

**MINUTES OF THE MEETING OF THE  
ASSEMBLY COMMITTEE ON WAYS AND MEANS  
AND  
SENATE COMMITTEE ON FINANCE  
SUBCOMMITTEES ON HUMAN SERVICES**

**Eighty-First Session  
April 28, 2021**

The joint meeting of the Assembly Committee on Ways and Means and Senate Committee on Finance Subcommittees on Human Services was called to order by Chair Daniele Monroe-Moreno at 8:06 a.m. on Wednesday, April 28, 2021, Online and in Room 3137 of the Legislative Building, 401 South Carson Street, Carson City, Nevada. Copies of the minutes, including the Agenda ([Exhibit A](#)), the Attendance Roster ([Exhibit B](#)), and other substantive exhibits, are available and on file in the Research Library of the Legislative Counsel Bureau and on the Nevada Legislature's website at [www.leg.state.nv.us/App/NELIS/REL/81st2021](http://www.leg.state.nv.us/App/NELIS/REL/81st2021).

**ASSEMBLY SUBCOMMITTEE MEMBERS PRESENT:**

Assemblywoman Daniele Monroe-Moreno, Chair  
Assemblywoman Teresa Benitez-Thompson, Vice Chair  
Assemblywoman Maggie Carlton  
Assemblyman Jason Frierson  
Assemblyman Tom Roberts  
Assemblywoman Robin L. Titus  
Assemblywoman Jill Tolles  
Assemblyman Howard Watts

**SENATE SUBCOMMITTEE MEMBERS PRESENT:**

Senator Julia Ratti, Chair  
Senator Nicole J. Cannizzaro  
Senator Marilyn Dondero Loop  
Senator Scott Hammond  
Senator Ben Kieckhefer

**SUBCOMMITTEE MEMBERS ABSENT:**

None

**GUEST LEGISLATORS PRESENT:**

None



**STAFF MEMBERS PRESENT:**

Brody Leiser, Principal Deputy Fiscal Analyst  
Alex Haartz, Principal Deputy Fiscal Analyst  
Kimbra Ellsworth, Program Analyst  
Mary O'Hair, Committee Manager  
Janice Wright, Committee Secretary  
Betnimra Torres Perez, Committee Assistant

**OTHERS PRESENT:**

Tiffany Tyler-Garner, Executive Director, Children's Advocacy Alliance  
Lisa Foster, representing the State of Nevada Association of Providers

**Chair Monroe-Moreno:**

[Roll was called. The Subcommittees' rules and protocols were explained.] We will be hearing a number of budget closings from the Office of the Governor and the Aging and Disability Services Division, Department of Health and Human Services. We will move to our first budget, which will be the Patient Protection Commission.

**HEALTH AND HUMAN SERVICES  
AGING AND DISABILITY SERVICES  
PATIENT PROTECTION COMMISSION (101-3055)  
BUDGET PAGE DHHS-ADSD-91**

**Kimbra Ellsworth, Program Analyst:**

The Patient Protection Commission was created to systematically review issues related to the health care needs of Nevada residents and the accessibility, affordability, and quality of health care in the state. This budget is funded with State General Fund appropriations. The budget was heard on March 5, 2021. The Governor's recommended budget includes the transfer of the Patient Protection Commission from the Office of the Governor's budget to the Aging and Disability Services Division (ADSD), Department of Health and Human Services as a new standalone budget. The duties of the Patient Protection Commission include examining the system for regulating health care, examining the cost of health care, reviewing the availability of providers and health benefit plans, researching possible policy changes, and other duties to improve health care for all residents in the state.

During the March 5, 2021, budget hearing, the Patient Protection Commission indicated that having access to more resources, including patient advocacy services provided through the ADSD, would benefit the work of the Commission. The Subcommittees alternatively discussed the possibility of placing the Patient Protection Commission within the Office of the Director of the Department of Health and Human Services, where the Office of Analytics is located, as opposed to the ADSD, to facilitate access to data, which could support the

high-level review of health care needs in the state with which the Commission is tasked. Assembly Bill 348, currently referred to the Assembly Committee on Ways and Means, would alternatively place the Patient Protection Commission within the Office of the Director of the Department of Health and Human Services.

**Assembly Bill 348: Revises provisions relating to the Patient Protection Commission. (BDR 40-497)**

The options for the Subcommittees to consider are on page 6 [[Exhibit C](#)].

- A. Recommend approval of the Governor's recommendation to transfer the Patient Protection Commission from the Office of the Governor to the Aging and Disability Services Division in a new standalone budget, contingent upon enabling legislation.
- B. Recommend approval of transferring the Patient Protection Commission from the Office of the Governor to the Office of the Director of the Department of Health and Human Services in a new standalone budget, contingent upon enabling legislation.

**Chair Monroe-Moreno:**

Members, do you have any questions or comments? [There were none.] Members, we will have a one-minute recess.

[Meeting recessed at 8:11 a.m.]

[Meeting reconvened at 8:15 a.m.]

We are still working on the Patient Protection Commission budget on page 6. We have heard the options from the Fiscal Analysis Division. Are there any comments or questions before I take a motion? [There were none.] I will entertain a motion.

SENATOR RATTI MOVED TO RECOMMEND OPTION B TO APPROVE TRANSFERRING THE PATIENT PROTECTION COMMISSION FROM THE OFFICE OF THE GOVERNOR TO THE OFFICE OF THE DIRECTOR OF THE DEPARTMENT OF HEALTH AND HUMAN SERVICES IN A NEW STANDALONE BUDGET, CONTINGENT UPON ENABLING LEGISLATION.

ASSEMBLYWOMAN CARLTON SECONDED THE MOTION.

Is there any discussion on the motion?

**Senator Kieckhefer:**

I will support the motion. I certainly think the Office of the Director is a much more appropriate place than the ADSD. I never really liked that, but I do not want it to be a

Assembly Committee on Ways and Means  
Senate Committee on Finance  
Subcommittees on Human Services  
April 28, 2021  
Page 4

commitment to vote for the bill that is referenced. I might have a couple of other issues with that piece of legislation. I think it is a much more natural home for the Commission.

**Chair Monroe-Moreno:**

Are there any other comments on the motion? [There were none.]

THE MOTION CARRIED UNANIMOUSLY.

We can move to the Other Closing Items.

**Kimbra Ellsworth:**

The Other Closing Item in this budget is a budget amendment. The Governor's Finance Office submitted Budget Amendment A215523055, on March 19, 2021, which recommends additional General Fund appropriations of \$794 in fiscal year (FY) 2022 and \$1,160 in FY 2023 to align operating costs of the Commission with current cost projections. The recommended adjustments in the budget amendment are shown on page 3 [\[Exhibit C\]](#). Fiscal staff recommends the Other Closing Item be closed as amended by the Governor, and requests authority for staff to make technical adjustments, as necessary.

**Chair Monroe-Moreno:**

Are there any questions or discussions? [There were none.] I will call for the motion.

SENATOR RATTI MOVED TO RECOMMEND THE OTHER CLOSING ITEM BE CLOSED AS AMENDED BY THE GOVERNOR, AND AUTHORIZE FISCAL STAFF TO MAKE TECHNICAL ADJUSTMENTS, AS NECESSARY.

ASSEMBLYWOMAN CARLTON SECONDED THE MOTION.

Are there any comments on the motion? [There were none.]

THE MOTION CARRIED UNANIMOUSLY.

We can move to the next budget.

**HEALTH AND HUMAN SERVICES  
AGING AND DISABILITY SERVICES  
HHS-ADSD - FEDERAL PROGRAMS AND ADMINISTRATION (101-3151)  
BUDGET PAGE DHHS-ADSD-13**

**Kimbra Ellsworth, Program Analyst:**

This budget is the primary administrative budget for the Aging and Disability Services Division (ADSD), Department of Health and Human Services providing general

administration, centralized fiscal, human resources, and information technology services for the Division. The budget is funded with State General Fund appropriations and a cost allocation charged for services provided to other budgets within the Division. There are no Major Closing Issues in this budget and Other Closing Items 1 through 2 are included. Fiscal staff recommends Other Closing Items 1 and 2 be closed as recommended by the Governor, and requests authority to make technical adjustments, as necessary.

**Chair Monroe-Moreno:**

Are there any questions or comments? [There were none.] I will call for the motion.

SENATOR RATTI MOVED TO RECOMMEND OTHER CLOSING ITEMS 1 AND 2 BE CLOSED AS RECOMMENDED BY THE GOVERNOR, AND AUTHORIZE FISCAL STAFF TO MAKE TECHNICAL ADJUSTMENTS, AS NECESSARY.

ASSEMBLYWOMAN CARLTON SECONDED THE MOTION.

Is there any discussion on the motion? [There was none.]

THE MOTION CARRIED UNANIMOUSLY.

We can move to the next budget.

**HEALTH AND HUMAN SERVICES  
AGING AND DISABILITY SERVICES  
HHS-ADSD - SENIOR RX AND DISABILITY RX (262-3156)  
BUDGET PAGE DHHS-ADSD-18**

**Kimbra Ellsworth, Program Analyst:**

The next budget is for the Nevada Senior Prescription and Disability Prescription (SRx/DRx) programs. These programs assist eligible low-income senior citizens and persons with disabilities. The SRx/DRx programs include an insurance premium subsidy, which helps recipients pay for Medicare Part D premiums, and a pharmacy subsidy, which helps pay for Medicare Part D coverage gap, or the “donut hole,” costs. Funding is provided through transfers from the Trust Fund for a Healthy Nevada. The Governor recommends eliminating the pharmacy subsidy portion of the SRx/DRx programs in the upcoming biennium, which includes a reduction of \$1.3 million in Healthy Nevada Funds over the 2021-2023 biennium. This is due to the closure of the Medicare Part D coverage gap. The remaining funding in the budget would support the insurance premium portion of the programs.

During the March 5, 2021, budget hearing, the agency indicated that the caseload has been declining. However, updated caseload projections provided by the Office of Analytics, in

March 2021, reflect an increase in the caseload. The agency indicated it was not requesting to adjust the budget based on the increased caseload projections.

The recommended funding of \$311,328 per year in the upcoming biennium would support a monthly average combined caseload based on the average subsidy of \$28.65. This is the most current average provided by the agency with a caseload of approximately 877 clients per month with the funding that would remain in the budget as recommended.

