Amendment No. 65

Assembly Amendment to Assembly Bill No. 100	(BDR S-562)							
Proposed by: Assembly Committee on Health and Human Services								
Amends: Summary: Yes Title: Yes Preamble: No Joint Sponsorship: N	o Digest: Yes							

ASSEMBLY	AC	ΓΙΟΝ	Initial and Date		SENATE ACTIO)N Init	ial and Date
Adopted		Lost		I	Adopted	Lost	
Concurred In		Not		I	Concurred In	Not	
Receded		Not		I	Receded	Not _	

EXPLANATION: Matter in (1) *blue bold italics* is new language in the original bill; (2) variations of <u>green bold underlining</u> is language proposed to be added in this amendment; (3) <u>red strikethrough</u> is deleted language in the original bill; (4) <u>purple double strikethrough</u> is language proposed to be deleted in this amendment; (5) <u>orange double underlining</u> is deleted language in the original bill proposed to be retained in this amendment.

JDK/EWR



Date: 4/6/2023

A.B. No. 100—Provides for various programs and studies relating to caregivers. (BDR S-562)

ASSEMBLY BILL NO. 100-ASSEMBLYWOMAN BROWN-MAY

Prefiled February 1, 2023

Referred to Committee on Health and Human Services

SUMMARY—Provides for [various programs and studies] certain assessments relating to caregivers. (BDR S-562)

FISCAL NOTE: Effect on Local Government: No.

Effect on the State: Yes.

~

EXPLANATION - Matter in bolded italics is new; matter between brackets fomitted material; is material to be omitted.

AN ACT relating to caregivers; requiring the Department of Health and Human Services to develop and implement a pilot program to administer certain assessments to family caregivers [; directing the Department to conduct certain studies relating to caregivers;] and report the results of the pilot program to certain entities; and providing other matters properly relating thereto.

Legislative Counsel's Digest:

Existing law establishes various programs to provide services to aging persons and persons with disabilities. (Chapter 427A of NRS) [Section 1 of this] This bill requires the Department of Health and Human Services, during the 2023-2024 interim, to: (1) develop evidence-based and culturally sensitive assessments to be administered to family caregivers for persons with disabilities or health conditions; and (2) implement a pilot program to administer those assessments to family caregivers. [Section 1] This bill requires those assessments to measure certain factors related to the capabilities, needs and quality of life of such family caregivers. [Section 1] This bill requires the Department to: (1) annually report on the progress and results of the pilot program to the Legislature and certain entities that provide or oversee services for persons with disabilities in this State; and (2) publish the report on an Internet website maintained by the Department.

Existing law authorizes a patient, the representative of a patient or the parent or guardian of a patient to designate a caregiver for the patient before the patient is discharged from a hospital. (NRS 449A.315) Existing law requires a hospital to attempt to: (1) notify a caregiver before the patient is discharged or transferred from a hospital; (2) provide the caregiver with a copy of the discharge plan for the patient; and (3) consult with the caregiver concerning the aftercare set forth in such a discharge plan. (NRS 449A.321, 449A.324) Section 2 of this bill requires the Department to conduct two separate studies relating to caregivers during the 2023-2024 interim. Specifically, section 2 directs the Department to study; (1) the feasibility, costs and benefits of requiring hospitals to assess the capacity of such caregivers; and (2) the potential to obtain reimbursement from insurers under a certain medical billing code for assessing the knowledge and needs of various types of caregivers, social supports for such caregivers, the willingness of such caregivers to undertake caregiving tasks and the ability of such caregivers to provide care.]

