NEVADA LEGISLATURE
LEGISLATIVE COMMISSION'S SUBCOMMITTEE TO STUDY ISSUES RELATING TO SENIOR CITIZENS AND VETERANS

(Assembly Concurrent Resolution No. 35, File No. 109, *Statutes of Nevada 2007*)

SUMMARY MINUTES AND ACTION REPORT

The third meeting of the Nevada Legislature's Legislative Commission's Subcommittee to Study Issues Relating to Senior Citizens and Veterans (A.C.R. 35) was held on March 18, 2008, at 9 a.m. in Room 4401, of the Grant Sawyer State Office Building, 555 East Washington Avenue, Las Vegas, Nevada. The meeting was videoconferenced to Room 2135 of the Legislative Building, 401 South Carson Street, Carson City, 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 www.leg.state.nv.us/74th/Interim. In addition, copies of the audio record may be purchased through the Legislative Counsel Bureau's Publications Office (e-mail: publications@lcb.state.nv.us; telephone: 775/684-6835).

SUBCOMMITTEE MEMBERS PRESENT IN LAS VEGAS:

Assemblywoman Kathy McClain, Chair
Senator Warren B. Hardy II
Senator Joyce Woodhouse
Assemblyman Joseph M. Hogan
Assemblyman James A. Settelmeyer

SUBCOMMITTEE MEMBER ABSENT:

Senator Joseph J. Heck (Excused)

LEGISLATIVE COUNSEL BUREAU (LCB) STAFF PRESENT:

Amber J. Joiner, Senior Research Analyst, Research Division
Risa B. Lang, Chief Deputy Legislative Counsel, Legal Division
Charity Fowler, Deputy Legislative Counsel, Legal Division
Ricka Benum, Senior Research Secretary, Research Division

OPENING REMARKS

- Chairwoman McClain welcomed those in attendance to the Subcommittee's third meeting. She outlined the topics for discussion and stated that the various service providers would address the different levels of independent living and long-term care, which vary from assisted living and residential care facilities to nursing homes.

OVERVIEW OF SERVICES FOR SENIOR CITIZENS LIVING INDEPENDENTLY IN THE COMMUNITY

(As directed by Chairwoman McClain, this agenda item was taken out of order.)

Nevada Revised Statutes Relating to Activities of Daily Living

- Amber J. Joiner, Senior Research Analyst, Research Division, LCB, summarized the statutes that contain a definition of activities of daily living, or provide a reference to a definition. Ms. Joiner offered a Microsoft PowerPoint presentation (**Exhibit B**) and discussed the following items: (1) *Nevada Revised Statues* 449.0021 "Agency to provide personal care services in the home" defined; in addition, the language provides a list of the "activities of daily living"; (2) NRS 200.5092 and NRS 205.4629 "Vulnerable person" defined; and (3) NRS 688C.050 "Chronically ill" defined, which refers to activities of daily living.

- Chairwoman McClain commented that senior citizens could benefit if home maintenance and repairs were to be considered as personal services. She noted that many older residents struggle with such items and it is an area lacking in services.

APPROVAL OF MINUTES OF THE DECEMBER 11, 2007, MEETING IN LAS VEGAS

(As directed by Chairwoman McClain, this agenda item was taken out of order.)

- The Committee **APPROVED THE FOLLOWING ACTION**:

  SENATOR HARDY MOVED TO APPROVE THE MINUTES OF THE DECEMBER 11, 2007, MEETING HELD IN LAS VEGAS, NEVADA. THE MOTION WAS SECONDED BY SENATOR WOODHOUSE AND PASSED UNANIMOUSLY.

State Services for Senior Citizens

(As directed by Chairwoman McClain, this agenda item was taken out of order.)

- Carol Sala, Administrator, Aging Services Division (ASD), Department of Health and Human Services (DHHS), referred to the Service Specification documents (**Exhibit C**), which contain the fact sheets that include descriptions for each grant or service program funded or provided by the ASD. The required specifications for the 32 programs outline and define items such as categories, documentation requirements, home safety and general requirements, service definitions, unit measures, operating procedures, and vehicle modifications. In addition, the fact sheets are utilized to inform the public of the services available to senior citizens and aid staff with budget presentations.

  Ms. Sala said many senior services are provided by the other divisions under the DHHS and each one strives to keep the senior population as independent as possible. The ASD adheres to the mission statement to develop, coordinate, and deliver a comprehensive support service system to ensure Nevada's senior citizens lead independent, meaningful, and dignified lives. The remainder of Ms. Sala's comments focused on the ASD's five budget accounts, the specific programs and services they provide, and additional funding streams. The Division administers three Medicaid waivers which provide alternatives to nursing home placements. (Please refer to **Exhibit C**.)

  Ms. Sala explained that the 2003 Nevada Legislature approved the 2003 Strategic Plan for Senior Services. The ten-year plan examines the overall service needs of seniors, sets goals with the objective of moving senior services to the next level, and to the formation of the Strategic Plan Accountability Committee.

- At the request of Chairwoman McClain, Ms. Sala described the funding source for the taxicab coupons in the Las Vegas area. She explained the Taxicab Authority, Department of Business and Industry, implemented a surcharge of 15 cents per fare. Those funds are transferred to the ASD, and following annual projections, coupon books are sold to senior citizens and the disabled. Ms. Sala pointed out that since there is no financial means test in order to purchase the coupon books, there have been complaints of senior citizens who are able to afford transportation on their own who are taking advantage of the coupon books.

