

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

**BEHAVIORAL HEALTH TECHNICAL ASSISTANCE (BHTA) Minutes
Wednesday, January 9, 2019
10:00 - 11:00 a.m.**

Facilitator: Kim Riggs, DHCFP, Behavioral Health Social Services Specialists

Purpose of BH Monthly Calls:

The BHTA WebEx meeting provides updates and links for current Medicaid policy. The format offers providers an opportunity to ask questions via the chat room and receive answers in real time. Questions may also be submitted throughout the month at BehavioralHealth@dhcfp.nv.gov

Introductions:

- DHCFP: BH Policy Specialists: Kim Riggs, Carin Hennessey
- DHCFP Surveillance and Utilization Review Unit (SURS):
Contact <http://dhcfp.nv.gov/Resources/PI/SURMain> to report Medicaid Fraud / Abuse
- DXC Technology: Joann Katt (LPN, Medical Management)

1. Recent DHCFP Public Notices, Public Workshops, and Public Hearings:

No new information reviewed. Link for upcoming DHCFP Public Hearings, Meetings, and Workshops: <http://dhcfp.nv.gov/Public/AdminSupport/PublicNotices/>

2. DHCFP Behavioral Health Policy Updates:

Prior to requesting assistance concerning policy clarifications, please review the following Medicaid Service Manual (MSM) Chapters 100, 400 and 3300. Providers may refer to the MSM located on the DHCFP Behavioral Health Services webpage <http://dhcfp.nv.gov/Pqms/CPT/BHS/> and on the Nevada Medicaid Provider Portal, under "Quick Links", <http://dhcfp.nv.gov/Resources/AdminSupport/Manuals/MSM/MSMHome/>. By pressing CTRL+F, providers may search specific terms throughout the MSM.

Prior Authorization & FA-11 Form: DHCFP and the QIO Vendor, DXC Technology, have taken Provider guidance and suggestions to move forward with an update to the FA-11 form. While the form is being updated, please continue to complete the FA -11 as previously instructed. Guidance on changes will be provided when the update to the form is complete, and a DXC Technology Web Announcement will be posted on the Medicaid Provider portal <https://www.medicaid.nv.gov/home.aspx>

Interns/Psychological Assistants, MSM 403.1.B Clarification

http://dhcfp.nv.gov/uploadedFiles/dhcfpnvgov/content/Resources/AdminSupport/Manuals/MSM/C400/MSM_CH_400_18_12_28.pdf Please review all policy, enrollment and billing criteria for Independent Professionals. Once an intern has completed the specific education (per his/her scope of practice, experience, and training) and has met the licensure requirements, the intern must complete his/her enrollment as an Independent Professional with Medicaid. Interns/Psychological Assistants cannot link to PT 20 (Physician, M.D., Osteopath, D.O.) and cannot function as Clinical Supervisors. Interns can re-enroll as Independent Professionals once their status changes to a licensed professional.

DHCFP Surveillance Utilization Review (SUR) Updates:

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

- Report Provider Fraud/Abuse: <http://dhcfp.nv.gov/Resources/PI/SURMain/>
- Provider Exclusions, Sanctions and Press Releases: <http://dhcfp.nv.gov/Providers/PI/PSExclusions/>

3. DXC Technology Updates:

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

Alyssa Kee, DXC Technology Field Representative, alyssa.s.kee@dx.com

Review Nevada Medicaid Provider Portal following areas for BH Providers:

- Billing Information <https://www.medicaid.nv.gov/providers/BillingInfo.aspx>
- Provider Training <https://www.medicaid.nv.gov/providers/training/training.aspx>
- Provider Enrollment <http://dhcfp.nv.gov/Providers/PI/PSMain/>

NEW PROVIDER FEATURED LINK: MODERNIZATION PROJECT

Please review the information per this new Nevada Medicaid featured Link area. There are several important announcements. This was created to keep all providers informed on training, electronic billing, electronic claims, etc.:

<https://www.medicaid.nv.gov/providers/Modernization.aspx>

Link for Web Announcements

<https://www.medicaid.nv.gov/providers/newsannounce/default.aspx>

Dec 24, 2018, #1785 – Clarification of Intensive Outpatient Program (IOP) Codes and Guidelines

- see **Behavioral Health Provider Questions** below

Dec 28, 2018, #1788 – Modernization: Reminder with Dates All Providers and Delegates Need to Know to Prepare for Paperless Processes

- pay attention to dates for Modernization and plan accordingly

Jan 02, 2019, #1794 – Claims Denying in Error with Edit Code 0155 Have Been Automatically Reprocessed.

