

# AGING STRATEGIC ALIGNMENT PROJECT

## State Profile for

# NEVADA

## Home- and Community-based Services for Older Adults and Adults with Physical Disabilities

### Background

- Nevada's 60+ population was 432,112 in 2008 (16.6% of the state's total population), with 6.7% below the federal poverty level.<sup>1</sup>
- The 60+ population is projected to be 922,012 in 2025 (23.9% of the state's total population).<sup>2</sup>
- About 21.2% of all households in 2007 had one or more persons age 65 years and older and 36.2% of persons age 65 years and older had a disability.<sup>3</sup>
- Of the 220,417 Medicaid beneficiaries in the state in 2003, 6.9% were aged, 12.8% were blind and disabled, 15.5% were Dual Eligible, and 1.4% were HCBS waiver beneficiaries.<sup>4</sup>
- Medicaid expenditures for institutional long-term care were 54.7% of total long-term-care expenditures, compared to 45.3% for HCBS in fiscal year 2007.<sup>5</sup>

#### Abbreviations

AAA	Area Agency on Aging
ADL	Activities of Daily Living
AoA	Administration on Aging
CMS	Centers for Medicare and Medicaid Services
HCBS	Home- and Community-based Services
IADL	Instrumental Activities of Daily Living
MRDD	Mental Retardation and Developmental Disabilities
OAA	Older Americans Act
PACE	Program of All-inclusive Care for the Elderly
SUA	State Unit on Aging

<sup>1</sup> Department of Health and Human Services, Administration on Aging. (2009). *AGing Integrated Database (AGID): American Community Survey (ACS) demographic data 2004-2007 and state-level population estimates data 2000-2008* [Data files]. Available from <http://198.136.163.234/default.asp>

<sup>2</sup> Department of Health and Human Services, Administration on Aging. (2009). *AGing statistics: Projected future growth of the Older population; By state: 2005-2030; Aged 60 and above* [Data files]. Available from [http://www.aoa.gov/AoARoot/Aging\\_Statistics/future\\_growth/future\\_growth.aspx](http://www.aoa.gov/AoARoot/Aging_Statistics/future_growth/future_growth.aspx).

<sup>3</sup> Reimbursement and Research Department, American Health Care Association. (2006, August 29). *The state long-term health care sector 2005: Characteristics, utilization, and government funding*. Washington, DC: Author.

<sup>4</sup> U.S. Census Bureau, 2007 American Community Survey, United States and States. *Percent of households with one or more people 65 years and over (R1104) and Percent of people 65 years and over with a disability (R1803)*.

<sup>5</sup> Burwell, B., Sredl, K., & Eiken. S. (2008, September 26). *Medicaid long term care expenditures FY 2007*. Eagan, MN: Thomson Reuters.

## Government Structure to Manage HCBS Assessment Process

- **SUA:** Nevada Division for Aging Services (DAS). [www.aging.state.nv.us/](http://www.aging.state.nv.us/)
- **State Medicaid Agency:** Nevada Division of Health Care Financing and Policy (DHCFP). [www.dhcfp.state.nv.us/](http://www.dhcfp.state.nv.us/)
- Nevada has a consolidated agency for long-term-care programs, which is the Department of Health and Human Services (DHHS). Along with the Director's Office, three divisions within DHHS provide and regulate long-term-care services: DAS, DHCFP and the Health Division.
- The director of Nevada's SUA reports to the director of the Department of Health and Human Services, who reports to the Governor.
- Nevada does not have Area Agencies on Aging.

## Single Point of Entry (SPE)/Aging and Disability Resource Center (ADRC)

- Nevada has an ADRC that is not statewide.
- All ADRC sites have a physical (bricks and mortar) infrastructure; all ADRC sites also operate under a virtual model.
- In addition to serving older adults, Nevada's ADRC serves those who have MRDD; physical disabilities; and cognitive impairment, including Alzheimer's and related diseases; families and children; veterans; and individuals of all ages seeking information and referral services.
- One of Nevada's ADRCs is located in Washoe County serving the city of Reno, and the other is located in Clark County serving the city of Las Vegas. The state is working toward a statewide system that will act as a resource for anyone needing information.

## Medicaid

- For Medicaid applicants, in determining functional eligibility for nursing home pre-admission, Nevada requires an in-person assessment by someone other than nursing home staff. The assessment is conducted by First Health Services under contract with DHCFP.
- A PreAdmission Screening and Resident Review (PASRR) assessment, which assesses the level of functional deficits, is completed. Medicaid beneficiaries must meet the functional deficit criteria. For individuals with a mental health diagnosis, a PASRR II screening is also completed.

## Non-Medicaid

- For non-Medicaid applicants in Nevada, nursing home pre-admission assessment is performed by someone other than nursing home staff. The assessment is done by phone and in-person for older adults and adults with physical disabilities by the DHCFP and First Health Services under contract with DHCFP.
- A PASRR assessment, which assesses the level of functional deficits, is completed. Non-Medicaid beneficiaries do not need to meet the functional deficit criteria. For individuals with a mental health diagnosis, a PASRR II screening is also completed.

