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State/Territory Name: Nevada

State Plan Amendment (SPA) #: NV-21-0017

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January 20, 2022

Suzanne Bierman
Medicaid Administrator
Division of Health Care Financing and Policy
Las Vegas Medicaid District Office
1210 S. Valley View, Suite 104
Las Vegas, NV 89102

Dear Ms. Bierman:

Your title XXI Children’s Health Insurance Program (CHIP) state plan amendment (SPA), NV-21-0017, submitted on December 2, 2021, has been approved. This SPA aligns the strategic objectives and goals in section 9 of the state plan with those reported in Nevada’s CHIP Annual Report, as described below. The effective date for SPA NV-21-0017 is December 1, 2021.

Through this SPA, Nevada updates its strategic objectives and goals related to CHIP enrollment and reducing the number of uninsured children. The corresponding goals set by the state in order to meet these objectives are to maintain or increase the CHIP enrollment rate by about 5 percent from the previous year, to increase access to primary care and use of preventive services for all age groups by 5 percent, and to increase participation by 5 percent in the annual satisfaction survey for Nevada Check Up. To measure progress on these goals, the state will utilize its own state enrollment and eligibility data as well as survey data. This SPA also removes outdated objectives and goals from section 9 of the state plan that Nevada no longer includes in the CHIP Annual Report.

Your title XXI project officer is Ms. Joyce Jordan. She is available to answer questions concerning this amendment and other CHIP-related issues. Her contact information is as follows:

Centers for Medicare & Medicaid Services
Center for Medicaid and CHIP Services
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Baltimore, MD 21244-1850
Telephone: (410) 786-3413
E-mail: Joyce.Jordan@cms.hhs.gov
If you have additional questions, please contact Emily King, Deputy Director, Division of State Coverage Programs at (443) 478-6811. We look forward to continuing to work with you and your staff.

Sincerely,

/Signed by Amy
Lutzky/

Amy Lutzky
Deputy Director
Section 9. Strategic Objectives and Performance Goals for the Plan Administration (Section 2107)

9.1. Describe strategic objectives for increasing the extent of creditable health coverage among targeted low-income children and other low-income children: (Section 2107(a)(2)) (42 CFR 457.710 (b))

The strategic objectives for the Nevada Check Up program are to:

1. Increase the availability of comprehensive low-cost health coverage for children at or below 200% FPL, and not eligible for Medicaid.
2. Improve the health and wellness of Nevada’s Medicaid population by increasing access to and the use of preventive services.
3. Increase the use of preventive care by adolescent well-care visits, immunizations and mental health follow-up.
4. Assure a high degree of participant satisfaction with the Nevada Check Up program.

9.2 Specify one or more performance goals for each strategic objective identified: (Section 2107(a)(3)) (42 CFR 457.710(c))

The following performance goals and measures will be used to evaluate the program’s effectiveness:

1.1 Increase the percentage of children enrolled in Nevada Check Up by 5% annually, thus decreasing overall uninsured child rates in Nevada.
1.2 In an effort to reduce the number of uninsured children, our goal is to enroll 90% of eligible children in the CHIP Program.
2.1 In an effort to increase access to care, our goal is to increase well-child visits 0-15 months (W30-CH) by 5%.
2.2 In an effort to increase access to care, our goal is to increase well-child visits 15-30 months (W30-CH) by 5%.

3.1 In an effort to increase the use of preventative care, our goal is to increase immunizations for adolescents (IMA-CH) for Meningococcal rate 11th – 13th birthday by 5%.
3.2 In an effort to increase the use of preventative care, our goal is to increase immunizations for adolescents (IMA-CH) for Tdap rate 10th – 13th birthday by 5%.
3.3 In an effort to increase the use of preventative care, our goal is to increase immunizations for adolescents (IMA-CH) for HPV rate 9th – 13th birthday by 5%.
3.4 In an effort to increase the use of preventative care, our goal is to increase follow-up after hospitalization for Mental Illness (FUH-CH) ages 6-17 (7 day) by 5%.
3.5 In an effort to increase the use of preventative care, our goal is to increase follow-up after hospitalization for Mental Illness (FUH-CH) ages 6-17 (30 day) by 5%.
4.1 In an effort to achieve a high degree of satisfaction with parents and guardians of Nevada Check Up participants by 5% as measured by an annual survey.
9.3 Describe how performance under the plan will be measured through objective, independently verifiable means and compared against performance goals in order to determine the state’s performance, taking into account suggested performance indicators as specified below or other indicators the state develops: (Section 2107(a)(4)(A), (B)) (42 CFR 457.710 (d))

The primary source for measuring the five performance indicators will be an annual survey of the uninsured. The baseline will be established from a survey recently completed for Great Basin Primary Care Association by Decision Analytics, Inc. Additionally, data from the Bureau of the Census regarding poverty and insurance status, data for the Nevada Division of Insurance on health care covered lives and enrollment data for Medicaid and Nevada Check Up will be used to confirm the established performance indicators.

Check the applicable suggested performance measurements listed below that the state plans to use: (Section 2107(a)(4))

9.3.1. ☒ The increase in the percentage of Medicaid-eligible children enrolled in Medicaid.

9.3.2. ☒ The reduction in the percentage of uninsured children.

9.3.3. ☐ The increase in the percentage of children with a usual source of care.

9.3.4. ☐ The extent to which outcome measures show progress on one or more of the health problems identified by the state.

9.3.5. ☐ HEDIS Measurement Set relevant to children and adolescents younger than 19.

9.3.6. ☐ Other child appropriate measurement set. List or describe the set used.

9.3.7. ☒ If not utilizing the entire HEDIS Measurement Set, specify which measures will be collected, such as:

9.3.7.1. ☒ Immunizations
9.3.7.2. ☒ Well child care
9.3.7.3. ☒ Adolescent well visits
9.3.7.4. ☐ Satisfaction with care
9.3.7.5. ☒ Mental health
9.3.7.6. ☐ Dental care
9.3.7.7. ☐ Other, please list: __________________

9.3.8. ☐ Performance measures for special targeted populations.

9.4 ☒ The state assures it will collect all data, maintain records and furnish reports to the Secretary at the times and in the standardized format that the Secretary requires. (Section 2107(b)(1)) (42 CFR 457.720)