

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

**BEHAVIORAL HEALTH TECHNICAL ASSISTANCE
Minutes – Wednesday, January 10, 2018
10:00 - 11:00 a.m.**

Facilitator: Kim Riggs, DHCFP, Social Services Program Specialist

Webinar Address: [WEBEX Registration Link](#)

1. Purpose of BH Monthly Calls

- a. Questions and comments may be submitted to BehavioralHealth@dncfp.nv.gov
- b. Prior to the webinar or after for additional questions. The webinar meeting format offers providers an opportunity to ask questions via the Q & A or the “chat room” and receive answers in real time.
- c. Introductions – DHCFP, SURS, DXC Technology
Welcomed New Behavioral Health Supervisor, Dorothy Pomin also welcomed DHCFP, Social Services Program Specialist, Jaimie Evins

2. DHCFP Updates

- a. Public Workshops Update: Reviewed Current Public Workshops
<http://dncfp.nv.gov/Public/AdminSupport/PublicNotices/>
- b. Announcements/Updates: Reviewed Nevada Medicaid Website to identify the Announcement areas for updates specifically related to Behavioral Health
- c. Behavioral Health Community Networks (BHCN) Updates: Social Services Program Specialist, Sheila Heflin-Conour. No current updates. Please contact Sheila if you need any clarification per policy concerning the BHCN submissions.
- d. Social Services Program Specialist, Briza Virgen: Review of MSM Chapter 2500, Targeted Case Management, case management services. Reviewed the following policy under MSM Chapter 2500:
<http://dncfp.nv.gov/Resources/AdminSupport/Manuals/MSM/C2500/Chapter2500/>
 - 2502.11: Case Management Services – Components of case management services.
 - 2503.1A(1) Coverage and Limitations, when case management services are reimbursable.
- e. Social Services Program Specialist, Kim Riggs
 - 2502.1 Lead Case Manager:
The Lead Case Manager coordinates the recipient's care and services with another case manager. The Lead Case Manager is responsible for coordinating the additional case management services, whether or not, chronologically, the Lead Case Manager was the original or the subsequent case manager.

3. DHCFP Surveillance Utilization Review Section (SURS)

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

Please review Medicaid Services Manual 100, 103.2.B.

B. For Medicare and Medicaid dual eligible, there is no requirement to obtain Medicaid PA for Medicare covered services. If services are non-covered for Medicare, the provider must follow Medicaid's PA guidelines. PAs are not necessary for recipients who are eligible for QMB only since Medicaid pays only the co-pay and deductible. If Medicare benefits are exhausted (i.e. inpatient), a PA from Medicaid's QIO-like vendor must be obtained within 30 days of the receipt of the Medicare Explanation of Benefits (EOB).

4. **DXC Technology Updates**

Updates or reminder for Providers: Joann Katt, LPN, Medical Management Center/Behavioral Health Team Lead.

Stephanie Ferrell, Provider Services Field Representative Updates: Nevada Medicaid Provider Training Site: Upload a Prior Authorization: Pages 37 – 47.

https://www.medicaid.nv.gov/Downloads/provider/PWP_PA_Training_2017-07.pdf

If you have further questions please contact Stephanie directly.

Stephanie Ferrell, Provider Services Field Representative, (775) 412-9401

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

Email Address: BehavioralHealth@dncfp.nv.gov