Geriatric Medical and Mental Health Services

(As directed by Chairwoman McClain, this agenda item was taken out of order.)

- Upinder Singh, M.D., F.A.C.P., Chief of Geriatrics, Southwest Medical Association, Clinical Associate Professor, University of Nevada School of Medicine, spoke on medical issues and services specific to geriatric patients. Dr. Singh testified with the

aid of a Microsoft PowerPoint presentation (**Exhibit D**). He provided an overview of the effects of Alzheimer's disease on the family and highlighted the following items:

1. Families and caregivers struggle with the increased costs of health care for patients and providers;

2. Geriatric patients suffer from a variety of aliments and, therefore, doctors must increase the examination times for patient to address each problem individually; and

3. Emphasis must be placed on the circumstances of patients with depression and mental disorders, which can be as disabling and as serious as diabetes, heart problems, or strokes.

Dr. Singh reported that one in five persons in America suffers from some form of mental health issue and it has been determined that the number is greater for residents in the Las Vegas area. Currently, 5.5 million Americans have Alzheimer's disease and those numbers will double every five years for persons over age 65. It is estimated that America spends over $100 billion a year on Alzheimer-related issues, making it the third costliest disease in the country, which doubles the cost for Medicare and Medicaid.

State Services for Senior Citizens

(As directed by Chairwoman McClain, this agenda item was taken out of order.)

- Marilyn Wills, Deputy Administrator, ASD, DHHS, testified on the services provided by the grantees associated with the ASD. Ms. Wills said the funding sources include the: (1) Federal Administration on Aging, United States Department of Health and Human Services; (2) State General Fund; and (3) Tobacco Settlement funds. The grants are issued to community organizations through a request for proposal (RFP) process, which are open and competitive and based on a two-year grant cycle. Therefore, if the grantee is successful, and the program is maintained fiscally and programmatically, the grantee also receives funds the second year. These programs serve Nevada's increasing population of persons age 60 and older, which the Office of the State Demographer, Nevada System of Higher Education, reported as 463,756 individuals in 2008.

  Ms. Wills testified that the grantees are required to provide emphasis to the following target groups: (1) low income; (2) low-income minorities; (3) limited English proficiency; (4) persons living in rural areas; (5) anyone at risk for institutional placement; (6) persons with the greatest economic and social needs; and (7) the Native American populations.

  In addition, Ms. Wills outlined the results of the "2006 Senior Citizen Survey Services" (**Exhibit E**) prepared by the ASD and completed by 1,881 senior citizens. The survey was designed to examine areas lacking in services and needing to be addressed. She

said that seniors listed the items they deemed to be most important, those items are: (1) adequate and timely access to medical and dental providers; (2) accessible, affordable dental care; (3) vision care that is affordable and accessible; (4) funding for a statewide telephone number for information and referrals; and (5) affordable and accessible housing. She referred to the second portion of the survey (page 8 of **Exhibit E**) and outlined the services that senior citizens need, but were determined to be inadequate. Concluding, Ms. Wills summarized the results of the "2008 Grantee Survey on Senior Services" (**Exhibit F**).

In-Home Personal Services for Senior Citizens

Local Government and Nonprofit Services

- Annette B. Smith, Social Work Supervisor, Homemaker Home Health Aide Program and Alternative Health Care Program, Clark County Social Service, provided the Subcommittee with a series of brochures (**Exhibit G**), which are distributed by her office. Ms. Smith stated their mission is to promote independent senior living in their own homes, staying in familiar surroundings, and maintaining their friendships, in a clean and healthy environment. The programs are not specific to senior citizens, but the majority of the clients are among the aging population. Ms. Smith provided information on the following items and services of the Homemaker Home Health Aid Program.

  1. The program requires an eligibility determination process to adhere to financial standards and to prioritize services to indigent clients.

  2. Services include a total case management assessment to ensure that the home health providers and the seniors are being respectful of each other.

  3. Other services may include financial management, help with doctor or mental health appointments, assistance with Medicare D applications for prescription drug coverage, and utility assistance program applications.

  Ms. Smith concluded by commenting on difficult circumstances when seniors have problems with addiction, depression issues, specific dietary or nutritional concerns, and issues of isolation. She stated that Nevada ranks 50th in the mental health services provided to senior citizens.

Responding to an inquiry from Assemblyman Hogan regarding a certain constituent with vision problems who is requesting assistance reading his mail, Ms. Smith explained that due to legal liability concerns the Home Health Aides are not permitted to assist with a client's mail or delve into financial matters. Ms. Smith suggested that a senior volunteer be recruited to provide assistance.

- Carol Sala, identified previously, offered to research whether the Bureau of Service to the Blind and Visually Impaired, Department of Employment, Training and

Rehabilitation (DETR), has the ability to provide and install equipment in homes of the visually impaired.

- Chairwoman McClain noted that the county's Public Guardian's Office also has a budget and bill paying program.

- Grady Tarbutton, Director, Senior Services, Department of Washoe County Social Services, focused his comments on the "2006 Washoe County Strategic Plan for Senior Services." Mr. Tarbutton provided information on the following items: (1) the Day Break Adult Day Care Program; (2) the Representative Payee Program, a financial management service whereby the pension or Social Security funds are administered for the senior citizen; (3) the Homemaker Program, which serves 140 people with a currant waiting list of 100; and (4) the Home Delivered Meal Program.

