

MEETING NOTICE AND AGENDA

Name of Organization: Legislative Committee on Senior Citizens, Veterans and Adults
With Special Needs (*Nevada Revised Statutes 218E.750*)

Date and Time of Meeting: Tuesday, June 15, 2010
9 a.m.

Place of Meeting: Grant Sawyer State Office Building
Room 4401
555 East Washington Avenue
Las Vegas, Nevada

Note: Some members of the Committee may be attending the meeting and other persons may observe the meeting and provide testimony through a simultaneous videoconference conducted at the following location: Legislative Building, Room 2135, 401 South Carson Street, Carson City, Nevada.

If you cannot attend the meeting, you can listen or view it live over the Internet. The address for the Nevada Legislature website is <http://www.leg.state.nv.us>. Click on the link "Live Meetings – Listen or View."

<p>Note: Minutes of this meeting will be produced in summary format. Please provide the secretary with electronic or written copies of testimony and visual presentations if you wish to have complete versions included as exhibits with the minutes.</p>

A G E N D A

Note: Items on this agenda may be taken in a different order than listed.

*Denotes items on which the Committee may take action.

I. Opening Remarks
Assemblywoman Kathy McClain, Chair

*II. Approval of the "Summary Minutes and Action Report" of the Meeting Held on April 13, 2010, in Las Vegas, Nevada

- *III. Presentations Relating to the Use of Guardianships in the Justice System
 - A. Update on the Work of the Guardianship Steering Committee
 - Sally Crawford Ramm, Elder Rights Attorney, Aging and Disability Services Division, Department of Health and Human Services
 - Lora E. Myles, Attorney, Carson and Rural Elder Law Program
 - B. Testimony from Representatives Involved in the Guardianship Process
- *IV. Presentation Relating to Senior Citizens Who are Victims of Mortgage and Foreclosure Fraud
 - Brett Kandt, Executive Director, Nevada Prosecution Advisory Council, and Special Deputy Attorney General, Office of the Attorney General
- V. Public Comment

(Because of time considerations, the period for public comment by each speaker may be limited, and speakers are urged to avoid repetition of comments made by previous speakers.)
- *VI. Work Session: Discussion and Possible Action on Recommendations Relating to:
 - A. Senior Citizens
 - 1. Elder Abuse, Exploitation, Neglect, or Isolation
 - 2. Guardianships
 - 3. Facilities and Home Care
 - B. Veterans
 - C. Adults With Special Needs

The "Work Session Document" is attached below and contains proposed recommendations. The document is also available on the Committee's webpage, <http://www.leg.state.nv.us/75th2009/Committee/Interim>, or a written copy may be obtained by contacting Amber J. Joiner, Senior Research Analyst, Research Division, Legislative Counsel Bureau, at (775) 684-6825.

- VII. Public Comment

(Because of time considerations, the period for public comment by each speaker may be limited, and speakers are urged to avoid repetition of comments made by previous speakers.)

VIII. Adjournment

Note: We are pleased to make reasonable accommodations for members of the public who are disabled and wish to attend the meeting. If special arrangements for the meeting are necessary, please notify the Research Division of the Legislative Counsel Bureau, in writing, at the Legislative Building, 401 South Carson Street, Carson City, Nevada 89701-4747, or call Ricka Benum at (775) 684-6825 as soon as possible.

Notice of this meeting was posted in the following Carson City, Nevada, locations: Blasdel Building, 209 East Musser Street; Capitol Press Corps, Basement, Capitol Building; City Hall, 201 North Carson Street; Legislative Building, 401 South Carson Street; and Nevada State Library, 100 Stewart Street. Notice of this meeting was faxed and e-mailed for posting to the following Las Vegas, Nevada, locations: Clark County Government Center, 500 South Grand Central Parkway; and Capitol Police, Grant Sawyer State Office Building, 555 East Washington Avenue. Notice of this meeting was posted on the Internet through the Nevada Legislature's website at www.leg.state.nv.us.

