State Agency Mission
The mission of Aging & Disability Services Division is to ensure the provision of effective supports and services to meet the needs of individuals and families, helping them lead independent, meaningful and dignified lives.

Populations Served
- Older Adults
- Adults with Physical Disabilities
- Adults with Developmental Disabilities
- Individuals with Traumatic and/or Acquired Brain Injuries
- Individuals with Behavioral Health Conditions
- Individuals with Substance Use Disorders

Top Five Agency Policy Priorities
1. Addressing Budget Issues
2. Mitigating Social Isolation
3. COVID-related closures of providers
4. Addressing diversity, inclusion, and equity in services
5. Lack of affordable housing

Organizational Structure
The director is hired by a higher ranking official, but serves at the convenience of the Governor, and oversees a staff of 1,195 FTE.

Local Network
- 3 Independent Living Centers

The State Agency also performs the functions of Area Agencies on Aging in Nevada.

Agency Funding Sources
Total FY2020 Budget $369,539,962

- 51% State Appropriation
- 12% OAA
- 32% Medicaid
- 3.5% Fees/Fines
- 1% Other
Nevada
Aging & Disability Services Division

Governor

*Dept. of Health & Human Services

Division of Health Care Financing & Policy
  - Medicaid

Public & Behavioral Health Division
  - Licensure & Regulation
  - Survey & Certification

Aging & Disability Services Division
  - Medicaid Waiver
  - Aging & Adult Services
    - State LTC Ombudsman
  - Licensure & Regulation

Commission on Aging

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- Aging or Physical Disability Services and Agency or Division with Multiple Functions
- Medicaid Services
- Long-term Care Ombudsman
- Provider Regulation and Oversight
- Advisory Board
- Denotes an advisory board or a contractual/indirect reporting relationship.
- * Denotes Cabinet-level Agency
### Responsibilities of Nevada’s Aging & Disability Services Division

<table>
<thead>
<tr>
<th>Aging &amp; Adult Services</th>
<th>Medicaid Services</th>
<th>Responsibilities for Provider Management</th>
</tr>
</thead>
<tbody>
<tr>
<td>Set statewide aging policy</td>
<td>Administer Medicaid State Plan Services</td>
<td>Regulate institutional providers</td>
</tr>
<tr>
<td>Set statewide disability policy</td>
<td>Administer Medicaid HCBS waiver(s)</td>
<td>License institutional providers</td>
</tr>
<tr>
<td>Administer Older Americans Act (all programs except SCSEP)</td>
<td>✓</td>
<td>Regulate HCBS providers ✓</td>
</tr>
<tr>
<td>Administer Senior Community Service Employment Program</td>
<td>✓</td>
<td>License HCBS providers ✓</td>
</tr>
<tr>
<td>Administer a state-funded aging &amp; disability program</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>Manage state Aging &amp; Disability Resource Center network</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>Administer the State Health Insurance Assistance Program</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>Provide Adult Protective Services (18+)</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>Provide Elder Protective Services only (60-65+)</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>Operate state-owned institutional facilities</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>Oversee guardianship program</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Serve as state guardian</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Oversee Centers for Independent Living</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>Administer State Vocational Rehabilitation Program</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Administer State Assistive Technology Program</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>Manage No Wrong Door system</td>
<td>✓</td>
<td></td>
</tr>
</tbody>
</table>
Key State Initiative

**Nevada COVID-19 Aging Network (Nevada CAN) Rapid Response**

In March 2020, all older adults in Nevada (and across the U.S.) were encouraged to stay home to reduce their risk of exposure to COVID-19 due to the increased potential for negative consequences, including a dramatically higher risk of death than among the younger population. Aging services leaders in Nevada immediately recognized the potential impact social distancing could have on physical, mental, and social health, and that an increased demand for support could create an ‘aging services crisis’ alongside the well-recognized public health and financial crises.

By April 1st, Nevada had planned and launched the *Nevada COVID-19 Aging Network (Nevada CAN) Rapid Response*. Bringing together the State Unit on Aging, Nevada’s universities, community-based and county aging services agencies, this coordinated, statewide mobilization effort sought to rapidly identify elders’ needs and connect them with priority services to enable them, as stated by Governor Sisolak, to “Stay Home for Nevada.” Leveraging Nevada 2-1-1 and the state’s Aging and Disability Resource Centers (Nevada Care Connections), a brief elder needs survey was launched to identify elder needs.

Each elder was triaged to specific action teams, each targeting priority needs, including:

1) food and medication delivery;
2) virtual social support; and
3) telehealth services.

Each action team mobilized a range of partners and volunteers at the state and local levels to fulfill the elders’ needs and ensure they remained well-supplied, free from social isolation, and connected to needed healthcare services while they remained at home during the pandemic. During the first six months of this effort, Nevada CAN received 1,640 requests for assistance, with 2,557 referrals for service. In addition, thousands more elder Nevadans were served by the partners collaborating within Nevada CAN’s three action teams, including delivering over 200,000 meals, more than 2,000 hours of virtual social support and over 6,000 telehealth visits.

See [https://www.nevada211.org/seniors-covid19-resources/](https://www.nevada211.org/seniors-covid19-resources/)