
Table of Contents

State/Territory Name: Nevada

State Plan Amendment (SPA) #: NV-16-0012-A

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) State Plan Pages

The complete title XXI state plan for Nevada consists of the most recent state plan posted on Medicaid.gov under CHIP and State Plan Amendments. The link is provided below. The following pages are in addition to, or replace sections of the state's posted current state plan. The attached approval letter(s) explain how these pages fit into that state plan.

Link to state title XXI state plans and amendments: <http://medicaid.gov/Medicaid-CHIP-Program-Information/By-Topics/Childrens-Health-Insurance-Program-CHIP/CHIP-State-Program-Information.html>



NOV 23 2016

Marta Jensen
Acting Administrator
Division of Health Care Financing and Policy
Nevada Department of Health and Human Services
1100 East William Street, Suite 101
Carson City, NV 89710

Dear Ms. Jensen:

I am writing to inform you that the Centers for Medicare & Medicaid Services (CMS) has approved your title XXI Children's Health Insurance Program (CHIP) state plan amendment (SPA) number NV-16-012-A submitted on September 12, 2016. The SPA has an effective date of October 1, 2016.

This SPA permits Nevada to implement a new health services initiative (HSI) to integrate the Resources for the Early Advancement of Child Health (REACH) program into after school programs serving the highest risk populations of children in Nevada public schools. The implementation of this HSI supports Nevada students ages 10 through 18 with the goal of demonstrating the effectiveness of early intervention to prevent the onset of future behavioral health diagnosis by promoting social and emotional competence, student resilience, increased social-emotional competence, and improved student coping skills. The scope of services will include early intervention and preventive behavioral and mental health services.

This SPA provides funding through the HSI option at section 2105(a)(1)(D)(ii) of the Social Security Act to use available title XXI administrative funding to pay for activities that protect public health, protect the health of individuals, improve or promote a state's capacity to deliver public health services, or strengthen the human and material resources necessary to accomplish public health goals relating to improving the health of children, including targeted low-income children and other low-income children. The state shall ensure that the remaining title XXI funding, within the state's 10 percent limit, is sufficient to continue the proper administration of the CHIP program. If such funds become less than sufficient, the state agrees to redirect title XXI funds from the support of these HSIs to the administration of the CHIP program. The state shall report annually to CMS the expenditures funded by the HSI for each federal fiscal year. CMS will work with the state to develop a simple and effective reporting process for these expenditures.

Your title XXI project officer is Mr. Patrick Edwards. He is available to answer questions concerning these amendments and other CHIP-related issues. Mr. Edwards' contact information is as follows:

Page 2 – Ms. Marta Jensen

Centers for Medicare & Medicaid Services
Center for Medicaid and CHIP Services
Mail Stop: S2-01-15
7500 Security Boulevard
Baltimore, MD 21244-1850
Telephone: (410) 786-6643
Facsimile: (410) 786-5882
E-mail: Patrick.Edwards@cms.hhs.gov

Official communications regarding program matters should be sent simultaneously to Mr. Edwards and to Ms. Henrietta Sam-Louie, Associate Regional Administrator, in our San Francisco Regional Office. Ms. Hogaboom's address is:

Centers for Medicare & Medicaid Services
Division of Medicaid and Children's Health Operations
90 Seventh Street, Suite 5-300 (5W)
San Francisco, CA 94103-6706

If you have additional questions or concerns, please contact Ms. Amy Lutzky, Acting Director, Division of State Coverage Programs, at (410) 786-0721.

We look forward to continuing to work with you and your staff.

Sincerely,

/ Anne Marie Costello /

Anne Marie Costello
Director

cc: Ms. Henrietta Sam-Louie, Associate Regional Administrator, CMS Region IX, San Francisco

- 3) Newborns – In Nevada Check Up, if a family is expecting a child, whether the adult female in the home or one of the enrolled children, Nevada Check Up must be notified within 14 days of the birth, the newborn, if eligible, will be added to the family as of its date of birth. If the notification criterion is not met, the child, if eligible, will be added the next administrative month following notification. A newborn cannot be enrolled before a family’s start date. A newborn will begin services at the same time as the other children in the family. One exception for the Checkup program is if the mother has *other* coverage for the newborn, and she has other children enrolled in Nevada Check Up, the newborn will be enrolled in Nevada Check Up as of the first day of the next administrative month following date of birth.

In Medicaid, all children born to Medicaid-enrolled mothers are enrolled as of their date of birth.

