



# NEVADA LEGISLATURE

## NEVADA SILVER HAired LEGISLATIVE FORUM

(*Nevada Revised Statutes* [NRS] [427A.320](#))

### MINUTES

**November 6, 2025**

The first meeting of the Nevada Silver Haired Legislative Forum for the 2025–2026 Interim was held on Thursday, November 6, 2025, at 10 a.m. in Room 165, Nevada Legislature Office Building, 7230 Amigo Street, Las Vegas, Nevada. The meeting was videoconferenced to Room 3137, Legislative Building, 401 South Carson Street, Carson City, Nevada.

The agenda, minutes, meeting materials, and video recording of the meeting are available on the Forum’s [meeting page](#). The video recording may also be found at <https://www.leg.state.nv.us/Video/>. Copies of the audio or video record can be obtained through the Publications Office of the Legislative Counsel Bureau (LCB) ([publications@lcb.state.nv.us](mailto:publications@lcb.state.nv.us) or 775/684-6835).

### **FORUM MEMBERS PRESENT IN LAS VEGAS:**

Fran Almaraz, Senate District 21, Forum President  
Marilyn E. Jordan, Ed.D., Senate District 9, Vice President  
Fred L. Silberkraus, Senate District 5  
Michele Johnson, Senate District 6  
Laura Leavitt, Senate District 8  
Joann M. Bongiorno, Senate District 10  
Frank B. Slaughter III, Senate District 11  
Patrick Thorne, Senate District 12  
Rodger Troth, Senate District 18  
Peggy Leavitt, Senate District 20

### **FORUM MEMBERS PRESENT IN CARSON CITY:**

Greg Smith, Senate District 13  
Cher Daniels, Senate District 14  
Kathleen Doyle, Senate District 16  
Lisa Coffron, Senate District 17

**FORUM MEMBERS ATTENDING REMOTELY:**

Donna Darden, Senate District 1  
Leonard Folmar, Senate District 4  
Bob Linden, Senate District 7  
Gwen Shonkwiler, Ph.D., Senate District 15  
Catherine McAdoo, Senate District 19

**FORUM MEMBERS ABSENT:**

Elizabeth Martinez, Senate District 2  
Valarie Woods, Senate District 3

**LEGISLATIVE COUNSEL BUREAU STAFF PRESENT:**

Patrick Ashton, Senior Principal Policy Analyst, Research Division  
Angelina Garcia, Senior Policy Analyst, Research Division  
Crystal Rowe, Assistant Manager of Research Policy Assistants, Research Division  
Melissa Jimenez, Research Policy Assistant, Research Division  
Virginia Weitzel, Research Policy Assistant, Research Division  
Bryan Fernley, Chief Deputy Legislative Counsel, Legal Division

*Items taken out of sequence during the meeting have been placed in agenda order.*  
[Indicate a summary of comments.]  
{Text added for clarity.}

## **AGENDA ITEM I—OPENING REMARKS**

### ***President Almaraz:***

Good morning and welcome to the first meeting of the Nevada Silver Haired Legislative Forum for the 2025 Interim. Today’s meeting will cover several items. To start, we will have introductions. Next, we will hear presentations from food bank providers, the Department of Human Services (DHS), Nevada Health Authority (NVHA), and our own staff. After the presentations, we will discuss future agenda items and meeting dates. Finally, we will have the election of officers.

We have had questions about an item that is near the end of our presentation—Item VIII. We decided to have it towards the end of the presentation. If you have any questions, we should cover them all during that agenda item.

[President Almaraz reviewed meeting protocol and information related to providing public comment.]

## **AGENDA ITEM II—PUBLIC COMMENT**

### ***President Almaraz:***

Members of the public can provide public comment in person, by phone, or submit written comment to the Forum’s email.

[President Almaraz called for public comment; however, no testimony was presented.]

## **AGENDA ITEM III—INTRODUCTION OF FORUM MEMBERS AND STAFF**

### ***President Almaraz:***

Our first item of business is going to be the introduction of Forum members. We have several new faces here, and we would like to get to know each other better. Members, I will call on each of you by your Senate District. Please introduce yourselves, identify your nominating Senator, and share your interest in the Forum. Please also note how long you have served on the Forum or indicate if you are a new member. We will begin with Ms. Darden from Senate District 1.

### ***Ms. Darden:***

I am sponsored by Senator Shelly Cruz-Crawford. I am a new member, and I am happy to be here. My passion is to make sure that our elderly are taken care of in a proper manner, as we see they are not—that is why I am here. I hope that whatever expertise I have, I can pass on to the group.

### ***President Almaraz:***

[President Almaraz called on Ms. Martinez and Ms. Woods; however, they were not present.]

Maybe we will hear from Mr. Folmar later.

**Ms. Johnson:**

I have lived in Las Vegas since 1959. I used to run a nonprofit organization. I am part of Senate District 6 with Senator Cannizzaro. All the items we have suggested—we approach—is everything I did in my nonprofit world. I am looking forward to being part of this Forum.

**Mr. Linden:**

I have had the pleasure of serving on the {Forum} since last spring. I was nominated by Dr. David Orentlicher in the Assembly, and my background happens to be 30 years in health care management. I was also a business owner here in Las Vegas for 16 years. I retired the second time in 2014, and I am enjoying the over 300 days of sunshine each year.

**President Almaraz:**

Thank you, Mr. Linden. As we are appointed by our Senators, I am sure Senator Roberta Lange is the person who appointed you.

**Ms. Laura Leavitt:**

I am representing Senate District 8—Senator Marilyn Dondero Loop’s District. This is my third [inaudible]. I am retired from the State of Nevada in health and human services, and I have lived in Nevada over 50 years. I am interested in all issues that are important to seniors in our community, and what I hear brought up the most are health care and insurance, housing, and scams. I am proud of what we have accomplished since I have been on this {Forum,} and I look forward to what we can accomplish in the future. I am a member of the American Federation of State County Municipal Employees (AFSCME) State Retiree Chapter in Nevada, Retired Public Employees of Nevada (RPEN), and the Nevada Alliance for Retired Americans. It is great to be here.

**Vice President Jordan:**

I am here today representing Senate District 9. Having been a member of the Silver Haired Forum for more than ten years, I am pleased to be back in session, working, supporting, and representing our Nevada seniors. My focus this {interim} is going to be on senior housing, which is sorely needed. My background is in education, public policy, and finance. I am delighted to be back and welcome all of you.

**Ms. Bongiorno:**

I have been a resident of Nevada since 1958. I have been on the Forum for 16 years, seeing many changes, and my background originally was in music. I am on the Wall of Fame at the University of Nevada, Las Vegas (UNLV) as one of the pioneers, and I served the United States Department of Defense when I was 18 years old. I traveled to many countries—Korea, Vietnam—a total of 68 different countries, and I enjoyed them all and learned much.

In two months, I will be 90 years old. On Monday, I had the privilege of speaking to a marketing group at Southern Utah University, which I enjoyed. I am a financial consultant, and presently—which later on I hope to discuss—I am working on an app with a gentleman who is a programmer who used to be with Jeff Bezos, to develop assistance to caretakers who have family members or people with Alzheimer’s or dementia.

**Mr. Slaughter:**

I represent Senate District 11—Senator Lori Rogich. My background was in the U.S. Marine Corps as well as the U.S. Air Force. I went from a grunt to a cook, went back to school, and became a laboratorian at UMC for almost 20 years. I was also the assistant boxing coach at UNLV for ten years.

Presently, I work with kids with addiction at Mission High School in Las Vegas, and for seven years I have been working with people with Parkinson’s disease.

**Mr. Thorne:**

I represent Senate District 12. I was nominated by Senator Julie Pazina. I am a lifelong resident of Nevada—born and raised here in Henderson [inaudible]. I am a mostly retired Certified Public Accountant (CPA). I do not have any expectations of myself yet about what my primary focus should be, but from what I have heard, all of those are clearly worth the time and effort that this {Forum} puts forward, and I look forward to being part of it.

**Mr. Smith:**

I represent Senate District 13, appointed by Senator Skip Daly, and have been a resident of Nevada since 1963. I came from Battle Mountain originally but have been in the Reno area for 36 years. I did represent the Assembly District in Sparks in the 2019 Session. I am here and looking forward to representing the senior citizens of Senate District 13 for Senator Daly.

**Ms. Daniels:**

I represent Senate District 14—Senator Ira Hansen. This is my second {interim}. I am interested in all things that help seniors, as there are many who are in need, and I hope to be of help.

**Dr. Shonkwiler:**

I am on the East Coast right now, getting ready to celebrate my 50<sup>th</sup> high school reunion in Saint Pete, but I have lived in Reno, Nevada since 1991. I represent Senate District 15 and my good friend, Senator Angie Taylor, whom I have known since the day I moved to Reno. I have spent my entire professional career at the University of Nevada, Reno, with my last 15 years working at the School of Medicine.

My passions are affordable housing and health care—issues that all Nevadans face, but especially the vulnerable population of our senior citizens, myself included. These are important issues, and I am happy to be able to represent my District and be part of this group.

**Ms. Coffron:**

I am here representing Senator Robin Titus and Senate District 17. I live in Minden, Nevada, and I have been a publisher serving California and Nevada communities for 26 years. I have a tremendous amount of friends and family members who are seniors, and I want to see what I can do to help make life better for all of us.

**Ms. Doyle:**

I represent Senate District 16, Senator Lisa Krasner's District. My past career was in Washington, D.C., with the U.S. Department of State for many years. After that, I moved to California and now Nevada for the past 12 years. I am a new member to the Forum.

I have always taken an interest in government, and I have known Lisa for many years. Being in Reno, I come down to Carson City to testify and attend hearings during the legislative session. I am interested in what our Legislature can do.

I recently work with the Elks Club to develop programs for seniors. I am looking forward to helping and being on this Forum.

**Mr. Troth:**

I am from Senate District 18, representing Senator John Steinbeck, which is in the northwest corner of Las Vegas. I have been here about 35 years. I am retired military and defense contractor in the air control business. This is my third term on the {Forum}, and I am looking forward to continuing to work on senior issues.

**Ms. McAdoo:**

I represent Senator John Ellison from Senate District 19, which includes the rural counties of Nevada—Elko, Eureka, Lincoln, and White Pine Counties, as well as parts of Clark and Nye Counties. I have been in Nevada for more than 50 years and have about 25 years of experience in nonprofit work. I was most recently an elected Regent for the Nevada System of Higher Education. I retired from that in 2023 and began volunteering at the Elko Senior Center. For the last 3 years, I have managed the food pantries there. I look forward to the work we get to do together.

**Ms. Peggy Leavitt:**

I am representing Senate District 20—Senator Jeff Stone. I was originally nominated by Dr. Joe Hardy, but he termed out and Senator Stone continued my appointment on this {Forum}, which I appreciate. I came to Las Vegas in 1970. My career has been as a social worker. I worked at the Southern Nevada Children's Home of Boulder City for 20 years, and when that closed, I was hired as a manager at Child Haven—I also retired from Child Haven.

I served as a City Councilwoman on the Boulder City Council for eight years. I have been involved in senior issues in Boulder City. I was on the Board of Directors at the Senior Center and also at Lend A Hand of Boulder City, and I am currently a Meals On Wheels driver. I am also currently serving as a Director of the Las Vegas Alliance for Religious Freedom and Human Dignity—we promote being peacemakers and building bridges. We recently had a symposium, which was successful, and had two representatives who are ambassadors on an international level for human rights. It was outstanding.

I have enjoyed serving in this capacity and have learned about the issues facing senior citizens. I am happy to continue serving in this position.

**Mr. Silberkraus:**

I am representing Senate District 5, overseen by Senator Carrie Buck. I have been on the Forum approximately 14 years, and I enjoy it tremendously. I have been a resident of southern {Nevada} going on 26 years now. I am deeply interested in senior affairs—what affects our elderly population, both health- and housing-wise.

I am also a strong advocate for animal welfare and was instrumental in setting up a new program in the City of Henderson, which I would like to give a plug for, called Henderson Cats. It is the first time the City of Henderson was granted permission to do what we call TNR—trap, neuter, and release—something that has been going on in Las Vegas for many years. Henderson has finally allowed the program to take effect.

I am watching out for people from the older end of the spectrum to the youngest of kittens. Public service is a wonderful avenue for spending time, energy, and effort. I look forward to this being highly productive and addressing elements and issues that are important to our community, especially our seniors. I am delighted to be here again and pleased to be reappointed by Senator Buck.

**President Almaraz:**

I have been a resident of Las Vegas since 1980. I have served on this {Forum} several years. I do not remember the first year, so I cannot tell you how long, but it has been a while, and I have enjoyed it.

I am on the board of the United Labor Agency of Nevada (ULAN), and we {provide} food and food banks for members of unions and for the community at large of Las Vegas. I am also President of the Teamster Retirees, and through them, we work with seniors on many issues.

Originally, I was nominated from Senate District 10, but with redistricting, I am now with Senator James Ohrenschall of Senate District 21. I would like to welcome all of you to the Forum, both new members and old. I am sure we will have a productive year.

Next, I would like our Forum staff to introduce themselves. We will begin with our Forum Coordinator, Mr. Ashton.

**Mr. Ashton:**

I am a Policy Analyst with the Research Division of the LCB. I serve as nonpartisan staff, and I have been assigned to the Forum as a Forum Coordinator. I have been involved with the Forum for almost eight years.

It is my pleasure to serve again as your Forum Coordinator for this interim.

**Ms. Garcia:**

This is my first time being on the Forum, but I respect the work done here and the folks who take time out to be here. I am excited to work with everybody. I came over from the Senate, so I have a little bit of legislative experience, but I am excited to learn and be a part of this.

**Mr. Fernley:**

I am with the Legal Division of the LCB. I serve as the Legal Counsel for the Forum. I have done that for 12 years now. I started with the LCB back in 2005, and I have been working with the Forum since 2013. I am happy to be here again and to provide any legal counsel related to the Forum's duties that may be necessary.

**President Almaraz:**

Our Forum Secretary, Ms. Melissa Jimenez, is unavailable today, but you will have the opportunity to meet her at a future meeting. Instead, Ms. Rowe and Ms. Weitzel are our secretaries for today's meeting. They are present in Carson City.

Thank you, staff, for all you have done and will continue to do to support the Forum throughout the interim and session.

I would also like to take a moment to recognize our former staff, Ms. Ashlee Kalina and Ms. Julianne King. Ms. Kalina staffed the Forum since 2021 through two interims and two sessions. Her deep knowledge of senior issues at both the state and national levels, combined with her strong organizational and writing skills—especially her work on letters and bill remarks—will be truly missed.

Ms. King served as the Forum Secretary since 2018. She kept the Forum on track by coordinating meetings, preparing minutes, and even taking her service a step further by providing nonpartisan testimony on the Forum's bill during the 2025 Session. On behalf of the Forum, I want to extend our heartfelt gratitude to these highly skilled professionals and wish them the best in their future endeavors with the LCB.

Last, but certainly not least, I would like to recognize all the staff working behind the scenes to ensure the Forum meetings and the entire Legislature run smoothly. This includes the Audio Visual and Hearings Unit (AVH), Information Technology Services, the Janitorial Unit, and Legislative Police. Thank you, all.

We are going to go back to a member who was unable to speak a few minutes ago. Mr. Folmar, please go ahead.

**Mr. Folmar:**

I represent the great Senator Dina Neal, Senate District 1. We are from the center of the State of Nevada. My personal passion is that we in this community—the senior community—become active in our collaboration with the younger folks, the folks with fast legs. We have the experience, but our country and our nation, in order to move forward, will have to bring these together for our future.

**President Almaraz:**

This concludes the introduction of Forum members and staff.

## **AGENDA ITEM IV—OVERVIEW OF SERVICES OFFERED BY FOOD BANKS TO ADDRESS FOOD INSECURITY AMONG SENIORS IN NEVADA AND POLICY CONSIDERATIONS**

### ***President Almaraz:***

We will now move to the Overview of Services Offered by Food Banks to Address Food Insecurity Among Seniors in Nevada and Policy Considerations. We will have a presentation by Mr. Shane Piccinini and Mr. Jeff Duncan, Chief of Staff of Three Square Food Bank.

### ***Shane Piccinini, Manager, Government Relations, Food Bank of Northern Nevada (FBNN):***

Good morning, Chair and members of the {Forum}. It is a privilege to be here in front of the Forum to talk about food security in Nevada with my colleague in Las Vegas, Jeff Duncan.

The first thing we wanted to address was the response to the government shutdown, which we are now in our 37<sup>th</sup> day of. Three Square and FBNN have been making a multifaceted, heavy lift to respond to the needs of both our neighbors who are enrolled in the Supplemental Nutrition Assistance Program (SNAP) and furloughed federal employees who are going to miss their second full paycheck tomorrow. Between the two food banks, there are over 300 partner agencies statewide. Every county has at least one partner agency; in most cases, the counties have two, and there are several in the big counties of Washoe and Clark.

We are doing everything possible to respond to this, as you are aware by reading in the newspaper and paying attention to what the Legislature has done. The Legislature and the Governor's Office have graciously—and, I think, miraculously—approved funding for the food banks to be able to respond to this, using two different funding sources: reallocated American Rescue Plan Act (ARPA) dollars, and then the Interim Finance Committee (IFC), last Thursday, created an additional \$30 million contingency fund we will be able to draw down if this were to drag into December.

