

NEVADA LEGISLATURE LEGISLATIVE COMMITTEE ON SENIOR CITIZENS, VETERANS AND ADULTS WITH SPECIAL NEEDS

(Nevada Revised Statutes [NRS]) 218E.750

SUMMARY MINUTES AND ACTION REPORT

The first meeting of the Nevada Legislature's Legislative Committee on Senior Citizens, Veterans and Adults With Special Needs was held on Wednesday, January 15, 2014, at 9 a.m. in Room 3138 of the Legislative Building, 401 South Carson Street, Carson City, Nevada. The meeting was videoconferenced to Room 4401 of the Grant Sawyer State Office Building, 555 East Washington Avenue, Las Vegas, Nevada. A copy of this set of "Summary Minutes and Action Report," including the "Meeting Notice and Agenda" (Exhibit A) and other substantive exhibits, is available on the Nevada Legislature's website at http://www.leg.state.nv.us/interim/77th2013/committee/. In addition, copies of the audio record are available through the Legislative Counsel Bureau's Publications Office (e-mail: publications@lcb.state.nv.us; telephone: 775/684-6835).

COMMITTEE MEMBERS PRESENT IN CARSON CITY:

Assemblywoman Teresa Benitez-Thompson, Chair Senator Mark A. Hutchison

COMMITTEE MEMBERS PRESENT IN LAS VEGAS:

Senator Mark A. Manendo Assemblywoman Ellen B. Spiegel

COMMITTEE MEMBER ABSENT:

Assemblyman Jim Wheeler

COMMITTEE MEMBER ATTENDING VIA TELECONFERENCE:

Senator Patricia (Pat) Spearman, Vice Chair

LEGISLATIVE COUNSEL BUREAU STAFF PRESENT:

Kirsten Coulombe, Senior Research Analyst, Research Division Heidi A. Chlarson, Principal Deputy Legislative Counsel, Legal Division Tarron L. Collins, Senior Research Secretary, Research Division

OPENING REMARKS

• Chair Teresa Benitez-Thompson called the meeting to order and welcomed Committee members and the public to the first meeting of the Legislative Committee on Senior Citizens, Veterans and Adults With Special Needs. She introduced Legislative Counsel Bureau (LCB) staff and gave general information.

PUBLIC COMMENT

• Chair Benitez-Thompson called for public comment; however, no testimony was presented.

OVERVIEW OF THE COMMITTEE'S STRUCTURE, RESPONSIBILITIES, AND SCHEDULE

• Kirsten Coulombe, Senior Research Analyst, Research Division, LCB, presented a document outlining the creation of the Committee, Committee members, Committee responsibilities, a contact list of relevant organizations, and acronyms related to health and human services. (Please see Exhibit B.)

DISCUSSION ON PROGRAMS AND SERVICES FOR SENIOR CITIZENS IN NEVADA

Long-Term Care Services Provided by the Department of Health and Human Services (DHHS)

• Elizabeth Aiello, Deputy Administrator, Division of Health Care Financing and Policy (DHCFP), DHHS, presented a Microsoft PowerPoint presentation titled "Nevada's Long Term Services and Supports" regarding Medicaid waivers in Nevada. She discussed types of waivers, eligibility requirements, levels of coverage, covered services, and benefits to the recipients, providers, and State agencies. Ms. Aiello stated the goal of the waivers is to keep the elderly out of nursing facilities, and she said Nevada is working to simplify the waiver process for its applicants by consolidating some of the waivers in January 2016. (Please see Exhibit C.)

In response to Senator Hutchison's inquiry regarding why the changes are taking place now, Ms. Aiello replied the interest groups realized they all have the same goals and began working together toward common goals. She noted some of the current waivers needed revisions to the NRS.

Discussion ensued among Vice Chair Spearman, Assemblywoman Spiegel, and Ms. Aiello regarding recipients who qualify for and use more than one waiver and the types of individuals who qualify for the waivers. Ms. Aiello stated a person only qualifies for one waiver at a time and a waiver is available for any individual who is not Medicaid eligible.

- Chair Benitez-Thompson pointed out the recent rule that the Center for Medicare and Medicaid Services (CMS) placed on states to have home- and community-based settings and inquired what Nevada plans to do.
- Ms. Aiello replied the DHCFP staff would be evaluating definitions and regulations in order to ensure compliance.