Alternatively, to fund the reprojected monthly average caseload of 1,054 clients in fiscal year (FY) 2022 and 1,253 clients in FY 2023, Fiscal staff calculates additional Healthy Nevada Funds of \$62,374 would be required in FY 2022 and \$132,851 in FY 2023 beyond the \$311,328 per year recommended by the Governor.

The program serves as many members as funding will allow. The agency indicated that a waitlist will be generated if the budget is insufficient to meet a higher-than-budgeted caseload. The statutes preclude the Interim Finance Committee from augmenting the legislatively approved allocations from the Fund for a Healthy Nevada for the purposes of this program. As such, given the uncertainty of the caseload numbers in the upcoming biennium, the Subcommittees may wish to consider recommending closing the budget as recommended by the Governor or recommending approval of funding based on the updated caseload projection data.

The options for the Subcommittees are on page 12 of your packet [[Exhibit C](#)].

- A. Recommend approval of the Governor's recommendation to reduce Healthy Nevada Funds by \$670,650 in each year of the 2021-2023 biennium to eliminate the pharmacy subsidy portion of the SRx/DRx programs and continue the insurance premium subsidy portion of the programs with Healthy Nevada Funds of \$311,328 in each year of the 2021-2023 biennium, which would support a monthly average caseload of 877 clients in FY 2022 and FY 2023, at the current average subsidy.
- B. Recommend approval of reducing Healthy Nevada Funds by \$608,276 in FY 2022 and \$537,799 in FY 2023 to eliminate the pharmacy subsidy portion of the SRx/DRx programs and continue the insurance premium subsidy portion of the programs with Healthy Nevada Funds of \$373,702 in FY 2022 and \$444,179 in FY 2023, which would support a monthly average caseload of 1,054 clients in FY 2022 and 1,253 clients in FY 2023, based on the March 2021 caseload projections at the current average subsidy. The Department has confirmed that sufficient Healthy Nevada Funds are available to fund these increases.

**Chair Monroe-Moreno:**

Are there any comments or discussion on the pharmacy subsidy program elimination?

**Senator Ratti:**

I appreciate that Fiscal staff worked up both options on this matter. For me, it makes sense that if we have the funds, we do not start to create a waitlist and we make sure that people get these services. I will be supporting Option B.

**Chair Monroe-Moreno:**

Are there any other comments? [There were none.] I will call for the motion.

SENATOR RATTI MOVED TO RECOMMEND APPROVAL OF OPTION B TO REDUCE HEALTHY NEVADA FUNDS BY \$608,276 IN FY 2022 AND \$537,799 IN FY 2023 TO ELIMINATE THE PHARMACY SUBSIDY PORTION OF THE SRX/DRX PROGRAMS AND CONTINUE THE INSURANCE PREMIUM SUBSIDY PORTION OF THE PROGRAMS WITH HEALTHY NEVADA FUNDS OF \$373,702 IN FY 2022 AND \$444,179 IN FY 2023, WHICH WOULD SUPPORT A MONTHLY AVERAGE CASELOAD OF 1,054 CLIENTS IN FY 2022 AND 1,253 CLIENTS IN FY 2023, BASED ON MARCH 2021 CASELOAD PROJECTIONS AT THE CURRENT AVERAGE SUBSIDY.

ASSEMBLYWOMAN CARLTON SECONDED THE MOTION.

Is there any discussion on the motion? [There was none.]

THE MOTION CARRIED UNANIMOUSLY.

We can move to the Other Closing Items.

**Kimbra Ellsworth:**

There are no Other Closing Items in this budget. Fiscal staff requests authority to make technical adjustments, as necessary.

**Chair Monroe-Moreno:**

I will accept a motion.

SENATOR RATTI MOVED TO AUTHORIZE FISCAL STAFF TO MAKE TECHNICAL ADJUSTMENTS, AS NECESSARY.

ASSEMBLYWOMAN CARLTON SECONDED THE MOTION.

Is there any discussion on the motion? [There was none.]

THE MOTION CARRIED UNANIMOUSLY.

We can move to the next budget.

**HEALTH AND HUMAN SERVICES  
AGING AND DISABILITY SERVICES  
HHS-ADSD - EARLY INTERVENTION SERVICES (101-3208)  
BUDGET PAGE DHHS-ADSD-45**

**Kimbra Ellsworth, Program Analyst:**

Early Intervention Services work to identify infants and toddlers who have, or are at risk for, developmental delays. The program provides services and support for families with children under the age of three and helps facilitate the children's learning and individualized development in concert with the family. The budget is funded primarily through State General Fund appropriations and receives reimbursements from Medicaid and private medical insurance.

There are two Major Closing Issues in this budget. Major Closing Issue 1 is caseload adjustments. The Governor recommends additional funding to support caseload growth and staffing adjustments in the upcoming biennium. During the March budget hearing, the Subcommittees discussed the increase of one position based on the Governor's recommended budget. The agency provided March caseload updates, and based on that, the caseload is projected to increase by approximately 12 percent over the upcoming biennium. The updated caseload projections are lower for each fiscal year compared to the projections that were used in The Executive Budget.

The table on page 15 [[Exhibit C](#)] compares the caseload as projected in The Executive Budget in November, and the updated March projections, and the difference is at the bottom of the table. The updated projections result in a net reduction of four positions over the biennium, all of which are currently vacant. This would align the staffing ratio to 1 caseworker position for every 19 clients.

During the budget hearing, the state cost per child served was discussed, and the impacts of the COVID-19 pandemic, and the potential reduced cost due to reduced utilization during the pandemic. However, Fiscal staff asked the agency to provide FY 2021 year-to-date costs for comparison with the FY 2020 cost per child. The FY 2021 costs were lower than the amounts that were used to build the budget. The agency indicated that the recommended funding, which is based on the FY 2020 actual costs, would be adequate assuming that the caseload is not significantly higher than projected in March. The updated caseloads and staffing adjustments result in net costs of \$525,178 over the biennium. This includes net General Fund appropriations of \$555,733.

The table on page 16 [[Exhibit C](#)] compares the costs included in these decision units between the Governor's recommended budget and the March reprojections. The decision for the Subcommittees is at the bottom of page 16. Do the Subcommittees wish to



recommend approval of net funding reductions of \$144,959, including \$83,664 in General Fund reductions, in FY 2022 and net additional funding of \$670,137, including an increase in General Funds of \$639,397, in FY 2023, for a net increase of \$525,178 over the biennium, including General Fund appropriations of \$555,733, to align Early Intervention Services caseload and staffing with the March 2021 projections?

**Chair Monroe-Moreno:**

Are there any questions or discussions? [There were none.] I will call for the motion.

SENATOR RATTI MOVED TO RECOMMEND APPROVAL OF NET FUNDING REDUCTIONS OF \$144,959, INCLUDING \$83,664 IN GENERAL FUND REDUCTIONS, IN FY 2022 AND NET ADDITIONAL FUNDING OF \$670,137, INCLUDING AN INCREASE IN GENERAL FUNDS OF \$639,397, IN FY 2023, FOR A NET INCREASE OF \$525,178 OVER THE BIENNIUM, INCLUDING GENERAL FUND APPROPRIATIONS OF \$555,733, TO ALIGN EARLY INTERVENTION SERVICES CASELOAD AND STAFFING WITH THE MARCH 2021 PROJECTIONS.

ASSEMBLYWOMAN CARLTON SECONDED THE MOTION.

Is there any discussion? [There was none.]

THE MOTION CARRIED UNANIMOUSLY.

We can move to the next budget issue.

**Kimbra Ellsworth:**

Major Closing Issue 2 is on page 17 [[Exhibit C](#)]. This is a budget reduction measure. The Governor recommends reducing the community provider rate from \$565 to \$500 per child per month in the upcoming biennium. This would be an 11.5 percent reduction in the rate paid to community providers. During the budget hearing, the agency indicated that the community providers revenues have increased with the transitions to billing Medicaid and private insurance. However, in response to follow-up questions, the agency did state that community providers have indicated rate reductions could impact access to care and service delivery. The agency indicated that the history of the program does not demonstrate a loss of providers following a rate reduction.

Based on the caseload projection update, the cost savings included in decision units enhancement (E) 698 and E-699 are slightly higher than what was included in The Executive Budget. This would result in State General Fund savings of \$2.9 million over the biennium. The decision for the Subcommittees is on page 18. Do the Subcommittees wish to recommend approval of the Governor's recommendation to reduce the Early Intervention

Services community provider rate from \$565 to \$500 per child per month in decision units E-698 and E-699 with the March 2021 updated caseload projections, to realize General Fund savings of \$2.9 million over the 2021-2023 biennium?

**Chair Monroe-Moreno:**

Are there any questions or discussions?

**Senator Kieckhefer:**

I cannot support this particular decision unit at this time. I believe that we heard that there was significant unallocated TANF (Temporary Assistance for Needy Families) funding that I believe could be used for this if we targeted it toward low-income recipients of NEIS [Nevada Early Intervention Services]. I know that some of these matters would still probably balance out potentially down the road, but for this Subcommittee meeting at this time, I cannot support this.

**Assemblywoman Benitez-Thompson:**

I want to echo Senator Kieckhefer's concerns because I know he has been a longtime supporter of this. I know that he knows these services at a different level than just the legislative level and has a different appreciation for them. I do not think that this is a decision that we are making lightly though. I do not know right now or see any other great options other than to do this. Like Senator Kieckhefer, I remain hopeful that if there is a chance to change the conversation not only in this budget, but in a lot of different budgets, that is what I am hoping for as well. I know we have another budget coming up where they are asking for 20 positions to meet caseload, and we may suggest fewer positions. None of this is ideal. I just want to recognize that problem because I absolutely get what he is saying.

**Assemblyman Frierson:**

I want to echo the sentiments of both my colleagues on the Subcommittees. I cannot stress enough the importance of decisions like this. We talk about the pain of cuts, but we are not willing to talk about the revenue to pay for services. This session has about 33 days remaining. I believe we can have a conversation about revenue to try to mitigate some of the painful cuts that we have. We fortunately also have the prospect of possible federal assistance. Without guidance, currently, we cannot depend on that, and we cannot rely on the ability to use it to fill our state's needs until we know how to use it. I cannot talk about the pain of cuts without talking about the unwillingness to talk about revenue to pay for those cuts. I am hopeful that in the next 33 days there is a willingness to talk about it because there are a lot of painful cuts that we must talk about and consider. We all have some personal experiences and struggles with making these decisions, and they are not easy decisions. I do not want to act like they are easy decisions because they are not. Nevada has always struggled with providing services like this in regular times, let alone during an economic downturn and a pandemic. It is high time that we talk about revenue to pay for them and meet our communities' needs.

