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## Frequently Asked Questions (FAQ) for Severely Emotionally Disturbed (SED) Children

### 1. Q. What is Severely Emotionally Disturbed (SED)?

- A. Children with SED are persons up to age 18 who currently or at any time during the past year continuous 12-month period) have a:
- Diagnosable mental or behavioral disorder or diagnostic criteria that meets the coding and definition criteria specified in the current ICD (excluding substance abuse or addictive disorders, irreversible dementias, mental retardation, developmental disorders, and Z codes; and have a:
  - Functional impairment which substantially interferes with or limits the child from achieving or maintaining one or more developmentally appropriate social, behavioral, cognitive, communicative, or adaptive skills. Functional impairments of episodic, recurrent, and persistent features are included, however may vary in term of severity and disabling effects unless they are temporary and an expected response to stressful events in the environment. Children who would have met functional impairment criteria during the referenced year without the benefit of treatment or other support services are included in this definition.

### 2. Q. Who can conduct an SED determination?

- A. The MCO and its identified Subcontractors or Network Providers are the only entities that have the authority to make the SED determination for its members.

### 3. Q. Can SED members request to disenroll from an MCO and be covered under fee for service (FFS)?

- A. Yes, members who have been determined SED can request to disenroll from their MCO and be covered under FFS.

### 4. Q. What happens if an SED member chooses to remain enrolled with the MCO?

- A. If a member is determined SED and wants to remain with MCO, they do not need to submit an SED request.

### 5. Q. How often is an SED determination conducted?

- A. Members who are determined SED and are disenrolled from Managed Care must be redetermined at least annually within the same month of the original approval and send the request to DHCFP Medicaid.

### 6. Q. How long is an SED determination valid for?

- A. SED determinations made by appropriate network provider within the twelve (12) month period preceding initial Medicaid eligibility will be considered valid.

### 7. Q. What happens if any entity other than the MCO's identified Subcontractors or Network Providers makes a determination on behalf of a Medicaid Member?

- A. The determination will be rejected, and the entity will be directed to refer the member to the

contractor for a determination and services.

- 8. Q. Do providers need an authorization from the parent/guardian of the minor for the determination and referral?**
- A. The MCO or network providers must ensure that the parent/guardian of the minor member who is referred for SED assessment is fully informed of the reason why the assessment is necessary and must obtain authorization from the parent/guardian.
- 9. Q. Where can I get an SED form?**
- A. You can find the most current SED MCO Disenrollment Form and instructions on the Managed Care webpage at <https://dhcfp.nv.gov/Members/BLU/MCOMain/> under Links & Resources. All requests must be on the current form.
- 10. Q. Where can I send the SED Determination form?**
- A. The original SED determination request or annual determination form can be submitted to the managed care support email [Managedcaresupport@dhcfp.nv.gov](mailto:Managedcaresupport@dhcfp.nv.gov) or it may be faxed to 775.684-3774.
- 11. Q. When will the disenrollment from the MCO be effective?**
- A. The disenrollment will be effective on the first of the next administratively possible month. Example if the request is submitted prior to the Managed Care cut-off date it will be effective on the 1<sup>st</sup> day of the following month. If the request is submitted after the Managed Care cut-off date it will be effective the month after the month it was received.
- 12. Q. Who is not allowed to disenroll from an MCO due to SED determination?**
- A. Pursuant to the State of Nevada Title XXI State Plan, Nevada Check Up recipients must remain enrolled with the managed care organization that is responsible for on-going patient care.

**Note:** *If the SED form is incomplete, the request will not be processed.*

*To stay current with policy and documentation updates, we recommend that you visit <https://dhcfp.nv.gov/> frequently.*