Responding to further inquiry from Chair Benitez-Thompson regarding the allocation of funds to reduce wait times for community-based waivers, and the new waiver consolidation in 2016, Ms. Aiello stated the waiver programs have grown every year. She noted the allocated funds have been used to increase the number of waivers available. Ms. Aiello commented the waiting list will be covered in a later presentation, and the assisted living waiver has been integrated into the elderly at-home waiver. She continued that, due to budget issues, the physically disabled waiver will not be integrated until after the next legislative session.

• Tammy Ritter, Chief, Community Home-Based Care Unit, Aging and Disability Services Division (ADSD), DHHS, presented a Microsoft PowerPoint titled "Long-Term Care Services – Home and Community Based Care Programs." She detailed the number of waiver slots budgeted and available and indicated staff turnover and vacancy are the biggest obstacles in filling the available slots. (Please see Exhibit D.)

In response to Assemblywoman Spiegel's inquiry regarding the vacant positions, Ms. Ritter replied none of the positions are frozen and ADSD is working to fill the vacancies.

- Vice Chair Spearman inquired whether there is a plan to expand community-based waivers and if so, what the time frame is for the expansion.
- Ms. Ritter responded that the ADSD has added 117 slots, which increases the caseloads by 5 to 7 cases a month. She stated the ADSD is working on a plan to present to the Legislature during next session.

Discussion ensued between Chair Benitez-Thompson and Ms. Ritter regarding the rating system used for skilled nursing facilities and the wait-listed applicants. Ms. Ritter stated the rating is based on "activities of daily living." She noted it is the same assessment required for admission into a nursing facility and determines the individual's need for assistance on a scale from 0 to 13 that factors into

prioritization of the list. Ms. Ritter continued the wait-listed applicants could be waiting for eligibility determinations from welfare but their waitlists are mostly due to not having enough staff.

Ms. Ritter continued her presentation by providing information regarding the Assisted Living Waiver. She indicated the ADSD has not been able to fill the allocated slots with residences due to a lack of assisted living facilities with availability for the low-income applicants. Ms. Ritter stated that in July 2014 the Assisted Living Waiver will merge with the Home and Community Based Waiver for Frail Elderly, making placement of applicants easier.

In response to Chair Benitez-Thompson's inquiry regarding the definition of "AMI," Ms. Ritter replied it is "area median income," which is a housing term.

Continuing, she provided information about the ADSD programs using homemakers and personal assistance services to aid the elderly. She detailed the availability of services and the number of waitlisted applicants in the programs.

Responding to Chair Benitez-Thompson's query regarding referrals from the community and for which program the referred individuals are eligible, Ms. Ritter indicated there are different eligibility requirements for each program. She stated there are waivers based on income and waivers based on service needs.

• Elizabeth Aiello, previously identified, commented the referred individuals must have slots available to them in the eligible program before a waiver can be granted.

Discussion ensued among Senator Hutchison, Ms. Aiello, and Ms. Ritter regarding marketing to place additional applicants on waivers. Ms. Aiello stated many people want to live in their homes and not enter a facility. Ms. Ritter added the cases served now are without marketing but noted outreach is a goal of the ADSD in order to aid more participants.

In response to Vice Chair Spearman's comment that outreach to those in need using webinars and other sponsored means could result in added savings to the State, Tina Gerber-Winn, Deputy Administrator, ADSD, DHHS, stated the ADSD has three ombudsmen to handle outreach.

• Ms. Gerber-Winn discussed a federal case that resulted in the ADSD instituting a 90-day target turnaround to aid individuals to get back into their homes. She pointed out the complications of eligibility and indicated the ADSD is trying to educate people of the available benefits. Ms. Gerber-Winn noted Medicare does not cover long-term services and supports; it only covers acute care. She stated Medicaid covers only the very poor. Ms. Gerber-Winn indicated the ADSD has some services for the middle-income applicants but the services are not as extensive as the services provided through waivers. She provided a Microsoft PowerPoint presentation titled "Long Term Care Services: Grants" that included an overview of:

(1) ADSD programs and grants; (2) core services; (3) target populations; (4) decision points; and (5) long-term care services provided through grant funding. (Please see Exhibit E.)

