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Nevada Medicaid maintains interagency agreements with Nevada State Health Division and Rehabilitation Division. The Health Division provides family planning services, Early and Periodic Screening, Diagnosis and Treatment Services (EPSDT), Special Children's Clinic Services, Crippled Children's Services, TB Control, Pre-screening for institutional care and Maternal and Child Health Services. The Rehabilitation Division administers the vocational rehabilitation program throughout the State. (The Health Division provides Maternal and Child Health Services and EPSDT services in all rural counties and Crippled Children's Services statewide.)

Nevada Medicaid also maintains interagency agreements with other Title V grantees, the Health Division, the Clark County Health District, Washoe County District Health Department and Economic Opportunity Board. In Clark County the Health District and Economic Opportunity Board provide EPSDT and Maternal and Child Health services; in Washoe County the Health Department provides them.

The above mentioned agreements meet all of the following requirements:

- 1. They specify:
 - a. The mutual objectives and responsibilities of each party to the agreement;
 - b. The services each party offers and under what circumstances;
 - c. The cooperative and collaborative relationship at the State level;
 - d. The kinds of services to be provided by local agencies; and
 - e. The methods for:
 - 1) Early identification of individuals under age 21 in need of medical or remedial services;
 - 2) Reciprocal referrals;
 - 3) Coordinating plans for health services provided or arranged for recipients;
 - 4) Payment or reimbursement;
 - 5) Exchange of reports of services provided to recipients;
 - 6) Periodic review and joint planning for changes in the agreements;

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- 7) Continuous liaison between the parties including designation of State and local liaison staff; and
- 8) Joint evaluation of policies which affect the cooperative work of the parties.

Nevada Medicaid, if requested by the Title V grantee, reimburses the grantee or the provider for the cost of services furnished to recipients by or through the grantee, in accordance with the Nevada Medicaid State Plan.

All of the current above mentioned agreements are on file at the Nevada Medicaid Office and are available for review.

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