

**DEPARTMENT OF HEALTH AND HUMAN SERVICES
STRATEGIC PLAN FOR SENIORS
YEAR SIX PLAN STATUS
August 2009**

INTRODUCTION

The *Strategic Plan for Senior Services* was authorized in 2001. The Plan was designed to address the needs of Nevada's seniors and outline goals to meet those demands covering a ten-year period. In 2003 the Governor appointed a *Strategic Plan Accountability Committee* (SPAC) that was charged with monitoring progress on the plan. This Report assesses the sixth year of the Plan, ending July 1, 2009 and includes the impact of Nevada's 75th Legislative Session on the senior services network.

Services for Nevada seniors continue to lag behind the rate of growth in the population. Even though Nevada continues to lead the nation as the fastest growing state with regards to senior citizens, the demographic growth - the fact that more seniors and boomers are getting older, living longer, and aging in place - is a challenge for the states aging service providers and health care system. Nevada is sliding backwards with regards to care for those most at risk, including the underinsured frail, chronically ill, indigent elder.

The sixth year activities of the accountability committee focused on issues and gaps in service going into the 2009 Legislative Session, due in part to the state's loss in tax revenue and federal matching dollars. The Senior Strategic Plan Accountability Committee worked closely with members of the Interim Study Committee on Issues Relating to Senior Citizens and Veterans, chaired by Assemblywoman Kathy McClain. It was this coordination with the Interim Committee and aging advocates throughout the state that proved instrumental in championing many of the issues through the session in spite of the difficulties faced due to lagging state revenue. SPAC identified legislation early in the session it planned to endorse and support, as well as advocacy efforts towards restoration of the Aging Services' budget that was rolled back to 2007 funding levels. SPAC also worked to educate and engage support among legislators viewed as supportive of senior services. In this regard, the committee was highly successful.

SPAC recommended that the slots for the waiver programs managed by the Division for Aging Services be restored to previous legislatively approved levels; that some 394 slots be added back into the budget. SPAC additionally recommended that there be flexibility between the WEARC and CHIP waiver so slots could move between the two programs if demand dictated the need. Additionally, SPAC recommended that the Assisted Living waiver be brought to 54 slots to help assisted living projects which have been important goals of the state.

Regarding the Personal Care Attendant (PCA) rate, SPAC supported a compromise recommended by the Joint Subcommittee on Human Services/CIP to reduce the rate by \$1.50 rather than \$3. SPAC recommended that PCA service hours previously cut during FY09 be restored but was unsuccessful due to the costs to reinstate the service.

SPAC also made argument regarding the wait times for some of the waiver programs which were reaching beyond 90 days in some waiver services geographically. To achieve caseload growth and adequate capacity, 7 social workers positions were restored to the budget to manage the work.

SPAC also recommended that tobacco settlement funds be preserved for Independent Living Grants; and that the funds remain untouched following its sweep to fill gaps in the budget during Special Sessions of the Legislature. The committee also supported the proposal to increase the Property Tax Assistance program so recipients receive their full rebate rather than face adjustments to meet shortfalls at a lesser amount as occurred during the Special Session.

This annual report identifies both Accomplishments and Challenges related to the original six target areas of the Strategic Plan (*See Appendix A*). However, there were several significant outcomes of the 2009 session that merit highlighting:

First, Assembly Bill 9 was passed. This creates the statutory Legislative Committee on Senior Citizens, Veterans and Adults with Special Needs. A statutory legislative committee exists until the legislature votes to eliminate it. This committee will provide seniors, veterans and adults with special needs a voice with the legislature that has not existed before. The Committee may review, study and comment upon issues relating to these populations. They have the support of the Legislative Counsel Bureau to assist in any research, investigations, hearings and studies they may decide to pursue. AB9, itself, was a high priority of SPAC, as it originated in the committee and was incorporated in the 2006 Annual Report to the Director of DHHS. SPAC advocated for the bill first for an interim study and later for a standing committee (*See Appendix B*). On both efforts the committee was successful.

Second, Senate Bill 434 was passed which combined the Office of Disability Services and Senior Rx/Disability Rx programs with the Division for Aging Services creating the Aging and Disability Services Division. This consolidation will serve to strengthen the advocacy efforts to move the common issues of seniors and persons with disabilities forward through future legislative sessions. Many of the services provided by both entities overlapped. The consolidation will result in a more integrated and efficient service delivery system which will benefit the recipients.