  Mr. Tarbutton voiced the need for additional facilities to adequately care for senior citizens following medical treatments, hospital stays, and serious illnesses. He urged the Subcommittee to look at funding initiatives, or tax incentives for private industry, to develop existing resources.

- Janice R. Ayres, Executive Director and Chief Executive Officer, Nevada Rural Counties Retired Senior Volunteer Program (RSVP), described the program's home companion and attendant services. Ms. Ayres stated the mission of the RSVP is dedication to helping senior citizens and low-income elders be independent and remain in their own homes as long as possible. She said that rural Nevada has over 900 RSVP volunteers who have provided over 220,000 hours of service to 227 nonprofit and public community agencies. The RSVP provides vital social services and leadership roles throughout the State. Ms. Ayres explained that it costs $67,000 to institutionalize one indigent senior citizen per year.

  She outlined the programs associated with RSVP, which included the: (1) Home Companion Program; (2) Lifeline Program; (3) Resistance Exercise Program; (4) Transportation Service Program; (5) pro bono Law Care Program; and (5) Commodity Food Distribution and Farmers Market Programs. Many of the volunteers provide transportation for medical and dental visits in their private cars due to the lack of public transportation in the rural areas.

  In addition, Ms. Ayres suggested that the State provide a portion of the amount that senior citizens pay for the Lifeline service, and she requested that during the next legislative session the State develop a method to subsidize 500 more Lifeline units to be used for senior citizens in the rural areas. She said it could save the State millions in the cost of care and the institutionalization of senior citizens. She estimated the cost for 500 Lifeline units would be approximately $180,000.

- Jane E. Fisher, Ph.D., Executive Director, Nevada Caregiver Support Center, University of Nevada, Reno, provided an overview of the Nevada Lifespan Respite Care Coalition with the aide of a Microsoft PowerPoint presentation (Exhibit H-1).

Dr. Fisher outlined the organization's mission to support caregivers by promoting access and awareness and advocating for respite services in Nevada. In addition, she explained that the lack of services in the rural communities is often the determining factor whether or not a family member is institutionalized. Dr. Fisher outlined the Center's priorities as: (1) access to respite services and recognizing the critical shortage of affordable in-home or adult day care services; (2) the need for quality care which embraces the need for evidence-based, restraint-free respite services; and (3) recognizing the value of caregivers. In addition, she noted that Nevadans prefer to remain in their homes and quality respite care allows the chronically ill to be moved from a skilled facility to a home setting; however, numerous studies have indicated that serious health consequences have been associated with care giving. She added that family caregivers experience double the rate of heart disease and hypertension as non-caregivers.

Continuing her testimony, Dr. Fisher explained the Caregiver's Support Center is funded by the ASD and works in nine communities throughout northern Nevada. The members work with caregivers who have not had any type of respite relief or time away from providing around-the-clock care in years. These caregivers experience severe effects on their immune system and are aged by approximately 15 years. Dr. Fisher explained desperate situations in which caregivers are forced to make bad decisions; for instance, leaving a family member with severe dementia alone or cases where a family member has have been locked in a basement or bedroom.

Concluding, Dr. Fisher outlined the goals of the Respite Care Coalition, which are to: (1) provide education and training; (2) disseminate information on current respite resources; (3) facilitate integration and collaboration of available services; (4) serve as a catalyst for new models of care; and (5) help secure funding for programs and services. (Dr. Fisher's mission statement is available as **Exhibit H-2**.)

For-Profit Services

- Chairwoman McClain announced that Steve Robbins, President, Visiting Angels, was not able to attend the meeting, but noted his handouts (**Exhibit I**) are to be included in the record and were made available to the members.

- Stephanie Eigenrauch, Administrator, Dynamic Home Healthcare, Las Vegas, explained the differences between the types of home care services. Ms. Eigenrauch clarified that:

  1. The first category, referred to as skilled home health care, refers to the professionals that provide services in the home, and may include: nurses, physical or occupational therapists, speech therapy, and medical social workers. They may be assisted by home-health aides, or nonmedical home care aides, who primarily assist with bathing; and

2. The second category is the home care services, which include personal care givers that provide homemaking services such as cleaning, shopping, and meal assistance.

Ms. Eigenrauch said it is important to senior citizens to distinguish between the types of home health agencies. She explained that home health care is also referred to as skilled care, and to become a home health agency it must be Medicare certified. She clarified that home health agencies provide only health-related care, and home care services provide homemaking-type services.

Concluding, she identified areas with disparities in service as: (1) middle income families; and (2) Medicaid reimbursement rates for skilled care. Ms. Eigenrauch requested that the Legislature look for ways to increase the Medicaid reimbursement rates. (Ms. Eigenrauch's Microsoft PowerPoint presentation is available as **Exhibit J**.)

- Mr. Hogan inquired whether each complaint from a home health client is investigated.

- Paul Shubert, Health Facilities Surveyor IV, Bureau of Licensure and Certification, Health Division, DHHS, responded that each complaint is reviewed and the agency has the responsibility to investigate. Mr. Shubert added that complaints are prioritized by the circumstances of the complaint.

- Tammy Sisson, Administrator, Lend-A-Hand Senior Services, Carson City, explained the focus of her business is to administer and manage the caregivers' schedules and to set home appointment times with the senior citizens to assist them with the activities of daily living. The caregivers provide help with bathing, cleaning, cooking, dressing, and any service that is considered a nonmedical service and can be scheduled on a 24-hour basis. Ms. Sisson explained that these services are not covered by Medicaid, and difficulties arise when clients are not able to afford the assistance they need. She explained that a significant number of family members are taking on more of these types of roles and noted she encounters challenges in recruiting and retaining care givers in such an emotionally taxing industry. Ms. Sisson identified additional disparities in services such as: (1) individuals not eligible for existing programs due to age; (2) the need for a home safety program; and (3) ongoing public awareness programs for the availability of senior services. (Please refer to **Exhibit K**.)

