

MEDICAID SERVICES MANUAL
TRANSMITTAL LETTER

June 25, 2019

TO: CUSTODIANS OF MEDICAID SERVICES MANUAL
FROM: TAMMY MOFFITT, CHIEF OF OPERATIONS
SUBJECT: MEDICAID SERVICES MANUAL CHANGES
CHAPTER 2900 – FEDERALLY QUALIFIED HEALTH
CENTERS

BACKGROUND AND EXPLANATION

Revisions to Medicaid Services Manual (MSM) Chapter 2900 – Federally Qualified Health Centers (FQHC) are being proposed to reference to MSM Chapter 400 – Mental Health and Alcohol/Substance Abuse for policy of the Partial Hospitalization Program (PHP). Language was updated regarding service limitations and prior authorization (PA) requirements for FQHC services.

Entities Financially Affected: This proposed change affects all Medicaid enrolled providers delivering services to Medicaid eligible recipients. Those provider types (PT) include, but are not limited to: Hospital, Outpatient (PT 12), Behavioral Health Outpatient Treatment (PT 14), Special Clinics (PT 17), Physicians, MD, Osteopath, DO (PT 20), Advanced Practice Registered Nurse (PT 24), Psychologist (PT 26), Pharmacy (PT 28), Durable Medical Equipment (PT 33), Therapy (PT 34), Indian Health Services and Tribal Clinics (PT 47), Home and Community Based Waivers (PT 48), Indian Health Service Hospital, Inpatient (Tribal) (PT 51), Indian Health Service Hospital, Outpatient (Tribal) (PT 52), Targeted Case Management (PT 54), Physician’s Assistant (PT 77), Indian Health Service Hospital, Outpatient (Non-Tribal) (PT 79), Applied Behavior Analysis (PT 85).

Financial Impact on Local Government: No financial impact is anticipated for local government.

These changes are effective June 26, 2019.

MATERIAL TRANSMITTED

CL
MSM Chapter 2900 – Federally Qualified
Health Centers

MATERIAL SUPERSEDED

MTL 15/18
MSM Chapter 2900 – Federally Qualified
Health Centers

Manual Section	Section Title	Background and Explanation of Policy Changes, Clarifications and Updates
2903.2	ANCILLARY SERVICES	New language added regarding “Partial Hospitalization Program (PHP).” Refer to MSM Chapter 400 – Mental Health and Alcohol/Substance Abuse Services for PHP policy. Language was updated and/or reworded for improved readability and clarity.

DRAFT	MTL-15/18 CL
DIVISION OF HEALTH CARE FINANCING AND POLICY	Section: 2903
MEDICAID SERVICES MANUAL	Subject: POLICY

5. Ambulance services.

2903.2 ANCILLARY SERVICES

- A. Ancillary services are those services which are an approved Nevada Medicaid State Plan service but are not included within an approved FQHC encounter.
1. Ancillary services may be reimbursed on the same date of service as an encounter by a licensed qualified health professional or other Medicaid qualified provider.
 2. The FQHC must enroll within the appropriate provider type and meet all the MSM coverage guidelines for the specific ancillary service.
 3. **Partial Hospitalization Program (PHP) – As an extension of an FQHC’s delivery model, an FQHC may have administrative oversight through a contractual agreement with an organization that provides outpatient PHP services and meets the criteria of a Certified Mental Health Clinic (CMHC). PHP services include a variety of psychiatric treatment modalities designed for recipients with chronic mental illness and/or substance abuse related disorders that require collaborative, intensive assistance normally found in an inpatient setting. Refer to MSM Chapter 400 – Mental Health and Alcohol/Substance Abuse Services for PHP policy.**

2903.3 MEDICAL NECESSITY

- A. To receive reimbursement, all services provided must be medically necessary as defined in MSM Chapter 100 – Medical Program.

2903.4 SERVICES LIMITATIONS

- A. Encounters are categorized as:
1. Medical.
 2. Mental/behavioral health.
 3. Dental.
- B. An FQHC may be reimbursed for up to three service-specific visits per patient per day provided that the FQHC has been approved for separate established rates for each encounter type.

2903.5 PRIOR AUTHORIZATIONS