Joe Lombardo
Governor

NEVADA HEALTH AUTHORITY
DIRECTOR'S OFFICE
4070 Silver Sage Drive
Carson City, NV 89701
NVHA.NV.GOV

Stacie Weeks
Director

September 30, 2025

Courtney Miller
Director
CMS/Center for Medicaid & CHIP Services
Medicaid & CHIP Operations Group
601 E. 12th St., Room 355
Kansas City, MO 64106

Dear Director Miller:

Enclosed please find Nevada's State Plan Amendment (SPA) #25-0025. This SPA amends Nevada's State Plan effective July 1, 2025. The specific changes being made are as follows:

Nevada Health Authority is proposing revisions to the Nevada Medicaid State Plan, Attachment 4.19-B, proposed page 9a.3. The proposed Amendment is based on the recommendation from CMS to make Practitioner UPL payments economic and efficient by updating the ACR calculation methodology.

If you have any policy questions regarding this SPA, please contact Casey Angres, Chief of Division Compliance at (775) 684-3667 or cangres@dhcfp.nv.gov.

Sincerely,

Stacie Weeks, Director
Nevada Health Authority

Enclosures

cc: Ann Jensen, Administrator, Nevada Health Authority (NVHA), Nevada Medicaid
Casey Angres, Chief of Division Compliance, NVHA, Nevada Medicaid

PUBLIC NOTICE TO SOLICIT COMMENT ON INTENT TO SUBMIT A STATE PLAN AMENDMENT TO PRACTITIONER UPPER PAYMENT LIMIT FOR FEE-FOR-SERVICE PAYMENTS

June 27, 2025

Name of Organization
Department of Health and Human Services, Division of Health Care Financing and Policy

Public Comment
General public comments are encouraged to be submitted in writing. You may submit comments in one of two ways found below (please choose one).

Electronically: You may email comments to DocumentControl@dhcfp.nv.gov. Write "Practitioner Upper Payment Limit for Fee-for-Service Payments" in the subject line.

Mail: You may mail written comments to the following address:
Division of Nevada Medicaid
ATTN: Document Control
4070 Silver Sage Dr.
Carson City, NV 89701

Purpose:
The purpose of this notice is to provide the public with information and to collect public feedback regarding the state's intent to submit a State Plan Amendment (SPA) to the Centers for Medicare and Medicaid Services (CMS) for federal approval of an update to the methodology used to calculate the Average Commercial Rate (ACR) for the Practitioner Upper Payment Limit for Fee-For-Service payments, as currently stated in Medicaid State Plan Attachment 4.19-B Pages 8 and 9.

This SPA will be effective July 1, 2025

The Division is developing a website dedicated to SPA submissions for federal approval and intends to publish the draft SPA and other supporting materials on that website within the coming months. Emails related to the release of the new website and SPA submissions will be sent to individuals who have signed up to receive electronic notifications through the Nevada Medicaid Update ListServ. You can sign up to receive these notifications by visiting: https://dhcfp.nv.gov/Resources/NevadaMedicaidUpdate/NMUListserv/.

Proposed Changes:
The Division of Nevada Medicaid intends to submit a Medicaid State Plan Amendment (SPA) to update the methodology used for the Average Commercial Rate (ACR) for the enhanced rate calculation for the practitioner upper payment limit. Following the instructions from ACR UPL guidance on Medicaid.gov , the average commercial rate per procedure code will be calculated from the allowed payment amount from each eligible providers billing system for the top (generally

five), or for all, commercial third-party payers (TPP) for the base period. This is implemented in accordance with the new CMS guidelines to demonstrate Economy & Efficiency.

These changes are being made to Medicaid State Plan Attachment 4.19-B Pages 8 and 9 and are effective on July 1, 2025.

Methodology:

The Division intends to calculate the average commercial rate (ACR) per procedure code from the allowed payment amount from each eligible provider's billing system for the top (generally five), or for all, commercial third-party payers (TPP) for the base period.

Estimated Expenditures:

The change in estimated aggregate expenditure will depend upon the participating entity's ability to complete the average commercial rate per procedure code from their billing system for the top (generally five), commercial third-party payers (TPP) for the estimated base period.

Notice Information

This notice has been posted online at http://dhcfp.nv.gov, as well as Carson City, Las Vegas, Elko, and Reno District Offices for DHCFP. Email notice has been made to such individuals as have requested notice of State Plan Amendments To request notifications or a physical copy of this notice, please contact DocumentControl@dhcfp.nv.gov, or visit your local Nevada Medicaid office at:
1919 College Parkway, Suite 120, Carson City, Nevada 89701
1010 Ruby Vista Drive, Suite 103, Elko, Nevada 89801
1210 S. Valley View, Suite 104, Las Vegas, Nevada 89102
745 W. Moana Lane, Suite 200, Reno, Nevada 89509

A copy of this notice has also been sent to the following local agencies in each Nevada county for public review.

