

Minutes

HOME CARE EMPLOYMENT STANDARDS BOARD

August 23, 2022

2:00 p.m.

MEETING LOCATIONS:

Per Assembly Bill (AB) 253 (2021), public bodies whose members are not required to be elected officials may hold public meetings by means of remote technology system with no physical location.

Accordingly, all members of the public were encouraged to participate by using the web-based link and teleconference number provided in the notice.

Call to order– Cody Phinney, Chair Designee

Cody Phinney, Chair opened the meeting at 2:02 p.m.

Agenda Item 2: Roll Call – Kayla Samuels, Management Analyst

Kayla Samuels reviewed expectations for the meeting and took roll call.

BOARD MEMBERS PRESENT:

Cody Phinney, Chair Designee

Safiyah Abdul Rahim

Robert Crocket

Farren Epstein

Maxine Hartranft

Gerardo Louis Gonzalez

Stephanie Schoen

Sue Wagner

Shanieka Cooper

Kristi De Leon

DIVISION OF PUBLIC & BEHAVIORAL HEALTH (DPBH) STAFF PRESENT:

Kayla Samuels, Management Analyst, Bureau of Health Care Quality and Compliance (HCQC)

Leticia Metherell, Health Program Manager III, HCQC

Kirsten Coulombe, Social Services Chief, Health Care Financing and Policy (DHCFP)

Wendy Montgomery, Provider Enrollment, DHCFP

Cathy Vairo, Social Services Chief, Provider Enrollment, DHCFP

OTHERS PRESENT:

Pierron Tackes, Attorney General's Office

Erma Henderson, Home Care Worker

Cheryl Knight, Home Care Worker

Tracey Richards, Home Care Worker
Dawn Ralenkotter, Home Care Worker
Allen Ward, Home Care Employer

Roll call was taken, and it was determined that a quorum of the Home Care Employment Standards Board (HCESB) was present.

General Public Comment

Cheryl Knight introduced herself as caregiver for the last four years for her sister. Ms. Knight said she is her sister's caregiver because Medicaid could not find anybody to come in and work for the family. Ms. Knight said she makes approximately \$11.00 per hour caregiving and expressed difficulty in making ends meet. Ms. Knight said that workers need to get the next \$500 payment and thinks the department of Health and Human Services should make it a requirement for agencies to apply for it because she has heard some agencies do not know about the program.

Erma Henderson introduces herself as a pastor and home care worker of over 20 years. Ms. Henderson said she cannot afford to work as a home care worker due to life expenses. Ms. Henderson said she is currently working from home. Ms. Henderson expressed a need for the next \$500 payment with the price of living increasing and asked the Department of Health and Human Services to push for the payment within the next 30 days to get the money to home care workers. Ms. Henderson expressed optimism and gratefulness for the eventual rollout of the \$500 payment.

Agenda Item 4: Action Item – Approve Minutes from July 26, 2022, HCESB Meeting

Chair Phinney called for edits or discussion on the July 26, 2022, meeting minutes. None heard.

Chair Phinney called for a motion to approve the July 26, 2022, meeting minutes. Farren Epstein made a motion to approve the July 26, 2022, minutes. Safiyya Abdul Rahim seconded the motion. The motion passed unanimously.

Agenda Item 5: Informational Item: Progress update on HCESB recommendation regarding NAC 449.3973

Leticia Metherell, Health Program Manager III, HCQC

Leticia Metherell said the proposed regulations with the requirements recommended by HCESB are currently undergoing the small business impact study. Once completed, staff will hold the public workshop. Ms. Metherell said she hopes to hold the public workshop in September if all goes well but does not have a set date. After public workshop the regulation will go back to the Legislative Council Bureau for additional drafting based on recommendations made throughout the process, and these proposed regulations also have other components besides those recommended by HCESB. Ms. Metherell said staff take recommendations during the public workshop and evaluate them to see if any changes need to be made, then the document goes back

for drafting. After the draft comes back, staff set a public hearing where the regulations get adopted by the Board of Health or not adopted, it is up to the Board of Health. Ms. Metherell says Board of Health usually adopts the regulations and the goal is to get to the December Board of Health meeting if possible, however, that again depends on how the process goes. After approval from Board of Health, the regulations must go to the Legislative Commission for approval and staff have no control over when that occurs, however, it usually occurs within a month or two it seems after Board of Health. Sometimes it is longer or less time. Once the Legislative Commission approves, the regulations go to the Secretary of State, but that is a formality for signature, so at that point the regulations basically become effective. Ms. Metherell asked for any questions.

Maxine Hartranft asked for clarification on which regulations Ms. Metherell is referring to.

Ms. Metherell confirmed NRS 449.3973 and said they are part of a recommendation from HCESB to have personal care agencies (PCAs) pay the caregivers for their training. The regulations are filed R048-22 and specific components are in sections 10 and 44 of the proposed regulations, the other sections do not apply.

