



STAFF REPORT

Report To: Board of Supervisors **Meeting Date:** May 21, 2020

Staff Contact: Nicki Aaker (naaker@carson.org); Mary Jane Ostrander (mostrander@carson.org)

Agenda Title: For Possible Action: Discussion and possible action regarding a proposed increase in Cascade of the Sierra's purchase order (PO) from \$43,398.60 to a total amount not to exceed \$60,000 for fiscal year (FY) 20 and a proposed increase for the FY 21 PO for a total amount not to exceed \$60,000. (Nicki Aaker, naaker@carson.org and Mary Jane Ostrander, mostrander@carson.org)

Staff Summary: Pursuant to Nevada Revised Statutes (NRS) Chapter 428, Carson City pays for long term care costs for residents that are over income for Medicaid and unable to pay for their basic needs of long-term care. To date, \$42,279 has been paid for invoices through March. An additional \$16,601.40 needs to be added to the PO for invoices through June 2020. Current projection was based on previous year's rates. Future projection is based on current request/rate.

Agenda Action: Formal Action / Motion **Time Requested:** Consent

Proposed Motion

I move to approve the increase of Cascade of the Sierra's PO for fiscal years 2020 and 2021 as presented.

Board's Strategic Goal

Quality of Life

Previous Action

N/A

Background/Issues & Analysis

Pursuant to NRS Chapter 428 and the Carson City Health and Human Services (CCHHS) Guidelines and Standards previously adopted by the Board of Supervisors, Carson City pays for long term care costs for residents that are over income for Medicaid and unable to pay for their basic needs of long-term care. Applicants are required to first receive a denial from Medicaid before they are eligible for assistance from CCHHS. The applicant's income goes toward the payment of the facility with the exception of \$35 for personal care costs. Carson City pays the balance. CCHS Guidelines and Standards Section 3.D. Alternative Living Arrangements provides that "individuals in need of greater supervision and care than is available to them in their present independent living arrangement may apply for financial assistance for licensed extended care facilities."

Applicable Statute, Code, Policy, Rule or Regulation

NRS Chapter 428; CCHHS Guidelines and Standards

Financial Information

Is there a fiscal impact? Yes

If yes, account name/number: 1016574-501036 - Rest Home

Is it currently budgeted? Yes

Explanation of Fiscal Impact: This is a mandated service. The current balance in the account is \$17,388. A balance transfer in the amount of \$10,213 will be made from 1016574-501030 - Hospital Costs to cover both additional PO requests - Eden Hospice and Cascade of the Sierra.

Alternatives

N/A

Attachments:

[Cascades current PO.pdf](#)

[Cascades Invoice Spreadsheet - BOS.xlsx](#)

Board Action Taken:

Motion: _____

1) _____

Aye/Nay

2) _____

(Vote Recorded By)

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 |City of Carson City
 PURCHASE ORDER CURRENT LIST

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Purchase Order	Type: Normal	Fiscal Yr/Per	2020/04	PO#	20200328
Batch	1	PO Date	10/21/2019		
Requisition	20100485				
Department Code	6574				
Allocation Code	00000000				
Buyer ID	ALaFollette				
Needed By Date	10/18/2019				
General Commodity					
Vendor	002432				
Ship To Address	6574	CASCADE LIVING GROUP - SPARKS, LLC 275 NEIGHBORHOOD WAY SPANISH SPRINGS, NV 89441 CARSON CITY WELFARE 900 E. LONG STREET CARSON CITY, NV 89701			
Ship To Reference					
Shipping Method					
Bill To Address	6574	CARSON CITY WELFARE 900 E. LONG STREET CARSON CITY, NV 89701			
PO Description	REST HOME SERVICES UNIT 166				
Special Handling	None	Status Printed		Distribution	1
Total PO Amount	\$43,398.60				
Liquidated	\$42,279.18				
Open Encumbrance	\$1,119.42				

Line Item Details

Line	001	Commodity	1.00	UOM	EACH	Unit	Price	43,398.60000
Req		Qty	0.00	Freight		0.00	Sales	0.00
%Disc		Credit						
Qty Received		0.00			Line Item Total		\$43,398.60	
Qty Canceled		0.00			Liquidated		\$42,279.18	
					Canceled		\$ 0.00	
					Line Item Open Encumbrance		\$1,119.42	

Description	REST HOME SERVICES UNIT 166
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Department	6800	1099	Box	Capital Asset	N	Needed By
Quote						
Work Order:	Bid					
			Task:			

Allocation Details				Encumbered	Amt	Bud
Org	Obj	Proj	Description			
1016574	501036		REST HOME		\$43,398.60	U
			Liquidated		\$42,279.18	
			Canceled		\$ 0.00	
			Allocated Open Encumbrance		\$1,119.42	

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City of Carson City
PURCHASE ORDER CURRENT LIST

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** END OF REPORT - Generated by Bretta Inman **

Invoice Number	Invoice Date	Total Invoice	Pt. Liability	Net Amount	Check Number
COTS-0719	07/31/2019	\$ 6,499.00	\$ (2,159.14)	\$ 4,339.86	paid on p-card
COTS-0819	08/31/2019	\$ 6,495.00	\$ (2,159.14)	\$ 4,335.86	paid on p-card
COTS-0919	09/30/2019	\$ 6,495.00	\$ (2,159.14)	\$ 4,335.86	paid on p-card
COTS-1019	09/27/2019	\$ 6,495.00	\$ (2,159.14)	\$ 4,335.86	903076007
COTS-1219	12/29/2019	\$ 7,083.88	\$ (2,159.14)	\$ 4,924.74	903077689
COTS-1119	10/02/2019	\$ 7,045.00	\$ (2,159.14)	\$ 4,885.86	903077006
COTS-0120	01/30/2020	\$ 7,053.50	\$ (2,159.14)	\$ 4,894.36	903078316
COTS-0220	02/01/2020	\$ 7,177.21	\$ (2,159.14)	\$ 5,018.07	903078953
COTS-0320	03/01/2020	\$ 7,367.85	\$ (2,159.14)	\$ 5,208.71	903079700
TOTAL		\$ 61,711.44	\$ (19,432.26)	\$ 42,279.18	
Current PO Amt				\$ 43,398.60	

** This patient does not have a patient liability due to

Check Date
11/13/2019
11/13/2019
11/13/2019
11/08/2019
01/17/2020
12/13/2019
02/14/2020
03/13/2020
04/17/2020