

NEVADA

Overview

All facilities offering adult day care (ADC)--a social model--or adult day health care (ADHC) must be licensed by the Bureau of Health Care Quality and Compliance in the Nevada Department of Health and Human Services. Before a license is issued, applicants must receive training to recognize and prevent the abuse of older persons. If an applicant has completed such training within the year preceding the date of the license application and the application includes evidence of the training, the applicant shall be deemed to have complied with the requirement.

Nevada provides ADC under a Medicaid 1915(c) Frail Elderly Waiver program and under the Community Options for the Elderly (COPE) program--a non-Medicaid program. The state also provides ADHC under a 1915(i) Medicaid State Plan Home and Community-Based Services program.

All Medicaid providers must be licensed, and 1915(i) State Plan providers must also be certified by the Nevada Department of Health Care Financing and Policy (DHCFP). Waiver program providers have additional requirements outlined in the waiver manual.

The Department of Human Resources Division for Aging Services also funds ADC through grants to licensed providers who, in addition to licensure, must also comply with additional service specifications. This profile contains licensing requirements, grant program requirements, and Medicaid 1915(i) State Plan certification standards.

Definitions

Licensing

Facilities for the care of adults during the day means an establishment operated and maintained to provide care during the day on a temporary or permanent basis for aged or infirm persons. The term does not include a halfway house for recovering alcohol and drug abusers.

Grant Program

Adult day care/social model is the provision of personal care for adults in a supervised, protective, congregate setting during some portion of a 24-hour day. Services typically include social and recreational activities, counseling, nutrition, memory retention activities, music therapy, pet therapy, and arts and crafts.

Medicaid 1915(i) State Plan

Adult Day Health Care. The goals of ADHC services are to: (1) safeguard participants' safety and well-being and maintain and/or enhance their quality of life; and (2) improve and maintain participants' level of functioning or lessen any decline in functioning due to disease and/or the aging process.

ADHC facilities provide medical services on a regularly scheduled basis as specified in a participant's care plan. Services must be provided in a non-institutional community-based setting, encompassing both health and social services needed to ensure participants' optimal functioning. The inclusion of "health" in a day care setting should indicate that elements of health care are provided and that it is not just a socialization model for seniors.

Parameters for Who Can Be Served

Licensing. *None identified.*

Grant Program. Providers may not serve participants who are bedridden, unmanageable, have a contagious disease, or who lack the stamina needed to attend the program for 5 hours per day. Persons who are HIV positive or have AIDS are not considered contagious.

Medicaid 1915(i) State Plan. Providers may serve individuals age 18 or older who meet the criteria for placement in a nursing facility and are in need of the medical and social services provided by ADHC.

Medicaid 1915(c) Waiver Program. An individual must meet the eligibility criteria for a nursing home level of care.

COPE Program. The program is intended to assist seniors who are in need of the level of care typically provided in a nursing home, which generally means they are unable to bathe, use a toilet, or feed themselves without assistance.

Inspection and Monitoring

Licensing. Licensed facilities may be entered and inspected at any time to ensure compliance with--or to prevent a violation of--licensing requirements. Licenses are issued for 1 year and must be renewed annually. An annual unscheduled survey is conducted after initial licensure.

Medicaid 1915(i) State Plan. As part of the contracting process, DHCFP staff conduct an on-site review of the ADHC facility to determine whether certification requirements are met. Subsequent to the initial review, DHCFP may schedule an on-

site review at any given time (at least annually), without cause, to ensure that the facility maintains compliance with Medicaid requirements.

DHCFP staff also conduct an annual review to ensure participants' health and welfare. Additionally, a review of providers is conducted annually to verify that they continue to meet licensure requirements and to ensure that claims are paid in accordance with the State Plan and all federal and state regulations.

Grant Program. No provisions identified.

Required and Optional Services

All ADC and ADHC programs furnish socialization, social activities, nutrition services, and supervision to ensure safety. They also monitor participants' health and functioning at a basic level to determine if the program can continue to meet participants' health and functional needs. The table below lists additional required and optional services.

Required and Optional Services	Adult Day Care		1915(i) State Plan Adult Day Health Care	
	Required	Optional	Required ¹	Optional
ADL Assistance	X		X	
Health Education and Counseling			X	
Health Monitoring	X		X	
Medication Administration		X	X	
Nursing Services			X	
Physical Therapy, Occupational Therapy, or Speech Therapy		X	X	
Skilled Nursing Services				
Social Services		X	X	
Transportation				X

1. Restorative therapy is also a required service.

Medication Provisions

Licensing. Providers must establish procedures for participant self-medication and medication administration by an employee.

Grant Program. Participants in social ADC programs must be able to administer their own medications. If the facility accepts a participant who is unable to self-administer medications, a licensed practical nurse (LPN) may provide this service under the supervision of a contracted registered nurse (RN).

Medicaid 1915(i) State Plan. Medication assistance is provided for participants receiving adult day health services. An RN, or an LPN under the supervision of an RN, will administer participants' medications while they are in the facility's care.

Staffing Requirements

Licensing

Type of Staff. Each facility must have the number and kind of employees required by the facility's physical characteristics, the number of participants, and the services to be provided. The *facility director* must designate an *acting director* to act when the director is absent from the facility. At least one employee trained to administer first-aid and cardiovascular pulmonary resuscitation must be on the premises at all times.