Chair Phinney asked if a date has been set for the public hearing.

Ms. Metherell said there is no date yet but has a goal for a public workshop in September and public hearing in December.

Shanieka Cooper said the Board has to make sure that the employers are responsible for covering costs for job trainings, not the workers. Most workers are only making \$11.00 an hour and having to pay for training so there is a serious burden. Ms. Cooper said most workers are not able to pay for training requirements and are struggling with the cost of living and related her experience with her family struggling financially. Ms. Cooper said the regulation change is a step in the right direction for supporting workers.

Ms. Epstein agreed with Ms. Cooper in that requiring workers to pay for training is a barrier for entry into the profession.

Safiyya AbdulRahim said that it is not that the workers want to get paid during training, even though that would be wonderful as well, but do want employers to pay for the training so that workers can stay compliant.

Ms. Metherell said the proposed regulations also require that workers get paid their hourly wage.

Chair Phinney asked if the regulations cover both cost of training and that the employee should be paid for the time, they spent training.

Ms. Metherell confirmed.

Stephanie Schoen said there are currently agencies paying for training. Ms. Schoen said that employees whose agencies who do not currently pay for training or time spent training might see

that change reflected in other ways on their paycheck. Ms. Schoen said she is fortunate to work for a company that pays for training, but knows she is getting paid less an hour as a result and though it might not be a direct result, says she gets paid less than some of the other agencies in town. Ms. Schoen said it is a trade off because she does not have to seek training and can do the training from home, which is helpful. Ms. Schoen said she agrees with the other Board members, however, wants everyone to be aware that employers at the current reimbursement rate to be careful what the Board asks for. Ms. Schoen said she is not saying to not move forward with the regulation, it is important, but that it is essential to be fully cognizant of the impact that it will have on the employer if there is no increase in reimbursement rate. They have to go hand in hand.

Chair Phinney said as a point of clarification, that the process detailed by Ms. Metherell is separate from the budget process that is the wage increase. The regulation is very likely to go forward and get finished in December. Chair Phinney said she wants to make clear that the processes as far as the government work goes are two separate things.

Ms. Cooper asked if the regulations state employees get paid for time spent training as well as the fee and not be taken out of paychecks.

Chair Phinney said that the point brought up by Ms. Schoen is that the regulation has an impact on the employers. Chair Phinney said the regulation will say the employer will be required to cover the training and to pay for the time, and they cannot take that out of a paycheck. What Ms. Schoen expressed is that the employers may have to balance their books, and that may result in a lower wage. Chair Phinney invited a representative of employers on the Board to speak on the subject.

Maxine Hartranft said her agencies pays for the training and pays an hourly wage for the caregivers during training. The hourly payment is the current requirements, paying for the eight hours, the agencies are supposed to be doing that already. Ms. Hartranft said she thinks the part that is being added is paying for the cost of the training, which is not currently in regulation, and asked for confirmation.

Ms. Metherell confirmed that the regulation will require paying for the cost of training and also emphasizes paying the hourly wage.

Kristi De Leon asked if the regulation is for the cultural competency training or all training.

Chair Phinney said training in general that is required by the Bureau of Health Care Quality and Compliance (HCQC).

Ms. De Leon said previously training used to be something that everyone had to obtain on their own. Agencies were charging the caregiver to obtain that one year of certification, but overtime that changed. Ms. De Leon said she does not usually charge too many people to begin with because she knows they are trying to get a job. Ms. De Leon said it was like applying for a certified nursing assistant (CNA) job, the worker has to be a CNA already if applying for a CNA job. The situation was looked at in that aspect, but this is not a CNA, it is a PCA. If someone is

coming to be a personal care worker, the person should know how to do personal care work. Ms. De Leon said she does offer the training for free, but does not pay during training, so that is something that her agency will have to do.

Ms. Hartranft said agencies now have the new cultural competency requirement, which is an additional eight hours of training to the previous required eight hours, so now the agencies are paying for 16 hours of training for every employee, which is an expensive process to get an approved curriculum. Ms. Hartranft said the training is actually a very substantial cost on the employers.

Ms. AbdulRahim asked if the regulation is new or if it has always been there.

Chair Phinney said this is adding to existing regulation that paying for training is a requirement.

Ms. AbdulRahim asked if it is based off the Board's previous recommendation.

Chair Phinney confirmed.

Ms. AbdulRahim asked if the regulation will go into the Know Your Rights document.

Chair Phinney said the Know Your Rights document is primarily to do with labor law and less with HCQC regulation.

Ms. Hartranft said the document talks about training in that training time is considered to be time worked by the employee if the training is required.

Ms. Samuels confirmed the Know Your Rights document consists of labor law, not necessarily HCQC regulation.

Chair Phinney said the regulation allows HCQC to hold the PCAs accountable to the requirement by having it in regulation.

Ms. AbdulRahim asked if it is a requirement for the agencies.