**Legislative Committee on Senior Citizens,
Veterans and Adults With Special Needs**
(Nevada Revised Statutes 218E.750)

**WORK SESSION
DOCUMENT**



June 15, 2010

Prepared by the Research Division
Legislative Counsel Bureau



WORK SESSION DOCUMENT

LEGISLATIVE COMMITTEE ON SENIOR CITIZENS, VETERANS AND ADULTS WITH SPECIAL NEEDS (*Nevada Revised Statutes 218E.750*)

June 15, 2010

The following list of recommendations was compiled by the Chair and staff of the Legislative Committee on Senior Citizens, Veterans and Adults With Special Needs (*Nevada Revised Statutes* [NRS] 218E.750). This document contains recommendations that were either submitted in writing to the Committee staff, provided through correspondence with Committee members, or presented during one of the Committee's three hearings on January 20, 2010; March 10, 2010; or April 13, 2010.

This document is designed to assist the Committee members in determining what action they may take on certain issues, which may include making statements in the Committee's final report, writing letters of recommendation or support, or forwarding recommendations for legislation to the 2011 Session of the Nevada Legislature. The Committee may vote to make as many statements or send as many letters as they choose; however, pursuant to NRS 218D.160, the Committee is limited to ten bill draft requests (BDRs), including requests for resolutions. The BDRs must be submitted to the Legal Division of the Legislative Counsel Bureau on or before September 1, 2010.

The proposals listed in this document are conceptual recommendations arranged by topic, are in no particular order of importance, and do not necessarily have the support or opposition of the Committee Chair or members. The members may accept, reject, modify, or take no action on any of the proposals. The source of each recommendation is noted in parentheses, when available. Please note that specific sources may not be provided if the proposals were raised and discussed by numerous individuals during the course of the study, or only one main source may be listed when there were also others who contributed.

The recommendations may have been modified by being combined with similar proposals, or by the addition of necessary legal or fiscal information. It should also be noted that some of the recommendations may contain an unknown fiscal impact. During the drafting process, specific details of approved requests for legislation or other Committee action may be further clarified by staff in consultation with the Chair or others, as appropriate. Also, if a recommendation includes reference to specific chapters or statutes of the NRS, as part of the drafting process, amendments to other related chapters or sections of the NRS may be made to fully implement the recommendation.

RECOMMENDATIONS RELATING TO SENIOR CITIZENS

RECOMMENDATIONS RELATING TO ELDER ABUSE, EXPLOITATION, NEGLECT, OR ISOLATION

1. **Draft legislation** to require the Office of the Attorney General to organize or sponsor at least one multidisciplinary team (MDT). Currently, NRS 228.270 provides that the Unit for the Investigation and Prosecution of Crimes Against Older Persons in the Office of the Attorney General *may* organize or sponsor one or more multidisciplinary teams to review any allegations of abuse, neglect, exploitation, or isolation of an older person. Change “may organize or sponsor” to “shall support the organization of or sponsor” (submitted by Connie McMullen, Chair, Senior Services Strategic Plan Accountability Committee [SPAC]).
2. **Draft legislation** to amend NRS 228.270(2) to include “vulnerable persons” among those who may be served by a MDT (currently this subsection only pertains to older persons). This amendment would make NRS 228.270(2) consistent with NRS 200.5091 through NRS 200.50995, which refer to abuse, neglect, exploitation, or isolation of older persons and vulnerable persons (submitted by Brett Kandt, Special Deputy Attorney General, Office of the Attorney General).
3. **Draft legislation** clarifying the provisions of NRS 179A.450 to improve the usefulness of the data in the Repository for Information Concerning Crimes Against Older Persons. Make the following revisions:
 - A. Currently the Repository receives reports when arrests occur relating to crimes that involve elderly people, which may not fully reflect the purpose of NRS 179A.450. If the intent of the Legislature is to require the Repository to collect information about crimes targeting elderly people, then cross reference the definitions in NRS 200.5092 relating to elder abuse, neglect, exploitation, and isolation. This will clarify that only those crimes where older persons are targeted should be reported, not crimes that incidentally involve an older person.
 - B. Section 179A.450 of the NRS states that the Repository “must contain a complete and systematic record of all reports of crimes against older persons committed in this State.” Currently, the Repository is only receiving arrest reports from some law enforcement agencies and reports of cases that the Aging and Disability Services Division (ADSD), Nevada’s Department of Health and Human Services (DHHS), forwards to law enforcement agencies for investigation. If the definition of “reports” should also include incident reports and investigative reports in cases

