **Include a statement in the final report encouraging the NDE to establish a statewide mentoring program for teachers of the deaf and the mentoring positions, as funds are available. Teachers of students with deafness are located throughout the State and often isolated due to their low numbers. In order to promote retention of these teachers and to overcome their isolation and limited access to ongoing training, a “mentoring a teacher” support network is recommended. The Committee urges the expansion of support and improvement to the existing deaf and hard of hearing programs by strategically locating three leadership/specialist positions, distributed throughout the State, that provide ongoing mentoring, training, and technical assistance with a multidisciplinary team approach that ensures “best practice” for all students in all deaf and hard of hearing programs.**

During the many discussions concerning educational opportunities for students who are deaf or hard of hearing, one common issue continually mentioned was a shortage of teachers to work with these students. Chairwoman Cegavske and Assemblywoman Weber offered a recommendation to use out-of-state slots through the Western Interstate Commission for Higher Education (WICHE) for Nevada students to pursue degrees as teachers of students who are deaf or hard of hearing. During the work session, the recommendation was changed slightly to the following:

12. **Include a statement in the final report supporting the WICHE budget proposal to use out-of-state slots for Nevada students to pursue degrees in other states that offer degrees designed to prepare teachers to work with students who are deaf or hard of hearing. In the event the budget proposal does not pass, the Committee urges WICHE to replace existing out-of-state slots used for other degrees with courses of study designed to prepare teachers to work with students who are deaf or hard of hearing.**

Cindy Frank, Deaf Studies Program Coordinator/American Sign Language (ASL) Teacher, Western Nevada Community College, and also a member of the Legislative Committee on Persons With Disabilities Advisory Committee, offered a recommendation designed to encourage family members of students who are deaf or hard of hearing to learn how to communicate with their children. The Committee voted to:

13. **Include a statement in the final report urging institutions within the NSHE to offer and publicize non-credit, community education courses in sign language at a free or reduced cost to families of children who are deaf or hard of hearing, as funds are available. The Committee was informed that 90 percent of parents with children who are deaf or hard of hearing do not use sign language. The Committee believes it is essential that parents are able to communicate with their children.**

Recommendations 14 through 17 relating to higher education and to K-12 education are also from the Legislative Committee on Persons With Disabilities Advisory Committee. The Committee agreed to:

14. **Include a statement in the final report urging the NSHE to develop and/or expand its training programs for teachers of the deaf, as funds are available. Due to the lack of such programs for teachers of the deaf, it is recommended that an increased number of training programs be available in the state.**
15. **Include a statement in the final report urging the NSHE to review the possibility of increasing funding for training of interpreters and urging a change concerning FTE requirements for ASL courses and interpreting courses. It is recommended that the NSHE review for possible inclusion in their 2008-2009 budget the necessary funding for the development and training of sign language interpreters.**
16. **Include a statement in the final report urging the NDE and the school districts in the State of Nevada to establish foreign language classes in ASL, as funds are available, and as allowed under current Nevada law.**
17. **Include a statement in the final report encouraging school districts, the State Board of Education, and appropriate State agencies, when preparing annual reports and summaries of accountability information to the NDE concerning the population of students with disabilities, to report students who are deaf or hard of hearing and who are blind as separate categories.**

The PBS program has operated on a minimal budget and has subsisted mostly on support from the Fund for a Healthy Nevada. However, because PBS is mandated in NRS and because it is a key strategy for *Olmstead* compliance, SPAC urges permanent State General Fund support for PBS Nevada and at least \$540,000 in annual funding during the 2008-2009 biennium. Therefore, the Committee voted to:

18. **Include a statement in the final report urging the Governor and the DHHS to prioritize funding in their 2008-2009 budget for PBS technical assistance for agencies serving individuals with behavioral issues. Positive behavior support is a service philosophy that has shown to provide better results than negative interventions. The University of Nevada and the DHHS have partnered to form a program called PBS Nevada, which provides education and technical assistance to any public or private agency wanting to implement PBS strategies.**

Another issue of great importance to the Advisory Committee concerns interpreting in a legal setting. As a member of the National Center for State Courts since 2001, Nevada would be able to incorporate the *Model Legislation for Sign Language Interpreters*, Chapter 7, "Visual Modes of Communication: Interpreting for Deaf Persons," into court guidelines. The full text

of this model legislation may be found at <http://www.leg.state.nv.us/73rd/Interim/StatCom/Disabilities/exhibits/20404H.pdf> (in Appendix D of the exhibit). The Advisory Committee highly recommended that these guidelines be added to the *State Court Administrator Guidelines for the Nevada Certified Court Interpreter Program*. An additional document recommended by the Advisory Committee that discusses certification and qualifications for providing legal interpretation for the deaf and hard of hearing is provided by the Community and the Court Interpreters of the Ohio Valley, which may be viewed at <http://www.leg.state.nv.us/73rd/Interim/StatCom/Disabilities/exhibits/20404H.pdf> (in Appendix F of the exhibit). The Committee agreed to:

19. **Include a statement in the final report urging courts in Nevada to clarify qualifications of legal interpreters. It is recommended that additional specific requirements be included for sign language interpreters in legal settings addressing the concerns of the Administrative Office of the Courts with regard to the scarcity of qualified interpreters under the current NRS.**

The following recommendation was submitted by SPAC. During the 2005 Session, the issue of improving early intervention services for autistic children narrowly failed to garner sufficient Executive Branch or legislative support; SPAC has made it its top priority for the upcoming biennium. Additional information about the topic is contained at <http://www.leg.state.nv.us/73rd/Interim/StatCom/Disabilities/exhibits/20404H.pdf> and in Appendix G. The Committee agreed to:

20. **Include a statement in the final report urging the Governor and the DHHS to prioritize the State Medicaid Program's budget request to add autism behavioral services to the Mental Retardation/Related Conditions Medicaid waiver. This policy change will enable the Division of Mental Health and Developmental Services to begin offering needed assistance to children with autism. Early intervention for many kids with autism can permanently change their lives by giving them the skills they need to compensate for their disability. In such cases, this could eliminate the future need for special education services, vocational rehabilitation services, welfare, or Medicaid.**

Recommendations 21 and 22 concern changes to State Medicaid and also were developed by SPAC. The SPAC believes that implementing these recommendations will give the State its strongest evidence to date that Nevada is in the process of complying with the *Olmstead* decision.

Additional information is contained at <http://www.leg.state.nv.us/73rd/Interim/StatCom/Disabilities/exhibits/18711E.pdf> and in Appendix G. The Committee agreed to:

21. **Include a statement in the final report encouraging the DHHS, the Executive Budget Office, and the Legislative Counsel Bureau to change the State budget to provide Medicaid with the budget flexibility needed to shift payments between**

institutional and community-based settings, based upon the care choices made by service recipients. This issue is a cornerstone to the U.S. Supreme Court's *Olmstead v. L.C. ex rel Zimring* (1999) decision. Leadership of the U.S. Department of Health and Human Services supports the idea of removing the institutional bias in Medicaid service funding. However, they note that a lack of available case management staff could still pose a barrier to offering services to more people through Medicaid waivers.

22. **Include a statement in the final report urging the DHHS to raise the unearned income eligibility limit for the Medicaid buy-in program (HIWA), as funds are available. Also, include a statement urging the Governor to include in his budget a level of funding for HIWA at least equal to the amount that was requested in the Governor's 2006-2007 budget, adjusted for population and cost increases. The SPAC believes the unearned income limit should initially be raised to at least 150 percent of the federal poverty level (\$1,225 a month).**

The 2-1-1 universal access line is a single point of access for information concerning available social service programs. This pilot project received funding from the 2005 Legislature to provide service in the metropolitan areas of the State, and SPAC recommends greater commitment from the State is needed to make the program available statewide. Additional information about 2-1-1 is contained at <http://www.leg.state.nv.us/73rd/Interim/StatCom/Disabilities/exhibits/18711E.pdf> and in Appendix G. The Committee, therefore, agreed to:

23. **Include a statement in the final report encouraging the Governor to permanently fund a percentage of the 2-1-1 telephone system budget through the State General Fund and encouraging the manager of 2-1-1 Nevada to continue soliciting community sponsorships.**

Another issue of great importance to SPAC concerns people with TBI. Recommendations 24 and 25 were from SPAC, and both offer ways to improve the lives of people who have TBI. Additional information about TBI is contained at <http://www.leg.state.nv.us/73rd/Interim/StatCom/Disabilities/exhibits/18711E.pdf> and in Appendix G. The Committee voted to:

24. **Include a statement in the final report supporting an amendment to State law by the ODS (Bill Draft Request No. 38-594) that would add TBI applicants to certain reporting requirements to help them avoid institutionalization. The amendment would require the director of the DHHS to determine the amount of State funding that would be necessary each biennium to make available community-based services to provide minimum essential personal assistance to residents of this state with TBI who would not, without the provision of that assistance, be able to live safely and independently in their communities outside of an institutional setting. The amendment would also require the director of the DHHS to consider this**

information during the budget process and to report this information to each regular session of the Legislature.

25. **Include a statement in the final report urging the DHHS to establish a State Traumatic Brain Injury Registry no later than July 1, 2007, and to use the gathered data to direct service resources to the most needed areas, as funds are available. Nevada has a trauma registry, which provides basic data about individuals who receive traumatic injuries, including TBI. It does not, however, offer a picture over time of the needs of people with TBI or the ability of the system to meet those needs. Many states have addressed this concern through the development of a comprehensive data registry for TBI. Much of the data needed for such a registry already exists in Nevada; it simply needs to be extracted and coordinated to provide needed information.**

Children with disabilities who are not properly served during their early years enter our school system well behind their peers, and wind up being more costly and difficult to educate. Representatives of SPAC indicated this is especially worrisome because the window of opportunity to steer young children with disabilities on the right course is very small. Nevada is one of only two states that provide Early Intervention Services (EIS) through a State agency. Recommendations 26 through 28 were made by SPAC, and additional information is contained at <http://www.leg.state.nv.us/73rd/Interim/StatCom/Disabilities/exhibits/18711E.pdf> and in Appendix G. The Committee voted to:

26. **Include a statement in the final report urging the DHHS to transition 20 percent of the EIS caseload to private agencies and to have an independent evaluator gather data on the effectiveness of all EIS provided. Since its consolidation, Nevada's EIS has struggled to provide timely and quality services to young children with disabilities.**
27. **Include a statement in the final report urging the DHHS to continue the practice of using EIS vacancy savings to contract with private provider agencies until at least 20 percent of the EIS caseload is being privately served. In FY 2006, the EIS had several unfilled staff vacancies that made it difficult to fully serve their client base. In an effort to remedy the problem, the EIS proposed a work program to use their vacancy savings to contract with private provider agencies.**
28. **Include a statement in the final report urging the DHHS to transfer the EIS compliance and monitoring function to a line of responsibility that is entirely separate from that of the EIS service delivery function. Agencies often struggle with objectively monitoring the quality of their services. For those programs with a high level of client satisfaction, the issue is not often apparent but, for those with a dissatisfied client base, there becomes a need for an objective third party to monitor a program. The EIS is funded to undertake compliance and monitoring**

functions. Since persons responsible for that function report to the same person responsible for overseeing the delivery of EIS services, there may be a potential conflict of interest. This conflict could influence the objectivity of performance evaluations and quality assurance monitors.

