

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

**WORK SESSION
DOCUMENT**

(Includes Exhibits)



June 20, 2012

Prepared by the Research Division
Legislative Counsel Bureau



WORK SESSION DOCUMENT

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

June 20, 2012

The following "Work Session Document" has been prepared by the Chair and staff of the Legislative Committee on Senior Citizens, Veterans and Adults With Special Needs (*Nevada Revised Statutes* [NRS] 218E.750). It is designed to assist the Committee members in developing statements and determining recommendations to be forwarded to the 2013 Session of the Nevada Legislature.

The recommendations contained herein do not necessarily have the support or opposition of the Committee. Rather, these possible actions are compiled and organized so the members may decide if the recommendations should be adopted, changed, rejected, or further considered. The Committee may vote to send as many statements or letters as they choose; however, pursuant to NRS 218D.160, the Committee is limited to ten bill draft requests (BDRs), including requests for drafting of legislative resolutions. Any BDRs must be submitted to the Legal Division of the Legislative Counsel Bureau on or before September 1, 2012.

The proposals listed in this document are conceptual recommendations arranged by topic, and are not preferentially ordered. The members may accept, reject, modify, or take no action on any of the proposals. Additionally, although possible actions may be identified within each recommendation, the Committee may choose to recommend any of the following actions: (1) draft legislation such as a BDR or resolution; (2) write a letter on behalf of the Committee; or (3) include a statement in the final report.

The source of each recommendation is noted in parentheses, when available. Please note specific sources may not be provided if the proposals were raised and discussed by numerous individuals, or only one main source may be listed when there were also others who contributed.

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

RECOMMENDATIONS RELATING TO SENIOR CITIZENS AND ADULTS WITH SPECIAL NEEDS

1. Home and Community-Based Services (HCBS)

- A. **Write a statement in the final report** that Nevada should: (1) develop a philosophy that consumer choice and quality of life should drive the long-term support services system; and (2) allocate a greater proportion of Medicaid funding for HCBS rather than nursing home care. (Recommended by Barry Gold, Director of Government Relations, AARP Nevada) (See Exhibit A.)
- B. **Write a letter** to the members of the Senate Committee on Finance and the Assembly Committee on Ways and Means of the 2013 Legislative Session requesting that the Committees consider increasing the level of funding budgeted from the State General Fund for HCBS, for seniors, veterans and adults with special needs. (Recommended by Senator Shirley A. Breeden, Chair) (See Exhibit B.)
- C. **Draft legislation** establishing an interim legislative study on the issue of HCBS in order to identify and recommend improvements and reforms to HCBS. (Recommended by Assemblywoman Teresa Benitez-Thompson, Vice Chair)

NOTE: *The Committee heard testimony during the meeting held on March 21, 2012, about the cost savings associated with providing home and community-based services versus skilled nursing services.*

- 2. **Draft legislation** to require a facility for skilled nursing conduct an annual assessment of each patient in the facility who is receiving Medicaid benefits to determine if the patient qualifies for a lower level of care or HCBS. (Recommended by Assemblywoman Teresa Benitez-Thompson, Vice Chair) (See Exhibit C.)
- 3. **Draft legislation** to make the following changes concerning criminal background investigations of independent contractors and certain employees of facilities for long-term care. (Recommended by Marla McDade Williams, Deputy Administrator, Health Division, Department of Health and Human Services [DHHS]) (See Exhibit D.)
 - a. Create an exception to the requirement that facilities for long-term care conduct criminal background investigations of independent contractors and temporary employees. A facility would not need to conduct a criminal background investigation of any independent contractor or temporary employee who is placed in the facility by an employment agency that has completed a criminal background investigation on the independent contractor or temporary employee. A criminal background investigation conducted by an employment agency would be valid for

as long as the independent contractor or temporary employee maintains continuous employment with the employment agency.

NOTE: *Current law requires a long-term care facility to conduct a criminal background investigation on any independent contractor or temporary employee that is placed in the long-term care facility by the employment agency. If the independent contractor or temporary employee works in more than one facility, each long-term care facility is required to conduct a criminal background investigation on the independent contractor or temporary employee.*

- b. Create an exception to the requirement that facilities for long-term care conduct a criminal background investigation on an employee who possesses a professional license if the professional or occupational board or commission conducted a criminal background investigation as a requirement for licensure.

RECOMMENDATIONS RELATING TO SENIOR CITIZENS

4. **Draft legislation** to reinstate members of the clergy and attorneys as mandatory reporters of abuse of those over age 60 in NRS 200.5093. (Recommended by Aging and Disability Services Division, DHHS; Nevada Commission on Aging; and Barry Gold, Director of Government Relations, AARP Nevada) (See Exhibit E.)

NOTE: *In 2005, Section 5 of Assembly Bill 267 (Chapter 324, Statutes of Nevada) removed clergy and attorneys from the list of mandatory reporters of elder abuse for persons over 60 years of age.*

RECOMMENDATIONS RELATING TO VETERANS

5. **Write a statement in the final report** encouraging the Regional Transportation Commission of Southern Nevada (RTC) to establish paratransit and fixed-route service to the new Veterans Administration Medical Center in Southern Nevada. (Recommended by Senator Shirley A. Breeden, Chair)

NOTE: *At the March 21, 2012, meeting, representatives from the RTC indicated that: (1) The RTC is working with the United States Department of Veterans Affairs to obtain federal funding to finance fixed-route service to the new veterans medical center; and (2) veterans can request transportation to the new veterans medical center by certain nonprofit organizations which are funded by federal grants.*

6. **Draft legislation** providing that if a person applying to the Department of Motor Vehicles (DMV) for an instruction permit, driver's license, or identification card declares that he or she is a veteran of the Armed Forces of the United States, the person may request that his or her veteran's status be placed on the instruction permit, driver's license, or identification card. Any such person would be required to provide evidence satisfactory to the DMV that he or she has been honorably discharged from the Armed Forces of the United States. (Recommended by Senator Shirley A. Breeden, Chair) (See Exhibit F.)

NOTE: *Currently, NRS 483.292 and 483.852 require the DMV to inquire whether an applicant for an instruction permit, driver's license, or identification card wishes to declare himself or herself as a veteran of the Armed Forces of the United States. If an applicant makes such a declaration, he or she must provide satisfactory evidence of his or her honorable discharge to the DMV. The DMV is required to transmit quarterly to the Office of Veterans' Services, the aggregate number of persons who have, during the immediately preceding quarter, declared that they are veterans of the Armed Forces of the United States. However, the DMV does not have statutory authority to include a person's veteran status on an instruction permit, driver's license, or identification card.*

7. **Specialty Court Programs for Veterans.**

- A. **Write a letter** urging the Eighth Judicial District Court (Clark County) to establish a specialty court program for veterans. (Recommended by Assemblyman Elliot T. Anderson) (See Exhibit G.)

- B. **Draft legislation** to require every district court located in a county whose population is 700,000 or more (currently the Eighth Judicial District Court in Clark County) to establish a specialty court program for veterans. (Recommended by Assemblyman Elliot T. Anderson)
- C. **Include a statement in the final report** encouraging courts to apply for any available federal funding and grants for the purpose of establishing or expanding, as applicable, specialty court programs for veterans. (Recommended by Assemblyman Elliot T. Anderson) (See Exhibit H.)

NOTE:

- (1) NRS 176A.280 authorizes, but does not require, a district court to establish a specialty court program for veterans and members of the military. Currently, the Second Judicial District Court in Washoe County is the only district court that has established such a program. Department 10 of the Las Vegas Township Justice Court in Clark County maintains a monthly calendar for veterans.*
- (2) The Committee heard presentations on specialty court programs for veterans in Nevada and other states. Testimony indicated these programs have been successful in reducing recidivism among veterans and assisting veterans in obtaining a variety of services and benefits.*

LIST OF EXHIBITS

TAB A	Letter containing recommendations by Barry Gold, AARP Nevada
TAB B	Overview of Aging and Disability Services Division - Home and Community Based Services Waiver Programs provided by the Fiscal Division, LCB
TAB C	Overview of nursing facility residents and home and community based services provided by the Division of Health Care Financing and Policy, Department of Health and Human Services (DHHS)
TAB D	Background explanation of recommendations submitted by the Health Division, DHHS NRS 449.123 Initial and periodic investigations of employee or independent contractor of certain agency, facility, or home.
TAB E	Section 5, subsection 4(d) through 4(f) of Assembly Bill 267 (Chapter 324, <i>Statutes of Nevada 2005</i>) NRS 200.5093 Persons required to report the abuse, neglect, exploitation, or isolation of an older person NRS 432B.220 Persons required to report the abuse or neglect of a child Letter containing recommendations by the Legislative Subcommittee of the Commission on Aging
TAB F	Compilation of other state laws regarding veteran designation on the driver's license provided by the National Conference of State Legislatures (NCSL) NRS 483.292 Department of Motor Vehicles (DMV) inquiry of veteran's status on an application for an instruction permit or license NRS 483.852 DMV inquiry of veteran's status on an application for an identification card DMV Quarterly Report of Veteran Declaration by County DMV Monthly Report of Veteran Declaration by County
TAB G	NRS 176A.280 Establishment of treatment program for veterans and members of the military
TAB H	List of federal funding opportunities for specialty courts provided by NCSL

TAB A

Legislative Committee on Senior Citizens, Veterans, and Adults with Special Needs

AARP Comments – March 21, 2012

Good morning Madam Chairwoman and members of the committee. For the record, my name is Barry Gold and I am the Director of Government Relations for AARP Nevada.

