

PUBLIC MEETING NOTICE
BOARD OF TRUSTEES OF THE FUND FOR HOSPITAL CARE TO
INDIGENT PERSONS (BOARD)
Nevada Revised Statute (NRS) 428.195
March 9, 2017, 12:00 noon

ADOPTED MINUTES

Attendance: Humboldt County Commissioner French, Nye County Commissioner Wichman, Eureka County Commissioner Sharkozy & Clark County Social Services Director Pawlak. (NACO Staff: Jeff Fontaine & Amanda Evans)

Other Attendees: Bill Welch, Nevada Hospital Association; Deb Cisco, Nevada DHHS and Sarah Lamb, Nevada DHHS

The meeting was called to order at 12:00P.

1. **Public Comment.** None was given.
2. **Approval of Agenda.** The agenda was approved on a motion by Commissioner Wichman with second by Commissioner Sharkozy.
3. **Approval of Minutes for the August 3, 2016 Meeting of the Board.** The minutes were approved on a motion by Commissioner Wichman with second by Commissioner Sharkozy. Commissioner Wichman abstained as she was not appointed to the Board at the time of the last meeting.
4. **Update on Possible Legislative Measures that May Impact the Fund for Hospital Care to Indigent Persons.** Jeff informed the Board that there was currently no legislation specific to the Fund but there were some items regarding Medicaid . He noted that the potential repeal of the Affordable Care Act would affect Medicaid and that those potential changes could create question on how the Fund has evolved and informed the Board that he would keep them apprised as new information is received. Bill Welch concurred with Jeff's statements and added that repeal of the ACA would have significant impacts to the supplemental fund and have significant local government impacts within five years.
5. **Update on the Status of the Fund for Hospital Care to Indigent Persons.** Jeff referenced the spreadsheet included in the agenda packet and noted that per previous Board decisions the policy has been to maximize the Medicaid match function of the Fund. He informed the Board that NACO's contract amount for administering the Fund had been transferred on the approval of the Board. The Board was informed that the State hadn't budgeted the free care obligation and that the current contract will hold the State harmless for increases to the free care obligations for three years. He noted that hospital

claims had been paid in 2016, the long term care fund has \$2 million in reserves and that the Board would be able to approve additional claims.

6. **Discussion and Possible Approval to Expand the Uses of the Fund for Hospital Care to Indigent Persons.** Jeff informed the Board that he has been talking with the counties and hospital's regarding maximizing their IAF claims to avoid a large balance in the Fund that could be subject to sweeping at the State level. He noted that in anticipation of a lack of IAF claims that concepts for other social services purposes have also been discussed. He noted that one of the hospitals' main concerns is discharging patients with no place to go and Mike Pollock asked for clarification of the statutory requirements of the IAF and Supplemental Fund. The Board was informed that statutory language states intake to discharge and Bill Welch stated that there is some confusion between the NRS and the NAC as written and that the Hospital Association is having their legal team look into the definition, however initial findings are that there are more limitations than what they had hoped. Commissioner Wichman said that Dr. Josh Green has proposed using Medicaid to diagnose housing issues and that could create a cost savings to social services. Mike Pollock stated that a wraparound waiver program could have more far reaching results than current housing programs, noting that housing equals better healthcare and mental health status and that type of program focuses on keeping stable housing and a support system.
7. **Discussion and Possible Action for the Board to Enter into an Agreement with the Division of Health Care Financing and Policy of the Department of Health and Human Services whereby the Board Agrees to Transfer an Agreed Upon Amount of Money Each Year from the Fund to the Division for the Division to Include in the State Plan for Medicaid an Enhanced Rate of Reimbursement for Hospital Care Provided to Recipients of Medicaid or to Make Supplemental Payments to the Hospital for the Provision of Such Hospital Care through Increased Federal Financial Participation and/or to Satisfy a Portion of the Obligation of a County to Pay the Nonfederal Share of Expenditures Pursuant to NRS 422.272.** Jeff informed the Board that he is looking for affirmation for the transfer of \$30million and Deb Sisco stated that the transfer would be a one year only request. Jessica Colvin inquired as to how much the gain would be on the transfer and Ms. Sisco stated that the transfer would equate to approximately \$82M. The transfer was approved on a motion by Commissioner Wichman with second by Commissioner Sharkozy.
8. **Public Comment.** None was given.

The meeting was adjourned at 12:32 on a motion by Commissioner Wichman with second by Commissioner Sharkozy.