- that do not involve arrests, which may give a better picture of rates of elder abuse, clarify this definition. Also, include a mandate in the NRS that law enforcement and reporting agencies forward the reports to the Repository and provide a penalty if they do not. Finally, authorize the Department of Public Safety (DPS) to adopt regulations that facilitate the collection of other types of reports of crimes against older persons through collaboration with the ADSD, offices of district attorneys, law enforcement agencies, and other relevant organizations.
- C. Provide that only reports of crimes that are reasonably believed to have been committed are to be forwarded to the Repository by the ADSD, DHHS, or law enforcement entities.
- D. Specify which entities must report information to the Repository by replacing “any entity” in NRS 179A.450(2) with a list of the agencies listed in NRS 200.5093(1)(a). These include the local office of the ADSD, DHHS; a police department or sheriff’s office; and the county’s office for protective services, if one exists in the county where the suspected action occurred (submitted by Patrick J. Conmay, Chief, Records and Technology Division, DPS).
4. **Draft legislation** to reinstate members of the clergy and attorneys as mandatory reporters of abuse to those over age 60 in NRS 200.5093. In 2005, Section 5 of Assembly Bill 267 (Chapter 324, *Statutes of Nevada*) removed clergy and attorneys from the list of mandatory reporters of elder abuse (submitted by Barry Gold, Director of Government Relations, AARP Nevada).
 5. **Draft legislation** that requires mandatory reporters who are employees of government agencies and nonprofit organizations to report the number of senior abuse calls, cases, and investigations to a single centralized agency in the State (submitted by Lu Torres, Executive Director, and Elena Espinoza, Director of Client Services and Programs, The Rape Crisis Center [RCC]).
 6. **Draft legislation** requiring staff and personnel at long-term care facilities receiving funding from State or federal entities to complete a mandatory on-line training course. Employees and staff of these long-term care facilities would be mandated to complete a curriculum on how to respond to and act upon disclosures of abuse and sexual assault by residents of facilities (submitted by Lu Torres, Executive Director, and Elena Espinoza, Director of Client Services and Programs, RCC).
 7. **Draft legislation** requiring agencies that receive State or federal funds and work with senior citizens (including health agencies, community centers, et cetera) to participate in no less than one service provider training a year. The training must include updates on best practices regarding senior abuse and reporting, legislative updates (including mandated reporting statutes), the changing demographics in the senior citizen community in Nevada, and action steps for possible first responders should a senior

disclose instances of abuse (submitted by Lu Torres, Executive Director, and Elena Espinoza, Director of Client Services and Programs, RCC).

8. **Draft legislation** directing the State Board of Health to adopt regulations to require mandatory elder abuse training for all personnel who work directly with residents in facilities for the dependent (as defined in NRS 449.0045) and facilities for skilled nursing (as defined in NRS 449.0039), including facility owners, as a condition of licensure (submitted by Wendy Simons, Assisted Living Consultant, Reno).
9. **Write a letter** urging the DHHS to organize an advocacy response team comprised of members from the ADSD and the Bureau of Health Care Quality and Compliance (HCQC). The purpose of the team will be to respond quickly to alleged cases of extreme abuse, neglect, isolation, or exploitation of older persons in facilities for long-term care in order to protect the resident and ensure that proper investigation occurs (submitted by Wendy Simons, Assisted Living Consultant, Reno).
10. **Write a statement in the final report** encouraging communities across the State to engage in dialogue on senior abuse through their participation in education and awareness presentations offered by community-based agencies. Also encourage State of Nevada agencies to participate in and research best practices relating to senior abuse awareness and protection so that they are in alignment with the movement forward in regards to protecting citizens everywhere from harm and crime (submitted by Lu Torres, Executive Director, and Elena Espinoza, Director of Client Services and Programs, RCC).

