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# Proposed Policy Updates to MSM 200 and 105.1A(2)

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# MSM 200 Proposed Updates

- Add a reference on MSM 105.1A - Extended Services within MSM 200 .
- Allow for three business days for inpatient admissions requiring authorization and emergency hospital transfers authorization (in-state or out-of-state) which currently require one business day; currently within MSM 200, Section 203.1A(2)(g) and 203.1B(17)(b).
- Remove Patient Liability (PL) currently within MSM 200, Section 203.1B(1).
- Update the title of MSM 200, Attachment A, pages 1-4 to reflect accurate headers.
- Add bits and pieces of clarification throughout MSM 200.
- Numerous grammatical and punctuational updates throughout the MSM 200 for accuracy.
- Update sections numbering, lettering, and/or page numbering, as needed, throughout MSM 200.



## MSM 105.1A(2)

- Update language on Extended Services; MSM 105.1A(2) which currently reads:

105.1A EXTENDED SERVICES - Services or treatment provided over an extended period of time require interim billing so that claims will be received no later than the stale date:

  - 1....
  2. Physicians, individual practitioners and clinics providing prolonged or extended treatment should submit interim billings for each calendar month; e.g., therapists whose services have been prior authorized for several months; and home health agencies authorized for ongoing, long-term care.
  - 3....
- Proposed new language to 105.1A(2) above:
  2. Physicians, individual practitioners, inpatient hospitals, and clinics providing services over an extended period of time or that cross over the month into the next month(s) require monthly billings for each month and need to be received no later than the stale date.



# Questions/Comments





# Contact Information

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