DIVISION OF HEALTH CARE FINANCING AND POLICY CLINICAL POLICY TEAM, BEHAVIORAL HEALTH PROGRAM BEHAVIORAL HEALTH TECHNICAL ASSISTANCE (BHTA) Agenda – Wednesday, July 12, 2023 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 <u>behavioralhealth@dhcfp.nv.gov</u>.

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

2. June 2023 BHTA Minutes:

The minutes from last month's BHTA are no longer available on the <u>DHCFP</u> <u>Behavioral Health webpage</u> (under "Meetings"). You can navigate to this page and click on "Behavioral Health Agendas and Minutes" to find information from previous meetings. If you'd like to request a transcript from last month's meeting, submit a request to <u>behavioralhealth@dhcfp.nv.gov</u>.

Resources

Survey for All Payers Claims Database (APCD) <u>NV All Payer Claims</u> <u>Database Proposed Regulations and Small Business Impact Questionnaire</u> (2) (microsoft.com)

- BH Updates (outline posted <u>BHTA WEBINAR 2023 (nv.gov)</u>
- Intensity of Needs Grid and Service Limitations (continued) Reviewing care delivered under the service limitations and the use of prior authorization for the indication of medical necessity.

MSM 403.4(A)(6) -- Intensity of Needs Determination - A standardized mechanism to determine the intensity of services needed based upon the severity of the recipient's condition. The intensity of needs determination is to be utilized in conjunction with the clinical judgment of the QMHP and/or trained QMHA. This assessment was previously known as a level of care assessment. Currently, the DHCFP recognizes the Level of Care Utilization System (LOCUS) for adults and the Child and Adolescent Screening Intensity Instrument (CASII) for children and adolescents. There is no level of care assessment tool recognized by the DHCFP for children below age six, however, providers must utilize a tool comparable to the CASII and recognized as a standard of practice in determining the intensity of needs for this age group. **MSM 405.5(B)** – OMH Utilization Management

MSM 403.5(B)(1) -- The intensity of needs grid is an approved Level of Care (LOC) utilization system, which bases the intensity of services on the assessed needs of a

recipient. The determined level on the grid guides the interdisciplinary team in planning treatment to improve or retain a recipient's level of functioning or prevent relapse. Each Medicaid recipient must have an intensity of needs determination completed prior to approval to transition to more intensive services (except in the case of a physician or psychologist practicing as independent providers). The intensity of needs grid was previously referred to as level of services grid. **MSM 403.5(C)(1)** -- For BHCN, all service limitations are based upon the Intensity of Needs Grid in the definitions. The recipient must have an Intensity of Needs determination to supplement clinical judgment and to determine the appropriate service utilization. The provider must document in the case notes the level that is determined from the Intensity of Needs grid.

MSM 403.5(C)(4) – ION grid for Children and Adolescents

MSM 403.5(C)(5) - ION grid for Adults

NOTE: Review the service limitations on the ION Grid for Adults, treatment design DHCFP BHU provides guidance to providers on the tools for medically necessary treatment used in recipient-based care and how to be reimbursed for the treatment delivered to Medicaid recipients/members; initial assessment indicates the service limitations under NV Medicaid.

Case notes are essential to the documentation of treatment decisions. Case notes are used to indicate medical necessity for services (i.e., when submitting a prior authorization request). Communication with the individual and their support system is essential to the process because providers are not delivering treatment void of the recipient's experience.

Please submit any questions on the use of the ION grid.

3. Related DHCFP Public Notices:

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

Public Workshops

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Public Hearings

- 07/25/2023 State Plan Amendment Practitioner Upper Payment Limit for Fee-for-Service Payments
- 07/25/2023 Medicaid Services Manual (MSM 400 Mental Health and Alcohol/Substance Use Services)

4. DHCFP Behavioral Health Updates:

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

- WA#3114 Attention Provider Type 63 (Residential Treatment Center (RTC)/Psychiatric Residential Treatment Facility (PRTF)): Reminder Regarding Therapeutic Home Pass Policy Requirements
- WA#3112 Attention Provider Types 20 (Physician, M.D., Osteopath, D.O.), 24 (Advanced Practice Registered Nurse), 74 (Nurse Midwife) and 77 (Physician Assistant): Removal of DEA X-Waiver for Prescribing Buprenorphine
- WA#3103 Nevada Medicaid and Nevada Check Up Managed Care Organization (MCO) 2023 Open Enrollment
- WA#3102 Attention All Providers: Top 10 Claim Denial Reasons and
- Resolutions/Workarounds for May 2023 Professional Claims
- WA#3101 Attention All Providers, Delegates and Staff: Upcoming Training Sessions for July 2023
- WA#3098 Inpatient Claim Denials for Revenue Code on Prior Authorization Not Matching Revenue Code on the Claim
- **WA#3097** Attention All Providers: Guidance Regarding Group and Individual Provider Enrollment
- **WA#3096** Availability of the "Revalidate Provider" Link to Start Revalidation Application
- WA#3093 Professional Crossover Claims to Deny Correctly With Error Code 1008

Carin Hennessey, SSPS II

BH Updates

6. DHCFP Provider Enrollment Unit Updates:

Nevada Medicaid Website: <u>https://www.medicaid.nv.gov/providers/enroll.aspx</u> DHCFP Website: <u>http://dhcfp.nv.gov/Providers/PI/PSMain/</u> Contact Information: <u>providerenrollment@dhcfp.nv.gov</u>

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

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

8. Gainwell Technologies Updates:

Billing Information <u>https://www.medicaid.nv.gov/providers/BillingInfo.aspx</u> Provider Enrollment <u>https://www.medicaid.nv.gov/providers/enroll.aspx</u> Provider Training <u>https://www.medicaid.nv.gov/providers/training/training.aspx</u> Contact Information

Nevada Medicaid Customer Service: (877) 638-3472 <u>NVMMIS.EDIsupport@gainwelltechnologies.com</u> <u>nv.providerapps@gainwelltechnologies.com</u> Prior Authorization Information: (800) 525-2395 <u>nvpeer_to_peer@gainwelltechnologies.com</u> Field Service Representatives: <u>nevadaprovidertraining@gainwelltechnologies.com</u>

Alyssa Drucker, Provider Relations Field Service Representative – North Susan Harrison, Provider Relations Field Service Representative – South

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.

Please email questions, comments, or suggested topics for guidance to <u>BehavioralHealth@dhcfp.nv.gov</u>