

WASHOE COUNTY SENIOR SERVICES ADVISORY BOARD MEMBERS

(Commission Districts)

Dr. Larry Weiss (1)

Gary Whitfield (1)

Karen Davis (3)

Jeanne Herman, County

Commission (3)

Diane France (3)

Vaughn Hartung, County Commission, Alternate

Connie McMullen (2) Clinton Smith (2)

Dennis Chin (4)

Reno City Council At-Large

Jill Andrea, At-Large

Wayne Alexander (4) Victoria Edmondson (5)

Ed Lawson, Sparks City Council (4)

Marsy Kupfersmith, Alternate Donna Clontz, Alternate

MEETING AGENDA

Wednesday, February 4, 2015 3:00 pm - 5:00 pm Senior Services - Game Room Washoe County Senior Services 1155 E. 9th Street Reno. NV 89512

Tel: 775-328-2575 Fax: 775-328-6192

lbonilla@washoecounty.us kcarpenter@washeocounty.us

All items numbered or lettered below are hereby designated for possible action as if the words "for possible action" were written next to each item (NRS 241.020). An item listed with asterisk (*) next to it is an item for which no action will be taken. Items on the agenda may be taken out of order. The public body may combine two or more agenda items for consideration. The public body may remove an item from the agenda or delay discussion relating to an item on the agenda at any time.

The Senior Services Advisory Board conducts the business of Washoe County and its citizens during its meetings. The Chair may order the removal of any person whose statement or other conduct disrupts the orderly, efficient or safe conduct of the meeting. Warnings against disruptive comments or behavior may or may not be given prior to removal. The viewpoint of a speaker will not be restricted, but reasonable restrictions may be imposed upon the time, place and manner of speech. Irrelevant and unduly repetitious statements and personal attacks, which antagonize or incite are examples of speech that may be reasonably limited.

Public Comment is limited to three (3) minutes per person. Persons are invited to submit comments in writing on agenda items and/or attend and make comment on that item at the Advisory Board Meeting.

- 1... CALL TO ORDER
- 2. ROLL CALL
- 3. *PUBLIC COMMENT
- 4. Approval of the Agenda for the Advisory Board Meeting on February 4, 2015.
- Approval of the Minutes from the Advisory Board Meeting on December 3, 2014. 5.

- 6. Accept the resignation of Jill Andrea as appointed at-large Advisory Board member, and recommend the appointment of Marsy Kupfersmith to fill the vacancy in accord with the Advisory Board by-laws.
- 7. *Presentation by Washoe County Senior Services Licensed Social worker (LSW) staff on the types of services provided including a profile of clients. Presenter, Dawn Costa LSW, Washoe County Senior Services.
- 8. Discussion on the recruitment process for Associate Members and their roles, and including a discussion on advertising, "meet and greet" events and promotion in the City of Reno and Washoe County Senior Services newsletters.
- 9. *City of Reno Staff Report- Darryl Feemster
- 10. *Directors Updates Grady Tarbutton
 - a. Updated Advisory Board Manual Table of Contents
 - b. Advisory Board Membership
 - c. Recognition of Jill Andrea
 - d. Budget Update
 - e. Older Americans Month update
 - f. Master Plan update.
 - g. Human Services Agency update.
 - h. Primer (briefing) for the Board prior to the legislative session (standing item).
 - i. Update on Senior Service program waitlists (standing item).
 - j. ADRC Data Base update (standing item)
 - k. ADSD Grant update
 - I. General Update
- 11. *Member items.
- 12. Discussion of agenda items for the next Board meeting.
- 13. *Public comment.
- 14. ADJOURNMENT

Persons with disabilities who require special accommodations or assistance at the meeting should notify Lisa Bonilla, Office Assistant II, or Kathy Carpenter, Account Clerk II, at Washoe County Senior Services, 1155 E. Ninth Street, Reno, NV 89512, by calling (775) 328-2575 or via email lbonilla@washoecounty.us or kcarpenter@washoecounty.us, prior to the date of the meeting.

Supporting material for this meeting may be requested by contacting Lisa Bonilla, Office Assistant II, or Kathy Carpenter, Account Clerk II, at Washoe County Senior Services, 1155 E. 9th Street, Reno, NV 89512, by calling (775) 328-2575 or via email lbonilla@washoecounty.us or kcarpenter@washoecounty.us also the agenda and supporting information is posted on https://www.washoecounty.us/seniorsrv/advboard.htm and https://notice.nv.gov

Notices of this meeting have been posted at the following locations:

Washoe County Administration Building
Washoe County Health Department
Gerlach Senior Center
Incline Village Recreation Center

Washoe County Senior Services Sparks Senior Center Sun Valley Senior Center Incline Village Library

IN COMPLIANCE WITH NRS 241.020, THIS AGENDA HAS BEEN POSTED ON THE OFFICIAL WEBSITE FOR WASHOE COUNTY, www.washoecounty.us.

Washoe County Senior Services Advisory Board Meeting 2-4-2015

AGENDA ITEM 5

MINUTES OF THE WASHOE COUNTY SENIOR SERVICES ADVISORY BOARD MEETING

December 3, 2014
Washoe County Senior Center, 1155 E. 9th Street, Reno, Nevada 89512
Game Room

1. CALL TO ORDER

Meeting was called to order at 2:48 p.m. – by the Chairman of the Board, Dr. Larry Weiss.

2. ROLL CALL

Dr. Larry Weiss asked for roll call; Kathy Carpenter took the roll. There was a quorum present.

WASHOE COUNTY SENIOR SERVICES ADVISORY BOARD PRESENT:

PRESENT		ABSENT
Dr. Larry Weiss	Donna Clontz	Edward Williams
Dennis Chin	Clinton Smith	*Diane France
Connie McMullen	Victoria Edmondson	* Hillary Schieve
Ed Lawson	Karen Davis	* Kitty Jung
Wayne Alexander		* Jill Andrea
		* Marsy Kupfersmith
		* Gary Whitfield

^{*}Excused absence

WASHOE COUNTY STAFF PRESENT

Grady Tarbutton Kathy Carpenter Lisa Bonilla

- 3. PUBLIC COMMENT No public comment.
- **4. APPROVAL OF THE AGENDA OF THE November 5, 2014 ADVISORY BOARD AGENDA** Two changes were to be made to the agenda. Agenda item 6 is to be pushed back to the joint meeting in January so it will not be presented today. The presenter for item 7 is out sick, and will be rescheduled to a future meeting. Dennis Chin motions the approval of the changes. Donna Clontz seconded the motion. Motion passed unanimously.
- **5.** APPROVAL OF THE MINUTES OF THE October 1, 2014, ADVISORY BOARD MEETING-Dennis Chin moved to approve the minutes as presented; Clinton Smith seconded the motion. Motion passed unanimously.
- 6. Presentation by Peter Reed, Director of the University of Nevada Sanford Center for Aging on the Sanford Center Geriatric Clinic. To be presented in the January joint meeting.

- 7. *Presentation by Washoe County Senior Services Licensed Social Worker (LSW) staff on the types of services provided including a profile of clients. Presenter, Dawn Costa LSW, Washoe County Senior Services. To be rescheduled for a future meeting.
- 8. *Presentation of information on terms of current Advisory Board members, including Clinton Smith, Diane France, and Jill Andrea and planning for recruitment for future vacancies. The terms for Clinton Smith, Diane France and Jill Andrea all end September 30, 2015. Karen Davis's term ends June 30, 2016. Those who have served two consecutive terms cannot be reappointed and a replacement must be found. Staff will prepare a report for the Advisory Board on the recruitment process before the end of the fiscal year.
- 9. Discussion and possible amendment to the bylaws (Article 3, Section 3) governing Associate members to be more inclusive and potential candidates. The definition of the Associate Members is thought to be too restrictive and would like to have more representation from seniors and caregivers, services users and individuals involved in the community. Victoria suggests adding "citizen" to the bylaw. Connie suggests rather than "citizen" to use "resident." Dennis Chin suggests defining projects for associate members in order to better define candidates, to extend activities beyond just the meetings. Grady suggests this could be a future agenda item. Dennis Chin also suggests that Washoe County Senior Services open more activities to seniors over 80 to assist with their transition into their later stage in life. The language for the bylaw will be changed to a "Member who has served their term-limit or a professional, expert, Washoe County citizen or user of Senior Services who can provide the Board advice and assistance." Connie McMullen motions the approval of the changes. Victoria Edmondson seconds the motion. Motion passed unanimously.
- 10. *Discussion on the recruitment process for Associate Members and their roles, and including a discussion on advertising, "meet and greet" events and promotion in the City of Reno and Washoe County Senior Services newsletters. Connie McMullen suggests defining the roles and projects the Associate Members are to take on as a guide for the recruitment process. Connie also suggested a synopsis of the position in the City of Reno and Washoe County Senior Services newsletter. Grady suggests the Washoe County staff could write up a draft job description for Associate Member with any ideas the Board might want to entail, which could be discussed as a future agenda item. Once the description is written up, a discussion to be had regarding outreach and recruitment for the position, heavily focusing on the North Valleys Area.
- 11. Discussion regarding striking the word "unpaid" for the Advisory Board bylaws; Article 3, Section 1, Subpart A to allow all caregivers to be eligible for appointment. Donna made a motion to remove of the word "unpaid" from Article 3, Section 1, Subpart A of the bylaws. Dennis Chin seconds the motion. Motion passed unanimously.