A general discussion ensued regarding recruiting employees and background checks. Ms. Sisson explained that strict hiring practices are imperative; many new businesses are franchises and the owners operate from a handbook and are very competitive. There was additional discussion on the following topics:

1. The benefit of less competition between agencies and more focus on the needs of seniors and the elderly;

2. The challenge of locating people with a willingness to work within this special type of industry;

3. Care giving is based on compassion and common sense, not on having a degree; and

4. The importance for agencies to recognize that care should focus on quality, not quantity.

In addition, Ms. Sisson stated it will be necessary to examine the entire industry to find cost effective ways to provide care, especially with the upcoming number of baby boomers that will not be able to afford these types of services. It was also noted that there is a shortage of nurses and occupational and physical therapists.

Unpaid Family and Caregiver Services

- Testimony was provided by a family member who is a caregiver identified as Naomi, who explained that she cares for her mother who has been diagnosed with dementia. She stated she has been in disagreement with other family members who do not acknowledge the mother's condition. She explained it has been helpful to visit a local support group of children of older parents and has been able to confide in others with similar circumstances. She has received assistance with locating resources, and has established the homemaker services for her mother. She recommended that the process of accessing information on available income-based assistance programs needs to be simplified and said that there is a need for mediation services for families in crisis dealing with guardianship issues.

Geriatric Medical and Mental Health Services

- Laurie Moore, M.S.G., L.A.S.W., Director, Senior Mental Health Outreach Program, provided details on the grant-funded primary direct services. Ms. Moore explained that the needs of the client are coordinated with counseling and that 95 percent of the services are provided in the homes of older adults. The social workers may provide up to three visits on a non-client basis to provide an evaluation and encourage the person to accept the mental health services, noting that it is common for persons with mental illnesses to ignore and even deny they have problems. She said it is important to establish a relationship with a mental health client's "informal network" such as a neighbor, the property owner, or adult children. (Ms. Moore's handout is available as **Exhibit L**.) She focused on the following items:

  1. There is an inability to provide mental health services to residents in the rural communities. The Senior Mental Health Outreach Program has utilized videoconferencing equipment to provide training to staff and volunteers regarding mental health issues and specific concerns related to aging.

  2. Successful workforce development is achieved by recruiting persons with a passion for working with the elderly and senior populations.

In conclusion, Ms. Moore outlined her mission of educating other organizations to the sensitive needs of older adults and elderly persons.

- Lawrence J. Weiss, Ph.D., Director and Associate Professor, Sanford Center for Aging, University of Nevada, Reno (UNR), stated the Sanford Center's mission is to develop innovative research and educational programs with collaborative community relations that add life to the years of seniors. Dr. Weiss noted that 15 percent of the population suffers from disabilities and 40 percent are functionally limited. Currently, the health care system focuses on acute care rather than chronic care. He outlined two programs under the Sanford Center: (1) medication therapy management; and (2) geriatric education.

- Teresa Sacks, M.P.H., Health Research Analyst, Sanford Center for Aging, UNR, briefly mentioned the Center's involvement in the successful educational videotape related to problem gambling. Ms. Sacks addressed the recent compilation of data that has brought attention to the need for the medication therapy management program. She emphasized that when prescription drug medications are taken appropriately and in the right combination, they are beneficial and a cost-effective option to surgery or other forms of treatment. The Institute of Medicine of the National Academies reports that medication errors harm one and half million Americans a year, resulting in approximately 14,000 deaths, the fifth leading cause of death in the U.S. In addition, the costs associated with preventable drug-related illnesses and death has been estimated at $177 billion per year; the average older adult has three chronic health conditions for which they take five or more prescription drugs. It is believed that 30 percent of elder hospitalizations are due to preventable medication-related problems. Ms. Sacks stated that programs designed to prevent such errors are essential.

- Dr. Weiss explained that the Sanford Center on Aging has had a positive impact, but to a relatively small number of senior citizens. (Dr. Weiss' comments are available as **Exhibit M**.) Additional items highlighted by Dr. Weiss included:

  1. The Center receives funding from the ASD, and as a Title 3 program recipient, the funding has been inconsistent over the years. Due to unpredictable funding, the program is only accessible intermittently; additional senior citizens could benefit if it were an ongoing program.

  2. Nevada has an urgent need for additional educated geriatric pharmacists; at present, there are only ten geriatric pharmacists statewide.

  3. Current and common practices for treatment of the ill and elderly is through hospice programs; the elderly and senior population would benefit from enhanced communication, sharing of information, and involvement of the medication therapy management program.

4. Persons with chronic conditions, such as diabetes, heart decease, and obesity, utilize 83 percent of the health care revenue; the nation's major causes of death and disability are preventable and treatable.

5. The Sanford Center recognizes the current need for trained geriatric professionals and the necessity to encourage health professionals to focus their practice on the elderly and become geriatricians. During recent legislative sessions proposals requiring continued medical education for practicing healthcare practitioners in the field of geriatrics have failed.