I am not here today to talk about each and every program and service available to older adults in the Medicaid waiver programs. There are great descriptions available on the website – and the staff in the ADSD can tell you in detail about the criteria and processes for eligibility, assessment, case management, exact service components and delivery. I am not here to talk about legislative appropriations. I am here to talk about how important these programs are, and how cost effective they are.

Basically there are three Medicaid waiver programs – these are all people that are on Medicaid and meet NH level of care criteria. The following are basic descriptions of the three programs taken from the ADSD website.

[Home and Community Based Waiver \(HCBW formerly CHIP\)](#)

Non-medical services to older persons to help them maintain independence in their own homes as an alternative to nursing home placement.

[Waiver for the Elderly in Adult Residential Care \(WEARC\)](#)

Non-medical services in a group care setting to offer individuals a less expensive alternative of supervised care in a residential setting.

[Assisted Living \(AL\) Waiver](#)

Assisted living supportive services to eligible individuals in a residential facility as an alternative to nursing home placement

Note that all the descriptions state, “as an alternative to nursing home placement”. There is more information on the website in each program about the criteria that says, “Are at risk of nursing home placement within 30 days without services.

Currently there are approximately 1767 slots in the Medicaid waiver programs. There are 1241 in HCBW, 472 in WEARC, and 54 in AL. We have to remember that Slots are really people.

They are combining the WEARC and HCBW (CHIP) waiver to allow for easier transition for clients between the programs if they move or change settings.

Currently the average costs for these programs range from \$8000 for HCBW, \$9000 for AL and \$12,000 for WEARC per client per year. Only half of that or less is General Fund – so that is roughly \$4,000 to \$6,000 dollars per year to keep people living in the community out of a nursing home. The rest is the Federal Matching dollars or FMAP.

According to the ILG report the Annual Medicaid General Fund cost per Nursing Home client is \$19,000. That is General Fund. The total cost is over \$60,000 including FMAP.

We have a significant savings to the state with these programs. It has been estimated that we can take care of 4 or 5 people in these waiver programs for the same cost as 1 person in a nursing home. The waiver programs could save over 25 million per year in General Fund if all the people in the waiver programs had to get go to a nursing home. This is \$50 million over the biennium. How many of you would like to think you could potentially save and have \$50 million when you are figuring the state budget - to use for other needs in our state?

These are the numbers you get by taking half the average cost per client in each waiver (which is about the General Fund portion) and subtracting that from 19,000 (the General Fund cost for Nursing Homes) and then multiplying the difference by total number of slots in that waiver – and adding up the three programs. Again, this a very rough projection – but it really shows the cost effective nature of these services and potentially how much they are, they can, and they will save Nevada.

These savings I stated are found by this formula:

\$8,000 avg HCBW becomes \$4000 of general fund, subtracted from 19,000 (nursing home GF) = 15,000 (GF) x 1241 (# of slots/people in HCBW) = \$18,615,00

\$ 12,000 avg WEARC becomes \$6,000 general fund, subtracted from \$19,000
= \$13,000(GF) x 472 (# of slots/people in WEARC) = \$6,136,00

\$9,000 avg AL become \$4,500 of general fund, subtracted from \$19,000
= \$4,500 (GF) x 54 (of slots in AL) = \$783,000

Total savings from waiver programs over nursing home placement: \$25,534,000 per year.

As mentioned earlier, the people who are currently in each and every one of those “slots” all meet a level of care criteria for Nursing Home – and would be at risk of nursing home placement within 30 days WITHOUT supports or services -- according to the definition of and criteria for being in the programs. So they all could be in nursing homes if they wanted to be, or if there were not these cost effective services available to them.

There will always be people who need 24 hour supervised nursing care – and we need to be sure we have the capacity to do this – and the appropriate facilities to care for them, even if they cognitive or behavioral deficits. Nevada currently has difficulties placing behavior problem or dementia patients in Nevada nursing homes and is forced to place them out of state in nursing homes at a much higher cost. That is a separate problem that may need a separate presentation.

The Independent Living Grant programs take care of people in the community as well, and make up the backbone of community services for those older adults that may only need a little help. Without these services they would face difficulties in living independently, and could end up eventually needing more expensive services and nursing home placement. These services are paid for out of the Tobacco Master Settlement Agreement.

The Aging and Disability Services Division’s 2011 report states that 5,872 people received Independent Living Grant funded services. The report details the services, and impact to Nevada residents, as well as savings to the state.

The report states that 17% or 684 people who received ILG services are at imminent risk for institutionalization according to their deficits in ADLS. Those 684 would overload the waiver programs – if forced into them – and while on what would certainly be long waiting lists – may eventually have to be placed in a NH. The report states the ILG annual average expenditure per client is \$384 per year. That’s right \$384. This translates to over \$12 million in savings for GF dollars by keeping these 684 people out of a nursing home, according to the report.

That is what this presentation is all about. Preventing - avoiding – or perhaps delaying what is known as “premature” placement in an institution. These home and community based services save money, and keeps people where they want to be.

We used to advocate for the waiver programs and the ILG services as a way to keep people living independently and with dignity. It is the “right thing to do”. This is still true, however, because of the severe budget deficits Nevada has faced – we now also concentrate and focus on the cost effective nature of these services; how they actually save the state money now and in the future. Many of you have heard me testify before the legislature on the cost savings these services provide.

The number of slots has not been increased for at least 5 years. In fact they have been reduced. While Nevada has one of the fastest growing older adult populations – our capacity to take care of people in these home and community based settings has been reduced. Most of this was done for budget reasons, and any vacant slots were quickly cut and absorbed back into the budget. When the need grows, and it surely will – what will Nevada be faced with? Will we be placing people in Nursing Homes at a higher cost because these waiver programs are maxed out or ?? That is the question.

In 2014 Medicaid will be expanded to 128% of FPL in accordance with the Affordable Care Act. There will be more people who are eligible – some of them undoubtedly will be frail, disabled, vulnerable, old – and need these type of services. Nevada can be proactive and consider this and look at expanding the slots – or just “wait and see what happens”. For the first several years the costs for these newly eligible Medicaid recipients will be almost entirely covered by the Federal govt with FMAP. People filling these “slots” will not be costing the state very much at all. Or - we can have them go into a nursing home – again covered mostly by the Feds – but where would you want to go? Where would you want your Mother to go?

AARP Nevada is here today to urge the committee that Nevada should develop a philosophy that consumer choice and quality of life should drive the Long Term Support Services system.

That Nevada should allocate a greater proportion of Medicaid funding for HCBS instead of nursing home care.

Nevada must provide potential consumers with viable options for home and community based services that will help care for them in their communities where they would rather be, and help divert them from nursing home care before admission. These services cost less, save the state and taxpayers money; and as I have said before allow people to live with dignity and independence.

Thank you.

TAB B

Aging and Disability Services Division - Home and Community Based Services - Waiver Programs

The Aging and Disability Services Division (ADSD) administers four home and community based waiver programs, including three Medicaid programs and one state-funded program, that provide services which enable elderly persons to remain in the community and avoid placement in long-term care facilities. The three Medicaid waiver programs are jointly funded through Medicaid and the ADSD, and the state-funded waiver program is funded solely through the ADSD. Legislatively approved funding for the four waiver programs amounted to approximately \$28.8 million in FY 2012 and \$28.5 million in FY 2013.

Medicaid Waiver Programs - As noted above, the ADSD administers three Medicaid waiver programs. These programs are funded by federal Title XIX Medicaid funding and a General Fund match. The required General Fund match for the Medicaid waiver programs varies from year to year and is determined by the Federal Medical Assistance Percentage (FMAP) rate.

Home and Community Based Waiver (HCBW)– The HCBW provides non-medical services to seniors that help them maintain independence in their own homes as an alternative to nursing home placement. HCBW services can include case management, homemaker services, adult day care, adult companion, personal emergency response system, chore, respite, nutrition therapy and access to state plan personal care services.

Eligible persons include those aged 65 years and older throughout Nevada who are at risk of nursing home placement within 30 days without support and waiver services to keep them in their home and community, have income up to 300 percent of Supplemental Security Income (SSI) Federal Benefit Rate (\$2,094 per month for an individual and \$3,144 per month for a couple) and meet a level of care criteria for a nursing facility.

The HCBW waiver has 1,241 legislatively approved caseload slots per month for both FY 2012 and FY 2013. As of April 2012, 1,187 slots were filled and 145 people were on the waiting list. Legislatively approved funding for the HCBW waiver program totals \$19.1 million in FY 2012, including Title XIX funding of \$10.3 million and General Fund of \$8.8 million. Legislatively approved funding for the HCBW waiver program totals \$19.0 million in FY 2013, including Title XIX funding of \$10.6 million and General Fund of \$8.4 million.

