



DEPARTMENT OF HEALTH AND HUMAN SERVICES  
DIVISION OF HEALTH CARE FINANCING AND POLICY  
1100 East William Street, Suite 101  
Carson City, Nevada 89701  
Telephone (775) 684-3676 • Fax (775) 687-3893  
<http://dhcfp.nv.gov>

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

**AGENDA**

**Date of Publication:** March 22, 2017

**Date and Time of Meeting:** April 26, 2017 at 1:00 PM

**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:** Division of Public and Behavioral Health  
4150 Technology Way, Suite 301  
Carson City, Nevada 89706

**Place of Video Conference:** Division of Health Care Financing and Policy  
1210 S. Valley View Blvd., Suite 104  
Las Vegas, Nevada 89102

**Teleconference Number:** (877) 402-9753

**Access Code:** 7316372

**AGENDA**

- 1. Public Comment**
- 2. For Possible Action: Review and approve meeting minutes from the March 16, 2017 public hearing.**
- 3. For Possible Action: Discussion and Proposed Adoption of the NMO-7076 – Notice of Decision Katie Beckett Eligibility Option**

**Revisions to the NMO-7076 form are being proposed to allow the Division of Health Care Financing and Policy (DHCFP) to issue a Notice of Decision (NOD) for a reduction in benefits if the recipient has a change in their Level of Care (LOC) that would affect their allowable costs.**

**Entities Financially Affected: None.**

**Financial Impact on Local Government: Unknown at this time.**

**Effective Date: April 27, 2017.**

- a. **Presentation of NMO-7076 – Notice of Decision Katie Beckett Eligibility Option**
- b. **Public comment on proposed changes**
- c. **Adoption of proposed changes**

**4. For Possible Action: Discussion and Proposed Adoption of the NMO-3594 – Katie Beckett Eligibility Option Comprehensive Statement of Understanding**

**New NMO-3594 – Katie Beckett Eligibility Option Comprehensive Statement of Understanding form is being proposed to inform applicants to the Katie Beckett Eligibility Option of their responsibilities with respect to program compliance.**

**Entities Financially Affected: None.**

**Financial Impact on Local Government: None.**

**Effective Date: April 27, 2017.**

- b. **Presentation of NMO-3594 – Katie Beckett Comprehensive Statement of Understanding**
- b. **Public comment on proposed new form**
- c. **Adoption of proposed new form**

**5. For Possible Action: Discussion and Proposed Adoption of the NMO-3580 – Comprehensive Statement of Understanding**

**Revisions to the NMO-3580 Comprehensive Statement of Understanding form are being proposed to support the requirement that all applicants who participate in Nevada's Home and Community Based Services (HCBS) Waiver must be informed of their choices between community placement or institutionalization, their choice of providers and their rights and responsibilities.**

**Entities Financially Affected: None.**

**Financial Impact on Local Government: None.**

**Effective Date: April 27, 2017.**

- c. **Presentation of NMO-3580 – Comprehensive Statement of Understanding.**
- b. **Public comment on proposed changes**
- c. **Adoption of proposed changes**

**6. For Possible Action: Discussion and proposed adoption of changes to MSM Chapter 100 – Medicaid Program**

**Revisions to MSM Chapter 100 – Medicaid Program, Section 105.1(B) – Medicaid Payments to Providers are being proposed to to simplify billing code rules by removing specific types of National Correct Coding Initiative (NCCI) edits and adding the rule associated with edits for clarification.**

**Revisions to MSM Chapter 100 – Medicaid Program, Section 106.3(b)(1) Tier 2 – Seven Year Sanction and Section 106.3(c)(2) Tier 3 – Twelve Month Sanction are being proposed to add “and/or” language for clarification in situations where a sanction will be imposed.**

**Entities Financially Affected: There is no anticipated financial impact to entities.**

**Financial Impact on Local Government: Unknown at this time.**

**Effective Date: April 27, 2017.**

- a. **Presentation of MSM Chapter 100 – Medicaid Program**
- b. **Public comment on proposed changes**
- c. **Adoption of proposed changes**

**7. For Possible Action: Discussion and proposed adoption of changes to the MSM Addendum Chapter**

**Revisions to the MSM Addendum Chapter are being proposed to add, delete, update or change definitions that apply to the Personal Care Services (PCS) program and to Non-Emergency Transportation (NET), in order to align with current program policies. The Home and Community Based Services Waiver names have been updated to reflect their current names where applicable. Throughout the Addendum, any reference to “Mental Retardation” has been replaced with “Intellectual Disability,” “Mentally Retarded” replaced with “Intellectually Disabled,” “Intermediate Care Facility for the Mentally Retarded (ICF/MR)” replaced with**

**“Intermediate Care Facility for Individuals with Intellectual Disability (ICF/IID),” “Emergency Medical Technician (EMT) Intermediate” replaced with “Advanced Emergency Medical Technician (AEMT)” and “Home and Community Based Waiver (HCBW)” replaced with “Home and Community-Based Services (HCBS) Waiver.”**

**The following definitions are being deleted: Able, Able Caregiver, Capable Caregiver, Legal Representative for Self-Directed Skilled Care, Mental Health and Developmental Services (MHDS), Mental Retardation, Payment Authorization Requests (PAR), Personal Care Attendant (PCA) Services, PCS Functional Assessment (FA), Private Drivers, Qualified Personal Care Assistant (PCA) and Volunteer Driver.**

