

Joe Lombardo
Governor

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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.



Stacie Weeks,
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NOTICE OF MEETING TO SOLICIT PUBLIC COMMENTS AND INTENT TO ACT UPON AMENDMENTS TO THE NEVADA MEDICAID SERVICES MANUAL (MSM)

REVISED AGENDA

Date of Publication: April 27, 2023

Date of Revision: May 23, 2023

Date and Time of Meeting: May 30, 2023, at 10:05 AM or upon completion of the amendments to the State Plan for Medicaid Services Public Hearing immediately preceding this meeting at the same location(s)

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

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

Please use the teleconference/Microsoft Teams options provided below. If accommodations are requested, please advise using the information at the end of this agenda.

Note: If at any time during the meeting an individual who has been named on the agenda or has an item specifically regarding them included on the agenda is unable to participate because of technical or other difficulties, please email Jenifer Graham at documentcontrol@dhcfp.nv.gov and note at what time the difficulty started so that matters pertaining specifically to their participation may be continued to a future agenda if needed or otherwise addressed.

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AGENDA

1. General Public Comments (Because of time considerations, the period for public comment by each speaker or organization may be limited to three minutes and speakers are urged to avoid repetition of comments made by previous speakers.)
2. **For possible action:** Discussion and adoption of changes to MSM Chapter 400 – Mental Health and Alcohol/Substance Abuse Services

Revisions to MSM Chapter 400 are being proposed to add policy language related to crisis services under Nevada Medicaid. The language was developed specifically for Nevada’s Designated Mobile Crisis Teams (DMCT) in compliance with Section 1947 of the US Social Security Act (SSA) for qualifying community-based mobile crisis intervention services. Through Section 9813 of the American Rescue Plan Act (ARPA), DHHS DHCFP was awarded a state planning grant by the US Centers for Medicare & Medicaid Services (CMS) to assist in the development and implementation of these qualifying community-based mobile crisis intervention services under its Medicaid state plan.

Entities Financially Affected: This proposed change affects all Medicaid-enrolled provider types (PT) delivering Mobile Crisis Services. Those PTs include, but are not limited to: Crisis Services (PT 87); Hospital, Outpatient – Crisis Stabilization Center (PT 12, Specialty 250); Psychiatric Hospital, Inpatient (PT 13); Behavioral Health Outpatient Treatment (PT 14); Substance Abuse Agency Model (SAAM) (PT 17, Specialty 215); Certified Community Behavioral Health Center (CCBHC) (PT 17, Specialty 188); Physician, M.D., Osteopath, D.O. (PT 20); Advanced Practice Registered Nurse (PT 24); Psychologist (PT 26); Non-Emergency Behavioral Health Transports (PT 35, Specialty 987); School Based (PT 60); Physician’s Assistant (PT 77); and Behavioral Health Rehabilitative Treatment (PT 82).

Financial impact on local government:

Estimated total computable fiscal impact:	
Total Computable SFY24	\$5,531,404
Total Computable SFY25	\$6,195,884
Total	\$11,727,288

Effective date: May 31, 2023.

- a. Presentation of MSM Chapter 400
- b. Public comment on proposed changes
- c. Adoption of proposed changes

3. **For possible action:** Discussion and adoption of changes to MSM Chapter 1200 – Prescribed Drugs

Revisions to MSM Chapter 1200 are being proposed to include addition of new PAD-specific prior authorization (PA) criteria for Libtayo® (cemiplimab-rwlc), Ocrevus® (ocrelizumab), Opdivo® (nivolumab) and Tecentriq® (atezolizumab) within the Anti-PD-1 Monoclonal Antibodies Section; addition of new PAD-specific PA criteria for Eylea® (aflibercept), Lucentis®; Byooviz™; Cimerli™(ranibizumab), Susvimo® (ranibizumab) within the Anti-Angiogenic Ophthalmic Agent Section; addition of new PAD-specific PA criteria for SCIG (immune globulin): Hizentra®, Gammagard Liquid®, Gamunex®-C, Gammaked®, HyQvia®, Cuvitru®, Cutaquig®, Xembify® within the Immunoglobulins Section; addition of new PAD-specific PA criteria for Pemetrexed within the Antimetabolites Section; addition of new PAD-specific PA criteria for Perjeta® (pertuzumab), Herceptin®; Ogivri®; Kanjinti™; Trazimera™; Herzuma™; Ontruzant® (Trastuzumab); Herceptin Hylecta™ (trastuzumab and hyaluronidase-oysk) within the HER2 Inhibitor Section; addition of new PAD-specific PA criteria for Rituxan®, Truxima®, Ruxience™, Riabni™ (Rituximab) and Rituxan Hycela® (rituximab and hyaluronidase human) within the CD20 Monoclonal Antibodies Section; addition of new PAD-specific PA criteria for Soliris® (eculizumab), Ultomiris® (ravulizumab-cwyz) within the Selective Immunosuppressants Section; addition of new PAD-specific PA criteria for Yervoy® (ipilimumab) within the Anti-CLTA-4 Monoclonal Antibodies Section.

