

Reentry Initiative Advisory Committee

Division of Nevada Medicaid

Meeting #5: Additional Covered Services



November 18, 2025

[NVHA.nv.gov](https://nvha.nv.gov)



Agenda

1. Welcome and Updates
 - Recap of September Committee Meeting Discussion
2. Reentry Initiative Additional Covered Service Requirements
 - Clinical Consultation
 - Laboratory and Radiology Services
 - Treatment of HIV
 - Community Health Worker and Peer Support Services
3. Q&A
4. Next Steps



Welcome & Webinar Logistics

Using Teams

- Participants are joining by computer and phone.
- Everyone will be automatically muted upon entry.
- Upon entry, include your name and agency in the chat box.
- Use the chat box to submit questions (*please include your name and agency*).

- If you have a question, use chat or “raise hand” on the Microsoft Teams toolbar (*please include your name and agency*).
- If you are listening by phone, press *6 to unmute your line or *5 to raise hand.

- This meeting will be recorded and transcribed. If you would like a copy of the webinar transcript, reach out to 1115waivers@nvha.nv.gov



Advisory Committee September Meeting - Discussion Summary

Q&A Highlights

- ***NV Medicaid clarified that PT98 is a group enrollment.*** Individual ordering, referring, and prescribing providers will be required to enroll under the group enrollment.
- ***Nevada Medicaid confirmed that prisons are not required to conduct SUD screening in the 90 days pre-release if this screening occurred at intake.*** However, Nevada Medicaid noted that the facility will not be eligible to bill Medicaid for screening and MAT that was provided before the 90-day pre-release period.
- ***Nevada Medicaid clarified the scope of pharmacy services:***
 - All correctional facilities that participate in the Initiative must provide medications through a Medicaid-enrolled pharmacy, which may be a community-based or onsite correctional facility pharmacy.
 - Correctional facilities must ensure individuals have access to medications in hand upon release, even if the individual is released outside of pharmacy hours, by providing the option to 1) come to the facility the next pharmacy business day; or 2) identify a community pharmacy to access the 30-day medication supply.
 - Pre-release case managers will be responsible for ensuring that an individual receives their 30-day supply of medications upon release as well as developing a medication list to support transferring medication refills post-release.

Materials and a recording of Advisory Committee Meeting # 4 were shared in follow up from the meeting and are available on Nevada's [Reentry Initiative](#) Webpage.



Reentry Initiative Additional Covered Services



Reminder: Scope of Eligible Services

Federally Mandated Services

Consolidated Appropriations Act (CAA)-Eligible Youth*

- **Screening and Diagnostic Services** including comprehensive health, developmental history, and physical examinations; appropriate vision, hearing, and lab testing; dental screening services; and immunizations

Adults and Youth

- **Medication Assisted Treatment (MAT)** for all types of Substance Use Disorder (SUD) as clinically appropriate, with accompanying counseling
- **Medications Upon Release:** A minimum 30-day supply of all covered prescription medications and prescription over-the-counter drugs (as clinically appropriate), provided immediately upon release from the correctional facility
- **Case Management** to assess and address physical and behavioral health needs, and HRSN

Additional Nevada-Selected Services

- **Clinical consultation services for adults**
- **Laboratory and radiology services** consistent with what Medicaid covers for such services
- **HIV services** (*which will be covered under pre-release medications, clinical consultation services, and lab/radiology*)
- **Peer support services**
- **Services of a community health worker** (post-release education and training related to patient self-management of health conditions)
- **Prescribed drugs and medication administration** during the pre-release period, consistent with what Medicaid covers for such services

*CAA-eligible youth include post-disposition individuals under age 21 or former foster youth between the ages of 18 and 26 (Aged Out Foster Care youth)

= Today's Focus



Clinical Consultation & Screening and Diagnostic Services for CAA-Eligible Youth



Clinical Consultation Overview

A wide array of services are covered under the clinical consultation benefit; these services may be delivered in-person or via telehealth by physicians or other qualified providers.



Initial consultations and screening and diagnostic services*



Evaluation and Management (E/M) visits for identifying necessary physical and behavioral health care services



Consultation services and coordination of care to support reentry coordination and facilitate linkages to other providers

CAA-Eligible Youth*

Section 5121 of the CAA requires that screening and diagnostic services for CAA-eligible youth be delivered in accordance with Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) requirements and address the client's wellness exam and immunizations. Nevada will subsume this CAA requirement under the Initiative's clinical consultation benefit.