Third, the advocacy efforts of SPAC paid off. The legislature found ways to add back funding that had been proposed to be cut from Medicaid's and Aging Services' budgets and would have lead to additional cuts to programs. SPAC

was also successful in recruiting other coalitions and advocacy groups to help SPAC's efforts in budget restoration. This was time consuming as many groups were on a learning curve, but these groups are now ready to mobilize for the next legislative session.

Lastly, the activities of a coalition of many different advocates statewide clearly outlined the disastrous effects to programs that would have resulted if the tobacco settlement funds were no longer available to the network of service providers.

SPAC MEMBERSHIP

The committee met 4 times over the past year in preparation for the 2009 Legislative Session. The committee consists of 9 voting members and is staffed by the Division for Aging Services. Staff from the Department of Health and Human Services and the Division of Health Care Financing and Policy also attended the meetings.

2008 PRIORITIES

During 2008 the committee set priorities for the 2009 Legislative Session. In addition, the 3 workgroups that had been formed from the SPAC continued to focus on Out-of-State Placements, Health and Transportation/Housing issues. SPAC outlined 10 priorities in the July 2008 Annual Report which could be accomplished either through 75th Session budgetary items or legislation. On February 12, 2009 the Committee discussed and voted either to support, not support, or take no action on various legislative bills. Some of the Bill Draft Requests (BDRs) did not provide enough information at the time to make a determination regarding SPAC support.

SPAC voted to support:

AB 4 – Creates a Statewide Amber Alert System for the Safe Return of Elderly Persons.

AB 9 – Creates the Legislative Committee on Senior Citizens, Veterans and Adults with Special Needs. *(See Appendix A)*

AB 20 – Clarifies applicability of criminal background check requirements to homes for individual residential care.

AB 111 – Makes various changes concerning licensing of residential facilities for groups and homes for individual residential care.

SPAC voted to not support:

AB 91 – Authorizes the State Treasurer to Securitize the Revenue stream produced by the Tobacco Master Settlement Agreement.

SPAC voted to follow legislation to determine if it fell under Committee priorities as more information became available. SPAC members testified on bills listed below:

AB 8 – Provides for registry of information relating to cases of abuse, neglect, exploitation or isolation of older persons.

AB 62 – Requires the State Board of Health and the district board of health in certain counties to prescribe the form and content of Do Not Resuscitate orders.

AB 122 – Makes various changes relating to the Office of Consumer Health Assistance.

AB 263 – Authorizes the Aging Services Division of the Department of Health and Human Services to establish a program of all-inclusive care for the elderly.

SB 45 – Revises provisions relating to certain criminal cases involving older persons and vulnerable persons.

SB 64 – Revises provisions governing refunds of property taxes for certain senior citizens.

SB 65 – Revises certain provisions relating to advocacy for residents of facilities for long-term care.

SB 122 – Revises the maximum amount of property taxes for certain senior citizens.

SB 232 – Proposes to exempt sales of certain durable medical equipment, mobility enhancing equipment, hearing aids, hearing aid accessories, and ophthalmic or ocular devices or appliances from sales and use taxes and analogous taxes.

SB 313 – Revises provision relating to guardianships.

SB 314 – Adopts the Uniform Power of Attorney Act.

SB 390 - Directs the Legislative Commission to provide for a study concerning the long-term care of certain persons in this state.

SJR4 – Urges Congress to fund fully and protect the Medicare Program.

Budget Restoration:

In addition, SPAC testified on March 11, 2009 before the Joint Subcommittee on Human Services/CIPs for increased caseload growth in the waiver programs, waiver flexibility, less of a reduction in the Personal Care Attendant rate, and restoration of 7 social workers. SPAC also testified in support of the Senior Citizens Property Tax Assistance budget, the Tobacco Settlement budget and funding the ADRC project manager position.

2008 SPAC Priorities accomplished in the 75th Legislative Session that further the Strategic Plan:

1. Healthcare quality and affordability.

Partially accomplished – See Appendix A, Target Area Three – *More Nevada Seniors Have Improved Health Outcomes*

This is one area that is extremely problematic due to the state's budget deficit. However, there was successful legislation during this session that partially accomplished this goal:

AB 136 establishes a State Program for Oral Health.

AB 213 requires the establishment of the Cancer Drug Donation Program.

SB 72 authorizes a registered pharmacist or a registered intern pharmacist to perform certain screening tests.

SB 307 requires the Office of the Director of the Department of Health and Human Services to study issues relating to Medicaid.

SB 362 clarifies and revises provisions related to the suspension or revocation of professional licenses by health care profession licensing boards.

2. Regulations for licensing and certification to increase availability of healthcare professionals and caregivers.

Not accomplished – This is an area that should receive additional study by the Legislative Committee on Senior Citizens, Veterans and Adults with Special Needs.