RECOMMENDATIONS RELATING TO GUARDIANSHIPS

11. **Draft legislation** establishing an interim legislative study on the issue of guardianships for adults in order to identify and recommend improvements and reforms in the system (submitted by Herbert E. Randall, Vice President, Nevada Silver Haired Legislative Forum).
12. **Draft legislation** requiring that in order to become a guardian of any kind (public or private), a person must submit to a fingerprint background check through the Federal Bureau of Investigation (submitted by Shelly Register, Guardianship Service of Nevada).
13. **Draft legislation** that removes the authorization for videoconference appearances for guardianship hearings in NRS 159.0535 (submitted by James M. O'Reilly, Certified Elder Law Attorney).
14. **Draft legislation** requiring the ADSD, DHHS, to adopt regulations to create two standard forms relating to the guardianship process. One form advises prospective

wards of their rights regarding the proposed guardianship (such as the right to an attorney), and the other is a certificate from a physician to certify the incapacity of a person (submitted by James M. O'Reilly, Certified Elder Law Attorney).

15. **Draft legislation** amending the NRS to add violating the ethical standards adopted by the National Guardianship Association (NGA) to the list of conditions under which the guardian may be removed. Provide that a guardian may also be removed if the guardian has filed for bankruptcy within the last five years, has negligently failed to perform any duty provided by law or ordered by the court, or if the best interest of the ward would be served by the appointment of another person as guardian. Also, add provisions prohibiting a court from appointing a guardian unless there is evidence that the guardian has complied with these ethical guidelines. Currently, the following publications have been adopted by the NGA: *Standards of Practice, 2002* and *A Model Code of Ethics for Guardians, 1988* (submitted by Ginny Casazza, NCG, Casazza Professional Services, Inc.).
16. **Draft legislation** amending the NRS relating to guardianships in the following ways: provide for the sealing of guardianship records; provide a procedure for guardians to access the accounts of the ward and require financial institutions to comply with court orders relating to accounts; authorize a court to require guardianship training; revise provisions relating to the appointment of a guardian ad litem; revise provisions relating to court costs and attorney compensation; provide for the right of wards in certain cases to own a firearm; require certified guardians to agree to operate under certain standards of practice and codes of ethics; require private professional guardians to undergo a background investigation at their own cost and expense; provide for a "Guardian's Acknowledgment of Duties and Responsibilities" form; and require a guardian to file a petition with the court requesting authorization to move or place a ward into a secured residential long-term care facility (submitted by Sally Crawford Ramm, Elder Rights Attorney, ADSD, DHHS, on behalf of the Guardianship Steering Committee).
17. **Draft legislation** to amend guardianship provisions in the following ways (submitted by Susan DeBoer, Washoe County Public Guardian, and Kathleen Buchanan, Clark County Public Guardian):
 - A. According to testimony, when a person is referred to a public guardian's office, it can be difficult for the public guardian to identify whether exploitation of the person has occurred and whether a guardianship is necessary. For the purpose of investigating an alleged case of exploitation or to determine when a public guardianship is appropriate, authorize a public guardian to inspect all records pertaining to the older person, including that person's medical and financial records, even before a guardianship is established.
 - B. Provide for medical surrogate decision making. This would authorize a physician to designate a family member or other person to serve as a surrogate for the

purpose of making medical decisions in cases where a guardianship or durable power of attorney are not in place. These laws have passed in Arizona, Illinois, and Texas.

