

Introduction:

Ms. Marta Stagliano, Chief of Compliance, Division of Health Care Financing and Policy (DHCFP), opened the Public Hearing introducing herself, Ms. Elizabeth Aiello, Deputy Administrator of the DHCFP and Ms. Amy Crowe, Deputy Attorney General (DAG).

Ms. Stagliano – The notice for this public hearing was published on June 17, 2013 in accordance with the Nevada Revised Statute 422.2369.

1. Discussion and Proposed Adoption of form NMO-3418: Nursing Facility Level of Care (LOC) Waiver for Persons with Physical Disabilities

Ms. Leslie Bittleston– This form, which is used to determine eligibility for the Waiver for Persons with Physical Disabilities, has been revised to provide clarity for users. No new criteria has been added, only the format of the form has been changed.

The effective date is July 22, 2013.

At the conclusion of Ms. Bittleston's presentation, Ms. Stagliano asked Ms. Aiello, Deputy Administrator, and Ms. Crowe, DAG, if they had any questions or comments.

Ms. Aiello's Comments:

- No Comments

Ms. Crowe's Comments:

- No Comments

Public Comments:

- No Comments

Ms. Stagliano – Recommended the Deputy Administrator approve as submitted.

Ms. Aiello - Approved as submitted.

Ms. Stagliano – Closed the Public Hearing for form NMO-3418: Nursing Facility Level of Care (LOC) Waiver for Persons with Physical Disabilities.

2. Discussion and Proposed Adoption of form NMO-3430A: Nevada DHCFP Serious Occurrence Report

Ms. Leslie Bittleston – The original form, NMO-3430-E has been split into two independent forms. One for an individual to report serious occurrences (now known as form NMO-3430A) and one for state case managers for complete when following up on a reported serious occurrence (form NMO-3430B). The purpose of this form, NMO-3430A is to collect objective and factual data regarding identified serious occurrences and must be completed by any individual who becomes aware of a serious occurrence.

These changes are effective July 22, 2013.

At the conclusion of Ms. Bittleston's presentation, Ms. Stagliano asked Ms. Aiello, Deputy Administrator and Ms. Crowe, DAG, if they had any questions or comments.

Ms. Aiello's Comments:

- No Comments

Ms. Crowe's Comments:

- No Comments

Public Comments:

- No Comments

Ms. Stagliano – Recommended the Deputy Administrator approve as submitted.

Ms. Aiello – Approved as submitted.

Ms. Stagliano – Closed the Public Hearing on form NMO-3430A: Nevada DHCFF Serious Occurrence Report.

3. Discussion and Proposed Adoption of form NMO-3430B: Serious Occurrence Report Follow-up/Outcome

Ms. Leslie Bittleston – The original form, NMO-3430-E has been split into two independent forms. One for an individual to report serious occurrences (now known as form NMO-3430A) and one for state case managers to complete when following up on a reported serious occurrences(form NMO-3430B). NMO-3430B is the form utilized by the state case manager, service coordinator or transition coordinator assigned to the recipient to follow up on all reported serious occurrences.

These changes are effective July 22, 2013.

At the conclusion of Ms. Bittleston's presentation, Ms. Stagliano asked Ms. Aiello, Deputy Administrator, and Ms. Crowe, DAG, if they had any questions or comments.

Ms. Aiello's Comments:

- No Comments

Ms. Crowe's Comments:

- No Comments

Public Comments:

- No Comments

Ms. Stagliano – Recommended the Deputy Administrator approve as submitted.

Ms. Aiello – Approved as submitted.

Ms. Stagliano – Closed the Public Hearing on form NMO-3430B: Serious Occurrence Report Follow-up/Outcome.

4. Discussion and Proposed Adoption of MSM Chapter 3600 – Managed Care Organization

Ms. Sheila Lambert – Revisions to MSM Chapter 3600 have been made to clarify and define the roles and responsibilities of the DHCFP and the Managed Care Organizations (MCOs) under contract providing mandatory managed care services to Medicaid and Nevada Check Up (NCU) recipients. Language was added to identify additional enhancement payments paid by the DHCFP Managed Care Program for Very Low Birth Weight Newborns (VLBW) and the Primary Care Physician (PCP) payments, as approved by the Centers for Medicare and Medicaid Services (CMS). Language was added for the requirement for Health Information Technology under the Health Information Technology for Economic and Clinical Health Act (HITECH). Language was added that included the federal requirement that recipients must fill out a consent form at least 30 days prior to a tubal ligation or vasectomy to the Family Planning Section. Language was updated to clarify mandatory and voluntary managed care program recipients; responsibilities of payment(s) for ancillary services on excluded services and/or coverage limitations for residential treatment centers, hospice and adult day care; as well as transition language for coordination of services from Fee-for-Service (FFS), MCO and/or the Silver State Health Insurance Exchange. Added two new sections to define essential community providers and freestanding obstetric/birth centers. The automatic re-enrollment and disenrollment section were updated to reflect current practices. Lastly, the responsibilities of the MCOs of updating enrollee handbooks as per federal regulation as well as the responsibilities on Third-Party Liability (TPL), Subrogation and Prohibition of Payments to Institutions or Entities located outside of the United States were updated to ensure compliance with current regulations.

The effective date is July 22, 2013.

At the conclusion of Ms. Lambert's presentation, Ms. Stagliano asked Ms. Aiello, Deputy Administrator, and Ms. Crow, DAG, if they had any questions or comments.

Ms. Aiello's Comments:

- Verified that Business Lines and Continuum of Care will work with each other to ensure the recipient is not moved from the MCO to FFS without the recipient's knowledge.
- Standardize the acronym for Silver State Health Insurance Exchange (SSHIX) to (HIX)
- On page 42 they may need to amend the reporting.

Ms. Lambert responded currently all MCOs are required to report all of their information. This section is to ensure compliance with the NCU and Medicaid reporting requirements.

Ms. Crowe's Comments:

- No Comments

Public Comments:

- No Comments

Ms. Stagliano – Recommended the Deputy Administrator approve as amended.

Ms. Aiello – Approved as amended.

Ms. Stagliano – Closed the Public Hearing on MSM Chapter 3600 – Managed Care Organization.

5. General Public Comments

- No Comments

There were no further comments and Ms. Stagliano adjourned the public hearing at 2:50 pm.

**An Audio (CD) version of this meeting is available through the DHCFP Administration office for a fee. For more detailed information on any of the handouts, submittals, testimony and or comments please contact Rita Mackie at rmackie@dhefp.nv.gov or you may call (775) 684-3681.*