- THE PEOPLE OF THE STATE OF NEVADA, REPRESENTED IN SENATE AND ASSEMBLY, DO ENACT AS FOLLOWS:
- **Section 1.** 1. The Department of Health and Human Services shall, during the 2023-2024 interim:
- (a) Develop evidence-based and culturally sensitive assessments to be administered to family caregivers by [hospitals, managed care organizations that provide services to recipients of Medicaid, other providers of publicly funded services for older persons and persons with disabilities and providers of health care.] the Department. Such assessments must:
- (1) Determine the willingness and ability of a family caregiver to provide long-term services and supports to a person with a disability or health condition and the needs of such family caregivers;
- (2) Measure the extent, quality, value and effect of social determinants of health, specific risk factors related to stress and depression and environmental and cultural barriers on family caregivers; [and]
- (3) Measure the efficacy of referrals linking family caregivers to local community resources 🗔 :
- (4) Assess the capacity of each family caregiver to provide all necessary care, including, without limitation, any activities of daily living and instrumental activities of daily living; and
- (5) Identify the knowledge and needs of family caregivers, social supports for family caregivers, the willingness of family caregivers to undertake caregiving tasks and the ability of family caregivers to provide care.
- (b) Establish a process for gathering data collected through the assessments developed pursuant to paragraph (a).
- (c) Develop and implement a pilot program to administer the assessments developed pursuant to paragraph (a) and collect data from the assessments using the process established pursuant to paragraph (b), emphasizing the collection of data necessary to:
- (1) Identify unmet demand for community resources to assist caregivers; and
 - (2) Develop resources to meet that demand.
- (d) Except to the extent that doing so would conflict with contractual obligations existing on July 1, 2023, require any person or entity] Recruit persons and entities who directly or indirectly [receives] receive money from the Department or any Division thereof to provide services for older persons or persons with disabilities or health care services to voluntarily participate in the pilot program developed pursuant to paragraph (c).
- 2. On or before June 30, 2024, and June 30, 2025, the Department of Health and Human Services shall:
- (a) Compile a report concerning the progress and results of the activities conducted pursuant to subsection 1. The report must include, without limitation, data concerning the factors assessed pursuant to subparagraphs (1) [, (2) and (3)] to (5), inclusive, of paragraph (a) of subsection 1.
 - (b) Publish the report on an Internet website maintained by the Department.
 - (c) Submit the report to:
 - (1) The Nevada Lifespan Respite Care Coalition;
 - (2) The Nevada Commission on Aging created by NRS 427A.032;
- (3) The statewide independent living council established in this State pursuant to 29 U.S.C. § 796d; [and]

(4) The Nevada Commission on Services for Persons with Disabilities 2 created by NRS 427A.1211 \(\overline{\overlin 3 (5) The Director of the Legislative Counsel Bureau for transmittal to 4 the Joint Interim Standing Committee on Health and Human Services and the 5 Legislative Committee on Senior Citizens, Veterans and Adults With Special 6 Needs. 7 As used in this section \(\overline{\operatorname{\operatorname{A}}}\) (a) "Family], "family caregiver" means a member of the family of a person with a disability or a health condition who provides regular care for that person on a 8 9 10 full-time or part-time basis. 11 (b) "Hospital" has the meaning ascribed to it in NRS 449.012. (c) "Managed care organization" has the meaning ascribed to it in NRS 12 605 C 050 13 (d) "Provider of health care" has the meaning ascribed to it in NRS 629.031.] 14 Sec. 2. [1. The Department of Health and Human Services shall, during the 15 16 2023-2024 interim: 17 (a) Conduct a study which includes, without limitation, the collection of data from hospitals, concerning the feasibility, costs and benefits of including in the 18 19 process established by NRS 449A.300 to 449A.330, inclusive, a requirement that. 20 upon discharge of a patient from a hospital, the hospital administer an assessment of the capacity of each caregiver designated pursuant to NRS 449A.315 to provide 21 all necessary aftercare, including, without limitation, any activities of daily living 22 23 and instrumental activities of daily living. (b) Conduct a study which includes, without limitation, the collection of data 24 from hospitals, other medical facilities and providers of health care, concerning the 2.5 26 potential to obtain reimbursement under code 99483 in Current Procedural 27 Terminology published by the American Medical Association from public and private insurers for the cost of assessments to identify the knowledge and needs of 28 29 caregivers, social supports for caregivers, the willingness of caregivers to undertake 30 caregiving tasks and the ability to of the caregivers to provide care. As used in this 31 paragraph, "caregiver" includes, without limitation: 32 (1) Family caregivers: and (2) Caregivers designated pursuant to NRS 449A.315.
On or before February 1, 2025, the Department of Health and Human 33 34 35 Services shall compile a report concerning the results of each study conducted pursuant to subsection 1 and post the report on an Internet website maintained by 36 37 the Department.

time or part time basis.

(b) "Hospital" has the meaning ascribed to it in NRS 449.012.

3. As used in this section:

38

39

40 41

42

43 44

45

46

(c) "Medical facility" has the meaning ascribed to it in NRS 449.0151.

(d) "Provider of health care" has the meaning ascribed to it in NRS 629.031.] (Deleted by amendment.)

(a) "Family caregiver" means a member of the family of a person-

disability or a health condition who provides regular care for that person on a full-

Sec. 3. This act becomes effective on July 1, 2023.