3. Establish a standing interim legislative committee on special adult populations.

Accomplished – See Appendix A, Target Area Six – *More Nevada Seniors Get the Benefits, Services and Supports They Need*

AB 9 creates the Legislative Committee on Seniors Citizens, Veterans and Adults with Special Needs.

4. Revise the statute for elder abuse to reinstate members of the clergy and attorneys as mandatory reporters.

Not accomplished – This is an area that should receive additional study by the Legislative Committee on Senior Citizens, Veterans and Adults with Special Needs.

5. Funding and support for behavioral and mental health issues.

Not accomplished – This is an area that should receive additional study by the Legislative Committee on Senior Citizens, Veterans and Adults with Special Needs. The number of Nevada seniors placed out-of-state is still unacceptably high. Ongoing efforts of the task force for out-of-state placements continue to pursue solutions.

6. Develop a statewide plan for current and future aging needs and services.

Accomplished – See Appendix A, Target Area Six – *More Nevada Seniors Get the Benefits, Services and Supports They Need*

The *State Plan: Services for Nevada's Elders* was approved by the Administration on Aging September 30, 2008 for the period of October 1, 2008 to September 30, 2012. It is the framework for current and future aging needs in Nevada.

7. Increase home and community based care access.

Partially accomplished – See Appendix A, Target Area One – *More Nevada Seniors Live in the Setting of Their Choice with Support to Remain as Independent and Healthy as Possible*

This is an area that should receive additional study by the Legislative Committee on Senior Citizens, Veterans and Adults with Special Needs. However, the legislature restored 394 waiver slots and the associated 7 social worker positions that were slated to be lost with the agency's proposed budget.

8. Review reimbursement rates for community based care to reflect current economics.

Partially accomplished – See Appendix A, Target Area Six – *More Nevada Seniors Get the Benefits, Services and Supports They Need*

This is an area that should receive additional study by the Legislative Committee on Senior Citizens, Veterans and Adults with Special Needs. SPAC called for waiver flexibility and additional capacity during the budget hearings for aging services.

9. Provide stable and adequate funding for 2-1-1 and Aging and Disability Resource Centers.

Partially accomplished – See Appendix A, Target Area Six – *More Nevada Seniors Get the Benefits, Services and Supports They Need*

This is an area that should receive additional study by the Legislative Committee on Senior Citizens, Veterans and Adults with Special Needs. It is recommended this goal should not come at the expense on Tobacco Settlement Grantees.

10. Statutes and regulations should clearly define residential care facilities.

Partially accomplished – See Appendix A, Target Area One – *More Nevada Seniors Live in the Setting of Their Choice with Support to Remain as Independent and Healthy as Possible* and Target Area Four – *More Nevada Seniors Live in Homes That Are Safe, Fully Accessible and Affordable*

SB 111 – revises provisions governing certain residential facilities for groups and homes for individual residential care.

AB 176 revises provision relating back to administrators of facilities for long-term care.

AB 294 – directs the Legislative commission to conduct an interim study concerning group homes.

CONCLUSION

The Accountability Committee will be resuming its work towards moving the goals of the 10-year plan forward. Over the next year the committee will meet at least quarterly to review the accomplishments and set priorities for the upcoming 2011 Legislative Session, realizing that we are faced with deadlines for budget concepts and Bill Draft Requests during the first half of 2010. In addition, collaborative efforts with the disability advocates will continue. This collaboration will be stronger with the passage of SB434 which consolidated Aging Services and Office of Disability Services into the Aging and Disability Services Division (ADSD). With the formation of the ADSD the activities of the SPAC for persons with disabilities will be absorbed under the new Disability Services Commission (DSC), created under SB79. It is unclear how oversight, planning and accountability will continue after the Senior SPAC sunsets in 2011. This must be fully explored and determined how senior issues will be kept at the forefront for future advocacy efforts.

Nevada will continue to struggle with meeting the needs of seniors and persons with disabilities over the next few years. The state of the economy presents an enormous challenge in funding even the most basic services. Once the economy starts to turn around it is going to take time to recover before programs and funding can return to their previous levels.

Of large concern is the lack of funding to implement Nursing Home Diversion Programs to continue the shift from institutional to home and community based care. Also of concern are the effects of the changes to tax revenues for the counties from the 2009 Legislative session that they use to fund services for elders. It is not clear how this revenue shift will affect the ability for counties to provide the needed care and where the responsibility will fall.