Assisted Living (AL) Waiver – The AL waiver maximizes the independence of Nevada's frail elderly by providing assisted living supportive services to eligible individuals in a

residential facility that offers 24-hour supervised care, individual living units, a kitchenette, sleeping area or bedroom, and contains private toilet facilities. Waiver services include: case management to assist with gaining access to needed waiver and other state plan services as well as needed medical, social, educational, and other services, regardless of funding sources; and augmented personal care services, which include assistance and supervision with the activities of daily living such as mobility, bathing, dressing, oral hygiene, toileting, transferring, ambulating, feeding and medication oversight (to the extent permitted under state law).

The program serves persons 65 years and older throughout Nevada who are at risk of nursing home placement within 30 days without provision of services and in need of a more integrated and supervised environment, have income up to 300 percent of the SSI Federal Benefit Rate and meet a level of care criteria for a nursing facility.

The AL waiver has 54 legislatively approved caseload slots per month for both FY 2012 and FY 2013. As of April 2012, 30 caseload slots were filled and the waiting list was zero. Legislatively approved funding for the AL waiver program totals \$721,165 in FY 2012, including Title XIX funding of \$388,284 and General Fund of \$332,881. Legislatively approved funding for the AL waiver program totals \$715,947 in FY 2013, including Title XIX funding of \$397,921 and General Fund of \$318,026.

Waiver for the Elderly in Adult Residential Care (WEARC) Waiver - WEARC is offered to seniors to maximize independence by providing supervised care in a residential facility for groups as a less expensive alternative to nursing home placement. WEARC services include: case management to assist with gaining access to needed waiver and other state plan services as well as needed medical, social, educational, and other services, regardless of funding sources; attendant care services are provided by the group home and can include bathing, dressing, transferring, walking, oral care, feeding, toileting and transportation.

The program serves persons 65 years and older throughout Nevada who are at risk of nursing home placement within 30 days without provision of services and in need of a more integrated and supervised environment, have income up to 300 percent of the SSI Federal Benefit Rate and meet a level of care criteria for a nursing facility.

The WEARC waiver has 472 legislatively approved caseload slots per month for both FY 2012 and FY 2013. As of April 2012, 463 slots were filled and 64 people were on the waiting list. Legislatively approved funding for the WEARC waiver program totals \$8.2 million in FY 2012, including Title XIX funding of \$4.4 million and General Fund of \$3.8 million. Legislatively approved funding for the WEARC waiver program totals \$8.1 million in FY 2013, including Title XIX funding of \$4.5 million and General Fund of \$3.6 million.

State-Funded Waiver Program – The ADSD administers one state-funded waiver program, which is funded by a combination of General Fund and the Healthy Nevada Fund.

Community Service Options Program for the Elderly (COPE) Waiver - COPE provides services to seniors to help them maintain independence in their own homes as an alternative to nursing home placement. COPE services include the following non-medical services such as case management, homemaker, social adult day care, adult companion, personal emergency response system, chore, attendant care services and respite.

Eligible persons include those aged 65 years and older throughout Nevada who are at risk of nursing home placement within 30 days without provision of services, have incomes up to \$2,923 per month and/or assets \$10,000 for an individual or \$30,000 for a couple, and meet a level of care criteria for a nursing facility.

The COPE waiver has 96 legislatively approved caseload slots per month for both FY 2012 and FY 2013. As of April 2012, 45 slots were filled and two people were on the waiting list. Legislatively approved funding for the COPE waiver program totals \$680,693 in FY 2012, including General Fund of \$369,538 and Healthy Nevada Fund of \$311,155. Legislatively approved funding for COPE totals \$628,008 in FY 2013, including \$316,996 in General Fund and \$311,012 in Healthy Nevada Fund.

Home and Community Based Waiver Programs Legislatively Approved Funding Summary

	FY 2012			
	HCBW	AL	WEARC	COPE
General Fund	8,803,477	332,881	3,767,502	369,538
Title XIX (Medicaid)	10,335,884	388,284	4,444,528	-
Healthy Nevada Fund	-	-	-	311,155
FY 2012 Totals	19,139,361	721,165	8,212,030	680,693
	FY 2013			
	HCBW	AL	WEARC	COPE
General Fund	8,377,729	318,026	3,574,909	316,996
Title XIX (Medicaid)	10,600,644	397,921	4,560,955	-
Healthy Nevada Fund	-	-	-	311,012
FY 2013 Totals	18,978,373	715,947	8,135,864	628,008

TAB C

Nursing Facility Residents and Home and Community Based Services

Facility Outreach and Community Integration Services (FOCIS)

Facility Outreach and Community Integration Services (FOCIS) was developed in 2003 as one of the Division of Health Care Financing and Policy's (DHCFP) responses to the federal court decision known as the Olmstead Decision, requiring states to ensure that every recipient has the right to live in his or her least restrictive environment. Since that time, FOCIS has been the primary point of contact to provide assistance to individuals who choose to seek community-based alternatives to institutional placement.

DHCFP FOCIS program staff are tasked with responding to referrals and conducting community outreach, opportunities for which come to DHCFP through a variety of case finding or outreach methods.

FOCIS staff assist both with diversions (preventing nursing facility placement through community supports and services) and transitions (assistance with securing community placements with supports and services to enable a recipient to move from a nursing facility into the community).

Referral Sources

Minimum Data Set Information

Nursing homes nationally are required to submit Omnibus Budget Reconciliation Act (OBRA)-required MDS records to Centers for Medicaid & Medicare (CMS) for all residents in Medicare or Medicaid certified beds regardless of the payer source. MDS assessments are required for residents on admission to the nursing facility and then periodically, within specific guidelines and time frames. The MDS contains items that reflect the acuity level of the resident, and is used to monitor the quality of care in nursing homes nationally.

MDS information is transmitted electronically by the nursing facilities to the CMS MDS database for each state, which is then incorporated into the national MDS database at CMS. DHCFP contracts with Meyers & Stauffer for the provision of reports extracted from Nevada's MDS data, and Meyers & Stauffer provides this report quarterly to DHCFP.

The reports received from Meyers & Stauffer are an extraction from the available data, specific to recipient answers to Section Q. Section Q is a newer section of the MDS, and addresses recipient participation in the assessment, resident's overall expectations, discharge plan, return to the community, and documentation of any referrals to the Local Contact Agency (DHCFP). Scoring of answers to these questions are captured in the data extraction, along with the names and Medicaid numbers of the recipients, and provided in the quarterly report data transmitted to DHCFP for FOCIS program use. Meyers & Stauffer provided training to DHCFP staff to enable the use of this quarterly report data for referrals to FOCIS.

In addition, DHCFP MDS review nurses conduct nursing facility MDS accuracy reviews. These reviews touch 20% of the facility census (regardless of payer source) at the time of the review, or a minimum of ten recipient files for smaller facilities. Should review staff note an affirmative response to the newer Section Q portion of the MDS, indicating that a recipient wishes to be informed about

services available in his or her community, DHCFP MDS review staff make this referral to the FOCIS program.

Other Referral Sources

Referrals are received by the FOCIS program from:

- other state agencies
- DHCFP staff in other programs
- nursing facilities
- rehabilitation hospitals
- acute hospitals
- community agencies
- recipients
- family members
- any interested party.

No referral source is discounted.

All referrals are responded to if, upon contact with the recipient, the recipient wishes the assistance of FOCIS staff. Recipient participation with FOCIS is voluntary. In turn, if recipients contacted by FOCIS appear to have other assistance needs, FOCIS staff make those referrals as well.

Community Outreach

FOCIS staff conduct presentations and make both formal and informal contacts about the purpose of the program to nursing facilities, rehabilitation hospitals, acute hospitals, county public guardian offices, community nonprofit agencies such as Centers for Independent Living, and state agencies such as MHDS Regional Centers.

No opportunity to conduct a presentation or provide information is declined.

TAB D

Provided by the Health Division, Department of Health and Human Services

- To work at certain facility types such as a facility for skilled nursing an individual must be background checked in accordance with NRS 449.123 in order for a determination to be made whether an individual has or has not been convicted of a crime listed in NRS 449.174. After an opportunity to correct, if an individual has been convicted of one of the listed crimes he or she must be terminated from employment.
- Many of the professional licensing boards require background checks to be conducted on their licensees but may not use all of the crimes listed in NRS 449.174 to determine whether an employee is disqualified from licensure; therefore, to work at certain facilities a licensed professional would need to be background checked in accordance with NRS 449.123 to ensure he or she is eligible to work. This may result in an individual that meets the background check requirements for licensure but not the requirements to work at certain facility types. Therefore, a licensed professional who has been background checked for licensure purposes would need to be background checked in accordance with NRS 449.123 for purposes of employment at certain facility types. This results in duplicative background checks.
- The proposed BDR attempts to fix this by saying that if a licensing board requires that a licensee be background checked, makes a determination that the licensee has not been convicted of a crime listed in NRS 449.174 and conducts the background check at least once every 5 years the individual would not have to be background checked again to work at a facility that must comply with NRS 449.123 because the licensee would have met the same background check eligibility requirements required to work at one of these facility types.
- A license issued by a Board that uses the criteria listed previously would serve as proof that an individual meets the background check requirements to work in a facility listed in NRS 449.123.
- One of the goals of the website would be to have links or interfaces to professional licensing verifications which would be part of the background check screening process.

