



BRIAN SANDOVAL  
Governor

STATE OF NEVADA  
DEPARTMENT OF HEALTH AND HUMAN SERVICES  
DIVISION OF HEALTH CARE FINANCING AND POLICY  
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Carson City, Nevada 89701  
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RICHARD WHITLEY, MS  
Director

MARTA JENSEN  
Acting Administrator

September 21, 2015

Inter-Tribal Council of Nevada  
Executive Board President  
Gerald Temoke, Tribal Chairman  
Elko Band Council  
1745 Silver Eagle Drive  
Elko, Nevada 89801

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 policy:

The DHCFP has begun the process of implementing direct enrollment into managed care. This means that any Medicaid recipients eligible for managed care will be enrolled directly into their Managed Care Organization (MCO) upon approval of their Medicaid benefits by the Division of Welfare and Supportive Services (DWSS).

Currently a managed care eligible Medicaid recipient can spend anywhere from 6 days to 40 days in Fee-for-Service (FFS) Medicaid before they will enroll into their MCO. During this time they may seek services, establish a provider, and/or obtain prior authorizations for services or procedures. All of this can be disrupted or postponed in the transition from FFS into their MCO. Continuity of care is very important in the medical field and the DHCFP feels that if we were to enroll a recipient directly into their MCO at the point of Medicaid approval, many issues associated with the FFS/MCO transition can be avoided.

The anticipated begin date of direct enrollment is July 2016.

The following State Plan sections will be revised to reflect the changes referenced above:

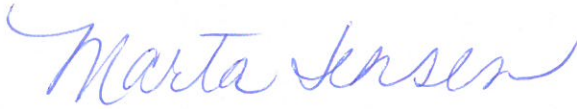
- 3.0 Services: General Provisions, Attachment 3.1 F

American Indians and Alaskan Natives (AI/AN) who are members of federally recognized tribes will remain a voluntary population for managed care and may continue to opt out of managed care at any time. AI/ANs who voluntarily enroll in managed care may continue to access health care services from Indian Health Programs.

There will be no fiscal impact.

If you would like a consultation regarding this new policy, please contact Tanya Benitez 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 that an indication that no consultation is requested.

Sincerely,



Marta Jensen  
Acting Administrator

Cc: Elizabeth Aiello, Deputy Administrator  
Coleen Lawrence, Chief, Clinical Policy Team  
Laura Palotas, Program Officer, Business Lines