



JIM GIBBONS  
*Governor*

STATE OF NEVADA  
DEPARTMENT OF HEALTH AND HUMAN SERVICES  
DIVISION OF HEALTH CARE FINANCING AND POLICY

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MICHAEL J. WILLDEN  
*Director*

CHARLES DUARTE  
*Administrator*

June 2, 2009

Mr. Alvin Moyle, President  
Indian Health Board of Nevada  
680 Greenbrae Dr., Suite 288  
Sparks, NV 89431

Dear President Moyle:

This letter is in response to your letter to the Division of Health Care Financing and Policy dated May 20, 2009. I would like to take this opportunity to address your concerns regarding the multiple encounter issue.

As you are aware, the Division of Health Care Financing and Policy operates under the guidance and direction of the Centers for Medicare and Medicaid Services (CMS), U.S. Department of Health and Human Services. As there is not an established federal policy on multiple encounters it falls to the individual state's Medicaid Administrator to establish the policy for each state.

A review of information available on this issue included 29 states reporting. Two states report no limit on encounters, 19 pay only one per day and of those, three allow a second for dental only. One state allowing one per day limits the encounters to 5 per month. The remaining eight states allow from two to seven encounters. Taking this information into account, it is felt that the three encounters now allowed by the State of Nevada is above the average and will be a positive change for the tribal clinics. While the monies paid to the tribal clinics are reimbursed from federal funds, each state is subject to federal audits and reviews and held responsible for repayment from state funds to the federal program if an error is noted.

It was reported at the 2008 Region IX Consultation that Nevada Medicaid would limit the encounters to three per day: one medical, one dental, one mental health. After consulting with tribal representatives it was decided not to limit the types of service to those three but to include other services such as pharmacy and laboratory as well. Again, the possibility of an emergency situation requiring two of one type of encounter is noted and exceptions will be accommodated.

As you are aware, we have long sought clarification from CMS on the multiple encounter issue. At the 2008 Consultation Mr. Liveratti, a member of my staff, stated we were going to move forward on our own with multiple encounters, and if written approval was received from CMS we would begin allowing three encounters per day effective the date of the CMS approval. We have yet to receive anything in writing from CMS on this issue and made the decision to go ahead as noted above.

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The date of implementation was dependent as well on changes to the computer system and was not intentionally delayed. Our Division had hoped this would be mid 2008. Unfortunately this proved to be an impossibility as our Information Technology staff's efforts had been redirected towards issues resulting from the State's financial crisis.

The Division of Health Care Financing and Policy will continue to work with the Nevada tribes through the Indian Health Board of Nevada to provide the best possible medical care for all Medicaid recipients. Your input is appreciated. I feel certain that the new policy covering multiple encounters will prove to be beneficial to the tribal health clinics.

Sincerely,

A handwritten signature in cursive script that reads "Elizabeth Aiello for Charles Duarte". The signature is written in black ink and is positioned above the typed name and title.

Charles Duarte  
Administrator

Cc: Michael Willden, Director, Nevada Dept. of Health & Human Services  
Elizabeth Aiello, Deputy Administrator  
John A. Liveratti, Chief, Compliance.  
Dr. Emory Lee, Regional Director, Region IX, Dept. of Health & Human Services  
Senator Harry Reid, Washington DC