

# AMERICAN INDIAN AND ALASKA NATIVE MEDICAID AND NEVADA CHECK UP FACT SHEET

*It is the policy of the Division of Health Care Financing and Policy for both Nevada Medicaid and Nevada Check Up to adhere to the tribal-state consultation process, uphold title IV of the Indian Health Care Improvement Act, and promote the healthcare of American Indians and Alaskan Natives (AI/AN) within the State of Nevada.*

*The term "Indians" or "Indian", unless otherwise designated, means any person who is a member of an Indian tribe, as defined in subsection (d) hereof, except that, for the purpose of sections 1612 and 1613 of this title, such terms shall mean any individual who:*

*A. irrespective of whether he or she lives on or near a reservation, is a member of a tribe, band, or other organized group of Indians, including those tribes, bands, or groups terminated since 1940 and those recognized now or in the future by the State in which they reside, or who is a descendant, in the first or second degree, of any such member, or*

*B. is an Eskimo or Aleut or other Alaska Native, or*

*C. is considered by the Secretary of the Interior to be an Indian for any purpose, or*

*D. is determined to be an Indian under regulations promulgated by Secretary.*

## Introduction

The Division of Health Care Financing and Policy (DHCFP) provides health care coverage for eligible individuals and families with low incomes and limited resources, as well as aged, blind and disabled individuals. The CHIP program in Nevada is known as Nevada Check Up (NCU), and provides health care coverage to low-income, uninsured children who are not eligible for Medicaid.

## Services

In accordance with the American Recovery and Reinvestment Act of 2009, the DHCFP supports eligible Indians in selecting an Indian Health Program as their Primary Care Provider (PCP). These recipients may select an Indian Health Program as their PCP, whether they are enrolled in managed care or fee-for-service (FFS). Eligible Indians are exempt from mandatory enrollment in managed care. In situations where Indians voluntarily enroll in managed care, health care services from Indian Health Programs may be accessed without restriction.

Covered Services for Nevada	
MANDATORY (Federal Law Requires)	OPTIONAL (State Optional)
<ul style="list-style-type: none"> <li>• Early and Periodic Screening, Diagnostic and Treatment (EPSDT)</li> <li>• Inpatient hospital services</li> <li>• Outpatient hospital services</li> <li>• Rural Health Clinics</li> <li>• Lab and x-ray</li> <li>• Nursing facility under age 21</li> <li>• Family planning</li> <li>• Physician services</li> <li>• Home Health services/Durable Medical Equipment (DME)</li> <li>• Midwives</li> </ul>	<ul style="list-style-type: none"> <li>• Private duty nursing</li> <li>• Clinic services</li> <li>• Dental services</li> <li>• Physical, occupational, speech therapy</li> <li>• Pharmacy</li> <li>• Prosthetic and orthotics</li> <li>• Diagnostic, screening, preventive and rehabilitation</li> <li>• Inpatient psych under 21</li> <li>• Personal care services</li> <li>• Case management</li> <li>• Home and Community Based Waiver Services</li> </ul>

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**PHARMACY:** Covers both brand and generic drugs. Over the counter drugs are covered with a prescription. All pharmacy services require a prescription.

**PHYSICIAN SERVICES:** Covers well baby/child checkups, preventive medicine, depression screening, family planning, lab, x-ray, diagnostic testing, office visits and tobacco cessation.

**MATERNITY SERVICES:** Covers prenatal office visits, prenatal vitamins with a prescription, fetal monitoring, screens and tests, delivery, postpartum follow up visit, newborn care. C-sections and early induction of labor require prior authorization.

**AUDIOLOGY SERVICES:** Covers hearing screens, testing, and aids for all ages. Hearing aids are covered up to \$350 per aid once every 24 months. Prior authorization is only required if service limit is exceeded.

**OCULAR SERVICES:** Covers screens, testing, frames and eye glasses for all ages. Eye glasses and exams are covered one per year. Prior authorization is only required if service limit is exceeded.

## Service Highlights

### BEHAVIOR HEALTH

OUTPATIENT	INTENSIVE OUTPATIENT	INPATIENT
<ul style="list-style-type: none"> <li>• Screening</li> <li>• Assessment</li> <li>• Testing</li> <li>• Psychotherapy</li> <li>• Counseling</li> <li>• Crisis Intervention</li> <li>• Medication Management</li> <li>• Peer Support</li> </ul>	<ul style="list-style-type: none"> <li>• Program for Assertive Community Treatment (PACT)</li> <li>• Day Treatment</li> <li>• Intensive Outpatient Treatment Program</li> <li>• Partial Hospitalization</li> </ul>	<ul style="list-style-type: none"> <li>• Inpatient Detox</li> <li>• Inpatient Psychiatric Care</li> <li>• Residential Treatment Centers</li> </ul>

### DENTAL

CHILDREN (0 through 20)	ADULTS (21 and over)
<ul style="list-style-type: none"> <li>• Covers comprehensive dental care including diagnostic, preventive, restorative, and corrective procedures</li> <li>• Orthodontia with prior authorization</li> </ul>	<ul style="list-style-type: none"> <li>• Emergency extractions, palliative care, limited dentures with prior authorization</li> <li>• Periodontal benefits for pregnant women with prior authorization</li> <li>• No preventive coverage</li> <li>• No coverage for orthodontia</li> <li>• No coverage for Qualified Medicare Beneficiary</li> </ul>

American Indians and Alaska Natives who are eligible for Nevada Medicaid or Check Up:

- Do not pay premiums and do not have any other cost sharing.
- Can still get care from an Indian Health Program provider.
- Are exempt from mandatory enrollment in managed care.