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DEPARTMENT OF HEALTH AND HUMAN SERVICES

DIVISION OF HEALTH CARE FINANCING AND POLICY

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Suzanne Bierman,
JD MPH
Administrator

Notice of Meeting to Solicit Public Comments and Intent to Act Upon Amendments to the Medicaid Services Manual (MSM)

Public Hearing March 18, 2022 Summary

Date and Time of Meeting: March 18, 2022 at 8:30 AM

Name of Organization: State of Nevada, Department of Health and Human Services (DHHS), Division of Health Care Financing and Policy (DHCFP)

Place of Meeting: DHCFP
1100 E. William Street
First Floor Conference Room
Carson City, Nevada 89701

Teleconference and/or WebEx Attendees

(Note: This List May Not Include All Participants, Just Those Who Identified Themselves)

Gabriel Lither, Senior Deputy Attorney General (SDAG)	Casey Angres, DHCFP
Dr. Antonina Capurro, Deputy Administrator, DHCFP	Sarah Dearborn, DHCFP
Alex Tanchek	Theresa Carsten, DHCFP
Robyn Gonzalez, DHCFP	Tiffany Saunders-Newey, Anthem
Annette Piccirilli, Optum	Briza Virgen, DHCFP
Jovanna Leid, GWT	Geri A. Hart
David Olsen, DHCFP	Adonica Iverson
Amy Levin, MD	Carin Hennessey, DCHFP
JC Flowers	Jimmy Lau, Ferrari Public Affairs
Jill Lecheminant	Debra Toney
Briza Virgen, DCHFP	Maribeth C. Capen
Lori Follett, DCHFP	Richard A. Elorreaga
Erin Lynch, DCHFP	Susana Angel, DHCFP
Crystal Biselli, DCHFP	Monica Schiffer, DHCFP
Abigail Bailey, DHCFP	Sheila Heflin-Conour, DCHFP
Kindra Berntson, DCHFP	Vimal Asokan
Antonio Gudino-Vargas, DCHFP	Shawna Derosse
Lea Case, JK Belz & Associates	Larry

Introduction:

Casey Angres, Manager of Division Compliance, DHCFP, opened the Public Hearing introducing herself, Dr. Antonina Capurro, Deputy Administrator and Gabe Lither, SDAG.

Casey Angres – The notice for this public hearing was rescheduled from the original date of February 22, 2022, and March 11, 2022. The notice was published on January 20, 2022 and revised on January 20, 2022, February 17, 2022, March 2, 2022, March 3, 2022 and March 14, 2022 in accordance with Nevada Statute 422.2369.

1. Public Comments: None

2. Discussion and adoption of changes to MSM Chapter 1200 – Prescribed Drugs

Kindra Berntson, Social Services Program Specialist, DHCFP.

Kindra proposed revisions to MSM Chapter 1200, based on recommendations approved at the October 26, 2021 Drug Utilization Review Board (DUR) Meeting.

The proposed changes include:

Addition of Skyrizi® (Risankizumab-rzaa) to the current Immunomodulator Drugs clinical criteria.

Addition of new prior authorization criteria for Nurtec ODT® (Rimegepant) for episodic migraines.

Addition of new prior authorization criteria for Gimoti® (metoclopramide).

Addition of new prior authorization criteria for Aduhelm® (aducanumab-avwa).

And lastly, updates to the Entresto (sacabitril) /valsartan) clinical criteria to reflect new FDA-approved age indication.

The following providers who prescribe, dispense, or administer the added drugs may be affected by the changes, including but not limited to the listed provider types (PT) on the agenda.

There is no financial impact on local government known.

The effective date is March 21, 2022.

At the conclusion of Kindra Berntson's presentation, Casey Angres asked Dr. Capurro and Gabe Lither if they had any questions or comments. They had none.

There were no public comments.

Dr. Capurro approved the changes, pending spelling and grammar checks.

Casey Angres closed the Public Hearing for MSM Chapter 1200 – Prescribed Drugs.

3. Discussion and proposed adoption of changes to MSM Chapter 400 – Mental Health and Substance Abuse Services

Carin Hennessey, Program Specialist, DHCFP.