Carson City Library
900 North Roop Street
Carson City, NV 89702
https://carsoncitylibrary.org/

Churchill County Library
553 South Main Street
Fallon, NV 89406
https://churchillcountylibrary.org/

Clark County District Library
833 Las Vegas Boulevard North
Las Vegas, NV 89101
https://thelibrarydistrict.org/

Douglas County Library
1625 Library Lane
Minden, NV 89423
https://library.douglascountynv.gov/

Elko County Library
720 Court Street
Elko, NV 89801
https://www.exploremybrary.org/

Esmeralda County Library
(Corner of Crook and 4th Street)
PO Box 430
Goldfield, NV 89013
(No Website)

Eureka Branch Library
210 South Monroe Street
Eureka, NV 89316-0283
(No Website)

Henderson District Public Library
100 West Lake Mead Parkway
Henderson, NV 89105
https://www.hendersonlibraries.com/

Lander County Library
625 South Broad Street
Battle Mountain, NF 89820-0141
https://www.landercountynv.org/

Lincoln County Library
63 Maine Street
Pioche, NV 89043-0330
(No Website)

Lyon County Library
20 Nevin Way
Yerington, NV 89447-2399
https://www.lyon-county.org/238/Library

Mineral County Library
110 1st Street
Hawthorne, NV 89415-1390
https://mineralcountylibrary.com/

Pahrump Community Library
701 East Street
Pahrump, NV 89041-0578
https://www.pahrumplibrary.org/

Pershing County Library
1125 Central Avenue
Lovelock, NV 89419-0781
https://pershingcounty.net/community/county_library/

Storey County Library
175 Carson Street
Virginia City, NV 89440-0014
https://storeycountycommunitylibrary.com/

Tonopah Public Library
167 Central Street
Tonopah, NV 89049-0449
https://www.tonopahnevada.com/tonopahlibrary/

Washoe County Library
301 South Center Street
Reno, NV 89505-2151
https://www.washoecountylibrary.us/

White Pine County Library
950 Campton Street
Ely, NV 89301-1965
https://www.whitepinecounty.net/284/Library

If an eligible public teaching entity does not have contracts in place with commercial payers during a Base Period, the ACR will be calculated based on the public teaching entity's contracts with commercial payers in effect during the Service Period.

If the ACR is not provided at a procedure code level by the public teaching entity or the public teaching entity does not have contracts that meet the criteria for described in the previous two paragraphs, an average will be calculated by the DHCFP for the ACR by utilizing ACR data submitted for the Base Period by each of the public teaching entities participating in the program.

ACR After July 01, 2025:

The average commercial rate per procedure code is calculated from the allowed payment amount from each eligible provider's billing system for the top (generally five), or for all, commercial third-party payers (TPP) for the base period. The average ACR is calculated by the number of commercial rates provided up to five. For example, if an entity submits three commercial rates for a specific procedure code, the average will be calculated by the sum of all three commercial rates and divided by three.

A zero payment is equivalent to a zero-dollar allowed amount; therefore, a supplemental payment cannot be made for Medicaid services when the billing provider is not paid a commercial rate for that service.

To receive a supplemental payment, eligible public teaching entities must have a commercial payer contract at the procedure code level at an amount greater than zero dollars. Zero Dollar payment is equivalent to a Zero Dollar allowed amount.

If an eligible public teaching entity is missing the rate for a Medicaid Service delivered by a Designated Practitioner at a procedure code level, an interim rate will be calculated by Nevada Health Authority (NVHA). An average will be calculated by NVHA for the ACR by utilizing ACR data submitted for the base period by each of the public teaching entities participating in the program. The entities will be given a reasonable time frame (6 months) to retrieve the rates for the procedure codes. If the public teaching entity provides their rates within the stated timeframe, they will be allowed to submit the rates for the procedure codes and the ACR will be updated for the upcoming quarter calculations. However, if the eligible public teaching entity is unable to provide the rate within the stated timeframe, the ACR will be updated to reflect zero dollars in supplemental payments for the specific procedure code for the upcoming quarters for the Fiscal Year within the same base period.

For new entities participating in the program, -without an established commercial payer rate:
An average ACR percentage increase over the Medicaid Base Rates from the other participating entities will be applied to Medicaid services for the new entities. The billing provider operating with new entity is required to have a commercial rate with an allowed amount for a procedure code.

If a procedure code does not have an established Medicaid rate, then no supplemental payments will be made for that specific procedure code.