

Director



DEPARTMENT OF

HEALTH AND HUMAN SERVICES



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DIVISION OF HEALTH CARE FINANCING AND POLICY Helping people. It's who we are and what we do.

PUBLIC NOTICE TO SOLICIT COMMENTS ON CHANGES TO THE PROPOSED REIMBURSEMENT METHODOLOGY FOR CERTIFIED COMMUNITY BEHAVIORAL HEALTH CENTERS

Date of Publication: December 21, 2023

Name of Organization:The State of Nevada Department of Health and Human Services (DHHS), Division of
Health Care Financing and Policy (DHCFP)

 General public comment is encouraged to be submitted in writing. You may submit comments in one of two ways (please choose only one of the ways listed below): Electronically: You may email comments to <u>DocumentControl@dhcfp.nv.gov</u>. Write "PROPOSED REIMBURSEMENT METHODOLOGY FOR CERTIFIED COMMUNITY BEHAVIORAL HEALTH CENTERS" in the subject line.

Mail: You may mail written comments to the following address: Division of Health Care Financing and Policy ATTN: "PROPOSED REIMBURSEMENT METHODOLOGY FOR CERTIFIED COMMUNITY BEHAVIORAL HEALTH CENTERS", 1100 E. William Street, Suite 101, Carson City, Nevada 89701.

2. This Public Notice is to inform the public of the following request for public comment:

On January 31, 2023, the Division of Health Care Financing and Policy (DHCFP) held a public hearing to describe the proposed changes to the reimbursement methodology for Certified Community Behavioral Health Centers (CCBHCs). Under the proposed methodology, changes were made in the following areas:

- Interim rates for new facilities without an established rate: Currently, new CCBHCs submit an anticipated cost report that is used to develop an interim rate for year one services. Under the changes presented on January 31, 2023, newly enrolling CCBHCs would instead be assigned an interim rate based on the average bundled daily rate for current CCBHCs.
- Bundled daily rate following year one: Under currently approved State Plan language, upon completion of a
 full fiscal year of operations, a CCBHC must submit an actual cost report used to develop a cost-based
 reimbursement rate. This data was used to develop a cost-based rate and to issue a cost settlement to
 CCBHCs based on the difference in costs between the anticipated and actual cost reports. Under the
 changes proposed on January 31, 2023, the first year of services would no longer be adjusted to settle to
 100% of allowable costs; rather, the cost-based reimbursement rate would be implemented on a
 prospective basis.
 - Penalties were also added to this section for providers who do not comply with cost reporting requirements.
- Bundled daily rate for year three forward: Under the currently approved State Plan language, cost-based reimbursement rates are adjusted annually by applying the Medicare Economic Index. The proposed changes presented on January 31, 2023, indicated providers may also rebase their cost-based rate. It was proposed that DHCFP would cover the costs for actuarial rate-setting for each provider once every five

years. If a CCBHC provider wanted to initiate a rebase more frequently, that was permissible so long as the provider covered 50% of the actuarial costs tied to the rebase.

In working with the Centers for Medicare and Medicaid Services (CMS) on the passage of this State Plan Amendment, DHCFP has made a slight deviation from the changes presented at Public Hearing on January 31, 2023. As such, the Division is posting this public comment to solicit feedback on the amended reimbursement methodology. The proposed changes are outlined below:

- Bundled rate for year one: This rate will be based on the average bundled daily rate for current CCBHCs.
- Rates following year one:
 - Providers with an established rate as of May 11, 2023: For providers who have an established rate as of May 11, 2023, that rate would continue through June 30, 2023. Effective July 1, 2023 and each July 1 thereafter, rates will either be adjusted by MEI or through a rebase.
 - Providers with year 1 established on or after July 1, 2023: Providers must submit a cost report during year 2 of operations to show actual costs and visits for rate development. Providers would continue to be paid at the interim rate (based on the average of established CCBHC bundled rates) until a provider-specific rate can be set. Once a cost-based rate is determined, the effective date of the rate change will be aligned with the start date of the subsequent quarter. No claims prior to this date would be reconciled.
- Annual updates to the bundled rates: Effective July 1, 2023, and occurring on July 1st thereafter, established CCBHC reimbursement rates will be adjusted by the Medicare Economic Index (MEI) to account for inflation unless the provider's rate has been rebased on or after July 1 of the preceding year.
 - Rebases: Changes were made to the language presented on January 31, 2023, regarding the cadence of rate rebases. Providers with an established rate may not request a rebase until January 1, 2025. Additionally, providers may only request a rebase once within each designated 5-year period; there will no longer be an option for providers to request rebases more frequently if they cover 50% of the actuarial costs. DHCFP will cover the cost of the rebase for each provider every 5 years.
 - Providers may choose any year within each 5-year period for the rebase to occur; however, they would not be eligible for another rebase until the second 5-year period.
 - If a provider has not initiated a rebase by the end of a 5-year period, their rate will be rebased based on the most recent full fiscal year of data.
 - Year 2 rebasing (as described above under "Rates following year one") is considered the once-per-five-year rebase for new providers.
 - The first 5-year rebase period will extend from January 1, 2025, through December 31, 2029. The second 5-year rebase period will extend from January 1, 2030, through December 31, 2034; etc.

The DHCFP will post this public notice for 30 days per CMS public notice requirements. Any feedback must be submitted to the DHCFP via the instruction in Section 1 above.

This notice has been posted online at <u>http://dhcfp.nv.gov</u>, as well as Carson City, Las Vegas, Elko, and Reno central offices for DHCFP. Email notice has been made to such individuals as have requested notice of meetings (to request notifications please contact <u>documentcontrol@dhcfp.nv.gov</u>, or at 1100 East William Street, Suite 101, Carson City, Nevada 89701.

DHCFP, 1100 E. William St., Suite 101, Carson City, Nevada 89701

DHCFP, 1010 Ruby Vista Drive, Suite 103, Elko, Nevada 89801 DHCFP, 1210 S. Valley View, Suite 104, Las Vegas, Nevada 89102 DHCFP, 745 W. Moana Lane, Suite 200, Reno, Nevada 89509

If you require a physical copy of this notice, please contact <u>documentcontrol@dhcfp.nv.gov</u>, or at 1100 East William Street, Suite 101, Carson City, Nevada 89701.