2.2. Describe the current state efforts to provide or obtain creditable health coverage for uncovered children by addressing: (Section 2102)(a)(2) (42 CFR 457.80(b))

- 2.2.1 The steps the state is currently taking to identify and enroll all uncovered children who are eligible to participate in public health insurance programs (i.e. Medicaid and state-only child health insurance):

Nevada currently has several initiatives to enroll children in Medicaid and Nevada Check Up. These include outreach and referral services to the Women, Infant, and Children (WIC) centers, Federally Qualified Health Centers (FQHCs), ~~Special Children’s Clinic (SCC)~~ Nevada Early Intervention Programs; ~~Baby Your Baby program (BYB)~~, Family Resource Centers (FRCs), ~~and the Family to Family program, Tribal Administrators, Tribal Clinics and Indian Health Services (IHS), Resources for the Early Advancement of Child Health (REACH) Program, Connecting Kids to Health Coverage, Nevada 211 and Nevada Health Link-Silver State Health Insurance Exchange.~~ In addition, out stationed eligibility workers are in certain public hospitals and federally qualified health centers in order to provide these outreach and referral services. The descriptions of these programs are as follows:

1. The Medicaid program is administered by the Division of Health Care Financing and Policy and provides health coverage to low-income and disabled Nevada children. Nevada takes the following steps to enroll children in Medicaid:
 - a. Nevada State Welfare District Offices located throughout the state determine a person’s eligibility for TANF, CHAP, and Medicaid. If applicants appear to be Nevada Check Up eligible, rather than Medicaid, they are appropriately referred.

Out stationed sites (FQHCs, county hospitals, and local county health departments) help people apply for Medicaid or Nevada Check Up and send their applications and eligibility determination to the local Nevada

State Welfare District Office ~~or to the Nevada Check Up office~~. Local public health agencies identify low income, uninsured children through referrals from a variety of sources including: WIC, child health and immunization clinics, community health and social services agencies, and schools.

2. Women, Infants and Children (WIC) provides nutritious food to supplement the regular diet of pregnant women, infants, and children under age five who meet state income standards. Women and children under five years old qualify if the combined family income is at or below 185% of the federal poverty level. WIC staff encourages pregnant women and parents in this program to apply for Medicaid or Nevada Check Up, depending on their income level.
3. Federally Qualified Health Centers offer health care to low-income people. Nevada has ~~three (13)~~ federally qualified community health centers. The centers provide primary care services including care for acute and chronic illness, injuries, emergency care, diagnostic services and prescriptions.

Community health centers take the following steps to enroll children in Medicaid or Nevada Check Up:

1. Provide a financial screen for each new patient or family
2. Provide information on and explanation of the program(s) for which family members may be eligible.
3. Assist with completing applications and collecting required documentation.
4. Forward applications to the determining agency and communicate with family about eligibility status.

If a patient/family is not eligible for any program, the community health center will provide the health care services and will use its sliding fee scale according to family size and income to determine the fee.

4. ~~Special Children's Clinic Nevada Early Intervention Programs~~
The Nevada ~~Health Division, Special Children's Clinic (SCC)~~ Early Intervention Programs provides direct services to low-income children ages 0-3 under the Maternal and Child Health Block Grant (Title V). Services include well child clinic services, including developmental and physical assessments and immunizations. Children who appear to qualify for Medicaid or Nevada Check Up are encouraged to apply.

~~5. Baby Your Baby Program~~

~~Baby Your Baby staff can provide Nevada Check Up applications and information to expectant mothers for future use in insuring their newborns. The state Title V program supports Baby Your Baby (BYB), which is a statewide multi-media bilingual campaign to promote early entry of pregnant women into prenatal care. In 2002 BYB assisted 9,768 women seeking services through the information referral line, and has assisted 111,035~~

~~women since the program's inception. When appropriate, these women were referred to Medicaid and Title V prenatal care programs.~~

~~6-~~ 5. Family Resource Centers

A total of ~~2636~~ Family Resource Centers (FRCs) have been established in high risk neighborhoods throughout Nevada, and an additional ~~two~~ ~~2~~ are scheduled to open in the next year. The FRCs are community based centers run by not-for-profit organizations with state grants and private contributions. Their aim is to provide information about available social services including Medicaid and Nevada Check Up, and how to access those services. Sites also provide some services (e.g. child care) based on the needs of the community. Nevada Check Up staff have participated with Family Resource Centers in the coordination of health fairs.

~~7-6.~~ Community Connections/Family to2to Family Program

The Family to Family program is an initiative aimed at informing new mothers of the services that are available to them and how to access such services. A total of ~~two~~~~19~~ centers have been established throughout the state. These centers are community based and operate as public/private partnerships. New mothers are able to receive a home visit, get questions answered about parenting issues and services available to aid them in raising their children, including health insurance through Medicaid and Nevada Check Up.