Campaigns to pursue the securitization of the tobacco settlement funds may resurface which would be devastating to the senior service network. Young legislators not familiar with the program and what it funds will be a high priority regarding education considering many senior lawmakers are terming out of office. Seven senators, which is one-third of the senate and eleven assemblypersons, out of 42 are all term-limited in November 2010.

The 2011 Legislature will be faced with yet another budget crisis as the steps taken to avert complete dismantling of programs during the 2009 Legislative Session were only temporary fixes. The current taxes passed during the 75th Session will sunset on June 30, 2011 and the one-shot American Recovery and Reinvestment Act (ARRA) funds will no longer be available, leaving another chasm between available and needed funding. In particular, Medicaid's FMAP and matching dollars will affect the Aging and Disability Services Division budget. The state must be mindful not to desert the most frail, at-risk elder, or those living in indigent status. The effort to find new funding streams, partner in collaborations, and find innovative programs will never be more necessary. The shift to community based services will be even more critical, and efforts to recruit volunteers/caregivers in that effort must play a pivotal role.

The approaching years will require the advocacy groups to pull together more than they ever have in past years in order to be the voice for the most vulnerable populations. It will also be important to identify legislators or candidates for office who are sympathetic with aging issues and needs. Those identified will need to be supported and educated as to previous budgets and legislation that often takes years to understand. Education of new legislators will be a high priority of SPAC in efforts to keep seniors in the forefront of populations placing demands on the state in terms of services and dollars.

Other efforts, such as the continued pursuit of a PACE program to help fill the needs selective to individual community needs should move forward, especially since a provider and model has been identified. Grant opportunities must be actively pursued to maximize any available resources that could continue to move Nevada forward

towards meeting the needs of Nevada's seniors. The accountability committee will continue its efforts to increase the amount and scope of waiver programs. SPAC will also facilitate the maturation of guardianship and mental health policies as they apply to seniors. The committee will also continue to pursue the diversification and availability of affordable supportive housing both separately and as it facilitates nursing home diversion.

SPAC would like to thank Director Mike Willden and Deputy Director Mary Liveratti of the Department of Health and Human Services for their support of the newly established Aging and Disability Services Division, and for their vision in caring for the elderly and disabled in Nevada.

Appendix A: Accomplishments and Challenges on the Strategic Plan

Target Area One: More Nevada Seniors Live in the Setting of Their Choice with Support to Remain as Independent and Healthy as Possible.

Accomplishments

1. During FY2008 and FY2009, the Division for Aging Services was forced to reduce the number of waiver slots in order to meet required budget cuts. These cuts reduced the caseloads to:
1235 slots for CHIP
330 slots for WEARC
181 slots for COPE
45 slots for AL
These reduced caseloads were to be maintained through the end of FY2009. The biennial budget proposed further reductions to the waiver caseloads resulting in a loss of 7 social workers who would have managed those cases.

However, the Legislature chose to add 394 slots back into the budget and restore the 7 social worker positions.

1480 slots for CHIP
472 slots for WEARC
181 slots for COPE
54 slots for AL
2. The Governor Recommend budgets for DAS, ODS and DHCFP reflected a \$3.00/hour rate decrease to reimbursement rate for Personal Care Services rate providers. The Legislature added back \$1.50 of that cut resulting in only a \$1.50/hour decrease in the finalized budgets for DAS and DHCFP.
3. Assembly Bill 81 makes various changes relating to the Central Repository for Nevada Records of Criminal History.
4. Assembly Bill 97 requires the establishment of procedures for transferring governmental functions between and among local governments and state agencies. This important piece of legislation will prevent the dumping of programs from one entity to another without proper notification and timeframes that allow for budgeting and planning. The responsibility for providing Elder Protective Services is proposed to be transferred from Clark County to ADSD. This will require adequate notification so that budgets and processes can be presented to the legislature before such action is taken.
5. Assembly Bill 165 revises the provisions governing the Fund to Stabilize the Operation of the State Government. This legislation directs the rebuilding of the

rainy day fund that can be a critical funding source when the state is facing budget crisis and the decrease or elimination of essential services.

