



**NOTICE OF MEETING TO SOLICIT PUBLIC COMMENTS AND INTENT TO ACT UPON AMENDMENTS TO THE
NEVADA MEDICAID SERVICES MANUALS (MSM)**

REVISED AGENDA

Date of Publication: July 13, 2020

Date of Revision: July 22, 2020

Date and Time of Meeting: August 13, 2020 at 9:10 AM ~~or upon completion of the Amendments to the State Plan for Medicaid Services Public Hearing immediately preceding this meeting at the same WebEx/Call-in number(s)~~

Name of Organization: The State of Nevada, Department of Health and Human Services (DHHS), Division of Health Care Financing and Policy (DHCFP)

Place of Meeting: Please use the teleconference/WebEx options provided below. If accommodations are requested, please advise using the information at the end of this agenda. Out of deference to Declaration of Emergency Directive 006 (<https://nvhealthresponse.nv.gov/wp-content/uploads/2020/03/Declaration-of-Emergency-Directive-006-re-OML.3-21-20.pdf>) from the State of Nevada Executive Department signed by Governor Sisolak on March 22, 2020 as well as Emergency Directive 003 (<https://nvhealthresponse.nv.gov/wp-content/uploads/2020/03/2020-03-20.Declaration-of-Emergency-Directive-003.pdf>) signed March 20, 2020, a physical location will not be open to the public for attendance at this time.

Note: If at any time during the meeting an individual who has been named on the agenda or has an item specifically regarding them included on the agenda is unable to participate because of technical or other difficulties, please email Jenifer Graham at jennifer.graham@dhcfp.nv.gov and note at what time the difficulty started so that matters pertaining specifically to their participation may be continued to a future agenda if needed or otherwise addressed.

Webinar: <https://dhcfp.webex.com/dhcfp/onstage/g.php?MTID=e002d62c00e09d59049e179f804b7029f>

Or

www.webex.com, select "Join," enter Meeting Number 133 756 5594, your name and email and then select "Join."

Audio Only: (415) 655-0002

Event Number: 133 756 5594

PLEASE DO NOT PUT THIS NUMBER ON HOLD (*hang up and rejoin if you must take another call*)

AGENDA

1. General Public Comments (Because of time considerations, the period for public comment by each speaker or organization may be limited to three minutes and speakers are urged to avoid repetition of comments made by previous speakers. *Owing to the lack of a physical location for this meeting, public comment is encouraged to be submitted in advance.*)

2. **For possible action:** Discussion and adoption of changes to MSM Chapter 200 – Hospital Services

Revisions to MSM Chapter 200 are being proposed to remove Section 203.D – Newborns and Neonatal Intensive Care Unit (NICU). This section defined newborn and NICU revenue codes and provided a crosswalk from levels of care by InterQual/MCG, to levels of care by UB Editor, to the revenue codes.

Entities Financially Affected: These provider types (PT) include but are not limited to: Hospital, Inpatient (PT 11) and Critical Access Hospital (PT 75).

Financial impact on local government: None anticipated.

Effective date: August 15, 2020.

- a. Presentation of MSM Chapter 200
- b. Public comment on proposed changes
- c. Adoption of proposed changes

- ~~3. **For possible action:** Discussion and adoption of changes to MSM Chapter 600 – Physician Services~~

~~Revisions to MSM Chapter 600 are being proposed to eliminate bariatric surgery for recipients age 21 or older, eliminate podiatry services for recipients age 21 or older and Qualified Medicare Beneficiaries, and eliminate chiropractic services for Qualified Medicare Beneficiaries.~~

~~**Entities Financially Affected:** These PTs include but are not limited to: Physician, M.D., Osteopath, D.O. (PT 20), Advanced Practice Registered Nurses (PT 24), Physician's Assistant (PT 77), Chiropractors (PT 36), and Podiatrists (PT 21).~~

~~**Financial impact on local government:** None anticipated.~~

~~**Effective date:** August 15, 2020.~~

- ~~a. Presentation of MSM Chapter 600~~
- ~~b. Public comment on proposed changes~~
- ~~c. Adoption of proposed changes~~

- ~~4. **For possible action:** Discussion and adoption of changes to MSM Chapter 1100 – Ocular Services~~

~~Revisions to MSM Chapter 1100 are being proposed to eliminate Ocular Services for recipients age 21 years or older and Qualified Medicare Beneficiaries.~~

~~Entities Financially Affected:~~ These PTs include but are not limited to: Outpatient Hospitals (PT 12), Physician, M.D., Osteopath (PT 20), Advanced Practice Registered Nurse (PT 24), Optometrist (PT 25), Optician, Optical Business, (PT 41) and Physician Assistant (PT 77).

