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State/Territory Name: Nevada

State Plan Amendment (SPA) #: 24-0033

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) CMS 179 Form/Summary Form (with 179-like data)
- 3) Approved SPA Pages

DEPARTMENT OF HEALTH & HUMAN SERVICES

Centers for Medicare & Medicaid Services 601 E. 12th St., Room 355 Kansas City, Missouri 64106



Medicaid and CHIP Operations Group

January 17, 2025

Stacie Weeks, Administrator
Department of Health and Human Services
Division of Healthcare Financing and Policy
1100 East William Street, Suite 101
Carson City, NV 89701

Re: Nevada State Plan Amendment (SPA) NV-24-0033

Dear Administrator Weeks:

The Centers for Medicare & Medicaid Services (CMS) reviewed your Medicaid State Plan Amendment (SPA) submitted under transmittal number NV-24-0033. This amendment will add back into the plan the language for Community Health Workers (CHWs) erroneously left off the NV-23-0016 SPA approval, which adds CHWs as providers under the preventive services benefit.

We have conducted our review of your submittal according to statutory requirements in Title XIX of the Social Security Act. This letter is to inform you that Nevada Medicaid SPA NV-24-0033 was approved on January 17, 2025, with an effective date of October 01, 2024.

If you have any questions, please contact Cecilia Williams at 667-414-0674 or via email at Cecilia. Williams@cms.hhs.gov.

Sincerely,



James G. Scott, Director Division of Program Operations

Enclosures

cc: Jenifer Graham Theresa Carston Sarah Dearborn Casey Angres

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| TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES | 1. TRANSMITTAL NUMBER 2. STATE 2 4 — 0 0 3 3 NV |
| | 2 DECORAN DENTIFICATION: TITLE OF THE COCIAL |
| | SECURITY ACT |
| | SECONTIACT () XIX () XXI |
| TO: CENTER DIRECTOR | 4. PROPOSED EFFECTIVE DATE |
| CENTERS FOR MEDICAID & CHIP SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES | October 1, 2024 |
| 5. FEDERAL STATUTE/REGULATION CITATION Title XIX of the Social Security Act under 1905(a)(13)(c) | 6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars) a FFY 2025 \$ 0 b. FFY 2026 \$ 0 |
| 7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT | 8. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION |
| Attachment 3.1-A Page 6a (cont) & Page 6a (cont p. 1) | OR ATTACHMENT (If Applicable) |
| | Attachment 3.1-A Page 6a (cont) & Page 6a (cont p. 1) |
| 9. SUBJECT OF AMENDMENT | |
| This proposed amendment will add in language concerning Comr state plan amendment. No policy language is changing. | nunity Health Workers that was erroneously left out from the last |
| 10. GOVERNOR'S REVIEW (Check One) | |
| GOVERNOR'S OFFICE REPORTED NO COMMENT COMMENTS OF GOVERNOR'S OFFICE ENCLOSED NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL | OTHER, AS SPECIFIED: |
| 11. SIGNATURE O. STATE AGENCY OFFICIAL | 15. RETURN TO |
| | Cynthia Leech, Compliance Agency Manager |
| 40 TYPED NAME | DHCFP/Medicaid |
| RICHARD WHITI EV | 4070 Silver Sage Drive |
| 13. TITLE | Carson City, NV 89701 |
| DIRECTOR, DHHS | |
| 14. DATE SUBMITTED | |
| December 6, 2024 | |
| FOR CMS U | |
| | 17. DATE APPROVED |
| December 11, 2024 | January 17, 2025 |
| PLAN APPROVED - OI | |
| 18. EFFECTIVE DATE OF APPROVED MATERIAL | 19. SIGNATURE OF APPROVING OFFICIAL Digitally signed by James G. Scott -S |
| October 01, 2024 | Date: 2025.01.17 09:31:13 -06'00' |
| 20. TYPED NAME OF APPROVING OFFICIAL | 21. TITLE OF APPROVING OFFICIAL |
| James G. Scott | Director, Division of Program Operations |
| 22. REMARKS | Annealist needenn we are with a second |
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Page 6a (Continued)

Doula Services:

A doula is a non-medically trained professional who provides education, emotional and physical support during pregnancy, labor/delivery, and postpartum period.

Services:

The following doula services are covered beginning April 1, 2022:

- a. Emotional support, including bereavement support
- b. Physical comfort measures during peripartum (i.e. labor and delivery)
- c. Facilitates access to resources to improve health and birth-related outcomes
- d. Advocacy in informed decision making
- e. Evidence-based education and guidance

Service Limitations:

Pursuant to 42 CFR Section 440.130(c), doula services are preventive services and must be recommended by a physician or other licensed practitioner of the healing arts within their scope of practice under state law.

Doula services for the same recipient and pregnancy are limited to a maximum of the following:

- a. Four visits during the prenatal/antepartum and/or postpartum period (up to 90 days postpartum).
- b. One visit at the time of labor and delivery.

Prior authorization may be submitted for any additional Doula services after the initial service limits are exhausted.

Any services requiring medical or clinical licensure are not covered.

Provider Qualifications:

Approved certification from the Nevada Certification Board as a doula must be obtained prior to rendering services.

Community Health Worker (CHW) Services:

Community Health Workers live in or otherwise have a connection to the community in which they provide services. They are trained by a provider of health care to provide certain services which do not require the CHW to be licensed. They provide services at the direction of a licensed provider of health care which may include outreach and the coordination of health care. All rendered services must be documented in a recipient's medical record.

Services:

The following CHW services are covered:

- a. Guidance in attaining health care services.
- b. Identify recipient needs and provide education from preventive health services to chronic disease
- c. Providing information on health and community resources, including making referrals to

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Supersedes TN No.: 23-0016

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- appropriate health care services.
- d. Connect recipients to preventive health services or community services to improve health outcomes.
- e. Provide education including but not limited to, medication adherence, tobacco cessation, and nutrition.
- f. Promote health literacy, including oral health.

Service Limitations:

CHW services are recommended by a physician or other licensed practitioner of the healing arts within their scope of practice in accordance with state law. Services provided by a CHW are limited to four units (30 minutes per unit) in a 24-hour period, not to exceed 24 units per calendar month per recipient without prior authorization. If medically necessary, prior authorization can be requested for additional services.

Provider Qualifications:

Approved certification from the Nevada Certification Board as a CHW must be obtained prior to rendering services.

A. Rehabilitative Services:

1. Mental Health Rehabilitation Services

Mental health rehabilitation assists individuals to restore and/or retain psychiatric stability, social integration skills, personal adjustment and/or independent living competencies in order to experience success and satisfaction in environments of their choice and to function as independently as possible. Interventions occur concurrently with clinical treatment and begin as soon as clinically appropriate.

The services must be recommended by a physician or other licensed practitioner of the healing arts, within their scope of practice and prescribed on an individualized treatment plan to achieve maximum reduction of a mental disability and restore the recipient to their optimal level of functioning.

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Supersedes TN No.: 23-0028