



DEPARTMENT OF HEALTH AND HUMAN SERVICES

DIVISION OF HEALTH CARE FINANCING AND POLICY

Helping people. It's who we are and what we do.



Medicaid Services Manual, Chapter 100 – Medicaid Program

Summary of Proposed Changes for Public Workshop

Grammar, numbering corrections throughout, updated and added references to other sections and chapters.

MSM 100 – Introduction

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 - Added that the MSM had additional chapters regarding covered services, policies, and procedures for all enrolled providers. Also added a reference to the Addendum for definitions since this isn't explained in MSM 100.
 - Added subsection (D) on Fiscal Agent and NPI numbers.

MSM 101 – Overview of Programs

- MSM 101.2 – Nevada Medicaid and NCU Card
 - Added information regarding the Nevada Medicaid app.
- MSM 101.2A – Eligibility Verification and Card Use
 - Added Note on providers providing services without prior verification of identity and eligibility.

MSM 102 – Condition of Participation

- MSM 102 and sub-sections to 102.10 – Provider Enrollment
 - Added to each section title "Conditions of Participation (1 - 11)" to assist with each section.
 - All the changes are due to situations that need more clarity. These situations are to address applicants, providers, and the requirements of the MSM and the contract.
- MSM 102.14 – Ordering, Prescribing, or Referring (OPR)
 - Added this section as OPR is not described elsewhere.
- MSM 102.15 - Enrollment with Managed Care Organization (MCO) Providers
 - Added this section to describe the enrollment and termination requirements within FFS, MCO, PIHP, PAHP, and DBA.

MSM 103 – Provider Rules and Requirements

- MSM 103.9 – Non-Discrimination and Civil Rights Compliance
 - Added information regarding civil rights.
 - Added information regarding recipients who have Limited English Proficiency and the requirements of the provider for translation services.
- MSM 103.10 – Advance Directive
 - Added information throughout from NRS 449A – Care and Rights of Patients.

- MSM 103.11 – Supported Decision Making (whole new section)
 - Added information from NRS 162C, Supported Decision-Making Act.
- MSM 103.13 – Medical Record Documentation (whole new section)
 - Added information regarding medical record documentation that providers shall comply with.

MSM 104 – Third Party Liability (TPL) – Other Health Care Coverage

- MSM 104 (J) – Added in subsection (J) on adoption/surrogacy.
- MSM 104.1 – Payment Limits and Exceptions
 - Added in updated billing information for TPL.

MSM 105 – Medicaid Billing and Payment

- MSM 105.1 – Medicaid Payments to Providers
 - Subsection (F) – Added information for providers to bill using current CPT, HCPCS, and ICD codes and that claims must adhere to national coding standards, comply with Billing Manual and Billing Guidelines.
 - Subsection (I) – Updated “Incident to” billing description with examples.
 - Subsection (N) – Added information that not all improper billings can be detected at the time of payment, All payments are subject to post payment review.
 - Subsection (O) – Letters of Agreement language added by Rates Unit to explain when this is allowed and the process.
- MSM 105.2B – Billing Time Frames (Stale Dates)
 - Added information on submitting of claims with TPL timeframes.
- MSM 105.3 – Billing Medicaid Recipients
 - Added information of when providers can bill Medicaid recipients as we tend to have a lot of recipients sent to collections for services that are covered. Needed to clear up when services are not covered, signed written agreements, and Emergency Medicaid Only.

MSM 106 – Contract Terminations

- MSM 106 and all subsections updated by Provider Enrollment and SUR Unit. Added scenarios and further clarifications throughout.

MSM 108 – References

- Removed all the details as this information can easily become outdated. Referred to Contact Us Page on the Nevada Medicaid Website - <https://www.medicaid.nv.gov/contactinfo.aspx>.

MSM 110 – Nevada Medicaid Provider Types

- Removed the list of provider types as this information can easily become outdated. Referred to Provider Enrollment Information Booklet at https://www.medicaid.nv.gov/Downloads/provider/NV_Provider_Enrollment_Information_Booklet.pdf.

Addendum

Updated definitions of:

- Emergency medical condition
- Fiscal Agent
- Medical Director
- Quality Improvement Organization (QIO)-Like Vendor