## State Medicaid Plan

- Nevada provides HCBS through the state Medicaid plan.
- Refer to Table 1 for specific services provided.
- **PACE:** Nevada has no PACE sites.

## Medicaid Waivers

- Nevada has four waivers that provide HCBS to older adults and/or adults with physical disabilities. These are: Frail Elderly in HCBS, Waiver for Elderly in Adult Residential Care, Waiver for Persons with Disabilities, and Waiver for the Elderly in Group Care.

- **Frail Elderly in HCBS:** This program targets individuals age 65 and older who, without interventions, are at risk for Medicaid nursing home placement within 30 days. The goal is to maintain individuals in the community. A minimum of three ADL/IADL functional deficits is required in order for an applicant to receive services in this program. Due to budget shortfalls, however, these criteria will increase to five functional deficits in the 2010/2011 state plan, which means that some participants currently enrolled will no longer qualify and will be disenrolled. For individuals, the income eligibility is 300% of Supplemental Security Income (SSI), with assets no greater than \$2,000. In determining eligibility for couples, assets are divided equally; in addition, couples may establish a Miller Trust. Case managers contact the participant monthly to assist with problem solving, review the care plan, and assist with other resource identification and needs. Consumer-directed options are available in this program, with participants given an option of using family or friends to provide services. Participants utilizing consumer-directed options must use an Intermediary Service Organization (ISO).
- **Waiver for Elderly in Adult Residential Care:** This program targets individuals age 65 and older who meet low-income housing requirements. The waiver is available to residents of one assisted living facility located in Las Vegas and has only 50 slots. The intent of this program is to provide an affordable assisted living facility option in the state. A minimum of three functional deficits is required in order for an applicant to receive services in this program; however, these criteria will increase to five functional deficits in the 2010/2011 state plan. For individuals, income eligibility is 300% of SSI with assets no greater than \$2,000. In determining eligibility for couples, assets are divided equally; in addition, couples may establish a Miller Trust.
- **Waiver for Persons with Disabilities:** This program targets participants age 18 and older who are physically disabled. The functional assessment includes a certification by a physician and an adjudication process to determine that the applicant is physically disabled. For individuals, income eligibility is 300% of SSI with assets no greater than \$2,000. In determining eligibility for couples, assets are divided equally; in addition, couples may establish a Miller Trust.
- **Waiver for the Elderly in Group Care:** This program targets individuals aged 65 and older who, without interventions, are at risk for nursing home placement. The participants' income is used to pay for room and board at the group care facility, in addition to transportation, socialization and other activities. Medicaid also pays a daily rate for care based on the participant's level of care need. Facilities under this waiver may be large group homes or small foster homes. Limited consumer-directed options are provided in that participants are given the option of choosing a group care facility. For individuals, income eligibility is 300% of SSI with assets no greater than \$2,000. In determining eligibility for couples, assets are divided equally; in addition, couples may establish a Miller Trust.
- Refer to Table 2 for an overview of selected HCBS programs. Table 1 shows the types of services offered under each program.

## CMS-funded Programs and Grants

- Nevada does not have CMS-funded programs and grants that provide HCBS to older adults and/or adults with physical disabilities

## State-funded HCBS Programs

- Nevada has two state-funded HCBS programs that provide HCBS to older adults and/or adults with physical disabilities. These are: Community Services Options Program for the Elderly (COPE) and Personal Assistance Services.
- **Community Services Options Program for the Elderly (COPE):** This program targets participants age 65 and older who are at risk of nursing home placement and whose assets and incomes are too high for Medicaid. The goal of this program is to maintain participants in the community and to intervene prior to spending down to Medicaid. The COPE program is the same as the HCBS Medicaid waiver but serves a non-Medicaid eligible population. For this program however, income limits may exceed 300% of SSI up to

\$4,000, with assets up to \$30,000. Consumer-directed options are available in this program with participants given an option of using family or friends to provide services. Participants utilizing the consumer-directed options must use an (ISO).

- **Personal Assistance Services:** This program targets applicants age 18 and older who have severe disabilities that result in significant limitation in their ability to perform functions of daily living. It is expected that services provided under this program will help to improve or maintain the participant's independence and, when combined with other resources, will meet all of the defined care needs. There is no asset limit for this program; however, for households, the income limit is 800% of the federal poverty level (FPL), and participants between 200% and 800% of FPL share in the cost of services on a sliding scale. Consumers are encouraged to interview and choose their caregiver, although one can be assigned to them if preferred. Consumers also direct the care routine and choose their hours of care, within the limitations of the program. Using a standardized functional assessment tool, an occupational therapist or other licensed professional measures the hours needed to meet an individual's care needs. If those needs exceed six hours per day, there must be a supplemental resource available to provide the needed care above six hours. Re-assessments are completed anytime there appears to be a change in the participant's care needs. Case management is provided by the St. Mary's Foundation as part of the service package. Participants are contacted at least three times annually to ensure their satisfaction, to determine if their needs have changed, and to refer them for other services that might be needed. All participant contacts are documented in an electronic case management system.
- Refer to Table 2 for an overview of selected HCBS programs. Table 1 shows the types of services offered.