Jan 04, 2019, #1797 -- New Reimbursement Rates for Basic Skills Training

- H2014 and H2014 HQ (HCPCS billing code)

6. Behavioral Health Provider Questions

The Behavioral Health Policy WebEx would like to address provider questions each month. This will allow us to address topics, concerns, questions from the Behavioral Health providers and make sure the specialists are focusing training and educational components to your needs and gathering your direct input from the BHTA WebEx.

Q: What services can a PT 14 provide under IOP services?

A: IOP Services PT 14 verse PT 17, Specialty 215. Please review the Web Announcement 1875

Q: Who does the moratorium effect?

A: Refer to Web Announcement #1746 – “on new enrollments” for PT 14 Behavioral Health Outpatient Treatment and PT 82 Behavioral Health Rehabilitative Treatment, Specialties 301 (QMHA) and 302 (QBA), beginning December 1, 2018, “for a minimum period of six months.” Visit the Medicaid Provider portal for Announcements and Newsletters <https://www.medicaid.nv.gov/providers/newsannounce/default.aspx> on the moratorium and to the DHCFP Public Notices webpage <http://dhcfp.nv.gov/Public/Home/> for information on upcoming meetings, workshops, and comment notices.

Q: Is there new information on the FA-11 update?

A: Refer to **DHCFP Behavioral Health Policy Updates** section above for discussion. Visit the Medicaid Provider portal for Announcements and Newsletters <https://www.medicaid.nv.gov/providers/newsannounce/default.aspx>. If you need to change a therapy code, submit a data correction form for decrease in service hours, or submit an unscheduled revision for an increase in service hours. Due to the Modernization of Medicaid systems, the updates to the FA-11 may not be addressed immediately.

Q: Will the old FA-11 form be accepted until the new form is available?

A: Continue to use the current FA-11 form, available on the Medicaid Provider portal (Under “Forms”) <https://www.medicaid.nv.gov/home.aspx> until the updated form is provided.

Q: When is the FA-29B required to be submitted?

A: This form was issued in 2018 and is the **Prior Authorization Reconsideration Request**, to be used when the provider or its recipient would like the reconsideration of a denial of requested services. According to Medicaid’s QIO-like vendor, DXC Technology, there will be some leniency if the wrong form is submitted (i.e., FA-11) with the system Modernization. However, the incorrect forms will begin to be “kicked back” to promote use of the correct form. Medicaid “wants continuity of [the FA-11, FA-29, FA-29B] for all of our authorization requests.” It is in the best interest of the recipient and the provider to utilize the correct form.

Q: Do we submit data corrections on the portal?

A: Review the Modernization Project on the Medicaid Provider portal (under “Featured Links”) <https://www.medicaid.nv.gov/home.aspx> for information on uploading forms. The ability to fax forms to Medicaid will be discontinued as of 1/25/19, as reminders have been given to providers.

Q: What needs to be listed on the FA-11 provider information?

A: Refer to questions above and to **DHCFP Behavioral Health Policy Updates** section above for discussion.

Q: On FA-11 form, what information is listed in Section I and what information is listed in Section X?

A: In Section I, list BHCN Agency (Group, Individual). In Section X, list Servicing Provider; if there is more than one therapist rendering services to recipient, list the BHCN Agency NPI at this time. Please stay informed of upcoming changes to the FA-11 form and to these sections in particular.

Q: Is there a new way to submit claims for free without using a clearing house?

A: Please refer to the Web Announcement 1788 dated December 28, 2018 claims area. You can also review further information per the Nevada Medicaid Provider website Feature Provider Links: MMIS Modernization for additional information.

https://www.medicaid.nv.gov/Downloads/provider/web_announcement_1788_20181228.pdf