~~Financial impact on local government:~~ None anticipated.

~~Effective date:~~ August 15, 2020.

- a. ~~_____~~ Presentation of MSM Chapter 1100
- b. ~~_____~~ Public comment on proposed changes
- c. ~~_____~~ Adoption of proposed changes

5. ~~_____~~ **~~For possible action:~~** Discussion and adoption of changes to MSM Chapter 1300 — DME, Disposable Supplies and Supplements

Revisions to MSM Chapter 1300 are being proposed to eliminate coverage of prosthetic devices for recipients age 21 years of age or older.

~~Entities Financially Affected:~~ These PTs include but are not limited to: DME, Disposable Supplies and Supplements (PT 33).

~~Financial impact on local government:~~ None anticipated.

~~Effective date:~~ August 15, 2020.

- a. ~~_____~~ Presentation of MSM Chapter 1300
- b. ~~_____~~ Public comment on proposed changes
- c. ~~_____~~ Adoption of proposed changes

6. ~~_____~~ **~~For possible action:~~** Discussion and adoption of changes to MSM Chapter 1700 — Therapy

Revisions to MSM Chapter 1700 are being proposed to eliminate coverage of Occupational Therapy for recipients age 21 years of age or older, service limitations added to 12 units per calendar year, and after service limitations have been met a prior authorization is required.

~~Entities Financially Affected:~~ These PTs include but are not limited to: Outpatient Hospital (PT 12), Occupational Therapist (PT 34, Specialty 28), Physical Therapist (PT 34, Specialty 27).

~~Financial impact on local government:~~ None anticipated.

~~Effective date:~~ August 15, 2020.

- a. ~~_____~~ Presentation of MSM Chapter 1700
- b. ~~_____~~ Public comment on proposed changes
- c. ~~_____~~ Adoption of proposed changes

7. ~~**For possible action:** Discussion and adoption of changes to MSM Chapter 900—Private Duty Nursing (PDN).~~

~~Revisions to MSM Chapter 900 are being proposed to eliminate all PDN services for adults age 21 years and older and eliminates PDN services for recipients age 21 years and older who have elected to receive hospice care. The elimination of PDN coverage is being made in effort to reduce current costs to the Medicaid program and to address the Governor’s mandated budget cuts.~~

~~**Entities Financially Affected:** This proposed change affects all Medicaid enrolled providers delivering PDN, include but are not limited to Home Health Care (PT 29), PDN (PT 29).~~

~~**Financial impact on local government:** Unknown at this time.~~

~~**Effective date:** August 15, 2020.~~

- ~~a. Presentation of MSM Chapter 900~~
- ~~b. Public comment on proposed changes~~
- ~~c. Adoption of proposed changes~~

8. ~~**For possible action:** Discussion and adoption of changes to MSM Chapter 1400—Home Health Agency~~

~~Revisions to MSM Chapter 1400 are being proposed for adults age 21 years and older only to eliminate duplicative in-home services, such as Home Health when a recipient has elected to enroll in hospice care. The elimination of these services is being made in an effort to reduce current costs to the Medicaid program to address the Governor’s mandated budget cuts~~

~~**Entities Financially Affected:** This proposed change affects all Medicaid enrolled providers delivering Home Health Care, PDN, PCS including ISO services. Those PTs include but are not limited to Home Health Care (PT 29), PDN (PT 29), PCS (PT 30) and ISO (PT 83)~~

~~**Financial impact on local government:** Unknown at this time.~~

~~**Effective date:** August 15, 2020.~~

- ~~a. Presentation of MSM Chapter 1400~~
- ~~b. Public comment on proposed changes~~
- ~~c. Adoption of proposed changes~~

9. ~~**For possible action:** Discussion and adoption of changes to MSM Chapter 2600—Intermediary Service Organization~~