- **12.** Discussion and correction of typo in the bylaws; Article 3, Section 1, Subpart H. Donna motioned to change Article 3, Section 1, Subpart H "Section 4" in the parenthesis to "Section 3." Dennis Chon second the motion.
- 13. *Update of the Department's Capital Improvement Plan, including facility modernization and security, to improve the Senior Center's atmosphere and appearance. Grady describes the two capital improvement plan projects that have been submitted to the county. The first project is the remodeling of the existing Senior Services facility on 9th Street, which is to accommodate the expansion of services and staff. This would also include the expansion of the Daybreak Program, which would allow Senior Services to allow more clients into the program. The second project is the enhancement of security in the building, which includes keycard access for exterior doors, installation of new paging system, and closed circuit TV system. Grady explains the greatest motivation behind the proposals is security.
- 14. Discussion regarding the meeting of the Board members with the newly elected City Council member. Donna Clontz explained that the Reno Advisory Board has already been working towards meeting with the newly elected City Council to update them on senior issues, to let them know what the priorities of the Washoe County Senior Advisory Board are and to see what kind of support they have to offer regarding those issues. Grady suggested calling the County Manager's office and setting up an appointment to speak to the Council Members and bring up the issues according to individual districts. Staff is to prepare packets to present to the commissioners regarding the top issues in each district, and find out what other boards each commissioner is part of to know what they are involved in.
- 15. *City of Reno Staff Report Daryl Feemster Daryl Feemster began with the reminder of the Reno/Tahoe Senior Winter Games 2015, to be held February 2nd through February 14th. The Games will be hosted at the Circus Circus Hotel/Casino. It will be \$20 to register for the games and \$10 to sign up for any of the events. Circus Circus will also be hosting a Senior Dance from 6:00pm-11:00pm on Valentine's Day, February 14th. The cost will be \$15/person, \$25/couple. The City has also put together as group of seniors known as Senior Discovery, who will be doing video productions of different events throughout the community. The City of Reno has also been including evening activities such as movies, dinners and shows to further enrich social activities and entertainment. The slogan is "Never too old for gold." The Reno Advisory Board currently does not have any spots available. Daryl also announced the next city/county joint meeting will be Wednesday, January 7th, which will take place at Evelyn Mount Community Center, hosted by City of Reno.

16. *Directors Updates – Grady Tarbutton

a. Master Plan update— One of the priorities of the Master Plan is to increase the number of clients receiving Home Delivered Meals. A pilot project will be used to begin outreach. The Ambassador Project is a volunteer program that will be aimed

to reach out to at-risk clients and to let the community know that Senior Services is there for assistance.

- **b.** Human Services Agency update With the combination of Human Services agency, Senior Services will request additional positions needed in order to keep up with the demand of services there is currently, which will include Daybreak staff, community health aides, nurse, case managers, and making part-time office assistant positions full-time.
- **c. Primer (briefing) for the Board prior to the Legislative session** February 9th, 2015 will be Senior Day in the Legislature. The Nevada Commission on Aging Legislative Sub-Committee is currently working on 5 or 6 issues to be priorities that will be presented to the next Legislative session. The CARE Act and the state budget are two of the items that will be discussed. RTC offered to make a bus available specifically for the event that day at a discounted fare. Donna Clontz suggests organizing a pre-event before February 9th to orient interested seniors regarding what the meeting will be about. This is possibly to become a future agenda item for the joint meeting.
- **d. Update on Senior Service program waitlists** A spreadsheet showing current waitlists was provided to the Board members to review. Current waitlists are the result of an increasing demand for services due to population growth especially for vulnerable seniors with not enough staff to support the growth.
- **e. ADRC Date Base update** The recommendations of the Information & Referral subcommittee. A subcommittee will be formed to help the County Review the content of the Washoe County Senior Services website update. The other piece is the committee working with the state to update the Aging & Disability Resource Center website and its navigation to make it more user-friendly.
- **f. ADSD Grant update**—Grant performance data is provided for Board members to review. Most programs are performing ahead of schedule.
- g. Emerging Issues Grady emailed everyone the announcement about Healthy Communities, sponsored by Washoe County Health, State Health Department and Renown. There are scholarships available.
 - h. Dates of Board meetings in 2015 The new schedule is attached to the packet.
- 17. Member Items Dennis Chin recounts having a client telling him he has a large number of prescription drugs but does not know where to take them, suggesting that there be a drop-off at least once a year. Grady mentioned the Sherriff's office already having such a program in place, in which we participate every October. Grady will update with more information. Donna Clontz wanted to thank those who participated in the Stuff-a-Bus program. The City of Reno also has the Senior Giving Tree program for which they are taking donations. Grady introduced Lisa Bonilla as Todd Acker's replacement. Dr. Larry Weiss also mentioned the Be a Santa to a Senior, which will have a wrapping party on the 13th. Walmarts in the community have trees with seniors' names that can be picked to purchase an item for said client.
- **18. Discussion of agenda items for the next Board meeting** Dennis Chin is asking about updates on the Senior Law Project.

19. Public Comment – No public comments made.

20. Adjournment – Dennis Chin made a motion to adjourn the meeting. Donna Clontz seconded the motion. The motion passed unanimously.



Washoe County Senior Services Advisory Board Meeting 2-4-2015

AGENDA ITEM 10

A

WASHOE COUNTY ADVISORY BOARD 2014-15 TABLE OF CONTENTS

- 1. Introduction
 - a. Welcome
 - b. Mission and Vision Statement
 - c. History of WC Senior Services
- 2. Advisory Board Tools
 - a. County Code
 - b. By Laws
 - c. Members & Terms
 - d. Older Americans Act
 - e. County Commission Strategic Plan
 - f. NRS 427a Services to Aging Person
- 3. WCSS Structure
 - a. Organizational Chart
 - i. County Org Chart
 - ii. Senior Services Org Chart
 - b. Program Fact Sheets (Pending)
 - i. Daybreak Adult Day Health
 - ii. Nutrition Program
 - iii. Senior Centers
 - iv. Social Services
 - c. Senior Services 2016 System Overview
 - d. Senior Services Fund Budget Information
 - e. Senior Services Advisory Board Planning Calendar 2014
 - i. Reno Senior Citizen Advisory Committee 2014 Meetings
 - ii. Reno Senior Citizen Advisory Committee List of Members
 - f. Washoe County Senior Services Community Focal Point
- 4. Master Plan For Aging Services 2014
 - a. Random Survey Executive Survey
 - b. Highlights from Random Survey
- 5. Advocacy
- 6. Advisory Board Agendas, Minutes and Staff Reports

7. Reference Materials

- a. NCOA Contacting Congress Top 10 Tips
- b. Proposed Senior Services Budget FY 2013/14 Presentation
- c. ADRC/NCIL Selected Remarks
- d. Project 2020 Promise of Home and Community-Based Services
- e. Area Agencies on Aging
- f. Voices Veteran Directed Home & Community Based Services
- g. Washoe County Senior Services Acronyms
- h. Washoe County Senior Services Resource Websites
- i. Nevada Revised Statues
- i. Choices For Independence
- k. The Economist "A Slow-Burning Fuse"- Article
- I. Keeping long-term care costs down Oregon's Way
- m. Veterans Issue Brief
- n. AARP In Brief Providing Long-Term Services
- o. The Maturing of America

Washoe County Senior Services Advisory Board Meeting 2-4-2015

AGENDA ITEM 10

B

RULES AND PROCEDURES FOR THE WASHOE COUNTY BOARD OF COMMISSIONERS

January 27, 2015

<u>Policy Statement:</u> The Rules and Procedures for the Washoe County Board of Commissioners are not intended to legally bind the Washoe County Commission and are proposed only for the benefit of the Commission and do not confer any rights upon third persons.

RULES AND PROCEDURES

1. Presiding Officer:

The Chair, or in the Chair's absence the Vice-Chair, shall be the presiding officer of the Commission. In the absence of the Chair or Vice-Chair, the most senior member of the Board shall preside. The presiding officer shall preserve strict order and decorum at all regular and special meetings, and workshops of the Commission.

- 2. **Exparte Communication**: A Board member will disclose on the record any exparte communication and any relevant information pertaining thereto, on an appeal (e.g., land use application appeal, work card permit appeal, etc.) that is to be decided by the Board.
- 3. Placement of an Item on a Board Meeting Agenda by a Board Member/Removal of Items from Agenda: Board members are entitled to place an item on an agenda by the regular deadline. Any Commissioner may place an item on the agenda by so requesting in a public meeting or by contacting the County Manager's Office; all Commissioners will be advised by the County Manager's Office, as soon as reasonably possible, of any Commissioner's request to place an item on the agenda. Any item requested by a Commissioner to be placed on an agenda, shall only be placed on an agenda for which the requesting Commissioner(s) will be present. If the agenda item is for the purpose of authorizing a waiver of fees, two Board members must agree the agenda item is appropriate for consideration. No item may be pulled from an agenda without consent of the initiator. Any items originated by County staff under the cognizance of the Manager may be pulled by the Manager.

During a Board meeting, any member of the Board may request agenda items be taken off the consent agenda, taken out of order, combined with other items, or request items to be voted in a block.

4. **Board Member Appointment to Certain Boards:** Unless otherwise prescribed by regulation, Board member appointment to boards and committees is limited to two consecutive terms as defined by the respective board or committee. In the event a Board member has served two terms on one of the above Boards, and no other Board member wishes to serve on the Board, then the Board member can be reappointed to the Board for another term. Notwithstanding the above, preference for appointment to TRPA shall be given to the Commissioner whose district includes the Tahoe Basin.

January 27, 2015

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- 5. Board Evaluation. The County Commission will do a self-evaluation every six months.
- 6. **Board Correspondence**: When a Board member sends out correspondence stating that Board member's official position regarding a constituent complaint or other County issue, a copy of said correspondence, either paper or electronic, will be retained on file in the County Manager's Office and copies sent to the other Board members.
- 7. Terms of Service of County Appointees on Boards: Except as otherwise provided herein and in paragraph 10, the limit of service for an individual appointed to a board is two consecutive terms. The limit of service for an individual appointed to a Citizens Advisory Board is three consecutive terms. An individual filling an unexpired term with ¾ or more of that term remaining shall be considered as having served for a full term. An additional term may be considered for an individual's appointment if there are no other qualified applicants.