Currently, the two food banks are going into the supply chain in the marketplace and acquiring as much food as we can to be able to bolster the existing partner agencies and food distributions that we both operate at both ends of the state. We are doing additional pop-up distributions as well. The response for each food bank is different, given the service area we have and where the majority of our neighbors we serve are. It is food-bank specific in terms of how the food is going out, but every effort has been made to ensure that every neighbor who needs it has access.

At the end of this, and after Jeff has a chance to present the information for Three Square, we would be happy to take any questions you have regarding this. Briefly, I am going to go through what FBNN does and is doing ([Agenda Item IV A-1](#)) ([Agenda Item IV A-2](#)) ([Agenda Item IV A-3](#)) ([Agenda Item IV A-4](#)), and then I will turn it over to Jeff.

As I was saying before, FBNN is currently serving 160,000 neighbors, and that number is going to go up as we start to see the October and November numbers. Because of the way we report through our partner agencies, there is going to be a lag before we know how

many neighbors we are going to serve in these two months. We are expecting to see in October, November, and possibly December a 25 percent increase in the number of people in need. For us, that would equate to around 40,000 additional neighbors who have probably never gone to a food bank before.

We began as a small pantry, but have grown into a big regional food hub. We serve 13 of the 17 counties in Nevada. The FBNN has been in business for 40 years, and last year we provided over 23.1 million meals.

The programs we operate are Golden Groceries, which is a senior market; Mobile Harvest, where we bring one of our big tractor-trailers into a neighborhood and distribute fresh produce—and sometimes eggs and fresh meat/proteins—all for free. We have the Senior Nutrition and Wellness Program/Senior Boxes, formerly known as Commodity Supplemental Food Program (CSFP), which is a U.S. Department of Agriculture (USDA) run commodities program that allows us to distribute a supplemental box of nutrition to seniors who income qualify. I believe they have to be at 130 percent of poverty or lower in order to qualify.

A few years ago, we started a new program called Produce On Wheels, which is a senior mobile market to give seniors access to fresh produce. The mobile market goes straight into the neighborhoods where seniors live to help reduce the number of trips they have to make to a pantry in order to get access to fresh groceries and fresh produce.

We operate a Prescription Pantry program, and these are programs where a provider would write a prescription for healthy food—primarily fresh fruits and vegetables, sometimes low-sodium diets—that they are able to take to a program enrolled in the Prescription Pantry to redeem for an additional allotment of fresh produce. A lot of those prescription pantries are located on-site where the provider is, but not all of them are; some of them are in the community and closer to where our neighbors live.

We also operate school pantries. There are close to 40 in Washoe County, which are there to allow caregivers of students to get access to food at a location that is convenient for them.

The biggest program we have at FBNN and Three Square—the two food banks are involved—is SNAP. This is, without a doubt, one of the most efficient programs to help our neighbors be food secure. There is no way the food banks would ever be able to provide the nutrition and the access to food that SNAP does.

When we talk about the policy proposals later on that we were asked to provide, a couple of them that I am bringing to the table are directly related to increasing food security towards SNAP. In the packet, with the assistance of the Division of Supportive {Social} Services (DSS), I give you a breakdown of the age brackets of our seniors who are enrolled in SNAP—people aged 60 and over. ([Agenda Item IV A-1](#)) I want to reiterate that anybody who is eligible for SNAP, or thinks they might be eligible, should apply for SNAP. This Program is changing people's lives, which is why we at the Food Bank are stressed about the fact that the USDA only provided partial benefits for the month of November to SNAP recipients—because we know this Program cannot be replaced.

Having gone through that background—what the food banks do and the programs we operate—there are a couple of them that Three Square does, which were not included in this list, that Jeff will get to. I want to talk about the changes made to Public Law 119-27,

otherwise known as House Resolution 1, because there are big changes coming that will impact the senior community. The first, and foremost, is for able-bodied adults without dependents, formally known as ABAWDs—although there are changes in H.R.1 changing that, so we are going to have to find a new acronym.

Under the old rules, people aged 55 or older were exempt from the time limit for accessing SNAP. The time limit is this: if you are required to comply with the work requirements for SNAP—meaning you do not have any dependents in your house who meet the qualifications, are disabled, or whatever the rules are—you now have to comply with the work requirements up to age 64. Before 2023, anybody who was aged over 50 did not have to comply; Congress changed that to 55 in the Biden Administration, and now it has been changed to 64. This is a big deal. This is going to require anybody eligible for SNAP to either work 80 hours a month or volunteer for 80 hours a month in order to maintain the benefit. There is a lot of education that is going to have to happen around this.

There were changes made to the Standard Utility Allowance and Heat & {Eat} energy {assistance} treatment. Previously, certain individuals were allowed to get deductions and shelter costs. Essentially, the rules have been changed, making it harder to access the treatment for getting Heat & Eat assistance. These were programs that were designed to help reduce utility costs in Las Vegas in the summer and up here in the north in the winter. The changes around that are going to be significant as well.

There are changes to what is called the “Thrifty Food Plan” (TFP), which determines the maximum or minimum benefit for a SNAP recipient for the entire Program. For decades, the TFP had been set at a specific rate. During the Biden Administration, because of an Act of Congress, the formula had been changed and required Congress—or the USDA—to reevaluate that every five years. They are repealing that five-year review requirement, which means that in future years, SNAP benefits will have less purchasing power for all of our neighbors who are in the Program. This is eventually going to result in reduced monthly benefits compared to indexing to inflation. This is also a big change. The Feeding America Food Bank Network, which Three Square and FBNN are members of, fought hard to get changes to the TFP over the years, and we are disheartened to see it is reverting back to the old system of not being updated unless Congress authorizes it.

Lastly, there is a significant cost shift of the program to the states. Under the old rules—before H.R.1—there was a 50/50 administrative match the state would pay with the federal government. House Resolution 1 shifts that administrative match to 75/25, which is 75 percent of state and 25 percent the federal government will take on. For context, for the current fiscal year (FY), this is an additional \$19 million the state did not plan on budgeting for.

In 2026—it would be FY 2027, October 2026—the State of Nevada will be on the hook for an error-rate penalty if our error rate for SNAP applications goes above 6 percent. I encourage you to invite DSS to come and do a fuller, deeper dive on these changes, and how they impact all of us in the state economically. However, that could mean the state could have to pay an additional \$100 million, or around \$110 million, to directly pay for the benefit that is going out.

Before, the SNAP benefit itself—the money going on the card—had been 100 percent funded by the federal government. Under this new formula, the states are going to have to pay, based on a sliding scale on their error rate, a percentage of the actual benefit. In a lot of

states with error rates over 10 percent, this can be a staggering number. Nevada has been consistently under 8 percent. We have been under 5 percent a couple of times, and we have been hovering around 7 percent for the last few years, but this is not an insignificant fiscal impact.

Here are a couple of the policy recommendations we came up with. The first problem is many seniors struggle with the paperwork, technology, and the frequency for renewals required for SNAP. The policy options are to extend the certification period for adults to 36 months instead of 12, as an example, and use the Elderly Simplified Application Projects, which allow for simplified forms, telephone interviews, longer certification periods, and automatic enrollment or data matching with Social Security or Supplemental Security Income systems to identify and enroll eligible seniors.

Another policy option is to standardize the SNAP formula. The standard SNAP formula often underestimates seniors' actual living expenses. There are options to adjust the shelter deduction rules to better reflect the true cost of housing for older renters and homeowners, especially in high-cost areas, which is everywhere in the state right now. Then, implement a senior cost-of-living adjustment (COLA) that ties maximum SNAP benefits for households of 60 or older to senior-specific indexes, such as the CPI-E, which is the Elderly Consumer Price Index.

Some of these things the State of Nevada can do on its own through waivers; some of them we will need to work with Congress, but all of it is important work that should be done.

The last recommendation I have is on physical mobility and technology barriers, which keeps many seniors from accessing or using SNAP benefits. There are a couple of things we could do here. We could expand our online purchasing agreements with retailers or allow for home-delivered groceries to be paid for with SNAP benefits—there are pilots in New York, Minnesota, and Arizona currently going on. Then, we could integrate SNAP enrollment into senior hub services, such as an Area Agency on Aging or congregate meal sites.

Those are three ideas I came up with that could help get more seniors enrolled in SNAP because senior representation in SNAP is low, and these are the easier asks we could get.

I will turn it over to Jeff in Las Vegas.

***Jeff Duncan, Chief of Staff, Three Square:***

It is a privilege to be in front of you again in my new capacity. I spent 13 years with the Aging and Disability Services Division (ADSD). I now have the honor and privilege of working on our advocacy and government relations work at Three Square ([Agenda Item IV B](#)).

I want to say thanks to Shane for putting that overview together. I will not repeat anything he said, but I will give you information specifically here in southern Nevada. While we are two separate food banks, we do a lot of things the same, but as Shane mentioned, we do some things a bit different.

We serve southern Nevada, so we serve Clark, Lincoln, Nye, and Esmeralda {Counties}. We have been doing that since 2007. Since opening, through our community partner network, we have distributed over 644 million pounds of food, reaching children, working families, older adults, veterans, and individuals in our rural and frontier areas.

We have a lot going on with the shutdown and the SNAP pause on the benefits, so the PowerPoint is a little thin, but I wanted to get it to you so we could have something to go over.

I am going to speak to the data, and I will be happy to go slow, and you can {ask} any questions at the end here. I want to make sure you all know that one in six individuals in southern Nevada—about 377,000 individuals—experience food insecurity, which boils down to one in five children, or roughly about 113,000 children. Together, that translates into about 72 missed meals per year, or an average of 6.3 meals per person.

Unfortunately, according to a recent report, our food insecurity rate in southern Nevada has gone from 14.7 up to 16 percent. This is all before the government shutdown, H.R.1, or anything we are experiencing today. I want to mention even with that, in the last four months before anything happened with the shutdown, before anything happened with SNAP, we were seeing a significant increase in individuals accessing our pantry sites through our community partners here in southern Nevada—to the tune of a 16 percent increase. The alarming number in there is that out of that 16 percent, 75 percent of them had never gone to a pantry before. Again, this is the previous four months before October even hit.

I will speak on SNAP, and I am sure we are going to get a lot of questions on this, hopefully our data can help support the questions you may have. Roughly about 395,000 individuals in our southern four counties are on SNAP. According to what we know today—this is a guesstimate because of our data systems—only about 35 percent of those individuals were actively going through a community partner pantry. This speaks to the power of SNAP and why it is so important for these individuals.

As Shane mentioned, we anticipate, with the SNAP reduction in benefits and everything going on, a 25 percent increase, which would be around—this is a guesstimate at this point in time—150,000 individuals who were on SNAP that may be going through our community partner pantries in the near future or right now during the shutdown.

More on the data and the programs. I know this is for older adults or for seniors, but I wanted to make sure we mentioned that we also serve people across the lifespan—children, et cetera. You will see that on the screen here.

I want to take a second to send a huge shout-out to all of our Three Square team members, our wonderful volunteer corps, our 150 community partners, and all the individuals in the community who have always supported the food bank or are continuing to support the food bank in this time in need. The last couple of weeks have been chaotic, and we have focused on nothing but our emergency response, and we simply could not do that without our volunteers, our donors, and all of our community partners. I cannot believe the individuals who have come out to help in any way they can, from the Regional Transportation Commission donating bus passes to individuals donating food, and all the community food drives. This huge shout-out is to southern Nevada. It has been the same for northern Nevada, but we appreciate all their efforts.

On children's programs—we have a backpack program for kids, which has weekend meal bags for individuals. We have our Kids Cafe, which is an after-school meal program. We also have our Meet Up and Eat Up—a summer food program for those individuals. As I go

through this PowerPoint, I want to make sure I highlight that we do not do this work alone. Everybody tends to refer to our food pantries as “food banks.” We are the solo food bank, but we then route much of our services out to the 150 community partners here in southern Nevada.

Now, the Program you brought us here to speak about, I will tell you about our programs for older adults. The first one I want to highlight is our Golden Groceries program. This provides nutritious, age-appropriate groceries to individuals 60 years and better across 30 sites here in southern Nevada. We also offer curbside and delivery options that reduce barriers for those who have limited mobility.

We have a partnership—Senior Community Meals. Thank you to ADSD for funding us for this program. This is a partnership we have with libraries in southern Nevada, where we provide free hot meals to individuals in those libraries across the Valley.

Moving on, we also have a DoorDash home delivery program. This is monthly grocery boxes with shelf-stable items, fresh produce, and bread. All of our menus are approved by a registered dietician to align with common needs like diabetes, hypertension, et cetera. Our deliveries reach homebound individuals who otherwise may go without a meal.

Our last program for older adults is our Lyft or bus passes, where we provide Lyft rides and bus passes to individuals who need access to get out to the community to get food.

This is a huge passion for me. As I mentioned, I spent 13 years at ADSD, and I was introduced to the “No Wrong Door” philosophy—shout-out to Cheyenne Pasquale, who you will be hearing from later. We have a program called Benefit Services Outreach, and this team are not referral agents like a 211 might serve. These are individuals who help families navigate SNAP, Medicaid, Medicare, utility assistance, and transportation—our call center advocates for people who call the phone line access. We go to places in the community to meet people where they are. I want to make sure I get on record and provide that phone number because they have been a crucial team for us in this emergency response in the last several weeks and ongoing. The Benefit Services Outreach team can be reached at (702) 765-4030.

In closing, I do not want to repeat anything Shane said about his policy recommendations. We share a common vision on that, but we also have a shared grant we received through Feeding America, which is a SNAP policy grant.

I want to make sure the Forum is aware there has been ongoing fraud, as far as individuals scamming the individuals who have Electronic Benefits Transfer (EBT) cards through skimming and scanning. There has been a lot of that over the last several months. Fortunately, in the last month, that has decreased. We are going to stand up efforts in that grant to help educate SNAP beneficiaries on changing their passwords on their EBT cards because, unfortunately, based on the policy at the Welfare Division, they are not able to replace stolen benefits.

What Shane put forward as far as recommendations are in line with what we are doing. In addition, one thing we are going to look at, especially now during this emergency response, is increasing our ability to drive services to meet the individual where they are—looking at additional delivery options for individuals who do not have the capacity or limitations to go to a community food pantry site. I think that was everything else Shane said.

I am happy to take any questions. Thank you for having us here today.

**President Almaraz:**

Thank you both for your presentations. If there are any questions from the Forum, please raise your hand.

**Dr. Jordan:**

I have several questions. Mr. Duncan, how effective are the Lyft program and bus passes? I know that has been difficult for a lot of people, and it is only a few days a month. How is that being implemented and upgraded?

**Mr. Duncan:**

Right now, we have a funding stream that helps us fund that program. One thing I can mention—Lyft, this month, because of the reductions in staff and delays, is giving free rides. I forgot to mention that. This month, they have waived the fees associated with a partner in that network, which is great news. Shout-out to Lyft for helping us with that.

We are continuing to look for funding streams to increase our delivery options. Based on your question, we need more to continue to meet those needs.

**Dr. Jordan:**

I appreciate that, and I appreciate your presentation this morning. It is important that we know the good things as well as the regular things.

I also have a question for Mr. Piccinini. I am interested in the implementation of the senior COLA. Given the differences in SNAP for seniors, I would like to have updated information, and how close we are to the senior-specific index becoming a reality.

**Mr. Piccinini:**

This was something we were getting closer to in 2023 and 2024. The change in administration has put this work on pause, but I am optimistic that once we are able to get a functioning federal government, we will be able to pick this work back up—going into 2026 with future farm bills or even in the Older Americans Act (OAA)—to try and figure out a way to give the state the ability to do that.

**Dr. Jordan:**

I am asking that question because, two years ago, we addressed a situation. Since 1991, there had been no changes in the personal income of our seniors in residential homes. I do not want to have to take another 15 years to see COLA change. I would like to know, if you can, please send us updated information so we can understand where we are with that policy.

**Mr. Piccinini:**

I would be happy to work with you and get you the most current, updated information, and as we get updates in the future, I will make sure we share those with the Forum.

**Ms. Bongiorno:**

I would like to know more about your application form, and how difficult it is for certain cultures or seniors to be able to understand and apply for it.

**Mr. Duncan:**

Can you be more specific on the application you are referring to?

**Ms. Bongiorno:**

To apply for SNAP.

**Mr. Duncan:**

I do not want to speak for the Division, but there are abbreviated applications our Benefit Services Outreach Team uses. The Team specifically gathers information on the front end, packages that up on behalf of the individual, and then sends it over to the Welfare Division for eligibility purposes. I cannot speak specifically on the application, or how we could further streamline it.

**Mr. Piccinini:**

Prior to 2023/2021, there were still paper applications that were primarily being used by seniors. There has been an effort to move those to more online. One of the biggest things we could do is try and figure out how to make online application access easier for seniors.

One of the things Congress took away in H.R.1 was the Internet expense deduction being an allowed deduction for cost-of-living expenses for the purposes of being eligible for SNAP. While that is not necessarily a huge reduction in the amount of money they would get every month, it still makes an impact. Making sure people have access to affordable broadband is an important key element to making access to government services—including the SNAP application—a cornerstone of that.