Chair Phinney confirmed.

Agenda Item 6: Informational Item – Progress update on HCESB recommendation regarding the Medicaid Home and Community Based Services Plan

Kirsten Coulombe, Social Services Chief, DHCFP

Kirsten Coulombe presented [Medicaid Implementation for HCESB Recommendations](#).

Ms. Coulombe said the survey sent to employers asking why they did not apply for the first round of \$500 payments has gotten 14 responses of about 50 recipients it was sent to. The survey was resent as well. Of the 14 respondents, nine provided their email addresses with interest in

applying for the first round of payments and have since been provided an application. Ms. Coulombe said that in the first round of payments, Medicaid was trying to be less burdensome to providers by allowing them to submit employee rosters in whatever format, however staff have found that it has created more of a headache to convert other formats into an excel. Going forward a template will be provided for the second round to make the process smoother. Ms. Coulombe is hoping to present the results of the survey once more responses are submitted. So far, the majority of respondents have said they missed the application deadline for the first round of \$500 payments. Some providers also responded that they were not serving any enrolled Medicaid recipients, which makes sense why they did not apply. Others said the application process was burdensome and one response was related to the tax implication. Ms. Coulombe said the majority of responses were that providers were interested in applying for that \$500 payment going forward.

Ms. AbdulRahim said workers are struggling to survive on \$11.00 with the cost of living so high. Every day workers have to make a painful choice between food, rent, and other bills. Other fields are paid double in wages and benefits with less stress. Workers thought the next round of \$500 checks was supposed to be in August. Ms. AbdulRahim asked what is happening with the situation, is there a delay, or did workers receive the wrong information about August.

Ms. Coulombe said the Supplemental Reimbursements Unit has reported working on sending the paperwork out for the 15% supplemental payments to PCAs, home health, adult day care, and adult day healthcare. As well as another percentage for intellectual disability waivers. There are a lot of American Rescue Plan (ARPA) initiatives that staff are working on. Ms. Coulombe said she cannot say the payments to personal care workers will be in August, however, can provide the Board a follow up. Work behind the scenes on templates and updated applications are still in progress. Staff hope to have better communication so there are not providers that miss the deadline on the second round of payments. Ms. Coulombe said there has also been some vacancies and the unit has been shorthanded.

Ms. Epstein said she does not recall recommending a survey for why providers did not apply, and that the subcommittee made a firm recommendation to reopen applications and make it mandatory for agencies to apply. Ms. Epstein said she is disappointed in the time this process is taking.

Ms. Coulombe said the Division cannot mandate that providers apply. Ms. Coulombe said the survey is an attempt to understand why providers did not apply the first time. Not all enrolled providers are currently serving Medicaid recipients, so the information could be misleading. Staff are trying to get better information on why someone did not apply the first time so that when there is a second round of payments, more can apply. If the application process is burdensome, that that is the feedback received in the survey, then staff can enhance the process and make it better, but there is not an ability to mandate. Medicaid does not have the authority to mandate that an agency apply on behalf of their workers. If there is something that is within staff control, then staff are happy to try to change that process and make it easier for providers.

Ms. Epstein asked if there would be a close date.

Ms. Coulombe said applications for the first round were reopened. The recommendation was to reopen applications and send a notice. Staff cannot mandate that providers are expected to apply, however that is why providers are being asked if they are interested. There is not a closed deadline at this time.

Ms. Epstein said she is very disappointed because the funds were set up to help frontline workers, and it has already been two years.

Robert Crockett said he does not want to wait to distribute the \$500 to workers and asked if there is a target disbursement date. Mr. Crockett asked if there is a target employment date.

Ms. Coulombe said she believes the date being considered was July 1st but would have to confirm with the Supplemental Reimbursements unit.

Mr. Crockett asked that because he did get ARPA distributions, if he could distribute the \$500 to his workers knowing that eventually Medicaid will catch up and asked if that was acceptable.

Ms. Coulombe confirmed and said the 15% and 14% payments are being issued and it was the hope that some providers would utilize that funding opportunity as a way to offset the \$500 payment to their workers. Certainly, providers are encouraged to take whatever action possible to get the money out to the workers. Medicaid would not be able to guarantee the number of \$500 payments until the application and validation process is completed, however if providers had a confidence level the number of employees who would obtain that \$500, then staff certainly would encourage providers to take whatever action they would feel comfortable with.

Mr. Crockett said as long as he can feel comfortable that Medicaid is going to eventually distribute the funds, he could distribute the money to workers right away as soon as he knows the target day.

Ms. Coulombe said she will follow up on the target date when more information is available, and that staff are working on determining that as well and trying to push it out to all providers.

Ms. AbdulRahim asked why the application cannot be mandated.

