

**DIVISION OF HEALTH CARE FINANCING AND POLICY
CLINICAL POLICY TEAM, BEHAVIORAL HEALTH PROGRAM
BEHAVIORAL HEALTH TECHNICAL ASSISTANCE (BHTA)
Minutes – Wednesday, May 11, 2022
10:00 - 11:00 a.m.**

Facilitator: Carin Hennessey, DHCFP, Behavioral Health Unit (BHU), SSPS II

1. Purpose of BH Monthly Calls:

The BHTA call offers providers guidance and updates on DHCFP Behavioral Health policy. The TEAMS meeting format offers providers an opportunity to ask questions using the chat feature and receive answers in real time. The webinar is recorded. If you have questions prior to or after the monthly call, submit requests directly to the behavioralhealth@dhcfp.nv.gov.

- Introductions – BHU, Provider Enrollment, SUR, Gainwell Technologies

2. April 2022 BHTA Minutes:

The minutes from last month's BHTA are available on the [DHCFP Behavioral Health webpage](#) (under "Meetings"). You'll want to navigate to this page and click on "Behavioral Health Agendas and Minutes." You can find information from previous and current meetings. Please review if you have questions and if you were not able to attend the BHTA last month; this is a great place to check up on what we discussed.

- BH Updates
- QBA and QMHA Enrollment Issues

3. Related DHCFP Public Notices:

Link for upcoming Public Hearings, Meetings, and Workshops related to Behavioral Health <http://dhcfp.nv.gov/Public/AdminSupport/PublicNotices/>.

Public Meetings

- **5/25/2022** – Medical Care Advisory Committee

Public Hearings

- **05/31/2022** – State Plan Amendment (Telehealth; 1115 SUD Demonstration Waiver)
- **05/31/2022** – Medicaid Services Manuals (MSM 1200 – Prescribed Drugs; MSM 3400 – Telehealth)

4. DHCFP Behavioral Health Updates:

Behavioral Health Web Announcements (WA):

<https://www.medicaid.nv.gov/providers/newsannounce/default.aspx>
(Please refer to this link for a complete list of web announcements)

- **WA#2778** – URGENT: All Providers Encouraged to Take Small Business Impact Survey by May 9, 2022, Regarding Collection of Provider Data
- **WA#2774** – Medicaid Services Manual Chapters Updated
- **WA#2772** – Attention Provider Type (PT) 34 Specialty 28 Occupational Therapy (OT) Providers in a Behavioral Health Setting
- **WA#2768** – Attention All Providers, Delegates and Staff: Upcoming Training Sessions for May 2022
- **WA#2767** – 2022 Annual New Code Update
- **WA#2762** – New Chatbot Provides Self-Service Option to Answering Providers' Frequently Asked Questions
- **WA#2758** – Attention All Providers: Prior Authorization Contact Information and Self-Service Tools
- **WA#2757** – Attention Provider Type 86 (Specialized Foster Care): Update on Claims for Procedure Codes H2019 and H2019 with Modifier HT that Denied

Carin Hennessey, SSPS II

- BH Updates
 - SP 22-0005 for Crisis Stabilization Centers – Submitted to CMS on 3/30/2022, CMS and DHCFP have begun discussion for the rate methodology SPA and there may be further edits to state plan pages needed to capture the instances of individuals requiring a stay within a CSC exceeding 24 hours.
 - 1115 Waiver, open for public comment until 5/31/2022 at <https://dhcfp.nv.gov/Pgms/Waivers/1115/>. The link to the Public Notice is located on this page, and on there you will find the [email address for public comment](#).
 - SPA 21-0008 for addition of BH coverage language to Separate Children Health Insurance Programs (SCHIP) – “treating MH and SUD in a culturally and linguistically appropriate manner for all CHIP enrollees, including pregnant women and unborn children.” The scope of medical services available are described in the SSA, Section 1905(a).
 - New Projects
 - Update for Chapter 400 Provider Qualifications, especially QBA/QMHA/QMHP delivering services under PTs 14 and 82. A public workshop will be held in the end of May or first week in June.
- Medicare Recipients (WA#2638 and WA#2287) -- For recipients with Medicare as their primary insurance, we were discussing last month in the Q&A section that providers wouldn't have to submit a letter of denial for those services (Explanation of Benefits, or EOB).
 - Refer to [WA#1941](#) for more information on submitting professional claims where Medicare is the primary payer, there are separate instructions for submission based on whether Medicare makes a payment or not. EVS Chapter 3 will also include instructions for Crossover and Secondary Claims Submission, [EVS User Manual](#)

[Chapter 3 \(nv.gov\)](#). Follow this information for Medicare denied or non-covered claims. Gainwell offers Workshops on submitting secondary claims where we do a live demo via EVS on submitting secondary claims, using Medicare as the primary insurance is one of the scenarios. Visit the Provider Training webpage on the Nevada Medicaid website, [Nevada Medicaid \(nv.gov\)](#) for more information. We also offer a [YouTube Channel](#) that offers training; there is a whole training on how to submit secondary claims. Crossover claims are involved when Medicare is the primary payer, covers the service and leaves a co-insurance deductible.

