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DEPARTMENT OF HEALTH AND HUMAN SERVICES
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June 6, 2017

Inter-Tribal Council of Nevada
Executive Board President
Vinton Hawley, Chairman
Pyramid Lake Paiute Tribe
P.O. Box 256
Nixon, NV 89424

Dear Tribal Members:

In accordance with established consultation guidelines, the Division of Health Care Financing and Policy (DHCFP) is notifying Nevada tribes of the following proposed change in Medicaid Services Manual Chapter 800- Laboratory Services policy:

- Section 803.1 A Coverage and Limitations has language added in regard to the definition and billing of drug screening and testing.
- Section 803.1 B Provider Responsibility has language added in regard to the billing of organ and disease oriented panels.

The DHCFP is providing clarification regarding the identification of drug screening and testing. The Centers for Medicare and Medicaid (CMS) has changed the identification of these procedures from qualitative and quantitative screening to presumptive screening and definitive testing. Drug screening and testing is a covered service and only one presumptive screening and one definitive testing procedure may be billed per patient per day. A presumptive test is not required prior to a definitive test.

Clarification has also been added regarding the payment for laboratory procedures bundled into a panel. When a provider performs all of the constituent parts of a covered panel, the provider must submit a claim for the panel rather than for each constituent procedure separately. The provider must not define a panel differently than does Current Procedural Technology (CPT), and all of the constituent procedures must be medically necessary or medically indicated. When a provider performs some, but not all, of the constituent procedures of a panel the provider must submit a claim for the constituent procedures separately. In addition, when a provider performs more procedures than are included in a panel, the provider may submit a claim for the additional procedures separately.

There is no fiscal impact anticipated for Provider Type 47, Indian Health Programs (IHPs), as a result of this policy change.

If you would like a consultation regarding this new policy, please contact Colleen McLachlan at (775) 684-3722 who will schedule a meeting. We would appreciate a reply within 30 days from the date of this letter. If we do not hear from you within this time, we will consider this an indication that no consultation is requested.

Sincerely,



Lynne Foster
Chief of Division Compliance

Cc: Shannon Sprout, Deputy Administrator, DHCFP
Duane Young, Chief III, DHCFP
Sheri Eggleston, SSPS III, DHCFP
Jodi Patton, SSPS III, DHCFP