6. Assembly Bill 263 authorizes the Aging Services Division of the Department of Health and Human Services to establish a Program of All-inclusive Care for the Elderly (PACE). ADSD will work collaboratively with Medicaid and other agencies in pursuing this community based care option and must report back to the Legislative Committee on Health Care in October and March of each year on its progress. The PACE Project was a proposal from the SPAC subcommittee on Out-of-State Placements, of which SPAC provided advocacy and testimony to support during session.
7. Assembly Bill 320 revises provisions relating to guardianships. It provided protections for people who are facing guardianship by enhancing the requirements for informing them of their legal rights and providing means by which the court can determine if their rights are being respected. SPAC provided testimony.
8. Assembly Bill 461 makes some changes to the requirements for reporting elder abuse. It allows for the establishment of a multi-disciplinary team to review issues of elder abuse within the Attorney General's office. It also requires training for all law enforcement officers handling cases of elder abuse.
9. Senate Bill 14 makes various changes to fees relating to a marriage license that fund the Account for Aid for Victims of Domestic Violence. This legislation will add funding to the domestic violence programs, which can be a resource to seniors and other vulnerable populations.
10. Senate Bill 65 revises certain provisions relating to advocacy for residents of facilities for long-term care. It allows for the creation of a volunteer advocacy program within the Division and creates the Office of the State Long Term Care Ombudsman, who will be appointed by the Administrator and who shall direct he advocates working with the residents in long term care facilities to insure their rights are being upheld. It also provides for the formation of resident and family councils within long term care facilities.
11. Senate Bill 194 revises provisions governing the appointment and duties of public administrators and guardians. It allows for a resident of Nevada to have the public guardian of a county appointed as his guardian if they have no suitable relative or friend to serve as guardian. It also prohibits a public administrator from administering any estate held in joint tenancy unless all joint tenants are deceased.
12. Senate Bill 313 revises provisions relating to guardianships. It incorporates the provisions from the Uniform Adult Guardianship and Protective Proceedings Jurisdiction Act, which will make it easier to transfer guardianships from one state

to another. It is intended to keep families from “kidnapping” their loved ones and getting guardianship in Nevada when there was already a guardianship in place in another state. It will also allow Nevada to recognize and monitor guardianships instituted in another state without a new guardianship being created when a guardian and ward move to Nevada. This measure was followed by SPAC.

13. Senate Bill 314 adopts the Uniform Power of Attorney Act. Currently, durable powers of attorney for health care laws are in NRS Chapter 449 and general power of attorney laws are in NRS Chapter 111. This bill combines all power of attorney laws into one new chapter of NRS. This measure was followed by SPAC.
14. An interagency task force lead by Judge Doherty continues to work on the issues related to out-of-state placement of clients such as those with dementia that have behavioral problems.
15. The Division’s budget request to replace the funding lost from CMS for the five positions within the Ombudsman program was approved. This will allow the Long-Term Care Ombudsman to respond to complaints issued concerning residents’ needs in nursing and group homes. This effort has dovetailed into the Restraint-Free Nevada effort taking place in the Health Division’s Bureau of Health Care Quality and Compliance, formerly Bureau of Licensure and Certification. SPAC remains involved.
16. Non-medical Medicaid vision services were added back into the budget for Medicaid clients over the age of 21.

Challenges

17. Although the Division for Aging Services’ caseloads were increased through budget add-backs, the total number of waiver slots is still below what was legislatively approved during the 2007 session. If the budget cuts hadn’t occurred during FY2008 and FY2009, the number of approved slots at the end of FY2009 would have been:
 - 1713 CHIP slots (1480 approved by 2009 Legislature)
 - 324 WEARC slots (472 approved by 2009 Legislature)
 - 181 COPE slots (193 approved by 2009 Legislature)
 - 79 slots for AL (54 approved by 2009 Legislature)SPAC continues to be concerned about waiver flexibility, community demands for caseload growth and capacity issues. However, plans are in place to consolidate CHIP and WEARC into one waiver. Flexibility would no longer be an issue.
18. Assembly Bill 91 was introduced during the 2009 which proposed securitizing the funds Nevada receives under the Tobacco Master Settlement Agreement. Every year, Aging Services grants out approximately \$5 million in funding to the aging network throughout Nevada to help seniors remain independent. The loss of this

funding would significantly impact the ability to provide the same level of services currently delivered throughout Nevada. Although the bill died, securitization of the tobacco settlement funds still is discussed in various arenas.