Consideration should be given to assuring broad Countywide representation on boards. Appointments are not to be limited to individuals from the unincorporated area unless otherwise specified or intended by law.

- 8. Motion to Reconsider any Action Taken by the Commission: A motion to reconsider any action taken by the Commission may be made only during the meeting at which the action was taken or at the next regularly scheduled meeting, within no more than twenty-five (25) days of the meeting at which the action was taken. A motion to reconsider must be made by a Commissioner who voted on the prevailing side of the motion being reconsidered, but a motion to reconsider may be seconded by any member of the Commission. A previous motion failing by virtue of a tie vote may be reconsidered upon motion of any Commissioner. If a motion for reconsideration relates to an item requiring legal notice, only the motion itself shall be debated and, if passed, reconsideration of the item continued to a future date to allow for the provision of legal notice.
- 9. <u>Suspension of Rule(s)</u>: Any rule may be suspended at any time by a simple majority vote of the Board of County Commissioners, so long as the action to suspend the rule is listed as an action item on the agenda of a duly noticed meeting of the Board.
- 10. <u>Concurrent Meetings</u>: In the absence of extraordinary circumstances, concurrent meetings with other governmental entities should be scheduled for dates and times on which all five Washoe County Commissioners have indicated their ability to be present. However, meetings that can be attended by only three Commissioners shall not be scheduled without formal action by the Commission to approve that participation.
- 11. **Board of Equalization Appointments**: Whether considered for a full-term (4-years), for a vacancy in membership or as an alternate member, the Board shall consider the following preference factors when making appointments to the County Board of Equalization:
 - a) Experience in business generally and capability of bringing knowledge and sound judgment to the deliberations of the Board per NRS 361.340.
 - b) By residency, place of employment or other affiliations, represent diverse economic or geographic areas of the County.

Alternates are to be appointed for one-year terms only and designated, whether by draw or otherwise, as first, second, third and so on alternate and called upon for service in order.

12. **Resignations of County Appointees from Boards.** A resignation by an appointee from a County board shall be in writing, addressed to the Board of County Commissioners and filed with the Washoe County Clerk. The resignation is final and effective when received by the Clerk and cannot be withdrawn by the appointee after that time.

13. Requests of Staff

Commission members will not request any staff project that entails over two hours of staff work without seeking approval of the Commission through an item placed on the Board agenda.

14. Unsolicited Requests for Purchases or Investments

Unsolicited requests for purchases or investments shall not be placed on a Board agenda until such requests have been reviewed and recommended through normal purchasing or investment procedures and policies.

15. Chair and Vice-Chair

The County Commissioners shall elect one of their number as Chair of the Board and another of their number as Vice-Chair of the Board, both to serve a one year term. It is the intent of the Board that the Vice-Chair ascends to Chair of the Board at the conclusion of the term as Vice-Chair; however, the Vice-Chair may decline, at which time the Board shall elect a Chair and Vice-Chair.

Washoe County Senior Services Advisory Board Meeting 2-4-2015

AGENDA ITEM 10

D

SENIOR SERVICES DEPARTMENT

FY 2014-2015 (YTD 12/31/14)

DEPARTMENTWIDE					
	Adopted Budget	PY Aug/Grants	CY Grants/Trans	Amended Budget	YTD Actual
TAXES	\$ (1,247,630.00)	\$	\$	\$ (1,247,630.00)	
INTERGOVERNMENTAL	\$ (1,164,820.00)		\$ (47,866.00)	\$ (1,212,686.00)	
CHARGES FOR SERVICES	\$ (417,400.00)		\$	\$ (417,400.00)	
MISCELLANEOUS REVENUE	\$ (45,845.11)		\$ (8,345.11)	\$ (54,190,22)	
COUNTY GENERAL FUND	\$ (1,406,782.00)		\$ (55.844.44)	\$ (1,406,782.00)	
TOTAL REVENUE	\$ (4,282,477.11)	\$ THE LAND ENGINEERING	\$ (56,211.11)	\$ (4,338,688.22)	
SALARIES AND WAGES	\$ 1,348,259.01			\$ 1,348,259.01 \$ 583,120.94	\$ 232,325.38 \$ 116,508.10
EMPLOYEE BENEFITS	\$ 583,120.94	\$ 137,751.47		\$ 2,501,645.03	\$ 242,482.14
SERVICES AND SUPPLIES TOTAL EXPENDITURES		\$ 137,751.47 \$ 137,751.47	and the company of the contract of the contrac	\$ 4,433,024.98	\$ 591,315.62
Excess (Deficiency) of Revenues Over (Under)	\$ 4,293,273.31	3 137,731.47		4,435,624150	
Expenditures	\$ 12,796,40				
Non-Operating Reserves	2 12,730,40				
TOTAL	\$				
ADMINISTRATION DIVISION					
Accounts	Adopted Budget	PY Aug/Grants	CY Grants/Trans	Amended Budget	YTD Actual
TAXES	\$ (1,247,630.00)			\$ (1,247,630.00)	
INTERGOVERNMENTAL	\$ (30,000.00)			\$ (30,000.00)	
CHARGES FOR SERVICES	\$ (9,400.00)		/F 452 761	\$ (9,400.00)	
MISCELLANEOUS REVENUE	\$ (15,500.00)		\$ (5,153.76)	\$ (20,653.76)	
COUNTY GENERAL FUND	\$ (1,266,782.00)	NAME OF TAXABLE PARTY OF TAXABLE PARTY.	\$ (5,153.76)	\$ (1,266,782.00) \$ (2,574,465.76)	
TOTAL REVENUE	\$ (2,569,312.00)	\$ 100 All 200 All 200	\$ (3,133.70)	\$ 412,374.78	\$ 203,205.20
SALARIES AND WAGES	\$ 412,374.78 \$ 178,291.88			\$ 178,291.88	\$ 95,642.49
EMPLOYEE BENEFITS SERVICES AND SUPPLIES	\$ 178,291.88 \$ 872,244.91	\$ 23,386.72	\$ 5,153.76	\$ 900,785,39	\$ 415,068.15
	\$ 1,462,911.57				\$ 713,915.84
SPARKS ADMIN DIVISION					
Accounts	Adopted Budget	PY Aug/Grants	CY Grants/Trans	Amended Budget	YTD Actual
MISCELLANEOUS REVENUE	\$ (100.00)			\$ (100.00)	
TOTAL REVENUE	\$ (100.00)	\$	\$	\$ (100.00)	
SALARIES AND WAGES	\$ 23,948.03			\$ 23,948.03	\$ 5,877.19
EMPLOYEE BENEFITS	\$ 18,084.99			\$ 18,084.99	\$ 3,108.17
SERVICES AND SUPPLIES	\$ 21,692.47	\$ 492.47	ATTICK OF THE ASSESSMENT ASSESSME	\$ 22,184,94	\$ 6,999.11 \$ 15,984.47
TOTAL EXPENDITURES	\$ 63,725.49	\$ 492.47	\$	\$ 64,217.96	\$ 15,984.47
SOCIAL SERVICES DIVISION					100
Accounts	Adopted Budget	PY Aug/Grants	CY Grants/Trans	Amended Budget	YTD Actual
INTERGOVERNMENTAL	\$ (370,587.00)			\$ (370,587.00)	
CHARGES FOR SERVICES	\$ (5,500.00)			\$ (5,500.00)	
MISCELLANEOUS REVENUE			\$ (1,741.35)	\$ (1,741.35)	
TOTAL REVENUE		\$	\$ (1,741.35)	\$ (377,828.35)	
SALARIES AND WAGES	\$ 506,676,35			\$ 506,676.35 \$ 210,386.37	\$ 276,547.07 \$ 112,631.92
EMPLOYEE BENEFITS	\$ 210,386.37	\$ 9,931.34	\$ 1,741.35	\$ 139,834.36	\$ 61,347.90
SERVICES AND SUPPLIES TOTAL EXPENDITURES	\$ 128,161.67 \$ 845,224.39	\$ 9,931.34	and the second s	\$ 856,897.08	\$ 450,526.89
LEGAL SERVICES DIVISION					
Accounts	Adopted Budget	PY Aug/Grants	CY Grants/Trans	Amended Budget	YTD Actual
	\$ (75,000.00)	The second second		\$ (75,000.00)	\$ (26,639.50
TOTAL REVENUE		\$		\$ (75,000.00)	\$ (26,639.50)
SALARIES AND WAGES	(10,000.00)	· · · · · · · · · · · · · · · · · · ·	s -	\$	
EMPLOYEE BENEFITS			\$	\$	
SERVICES AND SUPPLIES	\$ 236,502.34	\$ 82,963.34	\$ -	\$ 319,465.68	\$ 62,467.98
TOTAL EXPENDITURES	\$ 236,502.34	\$ 82,963.34	\$ LEAST VETT FOR THE REAL PROPERTY.	\$ 319,465.68	\$ 62,467.98
NUTRITION SERVICES DIVISION					
Accounts	Adopted Budget	PY Aug/Grants	CY Grants/Trans	Amended Budget	YTD Actual
INTERGOVERNMENTAL	\$ (674,357.00)		\$ (47,866.00)		
CHARGES FOR SERVICES	\$ (84,500.00)		\$	\$ (84,500.00)	
MISCELLANEOUS REVENUE	\$ (22,000.00)	AND THE RESIDENCE OF THE PARTY		\$ (23,115.00)	The second secon
TOTAL REVENUE	\$ (780,857.00)	\$ 1000	\$ (48,981.00)	\$ (829,838.00)	\$ (181,176.96)
SALARIES AND WAGES		2	\$ ·	\$	\$
EMPLOYEE BENEFITS	6 004.347.55	\$ 12.022.E4	0.50	\$ 1,018,347.74	\$ 480,208.54
	\$ 994,317.20	\$ 13,832.54		\$ 38,783.00	\$
CAPITAL OUTLAY TOTAL EXPENDITURES	\$ 994,317.20	\$ 13,832.54		\$ 1,057,130.74	\$ 480,208.54
ADULT DAY DIVISION					
Accounts	Adopted Budget	PY Aug/Grants	CY Grants/Trans	Amended Budget	YTD Actual
	\$ (42,010.00)	THE REAL PROPERTY AND ADDRESS OF THE PERSON NAMED IN COLUMN TWO IN COLUMN TO THE PERSON NAMED IN		\$ (42,010.00)	\$ (15,762.00
	112001		1000	\$ (243,000.00)	
NTERGOVERNMENTAL	\$ (243,000.00)		(225.00)	\$ (235.00)	\$ (515.00)
NTERGOVERNMENTAL CHARGES FOR SERVICES	\$ (243,000.00)	\$	\$ (235.00)	1/	
NTERGOVERNMENTAL CHARGES FOR SERVICES MISCELLANEOUS REVENUE	\$ (243,000.00) \$ (140,000.00)	\$	\$	\$ (140,000.00)	
NTERGOVERNMENTAL CHARGES FOR SERVICES MISCELLANEOUS REVENUE COUNTY GENERAL FUND		\$	\$	\$ (140,000.00) \$ (425,245.00)	\$ (173,898.09)
INTERGOVERNMENTAL CHARGES FOR SERVICES MISSCELLANEOUS REVENUE COUNTY GENERAL FUND TOTAL REVENUE	\$ (140,000.00)	\$ \$ \$	\$	\$ (140,000.00) \$ (425,245.00) \$ 405,259.85	\$ (173,898.09) \$ 205,238.76
INTERGOVERNMENTAL CHARGES FOR SERVICES MISCELLANEOUS REVENUE COUNTY GENERAL FUND	\$ (140,000.00) \$ (425,010.00) \$ 405,259.85 \$ 176,357.70	\$	\$ (235.00) \$.	\$ (140,000.00) \$ (425,245.00) \$ 405,259.85 \$ 176,357.70	\$ (173,898.09) \$ 205,238.76 \$ 88,373.58
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Washoe County Senior Services Advisory Board Meeting 2-4-2015

