



December 31, 2014

Announcement 857

Attention Provider Types 14, 26 and 82: Day Treatment Program

Consistent with State of Nevada policy, Day Treatment services are to be performed by provider type (PT) 14 Behavioral Health Community Network (BHCN) groups which have a Day Treatment Model approved by the Division of Health Care Financing and Policy (DHCFP). Providers who are performing Day Treatment under any other provider type, such as PTs 26 or 82, will be required to enroll as a PT 14 Specialty 308 and submit their Day Treatment Model. No further action is required for PTs 26 or 82 that do not intend to continue to provide Day Treatment services. Providers who do not have an approved model and are not enrolled as a PT 14 will not be reimbursed for Day Treatment services. This is specific to Day Treatment services (billing code H2012) only. If a PT 14 does not submit their Day Treatment Model, they may continue to provide all other services authorized under PT 14.

The Day Treatment Model (Specialty 308) has been posted on the [Provider Enrollment Checklists for PT 14](#) webpage at www.medicaid.nv.gov. **Currently enrolled PT 14s should submit the completed model directly to HP Enterprise Services (HPES) effective immediately through January 31, 2015.** The Day Treatment Model is based on policy that is further outlined in Medicaid Services Manual (MSM) Chapter 400, Attachment A, Policy #4-01 through Policy #4-03. Per policy, be advised that PTs 26 and 82 will need to refer specifically to MSM Chapter 400, and meet the requirements of a BHCN as outlined in 403.1. Providers need to ensure they meet the supervisory requirements outlined in 403.2A, which clarifies the medical, clinical and direct supervision needed to enroll as a PT 14.

All prior authorizations for Day Treatment will be required to be submitted through the Provider Web Portal. If you do not have access to the Web Portal, please contact HPES at (877) 638-3472, option 2, then 0 and 3.

Currently enrolled PT 14s requesting to become Day Treatment providers must send the model to: (do not complete a new enrollment application or other PT 14 specialty enrollment checklist)

HP Enterprise Services
Provider Enrollment Unit
P.O. BOX 30042
Reno, NV 89520-3042

If you have questions, please contact the DHCFP Behavioral Health Supervisor, Alexis Tucey, at alexis.tucey@dhcfp.nv.gov.