



Joe Lombardo,
Governor

NEVADA HEALTH AUTHORITY

NEVADA MEDICAID

4070 Silver Sage Drive
Carson City, Nevada 89701

NVHA.NV.GOV



Stacie Weeks, JD MPH,
Director

Ann Jensen
Administrator

December 22, 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) #NV-25-0033. This SPA amends Nevada's State Plan effective January 1, 2026. The specific changes being made are as follows:

The Division intends to develop a per diem rate to reimburse providers with proper licensure and accreditation as required by Assembly Bill 514 during the 83rd Legislative Session (2025). The goal of this legislation is to add a place to go as a critical element of the mental health continuum of care for people with complex behavioral health needs before they can return to the community.

State Plan Attachment 3.1-A Page 6b.5-6b.6 and Attachment 4.19-B Page 3k.1 to establish coverage and reimbursement language for the new Psychiatric Residential Treatment Service of Rehabilitative Residential Mental Health Care (RRMHC), otherwise known as Community Residential Mental Health Services (CRMHS) to align with legislative requirements for Assembly Bill (AB) 514 passed in the 2025 83rd session.

If you have any policy questions regarding this SPA, please contact Casey Angres, Agency Manager at (775) 684-3667 or cangres@nvha.nv.gov.

Sincerely,

Stacie Weeks, Director
Nevada Health Authority

Enclosures

cc: Ann Jensen, Administrator, Nevada Health Authority (NVHA), Nevada Medicaid
Casey Angres, Agency Manager, NVHA, Nevada Medicaid

14 *Rehabilitative Residential Mental Health Care Services:*

Service Definition (Scope) - Rehabilitative Residential Mental Health Care (RRMHC) otherwise known as Community Residential Mental Health Services (CRMHS) means community-based, medically monitored care provided in a residential setting that uses established rehabilitative principles to promote the recovery of the individual with a mental illness or other behavioral health condition and assist the individual in achieving psychiatric stability, personal and emotional adjustment, self-sufficiency and other skills necessary to transition to a more independent setting. The residential program provides a safe and stable 24-hour live-in setting staffed by treatment personnel who provide a planned and structured regimen of care to develop skills where skill restoration and psychotherapy services are provided on-site to the residents. The type and intensity of services is determined by the individual's needs and must be clinically appropriate and medically necessary through prior authorization. Services are eligible for both adults and children. Services must be age appropriate and children and adults should not be covered in the same setting.

Room and board are not reimbursable through Nevada Medicaid.

Covered RRMHC services include: Psychiatric and Psychological services including crisis assistance services, individual, family and group psychotherapy, medication management and education, psychoeducation services, and family and natural supports services.

Service Limitations – Prior authorization for CRMHS may be requested as often as needed. Utilization management must include ongoing patient assessment, indicating intensity of needs determination using the Child and Adolescent Service Intensity Instrument (CASII) or Level of Care Utilization System (LOCUS), as age appropriate, to assist in determining medical necessity for ongoing services.

The Practitioners and Qualifications Chart is listed on Attachment 3.1-A page 6a.1-6a.7 at the beginning of 13D. Rehabilitative Services.

~~the following: a graduate degree in counseling and a license as a marriage and family therapist, or a clinical professional counselor, or is employed by the State of Nevada mental health agency and meets class specification qualifications of a Mental Health Counselor. The following licensed interns are covered as a QMHP: Licensed clinical social worker intern, licensed marriage and family therapist intern, licensed clinical professional counselor interns, or a Psychological Intern registered through the Psychological Board of Examiners defined in NAC 641.165. Interns must be supervised in accordance with state regulations and may only provide services within the scope of their licensure.~~

- ~~b. Qualified Mental Health Associate: A person who meets the following minimum documented qualifications; 1) Registered nurse OR 2) holds a bachelor's degree in a social services field with additional understanding of mental health rehabilitation services, and case file documentation requirements; AND 3) whose education and experience demonstrate the competency under clinical supervision to direct and provide professional therapeutic interventions within the scope of their practice and limits of their expertise; identify presenting problems, participate in treatment plan development and implementation, coordinate treatment, provide parenting skills, training, facilitate discharge plans, and effectively provide verbal and written communication on behalf of the recipient to all involved parties, AND 4) Has an FBI background check in accordance with the provider qualifications of a QBA.~~
- ~~e. Qualified Behavioral Aide: A person who has an educational background of a high school diploma or GED equivalent. A QBA may only provide the following services: basic skills training and peer support services. A QBA must have the documented competencies to assist in the provision of individual and group rehabilitation services which are under the direct supervision of a QMHP or QMHA, read, write and follow written or oral instructions; perform mental health rehabilitation services as documented in the treatment plan, identify emergency situations and respond accordingly, communicate effectively, document services provided, maintain confidentiality, successfully complete approved training program, CPR certification, and have completed an FBI criminal background check to ensure no convictions of applicable offenses have been incurred. QBA's are required to participate in and successfully complete an approved training program which includes basic training, periodic and continuing in service training. Training must be interactive and not solely based on self study guides or videotapes and should ensure that a QBA will be able to interact appropriately with individuals with mental health disorders. Training must also include:~~

- ~~▪ Case file documentation;~~
- ~~▪ Recipient's rights;~~
- ~~▪ HIPAA compliance;~~
- ~~▪ Communication skills;~~
- ~~▪ Problem solving and conflict resolution skills;~~
- ~~▪ Communication techniques for individuals with communication or sensory impairments; and~~
- ~~▪ CPR certification~~

~~The entity that is providing supervision over the QBA shall provide annually a minimum of eight hours of service training for each QBA. The purpose of the annual training is to facilitate the development of specialized skills or knowledge not included in the basic training and/or to review or expand skills or knowledge included in the basic training. Consideration must be given to topics suggested by recipients. Documentation of the completed training and achieved competencies meeting this requirement must be maintained by the entity. Training requirements may be waived if the QBA can provide written verification of comparable education and training. The entity must document this validation.~~

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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Nevada

Attachment 4.19-B
Page 3k.1

Rehabilitative Residential Mental Health Care Services:

The Medicaid program will provide coverage for a bundle of medically necessary rehabilitative services provided by practitioners employed by, or associated with, provider entities delivering services known as Rehabilitative Residential Mental Health Care (RRMHC) otherwise known as Community Residential Mental Health Services (CRMHS). The State agency will reimburse providers as defined in Attachment 3.1-A delivering CRMHS at a bundled daily rate. Any provider delivering CRMHS through a bundle will be paid through that bundle's payment rate and cannot bill separately for the individual rehabilitative services. At least one service per day that aligns with the recipient's treatment plan goals must be provided in order to receive the bundled payment rate. If a provider delivering CRMHS is unable to provide the whole scope of CRMHS as defined in Attachment 3.1-A, providers cannot be reimbursed for a separate service. The State agency will periodically monitor the actual provision of CRMHS to ensure that individuals receive the types, quantity, and intensity of services required to meet their medical needs and to ensure that the rates remain economic and efficient based on the services that are actually provided as part of the bundle. Room and board are not reimbursable services through Nevada Medicaid. The Division's rates are set as of January 1, 2026, and are effective for services on or after that date. All rates published <http://nvha.nv.gov/Resources/Rates/FeeSchedules/>.