Transition services are an important component of the continuum of assistance for students entering adult life. Additional information is contained at <http://www.leg.state.nv.us/73rd/Interim/StatCom/Disabilities/exhibits/18711E.pdf> and in Appendix G. The SPAC recommended additional attention to this issues and the Committee voted to:

29. **Include a statement in the final report encouraging ITAB to continue its work and to make specific recommendations for system improvement as soon as possible. The ITAB was created by the 2005 Legislature to spearhead improvement in the transition of students from school to adult life. The group has met regularly during the past year, but has yet to make any recommendations for system improvement. A major barrier to moving forward has been a lack of data in pre- and post-transition systems. Nonetheless, the work of ITAB is vital, and it is encouraged to move forward in formulating actionable recommendations. While formulating their recommendations, the Committee encourages ITAB to study and review issues relating to:**
 - A. Data collection to facilitate a research-based pilot project to assist transition programs;**
 - B. Opportunities for public education and employment of people with disabilities in community settings;**
 - C. State personnel training for adult service providers, including understanding disabilities, disability awareness, empowerment, customer service, self determination, higher education counseling, job development, strategies specific to persons with disabilities, independent living, and job coaching skills;**
 - D. Common competencies that hold personnel in organizations accountable for ensuring youth are prepared for and participating in activities assisting them in achieving their post-school goals;**
 - E. An external review of the Bureau of Vocational Rehabilitation and the Rehabilitation Division, DETR, the findings of which will inform policy and decision makers at the federal and State levels of the policies and practices of identifying youth who are transitioning from school to work and the major obstacles in the current process;**

- F. The publication of information related to students with disabilities, including:**
- age,
 - ethnicity,
 - referral source,
 - services provided,
 - community-based assessment locations,
 - time in service, and
 - service outcomes in terms of competitive employment, completion of higher education, sheltered workshops, wages and benefits, self-employed, not working or reason for unsuccessful closure, and the number of total closures for transition-aged youth, their placement location and percentage of successful closures;
- G. Utilization of the data from the external review (E. and F.) to develop future standards based on needed services;**
- H. Compiling a single report from various appropriate agencies regarding the alignment of resources to meet the needs of youth and employers; and**
- I. Encouraging organizations to have shared data systems, or provisions for sharing data, while fully maintaining confidentiality.**

The Committee received a presentation from the Ability Center, a company that uses current technology and techniques to assist people who are disabled with their mobility needs. During their presentation, there was discussion regarding the contractual process for the purchase of assistive or mobility-related technology. Additionally, the Committee received testimony from various people stating that it takes many months to obtain mobility equipment. The Committee recognized the importance of this issue and voted to:

- 30. Include a statement in the final report encouraging the Bureau of Vocational Rehabilitation, Rehabilitation Division, DETR, to continue improving their services to people who are disabled and need mobility equipment.**

According to Robert Desruisseaux, Project Manager, ADRC, Aging Services Division, DHHS, the Division is expected to design a Resource Center Program that provides citizen-centered “one-stop” entry points into the long-term support system. The ADRC is consistent with a number of strategic planning objectives that Nevada has undergone in the last six years, such as the four objectives contained within the *State Strategic Plan for People with Disabilities*. The Committee endorsed this approach and voted to:

31. **Include a statement in the final report supporting the ADRC Program in the Aging Services Division, DHHS. In September of 2005, the State of Nevada was awarded a three-year federal grant in the amount of \$750,000 to establish a resource center program providing citizen-centered “one-stop” entry points for individuals who need long-term support.**

V. ACKNOWLEDGEMENTS

- Karla McComb, Chairwoman, Governor’s Council on Rehabilitation and Employment of People with Disabilities.

The Committee was saddened by the loss of Karla McComb and wishes to express its gratitude for her years of service on behalf of persons with disabilities.

- Constance E. Anderson, Chief of Continuum of Care, Division of Health Care Financing and Policy, DHHS
- Todd Butterworth, Social Services Chief III, ODS, DHHS
- Kris Christiansen, Assistant Superintendent of Special Education and Related Services, Washoe County School District
- Dr. Michael T. Coleman, Administrator, Rehabilitation Division, DETR
- Charles Duarte, Administrator, Division of Health Care Financing and Policy, DHHS
- Tina R. Gerber-Winn, Deputy Administrator, Aging Services Division, DHHS
- Debbie Hosselkus, Deputy Administrator, Division of Mental Health and Developmental Services, DHHS
- Don A. Jackson, PhD, Project Director, PBS-Nevada
- Kathy Jacobs, Executive Director, Crisis Call Center
- Terry Johnson, Deputy Director, DETR
- Mary Liveratti, Deputy Director, DHHS
- Dr. Dave Luke, Associate Administrator for Developmental Services, Division of Mental Health and Developmental Services, DHHS
- Sherry Manning, Project Director, ODS, DHHS
- Paul R. Martin, President, Nevadans for Equal Access

- Jacque Matteoni, Special Education Area Administrator, Special Education and Related Services, Washoe County School District
- Jack Mayes, Executive Director, NDALC
- Frankie McCabe, Director, Office of Special Education, Elementary and Secondary Education, and School Improvement Programs, NDE
- Cynthia McCray, Director, Low Incidence Disabilities Team, Clark County School District
- John Miller, Manager, Nevada 2-1-1
- Janelle Mulvenon, Bureau Chief, Bureau of Early Intervention Services, Health Division, DHHS
- Dr. Jane Nichols, Vice Chancellor, Academic and Student Affairs, NSHE
- Claudia L. Obertreis, Vice President, Ability Center
- Cindy Ortiz, Research Consultant, Nevada Blind Children's Foundation
- Brian Patchett, President/CEO, Easter Seals of Southern Nevada
- Santa Perez, Treasurer, People First of Nevada
- Dr. Mary Pierczynski, Superintendent, Carson City School District
- Martin A. Ramirez, Deputy Director, DETR
- Rebecca Richard-Maley, Statewide Clinical Program Planner, Division of Child and Family Services, DHHS
- Carol Sala, Administrator, Aging Services Division, DHHS
- Kevin Spilsbury, Founder, Nevada Blind Children's Foundation
- Gillian Wells, Nevada Advisory Board on Transition Services
- Michael J. Willden, Director, DHHS
- MEMBERS OF THE ADVISORY COMMITTEE:
 - Karen Taycher, Chair, Nevada Parents Encouraging Parents
 - Caroline Preston Bass, President, Nevada Registry of Interpreters for the Deaf; Lead Faculty-Interpreter Preparation Program, CCSN; Owner, Preston Bass Interpreting Services

- Dr. Michael T. Coleman, Administrator, Rehabilitation Division, DETR
 - Kelley DeRiemer, Carson City
 - Gloria Dopf, Deputy Superintendent for Instructional, Research and Evaluative Services, NDE
 - Danell Fanning, Carson City
 - Rhonda Feldman, Las Vegas
 - Cindy Frank, ASL Instructor, Western Nevada Community College
 - David Gordon, Academic Coordinator, Judicial Education Division, Administrative Office of the Courts
 - Betty Hammond, M.S.W., C.R.C., Social Services Specialist II, ODS, DHHS
 - Jacque Matteoni, Special Education Area Administrator, Special Education and Related Services, Washoe County School District
 - Jack Mayes, Executive Director, NDALC
 - Gary Olsen, Director/Advocate, Deaf and Hard of Hearing Advocacy Resource Center
 - Sally Ramm, Elder Rights Attorney, Aging Services Division, DHHS
 - Linda Raymond, Clark County Schools
 - Gayle Sherman, Rehabilitation Division, DETR
- **MEMBERS OF THE STRATEGIC PLAN ACCOUNTABILITY COMMITTEE:**
 - Constance E. Anderson, Chief of Continuum of Care, Division of Health Care Financing and Policy, DHHS
 - Reggie Bennett, Independent Living Program
 - Jeff Brenn, Social Services Chief III, Division of Welfare and Supportive Services, DHHS
 - Mary Bryant, Project Coordinator, Nevada University for Excellence in Developmental Disabilities (UCED)
 - Dr. Michael T. Coleman, Administrator, Rehabilitation Division, DETR
 - Jan Crandy, Founding Board Member, Families for Effective Autism Treatment (FEAT)

- Cheryl Dinnell, Family TIES of Nevada
- Lisa Erquiaga, Northern Nevada Center for Independent Living (NNCIL)
- Rorie Fitzpatrick, Special Education Consultant, NDE
- Tina Gerber-Winn, Deputy Administrator, Aging Services Division, DHHS
- Jane Gruner, Director, Sierra Regional Center
- Jane Imboden, Accessible Space, Inc.
- Barbara Jackson, Consumer Service Assistant/Director of Drop-In Center, Northern Nevada Mental Health
- Mary Liveratti, Deputy Director, DHHS
- Jack Mayes, Executive Director, NDALC
- Janelle Mulvenon, Bureau Chief, Bureau of Early Intervention Services, Health Division, DHHS
- Gary Olsen, Director/Advocate, Deaf and Hard of Hearing Advocacy Resource Center
- Jim Osti, Administrative Analyst, Community Health Division, Southern Nevada Health District
- Dr. Tom Pierce, Department of Special Education, University of Nevada Las Vegas
- Jon Sasser, Nevada Legal Services
- Bridget Speer, Social Services Program Specialist II, Division of Child and Family Services, DHHS
- Karen Taycher, Nevada Parents Encouraging Parents
- Richard Whitley, Deputy Administrator, Health Division, DHHS
- Veronica Wilson, Blind Center

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APPENDIX A

Nevada Revised Statutes 218.5379 through 218.53797

Nevada Revised Statutes 218.5379 Through 218.53797

NRS 218.5379 “Committee” defined. [Effective through June 30, 2007.] As used in [NRS 18.5379](#) to [218.53797](#), inclusive, “Committee” means the Legislative Committee on Persons With Disabilities.

