

Nevada Medicaid - Health Care Guidance Program (HCGP) Phase-Out

Frequently Asked Questions from Members

1) What is the Health Care Guidance Program?

The Health Care Guidance Program provides services to Nevada Medicaid Fee-for-Service individuals who have a qualified chronic health condition(s) or have a complex health condition that creates high costs. The program partners with local clinics, doctors and hospitals to support the members to better manage their health. The program, which started June 2, 2014, provides physical and behavioral health care management for up to 41,500 individuals across Nevada.

2) What are the qualified health conditions?

- Asthma;
- Cerebrovascular Disease, aneurysm and epilepsy;
- Chronic obstructive pulmonary disease (COPD), chronic bronchitis and emphysema;
- Diabetes mellitus;
- End stage renal disease (ESRD) and chronic kidney disease (CKD);
- Heart disease and coronary artery disease (CAD);
- HIV/AIDS;
- Mental health disorders including: dementia, psychotic disorders, anxiety disorders, psychosis, paranoia, bipolar disorder, schizophrenia, amnesia, delirium and mood disorders;
- Musculoskeletal system diseases including: osteoarthrosis, spondylosis, disc displacement, Schmorl's Nodes, disc degeneration, disc disorder with and without myelopathy, postlaminectomy syndrome, cervical disorders, spinal stenosis, spondylolisthesis, nonallopathic spinal lesions, fracture of the femur and spinal sprain;
- Neoplasm/tumor;
- Obesity;
- Pregnancy;
- Substance use disorder; and
- Complex Condition/High Utilizer: Individuals with complex conditions incurring high treatment costs exceeding \$100,000 annually in claims.

3) What is the mission of the Health Care Guidance Program?

The mission of the Health Care Guidance Program is to improve the quality of health and wellness of the enrolled program members by providing care in a more cost-efficient manner.

4) What are the goals of the Health Care Guidance Program?

The goals include:

- Help clinics, doctors, and hospitals coordinate care for their highest risk, chronically ill patients that qualify for the program.
- Help improve the quality of health care that certain Nevada Medicaid Fee-for-Service individuals receive through the program.
- Promoting increased self-management skills through one-on-one assistance.

5) What services does the Health Care Guidance Program provide?

The program provides:

- Help in locating and scheduling appointments with a doctor;
- Help with scheduling transportation assistance to medical appointments;
- Help with finding other resources such as food, housing, and utility assistance; and
- Reminder for yearly flu shots and other preventive health care.

6) With the program ending, does this affect my Nevada Medicaid benefits?

No, this does not. The Health Care Guidance Program is a value added service that has been provided free of charge to Nevada Medicaid Fee-for-Service individuals. This service will be ending on June 30, 2018. This does not affect your Medicaid eligibility or your Medicaid medical benefits.

7) With the program ending, does this mean I am no longer eligible for Nevada Medicaid? No, this does not. The Health Care Guidance Program is a value added service that has been provided free of charge to Nevada Medicaid Fee-for-Service individuals. This service will be ending on June 30, 2018. This does not affect your Medicaid eligibility or your Medicaid medical benefits.

8) Why is the Health Care Guidance Program ending?

The program is ending because it was a trial program that expires on June 30, 2018.

9) When does the Health Care Guidance Program end?

The Health Care Guidance Program will end on June 30, 2018. Until this date, the program is still open and providing services.

10) Who is enrolled in the Health Care Guidance Program?

The people who are enrolled in the Health Care Guidance Program includes Nevada Medicaid Fee-for-Service individuals who have a qualified chronic health condition or a complex condition that creates high costs.

11) I have Anthem Blue Cross and Blue Shield, Health Plan of Nevada, or SilverSummit Healthplan. Am I enrolled in the Health Care Guidance Program?

No you are not. The Health Care Guidance Program is only for Nevada Medicaid Fee-for-Service individuals.

12) Who can help me find medical services?

Your local Nevada Medicaid Office can assist you. Each office is open Monday through Friday, 8am to 5pm.

- <u>Carson City District Office</u> 1000 E. William St., Suite #111 Carson City, NV 89701 (775) 684-3651
- <u>Elko District Office</u> 1010 Ruby Vista, Dr., Suite #103 Elko, NV 89801 (775) 753-1191
- <u>Las Vegas District Office</u> 1210 S. Valley View, Suite #104 Las Vegas, NV 89102 (702) 668-4200
- <u>Reno District Office</u> 745 W. Moana Ln., Suite #200 Reno, NV 89509 (775) 687-1900

Nevada 2-1-1 can help you find community resources. You can call Nevada 2-1-1 by dialing 2-1-1 anywhere in Nevada. If you are outside of Nevada you can call 1-866-535-5654. Or you can visit <u>www.Nevada211.org</u>.

If you need help with transportation to medical appointments, please call MTM at 1-844-879-7341 to schedule a ride.

13) What is Nevada 2-1-1?

Nevada 2-1-1 is a free and confidential service that can help you with information and referrals to local health and human service agencies for your most critical and urgent needs. They can connect you with:

- Medical and mental health resources
- Employment support services
- Programs for children, youth, and families
- Pregnancy services
- Food pantries
- Community crisis and disaster recovery
- Housing help
- Utility payment assistance
- Support for seniors and persons with disabilities
- Many more public services and resources.

You can call Nevada 2-1-1 by dialing 2-1-1 anywhere in Nevada. If you are outside of Nevada you can call 1-866-535-5654. Or you can visit <u>www.Nevada211.org</u>.

14) What is MTM?

MTM provides Nevada Medicaid's non-emergency transportation. If you need a ride to medical appointments, please call MTM to schedule your ride. You can contact MTM at 1-844-879-7341. This is a free service for all Nevada Medicaid individuals (Including: Feefor-Service, Anthem Blue Cross and Blue Shield, Health Plan of Nevada, and SilverSummit Healthplan). More information can be obtained at <u>http://www.mtm-inc.net/nevada/members/</u>.

15) Do I get to keep my doctor(s)?

Yes. This change does not affect any other Nevada Medicaid benefits. The only change in benefits is the care management option that was available through the Health Care Guidance Program.

16) Will Nevada Medicaid be offering the Health Care Guidance Program in the future? Nevada Medicaid is currently researching options for future care management services. We want to assist Medicaid individuals in finding and receiving medical care that best meets their needs.

17) Who do I call to speak to someone about my Nevada Medicaid eligibility or other benefits that I may qualify for?

The Nevada Division of Welfare and Supportive Services (DWSS) completes all eligibility activities for health (Nevada Medicaid) and social service benefits. The call center phone number is also on the back of each Nevada Medicaid benefit card. 1-800- 992-0900 or visit <u>https://dwss.nv.gov/Contact/Welfare/</u> for office locations.

18) Can I provide any public comment on the Phase-Out of the Health Care Guidance Program?

The 30-day public comment period was from January 29 through February 27, 2018. Public workshops will be available and are open to the public. Please go to: <u>http://dhcfp.nv.gov/Pgms/BLU/HCGP/</u> or <u>http://dhcfp.nv.gov/Public/AdminSupport/PublicNotices/</u> for all updates regarding public

workshops.

19) Can I appeal the decision for the phase-out of the Health Care Guidance Program?

Because the Health Care Guidance Program is ending for everyone, there is no option to appeal this decision. However, you still have the right to appeal and have a fair hearing for any other medical services you have received or been denied.