Dr. Weiss stated that it is necessary to develop ways to encourage practitioners to increase their education, and he urged the Subcommittee to:

1. Propose loan forgiveness programs targeting all health professionals to encourage practitioners to become educated in geriatrics and gerontology; and

2. Recommend the creation of an educational body within the School of Medicine, now the Division of Health Sciences, Nevada System of Higher Education, to focus on geriatric medical education and interdisciplinary health sciences.

Nutrition and Food Services for Senior Citizens

(As directed by Chairwoman McClain, this agenda item was taken out of order.)

- Julie Murray, Chief Executive Officer, Three Square, testified with the aid of a Microsoft PowerPoint presentation (**Exhibit N**) and stated the organization's mission is to provide wholesome food for the hungry and to effectively end hunger in southern Nevada. Ms. Murray explained that Three Square was founded by Eric Hilton in September 2006, when he became aware that a nonprofit agency was forced to close. Mr. Hilton began with a two-year study on the needs of the hungry in the Las Vegas community before agreeing to fund the food bank. Ms. Murray explained the study indicated that hundreds of thousands of Las Vegas residents were deemed to be "food insecure" and that the group was primarily made up of children under age 5 and senior citizens. She noted the goal of Three Square is to: (1) be a food solution for the community by creating the ideal model in the way a community addresses the food shortage problem; and (2) gather the best practices of food banks and food rescue by collaborating with businesses, charitable organizations, and the gaming industry. She provided statistical facts on hunger among the senior citizens and those in the general population that are going hungry. Ms. Murray noted that since opening in January 2008, over 566,373 pounds of food has been rescued and distributed. She explained that the nutritionally balanced food is not given to individuals, but rather to agencies, churches, and similar type community organizations for distribution.

Responding to an inquiry from Mr. Hogan regarding a program to safely collect prepared food from the hotels and restaurants, Ms. Murray explained that 50 percent of

Three Square's food is recovered and 50 percent comes from food banks. In addition, she noted that Second Harvest has groups located in every geographic area of the country and its primary focus is to utilize a greater percentage of recovered foods.

- Cherie Jamason, President and Chief Executive Officer, Food Bank of Northern Nevada, told the Subcommittee that the Food Bank is a partnership of 110 agencies that serve the ill, needy, elderly, and children. Last year, approximately, 4.4 million pounds of food was distributed in the 13 northern counties, one-third of that amount was nutritious, perishable food that went to 58,340 clients. Ms. Jamason said three-quarters of the Food Bank's clients are over age 65, or under age 18. (Please refer to **Exhibit O-1** and **Exhibit O-2** for documents provided by Ms. Jamason.)

- Sandy Martin, Client Services Manager, Catholic Charities, spoke on behalf of the Senior Nutrition program, known as the Meals on Wheels Program. Ms. Martin said Meals on Wheels receives funding from the ASD and in addition obtains some grant funding. She outlined the Catholic Charities' mission of enhancing the lives of senior citizens by providing nourishing and healthy foods and other services. Ms. Martin said the client base is senior citizens 60 years and older who are either physically or mentally unable to prepare balanced meals for themselves.

- Edward Castro, Executive Chef, Senior Nutrition Program, described the staff's adherence to the Hazard Analysis and Critical Control Point (HACCP) guidelines, outlined by the U.S. Food and Drug Administration, U.S. Department of Health and Human Services. Upon hiring, the entire kitchen staff participates in the Serve Safe Certification training program, and the Meals on Wheels staff implements the proper practices of food flow, accurate temperature controls and charts, stock rotation, and follow-up with weekly training videos.

- Ms. Martin provided a flyer with information on the Meals on Wheels Program (**Exhibit P**). She noted that records indicate approximately 400,000 meals are served yearly, that health inspections are conducted twice a year, and that the program consistently scores 100 percent.

- Sandra Middleton, Member, Board of Directors, Jude 22/Senior Nutrition Center, described the nonprofit organization that serves groceries to seniors citizens living under low-income circumstances. According to Ms. Middleton the center is located in the downtown area of Las Vegas, where there is no bus service and the majority of the clients are walk-ins; she reported they serve approximately 3,500 clients a year. The volunteers compile about 30 to 35 items of donated groceries, which are available monthly for the senior citizens to pick up. The bags include staples such as beans, bread, cheese, rice, pasta, peanut butter, and occasionally fruits and vegetables. The packaged items are not nutritionally complete and are only available once a month. Ms. Middleton said that the majority of the clients fall below the poverty level and to qualify must be at least age 60. (Ms. Middleton's handout is available as **Exhibit Q**.)

Dental, Vision, and Prescription Drug Services for Senior Citizens

(As directed by Chairwoman McClain, this agenda item was taken out of order.)

- Laurie Olson, Program Manager, Senior Rx and Disability Rx, DHHS, provided an updated report on the prescription drug program. Ms. Olson testified that the program recently accumulated fund reserves and, in 2006, the DHHS was able to implement Disability Rx, which has also accumulated revenue reserves. She explained the 2007 Legislature instructed the program administrators to proceed with the additional benefits allowed under NRS, including visual, dental, and hearing programs. Ms. Olson reported an RFP was issued to locate experienced administrators familiar with these types of programs. In January 2008, the Nevada Legislature's Interim Finance Committee authorized implementation of the contracts with limited services. In March, the agency's contract for a vision provider was approved by the State Board of Examiners, which allows for an annual eye examination, frames, and lenses for a $25 co-pay, with limited access to discounted services.

