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REVISED
MEETING NOTICE AND AGENDA

Name of Organization: Subcommittee to Conduct a Study of Postacute Care
(Assembly Bill 242 [Chapter 306, *Statutes of Nevada 2015*])

Date and Time of Meeting: Wednesday, July 6, 2016
8:30 a.m.

Place of Meeting: Legislative Building, Room 2135
401 South Carson Street
Carson City, Nevada

Note: Some members of the Subcommittee may be attending the meeting and other persons may observe the meeting and provide testimony through a simultaneous videoconference conducted at the following location:

Grant Sawyer State Office Building, Room 4401
555 East Washington Avenue
Las Vegas, Nevada

If you cannot attend the meeting, you can listen or view it live over the Internet. The address for the Nevada Legislature website is <http://www.leg.state.nv.us>. Click on the link "[Calendar of Meetings/View](#)."

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

Note: Items on this agenda may be taken in a different order than listed. Two or more agenda items may be combined for consideration. An item may be removed from this agenda or discussion relating to an item on this agenda may be delayed at any time.

- I. Opening Remarks
Assemblywoman Robin L. Titus, M.D., Chair

II. Public Comment

(Because of time considerations, each speaker offering comments during the period for public comment will be limited to not more than 3 minutes. A person may also have comments added to the minutes of the meeting by submitting them in writing either in addition to testifying or in lieu of testifying. Written comments may be submitted in person or by e-mail, facsimile, or mail before, during, or after the meeting.)

*For
Possible
Action*

III. Approval of Minutes of the Meeting Held on April 6, 2016, in Carson City, Nevada

*For
Possible
Action*

IV. Work Session—Discussion and Possible Action on Recommendations Relating to:

A. Proposals Relating to Funding for Postacute Care

B. Proposals Relating to Quality of Postacute Care

C. Proposals Regarding Alternatives to Institutionalized Care

The “Work Session Document” is attached below and contains proposed recommendations. The document is also available on the Subcommittee’s webpage, [Subcommittee to Conduct a Study of Postacute Care](#), or a written copy may be obtained by contacting Marsheilah D. Lyons, Chief Principal Research Analyst, Research Division, Legislative Counsel Bureau, at (775) 684-6825.

V. Public Comment

(Because of time considerations, each speaker offering comments during the period for public comment will be limited to not more than 3 minutes. A person may also have comments added to the minutes of the meeting by submitting them in writing either in addition to testifying or in lieu of testifying. Written comments may be submitted in person or by e-mail, facsimile, or mail before, during, or after the meeting.)

VI. Adjournment

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

Notice of this meeting was posted in the following Carson City and Las Vegas, Nevada, locations: Blasdel Building, 209 East Musser Street; City Hall, 201 North Carson Street; Legislative Building, 401 South Carson Street; and Legislative Counsel Bureau, Las Vegas Office, Grant Sawyer State Office Building, 555 East Washington Avenue. Notice of this meeting was faxed, e-mailed, or hand delivered for posting to the following Carson City and Las Vegas, Nevada, locations: Capitol Press Corps, Basement, Capitol Building, 101 North Carson Street; Clark County Government Center, Administrative Services, 500 South Grand Central Parkway; and Capitol Police, Grant Sawyer State Office Building, 555 East Washington Avenue. Notice of this meeting was posted on the Internet through the Nevada Legislature’s website at www.leg.state.nv.us.

Supporting public material provided to Committee members for this meeting may be requested from Gayle Nadeau, Committee Secretary, Research Division of the Legislative Counsel Bureau at (775) 684-6825 and is/will be available at the following locations: Meeting locations and the Nevada Legislature’s website at www.leg.state.nv.us.

Subcommittee to Conduct a Study of Postacute Care
(Assembly Bill 242 [Chapter 306, *Statutes of Nevada 2015*])

WORK SESSION DOCUMENT



July 6, 2016

Prepared by the Research Division
Legislative Counsel Bureau



WORK SESSION DOCUMENT

Subcommittee to Conduct a Study of Postacute Care
Assembly Bill 242 (Chapter 306, Statutes of Nevada 2015)

July 6, 2016

The following “Work Session Document” (WSD) was prepared by the Chair and staff of the Subcommittee to Conduct a Study of Postacute Care. This document contains a summary of recommendations that were presented during public hearings, through communication with individual Subcommittee members, or through correspondence or communications submitted to the Subcommittee. The WSD is designed to assist the Subcommittee members in making decisions during the work session. Actions available to the Subcommittee members include: (1) legislation to amend the *Nevada Revised Statutes* (NRS); (2) transitory sections that do not amend the statutes; (3) resolutions; (4) statements in the Subcommittee’s final report; and (5) letters of recommendation or support.

The Subcommittee may accept, reject, modify, or take no action on any of the proposals. The recommendations contained herein do not necessarily have the support or opposition of the Subcommittee. Rather, these recommendations are compiled and organized so the members may review them to decide whether they should be adopted, changed, rejected, or further considered. They are not preferentially ordered.

Legislative Counsel Bureau staff may, at the direction of the Chair, coordinate with interested parties to obtain additional information for drafting purposes or for information to be included in the final report. The recommendations may have been modified by being combined with similar proposals or by the addition of necessary legal or fiscal information. It should also be noted that some of the recommendations may contain an unknown fiscal impact.