Hopefully, that comes close to answering your question.

**Ms. Bongiorno:**

My concern is there are many seniors who do not have computers, and do not have accessibility to that. How do they apply?

**Mr. Piccinini:**

Both food banks operate a telephone line they can apply through. Our outreach teams would be able to help them apply, submit the application, and collect the required documentation. We can do that right now.

**Ms. Coffron:**

In terms of the increase in participants in SNAP, is there a specific age group you have seen more of an increase in applications? I am curious if it is broken down that way and what it is.

**Mr. Piccinini:**

I will have to ask DSS specifically to get demographics on that. What I do know is that children and seniors make up over 50 percent of all SNAP participants. Let me see if I can circle back and get better data going back from July to now to see what the highest enrollee demographic is.

**Mr. Slaughter:**

Is there a way—knowing the dwindling food supplies—that you can hook up with casinos or restaurants in local areas to have a system where, if they have saved extra supplies, they can get it to you in a timely manner, so the food is safe and nutritious to get to seniors in our state?

**Mr. Duncan:**

Within our food bank—and I believe northern Nevada, too—we have a food rescue program where we have partnerships with our local grocery stores. At times, we also partner with convention centers when they have big events, and we rescue that food and then redistribute it to our community partners.

**Mr. Piccinini:**

We do have a grocery rescue program. There are a couple of our partner agencies up here—Catholic Charities of Northern Nevada being one—that are able to accept large containers that come from the casino and then serve them in their dining room. Our Food Bank does not. Our partner agencies, like Carson Valley Community Food Closet and others, get rescued products from restaurants and casinos. There is work to be done there, but it requires a special facility to be able to process and break that food down at our Food Bank.

I am jealous of Three Square—they have a beautiful kitchen down there. Our Food Bank does not have that capacity right now. It is something we hope to do in the future, but we are referring as much as possible to our partner agencies.

**Mr. Troth:**

I have done a lot with your food bank in southern Nevada with our youth groups. Hats off to what you all do.

Can either one of you give us an idea of how much money you get from government programs, grants—whatever form that is—and also the percentage of how much private money you get for donations to run your operations?

**Mr. Duncan:**

I do not have that information with me, but we can get back to the Forum. At the southern Nevada food bank, we do not rely heavily on federal funding. Most of ours is through donations and fundraising, but we have grants and partnerships with the state. We also have our federal commodities program, called The Emergency Food Assistance Program (TEFAP). There are a lot of moving parts when it comes to the dollar figures, but we are happy to follow up.

**Mr. Troth:**

I would appreciate it, because we need to have a feel for—H.R. 1 made changes in who gets what money, and how much money they are going to get. This will ripple into other discussions as we go through the Forum.

Do the food banks—if someone comes in and needs resources—take a SNAP card for them to purchase or reimburse, or is it all donated food and products?

**Mr. Duncan:**

We are not a SNAP retailer—that is the relationship DSS has. They have retailers across the state. I think I have that number on this page.

We do not directly take the SNAP EBT card. All of our food goes out to our community partners, and it is free for the individuals to access. We do not do that directly at the food bank.

**Dr. Jordan:**

The standard SNAP formula often underestimates seniors actual living expenses. Can you share with us what the monthly SNAP allocation is for seniors?

**Mr. Piccinini:**

There is a common misconception that the average benefit is between \$15 to \$36, depending on the circumstance. The average SNAP benefit depends on the individual's situation. It could be as high as \$149 a month. It is dependent on every individual's financial and living situation. As much as I would love to give you a straightforward answer, I would say it depends on every SNAP applicant's situation.

**Dr. Jordan:**

What is the lowest to the highest? You said \$149. What is the lowest somebody would receive?

**Mr. Piccinini:**

The lowest is right around \$28 under the current rules.

**Mr. Silberkraus:**

In addition to the funding you receive to cover the cost of operations and salaries, the food you receive, I am assuming, is donated and not purchased. Can you speak to where that food comes from, the types of supplies that are received, and the physical capabilities here in Las Vegas that allow for its receiving and distribution—approximately the volume of commodities, produce, and foods that are disseminated throughout the community?

**Mr. Duncan:**

I am going to have to make sure I unpack your question. We have a purchasing budget every year, and in the last FY, the food we purchased was around \$11 million. To put that in

context for everybody wondering about SNAP—on a monthly basis, SNAP pulls down about \$90 million from the federal government. We can get back to you on the breakdown based on the question earlier on our funding.

The majority of the food we have is purchased, donated, or through other avenues. One thing I want to mention about the type of food, in the last FY about 60 percent of the food that went out our doors was fresh produce, milk, proteins, et cetera. There are misnomers about food banks—that food pantry sites only provide shelf stable—which is not the case across the state. We try to get as much produce, protein, fresh fruits, and vegetables out the door.

We are happy to follow up about that funding based on the question we got earlier. I hope I answered all your questions.

**Mr. Silberkraus:**

In terms of produce or food not purchased, what percentage is donated? Can you tell us whether they are donated from manufacturers as either surplus or gift donations? Or does the federal government make food available from their pantries, where they purchase food, put it in store, and then disseminate it—not only domestically, but I understand it is shipped abroad. A lot of government agencies seem to acquire extensive stocks of food supplies. Are those made available to {Three} Square?

**Mr. Duncan:**

I am not sure I am following correctly, but our purchasing goes through our vendors on the West Coast. All the food we purchase then comes through our food bank. It is inventoried, and then our 150 community partners make orders through us based on the need and demand they are seeing, and that is how we ship it back out.

I am not sure I understand the totality of your question, but there are different moving parts about how we are bringing food into the food bank. We will be happy to provide that based on the funding question we got earlier, as well as how much we are getting donated, purchased versus rescued, et cetera.

**Mr. Silberkraus:**

The foods that are donated by the federal government—is that under a USDA program?

**Mr. Duncan:**

Correct.

**Mr. Silberkraus:**

Are those materials provided free of cost?

**Mr. Duncan:**

Correct—from the federal commodities program.

**Mr. Silberkraus:**

Do you have any idea what percentage of the materials you both receive for free and those that are purchased—what the breakdown is? Are you buying 50 percent of the food you distribute, or is 50 percent of it being donated free—either from manufacturers or the government?

**Mr. Duncan:**

I do not have that with me, but I am happy to get back to you. I do not know if Shane has those numbers with him.

**Mr. Piccinini:**

I do not, but I want to talk about what we get from the federal government for a minute, because to call it a donated product is not exactly accurate. We get products through the federal government, either through TEFAP or CSFP. The Emergency Food Assistance Program is a grant funded by Congress that the USDA goes out and purchases, through their vendor supplies, a selected menu; we are then allowed to choose from.

All of this goes through the Department of Agriculture (NDA), which takes possession of those products, and then they are distributed to us, and we distribute the product out to our partner agencies or through our own direct services. A lot of this is a paper transfer—I do not want you to think food is moving around on a forklift all the time. We get it from NDA's warehouse to our warehouse, and then it goes out quickly once we get it.

The federal government offers bonus products through TEFAP, which are surplus products within the United States supply chain. The producers then work out contracts with the USDA to acquire that product and send it out. There is not a donated stream of food specifically through the USDA or through the federal government that delivers the product straight to us and then we deliver out.

As for the question of donated versus purchased, we would also have to sit down and do the math on that. Honestly, that was not a question I anticipated we would get today. It is a good question. Our financials on both of our websites have it broken down for the last FY, but we will do our best to get this back to you as timely as possible—as far as what a donated versus purchased product looks like in our warehouses.

**Mr. Silberkraus:**

Thank you. You have addressed the interest I have.

**Mr. Troth:**

To follow up on that, we are going to be looking, here in the next period of time, where a lot of these federal resources are being challenged or are not going to happen. What this group could do—if those are going to be significant shortfalls or issues—is maybe make decisions and have discussions with the Legislature. Are we going to replace these, or are we not going to do them anymore? We are talking about tax dollars and raising money and fees to do that. You do a great job in taking care of that, but money is always a big issue, which is why there is discussion on this. Does that make sense?

**Mr. Piccinini:**

I hear what you are saying completely. I want to point out one thing. Two legislative sessions ago, the two food banks got together and created the Home Feeds Nevada Agriculture Food Purchase Program (HFN), which I know you are aware of. It was modeled off of the federal commodities program. Originally, we were using federal Local Food Purchase Assistance Cooperative Agreement Program dollars, which was a grant through the USDA, and we spent about \$6 million through that Program from 2021 to the end of 2024. Those {funds} at the federal level went away.

In the 2025 Legislative Session—the one that ended in June—we were able to get an \$800,000 appropriation to continue that Program. The Program is designed to bring Nevada-produced products into the charitable food supply, as a support for our growers to grow Nevada agriculture while also supporting our neighbors in need of food assistance. If there was an opportunity for us at the Legislature to talk about where we could invest additional dollars, HFN would be a place to do it.

I want to put clearly on the record that food banks do not get a regular appropriation from the State of Nevada or the federal government. The caveat is that in 2023, during the legislative session when we were unwinding from the pandemic, each food bank got \$4 million to spend over a biennium, to be able to bring additional food into the charitable food system to support our neighbors. We did that because we saw an unprecedented need. The need we saw during the Great Recession of 2008–2009 has been dwarfed by the need we have seen going from 2020 to 2025. We went from 2019 in the north seeing around 98,000 people a month to now serving over 160,000 people a month.

If we are going to address how the state could best utilize taxpayer dollars, which are a precious resource, we would want to make sure it was invested in a food purchase program that would also keep the resources in Nevada for Nevadans.

**Ms. Bongiorno:**

Why is there such an increase? What is the cause?

**Mr. Duncan:**

I cannot speak on that today. We still need to unpack the data on why we have seen such a significant increase. There are things going on that could have a significant impact on that, like the ever-changing federal landscape right now, all the information out there, the general cost of living, and the cost of transportation, which is off the cuff. I do not know if I have a definitive one- or two-key factors. It is a collective group of things going on for the families we serve here in southern Nevada and across the state. I will see if Shane has anything to add.

**Mr. Piccinini:**

I think that is right. It is a convergence of different issues—the cost of health care, housing, energy, and the cost of inflation for food. It all came together like a tsunami.

**Ms. Coffron:**

I have one more question. Statistically speaking, how many homeless people utilize SNAP?

**Mr. Piccinini:**

I do not know that off the top of my head. There is not an insignificant number of homeless or unhoused using the Program, but we can ask to get that number for you as well.

**President Almaraz:**

Please remember to wait until you are called if you have questions. We do not like to speak over somebody.

I have a question for Mr. Duncan. I have heard there is a program the food banks are instituting. It is like the card you use at Albertson's or Smith's. When you scan it, they have your information, and people will be able to use that card when they come to the food banks. Is that anything you know of?

**Mr. Duncan:**

I have only been there for a couple of months, and I do not believe I have heard of a card tied to our food bank, other than potentially the SNAP EBT card, but I could be wrong. There are a lot of moving parts at our food bank, but I cannot think of that specific program.

**Mr. Piccinini:**

There are cards offered by our partner agencies—Catholic Charities has a card called Clarity. We have issued cards with a barcode to scan to make the intake process faster, but there is not a card that crosses grocery stores to our food bank or our partner agencies—that I know of. There was discussion about creating a discount program for SNAP users that did not go anywhere during the legislative session, but I cannot think of anything that matches specifically what you described.

**President Almaraz:**

At one of our previous {meetings}, we heard from a program where they had coupons they gave to seniors, which they could only buy fresh fruits and vegetables with. Do you know anything about that or have any input?

**Mr. Piccinini:**

I have a vague recollection of a USDA senior produce program that was tied back to farmers' markets. I do not know if that program is still operating. As of right now, I am unaware of any coupons that our food bank or partner agencies are offering that would give produce to seniors. The only thing I can remember is a program operated by the USDA.

**Mr. Slaughter:**

I would like to thank Mr. Piccinini and Mr. Duncan for coming. This is a daunting, almost depressing issue, and I know it is not going to get solved today. From what we are hearing, it is getting worse in this country. I hope someone tonight in the State of Nevada is not going hungry.

**Ms. Darden:**

A bit ago, the question was asked why, and I was wondering if the lack of, or expiration of, the pandemic emergency fund—how much was supporting SNAP? Is that the reason we need to cover that?

**Mr. Piccinini:**

Do you mind clarifying the question for me as far as the funding for SNAP?

**Ms. Darden:**

Yes. Apparently, there were temporary benefits given in the pandemic era—emergency SNAP benefits. From my reading, those have expired. I was wondering how much of that was supporting the program, and if it has left a hole.

**Mr. Piccinini:**

I do think you are on to something that could potentially explain the increase. Those pandemic-era benefits did expire, and that was part of the reason why the Legislature was gracious and generous in giving each food bank \$4 million to spend on food assistance in 2023. There are economic reasons why our usage numbers are up.

The average SNAP user—our working neighbors and families—is usually 18 months. They are on it, they get their financial situation back, they leave the Program, and somebody else comes in behind them. It is a revolving door. There are complicated factors in understanding the SNAP churn and also the churn for the neighbors who are using the food bank. Not everybody getting assistance today were people who were getting assistance 18 or even 24 months ago.

This question is great for economists, which I am not. It is worth exploring, and I hope I gave you the answers you are looking for.

**Ms. Darden:**

I was wondering how big the hole was, that is all.

**Ms. Daniels:**

How many undocumented citizens are on SNAP?

**Mr. Piccinini:**

There are zero. The Program requires that everybody be either a legal resident through a refugee or immigration program, or be a U.S. citizen. There are zero undocumented people on SNAP.

## **AGENDA ITEM V—PRESENTATION ON THE RECENTLY ESTABLISHED NEVADA HEALTH AUTHORITY AND UPDATES ON MEDICAID WAIVER AND OTHER SERVICES FOR OLDER ADULTS**

### ***President Almaraz:***

We will hear a presentation from staff of the recently established NVHA. We will take questions from Forum members at the conclusion of the presentation. Administrator Jensen and Chief Coulombe, please proceed.

### ***Ann Jensen, Medicaid Director, Nevada Medicaid Division, NVHA:***

Good morning. I am excited to share more about our transition to the new NVHA today. I will then turn it over to my colleague, Kirsten, who will share more about specific programs we are implementing related to seniors ([Agenda Item V](#)). We look forward to your feedback and questions.

We will start with the establishment of the new NVHA. This is the newest agency within the Executive Branch, established on July 1 of this year. This is a creation that was proposed as part of Governor Lombardo's budget in the past legislative cycle and was unanimously approved by both Chambers of the Legislature throughout session.

Nevada Health Authority is a combination of all of the agencies within the state that either purchase or procure health insurance for Nevadans—you will see the logos listed here, and we will spend more time talking about them. These are our Public Employees' Benefits Program (PEBP); our Silver State Health Insurance Exchange (Exchange), which is called Nevada Health Link; our division of Nevada Medicaid; and the Battle Born State Plan, which is a low-cost public option available on the Exchange.

Nevada Health Authority was created. Previously, we were part of the {Department} of Health and Human Services. This change separated these two agencies into DHS and NVHA. You will see here the agencies that are part of DHS. This includes the Division of Child and Family Services (DCFS); the Division of Public and Behavioral Health (DPBH); DSS—this is a new name; it was formally called the Division of Welfare and Supportive Services; and ADSD. Our colleagues are here and will be presenting shortly. We continue to work closely with each of these divisions.

The intent is to align the health efforts of the state government into two categories: (1) DHS, which provides direct care, supportive services, and public benefits to eligible Nevadans; and (2) within NVHA, to provide access to health care coverage and services that promote the health and well-being of Nevadans.

I wanted to give framing on what this looks like before I move to an important question, which is—Why did this change happen? You will see this quote from Governor Lombardo's State of the State address, but the intent is to help the State of Nevada "capitalize on its strong purchasing power when it comes to health insurance and get a better deal for taxpayers, all while offering better insurance options for eligible Nevadans."

What is important to know is—How does this connect to our overall mission and vision? At the highest level, our vision is for a healthy and thriving Nevada where health care is affordable and reliable for all. To do so, we must ensure all Nevadans have access to

reliable care by leveraging our state's purchasing power, streamlining our programs and services, and using that power to drive better quality and innovation. The values that guide everything we do include public service, fiscal discipline, and accountable leadership.

I recognize those are a lot of high-level words, so I am excited to share what that looks like in practice, and what we have been working on. But before I do, it is important to ground ourselves in the reality of where our health outcomes are in the State of Nevada right now. You will see, in the blue rectangle, the scorecard based on national data that assesses where we rank as a state in comparison to the other 49 states and the District of Columbia, which is why it is possible to be 51<sup>st</sup>—because the District of Columbia is included in that list. We are not where any of us would like to be. We are near the bottom of many of these lists related to maternal health outcomes, coverage, care quality, and prevention.

The intent of NVHA is to build on the existing strong efforts of our state agencies to improve that, and to move the needle on where we are as a state in terms of our overall health care. Our goal, first and foremost, is to improve our performance on key health indicators. While doing so, we recognize the need to ensure the fiscal sustainability of all of these coverage programs. We know health care is incredibly expensive, and costs continue to rise, so how do we think about structure in a way that allows us to maintain a sustainable model for Nevada?