**Assemblywoman Tolles:**

I think we all have a similar sentiment here. This one is particularly difficult. Having walked through this with some families, it ends up costing a lot more in the long run when we do not take advantage of the early intervention services that have tremendous impact, and there is a reliance on even greater services down the road if we do not intervene early. I too will be voting no, and I hope that we can prioritize restoring these quickly if it does pass.

**Chair Monroe-Moreno:**

I think everyone on the Subcommittees shares the sentiments that have been expressed. The decisions that we are going to make today and in the next 33 days are going to be painful. But we have to do what is in the best interests for all with our limited budget as it is until we are able to expand that budget. Some of these decisions that we make are painful. Hopefully, when we do have those federal guidelines and regulations, we can restore some of the funds and the cuts that we are unfortunately having to make. With that, I will call for the motion.

SENATOR RATTI MOVED TO RECOMMEND APPROVAL OF THE GOVERNOR'S RECOMMENDATION TO REDUCE THE EARLY INTERVENTION SERVICES COMMUNITY PROVIDER RATE FROM \$565 TO \$500 PER CHILD PER MONTH IN DECISION UNITS E-698 AND E-699 WITH THE MARCH 2021 UPDATED CASELOAD PROJECTIONS, TO REALIZE GENERAL FUND SAVINGS OF \$2.9 MILLION OVER THE 2021-2023 BIENNIUM.

ASSEMBLYWOMAN CARLTON SECONDED THE MOTION.

Is there any discussion on the motion?

**Assemblywoman Carlton:**

I have one comment like my colleagues. I have been through this situation twice, and I hope none of you ever have to do it again. But sometimes you must do what is put in front of you. As I have said in other committee meetings, you must save the seeds of these programs so that when money becomes available, we can grow the programs again. I have personally worked very hard while I have been on this Committee since 2011 to grow mental health, to grow autism, and to grow these programs. Reducing services is painful, but that is what leadership is, and remembering the cuts in the future is important so that when the time comes you can fix it. I remember painful decisions from 2008, 2009, and 2010. That is why when I came to this body in 2011, I made it my goal to fix some of these things. Unfortunately, we have been put in this awful position, but I understand how all of you feel. With that, I will support the motion, but this is painful to do for all of us.

**Senator Kieckhefer:**

I appreciate all the comments of my colleagues. In no way do I hope that my vote against this motion will be taken as casting aspersions against the intent or heart or goal of all of my colleagues. I know that they are committed to the children of our state. This is just my pet budget, and this is the one that I always pay attention to, so I appreciate you all.

**Chair Monroe-Moreno:**

There being no other comments, I will call for the vote.

THE MOTION CARRIED. (SENATORS HAMMOND AND KIECKHEFER AND ASSEMBLYMEN ROBERTS, TITUS, AND TOLLES VOTED NO.)

We can move to the Other Closing Items in this budget.

**Kimbra Ellsworth:**

There are three Other Closing Items in this budget. Other Closing Item 3 is a technical adjustment to add a vehicle that was inadvertently deleted from the base budget. Fiscal staff recommends Other Closing Items 1 and 2 be closed as recommended by the Governor, and Other Closing Item 3 be closed with the noted technical adjustment, and requests authority for Fiscal staff to make other technical adjustments, as necessary.

**Chair Monroe-Moreno:**

Are there any questions or discussions? [There were none.] I will call for the motion.

SENATOR RATTI MOVED TO RECOMMEND OTHER CLOSING ITEMS 1 AND 2 BE CLOSED AS RECOMMENDED BY THE GOVERNOR, AND OTHER CLOSING ITEM 3 BE CLOSED WITH THE NOTED TECHNICAL ADJUSTMENT, AND AUTHORIZE FISCAL STAFF TO MAKE OTHER TECHNICAL ADJUSTMENTS, AS NECESSARY.

ASSEMBLYWOMAN BENITEZ-THOMPSON SECONDED THE MOTION.

Is there any discussion? [There was none.]

THE MOTION CARRIED UNANIMOUSLY.

We can move to the next budget.

**HEALTH AND HUMAN SERVICES  
AGING AND DISABILITY SERVICES  
HHS - ADSD- AUTISM TREATMENT ASSISTANCE PROGRAM (101-3209)  
BUDGET PAGE DHHS - ADSD-53**

**Kimbra Ellsworth, Program Analyst:**

The next budget is the Autism Treatment Assistance Program. The Autism Treatment Assistance Program (ATAP) was created to assist parents and caregivers with the cost of providing autism-specific treatments for their child with autism spectrum disorder. The program provides temporary assistance and funding to pay for evidence-based treatment, provides comprehensive behavior therapy, assists families with copays and deductibles, and provides case management support for Medicaid eligible children. Funding is provided through State General Fund appropriations, federal Temporary Assistance for Needy Families (TANF) funds, reimbursements from Medicaid, and transfers from the Trust Fund for a Healthy Nevada.

There are two Major Closing Issues in this budget. Major Closing Issue 1 is caseload adjustments. The Governor recommends additional funding to support projected caseload growth, eliminate the waitlists for ATAP, and adjust associated staffing.

The agency provided updated caseload projections calculated in March 2021. Based on that data, the monthly average caseload is projected to increase by approximately 30 percent over the upcoming biennium. The updated caseload projections are slightly lower for each fiscal year compared to the projections that were used in [The Executive Budget](#). The table on page 23 [\[Exhibit C\]](#) compares the caseload projections from November and the updated projections provided in March 2021 and the difference from the Governor's recommended budget.

Included in this recommendation are staffing adjustments. Decision unit maintenance (M) 201, based on the updated caseload data, would result in a net reduction of three positions. Decision unit M-203 would add four positions for a net increase of one position to align staffing with the caseload growth and add the waitlist to the caseload. The positions identified for elimination are vacant except for the developmental specialist supervisor position and one case worker position. To resolve this issue, the agency is requesting to move the case worker incumbent from the position identified for elimination in M-201 to one of the four positions being added in decision unit M-203. This would require adjusting the start date from October 1, 2021, to July 1, 2021, for one position to ensure continuation of service, which appears reasonable. This would result in a net reduction of approximately \$9,000 over the biennium by aligning the step of the new position with the incumbent's current step.

Additionally, the agency is requesting to retain the supervisor position, as all five existing supervisor positions for this program are currently filled, and the agency indicates these

positions are difficult to fill. This would result in a temporary change in the supervisor/case worker ratio from the approved ratio of 1:7 to 1:6, which appears reasonable. If approved to retain the supervisor position and adjust the start date for the one caseworker position to retain the two incumbents, this would result in additional costs of \$78,686 in fiscal year (FY) 2022 and \$162,126 in FY 2023 funded with General Fund appropriations.

During the March 5, 2021, budget hearing, the Subcommittees discussed the waitlist for the ATAP, and the agency indicated that the waitlist was due in part to a lack of program staffing, but also that the autism provider capacity contributes to the waitlist. The autism provider capacity declined during the COVID-19 pandemic with the moratorium on services.

The updated caseload and staffing adjustments would result in net costs of \$2.8 million over the 2021-2023 biennium, which includes \$2.7 million in net General Fund appropriations. This is slightly lower compared to the amount in The Executive Budget as shown in the table on page 24 [[Exhibit C](#)].

The decision for the Subcommittees is on page 24. Do the Subcommittees wish to recommend approval of funding totaling \$1.2 million, including \$1.2 million in General Funds and \$8,870 in federal funds, in FY 2022 and \$1.6 million, including \$1.6 million in General Funds and \$38,076 in federal funds, in FY 2023 to support caseload increases for the Autism Treatment Assistance Program, including associated staffing adjustments and elimination of the waitlist over the 2021-2023 biennium, in the M-200, M-201 and M-203 decision units based on the March 2021 updated caseload projections and retaining existing incumbents?

**Chair Monroe-Moreno:**

Are there any discussions on the caseload adjustments in this budget? [There were none.] I will call for the motion.

SENATOR RATTI MOVED TO RECOMMEND APPROVAL OF FUNDING TOTALING \$1.2 MILLION, INCLUDING \$1.2 MILLION IN GENERAL FUNDS AND \$8,870 IN FEDERAL FUNDS, IN FY 2022 AND \$1.6 MILLION, INCLUDING \$1.6 MILLION IN GENERAL FUNDS AND \$38,076 IN FEDERAL FUNDS, IN FY 2023 TO SUPPORT CASELOAD INCREASES FOR THE AUTISM TREATMENT ASSISTANCE PROGRAM, INCLUDING ASSOCIATED STAFFING ADJUSTMENTS AND ELIMINATION OF THE WAITLIST OVER THE 2021-2023 BIENNIUM, IN THE M-200, M-201 AND M-203 DECISION UNITS BASED ON THE MARCH 2021 UPDATED CASELOAD PROJECTIONS AND RETAINING EXISTING INCUMBENTS.

ASSEMBLYWOMAN CARLTON SECONDED THE MOTION.

Is there any discussion? [There was none.]

THE MOTION CARRIED. (SENATOR DONDERO LOOP WAS ABSENT  
FOR THE VOTE.)

We can move to the next budget item.

**Kimbra Ellsworth:**

Major Closing Issue 2 is a funding reduction and revenue swap. The Governor recommends reducing total revenue in this budget based on the projected caseload and service costs for the upcoming biennium. The table on page 25 [\[Exhibit C\]](#) summarizes the funding included in the budget. As shown in the table, part of the recommendation includes replacing Healthy Nevada Funds of \$5.7 million, which were previously budgeted for autism services, with TANF [Temporary Assistance for Needy Families] funds. On page 26, there is a discussion of the Healthy Nevada Funds. In previous biennia these funds were budgeted to support autism service costs. However, the recommendation for the upcoming biennium includes \$143,500 of Healthy Nevada Funds in each fiscal year to support administrative costs only. Given the intent of the Healthy Nevada Fund to support programs and direct program costs, allocating money from the Fund for administrative costs only with no related program expenditures supported by Healthy Nevada Funds does not appear to align with the intent of the Fund or the provisions of statute. Fiscal staff recommends an adjustment to replace the Healthy Nevada Funds with General Fund appropriations of \$143,500 per year in the upcoming biennium. Fiscal staff discussed the issue with the Governor's Finance Office and the agency, and both agreed with the recommended adjustment.