- If you cannot contract with Medicare at all, you are not able to enroll with Medicare, and you are delivering selected behavioral health services to Medicare beneficiaries, please refer to Web Announcements #2287 [web_announcement_2287_20200824.pdf \(nv.gov\)](#) and #2368 [web_announcement_2638_20211123.pdf \(nv.gov\)](#). Our system will automatically bypass those requirements for documentation from Medicare. The impacted procedure codes are 90791 (psychiatric assessments); 90832, 90834, 90837 (psychotherapy); 90839 (psychotherapy for crisis); and 90846, 90847, 90849, 90853 (other psychotherapy), 90785 (Interactive complexity), H2011 (Crisis Intervention), H2011 with modifier GT, and H2011 with modifier HT. The involved PT 14 specialties are 300, 306, and 307.
- Neurotherapy Prior Authorization Requests -- Utilize the Peer-to-Peer and Reconsideration process, as needed; engage in the process to understand the requirement for PA approval. The Peer-to-Peer review is to clarify the reason for the denial or modification; it is not to overturn the denial or modification. If the intent of the provider is to overturn the decision, and you have the documentation, you can go directly to the Reconsideration process. But the Peer-to-Peer is just to understand the rationale of the decision-making. For the PARs, focus language on why Neurotherapy is being used; the history of its use with the recipient; the current symptoms being treated; how Neurotherapy has improved functioning; medical necessity for continued use above service limits; and discharge goals. T
- [Meeting Registration - Zoom \(zoomgov.com\)](#) -- CMS Rural Health Strategy "Refresh" Listening Session #3 for CMS Regions 6, 9, and 10, including Guam, American Samoa, and the Northern Mariana Islands
- Recognizing the Value of Peer Support Specialists: Strategies for Increasing Wages and Developing Career Pathways -- <https://education.smiadviser.org/diweb/catalog/item?id=9360728>
- 988 Suicide and Crisis Lifeline -- <https://www.samhsa.gov/find-help/988>

6. DHCFP Provider Enrollment Unit Updates:

Nevada Medicaid Website: <https://www.medicaid.nv.gov/providers/enroll.aspx>

DHCFP Website: <http://dhcfp.nv.gov/Providers/PI/PSMain/>

Contact Information: providerenrollment@dhcfp.nv.gov

7. **DHCFP Surveillance & Utilization Review (SUR) Updates:**

Report Provider Fraud/Abuse <http://dhcfp.nv.gov/Resources/PI/SURMain/>

Provider Exclusions, Sanctions and Press

Releases <http://dhcfp.nv.gov/Providers/PI/PSExclusions/>

8. **Gainwell Technologies Updates:**

Billing Information <https://www.medicaid.nv.gov/providers/BillingInfo.aspx>

Provider Enrollment <https://www.medicaid.nv.gov/providers/enroll.aspx>

Provider Training <https://www.medicaid.nv.gov/providers/training/training.aspx>

Contact Information

Nevada Medicaid Customer Service: (877) 638-3472

NVMMIS.EDIsupport@gainwelltechnologies.com

nv.providerapps@gainwelltechnologies.com

Prior Authorization Information: (800) 525-2395

nvpeer_to_peer@gainwelltechnologies.com

Field Service Representatives: nevadaprovidertraining@gainwelltechnologies.com

Alyssa Kee Chong, Provider Relations Field Service Representative - North
Susan McLaughlin, Provider Relations Field Service Representative – South

- **Training** – We do have trainings available.

- Self-paced trainings are available through our Provider Training page, [Nevada Medicaid \(nv.gov\)](#). Most of the links are located here, including the Nevada Medicaid YouTube channel, [Nevada Medicaid - YouTube](#). We also have a newsletter (under “Provider Links” on the right sidebar, as part of the “Announcements & Newsletters”, and under “Latest News” tab where you access Web Announcements). Not everyone is always up-to-date with the newsletters, but they are available, but we do publish them and they are on the Medicaid website: things that are happening, things that are updated, news. We have a team that works on it. We do post them quarterly. The newsletter gives you information about topics like the COVID-19 unwind, the new provider types that have come out, Medicaid ID for the recipient, the digital ID and the App information, information about how many dollars in claims we have paid out this quarter, where we are at on Claims adjudication status, tons of information. *Second Quarter 2022* newsletter, [NV Medicaid News 2022-0706.pdf](#), includes secure correspondence and self-service options that are available through the portal. Compiles all of the most important web announcements and news that has been posted throughout the quarter in one place.