We also recognize the state faces severe workforce challenges—one of the areas in which we are 51<sup>st</sup> in the country. How do we think creatively by aligning the efforts? I will share a couple examples of {how} we are trying to make our workforce better align with the needs of our community.

Lastly, we will talk about driving better value coordination and innovation. Those are big words, but it is intended to capture the ways we can coordinate everything we are doing in the state to negotiate with payers and result in outcomes we want to see in terms of better and more affordable health care for Nevadans.

We will talk numbers briefly. As you see on the slide, one in three people in Nevada are covered by a program that falls within NVHA, which is significant purchasing power—or leverage—in the state. The largest program is Medicaid. Nearly 800,000 people receive health care coverage through our Medicaid and Children's Health Insurance Program. Over 100,000 people access coverage through our Nevada Health Link or the Exchange, so they are purchasing individual coverage in that way. We also have 70,000 state employees who are covered through PEBP. This scale looks different depending on who we are talking about, in terms of our community members. Our highest coverage from the Medicaid perspective is for kids in our state. One in two births in Nevada is covered by Medicaid, and nearly one in two kids across our state also receive health care insurance through our Medicaid program. I hope that sets up the overall framing and intent of our work.

I want to share a few more specific examples of the future state for three groups of people. First, for health care providers in the state. I was excited to hear the backgrounds of a few folks on this {Forum} who are part of the health care program or who previously worked as health care providers, and I thank you for your service. It is an incredibly challenging role, and we recognize we do not always make it easy from a state perspective to know how to navigate enrolling and credentialing, which means getting enrolled with our health insurance plans. The intent is for all the programs within NVHA to streamline it so our providers can focus on serving the patients in front of them and not have to think about all the different

boxes to check depending on who is paying that bill. I am happy to speak to any details on what these changes are, but there is a lot of work being done to make this process more streamlined for providers, which we recognize also makes things better for us as patients because they are able to devote more time to patient care.

The next group impacted from this work is, most importantly, us as Nevadans. We are doing a lot to think about how we connect people to care in a more straightforward way and in a way they can access easily from whatever format works for them. I appreciated the conversation about how our seniors do not always have access to a laptop or a phone. What we are trying to do is ensure folks can enroll in Medicaid through both phone and online eligibility platforms, but also through in-person offices and paper forms, to ensure maximum accessibility of our services.

We also recognize folks' income changes frequently across our state. How do we ensure this is not a disruptive process when people gain or lose a different type of employment? How can we connect their coverage across all the different options we have—whether that be Medicaid, a public option, a lower-cost program, or through the Exchange? We are trying to empower people, as consumers, to know how their plans rank by publishing quality scores and better equipping them to make a decision for a plan that works best for them.

The last piece I will share here is related to purchasing. This is perhaps the more nebulous one, but it is important, and I know it is a key interest here. It is about how we use bargaining power—our purchasing power—to negotiate a better deal for our state. As I said, one in three Nevadans are covered by NVHA programs, which is a significant negotiation power. We are learning a lot from other states that have pursued this health authority approach on how best we can do that. We will be sharing more details in the coming months as we work with national experts on how to use the health authority model to simplify programs for both our Nevadan consumers and for providers. There are exciting things happening on that front.

I am excited to share more specifically what this means in terms of our new NVHA and our partnership with our older adult community. I am going to turn it over to my colleague, Kirsten, who will share more about our partnership with our colleagues at ADSD, as well as a few bills from the last legislative session that we have been implementing.

***Kirsten Coulombe, Social Services Chief III, Long Term Services and Supports, NVHA***

For several years, Nevada Medicaid was in the same department as ADSD and DCFS. Although we are now in separate houses, we still consider them close partners, and we will continue all of the same activities we did before—we continue those activities with them now. Our activities are formalized through an interlocal agreement contract. It might be helpful to delineate what those activities look like. There are no changes—this gives you an overview of the work we do.

For Nevada Medicaid, we “administer” our Home and Community Based Services (HCBS) programs, for which we receive federal funding and have the state match. “Administration” means we are responsible for developing what those programs look like, in partnership with ADSD, and we are responsible for submitting the official paperwork to the Centers for Medicare & Medicaid Services (CMS). We are also responsible for submitting federal reporting on the outcomes of those programs and on what those programs look like. Additionally, we have oversight of the providers rendering those services in the community—what those provider activities are doing—and quality assurance.

Our partners at ASD are operating the program. "Operations" means they determine eligibility for our waiver program. There is a financial eligibility component that they work on closely with the newly named DSS. They are working on determining if the individual, at the minimum, qualifies for our waivers, which is an institutional level of care. They do the hard work of working with all the individuals who come through their front door. Once an individual has been determined eligible for the waiver, they also manage the waiver slots and waitlists. Lastly, they have training components for the waiver case managers, which is high-level. They might have an overview in their presentation, and I happy to answer questions later on what that looks like in more detail.

In terms of impactful legislation for Nevada Medicaid, Senate Bill 207 (2025)—which is also known as Program of All-Inclusive Care for the Elderly (PACE)—was a big win for Nevada Medicaid. Although PACE was in the statute in ASD's chapter for Nevada, there was not any funding appropriated for it. This opportunity we received through SB 207, Senator Taylor's bill, gave us that last missing piece to be able to have funding to support that Program.

What PACE is—is a bundled comprehensive program for seniors who have Medicare and Medicaid services—not necessarily new services, structured in a new way that makes it more streamlined for seniors, so they do not have to work with multiple individual providers to get their services. For example, those bundled services include physician services; it is in a center setting with therapists, a nurse, and a social worker. There is transportation included. Rather than having to make an appointment with an individual physician or individual therapists; go to an adult daycare center that has limited services, work, and for their transportation—that is all bundled together in a setting.

There is criteria for the Program. An individual would have to be 55 and older and would need to qualify to be in a nursing facility. This does not mean they necessarily have to be, but they would need those nursing facility-type services, and they could live successfully in the community with wraparound support. Those services are received through this interdisciplinary team, which is the key for PACE—having all of those individual practitioners talking together and coming together to try to assist that individual and managing their care.

There are several PACE organizations throughout the United States-Nevada. We are not the last state to have PACE, but there are a lot of states that have lessons learned that we are going to be looking at in ways that we can set up our Program. All of the funding is in a capitated model, meaning it is all bundled, which makes it easier for the providers as well.

In terms of our implementation efforts for PACE, we are working with—We did get funding for a consultant. Unlike the other Medicaid services, PACE is different in that it is a three-way contract with CMS, PACE, and Medicaid. It is more complicated than our traditional Medicaid services. Because of that, we will have several activities we need to walk through before we can say PACE is open for business.

The first is that we are going to contract with a consultant for technical assistance. As I mentioned, there are a lot of states that have already had their growing pains with PACE, and they have already figured out key components that work well. We want to learn—have those lessons from the other states—ways that we can maybe avoid those and set up the best PACE for Nevada. We are hoping that having that opportunity for technical assistance with a consultant that has worked in other states will get us further down the path than we would be without having technical assistance, which is number one. We are in the process of finalizing those proposals for the technical assistance consultant, so that is exciting.

The next step, once we have that consultant on board, is that we want to have stakeholder engagement. We are happy to pass that information on to Mr. Ashton when we post the public workshop—what we call a public workshop, stakeholder engagement—so he can share that with Forum members. If you have time and are able to attend, so you can hear our next steps for implementation and what we are considering for designing the Program, we would love to have you attend. Those are typically through a Teams meeting, similar to a setup like this. The stakeholder engagement will allow us to share information with the public about where we are in the process, but the purpose is for us to solicit feedback from interested individuals on how we should set up PACE in Nevada.

Certain parameters of the Program are set, but there are other areas that have flexibility in how the Program is delivered. We would love feedback from providers in our community that are doing these services now. We have had a lot of interest from outside PACE entities in other states that will bring their expertise in, but we also want to know of existing providers in Nevada that are interested in joining and considerations for how that should be designed. We always appreciate stakeholder engagement so that we are setting up the program for the end users, which are our Nevadans on Medicaid.

In addition to that, the next step is that we are going to do a request for proposal to select the PACE organizations. This is important because there is a lot of interest in PACE organizations, but we want to make sure we are authorizing that contract to the best qualified and the best fit, and making sure we have PACE organizations that are going to fulfill the need within the constraints of the appropriations we received. We will be doing a fair and equitable selection for a PACE organization through that request for proposal.

The fourth step is that we will essentially do the paperwork to submit to CMS to be able to ask for federal permission to implement PACE, which is a big component of the paperwork. Lastly is the more technical {part}—making changes to our current Medicaid billing system. Because PACE is new, we do not have the essential component for a PACE organization to bill, so that is more technical but also a needed component. There are lots of steps involved and lots of sub steps in there too, but that is high-level. Our current—I have “tentative” in there because of our moving target—timeline for releasing a request for proposal will hopefully be early next year. I would love to keep you updated on where we are for PACE.

I understand Forum members had questions about our Structured Family Caregiving (SFCG) waiver, which is not new this session. This was a new waiver that was authorized the prior session, in 2023, for Assembly Bill 208. Traditionally, we have had three waivers targeted to our elderly population, physically disabled, and individuals with intellectual and developmental disabilities. This is our fourth waiver we implemented, and this one is targeted to individuals who have a diagnosis of dementia-related conditions and would need immediate placement in an institutional setting without HCBS.

While it does not look like a lot because there are only three listed, there are a lot of services available. I will start with the bundled rate for personal care services, which are all of the services an individual might be receiving now. These are similar services, just bundled in a different way, like PACE. The SFCG waiver’s intent is to have a family caregiver be able to be reimbursed for all the services they are doing that perhaps they are not getting reimbursed for now, or they are getting reimbursed in a siloed way across multiple different services, like the personal care services for the Activities of Daily Living (ADL)—bathing, dressing, grooming, and assistance with eating; and the Instrumental Activities of Daily Living, which are laundry, housekeeping, meals, and shopping. All of those are bundled together.

In addition to that, we also have respite for the caregiver because the intent of this waiver is different from our other waivers. This would be essentially a live-in caregiver who would be providing 24-hour support, which is why it is structured in a bundled way. The respite is a key component, so there is not caregiver burnout. It is a vital component of having respite for the caregiver, which is a service that is offered and then case management.

One of the unique things I will say about this waiver is that the caregivers themselves must receive 65 percent of the Medicaid reimbursement. In the 2023 Session, Legislators authorized a minimum wage mandate for other personal care services, which is \$16 of the \$25 Medicaid rate. This went along those lines as well—to say the caregiver, because they are doing the majority of the work, should be reimbursed at that 65 percent—that is in terms of our waiver.

We were authorized for 100 slots, so we are slowly building that waiver. We are slowly getting providers on board and working with trying to have a case manager on board. There is more to come on that, but I am happy to come back at another time to give more details. But I would say, as new programs come, it takes a minute to get those started.

Lastly, to follow Shane and Jeff, we did presentations for the Forum last interim about our home-delivered meals program, so this is an update. Originally, during COVID-19, there was ARPA funding that Nevada Medicaid took advantage of. We did a couple of expansions to our services during the COVID-19 era. What we did is we added home-delivered meals to the Waiver for the Frail Elderly (FE), which was available during COVID-19. Because the COVID-19 funding ended when the public health emergency ended, we did officially add home-delivered meals to our FE waiver as of April 2024.

As background, traditionally, home-delivered meals were only available to individuals on our waiver for Persons with Physical Disabilities (PD). We know there are a lot of homebound seniors, so this was a great opportunity to be able to add home-delivered meals through temporary COVID-19 funding, but also make it permanent.

During COVID-19, as one of those COVID-19 activities, we also had a rate study by a consultant that helped us examine the majority of our HCBS rates and the rate structure we have. One of the outcomes of that study was to look at evaluated home-delivered meals. Our rate was \$5 for maybe a decade—I could be wrong on that—but longer than it should have been. One of the recommendations of that study was that we should increase the home-delivered meals rate to \$10.31; in essence doubling it. This is something we were able to absorb in our budget prior to going into the 2025 Session. We were able to offer our home-delivered meals provider that doubled rate beginning on November 18, 2024. Currently, we have five home-delivered meal providers.

I understand Forum members wanted information on what our residential services look like. I will share that we have residential services in our PD waiver as well, but speaking for the FE waiver, we offer residential services for individuals who need 24-hour support but can safely remain in a community setting. In Medicaid, there are tiers of residential. There is community-based residential, which would essentially be like a group home or assisted living, and Nevada Medicaid covers nursing facility, but that is our last-stop, highest-level residential service available.

This is the number of recipients on our FE waiver—3,468 individuals. I did not have it at the time of this slide, but I have it now. The number of individuals in our residential setting is 788. About 23 percent of our recipients on our FE waiver are in a residential setting, which is good news because the majority are in their home independently with wraparound

services. Of our residential providers in that group home setting, we have 190 {providers} and 2,907 beds. I will clarify that those under 3,000 beds are not all Medicaid beds—they are beds licensed in Nevada.

I think one of the questions might be—Do we have assisted living group homes, residential beds for our individuals on our FE waiver? I wanted to share that ratio. We have plenty of beds, and we only have 23 percent—at this time—of the individuals who are needing residential services. That is not to say there are not ongoing challenges with placement issues, and our partners at ADSD can share {what} they are seeing. These are the numbers we wanted to share.

We are open for questions.

***President Almaraz:***

Members, because we are running long on our presentations, we are going to limit everyone to one question. I am going to go to Carson City first, then Zoom, and then to members in Las Vegas.

***Ms. Doyle:***

I know you talked about PACE, which will help provide care in homes or group homes. It says provide “nursing facility level.” Would that apply to going into a nursing facility or a senior residence, which can be rather expensive? Would they be able to do that under this Program?

***Chief Coulombe:***

Yes, that is what is unique about PACE. The Program of All-Inclusive Care for the Elderly has to cover nursing facility services. Theoretically, there should be continuity of care for the recipient to work with those PACE providers they are familiar with in the community when they are placed in the nursing facility. They would be able to have the opportunity to work with them. The goal is always to have the individual in the least restrictive environment integrated into the community. But if they need those services, yes, it would be available through PACE as well.

***Dr. Shonkwiler:***

The Program of All-Inclusive Care for the Elderly you are talking about that has recently been implemented—many of the services you mentioned, do they fall under the Medicaid optional services? I attended a presentation recently in Reno from a family caregiver of a disabled adult. She pointed out that many of these optional services Medicaid is currently providing were part of the Medicaid reductions from H.R.1. Could you address any concerns you may have about future funding, and what may be going away due to the cuts from H.R.1?

***Administrator Jensen:***

The way the regulatory landscape works for Medicaid is there are required mandatory benefits and optional benefits. There is a lot of detail on what falls into which, and those were defined in 1967. You will recognize our health care system has evolved. There are things in the optional list that may be surprising.

However, to your overall point, we do not anticipate any plan changes to optional benefits as a result of H.R.1 at this time in Nevada. The impacts of the federal legislation are primarily along the lines of changes to eligibility requirements, as well as to our hospital tax funding program, which funds more of our children’s behavioral health services. We are looking internally at ways we can continue to fund those long term, as we have a few years until those impacts are felt, but at this time, we do not anticipate making any changes to optional benefits that are covered. The Program of All-Inclusive Care for the Elderly, as designed, is continuing to move forward.

***Dr. Jordan:***

First, I would like to congratulate you on the new NVHA—it sounds exciting. My question is about the goals to achieve—the mission. Have you completed a strategic plan that moves goals, which are broad, to objectives, which are specific actions that are measurable in order to improve the state’s performance on key health indicators?

***Administrator Jensen:***

It is a process we are going through as a leadership team. We met in July, right after the NVHA was formed, to begin to develop those objectives and tie specific metrics to each one of them. The plan is for those to be available publicly in early 2026, where we will get stakeholder feedback, and then we will begin to publish data on our progress towards achieving those metrics. I appreciate your focus on how we ensure those continue to get specific, and how we can track them. It is a high priority for us internally. We look forward to your feedback as those are shared in the coming months.

***Dr. Jordan:***

We all need to see growth that takes place and achievements that are a result of this new Authority. Down the road, I would like to know that we are making achievements.

***Ms. Peggy Leavitt:***

My question is on the home-delivered meals. I am from Boulder City, and through our senior center, we deliver meals every day to people who are unable to get out and get meals or cannot afford them. I was wondering how this operates where you have the home-delivered meals, and if they get meals every day, or if they get meals delivered once a week and then get frozen meals the rest of the week.

In Henderson, they have Meals on Wheels, and it operates differently than it does in Boulder City. In Las Vegas, I understand Catholic Charities does the Meals on Wheels. I was trying to figure out where you operate, or if you operate in conjunction with established home-delivered meals, because I personally deliver meals to people who I consider frail and elderly.

***Chief Coulombe:***

That is an excellent question, and not uncommon for confusion of how home-delivered meals are set up in Nevada. Our partners at ADSD have OAA grants for home-delivered meals, and Nevada Medicaid has home-delivered meals for Medicaid-eligible individuals. We have done this in the past; but if it would be helpful we can work on providing follow-up of a structure of how home-delivered meals are authorized in Nevada. We could add contact information—a one-pager to be able to dispel confusion.

