REVISED PROPOSED REGULATION OF THE BUREAU OF SERVICES TO PERSONS WHO ARE BLIND OR VISUALLY IMPAIRED OF THE REHABILITATION DIVISION OF THE DEPARTMENT OF EMPLOYMENT, TRAINING AND

REHABILITATION

LCB File No. R085-13

July 22, 2014

EXPLANATION – Matter in *italics* is new; matter in brackets [omitted material] is material to be omitted.

AUTHORITY: §§1 and 2, NRS 426.560, 426.670 and 426.675.

A REGULATION relating to the operation of vending facilities on public property by persons who are blind or visually impaired; revising provisions relating to retirement income benefits; revising provisions relating to the reimbursement of health care costs; and providing other matters properly relating thereto.

Legislative Counsel's Digest

Existing law grants a priority of right to operate vending facilities in certain public buildings and on certain public properties to persons who are blind and licensed by the Bureau of Services to Persons Who Are Blind or Visually Impaired of the Rehabilitation Division of the Department of Employment, Training and Rehabilitation. The stated purposes of these provisions are to provide remunerative employment, enlarge economic opportunities and stimulate independent livelihoods. (NRS 426.640)

Existing regulations authorize the Bureau of Services to Persons Who Are Blind or Visually Impaired of the Rehabilitation Division of the Department of Employment, Training and Rehabilitation to pay each licensed operator of such a vending facility not more than \$7,000 annually as a retirement income benefit if the payment is approved by a majority of the Nevada Committee of Blind Vendors and the Bureau determines that the money is available in the Business Enterprise Account for Persons Who Are Blind. (NAC 426.383) **Section 1** of this regulation: 1) eliminates the limit on the annual amount of the retirement income benefit; 2) adds a requirement for approval of the payment by a majority of licensed operators; and 3) sets forth factors for consideration by the Bureau in developing policies and procedures relating to the eligibility requirements for those payments and the amount of the payments.

Existing regulations also authorize the Bureau to reimburse each licensed operator of such a vending facility not more than \$12,500 annually for health care costs that are not paid by a third-party insurer if the payments are approved by a majority of the Nevada Committee of Blind

Vendors and the Legislature appropriates money for this purpose. (NAC 426.387) **Section 2** of this regulation: 1) eliminates the limit on the annual amount of an operator's reimbursement for such health care costs; 2) eliminates the prerequisite of an appropriation by the Legislature; 3) requires the Bureau to determine whether the money to make the reimbursement is available in the Business Enterprise Account for Persons Who Are Blind; and 4) sets forth factors for consideration by the Bureau in developing policies and procedures relating to the eligibility requirements for those reimbursements and the amount of reimbursement.

- **Section 1.** NAC 426.383 is hereby amended to read as follows:
- 426.383 1. The Bureau will pay each licensed operator [not more than \$7,000] annually [as] a retirement income benefit if:
 - (a) A majority of the Nevada Committee of Blind Vendors approves the payment; [and]
 - (b) A majority of the licensed operators approves the payment; and
- (c) The Bureau determines that money for the payment is available in the Business Enterprise Account for Persons Who Are Blind.
- 2. The Bureau, in consultation with the Nevada Committee of Blind Vendors, will develop policies and procedures to determine:
- (a) The eligibility of an operator to receive the retirement income benefit pursuant to this section; and
- (b) The amount of money to be paid to an operator who is eligible to receive a retirement income benefit pursuant to this section.
- 3. In developing policies and procedures pursuant to subsection 2, the Bureau, in consultation with the Nevada Committee of Blind Vendors, will give consideration to all relevant factors, including, without limitation:
 - (a) The amount of money in the Business Enterprise Account for Persons Who Are Blind;
- (b) The current and projected expenses of the Bureau and other required uses of the money;

- (c) Any reserves which the Bureau determines it must maintain; and
- (d) The number of operators who are anticipated to be eligible to receive a retirement income benefit pursuant to this section.
 - **Sec. 2.** NAC 426.387 is hereby amended to read as follows:
- 426.387 1. The Bureau will make available [not more than \$12,500] an amount of money annually for each operator of a vending facility for the purpose of reimbursing each operator for health care costs that are not paid by a third-party insurer if:
- (a) A majority of the Nevada Committee of Blind Vendors approves the amount to be made available; and
- (b) The [Legislature appropriates money for such a purpose.] Bureau determines that the amount of money that is approved annually is available in the Business Enterprise Account for Persons Who Are Blind.
- 2. The Bureau, in consultation with the Nevada Committee of Blind Vendors, will establish policies and procedures relating to:
- (a) The eligibility of an operator to receive a reimbursement for health care costs pursuant to this section; [and]
- (b) The process the Bureau and such an operator will follow for reimbursement of health care costs pursuant to this section [.]; and
- (c) The amount of money to be made available annually for each operator as reimbursement of health care costs pursuant to this section.
- 3. In establishing policies and procedures pursuant to subsection 2, the Bureau, in consultation with the Nevada Committee of Blind Vendors, will give consideration to all relevant factors, including, without limitation:

- (a) The amount of money which the Legislature appropriates for the purpose of reimbursing each operator for health care costs that are not paid by a third-party insurer;
 - (b) The lawful uses of the money appropriated to the Bureau;
 - (c) Any reserves which the Bureau determines it must maintain; and
- (d) The number of operators who are anticipated to be eligible to receive reimbursement for health care costs pursuant to this section.