Discussion among Senator Manendo, Ms. Gerber-Winn, Ms. Aiello, and Ms. Ritter ensued regarding what can be done if a senior citizen does not want in-home care but needs assistance. Ms. Gerber-Winn informed the Committee to contact the Advocate for Elders in ADSD to determine the services available and stated there is a plan in place to make the public more aware of the available services. Ms. Aiello provided the phone number 211 for general information, and Ms. Ritter provided 775-486-3545 to contact the Advocate for Elders program.

Responding to Senator Manendo's inquiry regarding whether the cost of meals includes delivery, Ms. Gerber-Winn stated \$7 a meal is the average cost between home delivery and communal meals. She commented the small rural areas have an increased per-meal cost.

- Vice Chair Spearman queried whether the ADSD can use the money saved from community health care waivers to benefit other programs within the Division.
- Ms. Aiello responded the money saved is a projected amount not actual dollars saved.
- Tina Gerber-Winn responded that the ADSD is reporting the avoidance of costs not actual savings.

Funding of Long-Term Care Services

- Tina Gerber-Winn, previously identified, continued her presentation, providing information regarding funding sources and allocations, growth, sequestration, and future goals of the ADSD. She opined that unless changes are made to secure federal budget funds, the resulting services will be reduced. (Please see Exhibit E.)
- Chair Benitez-Thompson commented that as the senior population grows, so does the need to increase funding.

In response to Vice Chair Spearman's inquiry whether the ADSD is sharing the effects of sequestration with the Federal Delegation, Ms. Gerber-Winn stated information has been shared through the National Association of State Directors of Developmental Disabilities Services.

• Ms. Gerber-Winn noted the programs that have been discussed are outside of the health care reform, and may affect the eligibility processing time for waiver applications.

• Chair Benitez-Thompson commented applicants should call the ADSD offices for waiver eligibility determination prior to applying though the Silver State Health Insurance Exchange (SSHIX).

Responding to Vice Chair Spearman's suggestion to provide information on the SSHIX website regarding applicants getting an eligibility determination from the ADSD, Chair Benitez-Thompson instructed staff to follow-up.

• Elizabeth Aiello, previously identified, provided a Microsoft PowerPoint document titled "1915 (c) Home and Community Based Waivers – Funding and Cost Neutrality" (Exhibit F) that highlighted the Medicaid funding formula, Nevada's cost neutrality choice, mandatory Medicaid, and optional home- and community-based services, budgets, and new waiver slot needs.

Discussion ensued between Chair Benitez-Thompson and Ms. Aiello regarding the hours per week for the cost neutrality waivers program and a skilled nursing facility. Ms. Aiello stated the costs will balance out at the population levels. Chair Benitez-Thompson indicated the maximum allowed per week for in-home care would be 35 hours for a State-only funded program. Ms. Aiello stated in Medicaid there are attendant care hours figured into the services and, for waivers, the figures are tied to types of services provided, for example, meal preparation and wound care.

Senior Centers

• Grady Tarbutton, Director, Washoe County Department of Senior Services, indicated that ADSD is planning a statewide workshop on February 7, 2014, at 9 a.m., regarding senior citizens. Mr. Tarbutton presented a document titled "Washoe County Senior Services" (Exhibit G). He discussed an increase in population of persons age 65 and older; the role of senior centers; and the increasing numbers of vulnerable seniors, seniors living alone, and seniors with diminishing incomes. Mr. Tarbutton commented on recreational activities for seniors in Washoe County and stated 77 percent of seniors in Washoe County know about the Washoe County Senior Services. He detailed services the Senior Centers provide and noted the Gatekeeper Program that uses firefighters to identify seniors in need and recommends Senior Centers to them. Mr. Tarbutton stated that his agency does not provide outreach because there are not enough slots available. He shared the development of a master plan for aging service and identified transportation as the number one concern of senior citizens. Mr. Tarbutton expressed concern that the Senior Centers are at capacity and discussed the Community-based Care Transitions Program, which is part of the Affordable Care Act of 2010. He concluded with details on how the Senior Centers are coordinating with veteran services.

In response to Senator Hutchison's inquiry regarding whether income levels factor into the population of Senior Center users, Mr. Tarbutton replied 18 percent of Washoe County senior citizens use it and 50 percent of those users are at or below the poverty level.