Issues:

Not all professional licensing agencies use the background check criteria outlined previously.

NRS 449.123 Initial and periodic investigations of employee or independent contractor of certain agency, facility or home.

1. Except as otherwise provided in subsection 2, within 10 days after hiring an employee or entering into a contract with an independent contractor, the administrator of, or the person licensed to operate, an agency to provide personal care services in the home, an agency to provide nursing in the home, a facility for intermediate care, a facility for skilled nursing, a residential facility for groups or a home for individual residential care or, if residential services are provided to children, a medical facility or a facility for the treatment of abuse of alcohol or drugs shall:

(a) Obtain a written statement from the employee or independent contractor stating whether he or she has been convicted of any crime listed in [NRS 449.174](#);

(b) Obtain an oral and written confirmation of the information contained in the written statement obtained pursuant to paragraph (a);

(c) Obtain from the employee or independent contractor two sets of fingerprints and a written authorization to forward the fingerprints to the Central Repository for Nevada Records of Criminal History for submission to the Federal Bureau of Investigation for its report; and

(d) Submit to the Central Repository for Nevada Records of Criminal History the fingerprints obtained pursuant to paragraph (c) to obtain information on the background and personal history of each employee or independent contractor to determine whether the person has been convicted of any crime listed in [NRS 449.174](#).

2. The administrator of, or the person licensed to operate, an agency to provide personal care services in the home, an agency to provide nursing in the home, a facility for intermediate care, a facility for skilled nursing, a residential facility for groups or a home for individual residential care or, if residential services are provided to children, a medical facility or a facility for the treatment of abuse of alcohol or drugs is not required to obtain the information described in subsection 1 from an employee or independent contractor who provides proof that an investigation of his or her background and personal history has been conducted by the Central Repository for Nevada Records of Criminal History within the immediately preceding 6 months and the investigation did not indicate that the employee or independent contractor had been convicted of any crime set forth in [NRS 449.174](#).

3. The administrator of, or the person licensed to operate, an agency to provide personal care services in the home, an agency to provide nursing in the home, a facility for intermediate care, a facility for skilled nursing, a residential facility for groups or a home for individual residential care or, if residential services are provided to children, a medical facility or a facility for the treatment of abuse of alcohol or drugs shall ensure that the information concerning the background and personal history of each employee or independent contractor who works at the agency or facility:

(a) Is completed as soon as practicable, and if residential services are provided to children, before the employee or independent contractor provides any care or services to a child in the agency, facility or home without supervision; and

(b) At least once every 5 years thereafter.

4. The administrator or person shall:

(a) If the agency, facility or home does not have the fingerprints of the employee or independent contractor on file, obtain two sets of fingerprints from the employee or independent contractor;

(b) Obtain written authorization from the employee or independent contractor to forward the fingerprints on file or obtained pursuant to paragraph (a) to the Central Repository for Nevada Records of Criminal History for submission to the Federal Bureau of Investigation for its report; and

(c) Submit the fingerprints to the Central Repository for Nevada Records of Criminal History.

5. Upon receiving fingerprints submitted pursuant to this section, the Central Repository for Nevada Records of Criminal History shall determine whether the employee or independent contractor has been convicted of a crime listed in [NRS 449.174](#) and immediately inform the Health Division and the administrator of, or the person licensed to operate, the agency, facility or home at which the person works whether the employee or independent contractor has been convicted of such a crime.

6. The Central Repository for Nevada Records of Criminal History may impose a fee upon an agency, a facility or a home that submits fingerprints pursuant to this section for the reasonable cost of the investigation. The agency, facility or home may recover from the employee or independent contractor not more than one-half of the fee imposed by the Central Repository. If the agency, facility or home requires the employee or independent contractor to pay for any part of the fee imposed by the Central Repository, it shall allow the employee or independent contractor to pay the amount through periodic payments.

(Added to NRS by [1997, 442](#); A [1999, 1946](#); [2005, 2170](#); [2009, 504](#); [2011, 3556](#))—
(Substituted in revision for NRS 449.179)

TAB E

Assembly Bill No. 267—Assemblymen Anderson, Parnell, Conklin,
Allen, Angle, Gerhardt, Holcomb, Horne, Mortenson and
Oceguera

CHAPTER.....

AN ACT relating to crimes; prohibiting the abuse, neglect, exploitation or isolation of a vulnerable person; requiring the report of the abuse, neglect, exploitation or isolation of a vulnerable person by certain persons; revising the provisions pertaining to the persons who are required to report the abuse, neglect, exploitation or isolation of an older person; providing penalties; and providing other matters properly relating thereto.

Legislative Counsel's Digest:

Existing law prohibits the abuse, neglect, exploitation and isolation of persons who are 60 years of age or older and requires certain persons to report suspected instances of the abuse, neglect, exploitation or isolation of persons who are 60 years of age or older. (NRS 200.5091-200.50995)

This bill expands these provisions to include victims of abuse, neglect, exploitation or isolation who are vulnerable persons. This bill defines "vulnerable person" as a person 18 years of age or older who: (1) suffers from a condition of physical or mental incapacitation because of a developmental disability, organic brain damage or mental illness; or (2) has one or more physical or mental limitations that restrict the ability of the person to perform the normal activities of daily living. In addition, this bill revises the existing law to provide that clergymen, practitioners of Christian Science, religious healers and attorneys are not required to report the abuse, neglect, exploitation or isolation of persons who are 60 years of age or older.

Existing law provides that if certain crimes are committed against a person who is 60 years of age or older, the person who commits the crime must be punished by a term of imprisonment equal to and in addition to the term of imprisonment otherwise prescribed by statute for the crime. (NRS 193.167)

This bill expands this provision to also impose such an additional term of imprisonment if the victim of the crime is a vulnerable person.

Existing law provides for the designation of certain persons as habitually fraudulent felons if such persons have been convicted multiple times of certain felonies involving fraud or intent to defraud and if the victim of each offense was an older person or a mentally disabled person. (NRS 207.014)

This bill expands the scope of this provision to apply in those cases in which such offenses are committed against a vulnerable person.

Existing law establishes a privilege for certain communications made by a victim to a victim's advocate, and creates an exception to the privilege for that portion of such a communication which involves a report of abuse or neglect of a child or an older person. (NRS 49.2547, 49.2549)

This bill expands the exception to the privilege to include reports of abuse or neglect of a vulnerable person.

Existing law provides in relevant part that if a defendant is convicted of the abuse or neglect of an older person, the court at sentencing shall order that a biological specimen be obtained from the defendant to determine the genetic markers of the specimen. (NRS 176.0913)

This bill expands the scope of the provision to include defendants convicted of the abuse or neglect of a vulnerable person.

exploitation or isolation of an older person by a member of the staff of the hospital.

(c) A coroner.

~~(d) [Every clergyman, practitioner of Christian Science or religious healer, unless he acquired the knowledge of abuse, neglect, exploitation or isolation of the older person from the offender during a confession.~~

~~—(e)]~~ Every person who maintains or is employed by an agency to provide nursing in the home.

~~[(f) Every attorney, unless he has acquired the knowledge of abuse, neglect, exploitation or isolation of the older person from a client who has been or may be accused of such abuse, neglect, exploitation or isolation.~~

~~—(g)]~~ (e) Any employee of the Department of Human Resources.

~~[(h)]~~ (f) Any employee of a law enforcement agency or a county's office for protective services or an adult or juvenile probation officer.

~~[(i)]~~ (g) Any person who maintains or is employed by a facility or establishment that provides care for older persons.

~~[(j)]~~ (h) Any person who maintains, is employed by or serves as a volunteer for an agency or service which advises persons regarding the abuse, neglect, exploitation or isolation of an older person and refers them to persons and agencies where their requests and needs can be met.

~~[(k)]~~ (i) Every social worker.

~~[(l)]~~ (j) Any person who owns or is employed by a funeral home or mortuary.

5. A report may be made by any other person.

6. If a person who is required to make a report pursuant to subsection 1 knows or has reasonable cause to believe that an older person has died as a result of abuse, neglect or isolation, the person shall, as soon as reasonably practicable, report this belief to the appropriate medical examiner or coroner, who shall investigate the cause of death of the older person and submit to the appropriate local law enforcement agencies, the appropriate prosecuting attorney and the Aging Services Division of the Department of Human Resources his written findings. The written findings must include the information required pursuant to the provisions of NRS 200.5094, when possible.

7. A division, office or department which receives a report pursuant to this section shall cause the investigation of the report to commence within 3 working days. A copy of the final report of the investigation conducted by a division, office or department, other than the Aging Services Division of the Department of Human Resources, must be forwarded to the Aging Services Division within 90 days after the completion of the report.