Ms. Coulombe said Medicaid does not have a relationship with the workers and do not enroll the personal care attendants. There is nothing aside from having the National Provider Identification (NPI) number set up in the system. Medicaid would not know who the workers are in order to issue any payment. A worker would have to enroll with Nevada Medicaid as a rendering provider, which would be tied to a billing provider as the agency. It is set up similar to how physicians are with hospitals that the physician is a rendering provider, and the hospital will be the billing for those scenarios. It would require a different structure that what is used. Additionally, Medicaid does not have pass through laws that are in some other states that they

are able to say due to those pass-through laws, any amount of dollars that the state would want to go to the workers, to mandate that on a private business would require pass through laws too, which again Nevada does not have.

Ms. AbdulRahim said the situation is urgent and is not something that can be delayed. Workers are suffering from not having this little bit of money. Ms. AbdulRahim asked why the situation is not urgent and that it seems like the issue is being pushed to the side. Workers need a date of when it is coming.

Ms. Schoen said given the facts that the State cannot require an employer to apply for this funding, if someone is working for an agency currently that has not applied for it, the first step might be for the worker to contact the employer and encourage them to apply. Because the State has their hands tied both bureaucratically and with what they are allowed to do, it should be the employer people are complaining to. Ms. Schoen said it is slow but would rather see it be slow and know that the money will eventually occur than have it done fast and find out where people who were abusing the system and taking the money that were not deserving of it. Put the pressure on the employers who did not apply.

Ms. Coulombe said regarding the recommendation for employers to report how they spend the 15% payment; staff are creating a survey to gather that information. Ms. Coulombe said she would be happy to share the results from that survey with the Board when available. Regarding the increase in reimbursement rate to \$25, personal care services are an area that has a priority. Ms. Coulombe said she is not able to share whether it is officially in the budget or not. One of the ARPA initiatives is to conduct a rate methodology, which will allow Medicaid to review the methodology that supports rates, which also captures information about inflation. A vendor to perform this work has not been selected yet, but an update can be given at the next meeting.

Ms. Epstein asked when the survey on the 15% payments will be sent out and asked why Ms. Coulombe cannot share what is in the budget.

Chair Phinney said no one in the executive branch are allowed to speak to what is in the governor's budget until the governor announces it, and that is the number one rule in executive branch employment. It is absolutely a requirement.

Ms. Coulombe said for the survey, staff are waiting on a list of providers. The survey is ready to go, it is just waiting for the Provider Enrollment Unit to get email addresses. Ms. Coulombe said the goal is to send out the survey by the end of August and can let the Board know when it is sent.

Ms. AbdulRahim asked why the information on wages is a secret, how to get the budget information and who she can talk to in order to get that information.

Chair Phinney said that it is not that everything is a secret about the wages, but about the governor's recommended budget. Staff are not allowed to speak to that until the governor

announces it and it is transmitted to the Legislature, which happens on a particular date. Chair Phinney said she thinks it is at the end of September but could get the exact date. What the Board has asked is that their recommendation be in the budget, but staff are not allowed to say publicly whether that is in the budget or not until the governor makes that official announcement. Chair Phinney said she can attest to the fact that the Division Kirsten works for, the Department that Ms. Coulombe and Chair Phinney both work for, and the Governor's Office have all heard the Board's recommendation and understand it needs to be in the budget as an item, at least as an item for special consideration. Staff are just not allowed to say the status.

Ms. AbdulRahim said it helps a lot to know staff put special considerations on the recommendation.

Ms. Epstein asked if there is a date for the second round of \$500 payments.

Ms. Coulombe said there is not a date yet, but staff will be sending out several notices once the date is figured out. Ms. Coulombe said she will share with the Board when there is an official announcement.

Ms. Epstein asked if the ARPA funding for other groups has been as slow and confusing as funds for home care workers.

Ms. Coulombe said there are two different sets of ARPA funding. The ARPA funding for home and community-based services is section 9817 and is separate than perhaps the governor's ARPA funding. What also may contribute to delays is that there needs to be approval from the legislature.

Ms. Epstein said the payment is urgent for many workers and it is tough for them right now. The whole industry is crumbling in a lot of ways for consumers and workers.

Mr. Crockett asked if staff already have the survey done and have administrative hurdles like getting emails, could Ms. Coulombe distribute the 15% survey to the Board so they can see it.

Ms. Coulombe said she can double check that the survey is good to sign off.

Agenda Item 7: Possible Action Item – Discussion and possible action to appoint a new representative of home care recipients to the HCESB Subcommittee on Systemic Racism & Economic Injustice

Kayla Samuels, Management Analyst I, Bureau of Health Care Quality and Compliance

Ms. Samuels said the agenda item is looking for a vote to replace the vacant position on the subcommittee and said Gerardo Luis Gonzalez had voiced some interest in filling that role. Ms. Samuels asked Mr. Luis Gonzalez if he would be interested in filling the seat on the subcommittee.

Mr. Luis Gonzalez confirmed.