  In addition, Ms. Olson stated it is anticipated that the Board of Examiners will approve the dental provider, and those members will have 100 percent coverage for preventative and diagnostic services, 80 percent coverage for basic services, and 50 percent coverage for major services with an annual benefit limit of $1,000. She concluded by outlining the income limits and the number of clients that will be served under the new programs, which is approximately 64 percent of the total enrollment.

- Linda L. Costa, M.B.A., Chief Administrator and Chief Financial Officer, Nevada Health Centers, Inc., testified with the aid of Microsoft PowerPoint presentation (**Exhibit R**) to describe the services provided in the 27 health facilities throughout the State. Ms. Costa reported that the procedures, many on a sliding fee scale, include dental services, a mobile mammogram van, an obstetrics and gynecological center, and free homeless services. Additional service sites include: Child Haven, Carson Mental Health, the Vitality Center, and Public Health Services, and clients are also served under the Internal Pharmacy Program.

  In addition, Ms. Costa reported that Nevada Health Centers, Inc., serve over 252,000 clients a year in the seven Women, Infants and Children centers. She provided an outline on the sites included in the Center's Dental Programs, which include: two mobile vans, one located in Elko and one in Las Vegas; the Elko Medical and Dental Center; and the Eastern Family Medical and Dental Center. Ms. Costa explained that regular dental check-ups are not a priority to most senior citizens; the majority of elders are on a fixed or limited income. The high cost of dental care is the primary reason seniors do not get the immediate and preventative dental care they need; 42 percent of the patients surveyed had not visited a dentist in five or more years, and 80 percent said that the main reason they visited was due to tooth pain. The dental services provided allow seniors to have routine dental care, hygiene instruction, and the treatments needed. Concluding, Ms. Costa briefly mentioned the services provided under the Senior Podiatry Grant.

Home Maintenance and Modification Services for Senior Citizens

(As directed by Chairwoman McClain, this agenda item was taken out of order.)

- Albert Weiss, Administrator, Weatherization Program, HELP of Southern Nevada, offered background information on outreach services provided to the Las Vegas community. Mr. Weiss primarily addressed the weatherization program and detailed the following items: (1) the funding sources; (2) the coverage area; (3) the services and weatherization jobs that are installed or provided at no cost to the clients; (4) and the amounts saved in utility bills for senior citizens and persons on limited incomes. (Mr. Weiss provided information referenced as **Exhibit S**.)

  In addition, Mr. Weiss outlined the demographics, types of dwellings, application and eligibility process, and the documented growth indicating the need for the HELP services increasing each year. Priority is given to seniors age 60 and older, persons with disabilities, and families with small children. The primary goal of the program is the reduction of utility bills; he said that a person does not need to go without food or medication to pay utility bills.

  Mr. Weiss explained that once a home has been weatherized, the staff of HELP cannot return to do further maintenance for five years. He stated that in cases of emergency that involve air conditioning needs, the agency responds within 24 hours. He noted that deadly heat can build in a mobile home and reach temperatures of 130 degrees.

- Cynthia Baca, Executive Director, Rebuilding Together, described the organization as a leading volunteer organization with the mission to rehabilitate the homes of low-income senior citizens, particularly those with disabilities. Ms. Baca stated they are affiliated with the national Rebuilding Together organization and said there is an associate office in every state, which performs a variety of services including repairs that involve licensed contractors and volunteer team participation. (Ms. Baca provided a copy of her testimony, referenced as **Exhibit T**.)

Services for Social Interaction, Mobility, and Physical Activity for Senior Citizens

(As directed by Chairwoman McClain, this agenda item was taken out of order.)

- Barry Gold, Director of Government Relations, AARP Nevada, provided a Microsoft PowerPoint presentation (**Exhibit U-1**), which outlined the ideal goals of livable communities. Mr. Gold offered facts relating to the challenges of costs, delivery, the need for local services, and the opportunities of having history's largest population of educated and skilled older adults. Mr. Gold summarized a project implemented in New York State, Project 2015, which is a study of the state's agencies and how they are meeting the needs of senior citizens. The project also examined which services would be needed 15 years from now. Secondly, Mr. Gold spoke on a

similar program identified as Arizona's Plan for an Aging Population. He suggested that similar types of visionary programs be implemented in Nevada.

Mr. Gold provided additional AARP documents (**Exhibit U-2**, **Exhibit U-3**, **and Exhibit U-4**) and discussed the populace maturing in America and outlined 11 items identified as areas of concern (please refer to **Exhibit U-1**).

- Jeffrey Klein, Executive Director, Adult Day Care Center of Las Vegas, commented on the day care center for adults and its services. Mr. Klein testified with the aid of a Microsoft PowerPoint presentation (**Exhibit V-1**) and provided the Subcommittee with additional information on adult day health care services (**Exhibit V-2 and Exhibit V-3**). He listed the requirements for a successful adult day care center, which include: (1) an efficient transportation system; (2) the ability to deliver nutritious food; (3) competent health care services; and (4) the ability to provide a pleasant living environment dedicated to community living with independence and dignity. He said the Center is dedicated to the principle of maintaining a high quality of life for the elderly to be able to age in place with strict avoidance of institutionalization. In addition, the Center offers respite for caregivers from their 24-hour responsibilities. Mr. Klein described the varied programs available and explained that the clients are engaged in motor activities, mental health-sharpening activities which enhance memory, sequencing, and motor planning. In addition, the center offers entertainment, exercise, and recreational activities on a daily basis.