- C. According to testimony, in some cases, the courts ask public guardians to take over as guardians for a ward whose assets are depleted and the private guardian no longer wants to represent the ward. Therefore, it is proposed that a court shall not remove a private guardian if the sole reason for removal is the lack of funding to pay the guardian's fees.

RECOMMENDATIONS RELATING TO FACILITIES AND HOME CARE FOR SENIOR CITIZENS

18. **Draft legislation** amending NRS 319.147 to remove the requirement that a facility must be financed through tax credits relating to low-income housing or other public funds to be certified by the Housing Division, Department of Business and Industry, as an assisted living facility for the purpose of providing services pursuant to the provisions of the home and community-based services waiver (pursuant to NRS 422.2708) (submitted by Connie McMullen, Chair, SPAC).
19. **Draft legislation** requiring facilities for long-term care to allow residents to return to the facility after a short hospitalization, unless there are no beds available (submitted in part by Barry Gold, Director of Government Relations, AARP Nevada).
20. **Draft legislation** to improve the transparency of ownership and administration in residential facilities, the names of the actual owner and administrator, and their contact information, must be posted at the facility and included in licensing documents (submitted in part by Barry Gold, Director of Government Relations, AARP Nevada, and Carl Martinez, Chair, Nevada Commission on Aging's Legislative Subcommittee).
21. **Draft legislation** directing the Health Division, DHHS, to adopt regulations establishing a uniform assessment tool that is required to be used for each type of facility for long-term care (skilled nursing, assisted living, and group homes). The tool will assess the level of care needed for each resident, including their physical and mental capabilities and medical condition. Currently, each facility has its own assessment tool. The goal of the standardized assessment tool is to give regulators and ombudsmen the ability to judge the appropriateness of the care the resident is receiving in a more objective manner (submitted by Carl Martinez, Chair, Nevada Commission on Aging's Legislative Subcommittee).

22. **Draft legislation** requiring the Health Division, DHHS, to adopt regulations establishing a minimum staff member to resident ratio per shift for facilities for long-term care. “Staff member” could include a registered nurse, a licensed practical nurse, or a certified nursing assistant. For example, the National Citizens’ Coalition for Nursing Home Reform recommends 1 staff member for every 5 residents from 1 p.m. to 3 p.m., 1 staff member for every 10 residents from 3 p.m. to 11 p.m., and 1 staff member for every 15 residents from 11 p.m. to 7 a.m. (appropriate levels for Nevada may be different and should be determined through the regulation proposal and hearing process). Defining the appropriate levels of staffing will ensure that regulators, residents, and their families know when a facility is not maintaining a minimum staffing level (submitted by Carl Martinez, Chair, Nevada Commission on Aging’s Legislative Subcommittee).
23. **Draft legislation** to make the following changes concerning facilities for long-term-care (submitted by Sylvia Healy on behalf of Citizens for Patient Dignity):
- A. Require the adoption of regulations mandating specific nurse staffing levels in skilled nursing facilities, using Oregon’s law as a model. For example, Oregon regulations (411-086-0100) require minimum nurse staffing levels of no less than 1 registered nurse hour per resident per week, and a licensed charge nurse must be on every shift, 24 hours per day. Additionally, nursing assistant ratios are set at 1 assistant per 7 residents during the day shift, 1 assistant per 11 residents during the swing shift, and 1 assistant per 18 residents during the night shift. Also require at least one licensed physician to be physically present at each facility on every shift.
 - B. Upon entering a facility, a patient or the legal guardian of the patient must be provided a document which allows the patient or guardian to authorize the facility to perform an autopsy on the resident in the event that the resident dies. Require that an autopsy be performed on any resident for whom such an authorization has been obtained if the resident dies while residing at the facility.
 - C. Increase the frequency of facility inspections to three or four times per year for each facility and close a facility after two warnings relating to an uncorrected deficiency.
 - D. Require that each facility provide monthly trainings and debriefing meetings which include the owners, administrators, and employees to discuss any problems, develop corrective action strategies, and provide training on the topics deemed necessary.
 - E. Require that the accounting books of facilities be open to public inspection upon the request of any person or governmental entity, including State agencies, family members, and residents. Complete transparency in facility accounting, such as the amount of income a facility receives from Medicare and private insurance, is

necessary for residents to be charged fair amounts and know how much the facility is receiving for their care.