(Added to NRS by [2003, 3071](#))

NRS 218.53791 Establishment; membership; Chairman; Vice Chairman; vacancies. [Effective through June 30, 2007.]

1. There is hereby established a Legislative Committee on Persons With Disabilities consisting of three members of the Senate and three members of the Assembly, appointed by the Legislative Commission. The members must be appointed with appropriate regard for their experience with and knowledge of matters relating to persons with disabilities.

2. The members of the Committee shall select a Chairman and a Vice Chairman from among their members. The Chairman must be elected from one house of the Legislature and the Vice Chairman from the other house. After the initial selection of a Chairman and a Vice Chairman, each of those officers holds office for a term of 2 years commencing on July 1 of each odd-numbered year. If a vacancy occurs in the chairmanship or vice chairmanship, the members of the Committee shall select a replacement for the remainder of the unexpired term.

3. Any member of the Committee who is not a candidate for reelection or who is defeated for reelection continues to serve until the next session of the Legislature convenes.

4. Vacancies on the Committee must be filled in the same manner as original appointments.

(Added to NRS by 2003, [3071](#))

NRS 218.53792 Meetings; regulations; quorum; compensation of members. [Effective through June 30, 2007.]

1. The members of the Committee shall meet throughout each year at the times and places specified by a call of the Chairman or a majority of the Committee.

2. The Director of the Legislative Counsel Bureau or his designee shall act as the nonvoting recording Secretary.

3. The Committee shall prescribe regulations for its own management and government.

4. Except as otherwise provided in subsection 5, four members of the Committee constitute a quorum, and a quorum may exercise all the powers conferred on the Committee.

5. Any recommended legislation proposed by the Committee must be approved by a majority of the members of the Senate and by a majority of the members of the Assembly appointed to the Committee.

6. Except during a regular or special session of the Legislature, the members of the Committee are entitled to receive the compensation provided for a majority of the members of the Legislature during the first 60 days of the preceding regular session, the per diem allowance provided for state officers and employees generally and the travel expenses provided pursuant to [NRS 218.2207](#) for each day or portion of a day of attendance at a meeting of the Committee and while engaged in the business of the Committee. The salaries and expenses paid pursuant to this subsection and the expenses of the Committee must be paid from the Legislative Fund.

(Added to NRS by [2003, 3072](#))

NRS 218.53793 Powers of Committee. [Effective through June 30, 2007.] The Committee may:

1. Study and comment on issues related to persons with disabilities in this State, including, without limitation:

- a) Programs for the provision of services to persons with disabilities in this State;
 - (b) Methods to enhance such programs and to ensure that persons with disabilities are receiving services in the most appropriate setting;
 - (c) Federal and state laws concerning persons with disabilities;
 - (d) The availability of useful information and data as needed for the State of Nevada to effectively make decisions, plan budgets and monitor costs and outcomes of services provided to persons with disabilities;
 - (e) Methods to increase the availability of such information and data;
 - (f) Compliance with federal requirements which affect persons with disabilities; and
 - (g) Any other matters that, in the determination of the Committee, affect persons with disabilities.
2. Conduct investigations and hold hearings in connection with its powers pursuant to this section.
3. Direct the Legislative Counsel Bureau to assist in the study of issues related to persons with disabilities in this State.
4. Recommend to the Legislature, as a result of its study, any appropriate legislation.
- (Added to NRS by [2003, 3072](#))

NRS 218.53794 Administration of oaths; deposition of witnesses; issuance and enforcement of subpoenas. [Effective through June 30, 2007.]

1. In conducting the investigations and hearings of the Committee:
- (a) The Secretary of the Committee or, in his absence, any member of the Committee may administer oaths.
 - (b) The Secretary or Chairman of the Committee may cause the deposition of witnesses, residing either within or outside of the State, to be taken in the manner prescribed by rule of court for taking depositions in civil actions in the district courts.
 - (c) The Chairman of the Committee may issue subpoenas to compel the attendance of witnesses and the production of books and papers.
2. If any witness refuses to attend or testify or produce any books and papers as required by the subpoena, the Chairman of the Committee may report to the district court by petition, setting forth that:
- (a) Due notice has been given of the time and place of attendance of the witness or the production of the books and papers;
 - (b) The witness has been subpoenaed by the Committee pursuant to this section; and
 - (c) The witness has failed or refused to attend or produce the books and papers required by the subpoena before the Committee which is named in the subpoena, or has refused to answer questions propounded to him, and asking for an order of the court compelling the witness to attend and testify or produce the books and papers before the Committee.
3. Upon such a petition, the court shall enter an order directing the witness to appear before the court at a time and place to be fixed by the court in its order, the time to be not more than 10 days after the date of the order, and to show cause why he has not attended or testified or produced the books or papers before the Committee. A certified copy of the order must be served upon the witness.
4. If it appears to the court that the subpoena was regularly issued by the Committee, the court shall enter an order that the witness appear before the Committee at the time and place fixed in the order and testify or produce the required books or papers. Failure to obey the order constitutes contempt of court.
- (Added to NRS by [2003, 3072](#))

NRS 218.53795 Fees and mileage for witnesses. [Effective through June 30, 2007.] Each witness who appears before the Committee by its order, except a state officer or employee, is entitled to receive for his attendance the fees and mileage provided for witnesses in civil cases in the courts of record of this State. The fees and mileage must be audited and paid upon the presentation of proper claims sworn to by the witness and approved by the Secretary and Chairman of the Committee.

(Added to NRS by [2003, 3073](#))

NRS 218.53796 Establishment of advisory committee; membership; compensation. [Effective through June 30, 2007.]

1. There is hereby established an advisory committee to the Committee consisting of:
 - (a) The Superintendent of Public Instruction;
 - (b) The Administrator of the Aging Services Division of the Department of Health and Human Services;
 - (c) An officer or employee of the Bureau of Vocational Rehabilitation of the Rehabilitation Division of the Department of Employment, Training and Rehabilitation, appointed by the Administrator of that Division;
 - (d) An officer or employee of the Bureau of Services to the Blind and Visually Impaired of the Rehabilitation Division of the Department of Employment, Training and Rehabilitation, appointed by the Administrator of that Division; and
 - (e) Any persons appointed by the Chairman of the Committee pursuant to subsection 2.
2. The Chairman of the Committee shall appoint representatives from local advocacy and provider groups to serve on the advisory committee, as the Chairman deems necessary.
3. A member of the advisory committee described in paragraph (a) or (b) of subsection 1 may designate a representative to serve in his place on the advisory committee or to replace him at a meeting of the Committee or the advisory committee. The Administrator of the Rehabilitation Division of the Department of Employment, Training and Rehabilitation may designate a representative to serve in the place of a member of the advisory committee described in paragraph (c) or (d) of subsection 1 or to replace such a member at a meeting of the Committee or the advisory committee.
4. Each member of the advisory committee who is not an officer or employee of the State serves without compensation and is not entitled to receive a per diem allowance or travel expenses.
5. Each member of the advisory committee who is an officer or employee of the State must be relieved from his duties without loss of his regular compensation so that he may attend meetings of the Committee or the advisory committee and is entitled to receive the per diem allowance and travel expenses provided for state officers and employees generally, which must be paid by the state agency that employs him.

(Added to NRS by 2003, 3073; A 2005, 111)

NRS 218.53797 Reports required to be submitted to Committee by Department of Health and Human Services. [Effective through June 30, 2007.] On or before July 1 of each even-numbered year or October 1 of each odd-numbered year, the Department of Health and Human Services shall submit a report to the Committee. The report must include, without limitation, information relating to:

1. The expansion of the program established pursuant to [NRS 422.2715](#);
2. The progress made by the Department toward the goal of equitably providing, by January 1, 2008, comprehensive health care coverage to each person with a disability who by virtue of becoming employed has established an income that is above the federally designated level signifying poverty and who is unable to obtain the health insurance coverage he needs from a source other than a program of public assistance; and

3. The impact of assessments made of persons with disabilities pursuant to the comprehensive long-term Strategic Plan for Persons with Disabilities prepared by the Task Force on Disability to determine if they are living in an unnecessarily restrictive residential environment, including, without limitation, any savings in costs that resulted from those assessments.

(Added to NRS by [2003, 3074](#))

APPENDIX B

Senate Bill 134 (Chapter 271, *Statutes of Nevada 2005*)

CHAPTER 271

AN ACT relating to interpreters; requiring providers of Communication Access Realtime Translation to meet certain qualifications; prohibiting certain acts relating to such providers; providing a penalty; extending the effective date for the application of penalties to certain persons who engage in the practice of interpreting in public schools and private schools; requiring the Legislative Committee on Persons with Disabilities to study certain issues related to the provision of communication services for pupils who are deaf or hearing impaired and for all residents of this State who are deaf or hearing impaired; requiring the boards of trustees of school districts to review certain information related to the salaries of persons who provide interpreting services in public schools; and providing other matters properly relating thereto.

[Approved: June 6, 2005]

THE PEOPLE OF THE STATE OF NEVADA, REPRESENTED IN
SENATE AND ASSEMBLY, DO ENACT AS FOLLOWS:

Section 1. Chapter 656A of NRS is hereby amended by adding thereto the provisions set forth as sections 2 to 5, inclusive, of this act.

Sec. 2. *“Communication Access Realtime Translation” and “realtime captioning” mean the immediate, verbatim translation of the spoken word into English text using a stenographic machine or voice recognition software, and a computer and realtime captioning software.*

Sec. 3. *“Practice of realtime captioning” means the facilitation of communication between persons who are deaf or whose hearing is impaired and other persons through the use of Communication Access Realtime Translation.*

Sec. 4. *“Realtime captioning provider” means a person who is qualified to engage in the practice of realtime captioning in this State pursuant to section 5 of this act.*

Sec. 5. *A person who wishes to engage in the practice of realtime captioning in this State must:*

- 1. Be at least 18 years of age;*
- 2. Have at least a high school diploma or a general equivalency diploma;*
- 3. Be capable of providing the type of realtime captioning services required for persons who are deaf or whose hearing is impaired; and*
- 4. Have:*
 - (a) Been certified as a court reporter by the Certified Court Reporters’ Board of Nevada pursuant to chapter 656 of NRS; or*
 - (b) Been issued at least one of the following certifications by the National Court Reporters Association or its successor organization:*
 - (1) Registered Professional Reporter;*

- (2) Certified Communication Access Realtime Translation Provider;*
- (3) Certified Broadcast Captioner; or*
- (4) Certified Realtime Reporter.*

Sec. 6. NRS 656A.010 is hereby amended to read as follows:

656A.010 The practice of interpreting ~~[is]~~ *and the practice of realtime captioning are* hereby declared to be ~~[a learned profession,]~~ *learned professions*, affecting public health, safety and welfare, and ~~[is]~~ *are* subject to regulation to protect the general public from the practice of interpreting *and the practice of realtime captioning* by unqualified persons.