You sound like you are knowledgeable and understand, but I am sure there are other members in the community who want to know where to go for resources. If that is permissible, we can work on that as a follow-up item to be able to show what Medicaid does and the home-delivered meals through OAA funding, and ADSD can correct me if I said anything wrong. I think that might be a helpful follow-up to have that in a big picture.

***President Almaraz:***

I do not see anyone else with their hand up. Thank you, Ms. Jensen and Ms. Coulombe.

## **AGENDA ITEM VI—OVERVIEW AND UPDATES REGARDING FEDERAL AND STATE PROGRAMS OR SERVICES FOR SENIORS AND LEGISLATION OF THE 83<sup>RD</sup> LEGISLATIVE SESSION IMPACTING SENIORS**

***President Almaraz:***

We will now move on to the Overview and Updates Regarding Federal and State Programs or Services for Seniors and Legislation of the 83<sup>rd</sup> Legislative Session Impacting Seniors.

We will have a presentation from Ms. Cheyenne Pasquale, Agency Manager, ADSD, DHS. We will take questions from members at the conclusion of her presentation.

Ms. Pasquale, please begin when you are ready.

***Cheyenne Pasquale, Agency Manager, Office of Community Living, ADSD, DHS:***

Before I begin, I would like to turn it over to my colleague, Rique Robb, in Carson City.

***Rique Robb, Administrator, ADSD, DHS:***

It has been about ten years since I have been in front of this Forum, so I wanted to introduce myself as the new Administrator. My predecessor, Dina Schmidt, had been here prior, I wanted to make sure you had my name and face. I am also support staff today, and I am excited that Cheyenne Pasquale is on as our Agency Manager and will do our presentation.

As you heard earlier today from Jeff Duncan—who is her predecessor—we have had a lot of changes at ADSD, and I wanted to make sure you were aware that we have new names in familiar positions. We are here as ADSD to support you and provide the information you need.

I am support staff today, but I wanted to make sure I had a good introduction with all of you, and you know we are available at any time.

I will turn it back over to Cheyenne.

***Ms. Pasquale:***

I serve as the Agency Manager in the Office of Community Living (OCL). We will {provide} agency updates and an overview of agency programs this afternoon ([Agenda Item VI](#)). Before I start, I would also like to acknowledge and thank all of my colleagues who helped bring this presentation together and are here in the audience as a phone-a-friend if I need it.

Today, we are going to go through basic information about our agency and an overview of our programs and services. Then, we will talk about the HCBS waiver services that Kirsten did an introduction to. We will also talk about legislation from the 83<sup>rd</sup> Session that impacts older adults and provide brief budget updates and updates on federal and state impacts to services.

This slide has our mission and vision statement. Earlier this year, ADSD launched a new campaign updating our branding, including our mission and vision statement, to more accurately reflect what we do. In essence, it boils down to our mission being to empower Nevadans of all ages and abilities to live independently by connecting them with essential services and resources.

The Aging and Disability Services Division serves people of all ages with disabilities, older adults, and family caregivers. This slide is listing all of the programs ADSD has for older adults, and we are going to go through each one of these in more detail.

First is Adult Protective Services (APS), which investigates reports of abuse, neglect, self-neglect, exploitation, isolation, and abandonment for adults aged 18 to 59 who have a physical or mental incapacitation and/or have one or more physical or mental limitations that restrict the ability of the person to perform normal ADLs.

The contact information here is to report a case of vulnerable adult abuse. Any person may report an incident of abuse if they have reasonable cause to believe a vulnerable adult has been abused, neglected, exploited, isolated, or abandoned. All information received as a result of a report is confidential, as outlined in state law.

The Vulnerable Adult Fatality Review Committee was established in the 2023 Legislature, and it was a collaborative effort started by APS, the Chief Advocacy Attorney, and the Office of the Attorney General. The purpose of the Committee is to review deaths of vulnerable adults; identify systemic issues and services; and recommend improvements in policy, practice, and coordination among agencies. It is a multidisciplinary collaboration. There are analyses of cases, contributing factors, and missed intervention opportunities; as well as looking at developing actionable recommendations to prevent future deaths, improving outcomes for vulnerable adults, and promoting best practices and training to strengthen protective systems statewide.

Developmental Services empowers individuals with intellectual and developmental disabilities and their families at every stage of life. They offer a variety of services to support individuals and their families, which can include in-home services, employment and vocational training, respite, and many other services.

The Long-Term Care Ombudsman Program (LTCOP) is next up on your agenda, so I am not going to go in depth, but this Program is dedicated to ensuring that residents of long-term care facilities receive the highest quality of care and support. It is a vital program to help enhance the well-being of long-term care residents across the state and more from Sierra and a few.

We have the Office for Consumer Health Assistance, which helps Nevada residents navigate their health care rights and responsibilities. They can help individuals understand eligibility, appeal rights, quality of care concerns, and medical billing concerns. They also offer resources for the uninsured and underinsured to access health care and prescription medication assistance. This program is listed on your “explanation of benefits” (EOB) from your health insurance company. There is fine print at the bottom of your EOB with contact information.

Next is OCL, which provides intake and eligibility for a variety of state programs, as well as Medicaid waivers for older adults and people with physical disabilities. The Office of Community Living also provides case management services for these programs. In addition, we offer services to support people who are deaf, hard of hearing, or who have a speech disability, as well as a number of community services to support individuals in their communities—such as transportation, respite, home-delivered meals, et cetera. The Office of Community Living also oversees the state’s information and referral line—Nevada 211—and the state's navigation program, Nevada Care Connection, which helps individuals navigate the programs and services that are available to help them remain in the community.

Last but not least, we have the Office of Attorney for the Rights of Older Persons and Persons with a Physical Disability, an Intellectual Disability, or a Related Condition. We like to call this a person the “Advocacy Rights Attorney,” who provides technical assistance, education and training to the Division, and directs legislative and regulatory policy advocacy for individual rights. This position also serves as a Hearing Officer for grievances by individuals residing in facilities. Additionally, the attorney serves as a State Legal Assistance Developer overseeing legal services offered to older adults under the federal OAA. It is important to note that this position serves as an advocate to protect the rights of older adults and people with disabilities and is not an attorney for ADSD.

Next, we will talk more about the three waivers that are serving older adults. The first one is the FE waiver. This is specifically for individuals aged 65 and older. Next, is the PD waiver, which serves individuals of all ages who have a documented disability. The newest waiver that our colleagues at Medicaid talked about is the SFCG waiver, which targets individuals who have a diagnosis of dementia or a related condition. Each of these waivers offers case management as well as a variety of services to support older adults and people with disabilities who qualify. As we learned in the last presentation, Medicaid administers these waivers, meaning they set the policy related to the waivers and the federal paperwork, while ADSD operates them. The Aging and Disability Services Division only provides case management services for the FE and PD waiver. We are not a case management provider for the SFCG waiver.

Next, let us talk about where we are with the waivers and our waitlist. This slide shows each of the three waivers—how many people are currently enrolled in the waivers, the waitlist for them, and the slots that were funded in state FY 2026–2027. The last column is the available slots. These are the number of people who will be rolling into the waivers over the course of this biennium. You will see that the SFCG waiver has no individuals being served, and there is not a waitlist right now, which is primarily because Medicaid is working on getting a case management provider enrolled to support individuals in that waiver.

A big topic in today’s Forum is food security and nutrition services. In state FY 2024, ADSD received a State General Fund allocation of \$299,000 for food security programs. With this funding, we provide subawards to community partners for food pantry services as well as Farmer’s Market coupon administration. In addition, in state FY 2024, ADSD provided

subawards to community partners totaling \$10.7 million for nutrition services. This includes home-delivered meals, meals in congregate settings, nutrition counseling, education, and assessment. Our funding for these nutrition services comes from OAA's Title IIIC and from State General Funds. I do want to note that for our home-delivered meals and congregate meal programs, these figures are from state FY 2024. We award these funds on a federal FY, so for federal FY 2026, our funding availability has been reduced to about \$10.1 million. Additionally, for our home-delivered meal program, our rate per meal is \$3.90, and our fixed fee rate for congregate meals is \$3.40 per meal.

Moving on to the 83<sup>rd</sup> Legislative Session and bills impacting older adults, I will say that most of these bills on the next two slides do not require direct action by ADSD. We included them in our presentation today as informational for you.

Assembly Bill 65 is specific to updating guardianship laws and revising investigative services related to guardianship; AB 161 updates the rights of patients of hospice care and affirms certain standards of care; AB 202 expands consumer protections for individuals with dental coverage; AB 343 requires hospitals to publicly disclose pricing for goods and services; and AB 368 allows for video cameras and other communication devices in private rooms in a variety of facilities.

The first three bills on this slide are being implemented either in whole or in part by ADSD. Assembly Bill 442 ensures the state makes timely payments to subrecipients. This is a bill that is impacting all state agencies and all subawards. It is requiring that we make reimbursements to our subrecipients or grantees within 30 days. If we are not able to make payments within 30 days, we provide notice of that delay, which helps our nonprofit and community partners with their state funding.

Assembly Bill 461 requires ADSD to increase awareness of long-term care planning resources and provide assistance to individuals in this pilot program, and SB 8 revises terminology in the ADSD NRS, changing a term from "of related conditions" to "developmental disability" for clarity.

The final three bills on this slide are also informational. Senate Bill 60 expands penalties for violations against older adults or vulnerable persons; SB 299 requires senior living community referral agencies—for example, A Place for Mom—to register with DPBH, ensuring access to reliable, accountable referral services; and SB 494 established NVHA, which we heard about.

In terms of budget updates, this slide shows the various budget accounts we have within ADSD—the ones that provide services to older adults or people with physical disabilities. It also shows the budgeted funding in state FY 2025, which was the last biennium, and the funding in the next two FYs. You can see across the table and across the various ADSD budgets that we had both wins and losses. One item I would like to note is that in Budget Account 3278, which is our Planning Advocacy and Community Grants budget, it appears there is a significant reduction in our budget, but that reduction is coming from the expiration of ARPA funding as well as reduction in a few of our smaller categories. The big reductions—the \$14 million—are ARPA funds that have gone away.

When we put this PowerPoint presentation together a few days ago, looking at our federal and state impacts to services, one of the biggest things right now is OAA. Our OAA funding includes services like transportation, nutrition, caregiver support, and homemaker {services}. There is some funding for APS, LTCOP, and legal services, but OAA has not been reauthorized by Congress yet. The authorization for OAA expired in 2024, and new

legislation has not been passed to authorize that Act. That being said, appropriations have continued through federal FY 2025. We do not have any appropriations from Congress for FY 2026 at this point in time.

We are working with our Nevada Medicaid partners and watching federal changes to Medicaid and eligibility that will impact older adults with lower income. Additionally, there are recent changes to Medicare policy, including reductions in provider reimbursement rates and restrictions on Telehealth, which are resulting in increased provider shortage and limited access to critical health care services.

We did, as a Division, have funding from federal Coronavirus ARPA funds and, specifically, the fiscal recovery funds from the Governor's Office of Finance. One of our projects that we wanted to highlight today is a capacity-building project to expand bed availability for adults aged 65 and older or individuals aged 18 plus with physical disabilities in residential facilities for groups. At the end of this project, by March 2026, we will have been able to add 180 additional beds to those facilities.

With that, I will open it up for any questions.

***President Almaraz:***

Thank you for your presentation. I also want to thank you for adding phone numbers and email contacts for these different entities. We appreciate that.

Mr. Smith, is there anyone with questions in Carson City?

***Mr. Smith:***

No, Madam Chair.

***Dr. Jordan:***

My question is about your budget updates. I looked at this carefully and reviewed it, and I have major concerns. Senior medications for disabilities and for our seniors are going up every day. In your budget, they are going down. Could you explain that?

***Ms. Pasquale:***

Certainly. The Senior Rx and Disability Rx Program is funded by Fund for a Healthy Nevada (FHN), which saw a reduction in funding this biennium. We are working closely with the Director's Office as we go into budget planning for the next biennium, as well as looking at other funding opportunities to help support prescription assistance programs in that budget.

***Dr. Jordan:***

So that is the answer for the budget going down?

***Ms. Pasquale:***

Yes, we do not control the funds for FHN that is given to us by the Director's Office based on available funding. If the reductions came right at the beginning of the—

**Administrator Robb:**

Keeping in mind that FHN is based on the tobacco settlement funding, one of the main things in that settlement is to reduce the use. When we reduce the use, or when they have alternatives, that settlement funding is less. We have seen a reduction in the actual settlement funding, so the availability is less. I do not have specifics on the dollars, but I could certainly work with the Director's Office and get that information to you if you would like that follow-up. But that is where the Senior Rx is 100 percent funded—through FHN's tobacco settlement. With that funding being slightly less, those programs have reductions. I hope that helps.

**Dr. Jordan:**

Yes, it helps. But you can see that is something major for many of our seniors needing medications, moving into mental health, and so many other things. We need to have that money back. What steps are you taking to be able to recoup some of that funding?

**Administrator Robb:**

This is through our budgetary process, which is through the Governor's Office of Finance as well as the legislative process. We have not started that process yet. Well, we have started it, but we are not quite there on the funding options, but we are in conversations with the Director's Office to determine alternative funding. At this point in time, for this particular biennium, we are unable to add any additional funding because it was not funded through the legislative process. But we are looking at that for the future biennium.

**Dr. Jordan:**

How fast is the waitlist moving?

**Administrator Robb:**

Can you clarify which waitlist?

**Dr. Jordan:**

The waitlist that has 2,174 people under Medicaid waivers.

**Ms. Pasquale:**

We only have about 349 slots available to fund, so there will still be a significant waitlist as we process new applications to fill those 349 slots. Our team has been processing applications since July 1 and enrolling people into the waiver. I will have to follow up with how many of those 349 slots are filled as of today.

**Dr. Jordan:**

I feel like that is a lot of people on a list who have no direction and have to wait. What is the wait period for the most part?

**Ms. Pasquale:**

Right now it is a couple of years.

**Dr. Jordan:**

A couple of years?

**Ms. Pasquale:**

Yes.

**Ms. Bongiorno:**

Once a report is filed of abuse—or suspected—how long does it take before the actual investigation starts? I find there is a great deal of abuse of seniors, especially for those who have no family ties here in Nevada. They may be out of state, and many of them die—one out of six, I believe in our state—without a hospital directive, wills, trusts, et cetera.

In fact, I know of a particular case. Someone filed for guardianship, and then the facility, after the guardianship was approved, was not investigated. What happened at that time—there was no palliative care. The individual who had dementia fell, and they had to call 911. The situation and the home itself were so bad that 911, even after resuscitating the individual, could not leave them in the home. They had to take them to a hospice facility. Even after that, the guardianship people would not pay the hospice facility. The individual had money. I even tried to help, but because of certain regulations, there was nothing I could do. After being in the hospice facility, they were going to release her to the streets because there was no payment.

I want to know how long it takes the courts for an investigation, or when you find out that a report has been filed.

**Ms. Pasquale:**

I first ask if my colleague in Northern Nevada, Robin Tejada, is available to talk about the response for APS reports.

**Administrator Robb:**

Yes, we have Robin at the table. The first question I would like to clarify—when you started that question, you asked how long it would take from receipt of the complaint or concern to APS to the start of the investigation. I want to make sure we are getting the questions you are {asking}. Is that your initial question?

**Ms. Bongiorno:**

Yes.

**Robin Tejada, Social Services Chief, APS, ADSD, DHS:**

We have three business days from the receipt of the report being screened in to start the investigation.

**President Almaraz:**

I see no other questions. Thank you, Ms. Pasquale and Ms. Robb. I appreciate your participation.

## **AGENDA ITEM VII—PRESENTATION ON THE LONG-TERM CARE OMBUDSMAN PROGRAM, HOUSING FOR SENIORS, AND UPDATES ON INVESTIGATIONS CONCERNING COMPLAINTS AGAINST CERTAIN LONG-TERM CARE FACILITIES**

### ***President Almaraz:***

Moving on to a presentation on LTCOP, housing for seniors, and updates on investigations concerning complaints against certain long-term care facilities.

We will hear from Ciara Wetteland, Adult Rights Supervisor, ADSD, DHS. Forum members may ask questions at the end of the presentation.

### ***Ciara Wetteland, Adult Rights Supervisor, ADSD, DHS:***

Today, we are going to go over our mission statement, who the Ombudsman Program serves and what we do, an overview of LTCOP, legislation that was previously passed, concerns regarding housing for seniors, and updates on investigation trends ([Agenda Item VII](#)). There will be time for questions at the end.

Our mission statement is as mandated by OAA. The mission of LTCOP is to seek resolution of problems and advocate for the rights of residents of long-term care facilities, with the goal of enhancing the quality of life and care of residents. Our vision is that Nevadans of all ages and abilities will have meaningful lives led with dignity and self-determination. Our core values are respect, accountability, inclusivity, and advocacy.

Who does the Ombudsman Program serve? We are advocates for residents of nursing homes and other similar care facilities. The Ombudsman Program provides services to residents across the lifespan, including residents of nursing homes or board and care facilities, such as assisted living facilities. In these cases, residents may report to us that they are not being treated with dignity and respect, and our Program can step in, help advocate, and empower the residents to be treated appropriately.