NEWS SERVICE FOR SENIOR CITIZENS WITH VISUAL IMPAIRMENT

(As directed by Chairwoman McClain, this agenda item was taken out of order.)

- Leon Rose, Nevada Representative, Newsline for the Blind, provided testimony regarding the digital talking system that allows the visually impaired to read a newspaper in a similar fashion as persons who are sighted. Mr. Rose explained that Nevada is one of eight states that does not subscribe to the NFB Newsline service, which incorporates approximately 256 daily publications. Therefore, Nevada newspapers are not available to the State's senior citizens and other residents who are legally blind, which he estimated, number between 28,000 and 40,000. Mr. Rose stated his request is for an annual appropriation for the NFB Newsline system, to be administered through the library system. He said the amount requested would total approximately $30,000 per year to provide two newspapers to be accessed via computer speech technology over the telephone by the visually impaired. Mr. Rose stated the figure would amount to approximately one dollar per blind per person per year to have the ability to independently select any section of a newspaper and read any article they choose by use of the telephone, rather than their eyes.

- Scott A. White, Director of Sponsored Technology Programs, National Federation of the Blind (NFB), Baltimore, Maryland, provided the Subcommittee with an extensive packet of information on the Newsline service (**Exhibit W**). The NFB Newsline system provides services not only for the blind, but also: (1) the print-disabled

population; (2) persons who are disabled or have mobility impairments and are unable to hold or turn pages of a newspaper; and (3) persons with age-related visual impairments.

- Mr. Rose pointed out that the list books, magazines, newspapers, and journals, include many national publications. The NFB Newsline uses the same criteria as the federally-funded National Library Service, which also provides books on tape for the blind.

- Mr. White explained that through an agreement with the Associated Press and United Press International updates are acquired hourly. Since 2006, the NFB Newsline system has included detailed and interactive television listings. In addition, the system is available 24 hours per day, 365 days a year, and can be accessed via a touch-tone telephone. He provided a demonstration on his ability to access the program, set-up the equipment, maneuver through the system prompts, and enabled the Subcommittee to hear the audio NFB Newsline reading of a Maryland newspaper.

In response to a question from Chairwoman McClain, Mr. White explained the systems are funded differently in each state, usually as a state appropriation, or by the teletype system or relay center for the deaf, in which a small tax is applied to every monthly telephone bill.

- Chairwoman McClain said that Nevada may have options in locating a funding source, such as the Bureau of Services to the Blind and Visually Impaired, Rehabilitation Division, DETR, and she directed the Subcommittee's staff to research possible alternatives. Chairwoman McClain further suggested that a letter of recommendation may serve to promote and move the process along.

- Chairwoman McClain announced that the remainder of the agenda items would be rescheduled to a future date.

PUBLIC COMMENT

- Amada Ratcliffe, Program Coordinator, Consumer Direct Personal Care, testified that her organization is a Medicaid service provider and a home health care service for senior citizens and the disabled. Ms. Ratlcliffe explained they provide resources for persons who want to manage their own care. She requested the opportunity to provide a presentation during a future meeting.

ADJOURNMENT

There being no further business to come before the Subcommittee, the meeting was adjourned at 4:46 p.m.

Respectfully submitted,

_____
Ricka Benum
Senior Research Secretary

_____
Amber J. Joiner
Senior Research Analyst

APPROVED BY:

_____
Assemblywoman Kathy McClain, Chair

Date: _____

LIST OF EXHIBITS

Exhibit A is the "Meeting Notice and Agenda" provided by Amber J. Joiner, Senior Research Analyst, Research Division, Legislative Counsel Bureau (LCB).

Exhibit B is a Microsoft PowerPoint presentation dated March 18, 2008, titled "*Nevada Revised Statutes* Relating to Activities of Daily Living" provided by Amber J. Joiner, Senior Research Analyst, Research Division, LCB.

Exhibit C is a copy of the Service Specifications for each caregiver service provided by the Aging Services Division, Department of Health and Human Services (DHHS).

Exhibit D is a Microsoft PowerPoint presentation titled "Mental Health Problems in Older Adults" provided by Upinder Singh, M.D., F.A.C.P., Chief of Geriatrics, Southwest Medical Association, Clinical Associate Professor, University of Nevada School of Medicine.

Exhibit E is a copy of the "2006/2007 Senior Citizens Survey Results, Nevada Division for Aging Services" dated March 12, 2008, submitted by Marilyn Wills, Deputy Administrator, Aging Services Division, DHHS.

Exhibit F is a copy of the "2008 Grantee Survey on Senior Services, Nevada Division for Aging Services" submitted by Marilyn Wills, Deputy Administrator, Aging Services Division, DHHS.

Exhibit G is a series of informational brochures provided by Annette B. Smith, Social Work Supervisor, Homemaker Home Health Aide Program and Alternative Health Care Program, Clark County Social Service, which include:

1. A pamphlet titled "Homemaker Home Health Aid Service, A Homemaker Program";

2. A leaflet titled "Alternative Health Care Service, A Homemaker Program"; and

3. A pamphlet titled "Clark County Social Service Senior Services."

Exhibit H-1 is a Microsoft PowerPoint presentation titled "Nevada Lifespan Respite Care Coalition" provided by Jane E. Fisher, Ph.D., Executive Director, Nevada Caregiver Support Center, University of Nevada, Reno (UNR).

Exhibit H-2 is a document titled "Nevada Lifespan Respite Care Coalition Mission Statement" submitted by Jane E. Fisher, Ph.D., Executive Director, Nevada Caregiver Support Center, UNR.