- F. Mandate facilities to contract with an outside company to install cameras in the facility and keep the recordings so that they may be referred to if incidents of patient harm occur.
24. **Draft legislation** directing DHHS to revise the State Plan for Medicaid, to the extent allowed by federal law, to include a mechanism for providing different reimbursement rates for agencies that provide care in the home. The reimbursement rates will vary depending upon what rates those entities pay their employees (submitted by Rick Cline, Volunteer Advocate and Member of People First).
25. **Write a letter** to Nevada's Congressional Delegation requesting that they amend the Medicare Adult Day Care Services Act of 2009 (H.R. 3043) to ensure appropriate funding of adult day health care services and nonemergent transportation for adult day health care services. The requester suggests the following language be inserted: "No funds shall be appropriated for the Secretary of Health and Human Services to withhold, suspend, disallow, or deny federal financial participation under Section 1903(a) of the Social Security Act for adult day health care services or medical adult day care services and nonemergent transportation for adult day care health care services as defined under a State Medicaid plan approved during or before 1994, or withdraw federal approval of any such State Plan provision. This [subsection] shall apply to Fiscal Year 2011 and each fiscal year thereafter" (submitted by Christopher Vito, M.H.A., President and Chief Executive Officer, Nevada Adult Day Healthcare Centers).
26. **Write a statement in the final report** stating the Committee's agreement that home- and community-based services should be prioritized; stable and adequate funding should be provided for services for seniors, veterans, and disabled people; it is important to protect the Tobacco Master Settlement Agreement funds; and it is important to have adequate oversight and funding for elder protective services (submitted by Barry Gold, Director of Government Relations, AARP Nevada).
27. **Write a statement in the final report** to clarify that the Program of All-Inclusive Care for the Elderly (PACE) does not fall under the jurisdiction of the State Gaming Control Board (submitted by Connie McMullen, Chair, SPAC). Staff Note: According to a recent letter from the Division of Insurance, Nevada's Department of Business and Industry, PACE falls under the jurisdiction of the federal government and does not need to be licensed by the State.

28. **Write a statement in the final report** indicating that the following are areas of concern in facilities for long-term care, and encouraging the Health Division and the ADSD, DHHS, to strengthen their oversight of the following issues (submitted by Sylvia Healy on behalf of Citizens for Patient Dignity):
- A. Although criminal background checks are currently required for employees of these facilities, they take time to conduct, and there is concern that people who are ultimately found to have criminal records have been working in a facility prior to the results being received. The results of background checks should be received prior to patient contact and should include character references and family histories to better safeguard against resident abuse.
 - B. Although there are criminal penalties for owners and administrators who condone or allow lethal overdosing and the use of unnecessary chemical restraints, cases are apparently still occurring, so improved enforcement and better oversight is needed.
 - C. Cases of patients reporting feeling threatened or fearful if they speak up about their needs are still being reported. Patient and family rights and complaint processes need to be supported so that facility employees are not able to intimidate or discourage patients from reporting deficiencies in care.
29. **Write a statement in the final report** urging DHHS to prefer home- and community-based care services when placing senior or disabled people in long-term care services. Placement in long-term care facilities or institutional settings should be the last type of service chosen (submitted by Connie McMullen, Chair, SPAC).
30. **Write a statement in the final report** acknowledging the importance of reliable transportation for Medicaid patients who need to attend adult day care centers as part of their daily medical care, and urging the Division of Health Care Financing and Policy (DHCFP), DHHS, to support those services. The DHCFP should not amend Nevada's State Plan for Medicaid in a way that would cut transportation reimbursement rates to providers of medical services who also provide nonemergency transportation services (such as certain adult day care facilities). Current proposed changes to the State Plan appear to change the reimbursement formula from per patient to per mile, and there is concern that this formula will not provide a reimbursement rate that will cover the cost of running such a transportation operation. Any revisions to the State Plan relating to transportation should maintain a reimbursement rate that covers the cost of operating reliable transportation for patients to medical appointments and adult day care services (submitted by Christopher Vito, M.H.A., President and Chief Executive Officer, Nevada Adult Day Healthcare Centers).