Additionally, during the March 5, 2021, budget hearing, the agency indicated that the recommended TANF funding in this budget would be from the state's TANF reserves, and that it was working to get clarification on the use of TANF funds for autism services. In follow-up, the agency provided a memo from the Office of the Attorney General which reviewed the services that would be funded with TANF funds, and determined that those services may be viewed as educational given the focus on teaching and training, rather than purely medical in nature and, therefore, are an allowable use of TANF funding.

Also discussed during the budget hearing was the cost per child and the reduced utilization during the COVID-19 pandemic, which may have reduced the cost per child served in FY 2020, which is the cost that is used to build this budget. Fiscal staff asked the agency for updated FY 2021 year-to-date costs which were lower than the costs in FY 2020. In follow up, the agency indicated that it does expect the recommended funding, which is based on the FY 2020 actual costs, to be adequate assuming the actual caseload in the upcoming biennium is close to the projected levels and there are no significant changes to provider rates in the upcoming biennium.

The decision for the Subcommittees is on page 26. Do the Subcommittees wish to recommend approval of the Governor's recommendation to reduce total revenue and expenditures, due to lower projected costs per child, and to replace Healthy Nevada Funds with federal Temporary Assistance for Needy Families funding of \$5.7 million over the 2021-2023 biennium to support autism service costs, and to replace Healthy Nevada Funds with General Fund appropriations of \$287,000 over the 2021-2023 biennium to support administrative expenses?

**Chair Monroe-Moreno:**

Are there any questions or discussions? [There were none.] I will call for the motion.

SENATOR RATTI MOVED TO RECOMMEND APPROVAL OF THE GOVERNOR'S RECOMMENDATION TO REDUCE TOTAL REVENUE AND EXPENDITURES, DUE TO LOWER PROJECTED COSTS PER CHILD, AND TO REPLACE HEALTHY NEVADA FUNDS WITH FEDERAL TEMPORARY ASSISTANCE FOR NEEDY FAMILIES FUNDING OF \$5.7 MILLION OVER THE 2021-2023 BIENNIUM TO SUPPORT AUTISM SERVICE COSTS, AND TO REPLACE HEALTHY NEVADA FUNDS WITH GENERAL FUND APPROPRIATIONS OF \$287,000 OVER THE 2021-2023 BIENNIUM TO SUPPORT ADMINISTRATIVE EXPENSES.

ASSEMBLYWOMAN CARLTON SECONDED THE MOTION.

Is there any discussion? [There was none.]

THE MOTION CARRIED UNANIMOUSLY.

We can move to the next budget item.

**Kimbra Ellsworth:**

Other Closing Items 1 and 2 are on page 27. Fiscal staff recommends Other Closing Items 1 and 2 be closed as recommended by the Governor, and requests authority to make technical adjustments, as necessary.

**Chair Monroe-Moreno:**

Are there any questions or discussions? [There were none.] I will call for the motion.

SENATOR RATTI MOVED TO RECOMMEND OTHER CLOSING ITEMS 1 AND 2 BE CLOSED AS RECOMMENDED BY THE GOVERNOR AND AUTHORIZE FISCAL STAFF TO MAKE TECHNICAL ADJUSTMENTS, AS NECESSARY.



ASSEMBLYWOMAN CARLTON SECONDED THE MOTION.

Is there any discussion? [There was none.]

THE MOTION CARRIED UNANIMOUSLY.

We can move to the next budget.

**HEALTH AND HUMAN SERVICES  
AGING AND DISABILITY SERVICES  
HHS-ADSD - HOME AND COMMUNITY-BASED SERVICES (101-3266)  
BUDGET PAGE DHHS-ADSD-24**

**Kimbra Ellsworth, Program Analyst:**

The Home and Community-Based Services budget is on page 29 [[Exhibit C](#)]. This includes community-based care services, such as the Community Options Program for the Elderly (COPE), Personal Assistance Services (PAS), Homemaker, and Home and Community-Based Waiver programs for the Frail Elderly and Physically Disabled, which help provide alternatives for individuals at risk of institutionalization. This budget also includes the Long-Term Care Ombudsman Program and Adult Protective Services. This budget is primarily funded with State General Fund appropriations and federal funds.

There are four Major Closing Issues in this budget. Major Closing Issue 1 is caseload adjustments for the community-based care programs. The Governor recommends additional funding in the upcoming biennium to adjust the caseloads for caseload growth and eliminate the waitlists for the PAS, Homemaker and COPE programs. Based on updated caseload projections provided in March 2021, the PAS caseload is projected to increase by 19.8 percent over the biennium. The Homemaker program caseload is projected to increase by 3.6 percent. The COPE caseload is projected to increase by 23.6 percent over the upcoming biennium.

Compared to the projections that were used to prepare the recommendation in The Executive Budget, the updated caseload projections for the PAS and COPE programs are lower, and the updated caseload projections for the Homemaker program are higher for each fiscal year in the upcoming biennium. The table on page 31 [[Exhibit C](#)] summarizes the caseload projections included in the recommended budget and included in the March 2021 update.

As noted during the March 5, 2021, budget hearing, the supporting calculations for the waitlist decision units recommended by the Governor for the PAS, Homemaker, and COPE programs in decision units maintenance (M) 203, M-205, and M-207, respectively, did not account for a portion of the caseload. These were understated. The updated caseloads result in net costs of \$376,676 over the 2021-2023 biennium, which is slightly lower than the amounts included in The Executive Budget.

The decision for the Subcommittees is on page 32. Do the Subcommittees wish to recommend approval of General Fund appropriations of \$141,541 in FY 2022 and \$235,135 in FY 2023 to support caseload adjustments, including elimination of the waitlists, for the Personal Assistance Services, Homemaker, and Community Options Program for the Elderly programs over the 2021-2023 biennium, to align funding in the M-200, M-202, M-203, M-204, M-205, M-206 and M-207 decision units with the March 2021 updated caseload projections?

**Chair Monroe-Moreno:**

Are there any questions or discussions? [There were none.] I will call for the motion.

SENATOR RATTI MOVED TO RECOMMEND APPROVAL OF GENERAL FUND APPROPRIATIONS OF \$141,541 IN FY 2022 AND \$235,135 IN FY 2023 TO SUPPORT CASELOAD ADJUSTMENTS, INCLUDING ELIMINATION OF THE WAITLISTS, FOR THE PERSONAL ASSISTANCE SERVICES, HOMEMAKER, AND COMMUNITY OPTIONS PROGRAM FOR THE ELDERLY PROGRAMS OVER THE 2021-2023 BIENNIUM, TO ALIGN FUNDING IN THE M-200, M-202, M-203, M-204, M-205, M-206 AND M-207 DECISION UNITS WITH THE MARCH 2021 UPDATED CASELOAD PROJECTIONS.

ASSEMBLYWOMAN CARLTON SECONDED THE MOTION.

Is there any discussion? [There was none.]

THE MOTION CARRIED. (SENATOR CANNIZZARO WAS ABSENT FOR THE VOTE.)

We can move to the next Major Closing Issue.

**Kimbra Ellsworth:**

Major Closing Issue 2 is on page 32 [[Exhibit C](#)]. This is staffing adjustments for the community-based care programs. The Governor recommends General Fund reductions in The Executive Budget to adjust staffing for these programs. However, as discussed during the budget hearing, the caseload figures that were used to calculate the staffing needs in The Executive Budget did not account for the additional clients added to the caseload from the waitlists. The agency provided the updated staffing projections with the March caseload updates. The table on page 33 compares the staffing recommendations and the March caseload update with the amounts that were included in the Governor's recommended budget and the amounts discussed during the budget hearing as calculated by staff to include the clients who are on the waitlist. With the updated caseload projections, this would result in a net increase of 12 positions over the biennium. The revised staffing projections result in

additional costs of \$1.4 million over the 2021-2023 biennium, funded with General Fund appropriations.

The decision for the Subcommittees is on page 33. Do the Subcommittees wish to recommend approval of General Funds of \$327,683 in FY 2022 and \$1.1 million in FY 2023 to support caseload staffing adjustments for the community-based care programs over the 2021-2023 biennium, to align staffing and associated funding in decision unit M-208 with the March 2021 updated caseload projections?

**Chair Monroe-Moreno:**

Are there any questions or discussions?

**Assemblywoman Benitez-Thompson:**

I have a quick question for clarification. I see from the table on page 33 that with new caseload projections the recommendation was revised up in positions and net cost but, there are still some scheduled eliminations. Could you please confirm that and explain if the eliminated positions are vacant, and whether these positions are part of those being held vacant as described on page 39?

**Chair Monroe-Moreno:**

Would staff be able to help us answer the question, either Ms. Ellsworth or Mr. Leiser?

**Kimbra Ellsworth:**

We have the March caseload update on page 33. We have a net change and a total of 12 positions, and there is a reduction of 3 intake positions. Those three positions are vacant, and there would not be any associated layoffs with this recommendation.

**Assemblywoman Benitez-Thompson:**

I appreciate that.

**Brody Leiser, Principal Deputy Fiscal Analyst:**

So we are all on the same page, on page 39 of the closing document [[Exhibit C](#)], decision unit E-680 recommends holding 21 positions vacant through FY 2022. The full money committees took action on April 1, 2021, to restore those positions preliminarily through American Rescue Plan Act funding effective on October 1st. I believe that the decisions or the positions that we are talking about currently are unrelated to that prior decision. I believe that those decisions are independent of each other. If I am incorrect, Ms. Ellsworth will correct me.

**Kimbra Ellsworth:**

You are correct.

**Senator Kieckhefer:**

To summarize, the intent was to incorporate all the waitlist and the caseload, and we just did not adequately budget for staff to do so. Is that right?

**Kimbra Ellsworth:**

Correct.

**Senator Kieckhefer:**

Okay, so is it \$2 million above the Governor recommended budget to adequately staff the caseload?

**Kimbra Ellsworth:**

Yes, with the waitlist.

**Senator Kieckhefer:**

Yes.

**Chair Monroe-Moreno:**

Is there any other discussion on this closing item? [There was none.] I will call for the motion.

SENATOR RATTI MOVED TO RECOMMEND APPROVAL OF GENERAL FUNDS OF \$327,683 IN FY 2022 AND \$1.1 MILLION IN FY 2023 TO SUPPORT CASELOAD STAFFING ADJUSTMENTS FOR THE COMMUNITY-BASED CARE PROGRAMS OVER THE 2021-2023 BIENNIUM, TO ALIGN STAFFING AND ASSOCIATED FUNDING IN DECISION UNIT M-208 WITH THE MARCH 2021 UPDATED CASELOAD.