Sec. 7. NRS 656A.020 is hereby amended to read as follows:

656A.020 As used in this chapter, unless the context otherwise requires, the words and terms defined in NRS 656A.030 to 656A.060, inclusive, *and sections 2, 3 and 4 of this act* have the meanings ascribed to them in those sections.

Sec. 8. NRS 656A.070 is hereby amended to read as follows:

656A.070 The provisions of this chapter do not apply to a person who:

1. Is licensed in another state to engage in the practice of interpreting *or the practice of realtime captioning* and who engages in the practice of interpreting *or the practice of realtime captioning, respectively*, in this State:

(a) For a period of not more than 30 nonconsecutive days in a calendar year; or

(b) By teleconference if the interpreting services *or realtime captioning services* provided by that person are necessary because an interpreter *or realtime captioning provider* is unavailable to provide those services in person or by teleconference;

2. Engages in the practice of interpreting *or the practice of realtime captioning* solely for meetings of nonprofit civic or religious organizations;

3. Engages in the practice of interpreting *or the practice of realtime captioning* as necessary for the provision of an emergency medical or governmental service to a person who is deaf or whose hearing is impaired; or

4. Engages occasionally in the practice of interpreting in a social situation that does not require a qualified interpreter pursuant to the provisions of the Americans with Disabilities Act of 1990, 42 U.S.C. §§ 12101 et seq., section 504 of the Rehabilitation Act of 1973, 29 U.S.C. § 794, or the regulations adopted pursuant to those provisions.

Sec. 9. NRS 656A.800 is hereby amended to read as follows:

656A.800 1. It is unlawful for a person to:

(a) Engage in the practice of interpreting in this State;

(b) Hold himself out as certified or qualified to engage in the practice of interpreting in this State; or

(c) Use in connection with his name any title, words, letters or other designation intended to imply or designate that he is an interpreter, without first complying with the requirements set forth in NRS 656A.100.

2. *It is unlawful for a person to:*

(a) *Engage in the practice of realtime captioning in this State;*

(b) *Hold himself out as certified or qualified to engage in the practice of realtime captioning in this State; or*

*(c) Use in connection with his name any title, words, letters or other designation intended to imply or designate that he is a realtime captioning provider,
Ê without first complying with the requirements set forth in section 5 of this act.*

3. A person who violates the provisions of subsection 1 ~~[-]~~ or 2:

(a) Is guilty of a misdemeanor; and

(b) May be assessed a civil penalty of not more than \$5,000.

~~[3-]~~ 4. An action for the enforcement of a civil penalty assessed pursuant to this section may be brought in any court of competent jurisdiction by the district attorney of the appropriate county or the Attorney General.

Sec. 10. If a person engages in the practice of interpreting pursuant to subsection 4 of NRS 656A.100 on or before the effective date of this section:

1. Any applicable 3-year limitation prescribed in subsection 4 of NRS 656A.100 that would have expired before July 1, 2007, is extended for that person until July 1, 2007; and

2. The provisions of NRS 656A.800, as amended by this act, do not apply to that person until July 1, 2007,

Ê if the person makes satisfactory and deliberate progress, as determined by the school district, charter school or private school that employs the person, toward complying with the requirements of paragraph (a) or (b) of subsection 3 of NRS 656A.100 during the period of his employment.

Sec. 11. 1. The Legislative Committee on Persons with Disabilities shall, during the 2005-2007 interim, conduct a study to determine:

(a) The manner by which school districts can adequately and successfully meet the needs of pupils who are deaf and pupils who are hearing impaired, including, without limitation, ensuring that persons who provide interpreting services to those pupils are certified pursuant to NRS 656A.100;

(b) The manner by which community service agencies in this State can adequately and successfully meet the needs of the residents of this State who are deaf and the residents who are hearing impaired, including, without limitation, the provision of accessible communications;

(c) The feasibility of developing alternative methods of pooling resources among various agencies to better serve the needs of the deaf and hearing impaired community; and

(d) Methods by which this State and the local governments of this State can meet the growing demand for trained and certified interpreters and communication facilitators who facilitate accessible communications.

2. In conducting the study pursuant to subsection 1, the Legislative Committee on Persons with Disabilities shall work in consultation with and solicit advice and recommendations from the Department of Human Resources, the Office of Disability Services of the Department of Human Resources and the Deaf and Hard of Hearing Advocacy Resource Center.

3. The Legislative Committee on Persons with Disabilities shall submit a report of the results of the study and any recommendations for legislation to the Director of the Legislative Counsel Bureau for transmission to the 74th Session of the Nevada Legislature.

Sec. 12. The boards of trustees of the school districts in this State shall review the salaries paid to persons who provide interpreting services for pupils who are deaf and pupils who are

hearing impaired, including, without limitation, a comparison of whether those salaries are commensurate with the salaries that are paid to similarly qualified persons employed by school districts in this State as well as salaries that are paid to persons in other states who provide interpreting services to pupils.

Sec. 13. 1. This section and section 10 of this act become effective upon passage and approval.

2. Sections 11 and 12 of this act become effective on July 1, 2005.

3. Sections 1 to 9, inclusive, of this act become effective on October 1, 2005.

APPENDIX C

Members of the Legislative Committee on Persons With Disabilities Advisory Committee

**MEMBERS OF THE LEGISLATIVE COMMITTEE ON PERSONS
WITH DISABILITIES ADVISORY COMMITTEE**

- Caroline Preston Bass, President, Nevada Registry of Interpreters for the Deaf; Lead Faculty-Interpreter Preparation Program, CCSN; Owner, Preston Bass Interpreting Services
- Dr. Michael T. Coleman, Administrator, Rehabilitation Division, DETR
- Kelly DeRiemer, Carson City
- Gloria Dopf, Deputy Superintendent for Instructional, Research and Evaluative Services, NDE
- Danell Fanning, Carson City
- Rhonda Feldman, Las Vegas
- Cindy Frank, ASL Instructor, Western Nevada Community College
- David Gordon, Academic Coordinator, Judicial Education Division, Administrative Office of the Courts
- Betty Hammond, M.S.W., C.R.C., Social Services Specialist II, ODS, DHHS
- Jacque Matteoni, Special Education Area Administrator, Special Education and Related Services, Washoe County School District
- Jack Mayes, Executive Director, NDALC
- Gary Olsen, Director/Advocate, Deaf and Hard of Hearing Advocacy Resource Center
- Sally Ramm, Elder Rights Attorney, Aging Services Division, DHHS
- Linda Raymond, Clark County Schools
- Gayle Sherman, Rehabilitation Division, DETR
- Karen Taycher, Nevada Parents Encouraging Parents

APPENDIX D

Executive Order for the Strategic Plan Accountability Committee



STATE OF NEVADA
OFFICE OF THE GOVERNOR
EXECUTIVE ORDER

Whereas, the State of Nevada is committed to ensuring services are available throughout Nevada for persons with disabilities in the most integrated setting appropriate, to include equally residents with disabilities of all ages and incomes into the mainstream of Nevada society; and

Whereas, this state has adopted a comprehensive, long-term Strategic Plan for People with Disabilities, which was developed with statewide input from people with disabilities, their families, advocates, and service providers; and

Whereas, the Strategic Plan will ensure that the state complies with the Americans with Disabilities Act (ADA), including the proscription of discrimination by segregation set forth by the United States Supreme Court in *Olmstead v. L. C. ex rel. Zimring*; and

Whereas, the Strategic Plan identified goals and outlined strategies to carry out the goals and recommendations over the next decade; and

Whereas, the state recognizes that the implementation of the Strategic Plan needs to be monitored and may need to be reviewed and revised as necessary to comply with the ADA and to ensure that services are truly available to people with disabilities.

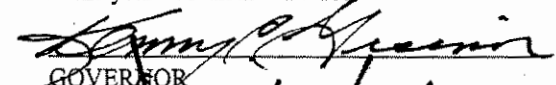
Therefore, I, Kenny C. Guinn, by virtue of the power and authority vested in me by the Constitution and the laws of the State of Nevada, do hereby issue this Order.

1. The Director of the Department of Human Resources shall establish the Strategic Plan for People with Disabilities accountability committee. The Committee will oversee the implementation of the Plan and will review and revise the Plan, as necessary.
2. Committee members will be individuals with disabilities or be knowledgeable of services for people with disabilities.
3. The committee will submit an annual report on progress made toward implementing the Plan and recommend changes to the plan by July 1st of each year to the Director of the Department of Human Resources.
4. All state agencies will be guided by the principles and core values established in the Strategic Plan for People with Disabilities for service delivery and policy development.

5. All state programs, boards, commissions and decision making bodies whose actions substantially impact the lives of children and adults with disabilities will include the participation of informed persons with disabilities and their families in the decision making process.



IN WITNESS WHEREOF, I have hereunto set my hand and caused the Great Seal of the State of Nevada to be affixed at the State Capitol in Carson City this 18th day of November, in the year two thousand three.