AGENDA ITEM 10

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AARP Backs Bipartisan Senate Bill Reauthorizing Older Americans Act

Press Center, January 28, 2015

CONTACT:

Greg Phillips, 202-434-2560, media@aarp.org

WASHINGTON, DC — Today AARP applauds the quick, bipartisan action on S. 192, the reauthorization of the Older Americans Act (OAA), introduced by <u>Senator Lamar Alexander</u> (R-TN) with Senators Richard Burr (R-NC), Patty Murray (D-WA), Bernie Sanders (I-VT), and also <u>cosponsored</u> by Senators Orrin Hatch (R-UT), John Isaakson (R-GA), and Lisa Murkowski (R-AK).

"AARP urges passage of this bipartisan bill reauthorizing the Older Americans Act," said AARP CEO Jo Ann Jenkins. "This bill is crucial to millions of vulnerable older Americans, providing vital programs and services as well as respite to family caregivers. AARP is pleased with its swift passage through the <u>Senate HELP</u> <u>Committee</u> and urges the full Senate to act shortly."

This carefully crafted legislation reflects over three years of bipartisan work reflected in a balanced, pragmatic approach to helping older Americans live longer with independence and dignity in their homes and communities.

The OAA reauthorization addresses AARP's core concern that any proposed legislation include protection of an essential array of programs and services that assist, protect, nourish and sustain the nation's older Americans, help them maximize their choices, and promote dignity and independence in a fiscally responsible way. The OAA helps save precious federal and state tax dollars by keeping older Americans out of nursing homes and preventing unnecessary hospital readmissions.

Since it was enacted into law in 1965, millions of our most vulnerable older Americans have relied on the services provided by the OAA for their health and economic security. These services help older Americans live independently by:

- Supporting nutrition programs, including Meals-on-Wheels;
- Providing home and community-based services, including preventive health services and transportation assistance;
- Assisting <u>family caregivers</u> with information and referral, counseling and respite care;
- · Preventing and detecting elder abuse; and
- Providing part-time community service employment and training, including the <u>Senior Community</u>
 <u>Employment Program (SCSEP)</u>, which has helped more than 1 million older Americans enter the
 workforce.

#

About AARP

AARP is a nonprofit, nonpartisan organization, with a membership of nearly 38 million, that helps people turn their goals and dreams into real possibilities, strengthens communities and fights for the issues that matter most to families such as healthcare, employment and income security, retirement planning, affordable utilities and protection from financial abuse. We advocate for individuals in the marketplace by selecting products and services of high quality and value to carry the AARP name as well as help our members obtain discounts on a wide range of products, travel, and services. A trusted source for lifestyle tips, news and educational information, AARP produces AARP The Magazine, the world's largest circulation magazine; AARP Bulletin; www.aarp.org; AARP TV & Radio; AARP Books; and AARP en Español, a Spanish-language website addressing the interests and needs of Hispanics. AARP does not endorse candidates for public office or make contributions to political campaigns or candidates. The AARP Foundation is an affiliated charity that provides security, protection, and empowerment to older persons in need with support from thousands of volunteers, donors, and sponsors. AARP has staffed offices in all 50 states, the District of Columbia, Puerto Rico, and the U.S. Virgin Islands. Learn more at www.aarp.org.

Washoe County Senior Services Advisory Board Meeting 2-4-2015

AGENDA ITEM 10

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Summary of Older Americans Act Reauthorization Act of 2015

This legislation reauthorizes the Older Americans Act of 1965, a federal law with longstanding bipartisan support. The law provides for the organization and delivery of social and nutrition services to older Americans and their caregivers.

This bill reauthorizes programs through 2018 and includes provisions that aim to protect vulnerable elders by strengthening the Long-Term Care Ombudsman program and existing elder abuse screening and prevention efforts. The bill also promotes the delivery of evidence-based programs, such as falls prevention and chronic disease self-management programs. The reauthorization streamlines federal level administration of programs, promotes the efficient and effective use of transportation services, and improves coordination between programs at the federal, state, and local levels.

Elder Abuse

- To be consistent with current law, updates definitions of "adult protective services," "abuse," "exploitation and financial exploitation," and "elder justice"
- Improves coordination of activities between the state and local aging offices
- Promotes best practices related to responding to elder abuse, neglect, and exploitation in long-term care facilities through the Administration on Aging
- Promotes States' submission of data concerning elder abuse
- Directs the Administration on Aging to include, as appropriate, training for States, area agencies on aging, and service providers on elder abuse prevention and screening

Long-Term Care Ombudsman Program

- Allows ombudsmen to serve all residents of long-term care facilities, regardless of age
- Ensures private, unimpeded access to the ombudsman for all residents of long-term care facilities
- Provides for identification and resolution of potential individual and organizational conflicts of interest
- Clarifies the role of ombudsman program in advocating for residents unable to communicate their wishes
- Clarifies that ombudsman may continue to serve residents transitioning from a long-term care facility to a home care setting
- Clarifies that the ombudsman office is a "health oversight agency" for purposes of HIPAA

Title III Grants to States Formula

- To account for geographic changes in the older population, adjusts the formula for the Title III programs of supportive services, congregate meals, home meals, and preventive services.
- The formula adjustment would update the 2006 hold harmless by using the most recent fiscal year funding as a baseline for an annual dynamic hold harmless, reflecting more recent population trends and ensuring funding better meets the nationwide needs of older adults while also protecting every state from experiencing a negative adjustment of no more than 1 percent a year. After three years, the formula's hold harmless would again freeze in place at FY2018 funding levels. Minimum grant states are not affected.

Transportation Services

• Directs the Assistant Secretary to provide information and technical assistance to States, area agencies on aging, and service providers on providing efficient, person-centered, transportation services, including across geographic boundaries

Aging and Disability Resource Centers (ADRCs)

- Improves ADRC coordination with area agencies on aging and other community-based entities in disseminating information regarding available home and community-based services for individuals who are at risk for, or currently residing in, institutional settings
- Updates the definition of "Aging and Disability Resource Center" to be consistent with current practice and current law, including an emphasis on independent living and home and community-based services

Health and Economic Welfare

Makes clear the Assistant Secretary's responsibilities related to the development of plans, program
implementation, and preparation and dissemination of education materials on the health and economic
welfare of older individuals

Senior Centers

- Directs the Assistant Secretary to provide information and technical assistance to support best practices for the modernization of multipurpose senior centers
- Encourages efforts to modernize multipurpose senior centers and promote intergenerational models

National Family Caregiver Support Program

• Clarifies current law that older adults caring for adult children with disabilities and older adults raising children under 18 are eligible to participate in the Family Caregiver Support Program

Preventing Fraud and Abuse

• Continues support for Medicare program integrity initiative that trains senior volunteers to prevent and identify healthcare fraud and abuse

Administration Demonstration Authority

• Streamlines the Act by eliminating three outdated demo programs: Computer Training, Multidisciplinary Centers and Multidisciplinary Systems, and Ombudsman and Advocacy Demonstration Projects

Home Care

• Directs the Assistant Secretary to develop a consumer-friendly tool, when feasible, to assist older individuals and their families in choosing home and community-based services