ASSEMBLYWOMAN CARLTON SECONDED THE MOTION.

Is there any discussion on the motion? [There was none.]

THE MOTION CARRIED UNANIMOUSLY.

We can move to the next budget item.

**Kimbra Ellsworth:**

Major Closing Issue 3 is on page 34 [[Exhibit C](#)]. This is staffing adjustments for the Long-Term Care Ombudsman Program. The Governor recommends reducing funding to the Long-Term Care Ombudsman Program staffing based on projected changes in the caseload. With the updated March 2021 caseload projections, the caseload is projected to increase by 41.3 percent, with average monthly clients of 922 in FY 2023. The updated caseload

projections are higher for each fiscal year in the upcoming biennium compared to those recommended in The Executive Budget. The adjustments would result in a net reduction of four positions over the biennium. The revised staffing projections result in reduced costs of \$671,141 over the 2021-2023 biennium.

During the March 5, 2021, budget hearing, the agency indicated that overall program activities dropped due to the COVID-19 pandemic and the closure of long-term care facilities to visitors, and that it was concerned about the ability for the Long-Term Care Ombudsman Program staff to maintain minimal visits with the recommended staffing reductions. In response to follow-up questions, the agency indicated that it anticipates a dramatic increase in the number of cases and referrals to the program as facilities reopen. However, it is unclear if the actual caseload would exceed the monthly average of 922 clients as projected by Office of Analytics in the upcoming biennium. The table on page 35 compares the recommended staffing changes included in The Executive Budget. Those were revised based on the March caseload updates.

The decision for the Subcommittees is on page 35. Do the Subcommittees wish to recommend approval of the Governor's recommendation to reduce General Funds by \$305,193 in FY 2022 and \$365,948 in FY 2023, to eliminate six vacant positions and add two new positions for a net change of four positions, to align staffing and associated funding in decision unit M-209 with the March 2021 updated caseload projections prepared by the Office of Analytics for the Long-Term Care Ombudsman Program?

**Chair Monroe-Moreno:**

Are there any questions or discussions?

**Assemblywoman Titus:**

My question is a point of clarification. They just do not know the amount of caseload at this point in time. As these long-term care units reopen, there may be a need for increased staff. There is nothing in this decision that would prevent the agency from adjusting staff when needed. If they needed to adjust, they could certainly adjust at some other time. I am anxious about eliminating these positions versus holding them vacant. If we make this decision, it is a little bit more of a process to come back and fill the positions if needed. I was curious about their ability to adjust as they see fit in the future. The question is again how flexible will they be in case they do see a huge surge once they do reopen? I know a lot of these long-term care facilities are starting to reopen now. I am curious to see how would they be able to adjust and how quick would they be able to adjust if there is a surge in need?

**Kimbra Ellsworth:**

Adding positions does take some time. If the agency is able to identify funding during the interim, they could bring the request to add positions to the Interim Finance Committee. I believe that in order for the Division of Human Resource Management to approve the addition of positions, the agency must identify the funding to support them.

**Chair Monroe-Moreno:**

Are there any other questions or discussion on this? [There were none.] I will call for the motion.

SENATOR RATTI MOVED TO RECOMMEND APPROVAL OF THE GOVERNOR'S RECOMMENDATION TO REDUCE GENERAL FUNDS BY \$305,193 IN FY 2022 AND \$365,948 IN FY 2023, TO ELIMINATE SIX VACANT POSITIONS AND ADD TWO NEW POSITIONS FOR A NET CHANGE OF FOUR POSITIONS, TO ALIGN STAFFING AND ASSOCIATED FUNDING IN DECISION UNIT M-209 WITH THE MARCH 2021 UPDATED CASELOAD PROJECTIONS FOR THE LONG-TERM CARE OMBUDSMAN PROGRAM.

ASSEMBLYWOMAN CARLTON SECONDED THE MOTION.

Is there any discussion? [There was none.]

THE MOTION CARRIED. (ASSEMBLYWOMAN TITUS VOTED NO.)

We can move to the next budget item.

**Kimbra Ellsworth:**

Major Closing Issue 4 is on page 35 and is the Adult Protective Services program staffing adjustments and funding source changes. The Governor recommends additional General Fund appropriations of \$1.7 million over the 2021-2023 biennium to adjust the Adult Protective Services program staffing based on projected caseload changes and continuing a change to the funding source for nine existing program positions. The March caseload update includes an increase of 14.8 percent in the caseload over the biennium compared to an increase of 6.1 percent in the caseload that was used for The Executive Budget. The agency's current staffing level supports a ratio of 1 caseworker for every 48 clients. The staffing adjustments would support a ratio of 1 caseworker for every 40 clients, which has been used historically for the program. As recommended in The Executive Budget, this would add nine social worker positions based on the November 2020 projections to align the staffing ratios.

The updated caseload projections provided in March would result in the addition of 29 positions over the biennium, including 22 social workers. This would result in increased costs of \$4.4 million over the 2021-2023 biennium, which is \$2.8 million more when compared to the amount recommended in The Executive Budget.

The agency indicated in follow up that if the additional 22 social worker positions are not added and the caseload growth is realized, the program will have difficulty in meeting the statutory requirement of investigating reports the Division receives within the required

timeframes. However, during the budget hearing the agency discussed the difficulty of recruiting for these positions and indicated a vacancy rate of approximately 51 percent for social worker and adult rights specialist positions. Therefore, the likelihood of filling all 22 additional social worker positions in the upcoming biennium is uncertain.

The Executive Budget included Federal Victims of Crime Act (VOCA) grant funds. During the March 5, 2021, budget hearing, the agency indicated the federal VOCA funding had been limited, and that alternative federal funding may become available in the future to support adult protective services. However, no immediate funding has been identified to support the ongoing costs to staff and operate the program in the upcoming biennium.

The Governor's Finance Office submitted Budget Amendment A216453266, on April 22, 2021, which eliminates all remaining VOCA funding from the budget and three vacant positions, due to a further reduction in VOCA funding for the program. The budget amendment changes decision units enhancement (E) 491 and E-227. The net effect of the adjustment is the elimination of \$518,514 in funding over the 2021-2023 biennium, including a net reduction of \$68,514 in General Fund appropriations, and the elimination of three associated vacant positions. The amendment also changes the funding source for the six remaining positions from federal VOCA funds to General Fund appropriations.

The table on page 38 [[Exhibit C](#)] summarizes the adjustments and compares the caseload staffing changes as recommended by the Governor in decision unit maintenance (M) 210, and the revised staffing changes based on the updated March 2021 caseload projections, and the adjustments included in Budget Amendment A216453266. As recommended by the Governor with the budget amendment, the net change would be the addition of six new positions. Considering the speculative caseload increases and the high vacancy rates experienced by the agency, the Subcommittees may wish to consider maintaining the caseload staffing adjustments as recommended in The Executive Budget and as submitted in the budget amendment for a net increase of six positions and associated net costs of \$1.1 million, which includes General Fund appropriations of \$1.6 million over the 2021-2023 biennium.

The decision for the Subcommittees is on page 38. Do the Subcommittees wish to recommend approval of the Governor's recommendation to support caseload staffing adjustments for the Adult Protective Services program, based on the caseload projections utilized in The Executive Budget in decision unit M-210, for the addition of nine social worker positions and decision units E-491 and E-227, as amended by Budget Amendment A216453266, to eliminate three vacant positions and associated funding and change the funding source for six existing positions, from federal grant funds to General Fund appropriations, for a net increase of \$1.1 million, including \$1.6 million in General Funds, over the 2021-2023 biennium, for a net increase of six positions?

**Chair Monroe-Moreno:**

Are there any questions or discussion on this closing items?

**Senator Ratti:**

I think this is just going to be one of those days where we all have our thing. I want to flag this item. I am going to make and probably support the motion, but I think this one is the perfect storm. Obviously, we are losing the VOCA funding so that puts more weight on the General Fund which is challenging. It is a brand-new program, and so making caseload projections is difficult. I would not go so far as to describe it as speculative, but I would say that it is challenging to do at this point because we just do not have a lot of history. Then we have those caseload projections and we need 29 positions. My concern is the testimony in the hearing indicated that it has been difficult to fill these social worker positions. I believe that could possibly be because the caseload is out of proportion. I am concerned that we are going to create this self-fulfilling prophesy that it is difficult to hire people because the caseloads are so high. When that word gets out, this will not be the agency that individuals will want to work for because of the challenges. I do not think, as we discussed earlier, that there is much that we can do about it today. I am prepared to support the recommendation that is in our packet. However, if the caseload does come in that has been projected, I think that this situation will be untenable for the staff that is going to be working in this office. I would just ask that we flag it, and as we look for federal funding or any other solutions, that this is one to which we pay attention.

**Chair Monroe-Moreno:**

Is there any other discussion on this closing item? [There was none.] I will call for the motion.

SENATOR RATTI MOVED TO RECOMMEND APPROVAL OF THE GOVERNOR'S RECOMMENDATION TO SUPPORT CASELOAD STAFFING ADJUSTMENTS FOR THE ADULT PROTECTIVE SERVICES PROGRAM, BASED ON THE CASELOAD PROJECTIONS UTILIZED IN THE EXECUTIVE BUDGET IN DECISION UNIT M-210, FOR THE ADDITION OF NINE SOCIAL WORKER POSITIONS AND DECISION UNITS E-491 AND E-227, AS AMENDED BY BUDGET AMENDMENT A216453266, TO ELIMINATE THREE VACANT POSITIONS AND ASSOCIATED FUNDING AND CHANGE THE FUNDING SOURCE FOR SIX EXISTING POSITIONS, FROM FEDERAL GRANT FUNDS TO GENERAL FUND APPROPRIATIONS, FOR A NET INCREASE OF \$1.1 MILLION, INCLUDING \$1.6 MILLION OF GENERAL FUNDS, OVER THE 2021-2023 BIENNIUM, FOR A NET INCREASE OF SIX POSITIONS.

ASSEMBLYWOMAN CARLTON SECONDED THE MOTION.



Is there any discussion? [There was none.]

THE MOTION CARRIED. (SENATOR DONDERO LOOP WAS ABSENT FOR THE VOTE.)

We can move to the next budget item.

**Kimbra Ellsworth:**

Other Closing Items 1 through 3 are on page 39. Fiscal staff recommends Other Closing Items 1 through 3 be closed as recommended by the Governor, and requests authority to make technical adjustments, as necessary.