19. The number of Nevada seniors placed out-of-state (80+) is still unacceptably high. Ongoing efforts of the Task Force for Out-of-State Placements continue to pursue solutions to this problem. This remains an unmet need and should also be looked at with the Community Living Program opportunities, formerly called Nursing Home Diversion Program.
20. Personal Needs Allowance for persons in nursing facilities is \$35.00 per month and has not been increased in many years. Residents have difficulty purchasing personal care items with this limited amount of allowance. Steps to increase this allowance should be pursued.
21. Assembly Bill 267 during the 2005 session weakened the elder abuse reporting law because it removed attorneys and clergy as “mandatory reporters.” Attempts to get these two disciplines put back into the mandatory reporting law during the 2007 and 2009 sessions failed.
22. Assembly Bill 4 would have created the Statewide Alert System for the Safe Return of Missing Older Persons.
23. Assembly Bill 8 would have made various changes governing the investigations of the criminal history of certain employees and licensees and creates the Statewide Central Registry for the Collection of Information Concerning the Abuse, Neglect, Exploitation or Isolation of Older Persons.
24. Assembly Bill 42 would have granted administrative subpoena power for the Medicaid Fraud Control Unit within the Office of the Attorney General to obtain certain records and materials.
25. Assembly Bill 260 would have required training for persons required to report certain crimes against older persons.
26. Assembly Bill 375 would have required a portion of the proceeds of property taxes currently levied for cooperative extension programs to be used to provide services for senior citizens.
27. Assembly Bill 382 would have made certain changes concerning the reporting of suspected elder abuse.
28. Senate Bill 390 would have directed the Legislative Commission to provide for a study concerning the long-term care of certain persons in this State. SPAC followed this bill and provided testimony, along with the Honorable Judge Francis Doherty, who leads the Task Force on Out-of-State Placements.

Target Area Two: More Nevada Seniors Engage in the Occupation of Life.

Accomplishments

1. The Division for Aging Services also funded 496 unduplicated recipients of respite care through its Independent Living Grants in the period 10/1/07 to 9/30/08 out of its share of Nevada's tobacco settlement funds.
2. Assembly Bill 338 authorized a program to provide grants to nonprofit private entities concerning small business start-ups for veterans and senior citizens.

Challenges

3. Medicare only covers short-term day programs for seniors in need and then only in acute care hospitals. Additional resources for respite care to family caregivers are needed.

Target Area Three: More Nevada Seniors Have Improved Health Outcomes.

Accomplishments

1. Assembly Bill 6 revises provisions governing certain emergency admissions to mental health facilities and hospitals.
2. Assembly Bill 136 establishes the State Program for Oral Health.
3. Assembly Bill 206 revises provisions relating to public health.
4. Assembly Bill 213 requires the establishment of the Cancer Drug Donation Program.
5. Assembly Bill 370 improves pharmacy access in rural communities.
6. Senate Bill 72 authorizes a registered pharmacist or a registered intern pharmacist to perform certain screening tests.
7. Senate Bill 197 revises provisions relating to the reissuance of certain prescription drugs.
8. Senate Bill 278 requires the Legislative Committee on Health Care to study certain issues concerning the provision of health care.
9. Senate Bill 307 requires the Office of the Director of the Department of Health and Human Services to study issues relating to Medicaid.

10. Senate Bill 362 clarifies and revises provisions related to the suspension or revocation of professional licenses by health care professional licensing boards.
11. The Department of Health and Human Services provided funding to UNR, Sanford Center on Aging to produce an Elder Count in Nevada. This data allowed the establishment of baseline data, for example, for Nevada seniors 75 and older who are severely disabled. The challenge is to secure a way to pursue a mechanism for funding an Elder Count in Nevada, which would provide updated statistics on Nevada's seniors on a regular basis.
12. The ADSD has continued to fund the Medication Management Project through the Sanford Center on Aging at UNR. The project deals with senior misuse of medication by promoting ongoing periodic professional reviews of medication.

Challenges

13. Universal access for seniors to dental care, both preventive and restorative is not available. The Senior Rx legislation passed during the 2007 Legislative Session allowed for the provision of dental benefits under the program. However, the surplus funds in Senior Rx were swept during the FY2008 budget crisis, thus eliminating the ability for the program to provide dental benefits.
14. Ongoing funding for an Elder Count in Nevada needs to be secured, which would provide updated statistics on Nevada's seniors.
15. Ongoing funding sources for medication management activities need to be explored and secured.
16. Assembly Bill 386 proposed to exempt sales to senior citizens of hearing aids, hearing aid accessories and ophthalmic or ocular devices or appliances from sales and use taxes and analogous taxes. This bill died.
17. Senate Bill 24 would have required the Director of the Department of Health and Human Services, within the limits of available money, to include in the State Plan for Medicaid a program to provide preliminary determinations of eligibility for certain assistance
18. Senate Bill 232 proposed to exempt sales of certain durable medical equipment, mobility-enhancing equipment, hearing aids, hearing aid accessories, and ophthalmic or ocular devices or appliances from sales and use taxes and analogous taxes. This bill died. (See #16 above)

Target Area Four: More Nevada Seniors Live in Homes That Are Safe, Fully Accessible and Affordable.