Discussion ensued between Senator Hutchison and Mr. Tarbutton regarding the meals served at the Senior Centers, and what role the federal government plays in constructing Senior Centers. Mr. Tarbutton stated that Senior Centers are where senior citizens in need go for a meal, and added he hopes to be able to provide a second meal in Washoe County through the indigent fund soon. He stated no funds for Senior Centers construction come from the federal government.

• Kirsten Coulombe, previously identified, provided the number of Senior Centers throughout the state and indicated information and further details were available on Nevada's Aging and Disability Resource Center's website.

Mr. Tarbutton pointed out a new report titled "Rising Demand for Long-Term Services and Supports for Elderly People," which stresses the need to use services to keep seniors citizens independent to avoid long-term institutionalized care. (Please see Exhibit H.)

Responding to Senator Manendo's inquiry, Ms. Coulombe replied there are seven Senior Centers in Las Vegas.

Discussion ensued between Senator Manendo and Mr. Tarbutton regarding how many Senior Centers serve meals and why others do not. Mr. Tarbutton stated not all of them serve meals and noted the meals in Washoe County cost approximately \$4.25.

- Chair Benitez-Thompson instructed staff to forward information regarding why the Senior Centers no longer serve meals to Senator Manendo.
- Jeff Duncan, Chief, Support Services, ADSD, DHHS, indicated he would provide the information requested regarding Senior Centers meals in Las Vegas.
- Vice Chair Spearman commented on the percentage of the population in their 70s and inquired what the Senior Centers are doing to encourage personal interaction.
- Mr. Tarbutton responded that personal contact is essential to the elderly population's well-being and stated this is an area that needs focus.

Responding to Vice Chair Spearman's inquiry regarding whether the Senior Centers share information with the faith-based communities, Mr. Tarbutton stated faith-based communities are a core resource so he has been reaching out to them and will continue to do so.

Public Transportation

• Lee Gibson, Executive Director, Regional Transportation Commission of Washoe County (RTCWC), stated the presentations provided have generated many questions, and he plans to resolve those issues. Mr. Gibson presented a Microsoft PowerPoint that highlighted the RTC services in Washoe County. (Please see Exhibit I.)

Discussion ensued between Chair Benitez-Thompson and Mr. Gibson regarding unfunded services, service levels, funding mechanisms for requirements of the Americans With Disabilities Act (ADA) of 1990, and the vision for the RTCWC. Mr. Gibson clarified "unfunded" means the RTCWC does not have the transit funding to provide the service. He indicated the RTCWC uses sales taxes, fare box receipts, and federal grants for funding and service levels are decreasing, but commented the RTCWC tries to limit the impact on senior users. Mr. Gibson noted funding for the ADA projects comes from grants and budgeted fuel taxes. He concluded with the RTCWC goals that include: (1) funding the unfunded services; (2) decreasing wait times; (3) increasing services; (4) expanding RTC RAPID; and (5) increasing funding for identified services in the 2035 Regional Transportation Plan. (Please see Exhibit J.)

In response to Senator Manendo's request for information on the Safe RIDE program and the budget breakdown, Mr. Gibson agreed to provide the information.

- Tina Quigley, General Manager, Regional Transportation Commission of Southern Nevada (RTCSN), presented a Microsoft PowerPoint document titled "Transit Specialized Services" (Exhibit K) that included:
 - Organizational background;
 - Services provided;
 - o Demand for services:
 - o Nonprofit partnerships; and
 - o Funding details and needs.
- Assemblywoman Spiegel queried routes established in Las Vegas and whether the user age is a factor in the determining routes.
- Ms. Quigley replied it is the 20-rider factor that determines routes, but the RTCSN does consider senior citizens when routes are determined.

Discussion ensued between Chair Benitez-Thompson and Antonette Braddock, Specialized Services Contract Supervisor, RTCSN, regarding the nonprofit partners and whether the funding comes from grants. Ms. Braddock stated the grant funding is specific to operational costs but the nonprofit partner determines which operational costs suit their needs. She noted the funding source for the Alternate Transportation Services (ATS) and Adult Day Care transportation services comes from local sales tax revenues and the nonprofit providers are federally funded. Ms. Braddock continued the

ATS program is fully funded by the RTC and Medicaid reimburses the RTCSN for the portions that qualify. Chair Benitez-Thompson queried the number of riders eligible for Medicaid reimbursement, and Ms. Braddock replied the RTCSN is trying to acquire that information.