We also assist family members or friends of nursing home residents. In these cases, we can provide services and resources to those family members and other ADSD programs and community partners. We also include nursing home administrators or employees with a concern for a resident at their facility. In this example, we can provide training to facility staff regarding best practices for care. We also include any individual or citizen's group interested in the welfare of residents. We attend monthly resident council meetings at skilled nursing facilities and, if able, we attend family council meetings in order to engage with these various groups and identify potential complaint trends in those facilities. Lastly, we include individuals and families who are considering long-term care placement. In this example, we provide further information so individuals and their families can make informed decisions.

The concerns the Ombudsman Program addresses are: (1) violations of residents' rights and dignity; (2) physical, verbal, or mental abuse, deprivation of services necessary to maintain residents' physical and mental health, or unreasonable confinement; (3) poor quality of care, including inadequate personal hygiene and slow response to requests for assistance—for example, answering call lights; (4) improper transfer or discharge of a patient, which now includes residential facilities for groups, as they have additional protections in those settings; (5) inappropriate use of chemical and physical restraints; and (6) any concern related to quality of care or quality of life for our residents.

The Long-Term Care Ombudsman Program is dedicated to ensuring that residents of long-term care facilities receive the highest quality of care and support. The Ombudsman Program advocates for those living in nursing homes and other long-term care facilities. The Ombudsman Program addresses complaints, conducts investigations, and strives to resolve issues. Our ombudsman also conduct visits to care centers where they speak with residents, provide available services, and offer guidance.

The facility types we enter and have authority to enter are skilled nursing facilities, which are state and federally regulated; assisted living and residential facilities for groups; homes for individual residential care; intermediate care homes; and adult day programs, which are all state regulated.

The Ombudsman Program also has two specialized units within the Program—a Non-Complaint Visit Team, or as we call it a Routine Visit Team, and an Investigation Team. The Non-Complaint Visit Team conducts monthly routine visits to all facilities statewide, which includes the facility types on the slide. During our last quarter, the Non-Complaint Visit Team spoke with 10,829 residents statewide. The Non-Complaint Visit Team also participates in our resident council meetings monthly and provides training to internal and external staff and network partners. The Team participates in outreach events and reviews discharge letters to ensure residents are not being discharged to the homeless shelters.

Our other unit is the Investigation, or our Complaint Visit Team. This Team conducts investigations when there are complaints in a long-term care setting, such as personal hygiene, privacy, and staffing concerns. The Investigation Team also investigates more complex cases, such as discharge and guardianship. If needed, the Investigation Team can send referrals to the Bureau of Health Care Quality and Compliance (HCQC), DPBH, DHS, and the Board of Examiners for Long-Term Care Administrators, if necessary efforts by the ombudsman have been exhausted.

The Nevada State LTCOP is authorized by the federal OAA. Federal law requires that each state have a LTCOP, which is managed by a state long-term care ombudsman. The Program was initiated to improve the quality of care in America's nursing homes, but it was later identified that other long-term care settings needed advocacy as well, so that was implemented. Confidentiality is a cornerstone of our service. By providing ongoing support and advocacy, LTCOP plays a crucial role in enhancing the well-being of long-term care residents across the state. We also provide presentations regarding a variety of issues related to resident rights, discharge protections, and person-centered care practices.

I want to give an example for person-centered care. Sometimes you may see a resident who wants to be woken up at 8 a.m., and a resident who wants to be woken up at 10 a.m. Per person-centered care, each person—if they are in the same home—should be accommodated. On this slide is our contact information for our helpline, which is a statewide phone number.

Moving on to legislation that was passed—AB 514 is a new provider type for rehabilitative residential mental health care settings. This bill allows the Ombudsman Program to advocate and investigate. The providers will need to apply with HCQC to be a provider. This is a win to support those with mental health needs to obtain services. The LTCOP will begin visiting these locations on July 1, 2026.

Assembly Bill 368, which Cheyenne mentioned briefly earlier, is expanding on the covered facilities where residents and legal representatives have the option of using electronic communication devices. The previous bill addressed the requirements for consent for the

device, including if the resident has a roommate, and notification outside of the bedroom informing that a device was being used. The placement of the device must not reveal any ADL being performed, such as incontinence care, dressing, toileting, and bathing. This bill also covers who is authorized to disable the device, which {includes} the Ombudsman Program, law enforcement, APS, legal guardians, and attorneys. This bill was effective October 1, 2025, and the Program has already begun to receive calls from residents to assist with advocacy to have the device in place.

Concerns regarding housing for seniors, which seems to be a popular topic—cost of housing is more than most seniors can afford. Private pay cost of dependent care can range from \$3,000 to \$10,000 per month. Most seniors would spend any savings quickly to pay for this needed care. This has caused seniors to stay in their homes longer without services or remain on waitlists for services. The barrier with lack of providers in the increasing cost for services is something our community cannot continue to ignore. The services available through ADSD, along with county programs, have allowed the gaps to be met to support seniors in their communities. Affordable housing options also continues to be a challenge Nevada needs to address with the growing senior population.

Another concern is the location of housing resources. There are limited providers in our rural areas for people to remain in the communities they are from. In addition, a lack of care providers adds to the barrier of staying at home with support. This drives the need for people to move into a facility in another area away from support groups and family members. However, many must remain on their waitlist due to high private pay costs.

Updates on the Ombudsman Program investigation trends. For our skilled nursing facilities, discharge remains the number one complaint in this setting. Residents are reaching out to the Ombudsman Program regarding unsafe discharges. This typically occurs after the Medicare coverage has terminated and a safe transfer is not completed for the resident. The Ombudsman Program has assisted in filing appeals, regulatory referrals, and resolution for safety. Our next top complaint is care planning. Complaints occur when the residents' needs are not being met on an individual plan. Lack of staffing can contribute to needs not being met timely or accurately. Lastly for skilled nursing facilities, physical abuse is a top complaint and occurs between residents when there are not enough staff to provide oversight and redirection. Physical abuse between staff and residents has also been reported when staff have struck out at residents.

For our residential facility for groups, or our assisted living facilities, discharge remains in the top five complaints for this setting as well. There are protections for residents and group homes in regard to discharge. The resident can no longer be sent to the hospital or a homeless shelter as a discharge plan. All discharges from this setting are also required, like skilled nursing facilities, to be sent to the Ombudsman Program for advocacy and assistance. Medications is the next top complaint, and this is in regard to residents not receiving medications timely, which can cause undue pain. Lastly, food services are among our top complaints. Residents have addressed dissatisfaction with the quality and quantity of food. During investigations, ombudsmen have found food with mold being served to residents as well as a lack of food available for our residents. The Program has increased oversight during our monthly routine visits to ensure food is not spoiled and adequate amounts of food are on hand for our residents.

That will conclude my presentation, and I will open it up for questions.

**President Almaraz:**

We will go to Carson City first.

**Ms. Daniels:**

Having been a caregiver for 11 years for my mother and then 5 years for my husband, I was unaware of these programs. Is there something where doctors are required to inform caregivers of these types of programs?

**Ms. Wetteland:**

I do not believe so. Mandated reporters for our Program are in our facilities. Skilled nursing facility staff members and residential facility for groups are all mandated reporters of abuse. We get those reports from APS.

**Ms. Doyle:**

Could you elaborate on the part about electronic communication devices in facilities? Do you mean their cell phones or iPads, or do you mean home monitoring systems? What exactly does this involve?

**Ms. Wetteland:**

It can be listening devices, such as baby monitors, or a visual recording of the room and a camera placed somewhere in the room.

**Ms. Coffron:**

Why is it that family members do not tend to their seniors in the United States of America like they do in many other countries? Why is that such a terrible thing that happens in this country?

**Administrator Robb:**

I wish I had that answer for you. It is quite unfortunate what we have seen with our aging population, and I think that is something for ADSD. It is near and dear to our hearts, which is why we are here. Our passion is to support programs such as APS and LTCOP, which is why we are in place.

It is unfortunate what we are seeing in our current structure and population. What our services are here to do is to support the individuals—not only for the individual who needs the care, but also our caregivers, because they are working diligently and caring for the individuals in our facilities. We are working every day.

The HCQC {handle} the compliance side, and we work closely with them any time we have a complaint or concern.

**Mr. Smith:**

How does the public know about your findings from your inspections? Say you go out for one with mold in the food, for example. Is there any way the public knows about this? Is it public knowledge at all?

**Ms. Wetteland:**

The Ombudsman Program's routine visits are mainly kept within our Program, but that is why we work closely with HCQC, which is the regulatory licensing bureau over our facilities. If we are not getting towards a resolution for corrections, we send referrals to HCQC. They provide surveys and surveys the facility, and you can find their findings on their website.

**Mr. Slaughter:**

Who turns the camera on and off for patient care? Especially in private times. Who is responsible for turning it on and off?

**Ms. Wetteland:**

When the Ombudsman Program enters a room—or the various groups I mentioned, like law enforcement and APS—we have the authority to turn off the camera. There is specific language. The bill that updates the current NRS 449, which previously addressed only skilled nursing facilities, now expands it to other licensed facilities. The bill states the camera should not be placed in an area where private care can be viewed. It should be placed in a general living quarter within the room.

**Dr. Jordan:**

The OAA has not received authorized approval for its seven Title programs. Can you tell us what the status is for ongoing work with the Ombudsman Program? It was authorized through 2024, and it has not been reauthorized. What is the current status?

**Ms. Wetteland:**

I think that is a great question. I would like to write it down and get back to you at a later date.

**Dr. Jordan:**

I would appreciate that because we need to know. It is a great program, but we need to know that it is going to continue. [Inaudible] the time dealing with it if it is not going to happen.

**Ms. Pasquale:**

Even though OAA has not been reauthorized, it has continued to get appropriations through federal FY 2025. We are anxiously awaiting to see what happens with the congressional budget for federal FY 2026.

**Ms. Bongiorno:**

I would like to know if there is a department that monitors these facilities.

**Ms. Wetteland:**

That would be the licensing bureau, which is HCQC.

***President Almaraz:***

Seeing no other questions, we would like to thank you for your presentation. We look forward to seeing you again.

**AGENDA ITEM VIII—INTRODUCTION TO STATUTES GOVERNING THE NEVADA SILVER HAired LEGISLATIVE FORUM, MEETING PROTOCOL, GUIDELINES OF DECORUM, AND OTHER ITEMS OF INTEREST TO MEMBERS OF THE FORUM**

***President Almaraz:***

Agenda Item VIII is the introduction of statutes governing the Nevada Silver Haired Legislative Forum, meeting protocol, guidelines of decorum, and other items of interest to members of the Forum.

I would like to say, especially to the new members, this is something we normally have at the beginning of our {meeting}. However, because we had many agenda items to get through, we wanted all of the people coming to be able to leave before we took an adjournment.

Patrick Ashton and Ms. Garcia will provide us with an introduction to statutes governing the Forum, meeting protocol, guidelines of decorum, and other related information. Please proceed when you are ready.

***Mr. Ashton:***

It is nice to be here again and have a chance to present on the Forum. The presentation we will provide is to give you an overview of the Forum, its purpose, duties, and responsibilities ([Agenda Item VIII A](#)). Ms. Garcia will follow with guidelines of decorum and meeting protocol—how are public meetings conducted? We will take questions after the presentation, as we have done before.

Before I begin, I would like to note there are several exhibits in your meeting binders we will refer to during my and Ms. Garcia’s remarks. There should be a copy of the statutes governing the Forum in your binders ([Agenda Item VIII B](#)); a memorandum on travel expenses and per diem allowance ([Agenda Item VIII C](#)); a copy of SB 60, which became law during the 2025 Session and was the Forum’s bill draft request (BDR) from last interim ([Agenda Item VIII D](#)); a memorandum on meeting protocol and guidelines of decorum ([Agenda Item VIII E](#)); the current roster of the Forum ([Agenda Item VIII F](#)); and the final report of the Forum’s activities from last interim ([Agenda Item VIII G](#)).

Authority and purposes—to get into it right away. The Forum has been active since its creation in 1997. In Chapter 427A (“Services to Aging Persons and Persons with Disabilities”) of NRS, you can find the statutes governing the Forum. In your meeting package, you will find a copy of the statutes under [Agenda Item VIII B](#). The statute creating the Forum and its purpose states, “The Nevada Silver Haired Legislative Forum is hereby created to identify and act upon issues of importance to aging persons.” In more detail, the purposes of the Forum include conducting public hearings—like this one—regarding issues affecting seniors in Nevada; identifying priority concerns for senior citizens; collaborating and developing a BDR designed to address those areas of greatest concern; and presenting this BDR to the Legislature and the Governor as recommendations for state policy.

What is the Forum? The Forum is comprised of members equal to the number of state senators—currently 21—who are nominated for appointment by the Legislative Commission. To qualify, a nominee must have been a Nevada resident for at least five years immediately preceding his or her appointment; have been a registered voter in the appointing senatorial district for at least one year preceding his or her appointment; and be at least 60 years of age on the day of their appointment. Members serve staggered two-year terms, which means about half are appointed to terms ending in even-numbered years and the other half ending in odd-numbered years. Forum members whose term expired may continue to serve until either a successor is appointed, or they are reappointed to their respective Forum seat for another term.

In the statute, on the slide, you can find information about the National Silver Haired Congress from Nevada, which serves automatically as ex officio members. Since the COVID-19 pandemic, it is unknown what the status is of this National Silver Head Congress on the federal level. To our knowledge, there is no active Nevada delegation.

Vacancies in membership—how does a vacancy occur? It is either through the death or resignation of a member, or due to an illness or absence for any reason that prevents the member from attending three consecutive meetings of the Forum, unless excused by the President. If a vacancy occurs of an appointed member, the Legislative Commission shall fill the vacancy in the same manner as the original selection for the remainder of the unexpired term.

Later, during this meeting, there will be the election of officers, which the Forum elects from the appointed members. The positions are: (1) President, who may serve a maximum of two 2-year terms, consecutively or staggered, and who conducts Forum meetings and all activities related to these meetings to accomplish the purposes of the Forum; (2) Vice President, who shall assist the President and conduct meetings if the President is absent or otherwise unavailable to perform his or her duties; and (3) two Facilitators, one in the north and one in the south, who gather information on issues of importance to senior citizens and provide a report at each Forum meeting. There is usually an agenda item—“Reports from the Facilitators”—where they make their reports.

Legislative Counsel Bureau staff assist the President in planning and conducting the meetings, and we are available to all the Forum members and the officers to assist as needed.

Members may also appoint one or more advisory members to the Forum. I will not go into detail about this because it has not happened yet, but I wanted to bring it to your attention since it is part of the laws governing the Forum.

Public meetings—the Forum must comply with the provisions of the Open Meeting Law (OML). My colleague, Ms. Garcia, will address the OML. Traditionally, the Forum studies issues of importance to senior citizens, such as what we heard today, or provisions of respite care, long-term care services, protection of senior citizens from abuse and neglect, and homelessness or food insecurity among older adults, to name a few of the topics the Forum heard in the past.

At the last meeting before September of an even-numbered year—meaning next September—the Forum usually has a work session, which means LCB staff, at the direction of the President, prepare a work session document that consists of several recommendations based on witness testimony you have heard during these meetings and possible actions you may take. Forum members then may vote on each of these recommendations.

The BDR the Forum approved last interim is SB 60, which I will talk to you about in a minute. It is one of the things the Forum can do—on or before September 1 preceding a regular legislative session—is to submit this BDR, which is then considered by the Legislature. Other powers of the Forum {include} submitting a report containing recommendations for legislative action to the Legislative Commission and the Governor; accepting gifts, grants, and donations; and adopting procedures to conduct meetings of the Forum and its committees.

The BDR requested by the Forum last interim was SB 60, which expands penalties for crimes committed against older or vulnerable individuals for three theft categories: (1) controlling property of another with intent to deprive the person of the property; (2) conversion of, unauthorized transfer of an interest in, or unauthorized control of the property of another by a person who had the authority to possess the property for only a limited duration or use; and (3) obtaining the property or services by a material misrepresentation with the intent to deprive the person of the property or services. Senate Bill 60 also adds these crimes to the list of crimes for which an additional civil penalty applies when committed against an older adult, which may be recovered by the Attorney General ([Agenda Item VIII D](#)).

At its recent meeting on October 28, the Legislative Commission approved the budget for all interim committees, including the Forum. For this interim, the Forum has a budget of about \$17,500, which serves for the compensation for Forum members. The funding is allocated to the Forum and the Forum President, with assistance from LCB staff, administers this funding. It is mainly used to support travel expense reimbursements for per diem allowances. In the exhibits for this agenda item, you will find a memorandum providing detailed instructions and an example of how to claim per diem allowance and be reimbursed for travel expenses ([Agenda Item VIII C](#)). In your meeting binder, you will find a blue form that you need to complete for claiming travel expense reimbursement and per diem allowance. If you have any questions about claiming that, please come to one of us here in southern Nevada or northern Nevada to get assistance with it.

At this point, I will hand it over to Ms. Garcia.

***Ms. Garcia:***

The purpose of the hearings—there are two of them—is so the public can see what the Forum is doing and get a good idea about your deliberations and actions. The second is so that you, in turn, can hear from the public, experts, and different people giving testimony, {including} lobbyists. You are learning from them as much as they are learning from us.