Clinical Consultation Services for Adults

- **Screening or diagnostic services**, including but not limited to physical and behavioral health screening and diagnostic services.
- **Evaluation services**, including but not limited to clinical assessment, patient education, and/or consultations.
- **Referrals and orders for needed medications** during the pre-release period or upon release.
- **Care coordination type services**, including consulting with the pre-release case manager to help inform the reentry care plan.

Screening and diagnostic services required under CAA Section 5121 for post-adjudication eligible youth will be rolled into “Clinical Consultation” services under the Demonstration



Subsumed Services for CAA-Eligible Youth

CAA-eligible youth* will receive screening and diagnostic services that align to Early Periodic Diagnostic and Treatment (ESPD) standards, known as Nevada's Healthy Kids Program, which includes:

- **Comprehensive early and periodic screenings, as well as inter-periodic screenings as needed**
- **Assessment of developmental, behavioral, and mental status**
- **Comprehensive physical exams**
- **Vaccinations**
- **Laboratory services**
- **Health education**
- **Diagnostic services**
- **Medically necessary health care services**

These services are currently being provided in the 30 days prior to release, as required by CAA. Once a facility goes live with the Initiative, these services will be provided in the 90 days prior to release.

**CAA-eligible youth include post-disposition individuals under age 21 or former foster youth between the ages of 18 and 26 (Aged Out Foster Care youth)*

Source: [Medicaid Service Manual: Section 1500: Healthy Kids Program](#)



Laboratory and Radiology Services



Laboratory and Radiology Services Overview



The laboratory and radiology benefit **provides clinical testing and imaging services** used to **diagnose diseases and guide their treatment.**



Labs and radiology can be used to **identify both acute and chronic conditions for treatment.**



Laboratory and Radiology Services



Laboratory services may include:

- Drug testing for substance use disorders
- Immunology testing (e.g., HIV screening)
- Hepatitis C genotype testing





Treatment of HIV



Treatment of HIV Overview



Nevada state law requires that the Reentry Initiative include individuals diagnosed with HIV.



HIV treatment will be provided through broader Demonstration service categories including **pre-release medications and medications in hand upon release, clinical consultation, and laboratory and radiology services.**

Source: [AB 389 \(2023\)](#)



Treatment of HIV Services

Treatment of HIV may include:

- Initial visit with facility-embedded or in-reach provider and a review of prior medical records
- Screening/laboratory tests/x-rays (*including blood work, if needed*)
- Medication treatment

Nevada will also require post-release case managers to follow up on post-release HIV treatment maintenance, as needed.



Community Health Worker and Peer Support Services



Community Health Worker and Peer Support Services Overview

These services offer access to providers who:



Leverage first-hand knowledge and insight gained from navigating challenges like those faced by the population served or self-identify as having a similar condition.



Are trusted members of the community on the care team that have a unique understanding of life circumstances.



Foster linkages between health care and the community to increase access to services and improve the quality and cultural competence of service delivery.



Peer Support Services

Services are provided by a certified Peer Support Specialist and may include:

- Recovery coaching and mentorship
- Skill-building in self-advocacy and resiliency
- Symptom management support
- Crisis de-escalation and support
- Assistance with navigating behavioral health services
- Support for social and community engagement

Certified Peer Support Specialists:

- Self-identify as a person with lived experience with mental health or substance use services and hold state-approved training and certification.
- Peers draw upon their experiences to provide structured, recovery-oriented interventions and assist individuals in achieving recovery, building self-advocacy skills, managing symptoms, and accessing community resources.



Community Health Worker Services

Services are provided by a certified Community Health Worker and may include:

- Guidance in attaining health care services
- Identify recipient needs and provide education from preventive health services to chronic disease self-management
- Information on health and community resources, including making referrals to appropriate health care services
- Connect recipients to preventive health services or community services to improve health outcomes
- Provide education, including but not limited to, medication adherence, tobacco cessation, and nutrition
- Promote health literacy, including oral health

Community Health Workers (CHW):

- Trained public health educators providing culturally and linguistically appropriate health education to better understand an individual's condition, responsibilities and health care options who hold state-approved training and certification.

CHWs deliver services during the post-release period. These providers may be involved in the warm handoff, as needed.



Questions?