GOVERNOR


SECRETARY OF STATE


DEPUTY SECRETARY OF STATE

APPENDIX E

Strategic Plan Accountability Committee Members

STRATEGIC PLAN ACCOUNTABILITY MEMBERS

- Constance E. Anderson, Chief of Continuum of Care, Division of Health Care Financing and Policy, DHHS
- Reggie Bennett, Independent Living Program
- Jeff Brenn, Social Services Chief III, Division of Welfare and Supportive Services, DHHS
- Mary Bryant, Project Coordinator, Nevada University for Excellence in Developmental Disabilities (UCED)
- Dr. Michael T. Coleman, Administrator, Rehabilitation Division, DETR
- Jan Crandy, Founding Board Member, Families for Effective Autism Treatment (FEAT)
- Cheryl Dinnell, Family TIES of Nevada
- Lisa Erquiaga, Northern Nevada Center for Independent Living (NNCIL)
- Rorie Fitzpatrick, Special Education Consultant, NDE
- Tina Gerber-Winn, Deputy Administrator, Aging Services Division, DHHS
- Jane Gruner, Director, Sierra Regional Center
- Jane Imboden, Accessible Space, Inc.
- Barbara Jackson, Consumer Service Assistant/Director of Drop-In Center, Northern Nevada Mental Health
- Mary Liveratti, Deputy Director, DHHS
- Jack Mayes, Executive Director, NDALC
- Janelle Mulvenon, Bureau Chief, Bureau of Early Intervention Services, Health Division, DHHS
- Gary Olsen, Director/Advocate, Deaf and Hard of Hearing Advocacy Resource Center
- Jim Osti, Administrative Analyst, Community Health Division, Southern Nevada Health District
- Dr. Tom Pierce, Department of Special Education, University of Nevada Las Vegas
- Jon Sasser, Nevada Legal Services

- Bridget Speer, Social Services Program Specialist II, Division of Child and Family Services, DHHS
- Karen Taycher, Nevada Parents Encouraging Parents
- Richard Whitley, Deputy Administrator, Health Division, DHHS
- Veronica Wilson, Blind Center

APPENDIX F

Department of Health and Human Services 2006 Annual Report per NRS 218.53797
to the Legislative Committee on Persons With Disabilities

Department of Health and Human Services
2006 Annual Report per NRS 218.53797 to the
Legislative Committee on Persons with Disabilities

NRS 218.53797 requires the Department of Human Resources, currently named the Department of Health and Human Services, to report on progress made on the following items:

- 1. The expansion of the program established pursuant to NRS 422.2715; and***
- 2. The progress made by the Department toward the goal of equitably providing, by January 1, 2008, comprehensive health care coverage to each person with a disability who by virtue of becoming employed has established an income that is above the federally designated level signifying poverty and who is unable to obtain the health insurance coverage he needs from a source other than a program of public assistance;***

NRS 422.2715 authorized the Director, through the Division of Health Care Financing and Policy (DHCFP), to establish a program for the provision of medical assistance to certain persons who are employed and have disabilities. It also authorized the Director to be able to require a person participating in the established program to pay a premium or other cost-sharing charges in a manner consistent with federal law.

In 2000, the State of Nevada applied for a Medicaid Infrastructure Grant (MIG) from the Department of Health and Human Services, Health Care Financing Administration (now known as the Centers for Medicare and Medicaid Services [CMS]). The primary purpose of this grant was to evaluate and, if feasible, develop a Medicaid Buy-In program that would allow individuals who are employed and have disabilities the ability to pay a premium to buy-in to the state's Medicaid program. In 2000 and in each subsequent year, the state has continued to receive Medicaid Infrastructure Grant funding for this purpose. The original grant expired on December 31, 2004; however, a new grant was received beginning January 1, 2005 with annual renewal options until December 31, 2007. The 2007 grant was recently awarded by CMS. This most recent continuation grant represents an extension and enhancement of the programs and activities implemented in calendar years 2000 through 2006.

The Medicaid Buy-In program is named Health Insurance for Work Advancement (HIWA), as this program provides Medicaid benefits to employed individuals with disabilities. Eligibility and enrollment for HIWA are carried out by the Division of Welfare and Supportive Services (DWSS).

The following are recent program accomplishments:

- HIWA staff has completed numerous statewide outreach and training opportunities. HIWA information was disseminated at several conferences and

disability events in Reno, Las Vegas, and rural communities to educate social service professionals, medical providers, social workers and consumers.

- Staff provided training to a variety of entities, including Renown Regional Medical Center (formerly Washoe Medical Center), Reno-Sparks Indian Colony, State Health Insurance Assistance Program (Division for Aging Services), Department of Employment and Training Rehabilitation Division, Division of Welfare and Supportive Services.
- Staff developed and distributed information material to Nevada's Medicaid Buy-in participants who are eligible for Medicare relating to the transition of prescription drug coverage from Medicaid to Medicare Part D.
- A Public Service Announcement was developed in English and Spanish advising Nevada's dual eligibles of the refund process for co-pays and prescriptions paid in error as a result of Medicare Part D implementation.
- The Medicaid Infrastructure Grant Advisory Group met regularly and provided input to HIWA program staff. In 2006, a facilitator was hired to provide guidance with planning sessions, the HIWA Advisory Group meetings, and workgroup activities. The HIWA Group developed five workgroups: Bylaws, Recruitment, Outreach, Strategic Planning and Legislative. The primary purposes of the workgroups are to focus on increasing enrollment in the HIWA program and identify barriers and develop strategies to expand employment opportunities for individuals with disabilities in Nevada.
- Current program enrollment is 20 individuals, with two conditional HIWA participants. Each participant pays a monthly premium amount based on income. The current average premium is \$35.34 per month.
- Staff and the Advisory Group facilitator attended a Technical Assistance on-site visit from Center for Workers with Disabilities, which is affiliated with the American Public Human Services Association. Topics of discussion were increasing enrollment, strategic planning, working with conservative legislators to increase unearned income limits, outreach and collaborating with sister agencies. Staff also attended 11 monthly technical assistance business calls.

The primary challenge for HIWA is to increase program enrollment. The major barrier for people with disabilities to enroll in HIWA is the low unearned income limit – currently \$699 per month, or \$8,388 annually. This maximum unearned income limit is only \$96.00 per month higher than the 2006 SSI payment level of \$603 per month. This small difference between Nevada's SSI eligibility limit for Medicaid and the HIWA program's maximum unearned income limit affords very few disabled individuals in receipt of SSDI the opportunity to become eligible for Medicaid through the HIWA program.

The HIWA Advisory Group supports a program initiative to request elimination of the unearned income limit, which will allow potentially greater enrollment and permit Nevadans with disabilities to work and retain Medicaid benefits.

3. The impact of assessments made of persons with disabilities pursuant to the comprehensive long-term Strategic Plan for Persons with Disabilities prepared by the Task Force on Disability to determine if they are living in an unnecessarily restrictive residential environment, including, without limitation, any savings in costs that resulted from those assessments.

The Strategic Plan for Persons with Disabilities identified the need for setting neutral assessments to assist persons to transition from nursing homes back to their own homes or to more integrated community settings. The Department of Health and Human Services completed a pilot project in Medicaid to facilitate moving persons with disabilities to less restrictive settings. This project was implemented statewide for Medicaid recipients and is named Facility Outreach and Community Integration Services (FOCIS).

The FOCIS program uses the following methods to identify and locate Medicaid eligible recipients residing in Nursing Facilities who may be interested in discharge to a less restrictive setting:

- Outreach to all nursing facilities, acute rehabilitation facilities, and general hospitals;
- Presentations to Medicaid providers, governmental and community agencies, and local organizations of FOCIS services;
- Distribution of information about FOCIS, including brochures and referral forms;
- Face-to-face interviews with residents in facilities; and
- Review of information from the CMS Minimum Data Set (MDS), which is the Medicare tool used to determine care needs and payment rates for nursing facility residents.

FOCIS staff make contact with each long-term care facility on a quarterly basis to obtain referrals, educate staff and provide support/direction to facility discharge planners. Each acute hospital, rehabilitation hospital, facility resident's council and regional center is contacted bi-annually to discuss FOCIS services and inquire of possible referrals. FOCIS referrals are also generated from MDS data, word of mouth and facility staff.

FOCIS staff complete comprehensive assessments to identify strengths and barriers to discharge as well as goal planning to overcome barriers and build upon strengths. Staff provide education to recipients, their support system and facility staff on obtaining community and Medicaid covered services. Staff provide information and linkage to available resources and makes referrals to public and private agencies, including but not limited to: Home and Community Based Waivers, housing, utilities, transportation, Medicare, PCA services, counseling/support groups, and adult day care. Recipients are followed for the first 90 days after discharge; staff follow the recipients in the community setting to enable a successful integration, which is determined individually based on stated need. The setting neutral assessment currently being utilized includes the

recommended assessment areas noted in the Strategic Health Plan for People with Disabilities.

The DHCFP Reno District Office staff received 291 referrals during calendar year 2006 and 32 were transitioned to a community setting. The staff continue to work with many of the referrals provided during the year. The Las Vegas District Office received 563 referrals during calendar year 2006 and 75 recipients were transitioned out of institutions into community settings. Staff continue to work with many of the referrals provided during the year.

The cost savings to Medicaid were recently analyzed by reviewing and comparing the nursing home costs to the community costs for a random sampling of 20% of the 69 individuals transitioned by the FOCIS program in Las Vegas during calendar year 2005. The results showed the average monthly cost while in a nursing home was \$4,523.82, while the average community costs were only \$850.75. Although the community costs did not include the cost of pharmacy benefits, on average each individual that was assisted through FOCIS saved Medicaid \$3,673.07 per month.

To expand outreach in contacting the greatest number of recipients potentially eligible for the program, First Health Services Corporation, the contractor completing level of care assessments on all Medicaid recipients entering nursing facilities, provides a weekly report to the FOCIS program. The report allows staff to more quickly contact recipients to ensure those who can return to a community setting are able to do so at the earliest possible date.

A pilot program was begun with Renown Regional Medical Center (formerly Washoe Medical Center) and Washoe County Social Services to continue to develop a process so any patients being discharged to a nursing facility are interviewed and educated about options other than nursing home placement.

The Northern Nevada Center for Independent Living collaborated with the FOCIS programs statewide to assist individuals residing in institutions to return to a less restrictive environment in a community setting. The Money Follows the Person grant provided community transition funding. The state Office of Disability Services' Independent Living program agreed to continue support for individuals wishing to transition, beyond the completion of the Money Follows the Person grant.

Beginning July 1, 2006, FOCIS in Southern Nevada collaborated with the Southern Nevada Center for Independent Living to access funds through the Children's Trust Fund, Fund for a Healthy Nevada (Tobacco Settlement funds) and Title XX. The purpose of the grant is to assist Medicaid recipients' transition to independent living by providing funding to persons transitioning from long term care.

The program plans to improve tracking outcomes for both diversion and transition of recipients.

Senate Bill 137, Section 9 requires the Department of Human Resources to examine the feasibility of amending the State Plan for Medicaid to authorize money to be paid as Medicaid benefits to cover the costs of community-based services for a person if:

(a) The person is assessed and determined to be living in an unnecessarily restrictive residential environment;

(b) The person relocates from a facility for skilled nursing or a facility for intermediate care to a community-based setting; and

(c) Money paid as Medicaid benefits was used to cover the costs of the care of that person while the person resided in the facility for skilled nursing or the facility for intermediate care.

