

Section 1115 Demonstration Waiver Executive Summary

Nevada's Treatment of Opioid Use Disorders (OUDs) and Substance Use Disorders (SUDs) Transformation Project

**State of Nevada
Department of Health and Human Services**



*Nevada Division of Health Care Financing and Policy
September 10, 2021*

Steve Sisolak
*Governor
State of Nevada*

Richard Whitley, MS
*Director
Department of Health and Human Services*

1115 Demonstration Summary

A. Program Summary

The Nevada Department of Health and Human Services (DHHS) is requesting authority from the Centers for Medicare & Medicaid Services (CMS) for a five-year, Section 1115 Demonstration waiver to expand statewide access to comprehensive behavioral health services for the most vulnerable Nevadans, including those with opioid use disorders (OUDs) and other substance use disorders (SUDs). Specifically, DHHS seeks authority to provide a limited waiver of the federal Medicaid Institutions for Mental Diseases (IMD) exclusion (hereinafter referred to as the “Demonstration”). This Demonstration will further the objectives of Title XIX and Title XXI of the Social Security Act by improving access to high-quality, person-centered services that produce positive health outcomes for individuals; and advancing innovative delivery system and payment models to strengthen provider network capacity and drive greater value for Medicaid. The Demonstration will not modify the State’s current Medicaid program or Children’s Health Insurance Program (CHIP) outside of the benefits and reimbursement methodologies described within the application.

B. Eligible Populations

All mandatory and optional eligibility groups approved for full benefit coverage under the Nevada Medicaid and CHIP State Plans will be eligible for the Demonstration.¹

The Demonstration will target high-risk, high-need beneficiaries requiring enhanced services to effectively treat SUD and/or OUD.

C. IMD Exclusion

The State seeks a limited waiver of the federal IMD exclusion to ensure meaningful access to services. Nevada residential and withdrawal management providers are currently licensed as either residential facilities (i.e., “Facility for the treatment of abuse of alcohol or drugs,” or ADA), community triage centers (CTC), or withdrawal management facilities (i.e., “Facility for modified medical detoxification,” or MDX).² As the majority of these providers are located in Las Vegas and Reno, Nevada’s two urban areas, most individuals residing in rural or frontier areas must travel great distances to find an adequate level of care. Despite the number of licensed IMD providers in Nevada, access to SUD treatment services is severely limited for the uninsured, underinsured, and Medicaid beneficiaries. This is primarily due to the federal IMD exclusion, which prohibits Federal Financial Participation (FFP) for medically necessary services provided in hospitals, nursing facilities, or other institutions of more than 16 beds, that are

¹ A comprehensive listing of State Plan eligibility groups is available on the DHCFP website at <http://dhcftp.nv.gov/Resources/AdminSupport/Manuals/MSP/Eligibility/MSPeligHome/>

² ADA, CTC and MDX are license types/designations established by the Nevada Bureau of Health Care Quality and Compliance (HCQC). See NV. DEPT. OF HEALTH AND HUMAN SERVS., *Health Facilities Licensing*, <https://nvdpbh.aithent.com/Protected/LIC/LicenseeSearch>.

primarily engaged in providing diagnosis, treatment, or care of persons with mental diseases, including medical attention, nursing care, and related services.³

Nevada Medicaid managed care organizations are contractually permitted to authorize coverage for stays of up to 15 days in an IMD for inpatient services related to SUD in lieu of other settings; however, this option is limited to managed care enrollees and the allowance is not always sufficient to meet beneficiaries' clinical needs. As such, the State is requesting a limited waiver of the IMD exclusion for all Medicaid beneficiaries ages 21-64, regardless of delivery system, with short-term stays averaging 30 days. The State does not intend to implement any limitations in amount, duration, or scope of these services beyond the aforementioned average length of stay target. By making residential and withdrawal management services reimbursable for these providers, Nevadans across the State will have significantly improved access to medically appropriate care.

For additional detail on this waiver please attend the public hearing on October 26, 2021 or you can locate information on the DHCFP public notice website:

<https://dhcftp.nv.gov/Public/AdminSupport/PublicNotices/>

This notice and agenda have been posted online also at <http://dhcftp.nv.gov> and <http://notice.nv.gov>, as well as Carson City, Las Vegas, Elko, and Reno central offices for DHCFP. E-mail notice has been made to such individuals as have requested notice of meetings (to request notifications please contact jenifer.graham@dhcftp.nv.gov, or at 1100 East William Street, Suite 101, Carson City, Nevada 89701

1100 E. William Street, Suite 101 Carson City, Nevada 89701

1010 Ruby Vista Drive, Suite 103, Elko, Nevada 89801

1210 S. Valley View, Suite 104, Las Vegas, Nevada

745 W. Moana Lane, Suite 200, Reno, Nevada 89509).

If you require a physical copy of supporting material for the public meeting, please contact jenifer.graham@dhcftp.nv.gov, or at 1100 East William Street, Suite 101, Carson City, Nevada 89701. Supporting material will also be posted online as referenced above. Note: We are pleased to make reasonable accommodations for members of the public with a disability and wish to participate. If accommodated arrangements are necessary, notify DHCFP as soon as possible and at least ten days in advance of the meeting, by e-mail at jenifer.graham@dhcftp.nv.gov in writing, at 1100 East William Street, Suite 101, Carson City, Nevada 89701.

³ Limited State general funding and block grant funding is available for certain designated providers (i.e., those denoted with an asterisk in Table 3.3).

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