NRS 200.5093 Report of abuse, neglect, exploitation or isolation of older person; voluntary and mandatory reports; investigation; penalty. [Effective January 1, 2012.]

1. Any person who is described in subsection 4 and who, in a professional or occupational capacity, knows or has reasonable cause to believe that an older person has been abused, neglected, exploited or isolated shall:

(a) Except as otherwise provided in subsection 2, report the abuse, neglect, exploitation or isolation of the older person to:

(1) The local office of the Aging and Disability Services Division of the Department of Health and Human Services;

(2) A police department or sheriff's office;

(3) The county's office for protective services, if one exists in the county where the suspected action occurred; or

(4) A toll-free telephone service designated by the Aging and Disability Services Division of the Department of Health and Human Services; and

(b) Make such a report as soon as reasonably practicable but not later than 24 hours after the person knows or has reasonable cause to believe that the older person has been abused, neglected, exploited or isolated.

2. If a person who is required to make a report pursuant to subsection 1 knows or has reasonable cause to believe that the abuse, neglect, exploitation or isolation of the older person involves an act or omission of the Aging and Disability Services Division, another division of the Department of Health and Human Services or a law enforcement agency, the person shall make the report to an agency other than the one alleged to have committed the act or omission.

3. Each agency, after reducing a report to writing, shall forward a copy of the report to the Aging and Disability Services Division of the Department of Health and Human Services and the Unit for the Investigation and Prosecution of Crimes.

4. A report must be made pursuant to subsection 1 by the following persons:

(a) Every physician, dentist, dental hygienist, chiropractor, optometrist, podiatric physician, medical examiner, resident, intern, professional or practical nurse, physician assistant licensed pursuant to [chapter 630](#) or [633](#) of NRS, perfusionist, psychiatrist, psychologist, marriage and family therapist, clinical professional counselor, clinical alcohol and drug abuse counselor, alcohol and drug abuse counselor, music therapist, athletic trainer, driver of an ambulance, advanced emergency medical technician, licensed dietitian or other person providing medical services licensed or certified to practice in this State, who examines, attends or treats an older person who appears to have been abused, neglected, exploited or isolated.

(b) Any personnel of a hospital or similar institution engaged in the admission, examination, care or treatment of persons or an administrator, manager or other person in charge of a hospital or similar institution upon notification of the suspected abuse, neglect, exploitation or isolation of an older person by a member of the staff of the hospital.

(c) A coroner.

(d) Every person who maintains or is employed by an agency to provide personal care services in the home.

(e) Every person who maintains or is employed by an agency to provide nursing in the home.

(f) Every person who operates, who is employed by or who contracts to provide services for an intermediary service organization as defined in [NRS 427A.0291](#).

(g) Any employee of the Department of Health and Human Services.

- (h) Any employee of a law enforcement agency or a county's office for protective services or an adult or juvenile probation officer.
- (i) Any person who maintains or is employed by a facility or establishment that provides care for older persons.
- (j) Any person who maintains, is employed by or serves as a volunteer for an agency or service which advises persons regarding the abuse, neglect, exploitation or isolation of an older person and refers them to persons and agencies where their requests and needs can be met.
- (k) Every social worker.
- (l) Any person who owns or is employed by a funeral home or mortuary.

5. A report may be made by any other person.

6. If a person who is required to make a report pursuant to subsection 1 knows or has reasonable cause to believe that an older person has died as a result of abuse, neglect or isolation, the person shall, as soon as reasonably practicable, report this belief to the appropriate medical examiner or coroner, who shall investigate the cause of death of the older person and submit to the appropriate local law enforcement agencies, the appropriate prosecuting attorney, the Aging and Disability Services Division of the Department of Health and Human Services and the Unit for the Investigation and Prosecution of Crimes his or her written findings. The written findings must include the information required pursuant to the provisions of [NRS 200.5094](#), when possible.

7. A division, office or department which receives a report pursuant to this section shall cause the investigation of the report to commence within 3 working days. A copy of the final report of the investigation conducted by a division, office or department, other than the Aging and Disability Services Division of the Department of Health and Human Services, must be forwarded within 30 days after the completion of the report to the:

- (a) Aging and Disability Services Division;
- (b) Repository for Information Concerning Crimes Against Older Persons created by [NRS 179A.450](#); and
- (c) Unit for the Investigation and Prosecution of Crimes.

8. If the investigation of a report results in the belief that an older person is abused, neglected, exploited or isolated, the Aging and Disability Services Division of the Department of Health and Human Services or the county's office for protective services may provide protective services to the older person if the older person is able and willing to accept them.

9. A person who knowingly and willfully violates any of the provisions of this section is guilty of a misdemeanor.

10. As used in this section, "Unit for the Investigation and Prosecution of Crimes" means the Unit for the Investigation and Prosecution of Crimes Against Older Persons in the Office of the Attorney General created pursuant to [NRS 228.265](#).

(Added to NRS by 1981, 1334; A 1983, 1653; 1985, 1491; 1987, 2130, 2218; 1989, 904; 1991, 135; 1993, 2226; 1995, 2250; [1997, 108](#), [1349](#), [2608](#), [2610](#), [2637](#), [2639](#); [1999, 137](#), [2242](#), [2245](#), [2248](#), [3518](#); [2001, 158](#), [161](#), [776](#); [2003, 905](#); [2005, 1109](#), [2172](#); [2007, 746](#), [1224](#), [1849](#), [3080](#); [2009, 2372](#), [2445](#), [2992](#); [2011, 1093](#), [1514](#), effective January 1, 2012)

NRS 432B.220 Persons required to make report; when and to whom reports are required; any person may make report; report and written findings if reasonable cause to believe death of child caused by abuse or neglect. [Effective January 1, 2012.]

1. Any person who is described in subsection 4 and who, in his or her professional or occupational capacity, knows or has reasonable cause to believe that a child has been abused or neglected shall:

(a) Except as otherwise provided in subsection 2, report the abuse or neglect of the child to an agency which provides child welfare services or to a law enforcement agency; and

(b) Make such a report as soon as reasonably practicable but not later than 24 hours after the person knows or has reasonable cause to believe that the child has been abused or neglected.

2. If a person who is required to make a report pursuant to subsection 1 knows or has reasonable cause to believe that the abuse or neglect of the child involves an act or omission of:

(a) A person directly responsible or serving as a volunteer for or an employee of a public or private home, institution or facility where the child is receiving child care outside of the home for a portion of the day, the person shall make the report to a law enforcement agency.

(b) An agency which provides child welfare services or a law enforcement agency, the person shall make the report to an agency other than the one alleged to have committed the act or omission, and the investigation of the abuse or neglect of the child must be made by an agency other than the one alleged to have committed the act or omission.

3. Any person who is described in paragraph (a) of subsection 4 who delivers or provides medical services to a newborn infant and who, in his or her professional or occupational capacity, knows or has reasonable cause to believe that the newborn infant has been affected by prenatal illegal substance abuse or has withdrawal symptoms resulting from prenatal drug exposure shall, as soon as reasonably practicable but not later than 24 hours after the person knows or has reasonable cause to believe that the newborn infant is so affected or has such symptoms, notify an agency which provides child welfare services of the condition of the infant and refer each person who is responsible for the welfare of the infant to an agency which provides child welfare services for appropriate counseling, training or other services. A notification and referral to an agency which provides child welfare services pursuant to this subsection shall not be construed to require prosecution for any illegal action.

4. A report must be made pursuant to subsection 1 by the following persons:

(a) A physician, dentist, dental hygienist, chiropractor, optometrist, podiatric physician, medical examiner, resident, intern, professional or practical nurse, physician assistant licensed pursuant to [chapter 630](#) or [633](#) of NRS, perfusionist, psychiatrist, psychologist, marriage and family therapist, clinical professional counselor, clinical alcohol and drug abuse counselor, alcohol and drug abuse counselor, clinical social worker, music therapist, athletic trainer, advanced emergency medical technician or other person providing medical services licensed or certified in this State.

(b) Any personnel of a hospital or similar institution engaged in the admission, examination, care or treatment of persons or an administrator, manager or other person in charge of a hospital or similar institution upon notification of suspected abuse or neglect of a child by a member of the staff of the hospital.

(c) A coroner.

(d) A member of the clergy, practitioner of Christian Science or religious healer, unless the person has acquired the knowledge of the abuse or neglect from the offender during a confession.

(e) A social worker and an administrator, teacher, librarian or counselor of a school.

(f) Any person who maintains or is employed by a facility or establishment that provides care for children, children's camp or other public or private facility, institution or agency furnishing care to a child.

(g) Any person licensed to conduct a foster home.

(h) Any officer or employee of a law enforcement agency or an adult or juvenile probation officer.

(i) An attorney, unless the attorney has acquired the knowledge of the abuse or neglect from a client who is or may be accused of the abuse or neglect.

(j) Any person who maintains, is employed by or serves as a volunteer for an agency or service which advises persons regarding abuse or neglect of a child and refers them to persons and agencies where their requests and needs can be met.

(k) Any person who is employed by or serves as a volunteer for a youth shelter. As used in this paragraph, "youth shelter" has the meaning ascribed to it in [NRS 244.427](#).