Since the last report to the Legislative Committee on Persons with Disabilities was presented, DHCFP staff, Office of Disability Services (ODS), Northern Nevada Center for Independent Living (NNCIL), Human Services Research Institute and community members have met to discuss the proposed Money Follows the Person Rebalancing Initiative Grant. Nevada, through ODS, was awarded this three year grant, which ended in September 2006. NNCIL was hired as the contractor to carry out many of the grant activities.

Issues being researched and discussed include:

- The need to review other States' "money follows the person" policies; this is to be done by a contractor under the grant.
- Discrepancies between county and state funding for long term care. Currently, counties provide the match for certain residents in nursing facilities. It is unknown if all counties will agree to have their money follow the person and use county monies for the person outside the institution. Washoe County has indicated that all beds are full and there is a wait list. If they transition someone out of an institution, another person will take their place and in effect cost the county more. This issue needs to be further explored with counties.
- There needs to be a protocol for "in-reach", broader use of the setting neutral assessment, Medicaid FOCIS, community integration and systems for non-Medicaid recipients. The use of MMIS to identify costs and services needs to be further developed.
- Community discharge location and housing are major issues. ODS has hired a housing specialist to help expand housing opportunities for people with disabilities. ODS has also developed an online registry of affordable, accessible housing in Nevada, which will connect owners of such properties with individuals who need them.
- The contractor is to conduct research and propose a design for self-directed services.
- ODS is to develop a design for follow up evaluation of persons that are deinstitutionalized.
- The contractor is to develop consumer and family education.

The Office of Disability Services (ODS) clarified in their regulations that basic Personal Assistance Services are available to persons with Traumatic Brain Injury. These inexpensive but vital services will enable people with mild to moderate brain injury to avoid institutional placement and to live independently or with the assistance of family and friends. As mentioned elsewhere in this report, ODS agreed to provide some of the practical supports needed by people as they transition from a nursing facility to a community setting. These services will be provided in direct partnership with Medicaid, as well as to individuals who do not qualify for Medicaid.

The advocacy community would like to see funding appropriated to expand the Medicaid Home and Community Based Services Waiver for People with Physical Disabilities to add additional waiver slots and two additional services that would facilitate home and community based care for individuals with an acquired brain injury. This expansion was requested during the 2005 session but not funded.

APPENDIX G

Nevada's *Strategic Plan for People with Disabilities*
Annual Report
July 2006

Nevada's Strategic Plan for People with Disabilities

Annual Report

July 2006

Introduction

This is our committee's third annual report. We have been honored to act as stewards for Nevada's Strategic Plan for People with Disabilities, and thank Governor Guinn for the opportunity. We are also very appreciative of the support received from the Nevada Legislature, particularly the Legislative Committee on Persons with Disabilities, chaired by Senator Barbara Cegavske. As you will see in this report, many individuals have contributed substantively to the implementation of our Strategic Plan; it truly has been a community effort.

The Strategic Plan Accountability Committee (SPAC) was created by executive order in 2003 to hold the State accountable for the implementation of the Strategic Plan, in response to the mandates of the US Supreme Court's Olmstead Decision. We have been a very active and engaged body and have worked hard to balance our accountability role with our desire to work cooperatively with all the State and community agencies involved. The SPAC is made up of thirteen members from a diverse background of disability interests. The group meets on an as-needed basis, typically about five times per year. The SPAC is staffed by the Office of Disability Services, and most meetings are attended by representatives from the Division of Health Care Financing and Policy (Nevada Medicaid), Aging Services, Welfare, Vocational Rehabilitation, Child and Family Services, Mental Health and Developmental Services, Early Intervention and others.

Year-Three Activities

A pattern has developed, whereby the SPAC spends one year planning the Olmstead implementation process, and the next year pursuing implementation. Last year, this report primarily outlined the legislative and budgetary outcomes of the recommendations we made in 2004. This year's report will focus on several recommended actions for the Executive and Legislative branches to consider.

Since our last report, we have held six public meetings and accepted testimony on a variety of topics including Autism, Traumatic Brain Injury, Early Intervention Services, Positive Behavior Supports, Money Follows the Person, Assistive Technology, Deaf and hearing impairment issues, housing and others. Our recommendations below provide a summary of the conclusions we have drawn from that testimony and our deliberations. Minutes of our meetings are available by e-mailing Diane Randall at drandall@dhhs.nv.gov

This year, our committee elected a new chairman. Former chair, Robert Desruisseaux, was offered a position with the Division for Aging Services to develop aging and disability resource centers in Nevada. In accepting the position, it became a conflict of interest for Mr. Desruisseaux to continue as SPAC Chair. While his leadership will be missed, the

chairmanship has been very ably filled by Jack Mayes of the Nevada Disability Advocacy and Law Center. New members to the committee this year include Reggie Bennett, Executive Director of the R.A.G.E. Independent Living Program, Veronica Wilson, Executive Director of the Blind Center, and Lisa Erquiaga, Executive Director of the Northern Nevada Center for Independent Living.

Organizationally, we decided this year to assign our major issues to teams of two or three people, each of which includes a member of the SPAC and a representative from a relevant State agency. This approach was very successful in gaining buy-in from stakeholders, and in publicly demonstrating that the implementation of Nevada's Olmstead Plan is a joint effort between the State and the community. These teams presented several significant issues to the interim Legislative Committee on Persons with Disabilities.

We also continued to take a critical look at the Strategic Plan. Some of the plan's objectives have become obsolete and others have needed updating to reflect the current environment. This year, we also added several objectives related to services for Deaf Nevadans.

On this note, the Legislative Committee on Persons with Disabilities appointed an advisory committee to examine several issues related to recruiting qualified Deaf education teachers, providing qualified interpreters in medical, educational and legal settings, and strengthening interpreter training programs in Nevada. The SPAC has reviewed these recommendations and gives them its full endorsement.

This year, Nevada also presented an Olmstead Conference. The event was jointly organized and funded by the Bureau of Family Health Services, the Office of Disability Services, and the Northern Nevada Center for Independent Living; an Olmstead consultant provided technical assistance. Two separate, one-day conferences were held in Las Vegas and Reno. Participants included individuals who serve people with disabilities, such as discharge planners, social workers, public and private agency management, and personal care workers; there were over 200 attendees. National and local experts presented information and strategies on a variety of topics, and made a call to action that everyone prioritize serving people with disabilities in the "most integrated setting appropriate."

Year-Four Recommendations

The SPAC has closely coordinated its work with the interim Legislative Committee on Persons with Disabilities, chaired by Senator Barbara Cegavske. Members of the SPAC attended all of the legislative committee's meetings and provided extensive testimony in support of the legislative committee's deliberations. The SPAC has testified on most of the following recommendations and respectfully asks that the departments, the governor and the legislature give every consideration to supporting these measures. In addition to these specific recommendations, we have continuing concerns related to the general areas of mental health services (especially for children), early intervention services, and respite. Perhaps the most universal barrier we have encountered is a lack of data on the performance of various programs and the needs of many disability constituencies. We strongly encourage

policymakers to consider the value of quality data in directing their decisions and to include a data collection component in all initiatives.

We have broken our recommendations down into three types—recommended resolutions, bills and budget initiatives—and have prioritized them according to their urgency. Of course, the mere inclusion of an item on these lists indicates a level of urgency.

RECOMMENDED RESOLUTIONS

#1 Provide Medicaid with the budget flexibility needed to shift payments between institutional and community-based settings, based upon the care choices made by service recipients.

Issue Summary:

This issue is a cornerstone to the US Supreme Court’s Olmstead decision. The State of Texas was able to move thousands of citizens out of nursing homes simply by enabling Medicaid dollars to be flexibly spent on either institutional or community-based services. While Nevada does not have the high levels of institutionalization that Texas had, our citizens and our State budget will still benefit from greater use of community-based options through a more sensible budget structure.

Objective 17 of the Strategic Plan suggests the State should *“develop a rider to Medicaid budgets based on the Texas model. Modify existing policy to allow a ‘money follows the person’ pilot for children and adults assessed to be in unnecessarily restrictive residential environments.”* Furthermore, Objective 31 asks that we *“assure that funding is flexible and services and supports meet the individual needs of the child and family.”*

Leadership of the Department of Health and Human Services supports the idea of removing the institutional bias in Medicaid service funding. However, they note that a lack of available case management staff could still pose a barrier to offering services to more people through Medicaid Waivers. The SPAC believes that implementing this recommendation will give the State its strongest evidence to-date that Nevada is in the process of complying with the Olmstead Decision. We request that the Legislative Committee on Persons with Disabilities encourage DHHS, the Executive Budget Office and the Legislative Council Bureau to embrace this budget structure.

Relevant SPAC Objective(s): 16, 17, 31

SPAC Contact: Jon Sasser

Agency Contact: Connie Anderson

#2. Transition at least 20% of the Early Interventions Services caseload to community-based service agencies.

Issue Summary:

Since its consolidation, Nevada's Bureau of Early Intervention Services (BEIS) has struggled to provide timely and quality services to young children with disabilities. This is especially worrisome because the window of opportunity to get young children with disabilities on the right course is very small. And, those who are not properly served during the early intervention years enter our school system well behind their peers, and wind up being more costly and difficult to educate. Nevada is one of only two states that provides EIS through a state agency and clearly this model is not effective. However, we do not know for certain that providing services through private agencies will improve outcomes.

Objective 20 of the Strategic plan calls for EIS to "assure all children (age 0-2) referred for early intervention services receive, a multidisciplinary child evaluation and family needs assessment, and an individualized family service plan (IFSP) and have their plans completed within 45 days to comply with federal law. This can be realized by expanding the number of providers certified to perform these evaluations."

For the purpose of gathering data on the efficacy of service privatization, and to assist EIS in adequately staffing the needs of its constituents, we encourage a resolution from the Legislative Committee on Persons with Disabilities urging the Department of Health and Human Services to transition 20% of the EIS caseload to private agencies and to have an independent evaluator gather data on the effectiveness of all EI services provided.

Relevant SPAC Objective(s): 20, 33, 63, 88

SPAC Contact: Karen Taycher

Agency Contact: Janelle Mulvenon

#3. Use Early Interventions Services' vacancy savings to contract with private provider agencies.

Issue Summary:

In FY06, EIS had several unfilled staff vacancies that made it difficult to fully serve their client base. In an effort to remedy the problem, EIS proposed a work program to use their vacancy savings to contract with private provider agencies. The SPAC supports this strategy and asks the Legislative Committee on Persons with Disabilities to urge the Department of Health and Human Services to continue this practice until at least 20% of the EIS caseload is being privately served.