Staffing Ratios. *No ratios identified.* Participants must be supervised by an employee of the facility at all times during the operational hours of the facility.

Grant Program

Type of Staff. *None identified.*

Staffing Ratios. *No ratios identified.* Participants must be supervised by a facility employee at all times during the facility's operational hours.

Medicaid 1915(i) State Plan

An ADHC facility must employ persons with the necessary education, skills, and training to provide the required services. Medical services must be provided by Nevada licensed/certified personnel.

Type of Staff. The facility must employ a *program director* to develop plans and policies for the facility's operation; the recruitment, employment and training of qualified staff; and for the supervision and appropriate disciplinary action of staff.

The facility must employ a *registered nurse* to oversee and provide medical services ordered by a physician. An RN, or *licensed practical nurse* under the supervision of an RN, must be on duty during the hours in which a Medicaid-eligible participant is in the facility.

The facility must have direct care staff who observe participants' functioning and provide assistance to participants with activities of daily living.

The facility must also provide for activity staff--or other staff as necessary--to provide the required services and ensure that each participant's needs are met.

Staffing Ratios. *None identified.*

Training Requirements

Licensing. All employees and volunteers must participate in a program of general orientation to inform them of the facility's programs, policies, and services, and must receive training at the facility on a regular basis for not less than 12 hours per year.

Before a license is issued or renewed, the licensee must receive training in the prevention and recognition of abuse of older persons. An administrator or other person in charge of operations, and all employees who will provide care to participants, must also receive the same training before care is provided to participants, and annually thereafter.

Grant Program. Staff and volunteers must be provided training related to working with adults with disabilities.

Medicaid 1915(i) State Plan. Staff must have the necessary training to provide the Medicaid required services.

Location of Licensing, Certification, or Other Requirements

Medicaid Services Manual, Adult day Health Care. Department of Health Care Financing and Policy. [July 1, 2014]

<http://dhcftp.nv.gov/MSM/Archives/CH1800/Ch%201800%20Final%205-10-11.pdf>

Service Specifications Adult Day Care. State of Nevada Aging and Disability Services Division. [July 2009]

http://www.nvaging.net/grants/serv_specs/AdultDaycare7-09.pdf

Nevada Administrative Code Chapter 449. Medical and Other Related Entities. General Provisions. This site includes licensing requirements for many types of medical facilities, including Facilities for Care of Adults During the Day, which provide adult care and adult day health care.

<https://www.leg.state.nv.us/NRS/NRS-449.html>

Information Sources

Michele Smothers
Bureau of Health Care Quality and Compliance
Department of Health and Human Services
Nevada Division of Public and Behavioral Health

REGULATORY REVIEW OF ADULT DAY SERVICES: FINAL REPORT, 2014 EDITION

Files Available for This Report

FULL REPORT

Executive Summary <http://aspe.hhs.gov/daltcp/reports/2014/adultday14es.cfm>
HTML <http://aspe.hhs.gov/daltcp/reports/2014/adultday14.cfm>
PDF <http://aspe.hhs.gov/daltcp/reports/2014/adultday14.pdf>

SEPARATE STATE PROFILES

[**NOTE:** These profiles are available in the full HTML and PDF versions, as well as each state available as a separate PDF listed below.]

Alabama	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-AL.pdf
Alaska	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-AK.pdf
Arizona	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-AZ.pdf
Arkansas	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-AR.pdf
California	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-CA.pdf
Colorado	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-CO.pdf
Connecticut	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-CT.pdf
Delaware	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-DE.pdf
District of Columbia	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-DC.pdf
Florida	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-FL.pdf
Georgia	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-GA.pdf
Hawaii	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-HI.pdf
Idaho	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-ID.pdf
Illinois	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-IL.pdf
Indiana	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-IN.pdf
Iowa	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-IA.pdf
Kansas	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-KS.pdf
Kentucky	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-KY.pdf
Louisiana	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-LA.pdf

Maine	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-ME.pdf
Maryland	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-MD.pdf
Massachusetts	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-MA.pdf
Michigan	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-MI.pdf
Minnesota	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-MN.pdf
Mississippi	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-MS.pdf
Missouri	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-MO.pdf
Montana	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-MT.pdf
Nebraska	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-NE.pdf
Nevada	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-NV.pdf
New Hampshire	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-NH.pdf
New Jersey	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-NJ.pdf
New Mexico	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-NM.pdf
New York	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-NY.pdf
North Carolina	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-NC.pdf
North Dakota	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-ND.pdf
Ohio	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-OH.pdf
Oklahoma	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-OK.pdf
Oregon	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-OR.pdf
Pennsylvania	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-PA.pdf
Rhode Island	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-RI.pdf
South Carolina	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-SC.pdf
South Dakota	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-SD.pdf
Tennessee	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-TN.pdf
Texas	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-TX.pdf
Utah	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-UT.pdf
Vermont	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-VT.pdf
Virginia	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-VA.pdf
Washington	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-WA.pdf
West Virginia	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-WV.pdf
Wisconsin	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-WI.pdf
Wyoming	http://aspe.hhs.gov/daltcp/reports/2014/adultday14-WY.pdf