Ms. Samuels asked Pierron Tackes if a vote was required to appoint Mr. Luis Gonzalez to the subcommittee.

Ms. Tackes recommended putting forward a motion and taking a vote.

Ms. Schoen motioned to replace Sue Wager with Mr. Luis Gonzalez for the Subcommittee on Systemic Racism and Economic Injustice. Ms. Wagner seconded the motion. The motion passed unanimously.

Ms. Samuels said the next meeting of the Subcommittee is Monday September 19th at 10:00AM over Teams and that the information will be available on the Board website.

Agenda Item 8: Informational Item – Update on Provider Type 30 & 83 enrollment figures

Wendy Montgomery, Provider Enrollment, DHCFP

Wendy Montgomery presented the updated [Provider Type 30 and 83 Enrollment Figures](#).

Ms. AbdulRahim asked what distinguishes the provider types.

Cathy Vairo that Provider Type (PT) 30 are personal care services provider agencies and PT 83 are personal care services for intermediary service organizations.

Ms. Hartranft said both PTs are personal care services, but there are two different programs that are offered by Medicaid. PT 30 is a traditional agency model where the agency is the employer on record and the agency has all the responsibility and training and staffing the clients who choose to be under that PT. PT 83 is called intermediary service organization, which is called and agency with choice program, which when members select that program, the member becomes the managing employer and the member is responsible for training and doing their own staffing. There are different PTs that can be chosen when a member who qualifies for it enrolls with Medicaid.

Ms. AbdulRahim asked if it is correct that both PTs are Medicaid providers but are just different programs that Medicaid offers.

Ms. Hartranft confirmed.

Ms. AbdulRahim asked which category she would fall under since she pays for her training.

Ms. Hartranft said she does not think the provider type should matter for who is paying for the training. It would matter when considering who the managing employer is. Someone either answers to the agency and the agency schedules the worker, which would be PT 30, or the

managing employer is the actual client and they organize their schedule and provide the training for the worker directly, which is PT 83.

Chair Phinney said her understanding is that often the family member caregivers are in PT 83.

Ms. Hartranft confirmed and said that PT 83 is perfect for a family. If a member wants to hire a family member, they will often go with PT 83 because they are the managing employer of their family member, and the agency has less involvement. The family would have more control and flexibility under PT 83 by becoming the managing employer.

Shanieka Cooper asked if PT 83 would be like herself or Ms. Epstein since they care for their children versus Ms. AbdulRahim, or if workers could do both family and agency clients, which would be PT 30.

Ms. Hartranft said it depends on how the member enrolls and Medicaid. It is how the member, the client with Medicaid, selects to manage their services. Family members still sometimes pick PT 30, but it is the way the member is choosing to receive their care and how much involvement they want from the agency.

Ms. Vairo confirmed.

Ms. Hartranft said it is PT 30 when an agency is hiring caregivers. PT 83 is where the member is recruiting directly for themselves.

Agenda Item 9: Possible Action Item – Discussion and possible recommendation to Director of DHHS to distribute a Know Your Rights bulletin to home care workers

Kayla Samuels, Management Analyst I, HCQC

Ms. Samuels presented the new content in the [Know Your Right bulletin](#). Ms. Samuels said one thing the Board was waiting for with the document was to get the Labor Commissioner's input. The Office of the Labor Commissioner has declined to come down on the document until a new Labor Commissioner is appointed. Ms. Samuels said to her knowledge, an appointment has not occurred yet. The concern is to get the bulletin in the Board's final recommendations by the time they are due in December. Ms. Samuels said what might be suggested for the Board is to make a recommendation to pass the Know Your Rights bulletin with the contingency that the Labor Commissioner review and approve it before it gets distributed, however that is at the discretion of the Board.

Ms. Cooper said she is excited to see some concrete positive changes happening because of the Board's work, and that the first issue she raised during the Subcommittee meeting was the Know Your Rights bulletin was missing a section about discrimination. Ms. Cooper shared her experience with discrimination while working in home care and said she is very glad to see reference to the CROWN Act included. Ms. Cooper said it is vitally important to pass the Know Your Rights document and to ensure dignity, respect, and equal treatment to all races in order to lift up standards in the home care industry for workers and those who they care for.

Ms. Epstein said the Know Your Rights document is very needed and is a good thing that clarifies so much for the worker and for the employer also.

Chair Phinney called for a motion to approve the Know Your Rights document and recommend it be required for distribution, as well as that the Labor Commissioner, when appointed, would review and approve the document as well.

Ms. AbdulRahim motioned to recommend that a copy of the signed notice must be on file for every worker before they are hired, within 90 days of the original notice being issued for current employees, and within 180 days of any revised versions of the notice being issued for current employees, and that the State should be required to review and update the notice, if necessary, annually. Ms. Abdul Rahim added that this would happen once the Labor Commissioner is appointed.

