1. Nevada’s Approach to Addressing the Opioid Crisis – Preparedness Plans and SOR grant – Dr. Stephanie Woodard, DHHS Senior Advisor on Behavioral Health – Dr. Woodard provided a comprehensive overview on Nevada’s response to the opioid crisis that was launched by Governor Sandoval’s opioid summit in 2016. The state has four primary areas of focus: prescriber education and guidelines, treatment options and third-party payers, criminal justice interventions and data collection and intelligence sharing. The state has been able to procure both federal and nonfederal funds to support this initiative. The State Opioid Response (SOR) grant has been received through the Substance Abuse Mental Health Services Administration with a funding period from October 2018-September 2020 in the amount of approximately $7.2M. The primary activities involved in this grant include: availability of naloxone, academic detailing for the Controlled Substance Abuse Prevention Act, MAT training for providers, expand and promote SBIRT, enhanced treatment and recovery supports and innovation through the MCOs, increase access to treatment for non-pharmacologic treatment for pain, expanded access to residential treatment and a perinatal NAS quality collaborative. SOR funding will be distributed through a competitive award process. In addition, the state has been collaborating with Nevada’s counties to provide community preparedness planning to focus on overdose education and naloxone distribution.

Action Items: Request and distribute the community preparedness plan template to the tribal communities and provide a list of funded certified behavioral health providers to the tribes.

2. Long Term Support Services: Non-Emergency Transportation – Kirsten Coulombe – Nevada Medicaid recently completed multi county educational outreach to supply the non-emergency transportation benefit available for Nevada Medicaid recipients. The division has also been exploring the expansion of service delivery providers.

Action item: Distribute a copy of the NET information sheet to tribal clinics
3. MMIS modernization update – Nevada Medicaid’s MMIS system go-live date is February 1st, 2019. Information can be found at medicaid.nv.gov – Web announcement 1788

4. Tribal Federally Qualified Health Clinics – The Tribal FQHC State Plan Amendment is in the internal review process at Nevada Medicaid and should go to public hearing in the first quarter of the year. The associated policy is still currently under discussion in regard to recent CMS guidance on coverable services at an FQHC. Current Nevada Medicaid policy does not allow for specialty services, which has been a critical access point for Nevada’s tribes. Nevada Medicaid is conducting internal meetings to determine the best approach for the tribes and the state.

   Action Item: Angie Wilson has initiated outreach to Kitty Marx to determine what services will be covered at an FQHC.

5. Administrative claiming – Nevada will continue to explore the option of administrative claiming for tribal clinics. This option would allow tribes to bill for services that promote access to care for tribal members. Nevada will review California’s plan to determine if there is a feasible option within the state.

6. Mail Order Pharmaceuticals – This is primarily an IHS initiative and Loren Ellery was unavailable for comment due to the federal government partial shutdown.

7. Access to out-of-state and behavioral health providers – Owyhee tribal clinic is having difficulty accessing out of state providers within their catchment area.

   Action Item – Medicaid will assist with supporting out of state providers with enrollment as needed.