Emphasis on Evidence-based Programs

- Ensures that, in accordance with current practice, disease prevention and health promotion programs are "evidence-based"
- Encourages the delivery of falls prevention and chronic disease self-management programs
- Mentions the aging network may include oral health screenings among disease prevention and health promotion activities
- Directs the Assistant Secretary to provide technical assistance and share best practices to improve collaboration and coordination with health care entities, such as Federally Qualified Health Centers, to enhance care coordination for individuals with multiple chronic illnesses

Nutrition Services

- When feasible, encourages the use of locally grown foods in meals programs
- Clarifies that, as appropriate, supplemental foods may be part of a home delivered meal at the option of a nutrition services provider

Mental Health

• Updates references of mental health to also include "behavioral health," as appropriate to reflect the Aging Network's current practice

Holocaust Survivors

• Directs the Assistant Secretary to develop guidance on serving Holocaust survivors through Older Americans Act programs

Elder Issues in Nevada

Commission On Aging Legislative Subcommittee Information Sheet for Legislators 2015





AGING AND DISABILITY SERVICES DIVISION COMMISSION ON AGING



AGING AND DISABILITY SERVICES DIVISION COMMISSION ON AGING

Nevada Commission on Aging

Voting Members:

Stavros Anthony, Mayor Pro Tem Las Vegas

Lee Drizin,Esq. Member at Large

Lisa Krasner, Member at Large

Minddie Lloyd, Member at Large

Connie McMullen, Member at Large

John Rice, Councilman Elko

John Thurman, Member at Large

Patsy Waits, Commissioner Lander County The Nevada Commission on Aging Legislative Subcommittee is pleased to offer this overview and discussion of key issues impacting Nevada's senior community. The "Information Sheets" are intended as a starting point to frame a useful dialogue with legislators.

Commission on Aging Legislative Subcommittee 2015

Jeffrey Klein, Chair
Jane Gruner, Administrator, ADSD
Sally Ramm, Esq., Staff
Lisa Krasner
Senator Mark Manendo
Lucy Peres
Diane Ross
Grady Tarbutton
Dr. Larry Weiss

Nevada Commission on Aging

Non-Voting Members

Romaine Gilliland, Director, Department of Health and Human Services

Jane Gruner, Administrator, Aging and Disability Services Division

Mark A.Manendo, State Senator

Ellen Spiegel, State Assemblywoman

COMMISSION ON AGING LEGISLATIVE SUBCOMMITTEE ELDER ISSUES IN NEVADA OVERVIEW

Elder issues are issues for people of all ages; those who have lived long enough to be regarded as an elder, those who generously assist family, friends and neighbors and those who serve in the role of caregivers. When we provide for the safety and security of our elders, people of all ages and our community reap the benefits.

Nevada's aging population is one of the fastest growing in the nation. Today, 13% of the state's population is over age 65. Growth in the oldest segment, those 85+ is exponential, increasing by 78% over the last decade. This group is most likely to be in ill health and at-risk of institutional placement.

As we grow older, most individuals want to remain in their own homes. Individuals need a range of quality, affordable community-based services, operated using best practices, to reduce the risk of nursing home placement.

Helping individuals remain in their home is the most cost effective option for the individual and Nevada. On average, the same dollars will support 3 individuals with community-based services for every one person placed in a nursing home. Yet, our current system is inadequate to meet the existing and growing need for community-based services.

The issues identified in this paper focus on key areas of importance to support our elders in their quest to remain independent:

- o Behavioral and cognitive health
- o Budget
- Caregivers
- Legal rights
- o Medicaid
- o Nutrition
- Transportation
- o Workforce

Each section provides a brief overview of the issue, description of unmet needs and current requests for Legislative support.

The Commission on Aging Legislative Subcommittee encourages you to share your views on these issues and respectfully requests your support for the items identified in order to make a meaningful difference in our capacity to care for Nevada's elders.

BEHAVIORAL AND COGNITIVE HEALTH ISSUES

Understanding the Issue

- It is estimated that 20 25% of individuals age 65 and older have a mental health disorder
 - Mental health disorders affecting older adults include:
 - a) ongoing chronic psychiatric illnesses,
 - b) onset of illness with behavioral and/or cognitive symptoms such as dementia or stroke and
 - c) disorders due to age-related disability or caregiving such as depression or anxiety
- Based on 2013 Census estimates, 76,000 95,000 older Nevadans are affected by these disorders
- Nevada has one of the highest geriatric suicide rate in US. One in four attempted suicides will die. About 60% of senior suicides saw their doctor within a month of their death, 25% told someone they planed suicide, and over 20% experienced a traumatic event two weeks prior to their suicide.
- Risk factors are: diagnosis of new illness, chronic diseases, pain, disability, medication interactions, social isolation, poor nutrition, substance abuse, loss of loved one and caregiving
- Dementia affects 1 in 9 at age 65 and almost 50% of those age 85 and over

Unmet Needs

The current health care system is inadequate to effectively meet the specialized needs of older adults. This results in behavioral and cognitive health disorders going undiagnosed, underreported and untreated. Challenges to improving care include:

- Misconceptions about the normal aging process; lack of understanding of behavioral health issues experienced by older adults
- Insufficient community-based care options and inpatient facilities that specialize in care for older adults
- Training for medical professionals in diagnosis, treatment and behavior management
- Medication management of prescription and non-prescription drugs
- Education and training for caregivers including non-pharmacological behavior management
- Implementation of evidence-based models of care to address behavioral/cognitive symptoms

The implementation of specific steps to resolve these challenges will deliver more cost efficient quality care, reduce the use of emergency room services and decrease premature and out-of-state nursing home placements.

- 1) Identify state funding to support evidence-based community programs implemented statewide to aid caregivers caring for loved ones with behavioral and cognitive health issues. Funding would be utilized for:
 - a. Offering information and referral for all Nevada citizens
 - b. Training in selected evidence-based community programs for caregivers as well as social service providers, health care workers and family members
 - c. Creating a sliding fee scale to address affordability of mental health services
 - d. Providing a substitute caregiver to ensure safety of loved one while family attends training
 - e. Creating a sliding fee scale for respite services
- 2) Identify state funding to assist Aging and Disability Resource Centers and Nevada 2-1-1 to collaborate to create a "No Wrong Door" access to resources statewide.
- 3) Establish a higher rate of pay by Medicaid for nursing facilities prepared and trained to support individuals with behavioral health needs, allowing individuals to remain in their own communities rather than being placed in out-of-state facilities.
- 4) Provide education and training to health care professionals in screening, diagnosis, and treatment of behavioral and cognitive diseases prevalent in older adults.

BUDGET

Understanding the Issues

- Nevada has one of the fastest growing aging populations in the United States. In just ten years, the older population grew 49%. Growth in the oldest segment of the population, those 85+ increased by 78%; these are the most frail, often with complex medical and service needs.
- There are currently over 350,000 older adults, representing 13% of state's population. This number is expected to grow to over 1 million over the next 15 years.
- Funding for aging services has not kept pace with the growth in the older population and their increasingly complex needs.
- Access to community-based services such as adult day care, congregate and home-delivered meals and
 personal care along with support for caregivers has been demonstrated to prevent or delay more costly
 nursing home placement.
- The goal of aging services is to support at-risk older persons, helping them to live as independently as possible in the community. This person-centered approach effectively uses public dollars and respects the wishes of the individual to remain at home.

Unmet Needs

- Develop a basic infrastructure of services to address the current and future needs of the older population especially those who are most frail.
 - o Insufficient community-based care options and providers significantly increases the risk of premature, unnecessary and costly nursing home placement.
 - Reimbursement for Medicaid currently pays over \$200/day for basic care in a nursing home and \$40/day to adult day care services
- Utilize State funding in a cost-effective manner that reflects the wishes of older adults and their families
 - o On average, Medicaid funds can support almost 3 older adults with community-based services for every one person placed in a nursing home
 - There are an insufficient number of Home and Community-Based Waiver slots resulting in older adults, deemed at-risk of nursing home placement, to be placed on a waiting list for an indeterminate time
- Secure funding sources to support services for older adults at risk of nursing home placement
 - Service providers struggle to deliver services under current Medicaid reimbursement rates
 - Example: Reimbursement rate for adult day care (under medical model) is \$54.48 which includes 2.5 meals/day, nursing care, case management, personal care, medication management, therapeutic activities and support for families. Without an increase in the reimbursement rate for 12 years, there has been a decline in providers from 50 in 2008 to 18 in 2014.
 - o Expand the implementation of evidence-based programs to deliver quality, cost effective services

- 1) Support ADSD budget request
- 2) Support ADSD Strategic Plan Goals
 - a. "Increase funding and services to meet national or state accepted funding levels by service population"
 - i. "Establish acceptable reimbursement rates by service type"

 <u>Request</u>: Increase Medicaid and Home and Community-Based Waiver rates to provide more costeffective community-based care options and avoid more costly nursing home placement
 - ii. "Implement a strategic financing plan to secure resources for ADSD"

 Request: Appoint a special committee to develop a plan for alternate funding options to support existing aging services currently funded by Tobacco Settlement funds
 - iii. "Fund services and support for the coordination and delivery of services"

 Request: Increase the number of Home and Community-Based Waiver slots

CAREGIVERS

Understanding the Issue

Key statistics about family caregivers:

- There are an estimated 500,000 Nevadans providing approximately 400 million hours annually of unpaid care to help family, friends and neighbors live independently (AARP)
- Family caregivers provide the majority of unpaid care for their loved ones, at an estimated saving to Nevada taxpayers of \$4 billion per year (AARP)
- Up to 75% of caregivers are women; the majority are middle aged and employed outside of the home

Caregiving tasks:

- Personal care Includes tasks such as meal preparation, bathing and managing incontinence
- Medications Almost 50% of caregivers administer 5 to 9 prescriptions each day
- Complex medical tasks Includes wound care, intravenous medications and injections
- Coordination of care and services Managing medical care, transportation, home health, personal care, financial affairs and medical insurance

Impact on caregivers:

- Physical and emotional stress results in higher rates of depression, chronic illness and even death
- 75% of caregivers are employed outside of the home. Businesses are impacted by lost productivity due to employees fulfilling caregiving responsibilities
- Financial stress includes ongoing out-of-pocket expenses and missed time in the workplace or resignation from a job in order to provide full time care
- Nursing home placement is often the only option when caregivers can no longer manage caring for a loved one at home. Annually, nursing home costs can range from \$72,000 - \$85,000 and are paid by families, insurance, Medicaid and other government programs. The impact on Medicaid is significant as older adults utilize over half of all dollars spent even though they are a small percentage of the total enrolled.

