



DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF HEALTH CARE FINANCING AND POLICY
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**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: August 22, 2018
Date of Revision: August 22, 2018
Date of 2nd Revision: September 14, 2018

Date and Time of Meeting: September 27, 2018 at 1:10 PM or upon completion of the amendments to the State Plan for Medicaid Services public hearing

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: Nevada State Legislative Building
401 S. Carson Street, Room 3137
Carson City, Nevada 89701

Place of Video Conference: Grant Sawyer Office Building
555 E. Washington Avenue, Room 4412E
Las Vegas, Nevada 89101

Teleconference: North (775) 687-0999
South (702) 486-5260

Access Code: 43606

AGENDA

1. Public comment

2. For possible action: Discussion and adoption of changes to MSM Chapter 400 – Mental Health and Alcohol/Substance Abuse Services

Revisions to MSM Chapter 400 are proposed to clarify service limitations for Intensive Outpatient Program (IOP), MSM Section 403.4(d)(2). IOP services are a comprehensive, interdisciplinary program of an array of direct mental health and rehabilitative services. Best practices indicate an IOP should be provided three days a week, at a minimum of three hours a day and not to exceed six hours a day. Clarification will include that services should not be provided in conjunction with other outpatient mental health or rehabilitative mental health services as this would be a duplication of services, group sizes, direct services and supervisory oversight.

Entities Financially Affected: This proposed change affects all Medicaid-enrolled providers delivering Intensive Outpatient Program. This provider type (PT) includes, but is not limited to, Behavioral Health Outpatient Treatment (PT 14).

Financial impact on local government: Unknown at this time.

Effective date: September 28, 2018.

- a. Presentation of MSM Chapter 400
- b. Public comment on proposed changes
- c. Adoption of proposed changes

3. For possible action: Discussion and adoption of changes to MSM Chapter 400 – Mental Health and Alcohol/Substance Abuse Services

Revisions to MSM Chapter 400 approved at the August 14, 2018 Public Hearing, which impose Prior Authorization (PA) requirements for psychotherapy and neurotherapy services were adopted with an implementation date of October 1, 2018. This item rescinds the implementation of the PA requirement. Other changes adopted at the August 14, 2018 Public Hearing will move forward with implementation. The proposed PA changes will be reversed in the policy at the October 25, 2018 Public Hearing.

Entities Financially Affected: Providers of psychotherapy and neurotherapy, including, but not limited to, Behavioral Health Outpatient Treatment (Provider Type (PT) 14), Psychologists (PT 26) and Behavioral Health Rehabilitative Treatment (PT 82).

Financial impact on local government: Unknown at this time.

Effective date: September 28, 2018.

- a. Presentation of MSM Chapter 400
- b. Public comment on proposed changes

c. Adoption of proposed changes

~~3. For possible action: Discussion and adoption of changes to MSM Chapter 100 – Medicaid Program~~

~~In an effort to improve overall timely processing of claims, facilitate quicker payments to providers and make available up-to-date claims data used for budgeting, research and outcomes monitoring, Nevada Medicaid proposes revisions to timely filing requirements. Revisions to MSM Chapter 100 are being proposed to change the in-state provider billing time frame (stale date) to 90 days from the date of service or the date of eligibility decision, whichever is later. Out of state providers and Third Party Liability (TPL) will not be affected.~~

~~Also proposed is a change to the retroactive enrollment time frame (backdate) to align with the proposed billing time frame (stale date).~~

~~Proposed updates to MSM Chapter 100 will adjust the retroactive (backdate) enrollment date to 90 days for all in-state provider contracts. Out of state providers are not impacted and may continue to request up to 365 days of retroactive enrollment. The retroactive enrollment date is based upon the date a completed application and provider contract are received.~~

~~Entities Financially Affected: This change may financially impact providers and will affect all provider types.~~

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

~~Effective date: October 1, 2018.~~

~~a. Presentation of MSM Chapter 100~~

~~b. Public comment on proposed changes~~

~~c. Adoption of proposed changes~~

4. For possible action: Discussion and adoption of changes to MSM Chapter 600 – Physician Services

Revisions to MSM Chapter 600 are being proposed to move Section 605 to a new MSM Chapter. This MSM Chapter will have policy for Federally Qualified Health Centers (FQHCs) only.

Entities Financially Affected: This proposed change affects all Medicaid-enrolled providers delivering FQHC type of services. Those provider types include, but are not limited to: Federally Qualified Health Center (PT 17, Spec 181).

Financial impact on local government: Unknown at the time.

Effective date: ~~September 28, 2018~~ October 1, 2018.

- a. Presentation of MSM Chapter 600
 - b. Public comment on proposed changes
 - c. Adoption of proposed changes
5. For possible action: Discussion and adoption of changes to MSM Chapter 2900 – Federally Qualified Health Centers (FQHCs).

Revisions to MSM Chapter 2900 are being proposed to create a new MSM Chapter for currently covered and noncovered FQHC services. Language was moved from MSM Chapter 600 and clarifying information was added.

Entities Financially Affected: This proposed change affects all Medicaid-enrolled providers delivering FQHC type of services. Those provider types include, but are not limited to: Federally Qualified Health Center (PT 17, Spec 181).

Financial impact on local government: Unknown at this time.

Effective date: ~~September 28, 2018~~ October 1, 2018.

- a. Presentation of MSM Chapter 2900
- b. Public comment on proposed changes
- c. Adoption of proposed changes

6. 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 three minutes.

This notice and agenda have been posted at <http://dhcftp.nv.gov/> and 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 DHCFTP Web site <http://dhcftp.nv.gov/>. The agenda posting of this meeting can be viewed at the following locations: Carson City Central Office; Las Vegas District Office; Reno District Office; Elko District Office; 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 the Ellen Felsing 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 Hearings agenda 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. If special arrangements are necessary, notify the Division of Health Care Financing and Policy as soon as possible and at least 10 days in advance of the meeting, by e-mail at: efelsing@dhefp.nv.gov, in writing, at 1100 East William Street, Suite 101, Carson City, Nevada 89701 or call Ellen Felsing at (775) 684-3684.