Exhibit I is a compilation of public service pamphlets submitted by Steve Robbins, President, Visiting Angels, Living Assistance Services, Las Vegas, which are titled:

- "Fall Prevention—How to Reduce the Risks of Falling in Older Adults";
- "Guideposts for Coping—How to Cope with Your Aging Parents";
- "Fire Safety for Seniors—Why Seniors Are at Risk and What to Do About It";
- "In Case of Emergency—ICE Your Cell Today For Peace of Mind";
- "Long Distance Caregiving—How to Care For Your Loved Ones When You're Miles Away";
- "Safety for Seniors at Home—Making Your Loved One's Home Safe";
- "Talking With Older Drivers—Is It Time To Put The Brakes On?";
- "Talking To Your Loved One—Discussing Home Care With Your Loved One"; and
- "Veterans & Spouses Benefits—U.S. Armed Services Pension Benefits."

Exhibit J is a Microsoft PowerPoint presentation titled "Home Care Services" prepared by Stephanie Eigenrauch, Administrator, Dynamic Home Healthcare, Las Vegas.

Exhibit K is an informational handout titled "In-Home Personal Services for Senior Citizens" submitted by Tammy Sisson, Administrator, Lend-A-Hand Senior Services, Carson City.

Exhibit L is a prepared statement dated March 18, 2008, titled "Executive Summary" submitted by Laurie Moore, M.S.G., L.A.S.W., Director, Senior Mental Health Outreach Program, Las Vegas.

Exhibit M is a document dated March 18, 2008, titled "Chronic Disease and Medication Management for Senior Citizens" presented by Lawrence J. Weiss, Ph.D., Director and Associate Professor, Sanford Center for Aging, UNR.

Exhibit N is a Microsoft PowerPoint presentation titled "Our Town" presented by Julie Murray, Chief Executive Officer, Three Square, Las Vegas.

Exhibit O-1 is a document titled "Hunger Among the Elderly Population in Nevada" submitted by Cherie Jamason, President and Chief Executive Officer, Food Bank of Northern Nevada, Reno.

Exhibit O-2 is a pamphlet titled "Community Hunger 2006" distributed by the Food Bank of Northern Nevada, submitted by Cherie Jamason, President and Chief Executive Officer, Food Bank of Northern Nevada, Reno.

Exhibit P is a handout titled "Meals on Wheels Program" submitted by Sandy Martin, Client Services Manager, Catholic Charities of Southern Nevada, Las Vegas.

Exhibit Q is a handout titled "Jude 22" provided by Sandra Middleton, Member, Board of Directors, Jude 22/Senior Nutrition Center, Las Vegas.

Exhibit R is a Microsoft Power Point presentation dated March 18, 2008, provided by Linda L. Costa, M.B.A., Chief Administrator and Chief Financial Officer, Nevada Health Centers, Inc.

Exhibit S is a series of documents submitted by Albert Weiss, Administrator, Weatherization Program, HELP of Southern Nevada, which consist of:

1. An informational sheet titled "Weatherization Saves Energy and Reduces Power Bills" distributed by HELP of Southern Nevada;

2. A pamphlet titled "Take Control of Your Energy Use" provided by Sierra Pacific Company and Nevada Power; and

3. A pamphlet titled "Where Do Your Energy Dollars Go?—Household Appliance Guide" provided by Sierra Pacific Company and Nevada Power.

Exhibit T is the written comments of Cynthia Baca, Executive Director, Rebuilding Together, Las Vegas, dated March 18, 2008.

Exhibit U-1 is a Microsoft PowerPoint presentation dated March 18, 2008, titled "Livable Communities" presented by Barry Gold, Director of Government Relations, AARP Nevada, Las Vegas.

Exhibit U-2 is a document titled "The Maturing of America—Getting Communities on Track for an Aging Population, Executive Summary" submitted by Barry Gold, Director of Government Relations, AARP Nevada, Las Vegas.

Exhibit U-3 is a series of *AARP Community Chest* publications which are titled:

1. "Livable Communities Maintaining Mobility—Keeping the Connection" dated May 2007;

2. "The Transportation Planning Process—Structuring the Vision for Mobility" dated June 2007; and

3. A document titled "Ten 'Best Practices' for Communities to Consider to Address the Needs of an Aging Population"—Source: 2006 "*Maturing of America*" Study.

Exhibit U-4 is a publication titled "The Maturing of America—Getting Communities on Track for an Aging Population" prepared by the MetLife Foundation, submitted by Barry Gold, Director of Government Relations, AARP Nevada, Las Vegas.

Exhibit V-1 is a Microsoft PowerPoint presentation titled "Adult Day Care Center of Las Vegas, Lied/Sinai Senior Care Campus" prepared by Nevada Senior Services Inc., submitted by Jeffrey Klein, Executive Director, Adult Day Care Center of Las Vegas.

Exhibit V-2 is a handout titled "Adult Day Care Center of Las Vegas, Lied/Sinai Senior Care Campus" submitted by Jeffrey Klein, Executive Director, Adult Day Care Center of Las Vegas.

Exhibit V-3 is a document titled "White Paper: Adult Day Health Care Services" provided by Jeffrey Klein, Executive Director, Adult Day Care Center of Las Vegas.

Exhibit W is a packet of information provided by the National Federation of the Blind titled "What is the National Federation of the Blind?" submitted by Scott A. White, Director of Sponsored Technology Programs, National Federation of the Blind, Baltimore, Maryland.

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.