The Subcommittee may request the drafting of not more than five legislative measures that relate to the matters within the scope of the study. The approved recommendations for

legislation resulting from these deliberations will be prepared as bill draft requests (BDRs) and submitted for introduction to the 2017 Legislature.

RECOMMENDATIONS

Proposals Relating to Funding for Postacute Care

1. Submit a BDR requiring the Division of Health Care Financing and Policy (DHCFP), Department of Health and Human Services (DHHS), to review Medicaid waiver programs and revamp them to ensure that funding covers the actual cost of personal care provided in personal residences, assisted living facilities, or residential facilities for groups.

(Recommendation proposed by Lucia Mathis, Vice President, Nevada Assisted Living Centers, and Connie McMullen, Personal Care Association of Nevada)

2. Submit a BDR requiring Medicaid reimbursement rates to be consistent for equivalent services provided in similar settings. Specifically, the same services, whether provided in residential facilities for groups, supported living arrangements (SLAs), or Community-based Living Arrangements, should be reimbursed at the same level.

(Recommendation proposed by Helen Foley on behalf of the Residential Care Home Community Alliance of Nevada and the Association of Homecare Owners of Northern Nevada)

3. Send a letter to the Governor of the State of Nevada, the Director of DHHS, and the Chairs of the Senate Committee on Finance and Assembly Committee on Ways and Means during the 2017 Legislative Session recommending and expressing support for:
 - a. A review of the rate methodology for postacute care facilities and personal care and home health care services;
 - b. Inclusion of an appropriation in the Governor's recommended budget and the legislatively-approved budget that supports payment rates that are sufficient to ensure that Medicaid beneficiaries have access to covered Medicaid services; and
 - c. Indexing the rate to increase with inflation in future biennia.

(Recommendation proposed by Daniel Mathis, President/Chief Executive Officer (CEO), Nevada Health Care Association)

Proposals Relating to Quality of Postacute Care

4. Submit a BDR to establish consistent standards for all facilities providing 24-hour, long-term care for individuals who need supervision, assistance with personal care and medication management, including residential facilities for groups, SLAs, and Community-Based Living Arrangements. Specifically provide consistency by establishing the following essential standards:
 - a. State Oversight
 - b. Annual State Inspections
 - c. Enforceable Penalties
 - d. State's Ability to Impose Fines
 - e. Transparency and Disclosure

Following are additional standards for consideration:

- f. Certified Administrators
- g. Liability Insurance
- h. Minimum High School Diploma Requirement for Staff
- i. Minimum Staffing Ratios
- j. Internet Access to Inspection Date and Survey Results
- k. Residential Sprinklers

(Recommendation proposed by Helen Foley on behalf of the Residential Care Home Community Alliance of Nevada and the Association of Homecare Owners of Northern Nevada)

5. Draft a BDR expanding the authority of the long-term care ombudsmen authorizing them to advocate for residents of the following arrangements and facility types:
 - a. Living Arrangements
 - i. Supported Living Arrangements, Aging and Disability Services Division (NRS 435.3315)
 - ii. Community-based Living Arrangements, Division of Public and Behavioral Health
 - b. Facilities for the Care of Adults During the Day

Currently the long-term care ombudsmen advocate for residents in homes for individual residential care, residential facilities for groups, and skilled nursing facilities (nursing homes).

(Recommendation resulted from discussions at the November 17, 2015, Subcommittee meeting)

Proposals Regarding Alternatives to Institutionalized Care

6. Submit a BDR to authorize certain employees or members of the staff, who are unlicensed assistive personnel to complete basic Centers for Medicare and Medicaid Services (CMS) training in defined vital signs for certain residents. The vital signs defined by CMS include taking a resident's temperature, blood pressure, pulse, apical heart rate, respirations, oxygen saturation, and finger-stick glucose.

Staff of the following facilities and agencies are proposed to receive this authority:

- a. Residential facility for groups (NRS 449.017);
- b. Agency to provide personal care services in the home (NRS 449.0021);
- c. Intermediary service organization (NRS 449.4304); and
- d. Facility for the care of adults during the day (NRS 449.004).

(Recommendation proposed by Lucia Mathis, Vice President, Nevada Assisted Living Centers, Connie McMullen, Personal Care Association of Nevada, and Christopher A. Vito, President and CEO, Nevada Adult Day Healthcare Centers)

7. Include in the Subcommittee report the following policy statements:
 - a. The Subcommittee strongly supports the ability for senior adults and individuals with disabilities to remain in their homes or in community-based settings. The Subcommittee recognizes that delivering home- and community-based, postacute care services and supports plays a major role in helping individuals avoid more institutional settings, resulting in social and financial benefits.
 - b. The Subcommittee encourages the DHHS to establish a “no wrong door” philosophy as it relates to members of the public accessing information about postacute care services and supports. The Subcommittee encourages the DHHS to increase collaboration and coordination among the variety of postacute care entities and programs licensed and managed by the State and other public and private resources to increase access by members of the public to timely and appropriate information and services.

(Recommendation proposed by Assemblywoman Titus, Chairperson, Subcommittee to Conduct a Study of Postacute Care)