- Chair Benitez-Thompson asked Mr. Gibson to discuss paratransit services in the RTCWC.
- David F. Jickling, Director, Public Transportation, RTCWC, responded that the CitiCare Foundation was established to help fund the unmet needs of people with disabilities in the outlying areas who otherwise would qualify for the paratransit services. He indicated the demand for services is growing. Mr. Jickling stated there is another transportation service called Washoe Senior Ride that requires riders be over 65 and earn less than \$40,000 a year, but is available to all ADA-eligible clientele, regardless of age, who meet the above-mentioned income requirements. He noted RTCWC is preparing a five-year paratransit study and indicated funding is the biggest obstacle in providing services.

Discussion ensued among Chair Benitez-Thompson, Mr. Jickling, and Mr. Gibson regarding future RTCWC needs and the amount involved in Medicaid reimbursement. Mr. Jickling replied the RTCWC is trying to determine that information through plans, studies, and working with the community. Mr. Gibson noted the RTCWC is a privatized transit system and is involved in a demonstration program utilizing electric buses, saving the County approximately \$200,000 a year in operating costs. Mr. Jickling stated approximately 10 percent of the RTCWC riders are Medicaid eligible, which means new revenue amounts of approximately \$300,000 to \$400,000 in reimbursement funds will be available for services.

- Chair Benitez-Thompson inquired whether the nonprofit grant funding for operational costs cause RTCSN to end up with more of a vehicle mix that operates under the grantor.
- Ms. Braddock responded there is a good mix of operational expenses between transportation equipment and fuel costs and stated some of the funding is applied to payroll expenses.
- Ms. Quigley commented that the information Vice Chair Spearman provided the RTCSN regarding changes in demographics in Senatorial District No. 1 caused them to evaluate and provide additional services. She remarked she looks forward to working with Assemblywoman Spiegel on similar issues in her district.

FACILITIES FOR SKILLED NURSING IN NEVADA

Presentation on the Role of the State Long-Term Care Ombudsman

- Heather Korbulic, State Long-Term Care Ombudsman, ADSD, DHHS, presented a Microsoft PowerPoint titled "State of Nevada Long Term Care Ombudsman Program," (Exhibit L) including:
 - o A description of the program;
 - o Program demographics;
 - o Complaints reported;
 - Volunteer programs;
 - o Program initiatives; and
 - o Future goals.
- Chair Benitez-Thompson inquired whether it is typical for an ombudsman program to have an advocacy role instead of an enforcement role.
- Ms. Korbulic replied it is typical to provide only advocacy help pursuant to the Older Americans Act of 1965.

Discussion ensued between Assemblywoman Spiegel and Ms. Korbulic regarding the services provided to unlicensed facilities and how many complaints are received on behalf of these facilities. Ms. Korbulic replied there is no way of knowing how many unlicensed facilities are in Nevada but stated the majority of complaints are filed against the licensed facilities.

Overview of the Inspection Process of Facilities for Skilled Nursing

- Marla McDade Williams, Deputy Administrator, Division of Public and Behavioral Health (DPBH), DHHS, presented a Microsoft PowerPoint presentation titled "Overview of Inspection Processes" that included: (1) rules for oversight; (2) licensing requirements; (3) certification for reimbursement services; (4) operating rules; (5) inspections; (6) complaints; (7) sanctions; (8) how to register complaints; (9) system parts; and (10) agency details. (Please see Exhibit M.)
- Vice Chair Spearman queried the lack of an appeal process for the DPBH's investigation outcomes.
- Ms. Williams indicated she would not be averse to having an appeal process and offered to provide to the Committee information from other states.

Responding to Chair Benitez-Thompson's inquiry regarding whether the report findings are public, Ms. Williams replied the findings are available to the public on the DPBH website.