**Chair Monroe-Moreno:**

Are there any questions or discussions? [There were none.] I will call for the motion.

SENATOR RATTI MOVED TO RECOMMEND OTHER CLOSING ITEMS 1 THROUGH 3 BE CLOSED AS RECOMMENDED BY THE GOVERNOR, AND AUTHORIZE FISCAL STAFF TO MAKE TECHNICAL ADJUSTMENTS, AS NECESSARY.

ASSEMBLYWOMAN CARLTON SECONDED THE MOTION.

Is there any discussion? [There was none.]

THE MOTION CARRIED. (SENATOR DONDERO LOOP WAS ABSENT FOR THE VOTE.)

We can move to the next budgets.

**HEALTH AND HUMAN SERVICES  
AGING AND DISABILITY SERVICES  
HHS-ADSD - RURAL REGIONAL CENTER (101-3167)  
BUDGET PAGE DHHS-ADSD-83**

**HEALTH AND HUMAN SERVICES  
AGING AND DISABILITY SERVICES  
HHS-ADSD - DESERT REGIONAL CENTER (101-3279)  
BUDGET PAGE DHHS-ADSD-72**

**HEALTH AND HUMAN SERVICES  
AGING AND DISABILITY SERVICES  
HHS-ADSD - SIERRA REGIONAL CENTER (101-3280)  
BUDGET PAGE DHHS-ADSD-64**

**Kimbra Ellsworth, Program Analyst:**

The consolidated document for the overview of the next three budgets begins on page 41 [[Exhibit C](#)] for the Developmental Services Regional Centers budget accounts (BA) 3167, 3279, and 3280. Developmental services include an array of services provided to people of all ages with intellectual and/or developmental disabilities and their families through the three regional centers. Decision units that are specific to an individual budget are discussed in the closing document for that respective budget. The three Major Closing Issues in this document consolidate the issues for the three regional centers. Major Closing Issue 1 is a shared issue about the federal medical assistance percentage (FMAP) rates and base revenue adjustments.

Based on discussions at the April 15, 2021, work session for the Division of Health Care Financing and Policy, Department of Health and Human Services on FMAP rates, the Subcommittees may wish to consider approving an adjustment of the fiscal year (FY) 2022 FMAP rates in the regional centers budgets to align with the rates used in the Medicaid budget.

During the April 15, 2021, work session, the Subcommittees expressed a desire to budget the temporary 6.2 percentage point enhanced FMAP rates through December 31, 2021. Additionally, the FY 2023 projected FMAP rate has decreased since the budget submissions. Fiscal staff calculates net increases in federal Title XIX Medicaid revenue of \$6.4 million in FY 2022 and \$1.6 million in FY 2023, based on the adjustments to the FMAP rates in the base budgets for the Desert Regional Center, the Rural Regional Center, and the Sierra Regional Center budgets. This would result in corresponding reductions in State General Fund appropriations—a net General Fund reduction of \$8 million over the biennium—to align federal Title XIX Medicaid revenue and General Fund appropriations with the applicable FMAP rates for the upcoming biennium.

The decision for the Subcommittees is on page 42. Do the Subcommittees wish to recommend approval of adjusting revenues in the base budgets of the three regional center budgets to correct inadvertent miscalculations included in the base budgets to update FMAP rates to reflect the most recent projections, and to budget for the temporary 6.2 percentage point increase in the FMAP rates through December 31, 2021, for net General Fund savings of \$8 million over the 2021-2023 biennium?

**Chair Monroe-Moreno:**

Are there any questions or discussions?

**Senator Kieckhefer:**

The closing document indicates that there is a disagreement with the Governor's Finance Office regarding the FMAP rates. We previously approved utilizing the enhanced FMAP rate based on the public health emergency through the end of the calendar year. Does the

\$8 million referenced in the decision unit include that decision that was made in the Medicaid budgets?

**Kimbra Ellsworth:**

Yes, it does.

**Chair Monroe-Moreno:**

Is there any further discussion? [There was none.] I will call for the motion.

SENATOR RATTI MOVED TO RECOMMEND APPROVAL OF ADJUSTING REVENUES IN THE BASE BUDGETS OF THE THREE REGIONAL CENTER BUDGETS TO CORRECT INADVERTENT MISCALCULATIONS, TO UPDATE FMAP RATES TO REFLECT THE MOST RECENT PROJECTIONS, AND TO BUDGET FOR THE TEMPORARY 6.2 PERCENTAGE POINT INCREASE IN THE FMAP RATE THROUGH DECEMBER 31, 2021, FOR NET GENERAL FUND SAVINGS OF \$8 MILLION OVER THE 2021-2023 BIENNIUM.

ASSEMBLYWOMAN CARLTON SECONDED THE MOTION.

Is there any discussion on the motion?

**Assemblywoman Carlton:**

If the Subcommittees will remember, we had a work session on that particular item where there seems to be a little bit of difference of opinion. We had the letter at the back stating where we thought we might be going with this. There are provisions, safeguards, and safety valves built into this to make sure that we are in good shape. I believe the Subcommittees were comfortable with going through the end of this calendar year of 2021. I would have loved to add more money to it by extending it even further but took the middle choice to go down the road and move forward from there. There are offramps on this in case we need them.

**Senator Kieckhefer:**

I had forgotten that was a work session and not a closing. I was so happy that we were all on the same page, it felt like a closing.

**Chair Monroe-Moreno:**

Is there any other discussion on the motion? [There was none.]

THE MOTION CARRIED. (SENATOR DONDERO LOOP WAS ABSENT FOR THE VOTE.)

We can move to the next closing issue.

**Kimbra Ellsworth:**

Major Closing Issue 2 is on page 43. This is caseload adjustments. The Governor recommends additional funding to support caseload growth, reduce waiver waitlists, and adjust associated staffing for the supported living arrangements, family support/respite, and jobs- and day-training programs at Desert Regional Center, Sierra Regional Center, and Rural Regional Center. The table on page 44 compares the caseload projections that were used in The Executive Budget and the projections used by the agency calculated in March 2021. Compared to the projections that were used to prepare the recommendation in The Executive Budget, the monthly average regional centers' caseload projections are lower, and the waiver waitlist projections are higher for each fiscal year in the upcoming biennium. The updated caseloads and waiver waitlists result in total funding of \$75.6 million in the upcoming biennium compared to \$70.9 million in the Governor's recommended budget. This includes \$37.4 million in General Fund appropriations over the 2021-2023 biennium.

The table on page 46 compares the developmental services estimated monthly average service count by type as recommended in The Executive Budget based on the updated projections from March 2021. Included in this recommendation and the discussion on page 47, are staffing adjustments based on the updated caseload projection. The staffing adjustments would include the addition of 18 positions at the Desert Regional Center. No adjustments would be required at the Sierra Regional Center or at the Rural Regional Center. As noted during the budget hearing, the recommended staffing adjustments for the Desert Regional Center include four human resource positions that are not directly tied to the caseload growth in the upcoming biennium. During the March 18, 2021, budget hearing, the agency indicated that the Desert Regional Center currently has no human resource positions to support the operations of the facility, and that the growth in caseloads and caseload staffing over time necessitates the additional support from human resource personnel.

The decision for the Subcommittees is on page 47. Do the Subcommittees wish to recommend approval of \$34.1 million, including \$16.4 million in General Fund appropriations in FY 2022 and \$41.5 million including \$21 million in General Fund appropriations in FY 2023 to support caseload increases for the developmental services programs over the 2021-2023 biennium, including associated staffing adjustments, to align funding in the maintenance (M) 200, M-201 and M-510 decision units with the March 2021 updated caseload projections, with authority for technical adjustments as necessary?

**Chair Monroe-Moreno:**

Are there any questions or discussions? [There were none.] I will call for the motion.

SENATOR RATTI MOVED TO RECOMMEND APPROVAL OF \$34.1 MILLION, INCLUDING \$16.4 MILLION IN GENERAL FUND APPROPRIATIONS, IN FY 2022 AND \$41.5 MILLION, INCLUDING \$21 MILLION IN GENERAL FUND APPROPRIATIONS, IN FY 2023 TO SUPPORT CASELOAD INCREASES FOR THE DEVELOPMENTAL SERVICES PROGRAMS OVER THE 2021-2023 BIENNIUM, INCLUDING ASSOCIATED STAFFING ADJUSTMENTS, TO ALIGN FUNDING IN THE MAINTENANCE (M) 200, M-201 AND M-510 DECISION UNITS WITH THE MARCH 2021 UPDATED CASELOAD PROJECTIONS, AND AUTHORIZE FISCAL STAFF TO MAKE TECHNICAL ADJUSTMENTS AS NECESSARY.

ASSEMBLYWOMAN CARLTON SECONDED THE MOTION.

Is there any discussion? [There was none.]

THE MOTION CARRIED. (SENATOR DONDERO LOOP WAS ABSENT FOR THE VOTE.)

We can move to the next budget item.

**Kimbra Ellsworth:**

Major Closing Issue 3 begins on page 47. This is a budget reduction measure for the Fiscal Intermediary program. The Governor recommends reducing the monthly financial assistance paid to families from \$450 per month to \$300 per month in FY 2022, to realize General Fund savings of \$466,200 in the first year of the upcoming biennium. The Fiscal Intermediary program provides aid to low-income families with children under the age of 18 to purchase specialized treatment and services to assist the child in successful integration into their community.

During the March 18, 2021, budget hearing, the agency explained that the families that qualify for the Fiscal Intermediary program are at or below the 300 percent federal poverty level, and that the recommended reduction would impact the amount of specialized services they are able to purchase. However, the agency indicated that its service coordinators would work with the families to assist them with finding lower cost, or free resources to help supplement their needs. The decision for the Subcommittees is on page 48. Do the Subcommittees wish to recommend approval of the Governor's recommendation to reduce the Fiscal Intermediary program rate paid to families from \$450 to \$300 per month to realize General Fund savings of \$466,200 in FY 2022, with authority for technical adjustments as necessary?

**Chair Monroe-Moreno:**

Are there any questions or discussions?

**Assemblywoman Benitez-Thompson:**

This is one where I look at it and know families are at 300 percent of federal poverty level (FPL). I know we do not have the money to do anything about this. I know the caseworkers are going to work with families to help them find lower cost or free resources. If those low-cost resources really existed, they would be getting them now. I know the agency was thoughtful in where they were trying to cut—they are trying to do the least amount of harm. They identified this program because it would affect in a quantified way the least amount of people, but the impact to those people is so big. I just had to say that.

