

**Division of Public and Behavioral Health  
Homes for Individual Residential Care Advisory Council Meeting  
SUMMARY MEETING MINUTES  
Date: August 11, 2015  
Time: 2 PM**

**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, Bldg.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

**HIRC Attendees:**

Phil Glessner, Co-Chair (Las Vegas)  
Dorothy Domingo, Compassionate Residential Care Home, LLC (Las Vegas)  
Emelita Tugas, Washington Senior Home Care (Las Vegas)

**Carson City attendees:**

M. Jeanne Hesterlee, HCQC

**Teleconference attendees:**

Leslie Bittleston, DHCFP  
Heather Korbolic, State Long Care Term Ombudsman  
Paula Bosler, Veterans Administration  
Julie D. Bell, HCQC (teleconference)

**Excused:**

Jaqui La Voie, La Casa De La Voie  
Beatrice Mercado, Co-Chair  
Sharon Leffingwell

Phil Glessner called the meeting to order and announced there was a quorum present.

**Approval of minutes from the May 12, 2015 meeting.** Phil Glessner, *Co-Chair*

**DOROTHY DOMINGO MOVED TO APPROVE THE MEETING MINUTES OF MAY 12, 2015. THE MOTION WAS SECONDED BY EMELITA TUGAS. MEETING MINUTES WERE APPROVED UNANIMOUSLY.**

**Bureau Topics – Julie D. Bell, Health Care Quality and Compliance**

The top ten tags for homes for individual residential care were reviewed by Julie Bell.

*0050 -Tuberculosis*  
*0065- Employee Background Check Requirements*  
*0030- Safety and Sanitation – Home Clean; Hazard Free*  
*0055- Tuberculosis Residents*  
*0066 - Training to recognize and prevent abuse*  
*0019 - Director Duties No FA/CPR*  
*0999 - Final Comments*  
*0034 – Safety and Sanitation – Food Preparation*  
*0060 – Ultimate User Agreement*  
*0044 – Records of Residents – Copy of physical*

**General Discussion of Medical Marijuana topics related to homes for individual residential care; Julie D. Bell, HCQC**

Julie D. Bell noted there is not a specific person to give updates on this topic. She asked if the group would like to keep this topic for future agendas.

After some discussion, the advisory council decided to remove the item from the agenda. If questions come up related to medical marijuana, it can be put back on the agenda. Advisory council members may contact Julie D. Bell at [jdbell@health.nv.gov](mailto:jdbell@health.nv.gov) with their specific questions and any other topics related to homes with individual residential care.

**Update on Centers for Medicare and Medicaid Services (CMS) and discussion if HIRC's still want to be considered potential Medicaid providers.**

Leslie Bittleston explained that she has been giving updates on what constitutes a residential setting, and has heard back from Centers for Medicare and Medicaid Services (CMS). The CMS has gotten back to Division of Health Care Financing and Policy (DHCFP) and posed a couple of questions. Two of the main questions was how well was the public informed of the public meetings. Secondly, they asked if they were doing an overarching in person psyche review. She said that the answer to that was yes and that process begins next week. Recently, the topic of homes for individual residential care (HIRC) came up. At the last meeting she attended, she provided a lot of information to the advisory council as to what is covered in a HIRC. She noted that room and board is not covered and it does not included skilled services to patients. She asked if the HIRC facilities were still interested to be Medicaid providers. She said she did not want to pursue that HIRC's become Medicaid providers if there was not any interest.

Phil Glessner said that he made that comment at the last meeting that it was not feasible for HIRCs to be Medicaid providers. He said that was his personal opinion but you may want to ask the other members their opinion is also.

Dorothy Domingo said she could talk with ECHO so that they could give their own opinion. She requested that Leslie Bittleston make a formal presentation to the ECHO group that is made up with directors and owners of HIRC facilities.

Leslie Bittleston asked if the majority of the HIRC providers are in the Las Vegas area. Dorothy Domingo said that was correct. Mrs. Bittleston explained the training for the caregivers and the training component is not completely outlined like the residential facilities group. She said that there is a skilled component that the HIRCs are performing that is not part of the Medicaid waiver. If HIRCs are considered it is a completely for unskilled services. She continued and said that the rates are based on an unskilled service. If there is a skilled service that would be a different component.

Leslie Bittleston said some of the HIRCs said they were helping with the glucose testing and higher skilled functions and having home health come out and train to do those services. Julie D. Bell said that the caregiver cannot do a blood glucose service in a HIRC. If someone needs skilled services, home health should go in and provide those services.

Jeanne Hesterlee noted that at the last meeting there was a discussion about the requirement of a laboratory license which requires a director. There are regulations that are being worked on right now to allow a licensed nurse to be a laboratory director so that they can do those types of test. Those regulations have not been completed and are not in place yet.

Leslie Bittleston said so what she was hearing that services provided by HIRCs are not skilled nursing. The other concern was the training piece which is something that can be discussed going forward. At this point there is no regulation regarding med management.

Julie D. Bell said that HCQC does look at med management for residential facilities for groups.

In response to Leslie Bittleston regarding if someone gets the wrong medication, is that something HCQC would look at, Julie D. Bell said that yes. Leslie Bittleston said that CMS does require a lot of assurances for safety and welfare which includes medication management.

Going forward, Leslie Bittleston said if Dorothy Domingo would like to schedule a meeting with ECHO she would be happy to make a presentation to providers to see if they are interested in being a Medicaid provider.

**Industry Updates – Beatrice Mercado**  
**Top three challenges facing the industry –**

There was no discussion under this item.

**Successes deserving recognition** – Phil Glessner said that Senate Bill 146 that mirrored the federal law and did include a provision for not paying caregivers for sleep time. That part was intact but was not entirely passed as they hoped at the last session of the legislature.

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 discussion under the public comment section of the agenda.

**Adjournment.**

Meeting adjourned at 2:44 p.m

Submitted to the full HIRC advisory council for approval at the November 10, 2015 meeting for approval.