Relevant SPAC Objective(s): 20, 33, 63, 88

SPAC Contact: Karen Taycher

Agency Contact: Janelle Mulvenon

#4. Codify the “benchmarks of quality” that have been offered by the Positive Behavior Supports program related to NRS 433.5506 (Developmental Services, Child and Family Services), 388.5285 (Public Schools), 394.372 (Private Schools), and 449.782 (Medicaid Waivers, Other Facilities).

Issue Summary:

NRS prohibits aversive interventions by certain facilities and requires that facility staff be trained in positive behavior supports (PBS). However, the law does not outline what quality PBS should look like. PBS Nevada, a technical assistance and training program, has proposed certain benchmarks of quality that would give facilities some guidance in their PBS efforts. As this report is being written, PBS Nevada is holding meetings with stakeholder agencies in order to gain consensus around a final list of general standards.

Objective 39 of the Strategic Plan for People with Disabilities challenges the State to *“assure that services provided through Medicaid, Special Education, Independent Living, Maternal and Child Health, Child and Family Services and Vocational Rehabilitation will recognize, plan and fund the positive behavioral supports required by people with behavioral disorders to maintain home, community and educational independence while avoiding institutional placement.”* Objective 59 calls for assurance that *“...no person whose services are paid from state funds is removed to a more restrictive environment without specific documentation that positive behavioral supports have been fully utilized and failed to correct the presenting issues, identifying how they have been used and why additional restriction is required.”*

The SPAC asks that the Legislative Committee on Persons with Disabilities urge the Department of Health and Human Services to continue facilitating discussions with the appropriate stakeholders, and produce a consensus list of PBS benchmarks of quality no later than January 15, 2007.

Relevant SPAC Objective(s): 24, 39, 59, 63, 91

SPAC Contact: Jack Mayes

Agency Contact: Don Jackson

#5. Encourage the Interagency Transition Advisory Board to continue its work and to make specific recommendations for system improvement as soon as possible.

Issue Summary:

The Interagency Transition Advisory Board (ITAB) was created by the 2005 legislature to once and for all spearhead improvement in the transition of students from school to adult life. The ITAB has met regularly during the past year, but has yet to make any recommendations for system improvement. A major barrier to moving forward has been a lack of data in pre and post-transition systems. Nonetheless, the work of the ITAB is vital and the SPAC asks the Legislative Committee on Persons with Disabilities to encourage the ITAB to move forward in formulating actionable recommendations.

Relevant SPAC Objective(s): 74, 75, 78, 79, 82

SPAC Contact: Karen Taycher

Agency Contact: Sherry Manning

#6. Establish a state Traumatic Brain Injury Registry and use the gathered data to direct service resources to the most needed areas.

Issue Summary:

Nevada has a trauma registry, which provides basic data about individuals who receive traumatic injuries, including Traumatic Brain Injury (TBI). It does not, however, offer a picture over time of the needs of people with TBI or the ability of the system to meet those needs. Many states have addressed this concern through the development of a comprehensive data registry for TBI. Much of the data needed for such a registry already exists in Nevada; it simply needs to be mined and coordinated to provide needed information. The data could be used, for example, to determine whether we need a Medicaid waiver specific to the TBI population rather than an addition to the physical disability waiver.

The Office of Disability Services and the Health Division have already begun to address this recommendation by partnering in a project to establish a registry that includes not only TBI, but also Spinal Cord Injury data. The partnership will be partially funded by a federal grant won by the Office of Disability Services. The SPAC wants to ensure that this vital registry comes to fruition and asks the Legislative Committee on Persons with Disabilities to urge the Department of Health and Human Services to have a functioning registry no later than July 1, 2007.

Relevant SPAC Objective(s): 45, 87, 85

SPAC Contact: Jane Imboden

Agency Contact: Todd Butterworth

RECOMMENDED BILLS

#1. Amend NRS 439A to require reporting by health care facilities to a data repository of individuals at risk of entering a nursing facility, so that community-based alternatives can be explored before a person enters a facility.

Issue Summary:

The Office of Disability Services' Money Follows the Person (MFP) project, through a grant from the Centers for Medicare and Medicaid Services, has worked for the past three years to identify people in nursing homes who do not want to live long-term in these facilities. In cooperation with Nevada Medicaid's FOCIS program, over 300 individuals have been transitioned out of nursing homes back into the community. One important lesson learned through this process has been that, while people are waiting to leave nursing homes, they have often lost the resources to do so. They have lost their housing, furniture and other necessities while in the nursing home, making a transition back into the community very difficult.

Objective 16 in the Strategic Plan calls for the State to *"identify and transfer people in institutional care who can be served in the community, and who do not oppose such transfer, assuring appropriate discharge planning, transitional supports and targeted services coordination in the process."*

The SPAC and DHHS believe that amending Chapter 439A will address this issue preemptively. Giving consumers the option of community-based living or nursing home placement before they leave acute care, will not only be better for those wanting to live in the community, it will be a policy that is essential to the spirit of Olmstead. The reporting health care facilities should also be responsible for coordinating with the known or pending payer source (Medicaid, counties, private payers...) as well as other sources of assistance such as the Office of Disability Services, the Division for Aging Services and the Centers for Independent Living.

We request that the Legislative Committee on Persons with Disabilities submit a bill draft request to implement a reporting repository.

Relevant SPAC Objective(s): 13, 16

SPAC Contact: Jon Sasser

Agency Contact: Connie Anderson

#2. Move the compliance and monitoring function of Early Intervention Services to a separate agency.

Issue Summary:

Agencies often struggle with objectively monitoring the quality of their services. For those programs with a high level of client satisfaction the issue is not often apparent but, for those with a dissatisfied client base, there becomes a need for an objective 3rd party to monitor a program. EIS is funded to undertake compliance and monitoring functions. Unfortunately, that function reports to the same person responsible for overseeing the delivery of EIS services. This conflict of interest could influence the objectivity of performance evaluations and quality assurance monitors. The SPAC asks the Legislative Committee on Persons with Disabilities to urge the Department of Health and Human Services to transfer the EIS compliance and monitoring function to a line of responsibility that is entirely separate from that of the EIS service delivery function.

Relevant SPAC Objective(s): 20, 63, 70

SPAC Contact: Karen Taycher

Agency Contact: Janelle Mulvenon

#3. Mandate that property owners receiving funding from any level of government, and who own accessible and/ or affordable units, report the availability of their affordable or accessible units to the Nevada Housing Registry.

Issue Summary:

There is an obvious lack of affordable, accessible housing in Nevada. In addition, the units that do exist are often occupied by able-bodied individuals. The most often cited reason is that property owners do not have an effective means for identifying potential tenants with disabilities. Massachusetts addressed this issue through an online housing registry that lists accessible units currently available for rent. Those looking for such units can query the website by geographical location, rental price, accessibility features and other criteria. Use of this valuable tool results in the needs of both property owners and people with disabilities being met.

Objective 67 of the Strategic Plan calls for the State to *“coordinate housing information and availability throughout the state, identify funding opportunities and promote the attraction of new housing options for children and adults with disabilities.”*

The Office of Disability Services has brought the Massachusetts housing registry to Nevada through a federal grant. It can be viewed at www.nevadahousingregistry.com. However, making the registry effective will require property owner participation. Massachusetts accomplished this by mandating that every owner of rental properties report to the registry. In Nevada, we are proposing that at least those owners receiving government subsidies or

support be compelled to participate. Reporting will likely be done on a monthly basis and will only require property owners to respond to an e-mail. There will be no monetary cost to their participation and the time investment will generally be less than 10 minutes per month.

The Legislative Commission's Subcommittee to Study the Availability and Inventory of Affordable Housing was created by ACR 11 during the last legislative session. The subcommittee has been looking at housing registry participation and may include it in a bill draft that will also propose funding for housing data collection. However, we believe this issue is important enough for it to stand alone, and that it should not be combined with another issue that requires an appropriation. Thus, the SPAC asks the Legislative Committee on Persons with Disabilities offer a bill draft on this issue.

Relevant SPAC Objective(s): 67

SPAC Contact: Jack Mayes

Agency Contact: Sherry Manning

#4. Pass legislation that will require the use of “people first” language in the Nevada Revised Statutes and Nevada Administrative Code when referring to people with disabilities.

Issue Summary:

This recommendation originated with the People First organization and was presented to the Legislative Committee on Persons with Disabilities by Santa Perez. The acceptable language to use in describing people with disabilities has changed over time, and will likely continue to change. The word “crippled” became “handicapped,” and “handicapped” eventually gave way to “disability.” While it is impossible to legislate language preferences, we believe that the person should always be put first when referring to people with disabilities. Instead of “disabled person,” “person with a disability” should be used. Instead of “wheelchair user,” “person who uses a wheelchair” is preferred.

We ask that the Legislative Committee on Persons with Disabilities offer a bill draft to require the use of “people first” language in the Nevada Revised Statutes and Nevada Administrative Code when referring to people with disabilities.

Relevant SPAC Objective(s): Not specifically addressed in the strategic plan, but certainly in keeping with the spirit of the plan.

SPAC Contact: Mary Bryant

Agency Contact: Todd Butterworth

#5. Add Traumatic Brain Injury applicants to the reporting requirements under NRS 426.729(1) to help them avoid institutionalization.

Issue Summary:

The Office of Disability Services' (ODS) Personal Assistance Services program provides home-based care for individuals who do not qualify for other resources, such as Medicaid. Some clients share in the cost on a sliding scale, and services are provided statewide by the St. Mary's Foundation, on a contract basis. Because the service has focused on serving individuals with more severe physical disabilities, it has inadvertently avoided serving people with mild to moderate Traumatic Brain Injury.

While many of these individuals have relatively minor physical disabilities, their cognitive and memory functions can cause them serious problems. For example, a person might be able to pay their own bills, but they might not remember to pay them. Or, they might recognize a leaky pipe, but they may not understand the need to report it. For some Nevadans, these small problems have spiraled into the loss of a home and a move into a nursing home. With just a few hours of support each week, some of these individuals could continue to live independently.

At the urging of the 2005 legislature, ODS has amended its regulations to allow individuals with TBI to receive limited PAS services, when program funding is available. Objective 48 of the Strategic Plan for People with Disabilities call for the State to *"provide training within personal assistance programs to ensure people with autism, other pervasive developmental disabilities and brain injury (who have a high need for a consistent and predictable environment) will obtain caregivers who understand and are trained in their individual particular characteristics and needs."*

Objective 86 asks that *"Legislative budget requests and forecasting recognize and include the needs of people with severe disabilities and their families with incomes above Medicaid limits, but unable to afford the critical personal assistance, respite, health care, environmental modifications and medications needed to avoid family disruption, impoverishment, exacerbation of disability and institutionalization."*

The SPAC believes that individuals with TBI should be added to the reporting under NRS 426.729, for consideration during the budget process. Because there is no requirement that the State fund the service needs of those reported under NRS 426.729, there would be no fiscal impact as a result of this statutory change. It would merely make policymakers aware of the need.