Carin Hennessey advised Revisions to MSM Chapter 400 are being proposed to revert policy for Biofeedback and Neurotherapy services for the treatment of a mental health diagnosis. After several months of discussion with the Centers for Medicare and Medicaid Services (CMS) regarding the elimination of these services as a result of the approved DHCFP budget, during the 2021 Legislative session, CMS determined that the elimination violated the maintenance of effort requirements (MOE) of Section 9817 of the American Rescue Plan Act (ARPA); and pursuing these eliminations now would jeopardize the state's ability to receive enhanced funding for Home and Community Based Services (HCBS) available under ARPA. Nevada has withdrawn Nevada State Plan Amendment (SPA) 21-0009 and will re-evaluate consideration of these services when the MOE requirements expire on March 4, 2024.

Structural changes were made to the chapter including renumbering and re-arranging of sections. Section 403.4(C)(4) – Neurotherapy was reverted.

The proposed change affects all Medicaid-enrolled providers delivering biofeedback and neurotherapy services. Those PTs include, but are not limited to:

Hospital, Outpatient (PT 12); Behavioral Health Outpatient Treatment (PT 14); Physician, M.D., Osteopath D.O. (PT 20); Advanced Practice Registered Nurse (PT 24); Psychologist (PT 26); Physician's Assistant (PT 77); Behavioral Health Rehabilitative Treatment (PT 82), and Certified Community Behavioral Health Center (PT 17 Specialty 188).

At this time, the fiscal impact is estimated to result in an approximate state fiscal year (SFY) shared cost of:

SFY 2022: \$28,024,136

SFY 2023: \$28,299,314

The proposed effective date is March 21, 2022.

The reverted policy identifies Neurotherapy as an individual psychological therapy incorporating biofeedback training combined with psychotherapy as a treatment for mental health disorders. A licensed Qualified Mental Health Professional (QMHP) will be reimbursed for the administration of Neurotherapy, within the scope of their practice and expertise. A certified Biofeedback Technician may assist the provision of the biofeedback portion of the Neurotherapy service. However, the QMHP must provide the psychotherapy portion. Both the psychotherapy and biofeedback portions are imbedded in the QMHP rate for Neurotherapy. Prior Authorization is required for all Neurotherapy services to exceed each service limitation set forth in policy for the covered International Classification of Diseases (ICD) codes; additional service requests are based upon medical necessity.

At the conclusion of Carin Hennessey's presentation, Casey Angres asked Dr. Capurro and Gabe Lither if they had any questions or comments and they had none.

There were no public comments.

Dr. Capurro approved the changes, pending spelling and grammar checks.

Casey Angres closed the Public Hearing for MSM Chapter 400 – Mental Health and Substance/Abuse Services.

4. Discussion and adoption of changes to MSM Chapter 2900 – Federally Qualified Health Centers (FQHCs)

Monica Schiffer, Social Services Program Specialist, DHCFP.

The addition of Community Health Workers (CHW) Services as a reimbursable provider under the encounter within Medicaid Services Manual (MSM) Chapter 2900, Federally Qualified Health Centers (FQHC), is being proposed as a result of the passage of Assembly Bill (AB) 191 and Senate Bill (SB) 420 during the 81st Legislative Session. Community Health Workers (CHW) are certified health educators who provide services including outreach

and the coordination of health care. New proposed policy includes the following: Added “NRS Chapter 449 – Medical Facilities and Other Related Entities” as a new authority under Section 2901(B). Added new language in Section 2903(D) “and/or certified provider” to Certified Provider after Licensed Qualified Health Professional. Added new Section 2903(D)(2) where Certified Providers are approved to furnish services included in the outpatient encounter Added Section 2903.1(A)(1) to add CHWs to the list of providers. Added Section 2903.1(A)(2)(h) for CHW services as defined in MSM Chapter 600 – Physician Services.

These changes were discussed at a public workshop conducted on December 29, 2021.

These proposed policy updates may affect the following PTs, including but not limited to:

Community Health Worker (PT 89); and Federally Qualified Health Centers (PT 17 Specialty 181).

The effective date is March 21, 2022, pending CMS approval of the SPA.

DHCFP will notify the providers via web announcement and direct email once approval is obtained.

At the conclusion of Monica Schiffer’s presentation, Casey Angres asked Dr. Capurro and Gabe Lither if they had any questions or comments and they had none.

There were no public comments.

Dr. Capurro approved the changes, pending spelling and grammar checks.

Casey Angres closed the Public Hearing for MSM Chapter 2900 – Federally Qualified Health Centers (FQHCs)

5. **Adjournment**

There were no further comments and Casey Angres closed the public hearing at 8:46 AM.

****An Audio (CD) version of this meeting is available through the DHCFP Compliance office. For more detailed information on any of the handouts, submittals, testimony and or comments, please contact Jenifer Graham at jenifer.graham@dncfp.nv.gov with any questions.***