Unmet Needs

- Education and training Family caregivers receive little or no training yet provide complex medical and nursing tasks for loved ones with chronic diseases and cognitive disorders, such as Alzheimer's
- Supportive services Home and community-based services, such as adult day care, personal care, respite
 and case management help family caregivers manage caregiving tasks, reducing burden and stress. For
 the projected demands of the growing senior population in Nevada, there is already a shortage of
 affordable, quality community-based service providers.
- Respite Defined as a break from the demands and responsibilities of caregiving

- 1) The CARE Act (BDR 512) The CARE Act will provide education and training so that caregivers can more safely help a loved one with medical needs. Key provisions include recording the name of the family caregiver upon admission to the hospital, notifying the caregiver of transfer or discharge and providing instructions for medical tasks to be performed at home.
- 2) Increase Home and Community-Based Waiver and COPE Slots These programs fund an array of home and community-based services to assist individuals, who qualify financially for Medicaid and are deemed at risk of nursing home placement, to remain in the community. Costs for these services are less than the costs for a nursing home placement. Additional slots are requested to provide services to those on current waiting lists and accommodate the increasing demand due to the growth in the aging population, especially in those 85 and older who are at greatest risk.

LEGAL RIGHTS

Understanding the issue

Elder abuse, neglect, exploitation and isolation are at an all-time high. It is estimated that one in 14 crimes against older people are reported. (National Center on Elder Abuse statistic) In fiscal year 2014, 6,033 reports of elder abuse were received by Elder Protective Services and law enforcement in Nevada. (EARS Report, Aging and Disability Services Division website).

Unmet Needs

- Prosecution of elder mistreatment cases is rare. It must be prosecuted as a felony and requires
 intentionality. If there was an opportunity to treat these crimes as negligent when intention cannot be
 proved, more perpetrators would be penalized.
- Guardianship laws in Nevada are revised in nearly every Legislative session, but there is still some work to
 be done to keep vulnerable people safe and well cared for when they become wards of the state and a
 guardian is appointed. Private professional guardians are not licensed in Nevada. They control millions of
 dollars in other peoples' money, and make all personal decisions for their wards, and there is little
 accountability for their actions
- There is some concern that an older person's guardian of choice is a family member that lives outside of Nevada. Current law prevents out-of-state residents from becoming the sole guardians of a Nevada resident. There are sound reasons for this law, but it does sometimes mean that a stranger becomes guardian over the estate and personal needs of an older person, which costs money, when a relative is willing to do whatever is necessary to be able to take care of their loved one.

- Change elder abuse laws to allow for misdemeanor charges as well as felony charges (BDR 566)
 This will increase the ability to enforce the elder abuse laws, making them more of a deterrent to people who would mistreat an older person.
- 2) Regulation of Persons Engaged in Business as Private Professional Guardians (BDR 434)
 This bill would require private professional guardians to become licensed through the Department of
 Business and Industry Financial Institutions Division. It provides for background checks, audits, and
 continuing accountability for an industry that controls the assets of people who are unable to care for
 themselves.
- 3) Allow out-of-state relatives to become sole guardians of Nevada Residents (BDR 531)

 This bill will address the issue of requiring courts to appoint guardians who are strangers to the wards and who must be paid from the ward's estates when it is documented that the ward wishes to have a relative who lives out of state be their guardian. Safeguards are built into the bill that requires the guardian to live in the same state as the ward within a specified amount of time.

MEDICAID

Understanding the Issue

- Over ten years (2002-2012), Nevada's older population has increased 49%
 (U.S. Department of Health and Human Service, A Profile of Older Americans 2013)
- Those 85+, the most likely to be frail and at-risk of nursing home placement, increased by 78% over the past decade (2010 Census Briefs)
- Many who have saved over a lifetime become impoverished paying for supportive services to remain at home
- Medicaid waivers are an essential, cost-effective tool to help low income individuals receive communitybased long term care services and avoid costly nursing home placement
 - Waivers, on average, support 3 individuals with community services for every one person placed in a nursing home
 - As an example, Nevada Medicaid pays over \$200 per day for custodial care in a skilled nursing facility; under the waiver program, Medicaid currently pays just \$55 per day for adult day care
- Those who qualify for Medicaid waivers must be deemed at-risk for nursing home placement
- Medicaid reimbursement rates for providers of community-based long term care services have not increased for the past 12 years
- Older adults often have complex medical needs and take an average 5 prescription medications plus overthe-counter medications. Medication mismanagement is a major cause of premature nursing home placement. Poor oral care can lead to life threatening illnesses and the inability to maintain adequate nutrition.

Unmet Needs

- As older adults become less able to carry out daily tasks safely, access to community-based long term care services such as adult day care, home delivered meals and personal care services can effectively delay the need for far more costly nursing home placement.
- There are an insufficient number of Medicaid waivers to meet the current demand for community-based long term care services.
- Nevada has a shortage of community-based long term care services, driven in large measure by low reimbursement rates to providers that have not been increased over the past 12 years.
 - Example: adult day care licenses have declined 64% from 50 to 18, over the past 6 years
- Medicaid does not currently cover routine dental care and medication management. Increasing access to
 these services for low income older adults would reduce the use of more costly care options including the
 emergency department, hospitalization and nursing home placement funded by Medicaid.

- 1) Increase the number of Medicaid waiver slots for community-based long term care services.
- 2) Increase the rate of reimbursement under Medicaid waivers. At a minimum, increases should be commensurate with cost of living adjustments (based on CPI) since the most recent adjustment.
- Amend Medicaid State Plan to include preventive dental care and medication management.

NUTRITION

Understanding the Issue

In Nevada, 18.8% of seniors are deemed food-insecure to some degree. Many depend on congregate meals served in Senior Centers or other community settings or home-delivered meals as their only reliable nutrition. These programs are primarily federally-funded and the funding is diminishing as the need grows.

Unmet Needs

- In 2011, nearly one in five seniors (18.8%) age 60 and over living in Nevada reported being "marginally food insecure" in a report called "The State of Senior Hunger in America 2011: An Annual Report." Nevada has the fourth highest percentage of seniors who are marginally food insecure.
- Since 2007, the number of seniors experiencing the threat of hunger has increased by 34%. Data suggests that the economic issues facing Americans has had more enduring effects relevant to food insecurity for older Americans.
- Federal funding for these programs is insufficient to meet the need, leaving many older Nevadans without the necessary nutrition to keep them healthy and involved in their lives and communities.

Current Request for Legislative Support

The federal budget has not addressed the growth of the over-60 population, leading to under-funding nutrition programs. Basic nutrition is essential to good health. Inattention to this need increases or exacerbates the challenges and costs of other health care programs such as Medicaid, Medicare, mental health, general medical services and education.

1) Funding for nutrition through the congregate and home-delivered meals programs should be included in the State budget to provide consistency in funding through supplementing the federal dollars.

TRANSPORTATION

Understanding the Issue

As the means by which people access the goods, services and social interactions necessary for an acceptable quality of life, transportation is the number one need as identified by older people in Nevada in the rural and urban areas. It is a critical component of the ability of people to maintain independent as they age in their communities. When they do not own a vehicle or aren't capable of driving, older people have to rely on friends, family or public transportation in order to buy groceries and medications, visit the doctor, attend to non-medical necessities or participate in social functions. A lack of transportation can lead to depression, isolation, loneliness, and self-neglect.

Unmet Needs

- The cost of public transportation, lengthy stops along the route or inaccessible bus stops are barriers to using existing transportation systems.
- As larger communities grow, the service areas of existing transportation services are not expanding to meet the needs of communities and health care facilities that are outside the transportation system's boundaries.
- Rural communities are losing (or never had) medical care facilities. There is a lack of affordable transportation from the rural communities to the nearest health care facilities and professionals.

- 1) Amend Nevada's Medicaid State Plan to include a non-medical transportation waiver, as other states have done.
- Provide resources for the formation and operation of transportation coalitions throughout Nevada to coordinate transportation resources so they can work collaboratively to address needs in multiple communities.

WORKFORCE

Understanding the Issue

There is a shortage of geriatric health care workers in Nevada, and it is one that could be disastrous for an already under-staffed health care system. Nevada's health care workforce has significantly lagged behind a decade of explosive population growth and the fastest aging senior segment in the U.S. From an economic standpoint, a well-developed workforce in geriatrics is a key to attracting businesses to Nevada. It will also help to alleviate unemployment to train people in a field where jobs are available.

Building a competent workforce with high satisfaction is important to keeping seniors in their homes instead of being institutionalized. It is key to providing quality health care services to people with chronic diseases.

Unmet Needs

- Nevada suffers from a shortage of:
 - Nurses Nurse Practitioners, Registered Nurses and Licensed Practical Nurses
 - o Primary Care Providers
 - o Geriatricians, Geriatric Pharmacists
 - o Therapists Physical, Occupational and Speech
 - Social Workers
- These professions require long and costly training.
- Certified Nursing Assistants are needed, and can be trained in a reasonable amount of time to meet a vital need. Long-term care facilities and in-home care providers rely heavily on CNAs to provide care.