The Office of Disability Services has agreed to include this item in their agency bill, thus the SPAC asks that the Legislative Committee on Persons with Disabilities simply endorse this proposed change in the NRS.

Relevant SPAC Objective(s): 26, 45, 48, 85, 86, 87

SPAC Contact: Jane Imboden

Agency Contact: Todd Butterworth

RECOMMENDED BUDGET INITIATIVES

#1. Add Autism behavioral services to the MR/ Related Conditions Medicaid waiver.

Issue Summary:

This issue was a top priority for the current biennium but very narrowly failed to garner executive or legislative support. It is the SPAC's number one priority for the upcoming biennium. This policy change will enable Mental Health and Developmental Services to begin offering desperately needed assistance to children with Autism. Early intervention for many kids with Autism can permanently change their lives, by giving them the skills they need to compensate for their disability. In such cases, this could eliminate the future need for special education services, vocational rehabilitation services, welfare, or Medicaid.

Objective 51 of the Strategic Plan calls for the State to *"develop a Medicaid HCBS*

Cognitive Impairment Waiver to assure delivery of the complex and costly array of behavioral services needed by people with brain injury, autism, and other pervasive

developmental disabilities and mental illness for their unique behavioral and

independent living needs." This recommendation is a cost-effective means for

accomplishing this objective related to those with Autism.

The SPAC asks that the Legislative Committee on Persons with Disabilities urge the governor and the Department of Health and Human Services to prioritize this initiative in their 2008-09 budget.

Relevant SPAC Objective(s): 25, 51

SPAC Contact: Jan Crandy

Agency Contact: Jane Gruner

#2. Fund Medicaid's proposals to offer Traumatic Brain Injury services under the Waiver for Independent Nevadans and to provide a rate increase for comprehensive outpatient rehabilitation services for TBI clients.

Issue Summary:

Objective 24 of the Strategic Plan calls for the State to *"identify the service needs of out-of-state residential placements and develop in-state capability to return those residents to Nevada."* Several Nevadans with Traumatic Brain Injury are

unnecessarily forced to live out-of-state in order to receive needed services. This placement is necessary mostly because the State does not pay in-State providers of specialized services the same rate as out-of-state providers. By increasing the rate paid to in-state providers, more Nevadans with TBI will be able to access services locally and to remain in Nevada.

Objective 55 places urgency on *“provid[ing] families who act as primary caregivers with the disability education, training and support services needed to effectively provide care to their family member or significant other without undue physical and/or mental hardship.”* Adult day services provide daytime supervision and support for those individuals with more severe Traumatic Brain Injury. These services enable families who act as in-home caregivers to work during the day and to continue supporting their family member at home. The absence of these services forces families to break up and burdens the State with the cost of full-time institutional care.

The SPAC asks that the Legislative Committee on Persons with Disabilities urge the governor and the Department of Health and Human Services to prioritize these initiatives in their 2008-09 budget.

Relevant SPAC Objective(s): 24, 25, 36, 39, 51, 55, 63

SPAC Contact: Jane Imboden

Agency Contact: Connie Anderson

#3. Raise the unearned income eligibility limit for the Medicaid buy-in program (HIWA).

Issue Summary:

Objective 52 of the Strategic Plan challenges the State to *“continually expand Nevada’s Medicaid Buy-In Program to equitably provide, by 2008, medical insurance coverage or wraparound to all people with disabilities who, by virtue of becoming employed, have established an income above poverty level, but cannot obtain the health care coverage and services required to terminate reliance on public benefits.”*

The Health Insurance for Work Advancement (HIWA) program enables people with disabilities who want to go back to work to buy-in to the Medicaid program to ensure that they will not lose health insurance coverage in the process of getting a job. In 2004, Governor Guinn recommended a budget for HIWA to serve 608 people in SFY 2007. The Legislatively-approved budget calls for 130 people to be served in SFY 2007. Unfortunately, the window of eligibility for the program is so small that only 21 people are enrolled. A bill to expand this window of eligibility failed during the past legislative session and, as a result, people who want to work may not be, for fear of losing their insurance. An increase in the window of

eligibility would ultimately save more than it costs by reducing people's need for public services and increasing their ability to pay income taxes and contribute to the economy.

The SPAC has two recommendations related to HIWA and asks that the Legislative Committee offer their support for these actions. First, we ask that DHHS increase the unearned income limit as soon as possible to \$899 per month, or whatever level is necessary, to get the caseload count to 130 individuals by the end of the biennium, as projected during the 2005 Legislature. In preparing the SFY 2008-09 budget we ask, at a minimum, that funding be restored to the amount requested in the Governor's 2006-07 budget, adjusted for population and cost increases. To get there we believe the unearned income limit should initially be raised to at least 150% of the Federal Poverty Level (\$1,225 a month).

The SPAC asks that the Legislative Committee on Persons with Disabilities urge the governor and the Department of Health and Human Services to address these initiatives.

Relevant SPAC Objective(s): 52, 86

SPAC Contact: Jon Sasser

Agency Contact: Connie Anderson

#4. Fund Positive Behavior Supports technical assistance for agencies serving individuals with behavioral issues.

Issue Summary:

Positive Behavior Supports (PBS) is a service philosophy that has shown to provide better results than negative interventions. The University of Nevada and the Department of Health and Human Services have partnered to form a program called PBS Nevada, which provides education and technical assistance to any public or private agency wanting to implement PBS strategies. This program has operated on a minimal budget and has subsisted mostly on support from the Fund for a Healthy Nevada. However, because PBS is mandated in NRS and because it is a key strategy for Olmstead compliance, we urge permanent general fund support for PBS Nevada and at least \$540,000 in annual funding during the 2008-09 biennium.

Objective 38 in the Strategic Plan for People with Disabilities calls for the state to *"provide permanent funding for the state's Positive Behavioral Supports Network at a level that, at a minimum, will support adequate training and service delivery to 1,500 families..."*

The SPAC asks that the Legislative Committee on Persons with Disabilities urge the governor and the Department of Health and Human Services to prioritize this initiative in their 2008-09 budget.

Relevant SPAC Objective(s): 24, 38, 39, 63

SPAC Contact: Jack Mayes

Agency Contact: Don Jackson

#5. Fund Nevada's 2-1-1 telephone system.

Issue Summary:

Objective 65 of the Strategic plan proposes to, *"in collaboration with Nevada counties and United Way organizations, establish and fund a 2-1-1 universal access line with a supplementary No Wrong Door website and community level call centers providing information, referral and resolution assistance."*

An almost universal need in all social service programs is a single point of access for information on the complicated array of available services. With a fully functioning 2-1-1 system, anyone in Nevada will be able to dial 2-1-1 on their telephone and receive help finding the assistance or information they need. How often do we say to one another, "I didn't know that program existed" or "who do I call to access those services"? 2-1-1 can address these issues for every public and private social service in Nevada.

2-1-1 received a 2005 legislative appropriation for a pilot project and it is available in the metropolitan areas of the state. But 2-1-1 needs a greater commitment from the State to be available statewide and to become a viable ongoing program. This being said, the State should only be one of many partners supporting 2-1-1.

The SPAC asks that the Legislative Committee on Persons with Disabilities encourage the governor to permanently fund a percentage of the 2-1-1 budget through the state general fund.

Relevant SPAC Objective(s): 56, 65, 87

SPAC Contact: Jack Mayes

Agency Contact: Mary Liveratti

#6. Utilize entire federal allotment for Vocational Rehabilitation.

Issue Summary:

Vocational Rehabilitation has historically experienced difficulties in retention and recruitment of its rehabilitation counselor positions, which in turn have significantly limited the bureau's ability to fully utilize its Federal Section 110 funding. In

response, the Rehabilitation Division implemented several new recruiting strategies, and has made significant progress toward minimizing vacancies.

The Rehabilitation Services Administration (RSA) allocates Section 110 funding based on disability population demographics. For the current federal year (October 1, 2005 through September 30, 2006 – FY2006) RSA allocated \$3 million more to Nevada than the Rehabilitation Division was able to match. At the required match ratio, an increase of approximately \$750,000 in State funding would be required to match Nevada's FY2006 Section 110 allotment. Preliminary planning targets issued by RSA indicate that Nevada's allocation will be increasing by 7.5% per year.

Objective 77 of the Strategic Plan calls for the SPAC to *"Monitor and report to each session of the legislature matched funding returned to the federal government."* The SPAC asks that the Legislative Committee on Persons with Disabilities urge the governor and the Department of Employment, Training and Rehabilitation to prioritize this match funding in their 2008-09 budget.

Relevant SPAC Objective(s): 76, 77

SPAC Contact: Jack Mayes

Agency Contact: Mick Coleman

Conclusion

We appreciate the opportunity to serve the State and the disability community in this very worthwhile endeavor. The Olmstead Decision was a landmark case for people with disabilities. Nevada should take pride in its proactive response to the challenges offered by the US Supreme Court, and in the excellent Strategic Plan we are implementing in pursuit of Olmstead ideals.

We would especially like to thank: Governor Guinn, who is the only governor in recent memory to truly prioritize disability issues; Senator Cegavske and the Legislative Committee on Persons with Disabilities, who have graciously given voice to the disability community; Mike Willden and the many staff of the Department of Health and Human Services who have worked cooperatively as our partners in the Strategic Plan for People with Disabilities; the Office of Disability Services for staffing our committee and working hard to coordinate our many initiatives; and, the many other State and private agencies that have been so supportive of the process.

APPENDIX H

Suggested Legislation

The following Bill Draft Requests will be available during the 2007 Legislative Session, or can be accessed after “Introduction” at the following Web site: <http://www.leg.state.nv.us/74th/BDRList/page.cfm?showAll=1>.

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| BDR 54-295 | Makes Various Changes Concerning Interpreters and Realtime Captioning Providers. |
| BDR R-296 | Expresses Support for Vocational Rehabilitation Programs and Services. |
| BDR -297 | Changes Language Used in NRS When Referring to Persons with Disabilities. |
| BDR 39-298 | Requires the Division of Mental Health and Developmental Services of the Department of Health and Human Services to Provide Copies of Serious Incident Reports to the State’s Designated Protection and Advocacy Agency. |