Chair Phinney said she will personally work with the Labor Commissioner and the Director's Office to try to get approval of the Know Your Rights bulletin as soon as the Labor Commissioner is appointed.

Ms. Cooper seconded the motion.

Mr. Crockett said when agencies are onboarding caregivers into their system, forms are done electronically and workers can fill out paperwork electronically, which is then kept in the system. Mr. Crockett asked if that will be an acceptable communication for the Know Your Rights document.

Chair Phinney said she sees no objections and that the State uses DocuSign.

Mr. Crockett said he wanted to make sure before distribution that electronic communication is allowed.

Chair Phinney said she thinks that is a reasonable request.

Chair Phinney called for a vote on the motion. The motion passed unanimously.

Agenda Item 10: Possible Action Item – Discussion and possible recommendation to Director of DHHS regarding job-related expenses for home care employers and workers

Shanieka Cooper, Representative for Home Care Employees

Ms. Cooper said her family is having a hard time and is being threatened by not being able to afford to move. Thousands of home care workers share similar struggles and are struggling to be able to do things like gas and pay rent or bills. Home care workers cannot afford extra expenses that are required to do the job. In addition to training, tuberculosis (TB) testing, background checks, physicals, and personal protective equipment (PPE), are all being paid for by the worker,

which hurts the home care industry. Ms. Cooper said these are things workers should not have to worry about. When the Board calculated the \$25 reimbursement rate with \$15 minimum wage recommendation, the figures summed all agencies are covering the job-related costs. Ms. Cooper motioned that the Board recommend the Department of Health and Human Services should clarify the regulations that personal care agencies must cover all related expenses that are either required by the State to be a home care worker, such as TB or the background check, or are necessary to perform home care duties, such as PPE.

Chair Phinney reiterated that the motion would be that the Board is recommending to the Department of Health and Human Services director to require that all those required items, TB shots, background checks, and PPE included without limitation are covered by the employer.

Ms. Cooper confirmed.

Ms. Epstein said in most health care setting, those things are covered, so it has been different in the home care industry and would be nice to have home care move towards where other healthcare facilities cover it. Ms. Epstein said the topic relates to her search for respite care for her son. Those she finds who may be interested in assisting with respite cannot do it due to the certification costs.

Ms. Wagner seconded Ms. Cooper's motion.

Kristi De Leon said she thinks the is great. Ms. De Leon said as a small agency there are a lot of costs to endure because the reimbursement is so low. The goal of a \$25 reimbursement would be great, but right now the rate is around \$17 and respite care in being underpaid at \$8 an hour. That is why it is hard to find respite care. Businesses are losing money on respite. Ms. De Leon says the cost of background checks are \$62 but then sometimes the person fails the background check and does not work for her. Ms. De Leon said she also conducts an orientation that is two 8-hour days, saying she either has to conduct the orientation or pay someone to conduct as well as supply all the tests that are needed. It all adds up. Ms. De Leon said to pay all the onboarding and training costs is very expensive and she sometimes does not take it out of the check, though it is supposed to go out of the check. Ms. De Leon said she understands the struggle of the workers. Ms. De Leon said she always needs more workers, but that can add up to \$200 a person, which is a lot for small agencies.

Mr. Crockett said he does not think caregivers should ever have to pay for anything and does believe that smaller agencies are going to struggle. Mr. Crockett said since the proposal talks about job related costs for home care, employers and caregivers, the Board needs to look at what is required and what is required that adds no value. Mr. Crockett said he got fingerprinted for the 4th time because it is required every five years, saying his fingerprints do not change and the background check should just be run without redoing them. There are also many states that do not required TB for personal care. Mr. Crockett said he checked with a major hospital system last week and they get a baseline TB test to start and then if they are in a non-TB area where they would be exposed, there is a TB screening every year and that is it. Caregivers do not have to be sent in twice to get TB. Mr. Crockett said the added cultural competency training will add \$50,000 a year to expenses. The training is a valuable thing. Mr. Crockett requested a

presentation on cultural competency training at the next meeting. Mr. Crockett said if there are a lot of expenses, eventually it comes out of a caregiver's paycheck. Looking at the individual requirements, there are probably things that agencies need to do more or that need to be looked at to reduce cost and leave more money in the pool for caregivers.

Chair Phinney suggested that Ms. Cooper would consider an amendment that also directed the department to look for regulatory relief opportunities that save money without compromising safety unreasonably and asked Ms. Cooper if she would consider that.

Ms. Cooper confirmed the amendment and thanked the Board members for exploring solutions to save both the workers and employers money.

Ms. Hartranft said the amendment speaks to her point of workers do not want to pay the upfront costs, but agencies are having trouble finding people who want to pay those costs as well, so end up taking the burden of paying for it. Even when agencies are paying for it, people do not want to jump through hoops. There are many things people have to do before they can start working. If the Board could figure out a way to lessen the burden of the regulations, such as branching home care separately from medical facilities, that would make a difference. Ms. Hartranft says she oversees agencies in Texas, Arizona, Nevada, and New Mexico, and that the two step TB requirement is very Nevada specific. It is not done in any other states she oversees. Ms. Hartranft said the statement of good health is very expensive and she has not heart of that in any other medical program, so the regulations could be less burdensome for everyone, the industry would benefit.