- 1) Provide student loan relief to health care professionals and social workers who work in geriatrics in both the public and private sectors.
- Provide incentives and/or funding to community-based organizations to provide clinical training opportunities for Certified Nursing Assistants, community health workers, and student rotations for professionals.
- 3) Restore funding to the Geriatric Centers in the Nevada System of Higher Education and provide for graduate degrees in geriatrics in both health and social work.
- 4) Assure that Nevada is accessing available federal funds for creating and sustaining a medical community to serve older people.
- 5) Provide private business incentives and consistent regulations to encourage workforce development and career paths.



Please Join Us for Nevada Senior Issues Day February 9, 2015



Mevada's Commission on Aging

Mission Statement

The mission of the Governor's Commission on Aging is to facilitate and enhance the quality of life and services for all Nevada seniors through partnership with the Aging and Disability Services Division and other entities.

Vision Statement

Become a visible and informed organization, establish priority of needs for elder Nevadans, and advocate for programs and services to meet those needs through collaboration and education.



Event hosted by the Nevada Commission on Aging Legislative Sub-Committee in collaboration with Nevada Senior Services, AARP Nevada and Nevada Hand



Nevada Senior Issues Day Helping Seniors to Live with Independence and Dignity

A special opportunity to learn about key senior issues in Nevada and meet with community experts.

Schedule:

7:30 AM - 9:00 AM Continental Breakfast & Conversations
About Senior Issues

11:45 AM - 1:00 PM Lunch & Presentations

1:00 PM - 4:00 PM Conversations About Senior Issues



You are cordially invited to

Nevada Senior Issues Day

Monday, February 9, 2015

7:30 AM to 4:00 PM

Nevada Legislative Building

Room 3100

401 South Carson, Carson City, Nevada

For information please contact Susan Hirsch 702/648-3425 or shirsch@nevadaseniorservices.org

How to be an Effective Advocate Outside of Washington, DC

SHARE:

Print

Are you concerned about your AEQ (advocacy effectiveness quotient)? Do you want to become more effective in working for public policy changes?

If so, this piece is for you. Advocacy work that you do in your own community—week in and week out—is essential to creating positive change for seniors.

The best way to become an effective advocate is to build strong relationships with all three people who represent you in Washington, DC, and with their staff who cover aging issues. You want them to recognize your name and to trust the messages that you deliver.

Start Regular, Personal Communications

That means you should contact them every month or two, by email or telephone. Do not rely on snail mail; it takes three to four weeks to arrive in DC because of testing for dangerous enclosures.

Members of Congress expect to hear from their constituents on issues they are passionate about, so don't hesitate. <u>Use our look-up service</u> to find the names and contact information of your members of Congress.

Sometimes your messages will ask for something specific (e.g., a vote or co-sponsorship), but other times you should pass along information, ideas, and stories that you think will be helpful.

When you receive an alert from NCOA, please act promptly by sending emails as the alert requests, and personalize them with specifics relating to your experience and expertise related to the seniors in your community, rather than sending the sample without changes. Review additional suggestions we've compiled for writing Congress.

Get Tips to Connect

Here are some additional ways that you can influence your members of Congress:

- Write letters-to-the-editor about issues. Members of Congress always read the letters in their hometown newspapers. Editors like letters that respond to something that appeared recently in the paper. Keep your letter concise, approximately 150 words. Most newspapers prefer email submissions. Include your full name, address, phone number, and email. See a sample letter to the editor.
- Go to town hall meetings that your members of Congress hold and ask questions about senior issues. Or make an appointment to meet with your member of Congress in the local office. Don't forget the state and county fairs that politicians frequent on weekends and during the August Congressional recess. Tell about the potential impact locally of proposed legislation

(positive or negative), or tell about the ways that funding shortfalls have hurt the local service deliverers. Get nine tips to make the most of these events.

- Invite your members of Congress to your organization. If one accepts, you can show off your work, but also ask some direct questions about what they are doing in Congress that supports your work. Contact NCOA staff prior to the visit for possible questions and talking points. Get practical advice on how to invite an elected official to your next event.
- Build relationships with Congressional staff who work in the state or local offices (District Offices). They represent the member of Congress at local meetings and events, and serve as caseworkers to help constituents with federal programs and benefits. Invite them to regular meetings and events on your calendar, and let them know how you can help them serve the community. Then when the Senator or Representative needs to know how legislation might affect constituents, local staff will know who to turn to for input.
- Share information and ideas with others in your community who care about aging issues, perhaps starting or contributing to a list-serve on senior issues. Share the guidelines on this sheet.

Remember, you are building a relationship that may last for years, and that puts you in a valued position where a member of Congress trusts you and may seek out your help or opinion. Keep the lines of communication open and well-used.

If you meet with your member of Congress, please take a moment to <u>tell us how it went</u> by sending us a quick email. Your response will help us track our collective advocacy efforts.

Senate Moves Swiftly on OAA Reauthorization in Anniversary Year

SHARE:

Print

January 26, 2015

Email Congress

- Urge your lawmakers to support OAA reauthorization
- See which Senators are adding their support

On Jan. 28, the <u>Senate Health, Education, Labor and Pensions Committee</u> will take up a 3-year reauthorization of the Older Americans Act (OAA) as one of its first markups of the 114th Congress.

Chairman Alexander (R-TN) enlisted the support of Ranking Member Murray (D-WA) and Sens. Burr (R-NC) and Sanders (I-VT) for the Older Americans Act Reauthorization of 2015, which builds upon bipartisan legislation that the committee adopted in 2013.

NCOA has endorsed the legislation and urges the Committee to send it to the full Senate for consideration.

What's Included

The bill, S. 192, reflects a number of NCOA's OAA reauthorization priorities, including provisions that:

- Create new support for modernizing multipurpose senior centers
- Highlight the importance of addressing economic needs
- Require that health promotion and disease prevention initiatives be evidence-based
- Promote chronic disease self-management and falls prevention

NCOA also supports the bill's stronger elder justice and legal services provisions, needed clarity for caregiver support and Aging & Disability Resource Centers, and new opportunities for intergenerational shared sites. The bill also retains current language that does not place any limits on how much OAA appropriations can grow.

The legislation takes the same modest approach to OAA changes as with the 2013 bipartisan bill by scaling back language that appeared in earlier reauthorization measures.

For example, rather than authorizing a new stand-alone demonstration program to identify model senior center modernization approaches and provide training and technical assistance to help other centers adopt them, the bill simply gives the Assistant Secretary for Aging the authority to accomplish this with existing resources.

Also, instead of making "economic security" a goal of the OAA, the language clarifies that the Administration's duties include supporting research and implementation of programs that address the economic needs of older adults and creating and disseminating materials related to the economic welfare of seniors.

Changes to Note

There are two changes from the 2013 bill in S. 192 that are worth noting:

- 1. A revision in the federal-to-state formula for Title III funding is included.
- 2. Language to authorize a study on senior transportation was eliminated because that report was completed last year.

The <u>current Title III formula</u> makes allocations to states based on the size of their senior population. However, there is a "hold harmless" clause that ensures that no state receives less than its allocation in 2006.

S. 192 includes new hold harmless language, which states that for each of the next three years that OAA is authorized and the formula is adjusted to reflect changes in states' senior populations, every state is guaranteed to receive at least 99% of its Title III allocation from the previous year.

The committee makes clear in its <u>summary of the bill</u> that the intent is to protect states from losing more than 1% in each of the next three years, with no further adjustments until the OAA is reauthorized again. Also, small states known as "minimum states," which receive a guaranteed baseline amount, would not see any changes.

NCOA does not take positions on formula changes. But as deliberations on the hold harmless clause stalled reauthorization, it became clear that Senators needed to craft a compromise to help legislation advance.

Chairman Alexander has chosen to make OAA reauthorization a top priority this year, the 50th anniversary of the Act. He is doing so in a bipartisan manner that remains true to the history of this important legislation.

Our goal is for the legislation to move quickly to the Senate floor, and for the House to then take up and pass an identical bill.

Washoe County Senior Services Advisory Board Meeting 2-4-2015

AGENDA ITEM 10

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WASHOE COUNTY SENIOR SERVICES GRANT PERFORMANCE FY15

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	Congregate	Meals	Home Delivered	Meals		Second Home	Meals	Case Management		Homemaker		Rep Payee		Adult Day Care				ADRC			Legal Services		Ward Representation		Guardian Ad Litum		Legal Outreach		

**Legal Services Clients for July includes open cases carried over from previous FY

Washoe County Senior Services Advisory Board Meeting 2-4-2015

AGENDA ITEM 10

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STATE OF NEVADA A REPORT TO OUR CITIZENS

FOR FISCAL YEAR ENDED JUNE 30, 2014

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What's Next?....

THE NEVADA VISION.

Nevada's leaders will work to ensure that Nevadans achieve the level of success and prosperity they expect and deserve by continuing to diversify our economy and providing a quality education.

BATTLE BORN ** NEVADA PROUD th 150

Students of Lovelock Elementary School celebrating Nevada's Sesquicentennial.

