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Human Services

Network Adequacy and Mandatory Enrollment for Severely Emotionally Disturbed Children in
Managed Care

Division of Health Care Policy and Financing

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Agenda

1. Network Adequacy within the future managed care contract (effective January 2022)

- Discuss current standards
- Propose alternate methodologies that have been researched
- Public comment

2. Addressing the needs of Severely Emotionally Disturbed (SED) children in the mandatory managed care program

- Protections to ensure continuity of care
- Discuss additional revisions
- Public comment





Current Network Standards

- Current Federal Requirements (42 CFR 438.68, 438.206 and 438.207)
- State Standards
 - Time and distance standards
 - Provider to enrollee ratios
 - Timely access



Managing Access – Future State

Changes to existing standards

- Time and distance
 - Alignment with NV DOI commercial standards effective 1/1/19 (NAC 687B.768)
 - Include exception process for MCOs, subject to State approval
- Provider to enrollee ratios
 - Consideration for future development of additional ratios
- Timely access
 - PCP standards
 - Specialist standards
 - Prenatal standards
 - LTSS standards
- Essential Community Providers
 - Additional provider types
- Oversight
 - Secret shopper survey to be conducted annually and standardized for consistent measurement of appointment accessibility
 - Build parameters for more specific reporting on grievances





Public Comment

What are the challenges you see to building the provider network in Nevada and what do you recommend for overcoming them?

Considering the options for ensuring access like ratios, time/distance standards etc. What do you think is the most meaningful measure of real Member access?

What provider groups or types would you like to see included in the standards?





Mandatory Enrollment Options for SED Children

Mandatory enrollment in managed care

- Positive impacts
 - Care coordination system that can assess all medical, behavioral and social needs
 - Single point of accountability to monitor and oversee outcomes
- Potential concerns
 - Loss of providers when foster care children exit system
 - Less coordination with service providers who are carved out (e.g., TCM)





MCO Requirements under Consideration

- Specific BH Provider Requirements
 - MCO requirement to Contract with Specialist Organizations as Essential Community Providers
 - Need to identify any other provider types needed in the network to achieve desired outcomes
- Integrated Care Requirements
 - Population Health
 - Case Management
 - Tiered System
- Specific Outcome Measures





Public Comment

What additional challenges should we consider when including SED children as a mandatory population in managed care?

What challenges should we be aware of for providers who work exclusively in a fee-for-service system today?

What strategies do you recommend to further support coordination of care and ensure transitions of care are seamless ?

What outcome measures do you recommend as an indicator that the system is working for this population?





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