RECOMMENDATIONS RELATING TO VETERANS

31. **Draft legislation** in response to the following proposals developed during the Nevada Veteran Legislative Summit or submitted by Tim Tetz, Executive Director, Nevada's Office of Veterans Services (NOVS):

A. Revise the guardianship process for veterans in the following ways:

1. Provide that if a ward is a veteran who receives funds from the Veterans Administration (VA), then all of the ward's money should be handled under the guardianship provisions of Chapter 160 of NRS. Currently, some veterans have two guardianships and follow two sets of rules relating to the procedure for administering their money, because they receive some money from the VA, which is covered under Chapter 160 of NRS, and some money from Social Security or other sources, which is covered under Chapter 159 of NRS;

OR

2. Amend Chapter 159 of NRS to require that geographic proximity be a factor in the selection of a guardian, so that guardians who reside near the veteran are preferred after criteria relating to relationships and type of guardian are satisfied in NRS 159.061. Also, amend the NRS to follow federal guidelines relating to the transfer of guardianships, and remove the limit on the number of wards a guardian is allowed to serve; and
3. Revise NRS 160.120 and any other provisions relating to veteran guardianships (e.g. Chapter 159 of NRS if A(1) above is not proposed) to indicate that compensation payable to a guardian must not exceed 4 percent of the income of the ward during any year. Remove the option for guardians to petition the court for additional compensation.

B. Regarding NOVS operations and structure:

1. Appropriate funds to add two "Trinity Teams" in Nevada, one in Washoe County and one in Clark County. This requires creating and allocating funds for six new positions, two Veterans Service Officers and one Administrative Assistant per team; and
2. Provide that the Veterans Services Commission advises the governor on the appointment of the NOVS Executive and Deputy Executive Directors. The appointee must be chosen by the Governor from a list of three candidates submitted by the Nevada Veterans' Services Commission; and

- C. Standardize the definition of “veteran” in the NRS to include the character and period of service. Replace all current definitions in the NRS with the federal definition as provided in Title 38 § 101 of the *United States Code*.
 - D. Eliminate tuition for veterans who are students attending a college or university in Nevada. In 2009, active military and veterans who were stationed in Nevada were provided this benefit, but it should be extended to all veterans of the armed forces, regardless of where they were stationed. Senate Bill 318 from the 2009 Legislative Session, as introduced, is a model for this proposal.
 - E. Change the disabled veteran license plate to a universally recognized handicap parking plate with a distinctive design that includes a handicapped symbol and “DV”; remove the limitation on the number of specialty plates a veteran may have (currently they are limited to two); and revise the form of all the armed forces special license plates to allow the addition of a disabled veteran designation, which would provide all the benefits associated with the disabled veteran plate (such as free parking in certain places).
 - F. Allow a person who qualifies as both a veteran and the surviving spouse of a veteran with a permanent service-connected disability to claim both of the veterans’ exemptions from property taxes and from governmental services taxes. This would be a reintroduction of the provisions of Assembly Bill 295 from the 2009 Legislative Session.
 - G. Mandate that funeral homes report the unclaimed human remains of persons who might be veterans to the NOVS within a year after the person’s death. This will enable the NOVS staff to research the cases of people who might be veterans and collect the remains of those found to be veterans for proper burial.
 - H. Require the NOVS to provide, upon the request of the owner or operator of a cemetery in this State or a civic organization recognized by the Executive Director, a sufficient number of flags of the United States for placement on the graves of veterans interred in a veterans’ cemetery to commemorate Memorial Day, Flag Day, Independence Day, and Veterans’ Day. The flags must be of a size suitable for placement on a grave, provided without charge, and manufactured in the United States (language in Assembly Bill 134 of the 2007 Legislative Session may serve as a model).
32. **Write a statement in the final report** supporting the establishment of a Northern Nevada Veterans Home. A Capital Improvement Plan (CIP) has already been submitted to the State of Nevada to request funding for 35 percent of the home in order to meet the federal matching requirements. This statement would recognize the