~~Revisions to MSM Chapter 2600 are being made to eliminate PCS and Skilled Services for adults age 21 years and older that elect to enroll in hospice care. The elimination of these services is being made in an effort to reduce current costs to the Medicaid program to address the Governor’s mandated budget cuts.~~

~~**Entities Financially Affected:** This proposed change affects all Medicaid-enrolled providers delivering specific PCS. Those PTs include but are not limited to ISO (PT 83).~~

~~**Financial impact on local government:** Unknown at this time.~~

~~**Effective date:** August 15, 2020.~~

- ~~a. Presentation of MSM Chapter 2600~~
- ~~b. Public comment on proposed changes~~
- ~~c. Adoption of proposed changes~~

~~10. **For possible action:** Discussion and adoption of changes to MSM Chapter 3200 – Hospice~~

~~Revisions to MSM Chapter 3200 are being proposed for adults age 21 years and older only to eliminate duplicative in-home services, such as Home Health, PDN and PCS when a recipient is under the care of Hospice.~~

~~**Entities Financially Affected:** This proposed change affects all Medicaid-enrolled providers delivering Home Health Care, PDN, PCS, including ISO services. Those PTs include but are not limited to Home Health Care (PT 29), PDN (PT 29), PCS (PT 30) and ISO (PT 83).~~

~~**Financial impact on local government:** Unknown at this time.~~

~~**Effective date:** August 15, 2020.~~

- ~~a. Presentation of MSM Chapter 3200~~
- ~~b. Public comment on proposed changes~~
- ~~c. Adoption of proposed changes~~

~~11. **For possible action:** Discussion and adoption of changes to MSM Chapter 3500 – Personal Care Services~~

~~Revisions to MSM Chapter 3500 are being made to eliminate PCS for adults age 21 years and older that elect to enroll in hospice care. The elimination of PCS is being made in an effort to reduce current costs to the Medicaid program to address the Governor's mandated budget cuts.~~

~~**Entities Financially Affected:** This proposed change affects all Medicaid-enrolled providers delivering specific PCS. Those PTs include but are not limited to: PCS (PT 30).~~

~~**Financial impact on local government:** Unknown at this time.~~

~~**Effective date:** August 15, 2020.~~

- ~~a. Presentation of MSM Chapter 3500~~
- ~~b. Public comment on proposed changes~~
- ~~c. Adoption of proposed changes~~

12.3. Adjournment

Nevada Medicaid is unaware of any financial impact to other entities or local government due to this public hearing, other than as stated above.

PLEASE NOTE: Items may be taken out of order. Items may be pulled or removed from the agenda at any time. All public comment may be limited to three minutes.

The DHCFP is exempt from Chapter 233B according to NRS 233B.039 and is not required to comply with the open meeting law in this process.

This notice and agenda have been posted at <http://dhcfp.nv.gov/> and <https://notice.nv.gov/>.

Notice of this meeting and draft copies of the changes will be available on or after the date of this notice at the DHCFP website <http://dhcfp.nv.gov/>. The agenda posting of this meeting can be viewed at the following locations:

1100 East William Street, Suite 111, Carson City, NV 89701 Carson City Central Office;
1210 S. Valley View, Suite 104, Las Vegas, NV 89102 Las Vegas District Office;
745 W. Moana Lane, Suite 200, Reno, NV 89509 Reno District Office and
1010 Ruby Vista Drive, Suite 103, Elko, NV 89801 Elko District Office

and may be reviewed during normal business hours.

If requested in writing, a draft copy of the changes will be mailed to you. Requests and/or written comments on the proposed changes may be sent to Jenifer Graham at the Division of Health Care Financing and Policy, 1100 E. William Street, Suite 101, Carson City, Nevada 89701.

All persons that have requested in writing to receive the public hearing agendas have been duly notified by mail or e-mail.

We are pleased to make accommodations for members of the public who have disabilities and wish to attend the meeting and/or participate. If special arrangements are necessary, notify the Division of Health Care Financing and Policy as soon as possible and at least ten days in advance of the meeting, by e-mail at: jenifer.graham@dhcfp.nv.gov in writing, at 1100 East William Street, Suite 101, Carson City, Nevada 89701.