Accomplishments

1. Assembly Bill 20 revises provisions governing homes for individual residential care and other facilities and agencies licensed by the Health Division of the Department of Health and Human Services.
2. Assembly Bill 111 revises provisions governing certain residential facilities for groups and homes for individual residential care.
3. Assembly Bill 112 establishes provisions relating to the coordinated response to public health emergencies and other health events.
4. Assembly Bill 139 requires the compilation, analysis and reporting of information concerning low-income housing and housing suitable for use by persons with disabilities. SPAC supported and advocated for this during the 2007 Legislative Session.
5. Assembly Bill 149 revises provisions governing foreclosures on property.
6. Assembly Bill 176 revises provisions relating to administrators of facilities for long-term care. SPAC supported and advocated for this.
7. Assembly Bill 294 directs the Legislative Commission to conduct an interim study concerning group homes.
8. Assembly Bill 477 exempts a person who works for a landlord of a dwelling unit used for a residence for older persons from an additional background check.
9. Senate Bill 67 revises provisions governing declarations of homestead.

Challenges

10. The Accountability Committee still lacks the kind of information required to assess the status of senior housing in Nevada in order to properly track, monitor and evaluate senior housing issues.
11. Insufficient data still exists to determine percentage cost of housing and utilities for seniors' income, both those in private and public housing.
12. Assembly Bill 43 would have revised provisions prohibiting discrimination in employment, housing and public accommodations.

13. Assembly Bill 58 would have revised provisions governing residential landlords and tenant.
14. Assembly Bill 373 would have directed the Legislative Commission to conduct an interim study concerning group homes.
15. Assembly Bill 423 would have made an appropriation for the State's share of the cost of establishing a veterans' home in northern Nevada.
16. Senate Bill 290 would have authorized patients of certain facilities to install electronic surveillance devices in the room of the patient.
17. SB122 and SB282 both proposed to increase the amount of property tax rebate paid to seniors. These bills did not pass and the maximum amount a senior may receive in rebate remained at \$500.
18. Assembly Bill 555 removed the ability to carry forward any remaining funds in the Senior Citizen's Property Tax budget account at year-end requiring the funds to be returned to the General Fund. During 2008 and 2009 rounds of budget cuts the Division for Aging Services used the surplus as part of the budget reduction plan, thus averting further reductions to the waiver programs.
19. More diverse and dedicated services for affordable senior housing or publicly supported senior housing are needed.

Target Area Five: More Nevada Seniors Who Are Frail or Disabled Go From One Place To Another When They Need To.

Accomplishments

1. Assembly Bill 296 revised provisions governing certain nonprofit carriers of elderly persons or persons with disabilities.

Challenges

2. Data is collected but not compiled by any one entity. Thus accurate information is difficult to obtain.
3. Transportation services for seniors and persons with disabilities continue to be inadequate, especially in the rural areas.
4. Assembly Bill 358 would have made an appropriation to the Department of Transportation to fund rural transit operations for elderly persons and persons with disabilities.

5. Assembly Concurrent Resolution 18 would have directed the Legislative Commission to conduct an interim study concerning mass transportation in this State.

Target Area Six: More Nevada Seniors Get The Benefits, Services and Supports They Need.

Accomplishments

1. Assembly Bill 9 creates the Legislative Committee on Senior Citizens, Veterans and Adults with Special Needs. This committee has been established as a statutory legislative committee. It will provide seniors, veterans and adults with special needs a voice with the legislature that has not existed before.
2. Senate Bill 45 provides for the deposition of senior citizens, aged 70 and up for use at a trial or hearing.
3. The Division's Harmony software and its Information and Referral components will be able to supply the electronic backbone for Aging and Disability Resource Centers (ADRCs). The software is also integrating data from all of the Division grantees via a revised National Aging Program Information System (NAPIS) software package as required by Administration on Aging.
4. The Division's purchase of the "Harmony" software package allowed the integration of all internal databases and facilitating uniform access and referral forms and procedures, thus moving Nevada closer to the goal of a fully integrated single-point of entry system.
5. The Division's budget request for funding for the ADRC Project Manager was approved. This will help the Division further develop case tracking and federal reporting compliance. ADRCs have become a national initiative and states are expected to have fully functioning ADRCs. This position is critical to the Division's ability to obtain and maintain future federal grant funding associated with ADRC activities and to lead Nevada to the goal of having fully functional ARDCs throughout the state.

Challenges

6. Harmony allows intra-agency database integration and has transitioned all of the case management and data to this system. The Division continues to make progress towards a fully integrated single point of entry system, including ADRC, that establishes inter-agency integration of client and service data, which allows the tracking of selected health and long-term care indicators as called for in the Strategic Plan. Difficulties with collaboration with partners has slowed the progress.