Entities Financially Affected: Providers who prescribe, dispense or administer this drug may be affected by this change, including but not limited to the following PTs: Outpatient Surgery (PT 10); Hospital, Inpatient (PT 11); Hospital, Outpatient (PT 12); Intermediate Care Facilities for Individuals with Intellectual Disabilities, Public (PT 16); Special Clinics (PT 17); Nursing Facility (PT 19); Physician/Osteopath (PT 20); Podiatrist (PT 21); Advanced Practice Registered Nurse (PT 24); Pharmacy (PT 28); Home Health Agency (PT 29); Ambulatory Surgical Centers, Freestanding (PT 46); Indian Health Programs and Tribal Clinics (PT 47); Indian Health Service Hospital, Inpatient (Tribal) (PT 51), Indian Health Service Hospital, Outpatient (Tribal) (PT 52); Transitional Rehabilitative Center, Outpatient (PT 55); Inpatient Rehabilitation and Long Term Acute Care (LTAC) Specialty Hospitals (PT 56); Hospice (PT 64); Hospice, Long Term Care (PT 65); Intermediate Care Facilities for Individuals with Intellectual Disabilities, Private (PT 68); Nurse Anesthetist (PT 72); Critical Access Hospital (CAH), Inpatient (PT 75); Audiologist (PT 76); Physician’s Assistant (PT 77); Indian Health Service Hospital, Inpatient (Non-Tribal) (PT 78); Indian Health Service Hospital, Outpatient (Non-Tribal) (PT 79).

Financial impact on local government: No impact on local government known.

Effective date: July 1, 2023.

- a. Presentation of MSM Chapter 1200
- b. Public comment on proposed changes
- c. Adoption of proposed changes

4. **For possible action:** Discussion and adoption of changes to MSM Chapter 2500 – Case Management.

DHCFP is proposing to amend MSM Chapter 2500 – Case Management to add Nevada local county agencies as qualified providers under Targeted Case Management (PT 54) to deliver targeted case management services to adults with Serious Mental Illness (SMI). Currently county agencies are identifying recipients with SMI in need of case management services but are unable to be reimbursed for these services to assist. This will allow county agencies to continue to see and provide services to these recipients when the need arises at their prospective

agencies. Language is also being clarified to identify a Nevada University Health System as a provider in both the State Plan and MSM rather than the Nevada School of Medicine.

Entities Financially Affected: This proposed change affects county agencies enrolling as Medicaid providers and delivering Targeted Case Management Services. Those PTs include but are not limited to Targeted Case Management (PT 54).

Financial Impact on Local Government: No known fiscal impact on local government.

Effective Date: Retroactive to April 1, 2023.

- a. Presentation of MSM-2500 - Case Management
- b. Public comment on proposed changes
- c. Adoption of proposed changes

5. **For possible action:** Discussion and adoption of changes to MSM Chapter 3800 – Medication Assisted Treatment

Revisions to MSM Chapter 3800 are being proposed to remove language related to the “DATA-Waiver Program.” Additionally, removing language contradictory to the harm reduction model. The Data-Waiver (X-Waiver) Program was eliminated when Congress signed the Consolidated Appropriations Act of 2023 into law on December 29, 2022. On January 12, 2023, the Drug Enforcement Administration (DEA) and the Substance Abuse and Mental Health Services Administration (SAMHSA) announced the immediate elimination of the X-Waiver for prescribing buprenorphine.

Entities Financially Affected: These proposed changes affect all Medicaid-enrolled providers delivering medication assisted treatment. Those PTs include, but are not limited to: Physician, M.D., Osteopath, D.O. (PT 20), Advance Practice Registered Nurse (PT 24), Nurse Midwife (PT 74), Physician’s Assistant (PT 77), CCBHC (PT 17, Specialty 188), and SAAM (PT 17, Specialty 215).

Financial impact on local government: Unknown at this time.

Effective date: May 31, 2023.

- a. Presentation of MSM Chapter 3800 – Medication Assisted Treatment
- b. Public comment on proposed changes
- c. Adoption of proposed changes

6. Adjournment

NOTE: To use the long link to the meeting in the event there are issues with the URL shortener, please use the following complete link:

https://teams.microsoft.com/l/meetup-join/19%3ameeting_OW10NGMzNTYtNDZhZi00NTA5LTlINzktNDMxNTczNjI2Y2Mz%40thread.v2/0?context=%7b%22Tid%22%3a%22e4a340e6-b89e-4e68-8eaa-1544d2703980%22%2c%22Oid%22%3a%22cc4c7a00-e2be-4dda-a27b-3405a8271b9c%22%7d

Nevada Medicaid is unaware of any financial impact to other entities or local government due to this public hearing, other than as stated above.

PLEASE NOTE: Items may be taken out of order. Items may be pulled or removed from the agenda at any time. All public comment will be limited to three minutes.

The DHCFP is exempt from Chapter 233B according to NRS 233B.039 and is not required to comply with the Nevada Administrative Procedure Act in this process. This meeting is conducted by and with state agency staff which is not a public body for purposes of NRS 241 related to Nevada Open Meeting Law but every effort is made to be transparent in notice and information provided to encourage public awareness and participation.

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DHCFP, 1100 E. William St., Suite 101, Carson City, Nevada 89701

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

DHCFP, 1210 S. Valley View, Suite 104, Las Vegas, Nevada 89102

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

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