The Chair, or President—which are interchangeable terms for this Forum—is responsible for calling the hearing to order, conducting it, calling witnesses, and adjourning the meeting. If the Chair cannot attend, those actions can be delegated to the Vice President. If the Vice President cannot attend, those actions can also be delegated to a different member of the Forum. There is always someone who will be acting as Chair. Please refer to the Chair as “President,” “Madam President,” “Chair,” or “Mr. President.”

At the beginning of every hearing, the Chair will call {the meeting} to order. Then, they will start with a consideration of agenda items. Sometimes they might ask if items need to be taken out of order. If so, they may ask why, and they have the choice of whether or not to allow those agenda items to be taken out of order. Today is a great example—as we heard our Chair saying, the votes were pushed to the end so we could have presentations at the beginning and not make folks sit here.

When conducting the hearing, we start with public testimony. After that is taken, please raise your hand to indicate whether you have a question. We do this to make sure we are not talking over each other and to make sure people {have a chance to be} heard. We are doing our best to be respectful. Please wait to be recognized by the Chair before you proceed. If you are participating virtually, please raise your hand. If you are not called upon, feel free to turn on your microphone and say, “Madam or Mr. President, I have a question,” and turn it off after.

If there are any agenda items that require action, the Chair will ask Forum members for a motion to take action. They will allow further discussion and then recognize those wishing to speak. Once there is no more discussion to be had, the Chair can ask for a voice vote. If the results cannot be determined, then the Chair can call for a roll call vote, and we will all hear those results. Following testimony, discussion, and action, we will move on to the next item on the agenda.

If you are participating on Zoom, feel free to ask me any questions but also familiarize yourself with the controls. Keep yourself muted {to avoid} background noise, but have your cameras on at all times because we need to know who is there. Be aware of where you are, who you are with, and what it sounds like, which is a matter of respect for your colleagues. This was mentioned earlier, but do not use the chat box on Zoom or group emails to discuss items. If you were a member of the public and deliberation was going on behind the scenes, you would be upset; also, it is a legal requirement. Any discussion has to take place on the record.

Public comment is allowed at the beginning and end of the meeting. The Chair is allowed to limit the time allotted. Sometimes we might not have as much time, and the Chair is welcome to extend it to five minutes. Sometimes we need to shorten public comment, so it might be only a couple of minutes for presenters. We want to make sure, just like with Forum members, that people can say what they need to say, but we need to be wary of our time constraints. Forum members should restrain themselves from discussing topics that come up during public comment. If you hear something that you think, “This would be a great topic of discussion for the Forum.” Make note of it and talk to the Chair so we can discuss it at a future meeting. We have to make sure those topics are on the agenda ahead of time, so that if somebody is interested in hearing about it, they can be present, and they are never left behind if they feel they need to be a part of a conversation. After public comment, we will talk about the time and place for the next meeting, and then the Chair can adjourn without a motion.

We will have many witnesses, as we did today, so after they are done speaking, you are welcome to ask them questions. Sometimes those questions might be limited, and sometimes you may be allowed to ask as many as you need to fully understand the conversation topic. Raise your hand, wait to be called on, and when it is your turn, have that discussion. Please make sure we are giving the same respect to our witnesses as we would to other members of the Forum—address them as “Mr.” or “Ms.” If they have a title like “Doctor” or “Senator,” use that title.

As Patrick mentioned earlier, we are subject to OML as a public body, which is why we cannot use chat boxes and why we have to talk about everything on the record in these meetings. Our agenda has to provide full notice and disclosure of topics. This is why we cannot start randomly discussing things during public comment—everything has to be properly noticed and taken openly. Also, keep in mind that any action has to be taken by the body as a whole. We have to make sure we are following the laws and rules. We are respecting the wishes of other members of the Forum as much as we are our own.

**Mr. Ashton:**

The Forum's final report from last interim is part of your meeting materials under [Agenda Item VIII G](#). We also included a current roster of the Forum, which is in your binders under [Agenda Item VIII F](#). Additionally, as Forum members, you can order business cards from the Forum Secretary, Ms. Jimenez. You should have already received an email requesting your information if you want to order a set of business cards. Please respond to this email, and we would be happy to fulfill that request for you.

Legislative Counsel Bureau staff is also sending Forum-related materials electronically to you in an effort to be environmentally conscious and to communicate with you in a timely manner. If you would like us to communicate in another way, or you do not have an email account, please let us know. We will communicate with you by other means—phone or mail.

One more thing I want to mention—under the legislative website for the Forum, you {can} sign up for notices to receive from the Forum or anything we {post on} the Forum's website, like the agenda or the final report for this interim. You will receive these notices, and you can receive help from us to learn how to sign up for that.

This will conclude our presentation, and we stand ready for any questions you may have.

**President Almaraz:**

Could you give the members the website address where they can get on the legislative site? Our new members may not know.

**Mr. Ashton:**

Yes, President Almaraz. We can send out an email with instructions on how to sign up.

**Mr. Thorne:**

Do we use *Robert's Rules* during our proceedings? For example, move, second, discussion—that kind of procedure.

**Mr. Ashton:**

Yes, Mr. Thorne, we follow this formal procedure. I spaced the name right now—Mason's Law. I can go back to it and figure out what it is.

**President Almaraz:**

We will go to Carson City. Are there any questions?

**Mr. Smith:**

Being remote and being on a tiny screen, several times we would raise our hand, but you do not see us because we are so small. I do not want to insult you by interrupting or pressing my microphone, but I do not know how else to get in touch with you.

**Mr. Ashton:**

This is one of the issues with the screens—it is hard to see—but like Ms. Garcia said earlier, it is appropriate to get on the microphone and say, “Excuse me, Madam or Mr. President, there is a question or a comment,” and then wait to be recognized and continue after that. But first, it would be good to raise your hands and/or try that as well.

**Ms. Darden:**

I am looking at this—I think what Patrick is referring to is the “NSHLF Electronic Meeting Materials.” I want to make sure I am following along properly. When he was putting on his presentation, he said you have a booklet of some sort. Is this what he was referring to?

**Mr. Ashton:**

Yes. The Forum Secretary sent an electronic version of the binder to you, so you should have that in your email. You can follow along there.

The acronym “NSHLF” stands for Nevada Silver Haired Legislative Forum, and that is used when we upload documents on the website, or send them out because it is a long name; file names have a limit of characters.

**Ms. Darden:**

I perused through this, and it looked like the last ten pages have to do with the BDR. Are those suggestions we should be looking at? Are you aware of that? There are BDRs in the last part of this booklet.

**Mr. Ashton:**

Those are recommendations from last interim the Forum considered and voted on, which are part of the final report. This is for all the members—about 11 members are newly elected to the Forum—so you can see what the Forum worked on last interim. You will see that again for this interim in a similar form during a work session, which I alluded to, that will be most likely in a meeting in August where our staff will coordinate with the Forum President to come up with recommendations for you to consider. One of these recommendations will become a BDR, which will be introduced as a bill to be considered in a regular legislative session—meaning the 2027 Session.

The other recommendations that are possible—which you can see there—are, for instance, letters of support that are sent to the Governor and to the Chairs of the Senate and Assembly Committee on Health and Human Services to advocate for certain issues of importance to senior citizens. It could be also a recommendation that is put in the final report because the report is sent to different entities, including the Governor and the Legislative Commission.

**Ms. Darden:**

I do not know if my computer glitched, but are we doing *Robert's Rules* or we are doing something else? I think you mentioned another process to run the meeting.

**Mr. Ashton:**

I am spacing on the name right now, but generally, committees at the Legislature follow the rules of OML, which applies to the Forum as well. Any other rules that are not in OML follow what Mr. Thorne said—this rule and the other name; I can follow up on that. I apologize, but generally, yes, there are formal procedures to follow—how to take a motion, how to vote, and how to announce the results. If you would like more information on that, I can get back to you.

The Forum has a legal counsel that can talk about these procedures and OML more if you are interested in that topic. Mr. Fernley is not available on Zoom—he had to step out for another appointment—but it is something we could prepare for the Forum for further information.

**Ms. Darden:**

With all respect, I would like to request that when you send the information to get on the website, the meeting protocol {also be} included, if possible.

**President Almaraz:**

Any questions in Las Vegas? Seeing none, we will {conclude} this presentation. Thank you, Mr. Ashton and Ms. Garcia for this information.

## **AGENDA ITEM IX—DISCUSSION OF FUTURE AGENDA ITEMS AND POSSIBLE MEETING DATES**

**President Almaraz:**

One of the topics that Patrick covered was Agenda Item IX—the discussion of future agenda items and possible meeting dates. We will have four meetings in 2026. Does anybody have suggestions for topics they would like to hear at our future meetings?

**Ms. Daniels:**

I would like to see something discussed about property taxes on seniors.

**President Almaraz:**

We can put that down as a topic, but that is not something we could do a BDR on and legislate; but we could have someone come and discuss it. Those are not state; they are more county.

**Mr. Linden:**

I have an issue relating to Lyft ride services. I am not sure this is the proper place to bring it up or if I should go somewhere else. I have not been able to achieve anything in trying to get to senior management at Lyft, and I am trying to figure out what path to go through. How do I do that? I need guidance.

**Mr. Ashton:**

Mr. Linden, you and I could follow up on that issue after the meeting, if you would like, and I can find resources for you.

**Mr. Thorne:**

It would not be in the form of a BDR, but there are issues that need to be brought up concerning internal controls. I am an auditor, so naturally, that is where I am coming from. There seem to be areas I saw during the presentations today {where} things were being implemented, but I did not see—or maybe it was there—discussion on the internal controls regarding the implementation. I can see opportunity for fraud, waste, and abuse.

I am not saying anybody is doing anything illegally—errors happen all the time—but there clearly is opportunity for SNAP cards, or {similar items}, to fall into the wrong hands. I want to know how they are addressing the internal controls over programs such as these.

**President Almaraz:**

Someone from SNAP—you would like for them to come back and delve deeper into their Program.

**Mr. Thorne:**

That would work—discussion on what safeguards are in place to make sure that SNAP, or whatever benefits, are going to the proper people. I know mistakes will happen, but there are ways to control misappropriation and illegal use.

**Mr. Slaughter:**

As we talked about last {interim}, I work with people with neurological degenerative diseases, specifically Parkinson's disease. I am a volunteer; I have done this for seven years, and I see people of color being able to come to these programs. I do not get money for this; I have done it for seven years as a volunteer. I was wondering if we could discuss seniors—predominantly people with Parkinson's, people who are seniors. If there is a way we can bring these people so they can enjoy programs such as boxing with Parkinson's, dancing with Parkinson's, and other clubs with Parkinson's. They do not have disposable income because when they worked, they might have worked as a busboy or a maid, whereas most of the people I work with who have Parkinson's actually had careers—doctors, a couple of football coaches.

I was wondering if there is any way we can find funding to bring people from the west side of Las Vegas or wherever, to places—transportation—and help them defer the cost of these programs.

**Dr. Jordan:**

My focus this year, hopefully, will address housing for seniors. It is a number one issue in our state, and it is something we have been talking about for a while. We need to put our foot to the pedal this year and address the important steps we can make on behalf of our seniors as it relates to housing.

**Ms. Bongiorno:**

I would like to see us address the insidious disease of dementia and also the caregivers—what the criteria are, and how we can investigate when we have this type of abuse. Even addressing probate court, wills, trusts, and things that many of us or our friends do not have or do not know where to get help. Maybe we can bring in attorneys to address that for us and for caregivers. I know people who have had as many as 48 patients with dementia, and we can get firsthand knowledge from them.

**Mr. Troth:**

Two things—and this is probably both coming out of DHS. First, a presentation or discussion about continuing to advertise, inform, and promote all the resources available to the state. There are a lot of them, and we had that conversation. I do not think word gets out enough, and I do not know what the answer is to that. I know they spend time and effort doing that, but maybe a presentation on information dissemination promoting the resources.

The second one is I would like to revisit the family senior care reimbursement function we talked about last time, and it was addressed today, to see if that can be expanded. We have a lot of families that take care of their own seniors, sometimes at a lot of expense, time, and energy.

**President Almaraz:**

These are all great topics. We will work with Patrick, and see if we can get those on future agendas. You can also email Patrick, at any time, if you come up with something else you want to have addressed.

We are going to future meeting dates. We have four meeting dates, one of them being in August because that is our work session, and it will be a longer meeting, like today was. For the new members, most of our meetings are not this long. Please do not think that from now on, you are going to be here for five or six hours. However, the one in August does run longer because it is a work session where we decide on what our BDR is going to be and discuss the topics and vote on what we want to bring before the Legislature.

I am going to turn it over to Patrick for a moment {to discuss} possible meeting dates and months he thinks would be available.

**Mr. Ashton:**

The first question is if you still would like to have a meeting this year—meaning in December. Otherwise, the next meeting could be in January, a break, then the next meeting in March, again a break, then in May, and then there could be a larger break in between to come up with recommendations for the final meeting in August. That could be a possible way to go about it.

Regarding the days you would like to meet, in the past, Forum members were never able to meet on the same day. Generally, Tuesday, Wednesday, and Thursday were meeting dates of the Forum. I cannot remember a meeting date of the Forum on Monday or Friday, at least during my time; but it is also possible.

**President Almaraz:**

My thought is, since we have one in August, maybe we could work backwards every other month.

**Dr. Jordan:**

Last year, we had a good schedule. We met in February, April, and June, and that worked well. We had a break in between. We had the opportunity to look into the things we were encouraged to share, and people did not have to come on a monthly basis.

Also, I looked at the attendance—when it was best for everybody to show up—and that is what we need. We need your support. That is my recommendation—February, April, June, and August.

**Mr. Troth:**

The schedule that we did—that was basically the last two sessions—worked like that. Like Patrick was saying, Tuesday, Wednesday, and Thursdays are best. For me, that seemed to work out last year too. For new members, pipe up if those are things that are not workable for you.

**President Almaraz:**

If we decide on February, April, June, and August, which we have done for the last couple of years, how about if we have Tuesdays? Anybody who cannot attend on a Tuesday?

**Ms. Daniels:**

Tuesdays do not work for me.

**President Almaraz:**

Let us try for Wednesday. How is everyone fixed for Wednesday?

**Ms. Daniels:**

It depends on which Wednesday it is in the month.

**President Almaraz:**

Do you have the first, second, third, or fourth? What is your time frame?

**Ms. Daniels:**

I have a meeting on the third Wednesday of each month. I would not be available the third Wednesday.

**Ms. Darden:**

In August, the first two weeks I will be out of the country. I wanted that to be considered, and that would put us in the third week of August or the last week.

**Ms. Peggy Leavitt:**

I also have a standing appointment on the third Wednesday of each month. With respect to August, I will be gone the third week.

**Ms. Daniels:**

The fourth Thursday of those months works for us here in Carson.

**President Almaraz:**

How about Thursday?

**Mr. Thorne:**

I am wondering if staff has any preferences in terms of how much time it takes you to put together the background material for these meetings. Is there a better time, earlier or later in the month?

**President Almaraz:**

Patrick said that part does not matter. I am looking at the fourth Thursday, which would be August 27, June 25, April 23, and February 26. I am not sure about August 27, if we could pick another day that week. I think everybody is good with the fourth Thursday of the month, except for August.

**Mr. Troth:**

How late in September? Is the requirement to have it done before September 1?

**President Almaraz:**

Yes, we must be finished by September 1, so August needs to be earlier in the month. Somebody said they cannot do the third Wednesday. Can you do the fourth Wednesday? For the people who cannot do the third Wednesday, can you do {August} 26?

**Ms. Daniels:**

Yes, I can. The third Wednesday is the only one I cannot do.

**President Almaraz:**

We are going to request these dates. It depends on if the room is available and if our staff can be here. We will request August 26, June 25, April 23, and February 26. They are all Thursdays, except August 26, which is a Wednesday. Mostly everybody is good with those dates, but we have to request them—that is not set. If LCB says no because something is going on in the meeting room in Carson City or here, then we will have to adjust those days.

**AGENDA ITEM X—ELECTION OF FORUM OFFICERS**

**President Almaraz:**

Our next agenda item is election of Forum officers. Only one member is nominated. I will hand this over to Patrick for the election of Forum officers.

**Mr. Ashton:**

During the last agenda item, we provided you with an overview of Forum officer positions. Let me briefly repeat these positions.

There is the position of Forum President. The term is a maximum of two 2-year terms, consecutively or staggered, and duties include coordinating and facilitating all activities for the Forum meetings together with the Vice President and, especially, with staff—directing staff on who to invite as presenters, organizing the meetings, and conducting the meetings. They accomplish the purposes of the Forum, as well as administer the Forum account with the assistance of staff from LCB.

The next officer position is Vice President, which is a one-year term. The Vice President can be reelected, meaning there are no term limits. The Vice President also coordinates and facilitates activities in Forum meetings together with the Forum President, and assists the President to conduct meetings if the President is absent or otherwise unavailable to perform his or her duties.

The other two positions are those of the Facilitators—the Northern and Southern Facilitators, who are elected for two-year terms and can be reelected. The Facilitators gather information on issues of importance to senior citizens and provide a report at each Forum meeting. I also want to emphasize these terms began on September 1 of this year.