7. The 2-1-1 system still does not have a permanent funding source. During the 2009 Legislative Session 2-1-1 was partially funded: Year 1 of the biennium with \$26,129 in General Fund and \$104,705 in United Health Settlement Funds. Year 2 of the biennium provides \$130,834 in General Fund. The 2011 Legislature should commit to providing some ongoing state funding to this vital service in conjunction with local governments and the private sector to assure that the public has access to needed information.
8. Increase the effectiveness of prosecution of elder abuse and exploitation and to ensure a safety net that supports victims of elder abuse and exploitation.

Appendix B – Legislative Commission’s Subcommittee to Study Issues Relating to Senior Citizens and Veterans

During the 2007 Legislative Session, Assembly Concurrent Resolution (ACR) No. 35 was passed. This ACR authorized the Legislative Commission’s Subcommittee to Study Issues Relating to Senior Citizens and Veterans. The committee held 6 hearings between December 2007 and June 2008. SPAC Chair, Connie McMullen attended every hearing and testified at two of the meetings on behalf of SPAC regarding the issue of out-of-state placements and 2-1-1 funding. Members of the SPAC attended the hearings, provided testimony, and closely monitored the activities of the subcommittee and the Legislative Committee on Health Care.

During the sixth and final meeting of the Interim Subcommittee, held on June 19, 2008, the Subcommittee conducted a work session. During the work session the Subcommittee voted to forward five Bill Draft Requests (BDRs) to the 2009 Legislative Session. In addition, the Subcommittee members also voted to have 13 letters drafted to various entities expressing their support for specific issues or encouraging certain action. Members also voted to include several statements of support for issues in the Subcommittee’s final report. In addition to the 5 subcommittee BDR’s other Legislators have agreed to introduce legislation related to senior issues related to subcommittee priorities.

The SPAC supported the 5 Bills that were submitted by the Subcommittee, which are in line with the priorities of the SPAC. These Bills are listed below:

1. AB 9 created an ongoing statutory committee on “Special Adult Populations” to address issues concerning groups such as senior citizens, veterans, and disabled adults. The Committee may study, among other important issues, the following topics:
 - A. Model guardianship laws and ways to improve protections for older persons involved in the guardianship system, including ways to improve investigation and monitoring systems; and
 - B. Ways to improve long-term care facilities in Nevada, which may include: (1) a reduction in out-of-state placements; (2) the creation of both an acute and long-term special unit to treat people suffering dementia who have challenging behaviors; (3) the development of a long-term care geropsych unit for treatment in both the north and south as an alternative to long-term care facilities; and (4) the creation of a Program for Assertive Community Treatment, similar to the Division of Mental Health and Developmental Services’ Programs for Assertive Community Treatment (PACT), that would provide follow-up care and track the progress of residents.

2. AB 8 would have required the Aging Services Division, Department of Health and Human Services (DHHS), to create a central registry of information relating to substantiated cases of abuse, neglect, isolation, or exploitation committed against an older person. The information in the registry would include information related to cases of abuse, neglect, isolation, or exploitation gathered pursuant to NRS 200.5093. The Division could release information in the registry to an employer who provides services to older persons under certain circumstances. This legislation and the requirements for the registry should be modeled after NRS Sections 432.0999 through 432.130, which relate to a registry of information concerning the abuse or neglect of a child.

This bill did not pass due to the cost to manage a registry.

3. AB 111 revised licensing requirements for residential facilities for groups and homes for individual residential care in the following way:
 - A. Prohibit licensees of residential facilities for groups with ten beds or fewer and homes for individual residential care from renting rooms to boarders who do not meet the residency requirements of the type of group home for which they are licensed. An exception is that any person related within the third degree of consanguinity to a resident or staff person of the home may also reside there.
4. AB 477 amended the provisions of NRS 118A.335 to remove the duplication of background checks that was created for certain facilities by the passage of Assembly Bill 352 (Chapter 315, *Statutes of Nevada*) in 2007. The amendment should state that employees working in facilities that are currently licensed by the Bureau of Health Care Quality and Compliance, and that meet the requirements for those employees under NRS 449.176 through 449.188, are exempt from the requirements listed in NRS 118A.335.
5. AB 295 proposed to change property tax provisions for certain veterans:
 - A. Provide for a 100 percent property tax or privilege tax exemption for 100 percent service-connected disabled and individually unemployable veterans (NRS 361.090); and
 - B. Increase the amount of property tax exemption for veterans and add a new tier for those who are 40 to 59 percent disabled (NRS 361.091).

This bill did not pass.