PLANS FOR THE PUTURE

Ensure a Healthy Economy

- · Reform the State's tax structure
- Develop skilled workers
- Create quality, sustainable jobs

Provide Quality Education for all Nevadans

- Increase teacher salaries
- Increase per pupil expenditures
- Incentivize high school graduates to get additional education beyond high school

Continue to Diversify Nevada's Economy

- Increase partnering between businesses and our universities
- Explore new ideas for industries
- Attract and develop a trained workforce

DEMOGRAPHIC INFORMATION

	Calendar Year 2011	Calendar Year 2012	Calendar Year 2013
Population *	2,717,951	2,754,354	2,790,136
Per Capita Income *	\$37,445	\$39,229	\$39,235
Visitor Volume	51,500,481	52,299,113	52,098,287
	Fiscal Year 2012	Fiscal Year 2013	Fiscal Year 2014
Public School Enrollment	444,003	444,520	459,152
State Government Employees	25,372	25,184	26,303
Unemployment Rate	11.6%	9.6%	7.7%
Debt per Capita	\$1,257	\$1,145	\$1,288

^{*}Figures have been updated to reflect revised estimates for calendar years 2011, 2012.





NEVADA'S PROGRESS

IN FISCAL YEAR 2014

BUSINESS GROWTH

The most notable economic development project this year is the Tesla Gigafactory. It is estimated that the battery manufacturing facility will create 6,500 direct factory and administrative jobs over the next four years. In addition, direct construction jobs are expected to reach 3,000 per year and additional indirect jobs of 1,500 annually over the 2015 to 2017 period; however, these construction jobs are not permanent.

In December 2013, the FAA designated Nevada as one of six test sites for the integration of commercial applications of Unmanned Aerial Systems (UAS) into the National Air Space. Latest estimates show there could be an estimated \$2.5 billion in economic impact by the middle of the next decade. Currently, no jobs have been created in this emerging industry in Nevada.

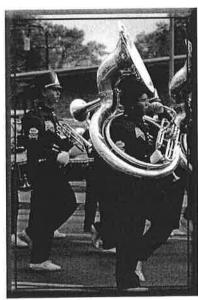
RENEWABLE ENERGY

Clean Energy investment in Nevada has accelerated rapidly in the past five years and is now well over a \$5 billion investment in Nevada. The Renewable Energy Tax Abatement program, which awards partial abatements for sales and use, and property taxes to eligible renewable energy producers, has been a crucial tool in attracting investment in Nevada. Nevada's investment of \$500 million in tax abatements has attracted cumulative capital investments for clean energy projects totaling \$5.5 billion since 2010. These clean energy projects produce 1,500 megawatts of clean energy and have employed nearly 3,000 construction workers throughout the State.

EDUCATION

The 2013 Legislative Session enacted various statutes affecting Pre-K through 12th grade education. Focusing on quality education for our children remains a vital priority for Nevada. Necessary steps are being taken to ensure that every child in Nevada is able to read by third grade. Early childhood education is the key to our students graduating from high school and achieving long-term success. In the 2013 Legislative Session, an additional \$30 million was allocated over the biennium toward all-day kindergarten for the State's most at-risk schools. In addition, funding levels have been adjusted to reduce class sizes for first through third grades. The first ever statewide program to address the needs of English Language Learners in our State provides \$50 million in funding over the biennium as well. Nevada was recently awarded a \$6.4 million preschool development grant from the U.S. Departments of Education and Health and Human Services Preschool Development Grants program. There is the potential for this grant allotment to exceed \$43 million over the next four years.

The Nevada System of Higher Education was awarded \$500,000 through the Nevada NASA Space Grant Consortium to create a new program that will change the way students learn, and to plant the seed for the education system to help staff space and science related industries in Nevada.



Carson High School Band at the Nevada Day Parade

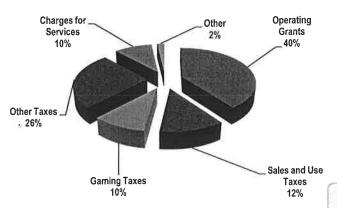
PERFORMANCE MEASURE HIGHLIGHTS

	Fiscal Year 2012	Fiscal Year 2013	Fiscal Year 2014	Goal
Highway fatalities	255	254	260	0
Percent of roads rehabilitated annually	3.6%	0.7%	1.0%	7.2%
Nevada's national ranking of freeway miles congested	40 th	41 st	45 th	25 th
Graduation rates (Nevada Report Card)	61.9%	63.1%	70.7%	80.8%
Expenditures per pupil (Nevada Report Card)	\$7,716	\$8,353	\$8,274	\$9,424

NEVADA'S FINANCES

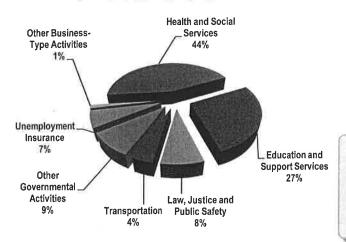
REVENUES AND EXPENSES

PRIMARY GOVERNMENT SOURCES OF REVENUE



Please see CAFR MDSA for detail of increases S decreases in revenues and expenses.

PRIMARY GOVERNMENT FUNCTIONAL EXPENSES



FY 2014 REVENUES BY SOURCE

Revenues by Source Expressed in Thousands	2013 Revenue	2014 Revenue	% Change
Operating Grants	\$ 3,640,272	\$ 3,613,035	-0.75%
Sales and Use Taxes	1,027,124	1,085,656	5.70%
Gaming Taxes	901,085	922,999	2.43%
Other Taxes	2,375,353	2,344,662	-1.29%
Charges for Services	884,753	888,450	0.42%
Other	288,628	175,109	-39.33%
Total Revenues	\$ 9,117,215	\$ 9,029,911	-0.96%

Notes

Operating Grants – Primarily federal grants for various state programs.

Other Taxes – Includes modified business tax, insurance premium tax, motor and special fuel tax, property and transfer tax.

Charges for Services - Includes inspections, licensing, permits, and fees.

FY 2014 EXPENSES BY FUNCTION

Expenses by Function Expressed in Thousands	2013 Expenses	2014 Expenses	% Change
Health and Social Services	\$ 3,464,334	\$ 3,784,055	9.23%
Education and Support Services	2,290,844	2,326,498	1.56%
Law, Justice and Public Safety	657,728	662,330	0.70%
Transportation	505,354	327,519	-35.19%
Other Governmental Activities	557,551	768,202	37.78%
Unemployment Insurance	867,600	552,246	-36.35%
Other Business-Type Activities	129,062	120,775	-6.42%
Total Expenses	\$ 8,472,473	\$ 8,541,625	0.82%

Notes

Other Governmental Activities – Regulation of business, recreation and resource development, general government.

Other Business-Type Activities – Housing, workers' compensation, higher education tuition.

An independent audit of the State's financial statements resulted in an unmodified audit opinion. Financial information in this report is derived from Generally Accepted Accounting Principles (GAAP) data in the State's Comprehensive Annual Financial Report (CAFR).



WHAT'S NEXT?

FUTURE CHALLENGES AND ECONOMIC OUTLOOK

ECONOMIC CHALLENGES

Since the end of the Great Recession, Nevada has continued to lag behind the majority of the country in achieving full economic recovery. Our gaming taxes and sales taxes remain below pre-recession levels by 10.3% and 5.6% respectively and are only growing modestly. Nevada's housing market has been showing signs of recovery but it still has a high foreclosure rate.

For this fiscal year, gaming taxes reported by the primary government were \$923 million, which was a 2.4% increase over 2013, and sales taxes were \$1.1 billion, which was a 5.7% increase. Statewide visitor volume is up 1.5% over last year but remains 3.1% below pre-recession levels. However, in Las Vegas, visitor volume for 2013 was above pre-recession levels by 1.2%. In the south, there was an increase of 1.4% in hotel occupancy, and average daily room rates increased 4.3% compared to fiscal year 2013.

Nevada is continuing to experience modest, steady job growth. The unemployment rate in Nevada was 7.7% in June 2014, compared to the national rate of 6.1%. This is down from last year's rate of 9.6%. Nevada continues, however, to have one of the highest unemployment rates in the nation. During 2015, Nevada is expected to add 32,000 new jobs, compared to only 29,000 jobs added in 2014. The State's largest industry, hospitality and food service, is estimated to add 6,000 additional jobs in 2014 and 2015. Employment growth in the mining industry is estimated to remain relatively flat for the next two years. Although job gains have accelerated across the State, employment is still 10% below peak levels in 2007 and is expected to remain below 2007 levels for several more years.

Nevada spent over \$2 billion on Medicaid in 2014, or 29% of all General Fund expenditures. Caseloads grew by 25.2% to 380,051. This represents about 13.8% of the State's population, and that figure is expected to top 555,000 by 2015. With the rollout of the Affordable Care Act, Nevada has significantly reduced the number of uninsured in the State. The current estimate of uninsured Nevadans is about 11% of the population. This is down from the 2013 estimate of 21%. The estimated percentage of uninsured children under 18 decreased from 15% in 2013 to 2% currently.

EDUCATION

Despite continued efforts for improvements in key areas, Nevada's schools continue to rank among the lowest performing in the nation. However, there have been some improvements over the last year. The Nevada Department of Education reported that 71% of Nevada's high school students graduated in four years in the 2013 class. In Clark County, that rate was slightly higher at 72%. Nevada struggles to find adequate funding for schools. An additional \$71 million is needed for the current school year for increased enrollment. If Nevada is going to diversify its economy, it will need to have an educated work force.

INTERGOVERNMENTAL FINANCIAL DEPENDENCY AND RELATED RISKS

These numbers show Nevada's dependence on federal funds for fiscal year 2014:

- Federal grants to Nevada: \$4 billion or 44% of all revenues to the State
- Federal grants to Nevada for local governments: \$742 million of which 39% went for Pre-K-12 Education and 43% for Public Welfare
- Major contributing Federal agencies: Health and Human Services 45%, Agriculture 19%, Labor 16%, Transportation 9% and Education 8%
- 2013 to 2014 decrease in Federal grants to Nevada: \$12 million
- Amount of investments in Federal securities: \$8,997,434,374