Chair Phinney said much of that can be worked on through HCQC and herself. Chair Phinney said the way that mechanism works is that there are time limits surrounding the Legislative Session, so the work would need to be done and ready to go after the next Legislative Session to be finalized. That does not impact the Board in making a recommendation to HCQC to do that. The recommendation gives HCQC the energy to do it.

Ms. Schoen said the topic is very layered and that she is in favor of the motion. Ms. Schoen said she thinks the motion is inadequate as it is. The level of administrative burden that gets passed down to the employee in the home care environment is massive compared to the administrative burden in similar fields. It does take a long time to onboard and the costs of turnover is huge, because the cost of hiring is huge. Ms. Schoen said respite is impossible to get and people cannot get anybody to work as a personal care worker for this amount of money. There are no other options at the State at this time for medical respite, for workers or the people they serve. There is much more money flowing into other systems, such as hospitals and nursing homes, so they can afford to offer those job-related expenses. What the industry is looking for is parity with those systems in terms of the amount of money that flows into the home care system. Those other environments are getting massively bigger dollars. Ms. Schoen suggested emailing ideas for cost saving solutions to Ms. Samuels for a future agenda item to discuss an expansion to the motion. Ms. Schoen said one suggestion could be the State coming up with curriculum and making it available online for all personal care attendants or agencies collaborating to hold large trainings together that would cost less. Ms. Schoen said she is in favor of the motion as it stands, however also thinks that the Board could be more specific.

Chair Phinney called for a vote on the motion made by Ms. Cooper and seconded by Ms. Wager. The motion passed unanimously.

Agenda Item 11: Informational Item – Discussion on current HCQC licensing requirements as it regards to personal care agencies

Cody Phinney, Chair, Deputy Administrator, Division of Public and Behavioral Health (DPBH)

Chair Phinney presented [HCQC Enforcement](#).

Ms. Schoen asked about the definition of a natural person.

Chair Phinney said that is a big legal question in Nevada among legal scholars and would like to revisit that question another time.

Ms. Wagner asked if there is anything the Board can do about shortening the six-year period between inspections.

Chair Phinney said the Board could make a recommendation to the Department about that, but it could not be today since the agenda item is informational only. Chair Phinney said that when HCQC receives a complaint they have to investigate the complaint. Evidence cannot be taken solely on what has been presented, HCQC needs to gather their own evidence that the violation has occurred. Once that should happen, it can then move into a penalty process. There is a great deal of due process afforded to an agency or any other kind of facility to make sure HCQC is not acting unreasonably.

Mr. Crockett said most people probably feel uncomfortable with the six years and suggested a possibility of agencies submitting a desk audit on a frequency more than six years.

Ms. Cooper said she thinks six years is a long time and agreed with Mr. Crockett.

Chair Phinney said the people of HCQC do a lot of very difficult work and there is a long list of more than 1,000 facilities of various types that they do inspect. The issue is not a matter of not doing work or not caring, they work very hard and develop all these regulations. Chair Phinney said she is not 100% satisfied with that scheduling, but it is where HCQC is right now.

Agenda Item 12: Informational Item – Discussion on the impact of home care on the overall healthcare industry

Kayla Samuels, Management Analyst I, HCQC

Ms. Samuels presented [Home Care Effects on the Overall Health Industry](#) saying the presentation is for the Board to include in the end of year report to the Director to explain why work needs to be done to better home care.

Ms. Wagner asked if there are studies more recent than 1994.

Ms. Samuels said that unfortunately for those quantitative studies that show the numbers easily, there were not peer reviewed sources available. Most of the information in the presentation is a mix of older and newer information with sources as recent as 2022. There is just a limitation on what is available that is peer reviewed and accepted. Ms. Samuels said what she noticed in her research was that funding for these types of studies is far and few between.

Ms. Schoen suggested looking at the Kaiser Family Foundation databank for current information to include.

Ms. De Leon said the presentation contained very important information. Ms. De Leon said she has seen people die because they did not have the care home care workers provide. A lot of times people do need more care than what they are receiving but cannot afford it. The industry does not have enough caregivers and not able to offer enough money, workers are not coming in, not caring for people, and those people die. People are going into the hospital when a caregiver could have been there to foresee the issue and get them to their doctor's appointment or make sure they are simply taking their medication. It is very important.

Ms. Epstein said the presentation shows that investing in quality home care through raising the reimbursement rate and minimum wage will lead to better health outcomes for consumers and long-term savings for the state. Home and community-based services are the future. The community is the one that reaps the benefits, it is not just the individuals who need the services. Citizens, families, the economy, and communities all reap the benefits when there is investment in home and community-based services.