(l) Any adult person who is employed by an entity that provides organized activities for children.

5. A report may be made by any other person.

6. If a person who is required to make a report pursuant to subsection 1 knows or has reasonable cause to believe that a child has died as a result of abuse or neglect, the person shall, as soon as reasonably practicable, report this belief to an agency which provides child welfare services or a law enforcement agency. If such a report is made to a law enforcement agency, the law enforcement agency shall notify an agency which provides child welfare services and the appropriate medical examiner or coroner of the report. If such a report is made to an agency which provides child welfare services, the agency which provides child welfare services shall notify the appropriate medical examiner or coroner of the report. The medical examiner or coroner who is notified of a report pursuant to this subsection shall investigate the report and submit his or her written findings to the appropriate agency which provides child welfare services, the appropriate district attorney and a law enforcement agency. The written findings must include, if obtainable, the information required pursuant to the provisions of subsection 2 of [NRS 432B.230](#).

(Added to NRS by 1985, 1371; A 1987, 2132, 2220; 1989, 439; 1993, 2229; [1999, 3526](#); [2001, 780](#), [1150](#); [2001 Special Session, 37](#); [2003, 910](#), [1211](#); [2005, 2031](#); [2007, 1503](#), [1853](#), [3084](#); [2009, 2996](#); [2011, 791](#), [1097](#), effective January 1, 2012)

AGING AND DISABILITY SERVICES DIVISION

COMMISSION ON AGING LEGISLATIVE SUBCOMMITTEE

June 18, 2012

Senator Shirley Breeden, Chair
Legislative Committee on Seniors, Veterans and
Adults with Special Needs
284 Kershner Court
Henderson, NV 89074-4180

Dear Senator Breeden:

The Commission on Aging Legislative Subcommittee is asking the Legislative Committee on Seniors, Veterans and Adults with Special Needs to submit a bill draft request to reinstate clergy and attorneys as mandatory reporters of elder abuse per NRS 200.50935.

We have contacted the Catholic Diocese of Reno and the ACLU to learn their opinions of this bill. We heard from the Diocese that they have some suggestions for the wording of the bill to alleviate their concern, which we will send to your committee as soon as we have the information. As you know, the Nevada Bar Association testified that their rules would allow attorneys to be mandatory reporters. We have not yet heard from the ACLU, but will continue to follow up with them.

Both attorneys and clergy are currently mandatory reporters of child abuse, and were mandatory reporters of elder abuse until the statute was changed during the 2005 legislature when two senators included it in AB 267.

We would appreciate your committee's assistance in this matter.

Please let us know if there is anything else you would like for us to do.

Sincerely,

Jeffrey Klein, Chair
COA Legislative Subcommittee

cc: Assemblywoman Teresa Benitez-Thompson; Senator Joe Hardy;
Senator Mark Manendo; Assemblyman Elliot Anderson; Assemblyman
Pete Livermore



Commission on Aging Voting Members:

*Maria Dent,
Member at
Large*

*Joni Eastley,
Commissioner
Nye County*

*Andy Hafen,
Mayor
Henderson*

*Dee Horn,
Member at
Large*

*Edrie LaVoie,
Member at
Large*

*Robert Martinez,
Member at
Large*

*John Thurman,
Member at
Large*

*Craig Warner,
Member at
Large*

*Bonnie Weber,
Commissioner
Washoe County*

*RoseMary
Womack,
Member at
Large*

*Vacant
City*

Commission on Aging Non-Voting Members

*Michael J. Willden,
Director,
Department of
Health and Human
Services*

*Mary Liveratti,
Administrator,
Aging and Disability
Services Division*

*Senator Mark A.
Manendo,
State Senator*

*Joseph M. Hogan,
State Assemblyman*



Living Longer.
Growing Stronger
In America

TAB F



NATIONAL CONFERENCE *of* STATE LEGISLATURES

The Forum for America's Ideas

Prepared: June 2011. Updated May 2012

Veteran designation on the Driver's license.

13 states. Here are the states with specific statutes.

* The Massachusetts BMV has a program that they established administratively.

Arkansas (passed in 2011)

27-16-812. Veteran designation.

(a)(1) A person may apply to the Office of Driver Services to obtain a veteran designation on a driver's license or identification card issued under this subchapter by providing:

(A) A United States Department of Defense discharge document, otherwise known as a DD Form 214, that shows a discharge status of "honorable" or "general under honorable conditions" that establishes the person's service in the armed forces of the United States; and

(B) Payment of the fee for the driver's license or identification card authorized under this chapter.

(2) If the person is seeking a duplicate or substitute driver's license with the veteran designation and his or her driver's license has not expired, the fee shall be as provided under § 27-16-806.

(b) The Office of Driver Services may:

(1) Determine the appropriate placement of the veteran designation on the driver's licenses and identification cards authorized under this section; and

(2) Promulgate the necessary rules for the administration of this section.

SECTION 3. EMERGENCY CLAUSE. It is found and determined by the General Assembly of the State of Arkansas that a person's status as a veteran can easily be included on a driver's license; that this information can be helpful for the veteran to secure benefits more easily; that having this information on driver's licenses can be helpful to law enforcement, especially when the veteran has recently returned from combat, as many of our young veterans have; and that this act is immediately necessary because it will streamline administrative

procedures for veterans and assist law enforcement. Therefore, an emergency is declared to exist and this act being immediately necessary for the preservation of the public peace, health, and safety shall become effective on July 1, 2011.

Colorado

42-2-303. Contents of identification card. (4) (a) at the applicant's voluntary request, the department shall issue an identification card bearing an identifier of a branch of the united states armed forces, such as "marine corps", "navy", "army", "air force", or "coast guard", if the applicant possesses a currently valid military identification document, a dd214 form issued by the united states government, or any other document accepted by the department that demonstrates that the applicant is an active member or a veteran of the branch of service that the applicant has requested be placed on the identification card. The applicant shall not be required to provide documentation that the applicant is an active member or a veteran of a branch of the united states armed forces to renew or be reissued an identification card bearing an identifier issued pursuant to this subsection (4). The department shall not place more than one branch of the united states armed forces identifier on an applicant's identification card.

(b) to be issued an identification card bearing a branch of service identifier, or to have such license renewed, the applicant shall pay a fee of fifteen dollars to the department, which shall be in addition to any other fee for an identification card. The department shall transfer the fee to the state treasurer, who shall credit the fee to the highway users tax fund.

(c) (i) this subsection (4) is effective January 1, 2011.

(ii) this paragraph (c) is repealed, effective July 1, 2011.

Florida (passed in 2011)

322.14 Licenses issued to drivers.-

(1)(a) The department shall, upon successful completion of all required examinations and payment of the required fee, issue to every applicant qualifying therefor, a driver's license as applied for, which license shall bear thereon a color photograph or digital image of the licensee; the name of the state; a distinguishing number assigned to the licensee; and the licensee's full name, date of birth, and residence address; a brief description of the licensee, including, but not limited to, the licensee's gender and height; and the dates of issuance and expiration of the license. A space shall be provided upon which the licensee shall affix his or her usual signature. No license shall be valid until it has been so signed by the licensee except that the signature of said licensee shall not be required if it appears thereon in facsimile or if the licensee is not present within the state at the time of issuance. Applicants qualifying to receive a Class A, Class B, or Class C driver's license must appear in person within the state for

issuance of a color photographic or digital imaged driver's license pursuant to s. 322.142 [§](#).

(b) In addition to the requirements of paragraph (a), each license must exhibit the class of vehicle which the licensee is authorized to operate and any applicable endorsements or restrictions. If the license is a commercial driver's license, such fact must be exhibited thereon.

(c) A capital "V" shall be exhibited on the driver's license of a veteran upon the payment of an additional \$1 fee for the license and the presentation of a copy of the person's DD Form 214, issued by the United States Department of Defense.

Georgia

Section 40-5-36

a) Except as specifically provided in this chapter, no part of this chapter shall be interpreted as affecting the rights and privileges of a person holding a veterans, honorary, or distinctive license, and nothing in this chapter shall be construed so as to authorize the department to impose any charge or fee of any type whatsoever for the issuance or renewal of a veterans, honorary, or distinctive license; provided, however, that the commissioner may issue regulations on types and classes of vehicles which may be operated by the holder of such license.

(b) The commissioner shall establish by rules and regulations the proof required to be produced by an applicant for a veterans, honorary, or distinctive license. The contents of such license shall be the same as for any other license. The forms upon which such licenses are issued shall be such that the licenses are of a permanent nature, provided that nothing in this subsection shall authorize the department to require any person holding a veterans or honorary license before January 1, 1976, to surrender such license. Veterans, honorary, and distinctive licenses shall not be subject to any fees.

(c) Veterans licenses may be issued to:

(1) Veterans who were residents of Georgia at the time of enlistment or commissioning and are residents at the time of application for the license, or who have been residents of Georgia for at least two years immediately preceding the date of application for the license, who served on active duty in the armed forces of the United States or on active duty in a reserve component of the armed forces of the United States, including the National Guard, during wartime or any conflict when personnel were committed by the President of the United States, whether or not such veteran was assigned to a unit or division which directly participated in such war or conflict, except for periodic transfer from reserve status to active duty status for training purposes, and who were discharged or separated under honorable conditions; and

(2) All members or former members of the National Guard or reserve forces who have 20 or more years' creditable service therein.

