



May 20, 2021

Web Announcement 2506

Attention Provider Type 19 (Nursing Facility):

New Nursing Facility Managed Care Contracts Effective January 1, 2022

Effective January 1, 2022, a new Nevada Medicaid managed care contract will be in place that will impact provider type 19 (Nursing Facility). In the new contract, managed care entities will remain responsible for the coverage of recipients in need of nursing facility level of care as outlined in Medicaid Services Manual (MSM) Chapter 500 Nursing Facilities; however, recipients who are mandatorily enrolled in managed care will no longer be disenrolled on the 46th day of a nursing facility stay. Instead, the new contract language will require managed care entities to maintain responsibility and care management over the recipient through the 180th day of stay in a nursing facility.

Initial level of care criteria and the Pre-Admission Screening Resident Review (PASRR) process will remain the responsibility of Nevada Medicaid's QIO-like vendor, as performed today. All follow up and/or continued stay criteria will be the responsibility of the managed care entity.

The Division of Health Care Financing and Policy (DHCFP) is planning for the new managed care entity contracts to be executed no later than October 2021. At that time, the Division will release to the newly awarded managed care entities information on PT 19 providers currently enrolled with Nevada Medicaid. Please be aware that managed care entities will likely begin contacting nursing facilities to credential and partner with them to ensure the recipients assigned to their caseloads have sufficient access to the nursing facility level of care.

Providers who have additional questions related to this web announcement may contact Theresa Carsten, DHCFP Chief of Managed Care and Quality Assurance, at Theresa.Carsten@dncfp.nv.gov or Jaimie Evins, DHCFP Program Specialist of Managed Care Contracting and Compliance, at JEvins@dncfp.nv.gov.