**Chair Monroe-Moreno:**

This is another decision that is heartbreaking that we must make. Members, are there any other questions or discussions? [There were none.] I will call for the motion.

SENATOR RATTI MOVED TO RECOMMEND APPROVAL OF THE GOVERNOR'S RECOMMENDATION TO REDUCE THE FISCAL INTERMEDIARY PROGRAM RATE PAID TO FAMILIES FROM \$450 TO \$300 PER MONTH TO REALIZE GENERAL FUND SAVINGS OF \$466,200 IN FY 2022, AND AUTHORIZE FISCAL STAFF TO MAKE TECHNICAL ADJUSTMENTS AS NECESSARY.

ASSEMBLYWOMAN CARLTON SECONDED THE MOTION.

Is there any discussion on the motion?

**Assemblywoman Carlton:**

I want to echo what the Majority Leader said, and I know Mr. Leiser is marking items for review. We need to review this item. This is a difficult decision because these are children who need help. We know there are better days ahead, and this is one of our priorities I think we will all watch in the future.

**Chair Monroe-Moreno:**

We can all agree that this is a difficult decision. Members, I will call for the vote.

THE MOTION CARRIED. (SENATOR DONDERO LOOP WAS ABSENT FOR THE VOTE.)

We can move to the next budget.

**HEALTH AND HUMAN SERVICES  
AGING AND DISABILITY SERVICES  
HHS-ADSD - FAMILY PRESERVATION PROGRAM (101-3166)  
BUDGET PAGE DHHS-ADSD-62**

**Kimbra Ellsworth, Program Analyst:**

The next budget is for the Family Preservation Program on page 51 [[Exhibit C](#)]. This Program serves clients in all three regional centers. It provides monthly cash assistance to low-income families who care for relatives in their homes who have a profound or severe intellectual or developmental disability or have children under six years of age who have developmental delays that require equivalent levels of support. The Family Preservation Program aims to strengthen and support families so that they may remain intact and limit or avoid the need for institutional placements. The budget is funded with General Fund appropriations, federal Temporary Assistance for Needy Families funds, and transfers from the Trust Fund for a Healthy Nevada.

The Governor recommends additional General Fund appropriations of \$176,902 over the 2021-2023 biennium to support projected caseload growth for the Family Preservation Program. With the March caseload updates, the caseload is projected to increase by 3.7 percent over the upcoming biennium. Compared to the projections used in The Executive Budget, these are slightly lower for each fiscal year. The tables on page 53 compare the caseload and funding in the associated decision units as recommended in The Executive Budget with the March 2021 caseload projections. The updated caseload projections result in total additional General Fund appropriations of \$127,534 over the 2021-2023 biennium, which is approximately \$49,000 less compared to the amount recommended in The Executive Budget.

Do the Subcommittees wish to recommend approval of General Funds of \$37,400 in fiscal year (FY) 2022 and \$90,134 in FY 2023 to support caseload growth for the Family Preservation Program over the 2021-2023 biennium to provide financial assistance of \$374 per family per month, to align funding in the maintenance (M) 200 and M-201 decision units with the March 2021 updated caseload projections? As there are no Other Closing Items in this budget, I would also like to add to the motion that Fiscal staff requests authority to make technical adjustments, as necessary.

**Chair Monroe-Moreno:**

Are there any questions or discussions? [There were none.] I will call for the motion.

SENATOR RATTI MOVED TO RECOMMEND APPROVAL OF GENERAL FUNDS OF \$37,400 IN FY 2022 AND \$90,134 IN FY 2023 TO SUPPORT CASELOAD GROWTH FOR THE FAMILY PRESERVATION PROGRAM OVER THE 2021-2023 BIENNIUM TO PROVIDE FINANCIAL ASSISTANCE OF \$374 PER FAMILY PER MONTH, TO ALIGN FUNDING IN THE M-200 AND M-201 DECISION UNITS WITH THE MARCH 2021 UPDATED CASELOAD PROJECTIONS, AND AUTHORIZE FISCAL STAFF TO MAKE TECHNICAL ADJUSTMENTS AS NECESSARY.

ASSEMBLYWOMAN CARLTON SECONDED THE MOTION.

Is there any discussion? [There was none.]

THE MOTION CARRIED. (SENATORS DONDERO LOOP AND HAMMOND WERE ABSENT FOR THE VOTE.)

We can move to the next budget.

**HEALTH AND HUMAN SERVICES  
AGING AND DISABILITY SERVICES  
HHS-ADSD - RURAL REGIONAL CENTER (101-3167)  
BUDGET PAGE DHHS-ADSD-83**

**Kimbra Ellsworth, Program Analyst:**

The Rural Regional Center budget is on page 55 [[Exhibit C](#)]. This is one of the three regional centers that provide services for individuals with intellectual or developmental disabilities and related conditions and serves individuals in rural Northern Nevada. The budget is funded primarily with State General Fund appropriations and federal Medicaid funds. The Major Closing Issues in this budget were discussed in the Regional Centers overview closing document. Other Closing Items 1 through 3 are listed on page 56. Fiscal staff recommends Other Closing Items 1 through 3 be closed as recommended by the Governor, and requests authority for staff to make technical adjustments, as necessary.

**Chair Monroe-Moreno:**

Are there any questions or discussions? [There were none.] I will call for the motion.

SENATOR RATTI MOVED TO RECOMMEND OTHER CLOSING ITEMS 1 THROUGH 3 BE CLOSED AS RECOMMENDED BY THE GOVERNOR, AND AUTHORIZE FISCAL STAFF TO MAKE TECHNICAL ADJUSTMENTS, AS NECESSARY.

ASSEMBLYWOMAN CARLTON SECONDED THE MOTION.



Is there any discussion? [There was none.]

THE MOTION CARRIED. (SENATOR DONDERO LOOP AND  
ASSEMBLYMAN FRIERSON WERE ABSENT FOR THE VOTE.)

We can move to the next budget.

**HEALTH AND HUMAN SERVICES  
AGING AND DISABILITY SERVICES  
HHS-ADSD - DESERT REGIONAL CENTER (101-3279)  
BUDGET PAGE DHHS-ADSD-72**

**Kimbra Ellsworth, Program Analyst:**

The budget for the Desert Regional Center begins on page 57 [\[Exhibit C\]](#). This regional center serves individuals residing in southern Nevada, including urban Clark County. Major Closing Issues 1 through 3 in this budget were discussed previously. Major Closing Issue 4 is the continuation of dental services on page 58 of the closing packet. The Governor recommends additional General Fund appropriations of \$200,000 in each year of the 2021-2023 biennium to continue the provision of dental services to Desert Regional Center clients through the University of Nevada, Las Vegas (UNLV) School of Dental Medicine. The agency indicates the recommendation would help reduce delays for dental care.

During the March 18, 2021, budget hearing, the agency explained that the UNLV School of Dental Medicine has a specialized clinic with a sensory-specific room to serve individuals with intellectual and developmental disabilities. Through this partnership with the university, the agency explained that it benefits by providing access to specialized dental services for Desert Regional Center clients who are not able to access dental services. The School of Dental Medicine benefits from the experience gained by working with these clients.

The decision for the Subcommittees is on page 59. Do the Subcommittees wish to recommend approval of the Governor's recommendation to appropriate General Funds of \$200,000 in each year of the 2021-2023 biennium to continue the provision of dental services to Desert Regional Center clients through the UNLV School of Dental Medicine?

**Chair Monroe-Moreno:**

Are there any questions or discussions? [There were none.] I will call for the motion.

SENATOR RATTI MOVED TO RECOMMEND APPROVAL OF THE GOVERNOR'S RECOMMENDATION TO APPROPRIATE GENERAL FUNDS OF \$200,000 IN EACH YEAR OF THE 2021-2023 BIENNIUM TO CONTINUE THE PROVISION OF DENTAL SERVICES TO DESERT REGIONAL CENTER CLIENTS THROUGH THE UNIVERSITY OF NEVADA, LAS VEGAS SCHOOL OF DENTAL MEDICINE.

ASSEMBLYWOMAN CARLTON SECONDED THE MOTION.

Is there any discussion? [There was none.]

THE MOTION CARRIED. (SENATOR DONDERO LOOP AND ASSEMBLYMAN FRIERSON WERE ABSENT FOR THE VOTE.)

We can move to the Other Closing Items in this budget.

**Kimbra Ellsworth:**

Other Closing Items 1 through 7 are on page 59. Other Closing Item 7 includes a pilot program and the subsequent elimination of the pilot program. During the March 18, 2021, budget hearing, the agency confirmed that these decision units were included in error in The Executive Budget, and it is appropriate to remove these from the budget recommendation. The Governor's Finance Office agreed. Fiscal staff recommends technical adjustments to zero out these decision units. Fiscal staff recommends Other Closing Items 1 through 6 be closed as recommended by the Governor, and Other Closing Item 7 be closed with the noted technical adjustments, and requests authority to make other technical adjustments, as necessary.

**Chair Monroe-Moreno:**

Are there any questions or discussions? [There were none.] I will call for the motion.

SENATOR RATTI MOVED TO RECOMMEND OTHER CLOSING ITEMS 1 THROUGH 6 BE CLOSED AS RECOMMENDED BY THE GOVERNOR, AND OTHER CLOSING ITEM 7 BE CLOSED WITH THE NOTED TECHNICAL ADJUSTMENTS TO ZERO OUT DECISION UNITS ENHANCEMENT (E) 380 AND E-684, AND AUTHORIZE FISCAL STAFF TO MAKE OTHER TECHNICAL ADJUSTMENTS, AS NECESSARY.

ASSEMBLYWOMAN CARLTON SECONDED THE MOTION.

Is there any discussion on the motion? [There was none.]

THE MOTION CARRIED. (SENATOR DONDERO LOOP AND ASSEMBLYMAN FRIERSON WERE ABSENT FOR THE VOTE.)

We can move to the next budget.

**HEALTH AND HUMAN SERVICES  
AGING AND DISABILITY SERVICES  
HHS-ADSD - SIERRA REGIONAL CENTER (101-3280)  
BUDGET PAGE DHHS-ADSD-64**

**Kimbra Ellsworth, Program Analyst:**

The Sierra Regional Center budget is on page 61 [[Exhibit C](#)]. This regional center provides services for individuals with intellectual or developmental disabilities and related conditions residing in Washoe County. Major Closing Issues 1 through 3 for this budget were covered previously. Other Closing Items 1 through 4 are on page 62. Fiscal staff recommends Other Closing Items 1 through 4 be closed as recommended by the Governor, and requests authority for staff to make technical adjustments, as necessary.

