

ADULT DAY CARE ADVISORY COUNCIL MEETING

Date: August 14, 2014

Time: 9 AM

MEETING LOCATIONS

Videoconference to:

Division of Public and Behavioral Health
Health Care Quality & Compliance
727 Fairview Drive, Suite E
Carson City, Nevada 89701

Division of Public and Behavioral Health
Health Care Quality & Compliance
4220 South Maryland Parkway, Building D, Suite 810
Las Vegas, Nevada 89119

CALL IN NUMBER: 888-398-2342 ACCESS CODE 1530727

NOTE: SOME ADVISORY COUNCIL MEMBERS MAY ATTEND BY TELECONFERENCE

AGENDA ITEMS MAY BE TAKEN OUT OF ORDER, COMBINED FOR CONSIDERATION, AND/OR REMOVED FROM THE AGENDA AT THE CHAIRPERSON'S DISCRETION

Las Vegas attendees:

Christopher Vito, Chair
Kathy Posada, Baby Boomer's Activities Club, LLC
Heather Lankford, Willow Creek Memory Care West
Helene Reilly, Nevada Adult Day Care Centers
Jeffrey Klein, Nevada Senior Services, Inc.

Donna McCafferty, HCQC
Patricia Elkins, HCQC
Julie D. Bell, HCQC
Heather Korbulik
Terry Stricker, Aging and Disability Services
Suzie Cortez, Nevada Adult Day Health Care Centers
Christina Vito, Nevada Adult Day Care Centers

Carson City:

Chuck Damon, Nevada Medicaid, Division of Health Care Financing and Policy (DHCFP)
Leslie Bittleston, Nevada Medicaid, DHCFP
Jennifer Frischmann, Nevada Medicaid, DHCFP
Leticia Metherell, HCQC
Nenita Wasserman, HCQC

Teleconference:

Jeff Dold, More to Life
Patricia Capello, Washoe County Senior Services
Diane Ross, The Continuum
Lily Chin, New Life Adult Day Health Care Center
Christina Vito Nevada Adult Day Health Care Center
Susie Cortez, Nevada Adult Day Care Centers
Helene Riley, Nevada Adult Day Care Centers

Approval of minutes from the May 8, 2014 meeting.

JEFFERY KLEIN MOVED TO APPROVE THE MEETING MINUTES OF MAY 8, 2014. KATHY POSADA SECONDED THE MOTION. MOTION PASSED UNANIMOUSLY.

Bureau Topics – *Julie D. Bell, MED, Health Facilities Inspection Manager, Health Care Quality and Compliance (HCQC)*

Diabetic Testing/Monitoring, CLIA Certification – Medical Laboratories Policies of Medicaid and the Bureau of Health Care Quality and Compliance; how it relates to Diabetic Testing, Care, CLIA Certification and reimbursement to the Provider or a Potential Alternative – Medical Laboratories

Leticia Metherell explained CLIA waiver certification is a federal requirement to do glucose monitoring which is \$150 fee for two years.

She reviewed several scenarios:

1. If the individuals do their own testing, then you don't need anything else.
2. If your staff is a nurse, they would need CLIA certificate, disclosure of ownership, exempt laboratory license which is \$500 initially, renewals is \$300 for a two year period.
3. If the individual is qualified under statute, that person would not need additional certification. Cost for CLIA waiver, cost for exempt laboratory license.
4. Staff performing testing that is not a nurse or health care professionals, need Clia waiver, exempt laboratory and the individual needs to become a laboratory assistant.

Links applications for this are as follows:

CLIA Application: <http://www.cms.gov/Medicare/CMS-Forms/CMS-Forms/downloads/cms116.pdf>

CLIA Ownership form instructions:

<http://health.nv.gov/HCQC/Forms/2014/InstructionsCompletingDisclosureOwnershipControlInterestStatementForm1513.pdf>

CLIA ownership form:

<http://health.nv.gov/HCQC/Forms/2014/InstructionsCompletingDisclosureOwnershipControlInterestStatementForm1513.pdf>

Jennifer Frischmann, Chief, Long Term Support Services, Medicaid said your rate for adult day health care includes skilled nursing intervention so that glucose testing is part of your existing rate. The rate for adult day health care is \$54.48, the daily rate for daily adult day care with no health component is \$40 per diem rate.

Chris Vito asked if the Medicaid would be open to reimbursing the CLIA fees. Jennifer Frischmann said that they could not reimburse for that fee.

Leticia Metherell noted that regarding the medical director component, when there is an exempt laboratory, the medical director must be an MD, DO, podiatrist or chiropractor.

Discussion regarding the topic of medical marijuana

A hand out title "Medical Marijuana in Post Acute Care" was provided the members. It described Nevada's Medical Marijuana law, patient rights in post-acute care, issues related to the Centers for Medicare and Medicaid Services and policy considerations.

In response to questions regarding nursing regulations regarding medical marijuana, Julie D. Bell said that there were no guidelines at this time. She said she would invite someone from the Nursing Board to cover this topic at the next meeting. The bureau wants to work collaboratively with the communities.

Chris Vito said if there is a facility that allows medical marijuana, are there specific guidelines. Julie D. Bell said that they look at facility policy and there is work to be done on the state's end as an enforcement policy. There are more questions at this time than answers.

Julie D. Bell explained that medical marijuana is usually not a prescription it is a recommendation as to how it is managed and what it looks like.