Because the BHTA is a large group and we are putting focus on our trainings. We are moving away from our static slide decks and doing live walk-throughs with different training portals. We are trying to enhance that learning experience the best that we can. We do have a **training on submitting appeals, adjustments, and voids**. In June we are having a **revalidation training**. We will be doing a **secondary claims training specific to institutional providers**; we alternate months between professional and institutional provider trainings. We have trainings on reading your remittance

advice. And we have several **workshops coming up** – one of them will be on **Applied Behavioral Analysis (ABA) services** and one that is new will be **specific to CCBHC training**. We'll also be rolling out **RTC workshops** and things of that nature. You can visit the [Event Calendar](#) for more information. WE are doing our best to offer more trainings and re-evaluate how we are presenting our trainings. We also have our Learning Management Systems information on the [Provider Trainings webpage](#). If you have any specific feedback on training topics that you would like to see us offer or anything that we can do to improve, please let us know. We are putting a heavy focus on this through the rest of this year and going into next year.

Nevada MMIS Modernization Project

Please review the information per this Nevada Medicaid featured link area. There is information on Important System Dates, Known System Issues and Identified Workarounds, Training Opportunities, and Helpful Resources:

<https://www.medicaid.nv.gov/providers/Modernization.aspx>. Also listed on this page, are **Modernization (New) Medicaid System Web Announcements**; please refer to these announcements for specific information related to Modernization.

9. Behavioral Health Provider Questions:

The Behavioral Health Policy TEAMS meeting 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 TEAMS meeting. The previous month's questions with answered on the posted minutes for the meeting.

Q: How is the turnaround time for the processing of the applications?

A: We are caught up in the initial review of our applications. We are meeting our expected turnaround timeframes now for applications to be reviewed. We are working on getting all of those enrollments that we were waiting on to get through our quality assurance (QA), which isn't included in our service agreement; we are seeing a backlog with our QAs because every application gets a second set of eyes before they get their final decision-making. We still can't give any exact timeframes; an initial application is 7 business days. Again, so we can meet our initial review timeframe but the applications have to go through a quality review.

Q: I would like to know if there are any updates on the health emergency - I heard rumors it had ended or is ending and we are curious if that changes anything with telehealth delivery options.

A: There was an announcement by Governor Sisolak on May 6th that he announced his intention to end Nevada's State of Emergency on May 20th. PHE was renewed in April by HHS Secretary Becerra until July 15, 2022. There will be a Public Hearing regarding changes to Telehealth on May 31, 2022. MSM Public Hearing 5/31/22 Agenda (nv.gov).

Q: Can you send [Nevada Medicaid and Nevada Check Up] Newsletter link?

A: [web announcement Volume 2019 20Issue 201 20220415.pdf \(nv.gov\)](#)

Q: In regard to Spec 300-Interns which license do you prefer to have with their application, the approved intern license or the SW board approved LSW license? I ask because I have had applications rejected back due to using either one. It feels like some are not on the same page as others. Thank you

A: If someone is a licensed clinical social worker (not an intern), they would enroll as a PT 14 specialty 305 LCSW. Nevada Medicaid is working to align its enrollment policy for clinical interns (e.g., MFT-I, CPC-I, and MSW-I) with the associated Board of Examiners (BOE). We are particularly aligning enrollment of the Social Work Post-Graduate intern with the BOE per Senate Bill (SB) 44, enrolling as a QMHP with the Master Social Worker (MSW) Post- Graduate Intern licensure; a web announcement is forthcoming that will outline the requirements for this enrollment. The intern license is to be attached. If you are having issues with a specific enrollment, please feel free to reach out to Providerenrollment@dncfp.nv.gov or behavioralhealth@dncfp.nv.gov for assistance.

We are looking to address this information in our Chapter 400 Provider Qualifications policy update. Please keep a look-out for the upcoming Public Workshop. We want provider input and feedback on our proposed policy. We are encouraging Independently licensed providers to enroll with Medicaid under the specialty for that provider type, under that licensure and experience.

Q: I've been getting questions on the telehealth announcement that's coming. I think it's making standard telephone/telehealth available in policy outside of the COVID-19?

A: There is a link to the Public Hearing for Telehealth on the DHCFP website, https://dncfp.nv.gov/Public/AdminSupport/MeetingArchive/PublicHearings/2022/MSM_Archives_2022/. If you read the proposed edits to the State Plan, as well as the MSM updates, the intent is to add in that audio-only piece in hopes that the policy can take over when the Public Health Emergency (PHE) ends. The intent is to add audio-only; but if you look at the proposed updates especially in the MSM, the intent is to support some Behavioral Health services to be performed by telehealth through audio/visual connection rather than audio only. There are a couple of pieces in the MSM edits that I want to point out to providers. Also in the MSM, we do specifically call out some specific proposed edits around audio-only can be used for Crisis Intervention services as well as Targeted Case Management; for other services the intent is to use the audio/visual connection.

Q: Will there be a rate change regarding telehealth? Is that accurate?

A: Please refer to our Telehealth specialists. There is a lot coming out with CMS including codes and modifiers for audio-only. If you email the [Behavioral Health inbox](#), we can connect you with the telehealth specialist.

Please email questions, comments, or suggested topics for guidance to BehavioralHealth@dncfp.nv.gov