### Locally Funded HCBS Programs

- Nevada does not use local funds for HCBS for older adults and/or adults with physical disabilities.

### OAA-funded Programs and Grants

- Refer to Table 1 for services provided through Title III of the OAA.
- Nevada does not use cost-sharing mechanisms or sliding fee scales in the delivery of Title III services.
- Nevada has one other OAA-funded program and grant that provides HCBS to older adults and/or adults with physical disabilities. It is: Family Caregiver Support.

### Social Service Block Grants (SSBG) and Community Service Block Grants (CSBG) for HCBS

- Nevada uses SSBG to provide HCBS for older adults and/or adults with physical disabilities.
- SSBG funds a homemaker program. Tobacco settlement funds are used to supplement the SSBG homemaker program within the Division for Aging Services. In the past, the Division received 30- 50% of Nevada's Tobacco Settlement Funds. These dollars have also funded, in part, the Senior Rx and Disability Rx programs.
- Nevada does not use CSBG to provide HCBS for older adults and/or adults with physical disabilities.

### Consumer Direction

- Nevada offers consumer-directed options. The HCBS programs in the state that offer consumer direction are: Frail Elderly in HCBS, Waiver for Persons with Disabilities, Waiver for the Elderly in Group Care, Community Services Options Program for the Elderly, and Personal Assistance Services.
- The model of consumer direction available in the state gives participants the ability to choose their providers.
- Those permitted to provide services under consumer direction in Nevada are: provider agencies, adult children of the consumer, other family members, and friends.

- Nevada uses fiscal intermediary services in connection with consumer direction; there is one in the state.

## **Managed Care**

- Nevada does not have HCBS programs run by managed care health plans.

## **Major Accomplishments and Initiatives**

- Nevada has been able to increase the number of participant slots provided through waiver programs.
- Nevada has been able to utilize technology to computerize many of the program assessments, eliminating duplication of effort by case managers.

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**Table 1: Types of Home- and Community-based Services Provided Under Nevada's Programs for Older Adults and Adults with Physical Disabilities**

Types of Services	Program Type / Funding Source							
	Medicaid Waivers				State-funded Programs		State Medicaid Plan	OAA Title III
	Frail Elderly in HCBS	Waiver for Elderly in Adult Residential Care	Waiver for Persons with Disabilities	Waiver for the Elderly in Group Care	Community Services Options Program for the Elderly (COPE)	Personal Assistance Services		
Adult Day Care / Adult Day Health								
Assisted Living								
Caregiver Services / Respite / Education	X				X	X		
Case Management / Care Coordination	X	X	X	X	X	X		X
Chore / Homemaking	X		X		X	X		X
Companion Services / Socialization Activities								X
Employment								
Equipment/Supplies/Modifications/Assistive Technology							X	
Health Promotion Activities						X		
Home Health / Personal Care						X	X	
Information / Assistance / Referral						X		X
Legal Assistance / Financial Advice								X
Medical / Dental / Medication Care								
Mental and Behavioral Health Services								
Nursing							X	
Nutrition / Meals								
Personal Supports for Community Living / Transitioning								
Rehabilitation / Therapy							X	
Residential Services								
Transportation							X	X
Other/Unspecified HCBS								

Table 2: Selected HCBS Programs for Older Adults and Adults with Physical Disabilities in Nevada

Program Type / Funding Source	Program Name	Ages Served	Nursing Home Level of Care Required	Entity Responsible for Functional Assessment	Entity Responsible for Financial Assessment	Entity Responsible for Case Management	Waiting List (Number)	Consumer Direction Option
Medicaid Waivers	Frail Elderly in HCBS	65+	Yes	State agency: Division for Aging	State agency: Division for Aging	State agency: Division for Aging; Case management entity	Yes (219)	Yes
	Waiver for Elderly in Adult Residential Care	65+	Yes	State agency: Healthcare Financing and Policy (Medicaid); Physician	State agency: Healthcare Financing and Policy (Medicaid)	State agency: Healthcare Financing and Policy (Medicaid)	No	No
	Waiver for Persons with Disabilities	18+	Yes	State agency: Medicaid agency; Physician	State agency: Healthcare Financing and Policy (Medicaid)	State agency: Medicaid agency	Information not reported	Yes
	Waiver for the Elderly in Group Care	65+	Yes	State agency: Division for Aging	State agency: Division for Aging	State agency: Division for Aging	Yes (137)	Yes
State-funded Programs	Community Services Options Program for the Elderly (COPE)	65+	Yes	State agency: Division for Aging	State agency: Division for Aging	State agency: Division for Aging	Yes (21)	Yes
	Personal Assistance Services	18+	No	Non-profit (other than AAA or CIL)	Non-profit (other than AAA or CIL)	Non-profit (other than AAA or CIL)	Yes (59)	Yes

