

**DIVISION OF HEALTH CARE FINANCING AND POLICY
CLINICAL POLICY TEAM, BEHAVIORAL HEALTH PROGRAM**

BEHAVIORAL HEALTH TECHNICAL ASSISTANCE

Minutes– Wednesday, November 9, 2016

10:00 - 11:00 a.m.

Facilitator: Kim Riggs, DHCFP Behavioral Health Outpatient

Webinar Address: [WEBEX Registration Link](#) (NEW LINK)

1. Purpose of BH Monthly Calls

- a. House Keeping – to **MUTE** Calls *6
 - i. Questions and comments may be submitted to BehavioralHealth@dhcp.nv.gov anytime prior to the webinar or after for additional questions.
 - ii. The webinar meeting format offers providers an opportunity to ask questions via “chat room” and receive answers in real time.
- b. Introductions – DHCFP, SURS, HPES

3. DHCFP Updates

- a. Policy updates and workshops – Alexis Tucey
[Public Notice Link](#) Providers are encouraged to check web site for current public notices.
- b. Behavioral Health Community Networks (BHCN) Updates- Crystal Johnson

4. DHCFP Surveillance Utilization Review Section (SURS)

Updates or reminders for Providers: Kurt Karst, Surveillance and Utilization Review (SUR) Unit.

5. HPES Updates

Ismael Lopez-Ferratt, MBA NV Medicaid Provider Field Services
Behavioral Health

- a. HPE Reminder for Providers: [HPE Announcement 1242](#)
Reviewed HPE Announcement 1242 providing a visual review of the new “search” function, provided a quick demonstration per the WebEx with a few different types of input searches (vision, dental, behavioral health etc). Kim navigated the search function to demonstrate that the Announcements and Newsletters web page now has the capability to categorize the announcements by provider type.
- b. Assessment Clarified: H0002
When utilizing assessment codes, H0031 or 90791 and screening (H0002) these should not be conducted on the same day. Explained to providers that if an assessment is being conducted, then a CASII or LOCUS score should be derived from the information gathered in the assessment. Also explained that the screening (H0002) can be done at the 90 day point to update on the current CASII or LOCUS score.

Joann Katt, LPN, Medical Management Center/Behavioral Health Team Lead

a. Information required within a Prior Authorization (PA). What are you trying to convey vs. what is missing? What is the current clinical snapshot for a recipient on a PA.

Covered form FA11A and providing a clinical snapshot of current life events for recipient as well as what skill was lost due to the life event, documenting medications/dosage/frequency, med. Management, medication changes along with dates/dosages/efficacy. Important recipient diagnosis, significant life event and treatment plan coincide. Document past treatment history including timeframe concerning when that treatment was received and recipient's response to the treatment. When HPE reviews PA, they look at current clinical snapshot and all past treatment episodes when making a determination. Referred to MSM Chapter 403.6B5 and 403.6B7; a-g for uncovered services and uncovered diagnosis for rehab services. Remember these services are rehabilitative.

In closing please email questions, comments or topics that providers would like addressed any time prior to the monthly webinar.

Email Address: BehavioralHealth@dncfp.nv.gov.

Next Meeting: Wednesday, December 14, 10:00 - 11:00 am