

Division of Health Care Financing & Policy
Medicaid Services Manual
Chapter 200 Hospital Services

Public Workshop

May 16, 2016 10:00 AM – 12:00 PM

Proposed Chapter 200-Hospital Services Reorganization

- Nursing Facility (NF) Placement Screening Requirements will be modified and moved from Section 203.6 to Section 203.1B 12 under Provider Responsibilities, Discharge Planning
- Long Term Acute Care (LTAC) hospital policy will be moved from Section 203.2 to Section 203.6
- Rehabilitation hospital policy will be moved from Section 203.2 to Section 203.7
- Administrative Day policy will be moved from Attachment A Policy #02-03 to Section 203.2 and 203.1A 3, referencing this attachment, will be deleted

Proposed Changes/ Modifications – Discharge Planning

- Consolidate language to be more concise
- Add policy that specifies: appropriately qualified personnel must develop or supervise the development of a discharge plan
- Modify and move NF Placement Screening requirements to this section and removed QIO-like vendor and screening timeframe process language

Proposed Policy Clarifications- Administrative Days

- Modify language to clarify that administrative days may be authorized when an inpatient hospital day does not meet an acute level of care, whether or not discharge has been ordered
- Specify the two levels of administrative days: skilled and intermediate administrative days.
- Remove the “24 hours” reference in regards to one acute inpatient hospital day and remove “a recipient must be approved for” under Noncovered Services (Section 203.2D 2.a)

Proposed Policy Modifications– LTAC & Inpatient Rehabilitation

LTAC Specialty Hospitals:

- Add description, prior authorization, coverage and limitations, and provider responsibility policy

Inpatient Medical Rehabilitation Specialty Hospitals:

To be consistent with Medicare language:

- Change the term “Medical” Rehabilitation to “Inpatient” Rehabilitation (consistent with Medicare)
- Add examples of medical conditions that can benefit from rehabilitative services

Proposed Policy Changes- Inpatient Rehabilitation Services

Clarify PA requirements

Add coverage policy related to:

- coverage as long as fifteen (15) hours of therapeutic services are provided within a seven (7) consecutive day period, beginning the date of admit
- a defined brief exception to the intensity of service rule
- admission of recipients with a brain injury on a trial basis

Proposed Policy Changes- Inpatient Rehabilitation Services

Add coverage policy related to (continued):

- a recipient must be capable of making significant improvements in ADL in a specific timeframe
- either physical or occupational therapy is one of the therapy services provided.

Add Noncovered Services policy

Add Provider Responsibility -documentation and plan of care requirements

Feedback From Stakeholders

- How can Division of Health Care Financing and Policy improve policy?
- How can HPES improve operations?
- Comments or questions?

Contacts

- Kathy Stoner, Supervisor Hospital Services
Clinical Policy Team
775-684-3693
kathy.stoner@dhcfp.nv.gov
- Renee Necas, Hospital Specialist
Clinical Policy Team
775-684-3615 rnecas@dhcfp.nv.gov
- HPES <http://www.medicaid.nv.gov/>