(d) Honorary licenses may be issued to:

(1) A resident of Georgia who is the surviving spouse of a veteran as defined by paragraph (1) of subsection (c) of this Code section. Any license to such spouse shall be valid only as long as that person remains unmarried; or

(2) A resident of Georgia who is the spouse of a veteran who would be qualified to receive a veteran's license but who is disabled to the extent that he or she cannot operate a motor vehicle.

(e) A distinctive license may be issued to any member of the Georgia National Guard in good standing who has completed at least one year of satisfactory service. The department shall have the authority to cancel the distinctive license of any person upon receipt of written notice from the adjutant general who shall notify the department that the person is no longer a member of the Georgia National Guard in good standing.

Indiana (passed in 2011)

IC 9-24-9-2

(d) In addition to the information required under subsection (b), an application for a license or permit to be issued under this chapter must enable the applicant to indicate that the applicant is a veteran of the armed forces of the United States and wishes to have an indication of the applicant's veteran status appear on the license or permit. An applicant who wishes to have an indication of the applicant's veteran status appear on a license or permit must:

(1) indicate on the application that the applicant:

(A) is a veteran of the armed forces of the United States; and

(B) wishes to have an indication of the applicant's veteran status appear on the license or permit; and

(2) verify the applicant's veteran status by providing proof of discharge.

The bureau shall maintain records of the information provided under this subsection.

SECTION 4. IC 9-24-11-5.5  IS ADDED TO THE INDIANA CODE AS A NEW SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2011]:

Sec. 5.5. If a permittee or licensee has under IC 9-24-9-2  (d):

(1) indicated on the application that the permittee or licensee is a veteran of the armed forces of the United States and wishes to have an indication of the permittee's or licensee's veteran status appear on the license or permit; and

(2) provided proof of discharge;

an indication of the permittee's or licensee's veteran status shall be shown on the license or permit.

Maine (passed in 2011)

Sec. 1. 29-A MRSA Section 1412

Section 1412. **Military service designation for active military personnel and veterans**

The Secretary of State shall, at the request of an eligible applicant, issue a driver's license or nondriver identification card to that applicant with a military service designation that identifies the applicant as a person actively serving in an enlisted grade of the United States Armed Forces or as a veteran of the United States Armed Forces.

1. Eligibility. In order to make a determination of eligibility for a military service designation under this section, the bureau shall determine, based on an examination of an applicant's military identification, whether the following criteria are met:

A. The applicant is serving in an enlisted grade in the United States Armed Forces as defined in 10 United States Code, Section 101(a)(4) (2011); or

B. The applicant has served in the United States Armed Forces as defined in 10 United States Code, Section 101(a)(4) (2011) and has been honorably discharged. To receive the designation under this paragraph, the applicant must provide an Armed Forces Report of Transfer or Discharge, DD Form 214, or a certification from the United States Veterans Administration or the appropriate branch of the United States Armed Forces verifying the applicant's military service and honorable discharge.

2. Renewal. A license or nondriver identification card with a military service designation issued in accordance with subsection 1, paragraph A may be renewed upon verification of continuing eligibility.

3. Design and location. The Secretary of State shall determine the design and location on the license and nondriver identification card for the military service designation under this section.

Minnesota

171.07 INFORMATION ON LICENSE AND IDENTIFICATION CARD.

Subd. 15. **Veteran designation.**

(a) At the request of the applicant and on payment of the required fee, the department shall issue, renew, or reissue a driver's license or Minnesota

identification card bearing the designation "Veteran" to an applicant who is a veteran, as defined in section [197.447](#).

(b) At the time of the initial application for the designation provided under this subdivision, the applicant must have a certified copy of the veteran's discharge papers.

(c) The commissioner of public safety is required to issue drivers' licenses and Minnesota identification cards with the veteran designation only after entering a new contract or in coordination with producing a new card design with modifications made as required by law.

Link: <https://www.revisor.mn.gov/statutes/?id=171.07>

North Carolina (passed in 2011)

G.S. 20-7 (q)

"(q) Active Duty Military Designation. – The Division shall develop a military designation for drivers licenses that may, upon request, be granted to North Carolina residents on active duty and to their spouses and dependent children. A drivers license with a military designation on it may be renewed by mail no more than two times during the license holder's lifetime. A license renewed by mail under this subsection is a permanent license and does not expire when the license holder returns to the State. A drivers license with a military designation on it issued to a person on active duty may be renewed up to one year prior to its expiration upon presentation of military or Department of Defense credentials."

"(q1) Veteran Military Designation. – The Division shall develop a military designation for drivers licenses and identification cards that may, upon request, be granted to North Carolina residents who are honorably discharged from military service in the United States Armed Forces. An applicant requesting this designation must produce a Form DD-214 showing the applicant has been honorably discharged from the United States Armed Forces."

This act becomes effective when the Division of Motor Vehicles has completed the implementation of the Division's Next Generation Secure Driver License System or July 1, 2012, whichever occurs first, and applies to drivers licenses issued on or after that date.

North Dakota (passed in 2011)

North Dakota Century Code 39-06 **Veteran indicator on license.**

Upon request and with adequate documentation, the director shall place an indicator on the face of an operator's license of a veteran. The veteran may make the request through the department of veterans' affairs.

4507.13 Contents and characteristics of driver's license.

(A) The registrar of motor vehicles shall issue a driver's license to every person licensed as an operator of motor vehicles other than commercial motor vehicles. No person licensed as a commercial motor vehicle driver under Chapter 4506. of the Revised Code need procure a driver's license, but no person shall drive any commercial motor vehicle unless licensed as a commercial motor vehicle driver.

Every driver's license shall display on it the distinguishing number assigned to the licensee and shall display the licensee's name and date of birth; the licensee's residence address and county of residence; a color photograph of the licensee; a brief description of the licensee for the purpose of identification; a facsimile of the signature of the licensee as it appears on the application for the license; a notation, in a manner prescribed by the registrar, indicating any condition described in division (D)(3) of section [4507.08](#) of the Revised Code to which the licensee is subject; if the licensee has executed a durable power of attorney for health care or a declaration governing the use or continuation, or the withholding or withdrawal, of life-sustaining treatment and has specified that the licensee wishes the license to indicate that the licensee has executed either type of instrument, any symbol chosen by the registrar to indicate that the licensee has executed either type of instrument; on and after October 7, 2009, if the licensee has specified that the licensee wishes the license to indicate that the licensee is a veteran, active duty, or reservist of the armed forces of the United States and has presented a copy of the licensee's DD-214 form or an equivalent document, any symbol chosen by the registrar to indicate that the licensee is a veteran, active duty, or reservist of the armed forces of the United States; and any additional information that the registrar requires by rule. No license shall display the licensee's social security number unless the licensee specifically requests that the licensee's social security number be displayed on the license. If federal law requires the licensee's social security number to be displayed on the license, the social security number shall be displayed on the license notwithstanding this section.

Tennessee (passed in 2011)

55-50-354.

(a) When the department issues or renews a driver license or photo identification card to an honorably discharged veteran, the driver license or photo identification card shall have language or a symbol designed by the Department of Veterans' Affairs, in consultation with the Department of Safety, that appropriately reflects the driver's military service. The language or symbol shall be displayed prominently on the license.

(b) Tennessee veterans who elect to have language or a symbol indicating their military service on their driver license at the time of renewal or reissue shall pay the required license or photo identification card fee, check a box on the

application stating they are a veteran, and provide a certified copy of their Department of _Defense form 214 (DD 214) discharge papers.

SECTION 2. The provisions of this act shall apply to the next redesign of driver licenses and photo identification cards initiated on or after the effective date of this act; provided, that sufficient funds are appropriated in the General Appropriations Act to meet the funding required to implement the provisions of this act.

SECTION 3. This act shall take effect upon becoming a law, the public welfare requiring it.

Texas (passed in 2011)

SECTION 1. Subchapter F, Chapter 521, Transportation Code, is amended by adding Section 521.1235 to read as follows:

Sec. 521.1235. DESIGNATOR ON LICENSE ISSUED TO VETERAN. (a) In this section, "veteran" means a person who:

(1) has served in:

(A) the army, navy, air force, coast guard, or marine corps of the United States; or

(B) the Texas National Guard as defined by Section 431.001, Government Code; and

(2) has been honorably discharged from the branch of the service in which the person served.

(b) The department shall include the designation "VETERAN" on a driver's license issued to a veteran in an available space either on the face of the driver's license or on the reverse side of the driver's license if:

(1) the veteran requests the designation; and

(2) the veteran provides proof of the veteran's military service and honorable discharge.

SECTION 2. Section 521.142, Transportation Code, is amended by adding Subsection (i) to read as follows:

(i) The application must provide space for the applicant:

(1) to voluntarily list any military service that may qualify the applicant to receive a license with a veteran's designation under Section 521.1235; and

(2) to include proof required by the department to determine the applicant's eligibility to receive that designation.