Jeff Klein asked what guidance is there for a nurse who is concerned about their license. Julie Bell responded that someone from the nursing board will be at the next meeting in November to review any questions regarding this.

Top ten tags for facilities for adult day care. –

Tags are very low for the adult day care facilities. The tag summary report showed the following as the top tags:

153	Required Services
170	Service of Food; Dietary Consultants
056	Director and Employees
0158	Housekeeping and Maintenance
057	Director and Employees
088	Files Concerning Employees
093	Files Concerning Employees
163	Administration of Medication

Partnerships in training – development of staff training programs and external provider education.

This is a follow up item. Don Sampson, is the staff training person who works on training programs for providers as an operation and for the bureau staff.

Update on any new Medicaid items relating to adult day care facilities.

Home and Community Based Waivers.

Leslie Bittleston, Waivers Unit Supervisor, Medicaid requested that her office (Medicaid) be included on all emails regarding these meetings. She stated that the federal government came up with some new regulations this year that have to do with Home and Community based setting facilities. The state has to develop a plan of how they will implement those new regulations going forward. The state has a maximum of five years to implement these regulations. By March 2015, they have to submit a plan which is called a "transition plan" to the federal government of how these will be implemented into our system. They have drafted a draft transition plan to be presented, Tuesday, August 19, 2014, 9 a.m. - 12 noon at the Legislative Building in Carson City and Grant Sawyer State Office building in Las Vegas. Information is available at DHCFP.nv.gov under public notices.

Continuing, Leslie Bittleston said that one of the biggest changes that affect adult day care providers is the implementation of person center planning will absolutely effect provider agencies. The federal government says that a conflict of interest has to be removed. Currently, providers are doing those service plans, it needs to be brought in house within the state doing the service plan of care. In order to implement this, the state will try to request more staff to be located in the Medicaid district offices who will be responsible for doing the basic

assessment and service plan for all individuals receiving adult day health care. The current adult day health care does not have a case management at the moment.

Leslie Bittleston said that the case manager will be facilitating this entire process that works for the Medicaid agency. She noted it will be a team approach that includes the provider.

Chris Vito commented that when the plan of care is decided, he hoped that the case worker would be aware of what services the adult day care services do or do not provide.

Jeff Klein said that there has been a positive experience with the DRC side of the process. Leslie Bittleston commented that they are working carefully and modeling after the DRC model which has been in place for the past 15 year for home and community based waiver for about 15 years. She commented that they are in the planning stages of this and welcome comment from the public.

Jeff Klein said that for the federal regulations, his understanding is that any hospital or on campus would be forbidden under these regulations. It would include skilled nursing facilities and the intellectually challenged community. If they are going to be forbidden, then HCQC needs to work accordingly. These people need to be notified.

Jennifer Frischmann said that was correct and that these facilities can be built but Medicaid will not be able to reimburse. She and Leslie Bittleston had visited six adult day care facilities that were not aware of the new regulations.

Leslie Bittleston updated the group on an additional issue. She said that they wanted to provide some clarification on the per diem rate and unit rate. Medicaid has submitted a draft web announcement which will be coming out shortly. She read the draft into the record to give everyone a heads up regarding this issue.

“Providers are responsible for requesting per diem or unit rate. You can have both the per diem and the unit rate but you cannot have both on the same day. If you are using the per diem rate, and someone leaves early, you cannot change it if someone leaves early to units. The direction to the adult day care community is to request the per diem rate if the individual is to be present full time. If absences become more frequent then change those prior authorizations to units. What they mean by more frequent, or the needs of the recipient change, the change to the unit rate may be made if the attendance is less than six hours a day within a ten day two week period.

Leticia Metherell updated everyone on the Nevada Automated Background Check System (NABS). Currently, HCQC is in a pilot stage and working on technical issues. To prepare for that, everyone needs to be trained on how to use the system. Trainings are the third Tuesday of every month. She recommended that everyone take the September 16th training which can be done from a webinar, per facility, so your facility can conduct a background check. She noted that you can have as many employees as you want to participate. One person participate per facility is required to have this training. Once you are in the system, you will be notified by an email. Once you are notified, you cannot do it the old way. It is very important to have your correct email on file. If you have a registration sheet, please submit to us. Please use Lifescan to fingerprint your employees. If everyone has not received a registration sheet, please let us know.

Industry Updates - *Chris Vito, Chairperson*

Discuss the future of the “possible” role and type of care adult day care facilities will be expected to provide.

Jeff Klein said there will be a slow transition which will involve different facilities, however, that said with the medical system they are seeing more acute care needed and quicker discharges. People are being discharged from the health care community, disconnected, front line adult day care community, receiving more disabled, more acute patients. The evolution of our industry will be to increase the width and depth of what services are provided. A bill that would gain adult day care status as a provider for the post acute population under Medicare is needed. He thanked Leslie to be part of the email distribution list, Chuck and Jennifer for attending and participating.

Leslie Bittleston said she appreciated the staffing ratios and feedback on to justify rate increase.

Public Comment (No action may be taken on a matter raised under this item of the agenda until the matter itself has been specifically included on an agenda as an item upon which action will be taken.)

There was no public comment

Adjournment.

There being no further business before the committee, the meeting adjourned at 11:30 a.m.

Respectfully submitted,

Nenita Wasserman