**New definitions are being added for the following: Adaptive Behavior, Available, Intellectual Disability, Intellectual Functioning, Personal Assistant and PCA.**

**Updates or changes have been made to the following definitions: Activities of Daily Living (ADLs), Administrative Authority, Aging and Disability Services Division (ADSD), Attendant Care (AC), Capable, Daily Record, Escort/Attendant, Escort Service, Functional Assessment Service Plan (FASP), Group Care Facilities, Independent Contractor (IC), Person with Mental Retardation, Instrumental Activities of Daily Living (IADLs), Intermediary Service Organization (ISO), Mileage Reimbursement, NET, NET Broker, Personal Care Representative (PCR), PCS Functional Assessment (FA), PCS Provider Agency, Residential Facilities for Groups, Scheduled Emergency Transportation, Self-Directed (SD) Service Delivery Model, Self-Directed Skilled Services, Significant Change of Condition or Circumstance, Sitters, Skilled Services, Specialty Care Transportation (SCT), Stretcher and Ventilator Dependent Recipient.**

**Grammar, punctuation and capitalization changes were made, acronyms used and standardized, and some definitions were moved to the appropriate sections.**

**Entities Financially Affected: None**

**Financial Impact on Local Government: None.**

**Effective Date: April 27, 2017.**

- a. **Presentation of the MSM Addendum Chapter**
- b. **Public comment on proposed changes**
- c. **Adoption of proposed changes**

**8. For Possible Action: Discussion and proposed adoption of changes to MSM Chapter 1200 – Prescribed Drugs**

**Revisions to MSM Chapter 1200 – Prescribed Drugs include adding clarifying language to Continuity of Care, Emergency Supply of Medication, Pro-DUR functions, Medical/Surgical,**

Specialty and Psychiatric Hospitals, hospital-based outpatient clinics, End Stage Renal Disease (ESRD) facilities, emergency rooms, ambulatory surgical centers, outpatient hospices and to clinics paid by encounter. Deleted language under Coordination of Benefits, non-participating Health Maintenance Organization (HMO) Providers, the Pharmacy Billing Process and Intravenous (IV) Therapy. Clarifying language was also added under the State Maximum Allowable Cost (SMAC). The language under Prior Authorization (PA) Procedures was revised. Under Long Term Care, the dispensing fee was updated. Policy was added for Dispensing Practitioners.

Revisions to Appendix A were made to reflect approved actions by the Drug Use Review (DUR) Board at the July 28, 2016 and the October 27, 2016 meetings.

On July 28, 2016, new prior authorization criteria was approved for gonadotropin-releasing hormone analogs (Lupron®), and drugs to treat Irritable-Bowel Syndrome. Prior authorization criteria was revised for antiasthmatic monoclonal antibodies (Xolair®). Prior authorization criteria removed for duloxetine (Cymbalta®).

On October 27, 2016, revised prior authorization criteria was approved for Hepatitis C direct-acting antivirals. New criteria was approved for initial prescriptions of long and short-acting opioids.

Entities Financially Affected: Provider Types 28 (Pharmacy); 20 (Physician/Osteopath); 24 (Advanced Practice Registered Nurse); 77 (Physician's Assistant).

Financial Impact on Local Government: None.

Effective Date: April 27, 2017.

- a. Presentation of MSM Chapter 1200 – Prescribed Drugs
  - b. Public comment on proposed changes
  - c. Adoption of proposed changes
9. General Public Comments (Because of time considerations, the period for public comment by each speaker or organization may be limited to five minutes and speakers are urged to avoid repetition of comments made by previous speakers).
10. 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 at the discretion of the chairperson. Items may be combined for consideration by the public body. Items may be pulled or removed from the agenda at any time. If an action item is not completed within the time frame that has been allotted, that action item will be continued at a future time designated and announced at this meeting by the chairperson. All public comment may be limited to five minutes.

This notice and agenda have been posted at <http://dhcfnv.gov/> and [notice.nv.gov/](http://notice.nv.gov/).

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Notice of this meeting and draft copies of the changes will be available on or after the date of this notice at the DHCFP Web site <http://dhcfnv.gov/>, Carson City Central office and Las Vegas DHCFP. The agenda posting of this meeting can be viewed at the following locations: Nevada State Library; Carson City Library; Churchill County Library; Las Vegas Library; Douglas County Library; Elko County Library; Lincoln County Library; Lyon County Library; Mineral County Library; Tonopah Public Library; Pershing County Library; Goldfield Public Library; Eureka Branch Library; Lander County Library; Storey County Library; Washoe County Library; and White Pine County Library 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 Ellen Felsing at the Division of Health Care Financing and Policy, 1100 E. William Street, Suite 101, Carson City, NV 89701.

All persons that have requested in writing to receive the Public Hearings agenda have been duly notified by mail or e-mail.

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We are pleased to make accommodations for members of the public who have disabilities and wish to attend the meeting. 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: [Ellen.Felsing@dhcfnv.gov](mailto:Ellen.Felsing@dhcfnv.gov), in writing, at 1100 East William Street, Suite 101, Carson City, Nevada 89701 or call Ellen Felsing at (775) 684-3684.

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