Next Steps



Reentry Advisory Committee Schedule

Date	Discussion Topic
Tuesday, March 25	▪ Advisory Committee Kickoff
Tuesday, May 27	▪ Medicaid Eligibility and Enrollment in Correctional Facilities
Tuesday, July 29	▪ Pre- and Post-Release Case Management
Tuesday, September 23	▪ Providing Medications, including Medication-Assisted Treatment (MAT)
Tuesday, November 18	▪ Providing Other Covered Services
Tuesday, January 26 (2026)	<i>As needed, topics TBD</i>

Note: Areas of focus and sequencing of topics subject to change dependent on evolving project needs, and may continue into 2026 at NV Medicaid's discretion

To sign up for Nevada's Reentry Initiative email list serve and receive regular project updates, please [click this link and send the email.](#)



Appendix



Nevada Reentry Advisory Committee Members (1 of 2)

Stakeholder Type	Agency/Department	Name of Representative
State Agency	NV Division of Public and Behavioral Health	Jennifer Hughes, LCSW
	NV Division of Public and Behavioral Health	Mark Mosely
	NV Division of Public and Behavioral Health	Michelle Sandoval
	NV Division of Public and Behavioral Health	Ellen Richardson-Adams
	NV Division of Public and Behavioral Health	Drew Cross
	NV Division of Public and Behavioral Health	Stephanie Cook
	NV Division of Public and Behavioral Health	Dr. Ronna Dillinger
State Correctional Facility	Nevada Department of Corrections	Michael P. Williams
City Agency	City of Henderson	Hayley Jarolimek
County Agency	Clark County	Leah Lamborn
	Lyon County Human Services	Rhiannon Baker
	Lyon County Human Services	Todd Cospewicz
	Nye County Health and Human Services	Karyn Smith
	Washoe County Human Services Agency	Steve Jachimowicz
County Correctional Facility	Clark County Juvenile Justice Services	Katherine Huncovsky
	Clark County Juvenile Justice Services	Kelly Storla
	Clark County Juvenile Justice Services	Tyrone Roberson
	Carson City Juvenile Services/Probation	Linda Lawlor
	Humboldt County Juvenile Services	Pauline Salla
	North Las Vegas Community Correctional Center	Alexis Lozano
	Washoe County Juvenile Services	Lance Mezger
	Washoe County Sheriff's Office	Mark Kester
	Washoe County Sheriff's Office	Maggie Dickson
	Washoe County Sheriff's Office	TJ Mills
	GROWLER Consulting	Capt. Bill Teel
DHHS Contractor		
Representative with Lived Experience	Nevada Outreach & Training	Christian Neff
	N/A	Edward Bevilacqua



Nevada Reentry Advisory Committee Members (2 of 2)

Stakeholder Type	Agency/Department	Name of Representative
Provider	Heads up Nevada	Mark Miele
	<i>Private Practice</i>	Tom Durante
Advocacy/Non-profit Organization	CSH (Corporation for Supportive Housing)	Brooke Page
	Hosanna Home Transitional Living Home	Linda Schmitt
	Karma Box Project	Grant A Denton
	Karma Box Project	Matthew Grimsley
	Life Changes Inc	Lisa Moore
	Nevada Detention Administrators Working Group	Marshall Smith
	NAMI Western Nevada	Laura Yanez
	Volunteers of America - NCNN	Michael Tausek
Community Partner	Battle Born Sober Living, Catholic Charities	Judy Kroshus
	Best Practices Nevada, LLC	Brandon Ford
	Catholic charities of Northern NV /Battle Born Housing	Shannon Cain
	Nevada Homeless Alliance	Dr. Catrina Grigsby-Thedford
	Nevada PEP	Magdalena Ruiz
	Nevada Youth Empowerment Project	Monica DuPea
	St. Paul's UMC	Nyberg, David
Managed Care Organizations	Anthem	Angie Anavisca-Valles
	Anthem Blue Cross Blue Shield- Medicaid	Regina De Rosa
	Anthem Nevada Medicaid	Alletha Muzorewa
	SilverSummit Healthplan	Kevin Murray
	SilverSummit Healthplan Medicaid	Frank L. Deal
	UnitedHealthcare Health Plan of Nevada Medicaid	Austin Pollard



Update on Reentry Initiative Implementation Timeline

Nevada submitted its waiver application to the Centers for Medicare & Medicaid Services (CMS) in December 2024 and, while awaiting approval, has continued to move forward with policy design and operational planning.

- Nevada initially anticipated receiving approval from CMS by ~Q3 2025 and launching services in select facilities by late 2025.
- However, due to competing priorities at the federal level and focus on implementation requirements associated with H.R. 1, CMS has signaled that waiver approvals may be delayed.
- Resultingly, Nevada Medicaid does not anticipate receiving waiver approval for the Reentry Initiative before the end of 2025 such that services will not go live until sometime in 2026 (~3-6 months following CMS approval).
- In the interim, Nevada will continue to engage with CMS to develop Standard Terms and Conditions for the waiver and prepare to submit the state's required Implementation and Reinvestment Plans. Nevada Medicaid also plans to continue to implement system upgrades and develop policy and operational guidance for correctional facilities, managed care plans, and community-based organizations participating in the Reentry Initiative.