

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

BEHAVIORAL HEALTH TECHNICAL ASSISTANCE MINUTES –February 10, 2016 10:00-11:00 a.m.

Facilitator: Alexis Tucey, DHCFP, Behavioral Health Supervisor

Webinar Address: <http://nvmedicaid.adobeconnect.com/bhmeeting/>
Call in number: 1-888-363-4735 Access Code 1846315

1. Purpose of BH Monthly Calls

- a. House Keeping – Providers were encouraged to mute calls by pressing “*6”. Alexis explained that questions and comments can be submitted in advance to the DHCFP behavioral mailbox and gave the mail box address: BehavioralHealth@dhcfp.nv.gov.

DHCFP: Alexis Tucey, Kim Riggs
SUR: Russell Carpenter
HPES: Ismael Lopez-Ferratt, Sandra Welhes

2. DHCFP – Updates

- a. Certified Community Behavioral Health Clinics (CCBHC) Grant Update:
- b. Managed Care Expansion Town Hall Listening Sessions – [Town Hall Meetings - Managed Care Expansion](#)
- c. Upcoming Policy Revision: B
Behavioral Health Community Network (BHCN)
- d. Quality Assurance Policy Prior Authorization Data Correction – FA-29
[HPES Form FA-29](#)

- b. **DHCFP – Surveillance Utilization Review Section (SURS)** – Updates concerning billing Case Management (T1016/T1017). The intent of case management services. There are eight target groups to relieve services these groups are regulated in accordance with the rules and regulations of the Division of Health Care Financing and Policy (DHCFP), all policies and procedures described here in Medicaid Services Manual (MSM) Chapter 2500.

c. HPES – Updates

- a. Quick Reminder: Re-validation process – February 29th Deadline
- b. Submitting Concurrent: Documentation – Joann Katt (Moved to March Agenda)

- c. HPES Provider Web Announcement 1060 [HPES Announcement 1060](#): Paper CMS-1500 claims and electronic Transaction 837P claims submitted on or after December 30, 2015, with procedure codes not covered by Medicare denied incorrectly with edit code 0367 (Bill Medicare). The issue was resolved on January 18, 2016. All impacted claims will be automatically reprocessed. The reprocessed claims will be reflected on a future remittance advice.
- d. HPES Provider Web Announcement 1062 [HPES Announcement 1062](#): All Nevada Medicaid providers are invited to complete the 2016 Nevada Medicaid Provider Survey.
- e. HPES Provider Web Announcement 1073 [HPES Announcement 1073](#): Provider Revalidation Requirements extended The Centers for Medicare & Medicaid Services (CMS) has revised the previous guidance to now require a two-step deadline under which states must notify all affected providers of the revalidation requirement by the original March 24, 2016 deadline, and must have completed the revalidation process by September 24, 2016. In order to comply with the CMS requirement for the revalidation process to be completed by September 2016, the Division of Health Care Financing and Policy (DHCFP) has set a deadline of August 31, 2016.

Alexis in closing provided the information for providers to email questions, comments or topics that providers would like addressed any time prior to the webinar. Please email to BehavioralHealth@dhcfp.nv.gov. The scheduled meetings are the second Wednesday of each month. Next month meeting will be March 9, 2015; 10-11 am.