Next, let me explain the process of the election. You will hold separate elections for each officer position, and I will ask you for nominations for each one. If a member is nominated for an officer position, he or she needs to accept the nomination in order to be considered for the position. Nominees will have the opportunity to deliver brief remarks before the vote. After we have received all nominations, the secretary will take a roll call vote, and then I will announce the results of the vote. The nominee with a majority of the votes will be elected to the respective office. We would start with the election of the Forum President, then we will go with Vice President and the Facilitators. Before I proceed, are there any questions?

**Ms. Johnson:**

It is a matter of being nominated to run, correct?

**Mr. Ashton:**

Correct. You need to be nominated. You could also self-nominate for an officer position; that is possible. Whoever is nominated would need to accept the nomination as well.

Any other questions on Zoom or Carson City? Seeing none, I will accept nominations for the Forum President at this time.

**President Almaraz:**

Mr. Ashton, I would like to nominate Dr. Jordan, our Vice President, as the next President.

**Mr. Ashton:**

We have one nomination for Dr. Jordan. Are there any other nominations at this time?  
[There were none.]

Dr. Jordan, you have been nominated. Do you accept the nomination?

**Dr. Jordan:**

It is my pleasure.

**Mr. Ashton:**

Dr. Jordan said yes.

**Dr. Jordan:**

I am very excited about it, and I look forward to doing this wonderful job. I have been here for ten years, and I am looking forward to being here a while longer. I appreciate it.

**Mr. Ashton:**

Since only one member was nominated, we will take a roll call vote. Before taking the vote, I will open it up for discussion. Does anyone have any comments they would like to make before the Forum takes a vote?

Dr. Jordan, if you want to make an additional statements besides the one you just made in favor of your candidacy, feel free to do so.

**Dr. Jordan:**

I have served in all three of the positions prior to this, so I think I am prepared, and Madam President has given me the opportunity to serve in the role when she has been absent, so I have a good understanding of it. I have had perfect attendance in my last ten years—I have not been absent once—and I have gotten to know everybody.

I believe my background—having been an educator; an elementary, middle, and high school principal; a superintendent in New York City; and a financial director for the largest district in New York City—public policy, three master's, a master's in business, and a doctorate in public policy and finance—I bring something to the table.

Right now, I am working with major corporations outside of this position and on strategic planning for corporations. I want to bring that experience to our Forum.

**Mr. Ashton:**

Any other comments before we take the vote? Seeing none, members, if you are in favor of Dr. Jordan serving as Forum President, please say 'yes' when your name is called; when opposed, please say 'no.' Madam Secretary, please start the vote.

Ms. Darden—Yes

Mr. Folmar—did not respond

Mr. Silberkraus—Yes

Ms. Johnson—Yes

Mr. Linden—Yes

Ms. Laura Leavitt—Yes

Dr. Jordan—Yes

Ms. Bongiorno—Yes

Mr. Slaughter—Yes

Mr. Thorne—Yes  
Mr. Smith—Yes  
Ms. Daniels—Yes  
Dr. Shonkwiler—did not respond  
Ms. Doyle—Yes  
Mr. Troth—Yes  
Ms. McAdoo—Yes  
Ms. Peggy Leavitt—Yes  
Ms. Almaraz—Yes

This concludes the vote. Dr. Jordan has received the majority of the votes and will serve as Forum President. Congratulations, Dr. Jordan.

***President Jordan:***

Thank you. I appreciate all of you, and I look forward to working with everybody.

***Mr. Ashton:***

Forum President Jordan, with your permission, may I continue with the next nomination for Vice President? [President Jordan granted permission.]

The next position will be for Vice President. Members, please announce your nominations for the position of Vice President.

***Ms. Laura Leavitt:***

I would like to nominate Michele Johnson from Senate District 6.

***Mr. Ashton:***

Any other nominations?

***Ms. Almaraz:***

Yes. I would like to nominate Mr. Frank Slaughter. He has been with us a few years, and he seems very engaged. I would like to see him as Vice President.

***Mr. Ashton:***

Any other nominations? [There were none.]

We have two nominations—Michele Johnson and Frank Slaughter. Ms. Johnson, do you accept the nomination?

***Ms. Johnson:***

Yes.

***Mr. Ashton:***

Mr. Slaughter, do you accept the nomination?

**Mr. Slaughter:**

Yes.

**Mr. Ashton:**

At this point, the members have an opportunity to make any comments regarding the nominations. Ms. Johnson and Mr. Slaughter, feel free to make comments in favor of your candidacy.

**Ms. Johnson:**

I have been a resident of Las Vegas since 1959. I ran a nonprofit organization for 42 years, so I have undertaken being here and behind this Forum in the past. I handled everything that had to do with the organization, from finances, to hiring and firing, to expanding. I know Clark County, and I know Las Vegas. That being said, I understand Mr. Slaughter has been around longer, so you can certainly vote for him because I think he is worthy of it as well.

**Mr. Slaughter:**

After listening to your credentials—we talked before this—I was going to nominate you. I do not have the credentials you have. I am just a guy off the street. I do a lot of volunteer work in Las Vegas for youth with addictions, and I work with people with Parkinson's. I am also a UNLV boxing coach.

**President Jordan:**

We have two great candidates. I know Mr. Slaughter better since he has been here for a while, and I think he is an excellent candidate, but Ms. Johnson, we would like you to consider being here with us too.

Mr. Slaughter, do you have any other words that you would like to share?

**Mr. Slaughter:**

Let the chips fall where they may.

**Mr. Ashton:**

Any other comments, members? Seeing none, we will take a roll call vote. The member with the highest number of votes will serve as the Vice President. In this case, when the secretary calls your name, please say the name of the nominee you are voting for.

The nominees for the officer position of Vice President are Mr. Frank Slaughter and Ms. Michele Johnson. Madam Secretary, please start a roll call vote.

Ms. Darden—Mr. Slaughter  
Mr. Folmar—did not respond  
Mr. Silberkraus—did not respond  
Ms. Johnson—Ms. Johnson and Mr. Slaughter  
Mr. Linden—Mr. Slaughter  
Ms. Laura Leavitt—Ms. Johnson  
Dr. Jordan—Mr. Slaughter

Ms. Bongiorno—Ms. Johnson  
Mr. Slaughter—Ms. Johnson  
Mr. Thorne—Mr. Slaughter  
Mr. Smith—Abstain  
Ms. Daniels—Ms. Johnson  
Dr. Shonkwiler—did not respond  
Ms. Doyle—Mr. Slaughter  
Mr. Troth—Mr. Slaughter  
Ms. McAdoo—Mr. Slaughter  
Ms. Peggy Leavitt—Mr. Slaughter  
Ms. Almaraz—Mr. Slaughter

Madam Secretary, would you please confirm the votes we have here in Las Vegas—for Mr. Slaughter, ten votes, and for Ms. Johnson, five votes. Does this match what you have?

**Ms. Jimenez:**

That is correct.

**Mr. Ashton:**

For the officer position as Vice President, Mr. Slaughter received the majority of the votes. Congratulations, Mr. Slaughter.

**Vice President Slaughter:**

I will tell you, I will try to do my best—that is all I can do.

**Mr. Ashton:**

We will continue with the next officer position: Northern Facilitator. Are there any nominations, members?

**Ms. Almaraz:**

Mr. Ashton, I would like to nominate Mr. Smith.

**Mr. Ashton:**

Any other nominations? Seeing no other nominations, Mr. Smith, do you accept your nomination?

**Mr. Smith:**

Yes, sir, I do.

**Mr. Ashton:**

Mr. Smith, do you have any comments before the vote? Or any other members—do you have comments before the vote?

**Mr. Smith:**

I would like to let the {Forum} know I will do my best. Being brand-new, I am still learning, but I am a quick learner, so hopefully I can get my feet on the ground and start running here shortly. I look forward to participating more than I can.

**Mr. Ashton:**

Any other comments?

**Ms. Almaraz:**

Mr. Smith has served in the Legislature; he knows his way around. He will be a great Northern Facilitator.

**President Jordan:**

I am looking forward to working with you. I know we have a lot of work to do up that way, as well as here. New or old, we are looking forward to a great team, and we welcome you.

**Mr. Ashton:**

Seeing no other comments at this time, and since only one member was nominated, the Forum will take a roll call vote. If you are in favor of Mr. Smith serving as Northern Facilitator, please say 'yes' when your name is called. If opposed, say 'no.' Madam Secretary, commence the vote.

Ms. Darden—Yes  
Mr. Folmar—did not respond  
Mr. Silberkraus—Yes  
Ms. Johnson—Yes  
Mr. Linden—Yes  
Ms. Laura Leavitt—Yes  
Dr. Jordan—Yes  
Ms. Bongiorno—Yes  
Mr. Slaughter—Yes  
Mr. Thorne—Yes  
Mr. Smith—Yes  
Ms. Daniels—Yes  
Dr. Shonkwiler—did not respond  
Ms. Doyle—Yes  
Mr. Troth—Yes  
Ms. McAdoo—Yes  
Ms. Peggy Leavitt—Yes  
Ms. Almaraz—Yes

Mr. Smith, you have received the majority votes and are now the Northern Facilitator of the Forum. Congratulations.

We will now continue with the last, but not least, officer position—Southern Facilitator. Are there any nominations?

**President Jordan:**

I am delighted to have Ms. Johnson considered for this wonderful position.

**Mr. Ashton:**

Any other nominations? Seeing none, Ms. Johnson, will you accept your nomination?

**Ms. Johnson:**

Yes, I will.

**Mr. Ashton:**

Do you have any comments you would like to make, or do any other Forum members have comments?

**Ms. Johnson:**

With the party I have, I must be successful in order to put up with them.

**Mr. Ashton:**

Members, if you are in favor of Ms. Johnson serving as Southern Facilitator, please say 'yes' when your name is called. If opposed, say 'no.' Secretary, take the roll call vote.

Ms. Darden—Yes  
Mr. Folmar—did not respond  
Mr. Silberkraus—Yes  
Ms. Johnson—Yes  
Mr. Linden—Yes  
Ms. Laura Leavitt—Yes  
Dr. Jordan—Yes  
Ms. Bongiorno—Yes  
Mr. Slaughter—Yes  
Mr. Thorne—Yes  
Mr. Smith—Yes  
Ms. Daniels—Yes  
Dr. Shonkwiler—did not respond  
Ms. Doyle—Yes  
Mr. Troth—Yes  
Ms. McAdoo—Yes  
Ms. Peggy Leavitt—Yes  
Ms. Almaraz—Yes

Ms. Johnson, you have received the majority votes. Congratulations on being the Southern Facilitator of the Forum.

Forum members, this concludes our election for this interim. Congratulations to all the newly elected officers.

**Ms. Almaraz:**

Congratulations on being elected. Dr. Jordan, with your permission, I will finish closing out today.

**President Jordan:**

Yes, but I would like to say one thing on behalf of the Forum. We all need to say and demonstrate our support and love for our Madam President, who will be leaving office. She has done a fantastic job, and we will miss her terribly. We appreciate all the fine work you have done. With two bills and two sessions—you did your thing, my dear. We look forward to working with you continuously.

**Ms. Almaraz:**

Thank you, everyone. It has been my pleasure.

## **AGENDA ITEM XI—PUBLIC COMMENT**

**Ms. Almaraz:**

Do we have anyone in Carson City for public comment? [There was none.] In Las Vegas, is there anyone for public comment?

Forum members, I am going to bend the rules and let Ms. Bongiorno tell us something during public comment. It is not something we normally do. However, the program she wants to tell us about—I think we would like to hear it.

**Ms. Bongiorno:**

I have a company named Diamond J L.L.C and have been an advocate for many years for seniors. Somethings you have asked many times is how to find, or how to know, who to call for what. My company, through a programmer we use—her name is Joan Summer, who was with the Metropolitan Police Department and is a systems analyst—put together, along with the information that I gained from our President, Fran Almaraz, a guide to local resources.

We developed a thumb drive, and on that thumb drive, you will have a table of contents with resources we can reach out to. It gives their addresses, what they do, and their phone numbers.

The only thing we ask at this time—I gave it to churches, senior citizens, and the Henderson Police Department—is that they make a copy and pass it forward. In the event a senior comes and says, “Where do I find, for example, health and medical assistance? Where do I find food assistance? Where do I find shelter? Where do I find transportation?” It is all on here.

It was on a sheet of paper, and we added to it. It is about 100 pages, but we put it on a thumb drive. I would like to offer it to the Nevada Silver Haired and maybe make a copy for each one of you. All I ask is that you pay it forward—whomever you give it to ask them to provide it to another senior center, or perhaps a church, so that our seniors will have access to these resources and the table of contents where they could reach out to.

**Ms. Almaraz:**

Seeing no one else in Las Vegas, we will go to questions.

**Ms. Doyle:**

This is interesting information. Is that for all of Nevada, not just southern Nevada?

**Ms. Bongiorno:**

It was derived from southern Nevada, which was all the information I had at the time that we developed this, but we would be willing to adjust.

**Ms. Doyle:**

That would be very useful.

**Ms. Almaraz:**

Seeing no one else in southern Nevada, AVH please add the first caller with public comment to the meeting. [There were no callers.]

Thank you everyone for participating. It is good to see everybody again, and it is good to see all these new faces.

Following the meeting, written public comment from Meghan Adam, Habitat Health ([Agenda Item XI](#)) was received.

**AGENDA ITEM XII—ADJOURNMENT**

There being no further business to come before the Forum, the meeting was adjourned at 3:19 p.m.

Respectfully submitted,

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Melissa Jimenez  
Research Policy Assistant

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Patrick Ashton  
Senior Principal Policy Analyst

APPROVED BY:

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Marilyn E. Jordan, Ed.D., President

Date: \_\_\_\_\_

## MEETING MATERIALS

AGENDA ITEM	PRESENTER/ENTITY	DESCRIPTION
<a href="#">Agenda Item IV A-1</a>	Shane Piccinini, Manager, Government Relations, Food Bank of Northern Nevada (FBNN)	PowerPoint Presentation
<a href="#">Agenda Item IV A-2</a>	Shane Piccinini, Manager, Government Relations, FBNN	Handout
<a href="#">Agenda Item IV A-3</a>	Shane Piccinini, Manager, Government Relations, FBNN	Service Area Map
<a href="#">Agenda Item IV A-4</a>	Shane Piccinini, Manager, Government Relations, FBNN	Emergency Food Response Plan
<a href="#">Agenda Item IV B</a>	Jeff Duncan, Chief of Staff, Three Square	Link to the Library to Request the PowerPoint Presentation  This is on file in the Research Library of the Legislative Counsel Bureau (LCB), Carson City, Nevada. For copies, contact the Library at (775) 684-6825.
<a href="#">Agenda Item V</a>	Ann Jensen, Administrator, Nevada Medicaid Division, Nevada Health Authority (NVHA)  Kirsten Coulombe, Social Services Chief III, Long Term Services and Supports, NVHA	PowerPoint Presentation
<a href="#">Agenda Item VI</a>	Cheyenne Pasquale, Agency Manager, Office of Community Living, Aging and Disability Services Division (ADSD), Department of Human Services (DHS)	PowerPoint Presentation

<b>AGENDA ITEM</b>	<b>PRESENTER/ENTITY</b>	<b>DESCRIPTION</b>
<a href="#">Agenda Item VII</a>	Ciara Wetteland, Adult Rights Supervisor, ADSD, DHS	PowerPoint Presentation
<a href="#">Agenda Item VIII A</a>	Patrick Ashton, Senior Principal Policy Analyst, Research Division, Legislative Counsel Bureau (LCB)  Angelina Garcia, Senior Policy Analyst, Research Division, LCB	PowerPoint Presentation
<a href="#">Agenda Item VIII B</a>	Patrick Ashton, Senior Principal Policy Analyst, Research Division, LCB  Angelina Garcia, Senior Policy Analyst, Research Division, LCB	<i>Nevada Revised Statutes</i>
<a href="#">Agenda Item VIII C</a>	Patrick Ashton, Senior Principal Policy Analyst, Research Division, LCB  Angelina Garcia, Senior Policy Analyst, Research Division, LCB	Memorandum
<a href="#">Agenda Item VIII D</a>	Patrick Ashton, Senior Principal Policy Analyst, Research Division, LCB  Angelina Garcia, Senior Policy Analyst, Research Division, LCB	Senate Bill 60 (2025)
<a href="#">Agenda Item VIII E</a>	Patrick Ashton, Senior Principal Policy Analyst, Research Division, LCB  Angelina Garcia, Senior Policy Analyst, Research Division, LCB	Memorandum

<b>AGENDA ITEM</b>	<b>PRESENTER/ENTITY</b>	<b>DESCRIPTION</b>
<a href="#">Agenda Item VIII F</a>	Patrick Ashton, Senior Principal Policy Analyst, Research Division, LCB  Angelina Garcia, Senior Policy Analyst, Research Division, LCB	Forum Member Roster
<a href="#">Agenda Item VIII G</a>	Patrick Ashton, Senior Principal Policy Analyst, Research Division, LCB  Angelina Garcia, Senior Policy Analyst, Research Division, LCB	Forum Bulletin
<a href="#">Agenda Item XI</a>	Meghan Adams, Habitat Health	Written Public Comment

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