

Quadrennial Rate Review

Steve Sisolak
Governor

Richard Whitley, MS
Director



**DEPARTMENT OF
HEALTH AND HUMAN SERVICES**
Division of Health Care Financing and Policy
Helping people. It's who we are and what we do.



Suzanne Bierman, JD, MPH
Administrator

During the 2017 Nevada Legislative Session, Assembly Bill 108 (AB 108), also known as Quadrennial Rate Review, was passed. The passage of this bill requires the State of Nevada, Division of Health Care Financing and Policy (DHCFP) conduct a rate review for each provider enrolled with Nevada Medicaid at a minimum of every four years. The purpose of this bill is to determine whether the rate of reimbursement accurately reflects the actual cost of providing the service or item. The DHCFP has established a yearly rate review schedule that is based on provider types and their assigned specialties. The schedule below only reflects the review schedule and does not display any anticipated reports generated from the conclusions of the reviews. As such, the DHCFP reserves the right to amend the yearly schedule it deemed necessary.

Yearly Quadrennial Rate Review Schedule

2018 Year One

Provider Type - Service for Rate Review - Specialty Code

- 17 - Special Clinics - 166, 171, 174, 182, 183, 195, & 198
- 32 - Ambulance
- 72 - Nurse Anesthetist
- 74 - Nurse Midwife
- 22 - Dentist/Oral and Maxillofacial Surgery
- 27 - Radiology & Noninvasive Diagnostic Centers
- 43 - Laboratory, Pathology/Clinical
- 23 - Hearing Aid Dispenser & Related Supplies
- 76 - Audiologist

2019 Year Two

Provider Type - Service for Rate Review

- 14 - Behavioral Health Outpatient
- 26 - Psychologist
- 82 - Behavioral Health Rehabilitative Treatment
- 85 - Applied Behavioral Analysis
- 15 - Registered Dietitian (Medical Nutrition Therapy)
- 30 - Personal Care Aide – Provider Agency
- 83 - Personal Care Aide – Intermediary Service Organization
- 11 - Hospital, Inpatient*
- 13 - Psychiatric Hospital, Inpatient*
- 56 - Medical Rehabilitative Center & Specialty Hospitals*
- 63 - Residential Treatment Centers (RTC)*
- 75 - Critical Access Hospital (CAH), Inpatient*

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(Cont.) 2019 Year Two

Provider Type - Service for Rate Review

- 25 - Optometrist
- 41 - Optician, Optical Business
- 60 - School Based

2020 Year Three

Provider Type - Service for Rate Review

- 10 - Outpatient Surgery, Hospital Based
- 12 - Hospital, Outpatient
- 46 - Ambulatory Surgical Centers
- 29 - Home Health Agency (includes Private Duty Nursing)
- 39 - Adult Day Health Care
- 55 - Transitional Rehabilitative Center
- 16 - Intermediate Care Facilities for Individuals w/Intellectual Disabilities / Public
- 19 - Nursing Facility
- 44 - Swing-bed, Acute Hospital
- 64 - Hospice
- 65 - Hospice, Long Term Care
- 68 - Intermediate Care Facilities for Individuals w/Intellectual Disabilities / Private
- 38 - Home & Community Based Waiver – MR Services
- 48 - Senior Waiver (Frail Elderly)
- 57 - Adult Group Care Waiver
- 58 - Physically Disabled Waiver
- 59 - Home and Community Based Assisted Living Waiver

2021 Year Four

Provider Type - Service for Rate Review

- 20 - Physician, M.D., Osteopath
- 24 - Advanced Practice Registered Nurse (APRN)
- 77 - Physician's Assistant
- 17 - Substance Abuse Agency Model (SAAM) - 215
- 33 - Durable Medical Equipment, Disposable, Prosthetics
- 45 - End Stage Renal Disease Facility
- 81 - End Stage Renal Disease Facility - Hospital Based
- 21 - Podiatrist
- 34 - Therapy
- 36 - Chiropractor
- 17 - Certified Community Behavioral Health Clinic (CCBHC) - 188