SECTION 3. This Act takes effect September 1, 2011.

Utah (passed in 2011)

53-3-207

(3) (a) Every regular license certificate, limited-term license certificate, or driving privilege card shall bear:

- (i) the distinguishing number assigned to the person by the division;
- (ii) the name, birth date, and Utah residence address of the person;
- (iii) a brief description of the person for the purpose of identification;
- (iv) any restrictions imposed on the license under Section 53-3-208 [§](#);
- (v) a photograph of the person;
- (vi) a photograph or other facsimile of the person's signature; ~~and~~

(vii) an indication whether the person intends to make an anatomical gift under Title 26, Chapter 28 [§](#), Revised Uniform Anatomical Gift Act, unless the driving privilege is extended under Subsection 53-3-214 [§](#) (3) ; and

(viii) except as provided in Subsection (3)(b), if the person states that the person is a veteran of the United States military on the application for a driver license in accordance with Section 53-3-205 [§](#) and provides verification that the person was honorably discharged from the United States military, an indication that the person is a United States military veteran for a regular license certificate or limited-term license certificate issued on or after July 1, 2011.

(b) A regular license certificate or limited-term license certificate issued to any person younger than 21 years on a portrait-style format as required in Subsection (5)(b)(i) is not required to include an indication that the person is a United States military veteran under Subsection (3)(a)(viii).

2011 Bills

❖ Information from 2011 Illinois bill

[IL S 1891](#)

[State Resources](#)

SPONSOR: [Althoff](#) (R)

COSPONSOR(S): [Luechtefeld](#) (R)

TITLE: Identification Card Act and Vehicle Code

DISPOSITION: Pending

LOCATION: [Senate Committee on Assignments Committee](#)

SUMMARY:

Amends the Identification Card Act and Vehicle Code to provide that: the Secretary of State must inquire as to whether an applicant for a State identification card or driver's license is a veteran for purposes of issuing a State identification card or driver's license with a veteran designation; the Secretary shall

determine by rule what forms of proof of a person's status as a veteran are acceptable; the Secretary may disclose an individual's social security number.

STATUS:

02/10/2011 INTRODUCED.

02/10/2011 [To SENATE Committee on ASSIGNMENTS.](#)

03/02/2011 [To SENATE Committee on TRANSPORTATION.](#)

03/18/2011 [Rereferred to SENATE Committee on ASSIGNMENTS.](#)

❖ Information on a Massachusetts bill

[MA S 1721](#)

[State Resources](#)

DOCKET: 253

AUTHOR: [Brewer](#) (D)

TITLE: Veteran Driver's License

DISPOSITION: Pending

LOCATION: [Joint Committee on Transportation](#)

SUMMARY:

Places the word "veteran" on any eligible driver's license.

STATUS:

01/19/2011 INTRODUCED.

01/19/2011 Filed as Senate Docket 253

01/24/2011 [To JOINT Committee on TRANSPORTATION.](#)

❖ South Carolina Bill

[SC H 3760](#)

[State Resources](#)

AUTHOR: [Hixon](#) (R)

TITLE: State Driver's License

DISPOSITION: Pending

LOCATION: [House Education and Public Works Committee](#)

SUMMARY:

Relates to the issuance and contents of a the state driver's license; includes a veteran status designation on the driver's license; relates to the issuance of special identification cards; includes a veteran status designation on the special identification card.

STATUS:

02/24/2011 INTRODUCED.

02/24/2011 [To HOUSE Committee on EDUCATION AND PUBLIC WORKS.](#)

NRS 483.292 Declaration of status as veteran: Inquiry by Department upon application for instruction permit or license; provision of evidence by applicant; counting and maintenance by Department; quarterly compilation and transmission of aggregate number of declarations to Office of Veterans' Services.

1. When a person applies to the Department for an instruction permit or driver's license pursuant to [NRS 483.290](#), the Department shall inquire whether the person desires to declare that he or she is a veteran of the Armed Forces of the United States.
 2. If the person desires to declare pursuant to subsection 1 that he or she is a veteran of the Armed Forces of the United States, the person shall provide evidence satisfactory to the Department that he or she has been honorably discharged from the Armed Forces of the United States.
 3. If the person declares pursuant to subsection 1 that he or she is a veteran of the Armed Forces of the United States, the Department shall count the declaration and maintain it only numerically in a record kept by the Department for that purpose.
 4. The Department shall, at least once each quarter:
 - (a) Compile the aggregate number of persons who have, during the immediately preceding quarter, declared pursuant to subsection 1 that they are veterans of the Armed Forces of the United States; and
 - (b) Transmit that number to the Office of Veterans' Services to be used for statistical purposes.
- (Added to NRS by [2005, 2064](#))

NRS 483.852 Declaration of status as veteran: Inquiry by Department upon application for card; provision of evidence by applicant; counting and maintenance by Department; quarterly compilation and transmission of aggregate number of declarations to Office of Veterans' Services.

1. When a person applies to the Department for an identification card pursuant to [NRS 483.850](#), the Department shall inquire whether the person desires to declare that he or she is a veteran of the Armed Forces of the United States.
 2. If the person desires to declare pursuant to subsection 1 that he or she is a veteran of the Armed Forces of the United States, the person shall provide evidence satisfactory to the Department that he or she has been honorably discharged from the Armed Forces of the United States.
 3. If the person declares pursuant to subsection 1 that he or she is a veteran of the Armed Forces of the United States, the Department shall count the declaration and maintain it only numerically in a record kept by the Department for that purpose.
 4. The Department shall, at least once each quarter:
 - (a) Compile the aggregate number of persons who have, during the immediately preceding quarter, declared pursuant to subsection 1 that they are veterans of the Armed Forces of the United States; and
 - (b) Transmit that number to the Office of Veterans' Services to be used for statistical purposes.
- (Added to NRS by [2005, 2064](#))

State of Nevada
Department of Motor Vehicles
CY 2012 QUARTERLY REPORT
Veteran Declaration Counts by County

County	1st Quarter 2012 Totals (Jan.-March)	2nd Quarter 2012 Totals (April-June)	3rd Quarter 2012 Totals (July-Sept.)	4th Quarter 2012 Totals (Oct.-Dec.)
CARSON CITY	164			
CHURCHILL	102			
CLARK	4,618			
DOUGLAS	237			
ELKO	123			
ESMERALDA	4			
EUREKA	2			
HUMBOLDT	29			
LANDER	15			
LINCOLN	18			
LYON	219			
MINERAL	24			
NYE	213			
PERSHING	24			
STOREY	26			
WASHOE	1,072			
WHITE PINE	31			
UNKNOWN	419			
TOTALS*	7,340	0	0	0

***Note:**

These totals represent the number of customers, living in Nevada, who completed DMV transactions during the quarter and declared themselves to be a veteran. Quarterly totals should **not** be added together, because the same customer might complete more than one DMV transaction during the year. Declared veterans without a physical address have been counted in the "Unknown" county.

State of Nevada
Department of Motor Vehicles
VETERAN DECLARATION TOTALS BY COUNTY
AS OF MARCH 31, 2012*

County	"To Date" Totals
CARSON CITY	3,675
CHURCHILL	2,572
CLARK	85,466
DOUGLAS	3,388
ELKO	2,176
ESMERALDA	80
EUREKA	96
HUMBOLDT	662
LANDER	213
LINCOLN	261
LYON	4,403
MINERAL	532
NYE	5,268
PERSHING	271
STOREY	476
WASHOE	22,147
WHITE PINE	636
NOT KNOWN	5,423
TOTALS	137,745

***Notes:**

- These totals represent the number of customers who declared themselves to be a veteran while conducting business with the DMV.
- The Nevada DMV collects both physical and mailing addresses. This report will select by physical address only, ensuring each customer is only counted once.

TAB G

NRS 176A.280 Establishment of program for treatment of veterans and members of military; assignment of defendant to program; progress reports. A court may establish an appropriate program for the treatment of veterans and members of the military to which it may assign a defendant pursuant to [NRS 176A.290](#). The assignment must include the terms and conditions for successful completion of the program and provide for progress reports at intervals set by the court to ensure that the defendant is making satisfactory progress towards completion of the program.

(Added to NRS by [2009, 103](#))

TAB H

Federal Funding Opportunities For Specialty Courts

Department of Justice:

- Bureau of Justice Assistance, Office of Justice Programs:
 - [Drug Court Discretionary Grant Program](#) for drug and other specialty courts that follow the 10 key components
 - [Edward Byrne Justice Assistance Grants](#) formula funding for purposes related to law enforcement, prosecution and courts, crime prevention and education, corrections and community corrections, drug treatment and enforcement, planning, evaluation, technology improvement, and crime victim and witness initiatives.
 - [Operation Weed and Seed](#) (it appears there is [no funding](#) for this program in the current budget)
 - Additional BJA funding opportunities available at:
<https://www.bja.gov/programs.aspx>

Department of Housing and Urban Development:

- [Veteran Housing](#)

Office of National Drug Control Policy

- [Drug Free Communities Support Program](#)

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