Discussion of the 2013 Nursing Home Report Card Prepared by Families for Better Care

- Marla McDade Williams, previously identified, stated the Report Card (Exhibit N)
 does not assess the performance of the DPBH's inspection activities. She added any
 reference to staffing levels does not refer to DPBH staff but rather the staffing level
 in nursing home facilities.
- Donna McCaferty, Health Program Manager, DPBH, DHHS, presented a Microsoft PowerPoint document titled "Discussion of 2013 Nursing Home Report Card Produced by Families for Better Care" (Exhibit O) that included: (1) skilled nursing facility demographics; (2) criteria for grading; (3) provider ratings; (4) inspection requirements; (5) severe deficiencies and repeat severe deficiencies; (6) actions taken against facilities; (7) staffing criteria; and (8) education collaboration. She noted level G deficiencies mentioned in the Report Card are level three, the occurrence of actual harm but not immediate danger. Ms. McCaferty added level four deficiencies constitute immediate danger and commented the deficiencies did not increase from year 2011 to 2012 and showed a downward trend for repeat deficiencies.

Discussion ensued among Chair Benitez-Thompson, Ms. McCaferty, and Ms. Williams regarding the data reported on the direct care staffing hours and whether those hours seem average for Nevada. Ms. McCaferty replied the information was submitted to the CMS by the skilled nursing facilities, and Ms. Williams stated the hours are correct but noted it is difficult to assess the level of care required by patients.

- Vice Chair Spearman inquired whether the Report Card was prepared without bias and whether any organization has an agenda reflected by the results in the Report Card. She queried the acceptable wait time once a call button is activated and whether staff has reviewed 2013 legislation in regards to facility wait times.
- Ms. Williams stated the Report Card highlighted areas of an establishment, and another reporting group could come in and highlight something completely different. She commented in terms of staffing that there are no requirements set for wait times to measure against.
- Jean Hesterly, Health Inspection Manager, DPBH, DHHS, commented the investigations will usually be able to determine wait times even without requirements based on the facilities technology.

In response to Chair Benitez-Thompson's query regarding whether a national standard has been established for patient wait time, Ms. Hesterly stated DPBH evaluates individual care requirements and offered to review the policy of other states for the Committee.

- Vice Chair Spearman inquired whether Nevada's current staffing requirements are adequate and whether the lack of funding could contribute to inadequate staffing.
- Ms. Williams stated there is one regulation that states a facility shall ensure there is a sufficient number of nursing staff on duty at all times, leaving the determination of sufficient nursing staff up to the facility. She noted the DPBH is inspecting the adequacy of the facilities plan, not the details in the plan. Ms. Williams added sufficient staffing is really based on a case-by-case determination.

Discussion ensued between Assemblywoman Spiegel and Ms. Williams regarding the Report Card grades and whether Nevada should have a State monitoring program to ensure the facilities in Nevada have submitted accurate information. Ms. Williams replied the 100 percent facility deficiency grade does not factor in severity. She commented when the DPBH inspects facilities there are always areas that need improvement resulting in a 100 percent deficiency grade. Ms. Williams noted the data does not match up but offered to provide information to the Committee regarding discrepancies in the Report Card for clarification. Assemblywoman Spiegel observed that Nevada has 33 percent of its facilities in the 1- and 2-star rating and raised concerns. Ms. Williams offered to provide information regarding the rating system.

PUBLIC COMMENT

- Connie McMullen, Washoe County resident, and Commission on Aging member, expressed concerns regarding the skilled nursing facilities in Nevada and encouraged the Committee to explore the standard of care provided and nurse-to-patient ratios. She noted that she had recently toured a skilled nursing facility in Reno and found the program impressive.
- Diane S. Allen, President, Perry Foundation, disclosed that her foundation has been conducting free in-service training to improve the quality of care in the skilled nursing facilities in southern Nevada and northern Nevada. She commented with her background in the Bureau of Health Care Quality and Compliance, she aids facilities with their plans of correction. Ms. Allen stated 70 percent of the identified deficiencies are D graded, which means nothing has occurred but without correction something adverse could occur. She provided the Perry Foundation's goals are to: provide webinars with pertinent information, establish a director certification program for skilled nursing facilities, and create certification for a minimum data set.
- John Yacenda, Ph.D., President and Chief Executive Officer, Dreams Foundation, Incorporated, and Nevada Silver Haired Legislative Forum (NSHLF) member, expressed optimism for new legislation for the elderly populations due to the numerous interim committees studying related issues. He noted services his nonprofit foundation provided last year and gave some information on the NSHLF's meeting plans.

