NCBHC – Medicaid Updates 12/2023

General Medicaid Updates

- We have welcomed 2 new staff to the Behavioral Health Benefits Coverage Team. Beth Scott @ <u>escott@dhcfp.nv.gov</u> oversees our Substance Use Agency Model and the Medication-Assisted Treatment (MAT) and Sheri Gaunt @ <u>s.gaunt@dhcfp.nv.gov</u> oversees the Specialized Foster Care and Targeted Case Management policy.
- DHCFP hosted a Legislative Implementation Public Workshop on September 18th @ 3 p.m. to review processes for implementing the bills that were passed during the 82nd Legislative Session, please access this <u>Legislative Stakeholder Implementation recording</u> to review. DHCFP will be hosting an update to the Legislative Implementation process in January. Public notice will be posted on the <u>https://dhcfp.nv.gov/Public/AdminSupport/PublicNotices/</u>.

State Plan Amendments

- <u>NV SPA 22-0005 Reimbursement Methodology for Crisis Stabilization Centers</u>
 - The proposed reimbursement methodology was added to Attachment 4.19-B, Pages 4a through 4c and Attachment 4.19-A, Pages 14-14c. As authorized by Assembly Bill 66 of the 80th Nevada Legislative Session (2019) and Senate Bill 156 of the 81st Nevada Legislative Session (2021), this SPA proposes the reimbursement methodology needed to establish Crisis Stabilization Centers within hospitals. Crisis Stabilization Services are defined by legislation as "behavioral health services designed to: (1) de-escalate or stabilize a behavioral crisis; and (2) avoid admission of a patient to another inpatient mental health facility or hospital when appropriate." SPA language will address the rate methodology utilized for a daily rate of service. Initially, providers will be reimbursed a daily default rate that is market-based using a model to reflect service definitions, provider requirements, operational service delivery and administrative considerations. After a provider has a complete fiscal year of providing services, the provider will be allowed to complete a cost report to be used to determine an individual, provider-specific rate for crisis stabilization services.
 - This SPA is on Request for Additional Information (RAI), which essentially pauses the 90-day clock under CMS review. The latest discussions involve adding the methodology to different pages within the state plan since the services provided under a crisis stabilization center are outpatient based and may fit better under the rehabilitative services area rather than the hospital reimbursement pages where we originally placed them. Additionally, Nevada will be adding coverage pages defining Intensive Crisis Stabilization services.
 - Be on the look out for re-posting of edits to these State Plan pages to engage feedback on updates since this SPA has been in process for so long.

• NV SPA 23-0002 Certified Community Behavioral Health Centers (CCBHCs)

- Revising bundled rate and Quality Incentive Payment methodology language and data submission requirement language
- Public Hearing January 31, 2023 and submitted to CMS
- This SPA is on RAI, but will hopefully get turned around quickly.
- Be on the look out for re-posting of edits to these State Plan pages to engage feedback on updates since this SPA has been in process for so long.

Medicaid Service Manual Updates

- o Upcoming MSM 2900 Federally Qualified Health Center (FQHC)
 - Language added to clarify behavioral health services and requirements when delivered in an FQHC setting.
 - January 30, 2024, Public Hearing

• Upcoming MSM 400 – Mental Health and Alcohol/Substance Use Services

- Language added to clarify time and distance standards for mobile crisis response delivered by a DMCT and adding certification requirement for peers apart of the DMCT.
- January 30, 2024, Public Hearing

Legislative Work to be Initiated by the Medicaid BH Unit

- AB 137 Revises provisions relating to fetal alcohol spectrum disorders. * Effective 1/1/2024, the state is researching the Health Home model to incorporate these new services and possibly identify how integration of Pre and Post Natal services for individuals struggling with SUD can be incorporated in a Health Home setting.
- AB 138 Provides Medicaid coverage for certain types of behavioral health integration services. *Effective 7/1/2024, more detail to come later next year.
- AB 156 Revises provisions relating to substance use disorders. * Effective 1/1/2024, as mentioned previously, this will expand to a pharmacist to perform Medication-Assisted Treatment for Opioid Use Disorder and the public hearing was on November 28,2023. The SPA has been submitted to CMS and is under review.
- SB 119 Provides for the continuation of certain requirements governing insurance coverage of telehealth services. The public hearing was on November 28, 2023 and the policy will be effective November 29, 2023. These updates are included in MSM 3400.
- SB 191 Makes certain changes relating to applied behavior analysis. *Effective 1/1/2024, the state will be pursuing a state plan amendment that will expand ABA to all ages of the Medicaid population that qualify for this service rather than limiting to the expansion between the ages of 21-27, as the bill indicated.
- SB 504 Medicaid Budget
 - Expansion of CCBHCs and New DHCFP Positions *Effective 1/1/2024
 - Elimination of Biofeedback and Neurotherapy for the treatment of a mental health diagnosis. *Effective 4/1/2024.

Certified Community Behavioral Health Center (CCBHC) Updates

- Expanding statewide
- Listening Session recorded 11/9 and hosted by DHCFP and CASAT recorded webinar 11/30 for interested CCBHCs
- Open enrollment will begin January, 1, 2024

• There will not be an RFP to fill the expanded CCBHC positions. There will be criteria that needs to be met prior to enrollment and a listening session/webinar in the next few months to explain how this will work. Note that clinics that are already CCBHCs will not need to make any enrollment changes and will continue to operate under the certification you already have in place. The enrollment will apply to those enrolling in 2024 and going forward. Medicaid will host a listening session tentatively set for November to inform on steps to become a CCBHC for those interested.

Behavioral Health Benefits Coverage Unit Timeline through March 2024

• With bill implementation underway, our unit will be focused on lots of research and implementation activities. Also, our unit will be continuing with work already underway for crisis services, policy updates, and the 1115 work. Please be mindful of the public notice website and attend public hearings.