~~8-7.~~ Tribal Administrators, Tribal Clinics, and Indian Health Services (IHS)

Nevada Check Up staff attends and participates in meetings of the Native American Advisory Council, as mandated by Nevada law, in order to share information and receive advice as to the needs of the Native American tribes in Nevada. Application training and program updates are also provided by program staff.

~~9.~~ ~~Covering Kids and Families Grant (Robert Wood Johnson Foundation—RWJ)~~

~~—There are northern, southern and statewide coalitions whose members direct the activities of Covering Kids and Families staff and volunteers. Covering Kids and Families coordinators work with community-based organizations, schools, private businesses, and the state to promote the enrollment of children in appropriate health insurance programs. They provide applications for Medicaid and Nevada Check Up to those who appear to be eligible for public programs when no private insurance is available to them. Their employees also assist applicants in the proper completion and submission of applications.~~

8. Resources for the Early Advancement of Child Health (REACH) Program, through the Health Services Initiative, The Nevada Division of Health Care Financing and Policy (DHCFP) have been working on the coordination of the Rising Risk children's behavioral health project with the Department of Education's Office for a Safe and Respectful Learning Environment. The Office for a Safe and Respectful Learning Environment has a mission to

train, empower, educate, collaborate, advocate and intervene in order to ensure that every student in Nevada, regardless of any differing characteristic or interest feels fully protected physically, emotionally and socially. The office is responsible for the foundational four levels of a hierarchy of learning: physical needs, safety, belonging, and self-esteem.

The Department of Education (DOE) has implemented several initiatives across the state school system, including placement of social workers in all schools and a mandated environmental scan. The environment scan is used to identify at risk schools in order to prioritize interventions and programming to these schools. The scan consists of 50 questions answered by all students in grades 5 through 12 annually focusing upon the safe and respectful learning environment issues. The administrative grant provides social workers or other licensed mental health workers in the identified targeted schools.

The DHCFP is proposing the use of Health Services Initiative (HSI) funding to integrate the Resources for the Early Advancement of Child Health (REACH) program into after school programs serving the highest risk schools in Nevada that will be prioritized by the mandated environmental scan. The implementation of these innovative changes supports Nevada children in achieving a physical and emotionally safe environment by incorporating the REACH pilot project within the targeted schools. This approach will also allow the program to be scaled up or down based on available funding and the individualized schools needs. The individualized school needs will be identified per data tracking by utilizing the newly implemented statewide longitudinal data system to track outcomes and compare cohorts within the same school as well as compare to schools across the state.

The HSI public health approach allows the services to be provided to all children in a targeted area regardless of payer source. The DHCFP will work with current after-school program(s) to determine capacity for providing the services within their current structure or coordinate with community providers who have the capacity to create a collaboration to provide these services. The DHCFP will be working to identify these groups to determine the best model for payment of these programs based on the community infrastructure and capacity.

The HSI option allows the state to take a population health approach in partnership with the DOE assisting with supportive behavioral health and early intervention for children. HSI also provides the flexibility to pilot the rising-risk concept across various age groups with the goal of being able to demonstrate the effectiveness of early intervention. The scope of services will target early intervention services, mental health resources, and create support environments for parents focusing on formal and informal links within their communities. The collaboration between both the DOE and the DHCFP will provide teacher training, curriculum, and parental education

used to promote social and emotional competence, and an improvement in student resilience, increased social-emotional competence, and improved coping skills with overall health comes.

194. Connecting Kids to Health Coverage

The Connecting Kids to Coverage will identify children who are eligible for Medicaid and the Children's Health Insurance Program (CHIP) and support targeted strategies needed to enroll eligible children who do not have health coverage, including application assistance and outreach.

102. Nevada 2-1-1

Nevada 2-1-1, a program of the Financial Guidance Center, is committed to helping Nevada ~~Citizens~~ citizens connect with the services they need, ~~w-~~ whether by phone or internet. The goal is to present accurate, well-organized and easy-to-find information for the state and local health and human services program.

113. Nevada Health Link- Silver State Health Insurance Exchange

The state utilized Navigator Organizations, Certified Enrollment Assistant and is based on their attendance of community events, community involvement, and health care provider engagement eligibility screening.

~~14. Health Plans – Amerigroup & Health Plan of Nevada?~~

- 2.2.2 The steps this state is currently taking to identify and enroll all uncovered children who are eligible to participate in health insurance programs that involve a public/private partnership.