importance of the home and encourage the approval of the CIP (submitted by Tim Tetz, Executive Director, NOVS).

33. **Write a statement in the final report** encouraging the Regional Transportation Commission of Washoe County to establish routes to the Reno Veterans Benefits Administration, and encouraging the Regional Transportation Commission of Southern Nevada to establish routes to the Southern Nevada Veterans Affairs Medical Center (submitted by Tim Tetz, Executive Director, NOVS).
34. **Write a statement in the final report** encouraging the standing committees with jurisdiction over issues relating to veterans services in each house of the Nevada Legislature during the 76th Legislative Session to review the work of the disabled veterans' outreach programs and local veterans employment representatives in the Department of Employment, Training and Rehabilitation to NOVS. The review should examine whether these positions are currently serving veterans in the most effective manner and consider the possibility of moving them to the NOVS (submitted by Tim Tetz, Executive Director, NOVS).

RECOMMENDATIONS RELATING TO ADULTS WITH SPECIAL NEEDS

35. **Draft legislation** to create a voluntary statewide alert system for endangered adults. The alert system would authorize law enforcement agencies, broadcast organizations, and other voluntary organizations to share descriptive information about the endangered adult (submitted by Lucy Peres, President, Nevada Silver Haired Legislative Forum).
36. **Draft legislation** requiring the Governor of Nevada to appoint a task force dedicated to identifying and addressing issues relating to persons with Alzheimer's disease and related dementias. This task force will partner with the Alzheimer's Association and other appropriate agencies and interested parties to create a Nevada State Plan for best meeting the needs of persons with Alzheimer's disease and related dementias, their families, and caregivers. The Nevada State Plan for Alzheimer's disease will include recommendations that will comprehensively address the related issues in the State of Nevada and these recommendations will be considered at the 2013 Legislative Session (submitted by Angie Pratt, Regional Director, Alzheimer's Association of Northern California and Northern Nevada, and Luis Carrillo, Regional Director, Alzheimer's Association Desert Southwest Chapter).
37. **Draft a letter** urging the DHCFP, DHHS, to pursue the following three options available under the new federal Patient Protection and Affordable Care Act (H.R. 3590) at the earliest possible date:

- A. Health Homes (Section 2703): Under this option, one central provider is responsible for coordinating a patient's care, with the goal of improving health outcomes and reducing expenditures for Medicaid enrollees with chronic conditions. This option offers a Federal Medical Assistance Percentage (FMAP) of 90 percent for two years, and funds will be available in January 2011.
- B. Community First Choice Option (Section 2401): This option offers attendant care services in the State Plan under a 1915(i) option, and may include expenditures for transition costs from an institution and for items that substitute for human assistance. It allows a 6 percent increase in FMAP for those who are Medicaid eligible and certain others who have an institutional level of care.
- C. Removal of Barriers to Providing Home- and Community-Based Services (Section 2402): This option offers: regulatory changes to ensure service systems are responsive, provide support for self direction, and improve provider coordination; expansion of services that can be provided under 1915(i) to more closely align with services that can be provided under 1915(c) Home- and Community-Based Waivers; expansion of eligibility based upon income, and an optional new Medicaid eligibility group specific to 1915(i); and a waiver of comparability, an ability to target services, no enrollment caps, and no waiver of statewideness (submitted by Paul Gowins, Chairman, Commission on Services for Persons with Disabilities).