- Barry Gold, Director, Government Relations, AARP Nevada, commented on the integration of aging and other units with Early Intervention program and urged the Committee to evaluate the integration. He expressed concern over the consolidation of waivers in regard to case management and maintaining elderly slots despite consolidation. Mr. Gold provided information regarding the Nevada Health Link portal and the referrals they are making to outside agencies.
- Daniel Mathis, President, Nevada Health Care Association, offered to answer any questions and to participate in future Committee meetings.

ADJOURNMENT

There being no further business to come before the Committee, the meeting was adjourned at 2:12 p.m.

	Respectfully submitted,
	Tarron L. Collins Senior Research Secretary
	Kirsten Coulombe Senior Research Analyst
APPROVED BY:	
Assemblywoman Teresa Benitez-Thompson, Chair	_
Date:	

LIST OF EXHIBITS

Exhibit A is the "Meeting Notice and Agenda" provided by Kirsten Coulombe, Senior Research Analyst, Research Division, Legislative Counsel Bureau.

Exhibit B is a packet of information regarding the Legislative Committee on Senior Citizens, Veterans and Adults With Special Needs that included:

- Committee background, responsibilities, past committee action, and tentative meeting dates;
- Contact information; and
- Common health care acronyms.

Exhibit C is a Microsoft PowerPoint presentation titled "Nevada's Long Term Services and Supports (LTSS)," provided by Elizabeth Aiello, Deputy Administrator, Division of Health Care Financing and Policy (DHCFP), Department of Health and Human Services (DHHS).

<u>Exhibit D</u> is a Microsoft PowerPoint presentation titled "Long-Term Care Services – Home and Community Based Care Programs," provided Tammy Ritter, Chief, Community Home-Based Care Unit, Aging and Disability Services Division (ADSD), DHHS.

<u>Exhibit E</u> is a Microsoft PowerPoint presentation titled "Long Term Care Services: Grants," offered Tina Gerber-Winn, Deputy Administrator, ADSD, DHHS.

Exhibit F is a Microsoft PowerPoint presentation titled "1915 (c) Home and Community Based Waivers – Funding and Cost Neutrality," provided by Elizabeth Aiello, Deputy Administrator, DHCFP, DHHS.

Exhibit G is a document titled "Living Well. Aging Well.," submitted by Grady Tarbutton, Director, Washoe County Department of Senior Services (WCDSS).

Exhibit H is a report titled "Rising Demand for Long-Term Services and Supports for Elderly People," presented by Grady Tarbutton, Director, WCDSS.

Exhibit I is a Microsoft PowerPoint presentation titled "Legislative Committee on Senior Citizens, Veterans and Adults With Special Needs," provided by Lee Gibson, Executive Director, Regional Transportation Commission of Washoe County (RTCWC).

Exhibit J is plan titled "2035 Regional Transportation Plan," adopted April 19, 2013, offered by Lee Gibson, Executive Director, RTCWC.

<u>Exhibit K</u> is a Microsoft PowerPoint presentation titled "Transit Specialized Services," provided by Tina Quigley, General Manager, Regional Transportation Commission of Southern Nevada (RTCSN).

<u>Exhibit L</u> is a Microsoft PowerPoint titled, "State of Nevada Long Term Care Ombudsman Program," provided by Heather Korbulic, State Long-Term Care Ombudsman, ADSD, DHHS".

<u>Exhibit M</u> is a Microsoft PowerPoint presentation titled "Overview of Inspection Processes," provided by Marla McDade Williams, Deputy Administrator, Division of Public and Behavioral Health (DPBH), DHHS.

Exhibit N is a Report Card titled, "Nursing Home Report Cards - Nevada" presented by Families for Better Care offered by Marla McDade Williams, Deputy Administrator, DPBH, DHHS.

Exhibit O is a Microsoft PowerPoint document titled "Discussion of 2013 Nursing Home Report Card Produced by Families for Better Care," provided by Donna McCaferty, Health Program Manager, DPBH, DHHS.

This set of "Summary Minutes and Action Report" is supplied as an informational service. Exhibits in electronic format may not be complete. Copies of the complete exhibits, other materials distributed at the meeting, and the audio record are on file in the Research Library of the Legislative Counsel Bureau, Carson City, Nevada. You may contact the Library online at www.leg.state.nv.us/lcb/research/library/feedbackmail.cfm or telephone: 775/684-6827.