Mr. Luis Gonzalez agreed with Ms. Epstein and said the presentation demonstrates that home care is a crucial area for the state to invest in. Mr. Luis Gonzalez said that since he receives home care services, he does not have to go to the hospital as much as he might have and does not have to go to expensive nursing home services. It saves Nevada State taxpayer money and home care services are very positive for the environment and for the well-being of the state and for the individuals because if people are not forced to move out of their house, it makes a big difference in their long-term care being surrounded by people that are familiar with their care. People can continue with their normal routine and do things they enjoy.

Mr. Crockett said the personal care program is a cost saver for the state, even at a \$25 or \$30 rate. Mr. Crockett asked if there is any way to get the projected cost savings to Medicaid.

Chair Phinney said Medicaid has an economist who might be able to do the work to find that information and offered to ask the Director's Office and the Administrator of Medicaid if they are able to provide the requested information for the Board.

Agenda Item 13: Possible Action Item – Discussion and possible action to determine date of the September HCESB meeting

Kayla Samuels, Management Analyst I, HCQC

Ms. Samuels that due to unforeseen issues, the next meeting date for HCESB needs to be rescheduled. Ms. Samuels took a vote on whether there will be quorum for a meeting on Tuesday October 4, 2022, at 2:00pm.

All board members present confirmed attendance except for Ms. Wagner.

Ms. Samuels said the next HCESB meeting will be on Tuesday October 4, 2022, at 2:00pm, and the subsequent meeting will be on Tuesday October 25, 2022, at 2:00pm as scheduled so long as there is quorum.

Agenda Item 14: Possible Action Item – Recommendations for future agenda items.

Ms. Samuels said she has recorded recommendations for possible agenda items on the cultural competency training and a statistician's report on Medicaid savings due to home and community-based services.

Mr. Crockett said he would like to talk about a desk audit or a different way of conducting surveys for more regular review of PCAs and asked Chair Phinney is the topic is in the scope of the Board.

Chair Phinney said she thinks a recommendation from the Board on the subject would be very helpful and has no objection to the Board discussing the topic.

Ms. Schoen requested an agenda item on ISO services and respite allowance.

Ms. Samuels said there will be a presentation on respite for the next meeting from representatives at Aging and Disability Services Division (ADSD) who are also working with Medicaid.

Ms. Schoen suggested an agenda item to discuss possible solutions to help employers and the State save costs.

Ms. De Leon asked if there could be a conversation on job-related expenses before the recommendation is presented.

Ms. Samuels said the next meeting should be the last meeting dedicated to making recommendations, subsequent meetings will be focused on bring the end of year report together and finalizing the report.

Ms. AbdulRahim asked about future recommendations concerning the \$500 payments.

Ms. Coulombe said updates will be sent to Ms. Samuels and Chair Phinney for the next meeting and that if there are questions staff will be attending to answer.

Ms. Wagner asked if there will not be a meeting in September, but instead two in October.

Chair Phinney confirmed.

Agenda Item 15: Informational Item – Discussion on Board member experiences regarding family caregiving in preparation for presentation on consumer directed models

Chair Phinney tabled the agenda item for next meeting.

General Public Comment

Tracey Richards said she is regrettably not part of the Board and introduced herself as a home care worker of over 16 years. Ms. Richards said the Board is covering big issues, such as systemic racism and the \$500 payments. Ms. Richards said the Board is more focused on the 25% who did not apply than the 75% who have yet to get the second round of payments. The cost of living is a struggle. Ms. Richards said regarding systemic racism, clients need to know there are penalties for certain behaviors, if they show any kind of racism. Ms. Richards said she has been hit by clients, and clients need to understand there are penalties. Ms. Richards thanked the Board for their work. Home care workers are essential and needed.

Dawn Ralenkotter introduced herself as a home care worker of over ten years. Ms. Ralenkotter said she is working for two agencies to make ends meet and it is hard to do so. Ms. Ralenkotter said it is hard with cost of living, gas, and paying for training, and that it would be nice to not live paycheck to paycheck. Ms. Ralenkotter thanked the Board for their work.

Chair Phinney said it is very important to have general participation in addition to the board members, that the system of government does not work if there is not general participation.

Allan Ward commemorated the Board on their work on what both the caregivers and businesses need. Until the reimbursement rate changes, improvements cannot be done.

Ms. Schoen thanked Ms. Cooper for the interview she did with the news in Las Vegas emphasizing the reality of people in her situation, and that Ms. Cooper did a great job.

Ms. Cooper thanked the Board and that the topics discussed in the meeting are reason why the reimbursement rate needs to be raised. Ms. Cooper commended everyone for taking time out of their days to come to the meeting.

Adjournment – Cody Phinney, Chair Designee

Meeting Adjourned at 4:45 p.m.