**Chair Monroe-Moreno:**

Are there any questions or discussions? [There were none.] I will call for the motion.

SENATOR RATTI MOVED TO RECOMMEND OTHER CLOSING ITEMS 1 THROUGH 4 BE CLOSED AS RECOMMENDED BY THE GOVERNOR, AND AUTHORIZE FISCAL STAFF TO MAKE TECHNICAL ADJUSTMENTS, AS NECESSARY.

ASSEMBLYWOMAN CARLTON SECONDED THE MOTION.

Is there any discussion? [There was none.]

THE MOTION CARRIED. (SENATOR DONDERO LOOP AND ASSEMBLYMAN FRIERSON WERE ABSENT FOR THE VOTE.)

We can move to the next budget.

**HEALTH AND HUMAN SERVICES  
AGING AND DISABILITY SERVICES  
HHS-ADSD - COMMISSION FOR PERSONS WHO ARE DEAF (101-1006)  
BUDGET PAGE DHHS-ADSD-90**

**Kimbra Ellsworth, Program Analyst:**

I will now begin presenting the budgets which the Subcommittees have not previously reviewed for the Aging and Disability Services Division, Department of Health and Human

Services, and for which Fiscal staff is responsible for developing closing recommendations. I will pause following my presentation of each budget to allow for questions. When I have presented the last budget in this group and questions have been addressed, the Chair may wish to ask for a single motion for closing consideration on all of the budgets for which Fiscal staff is responsible for developing recommendations.

On page 63 [\[Exhibit C\]](#), we have the budget for the Commission for Persons Who Are Deaf. Fiscal staff is responsible for developing closing recommendations for this budget, and the Subcommittees have not previously reviewed this budget. The Nevada Commission for Persons Who Are Deaf, Hard of Hearing, or Speech Impaired provides such persons with information and referrals for services and resources that promote equality in education, employment, and socialization. The Commission's 11 members are appointed by the Governor. This budget is funded with State General Fund appropriations and provides for administrative expenses of the Commission. There are no Major Closing Issues and there are no Other Closing Items. Closing recommendations for this budget are included on the summary page in the closing packet.

**Chair Monroe-Moreno:**

Members, are there any questions before we move on? [There were none.] We can move to the next budget.

**HEALTH AND HUMAN SERVICES  
AGING AND DISABILITY SERVICES  
HHS-ADSD - TOBACCO SETTLEMENT PROGRAM (262-3140)  
BUDGET PAGE DHHS-ADSD-22**

**Kimbra Ellsworth, Program Analyst:**

The budget for the Tobacco Settlement Program is on page 65 [\[Exhibit C\]](#). Fiscal staff is responsible for developing closing recommendations for this budget. The Subcommittees have not previously reviewed this budget.

The Aging and Disability Services Division, Department of Health and Human Services, supports grants for existing or new programs that assist senior citizens and other specified persons with independent living. Funds are received through the Fund for a Healthy Nevada. Independent living grants enable older persons to remain at home and avoid institutional placement. The services provided include transportation, information assistance and advocacy, adult day care, legal assistance, homemaker, companion, respite, home repair, and caregiver support services. There are no Major Closing Issues and no Other Closing Items in this budget. The closing recommendations for this budget are included on the summary page in the closing packet.

**Chair Monroe-Moreno:**

Members, are there any questions on this budget before we move on? [There were none.] We can move to the next budget.

**HEALTH AND HUMAN SERVICES  
AGING AND DISABILITY SERVICES  
HHS-ADSD - COMMUNICATION ACCESS SERVICES (101-3206)  
BUDGET PAGE DHHS - ADS-40**

**Kimbra Ellsworth, Program Analyst:**

The budget for Communication Access Services is on page 67 [[Exhibit C](#)]. Fiscal staff is responsible for developing closing recommendations for this budget. The Subcommittees have not previously reviewed this budget.

Communication Access Services provide communication access to Nevadans who are deaf, hard of hearing, or speech impaired. The Communication Access Services programs include Relay Nevada that provides access to phone services, Communication Access Service Centers, and Communication Access Real Time Registry that provides information about registered interpreters and providers in the state. The budget is funded through a monthly surcharge on phone lines in the state. There are no Major Closing Issues in this budget. Other Closing Items 1 through 4 appear reasonable to staff. The closing recommendations for this budget are included on the summary page in the closing packet.

**Chair Monroe-Moreno:**

Members, are there any questions or comments before we move on? [There were none.] We can move to the next budget.

**HEALTH AND HUMAN SERVICES  
AGING AND DISABILITY SERVICES  
HHS-ADSD-APPLIED BEHAVIOR ANALYSIS (101-3207)  
BUDGET PAGE DHHS-ADSD-60**

**Kimbra Ellsworth, Program Analyst:**

The Applied Behavioral Analysis budget is on page 69 [[Exhibit C](#)]. Fiscal staff is responsible for developing closing recommendations for this budget. The Subcommittees have not previously reviewed this budget.

The 2017 Legislature transferred the regulation of applied behavior analysis to the new Board of Applied Behavior Analysis (Board). This budget includes the operating costs of the Board, which consists of five members, and is funded with fees for the licensure of licensed Behavior Analysts and licensed Assistant Behavior Analysts as well as the registration of Registered Behavior Technicians. There are no Major Closing Issues and no Other Closing

Items. Closing recommendations for this budget are included on the summary page in the closing packet.

**Chair Monroe-Moreno:**

Members, are there any questions or comments before we move on? [There were none.] We can move to closing.

**Kimbra Ellsworth:**

Page 71 contains the summary for the Fiscal staff closing budgets. As previously noted, Fiscal staff is responsible for developing recommendations for these budgets. To assist with the closing, Fiscal staff has identified the budgets that are recommended to be closed as recommended by the Governor.

Fiscal staff recommends that the following budgets be closed as recommended by the Governor, and requests authority for staff to make technical adjustments as necessary:

- 1006—Commission for Persons Who Are Deaf.
- 3140—Tobacco Settlement Program.
- 3206—Communication Access Services.
- 3207—Applied Behavior Analysis.

**Chair Monroe-Moreno:**

Members, I will entertain a motion to close those budgets.

SENATOR RATTI MOVED TO RECOMMEND THAT THE FOLLOWING BUDGETS BE CLOSED AS RECOMMENDED BY THE GOVERNOR, AND AUTHORIZE FISCAL STAFF TO MAKE TECHNICAL ADJUSTMENTS AS NECESSARY:

- 1006—COMMISSION FOR PERSONS WHO ARE DEAF.
- 3140—TOBACCO SETTLEMENT PROGRAM.
- 3206—COMMUNICATION ACCESS SERVICES.
- 3207—APPLIED BEHAVIOR ANALYSIS.

ASSEMBLYWOMAN CARLTON SECONDED THE MOTION.

Is there any discussion? [There was none.]

THE MOTION CARRIED UNANIMOUSLY.

We can move to the last item on our agenda which will be public comment.

**Tiffany Tyler-Garner, Executive Director, Children's Advocacy Alliance:**

I am calling in to one, thank you for your thoughtful consideration during such a challenging fiscal time and two, to underscore the importance and value of early intervention services. These are trajectory-changing services for children and their families. While I recognize that you face many tough decisions, I just want to underscore that if some consideration can be given to ensure the vital support for children and families, that you please do so. Particularly recognize the impact of being able to intervene early and support children to success, whether it is the way in which it impacts school readiness, or the K-12 engagement, or even throughout the lifespan. These services are critical services for children and families.

**Chair Monroe-Moreno:**

Thank you so much for joining us and staying engaged with the process.

**Lisa Foster, representing the State of Nevada Association of Providers:**

In partnership with the state, the State of Nevada Association of Providers (SNAP) members provide direct services to individuals with intellectual and developmental disabilities. These services include supportive living arrangements, jobs- and day-training, and other supports to help those they serve. The SNAP members represent approximately 80 percent of these direct providers throughout the state. We are exceptionally appreciative of our relationship with the Aging and Disability Services Division leaders and acknowledge their understanding of the great problems facing these providers right now. I am speaking in support of all the regional centers efforts and their budgets and am always watching and concerned with any cuts.

However, we would like to make the Subcommittees aware of a few things, maybe just for reference, as the state will soon begin to allocate the American Rescue Plan Act of 2021 and infrastructure dollars. As you know, Medicaid match dollars are 100 percent of what funds most all these direct service providers for the state. As the state pays out \$1, the federal government pays out approximately \$2 to take care of intellectually disabled persons. It is our understanding there may be a 10 percent increase in these match funds from the FMAP [Federal Medical Assistance Percentage] dollars coming in the American Rescue Plan Act of 2021. There is money specifically dedicated in the American Rescue Plan Act of 2021 to serve those with intellectual disabilities. Disability providers are more burdened than ever when it comes to hiring and maintaining those who care for the vulnerable individuals they serve. Not only are they concerned they will not be able to meet the demands of the minimum wage increase which they wholeheartedly support, but they currently have struggled worse than any other time to hire and keep employees because of the low wages they must pay due to the lower Medicaid rates. The year-long dollars from the American Rescue Plan Act of 2021 will allow them to get past this crisis. The SNAP is asking that the state carry out this plan to dedicate any federal dollars to those with intellectual disabilities when that time comes. Thank you for allowing me to speak for this and your great work and consideration.

Assembly Committee on Ways and Means  
Senate Committee on Finance  
Subcommittees on Human Services  
April 28, 2021  
Page 40

**Chair Monroe-Moreno:**

I want to thank those who were able to call in and share your comments with the Subcommittees. Please know that we are listening, and we hear you. There being no further business before the Subcommittees, this meeting is adjourned [at 9:52 a.m.].

RESPECTFULLY SUBMITTED:

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Janice Wright  
Committee Secretary

APPROVED BY:

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Assemblywoman Daniele Monroe-Moreno, Chair

DATE: \_\_\_\_\_

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Senator Julia Ratti, Chair

DATE: \_\_\_\_\_



## **EXHIBITS**

[Exhibit A](#) is the Agenda.

[Exhibit B](#) is the Attendance Roster.

[Exhibit C](#) is a document titled "Human Services Joint Subcommittee Closing List #6," dated April 28, 2021, presented by the Fiscal Analysis Division, Legislative Counsel Bureau.