

STATE PLAN UNDER TILE XIX OF THE SOCIAL SECURITY ACT

State NEVADA

Attachment 4.19-B
Page 5

26. Surgical services provided in both hospital-based and freestanding Ambulatory Surgical Centers (ASC)
- a. The Division adopts for reference the list of eligible codes for surgical centers for ambulatory patients and the payment groups to which those codes are assigned for services paid on or after September 1, 2003. This listing was established by Centers for Medicare and Medicaid Services (CMS) in 1997 and modified in 2000 and 2003.
 - b. The Division also adopts as a base, the payment amounts for groupings 1-9 as published in 42 CFR part 416 dated March 28, 2003. To ensure access of services, these payment amounts will be increased by 50% for hospital-based ambulatory surgical center services and 20% for freestanding ambulatory surgical center services. Services covered by Nevada Medicaid will be processed at these payment amounts.
 - c. Codes not on the Medicare list that are deemed appropriate to be performed in an ASC setting will be paid at the appropriate grouping level based on the services performed.
 - d. In the case of multiple procedures the following adjustments to the fee schedule are made:
 - 1) First procedure 100% of fee schedule
 - 2) Second procedure 50% of fee schedule
 - 3) Third procedure 25% of fee schedule
 - 4) Fourth procedure 10% of fee schedule
 - 5) Fifth and thereafter procedures 5% of fee schedule
 - e. Professional services are reimbursed as indicated in page 1c of section 4.19-B.
 - e-f. **Cornea procurement will be reimbursed at 100% of the procurement charges as listed in the 2013 The Lewin Group Study.**

Except as otherwise noted in the plan, state-developed fee schedule rates are the same for both governmental and private providers of hospital-based and freestanding Ambulatory Surgical Centers (ASC). The agency's fee schedule rates were set as of July 1, 2013 and are effective for services provided on or after that date. All rates are published at: <https://dhcfp.nv.gov/index.htm>.



CHIP Eligibility

OMB Control Number: 0938-1148

Expiration date: 10/31/2014

Separate Child Health Insurance Program Eligibility - Children Who Have Access to Public Employee Coverage CS10

Sec. 2110(b)(2)(B) and (b)(6) of the SSA

Children Who Have Access to Public Employee Coverage - Otherwise eligible targeted low-income children who have access to public employee coverage on the basis of a family member's employment.

The CHIP Agency operates this covered group in accordance with the following provisions:

Select one of the following conditions as described in Section 2110(b)(6) of the Social Security Act:

- Maintenance of agency contribution as provided in 2110(b)(6)(B) of the SSA.
- Hardship criteria as provided in section 2110(b)(6)(C) of the Social Security Act.

Coverage under this option is extended to children whose household income is:

Select one of the options for the income standard when compared to Targeted Low Income Children

- The same as the standards for Targeted Low-Income Children
- Lower than the income standards for Targeted Low-Income Children

Indicate whether coverage under this option is extended to all children who have access to public employee coverage, or only certain children:

- All children who have access to public employee coverage
- Certain children who have access to public employee coverage:

Employees of certain public agencies.

	Type of agency	
+	State agency employees only.	X

Certain types of public employees.

Attach methodology the state has used to calculate maintenance of agency contribution.

An attachment is submitted.

The state provides assurance that the state will, on an annual basis, recalculate expenditures for each participating public agency to determine if the maintenance effort condition continues to be met.

Children who are eligible for public employee health benefits coverage who are not described above are excluded from eligibility under the plan.

Children considered to have access to public employee coverage, and therefore not excluded from CHIP through this option, otherwise meet the definition of targeted low-income child provided at 42 CFR 457.310.



CHIP Eligibility

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-1148. The time required to complete this information collection is estimated to average 50 hours per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

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