Joe Lombardo Governor



Richard Whitley Director

August 16, 2024 Meeting

Patient Protection Commission (PPC)

Joseph Filippi, Executive Director, PPC



Department of Health and Human Services

Helping people. It's who we are and what we do.



Agenda Item 4

For Possible Action: Review and Discussion of Possible Bill Draft Requests (BDR)



BDR Topic 1: Medicaid Health Care Workforce Development Fund



BDR Topic 1 - Intent

Establish a fund that could leverage Medicaid federal funds to support the expansion of Graduate Medical Education programs, improve the capacity and size of the state's health care workforce and increase access to care.



BDR Topic 1

- Establish a new Medicaid Health Care Workforce Fund at the Division of Health Care Financing and Policy to support efforts to expand the state's health care workforce, including, but not limited to: a. Eligible Graduate Medical Education programs;
 - b. Eligible Indirect Medical Education programs;
 - c. Provider fellowship and apprenticeship programs; and
 - d. Loan repayment programs.
- 2. The Fund may consist of state and local monies and private donations to the state that are deposited into the account or appropriated by the Legislature and any available federal funds, including those available under Title XIX of the Social Security Act.
- 3. The Administrator must ensure all activities or programs funded by monies in the Fund are eligible to receive federal funds under Title XIX of the Social Security Act.
- 4. Any money remaining in the Account at the end of a fiscal year does not revert to the State General Fund, and the balance of the Account must be carried forward to the next fiscal year.



BDR Topic 2: Increase Medicaid Reimbursement Rates With A Targeted Approach



BDR Topic 2 - Intent

- Increase Medicaid reimbursement rates by 5% for physicians (and APRNs) to meet the health care needs of Nevadans.
 - Additional 3% for rural services
 - Additional 3% for physicians and APRNs who participate in value-based payment models
- Require the Division of Health Care Financing and Policy to seek federal authority to establish accountable care payment models that promote high quality and coordinated primary care.
 - Includes incentive and value-based payment opportunities for providers and participating health care organizations.
- Require the Division of Health Care Financing and Policy to issue a survey each biennium to providers of health care requesting recommendations on how to improve the provider billing experience and increasing provider utilization with Nevada Medicaid.



BDR Topic 2

- 1. Increase Medicaid reimbursement rates for physicians (which applies to APRNs under parity laws) by another 5 percent this next biennium with a 3 percent bump for any Medicaid-covered services rendered to recipients in rural areas. Provide a 3 percent bump for physicians and APRNs participating in the Department's value-based payment models for services funded by Title XIX of the Social Security Act.
- 2. The Division of Health Care Financing and Policy shall seek all federal authority necessary to establish an accountable care payment model in Medicaid that focuses on expanding high-quality, coordinated primary care. This model will include incentive payments and other value-based payment arrangements for networks of providers, group practices, hospital systems, and other providers that agree to establish new health care partnerships aimed at coordinating care and utilizing innovative approaches to care delivery for a specified patient population in a manner that improves health outcomes and lowers the total cost of care for such population.
- 3. The Division of Health Care Financing and Policy shall issue a survey each biennium to providers of health care requesting recommendations on how to improve the provider experience and increasing provider utilization with Nevada Medicaid.



BDR Topic 3: Health Care Occupational Licensure (Ongoing Discussion)



BDR Topic 3 - Intent

Join certain Interstate Licensure Compacts to:

- Remove unnecessary barriers for recruiting and retaining health care providers
- Improve licensure portability and streamline the onboarding process for essential health care providers
- Improve access to care
- Address health care workforce challenges



Interstate Licensure Compacts

Compacts NV is **<u>not</u>** currently participating in:

(Excluding the Social Work and the Counseling Compact)

Compact	States/Territories in Compact	Provider Type	
Advanced Practice Registered Nurse (APRN) Compact*	4 states	Nurse Practitioners (NPs)	
Audiology and Speech Language Pathology Interstate Compact	22 atatas	Audiologists	
	33 states	Speech Language Pathologists	
Dentist and Dental Hygienist Compact	9 states	Dentists	
		Dental Hygienists	
Dietician Licensure Compact	3 states	Dietitians and Nutritionists	
Interstate Compact for School Psychologists	2 states	School Psychologists	
Nurse Licensure Compact	40 states and 2 territories	Registered Nurses (RNs)	
Occupational Therapy Licensure Compact	31 states	Occupational Therapists	
Physical Therapy Licensure Compact	38 states and 1 territory	Physical Therapists	
PA Licensure Compact	13 states	Physician Assistants	



Interstate Licensure Compacts (cont.)

Compacts PPC could consider including in BDR:

	States/Territories in		National Rate (per	Nevada Rate (per	Nevada
Compact	Compact	Provider Type	100,000 Residents)	100,000 Residents)	Ranking
Audiology and Speech Language Pathology	33 states	Audiologists	4.2	2.5	49
Interstate Compact		Speech Language Pathologists	59.3	30.2	50
Nurse Licensure Compact	40 states and 2 territories	Registered Nurses (RNs)	948.1	810.5	45
Occupational Therapy Licensure Compact	31 states	Occupational Therapists	43.2	38.2	35
Physical Therapy Licensure Compact	38 states and 1 territory	Physical Therapists	71.9	58.9	46
PA Licensure Compact	13 states	Physician Assistants	43.5	45.4	22

Washington DC is excluded in the rankings

Sources: U.S. Bureau of Labor Statistics (https://www.bls.gov/oes/tables.htm), American Speech-Language-Hearing Association (https://www.asha.org/siteassets/surveys/audiologist-



BDR Topic 3 – Proposed Language

NURSE LICENSURE COMPACT

Enact and enter into the <u>Nurse Licensure Compact</u> and conduct a study on the impacts to addressing the nursing shortage. <u>21 MODEL_ACT.PDF (NCSBN.ORG)</u>

PHYSICIAN ASSISTANT COMPACT

Enact and enter into the <u>Physician Assistant (PA) Compact</u> and conduct a study on the impacts to addressing the PA shortage. <u>PA-COMPACT-</u> <u>MODEL-LEGISLATION.PDF (PACOMPACT.ORG)</u>

PHYSICAL THERAPY COMPACT

Enact and enter into the <u>Physical Therapy Compact</u> and conduct a study on the impacts to addressing the physical therapist shortage. <u>PT_COMPACT_LANGUAGE_FINAL WITH COVER PAGE1_11_2021.PDF (PTCOMPACT.ORG)</u>

AUDIOLOGY AND SPEECH LANGUAGE PATHOLOGY COMPACT

Enact and enter into the <u>Audiology and Speech-Language Pathology Interstate Compact</u> (ASLP-IC) and conduct a study on the impacts to addressing the audiologist and speech language pathologist shortage. <u>FINAL_ASLP-IC_LEGISLATION_CORRECT_1.6.21.PDF</u> (ASLPCOMPACT.COM)

OCCUPATIONAL THERAPY COMPACT

Enact and enter into the <u>Occupational Therapy Compact</u> and conduct a study on the impacts to addressing the occupational therapy shortage. FINAL_OCCUPATIONAL_THERAPY_COMPACT_3.1.2022PDF.PDF (OTCOMPACT.ORG)



Questions?



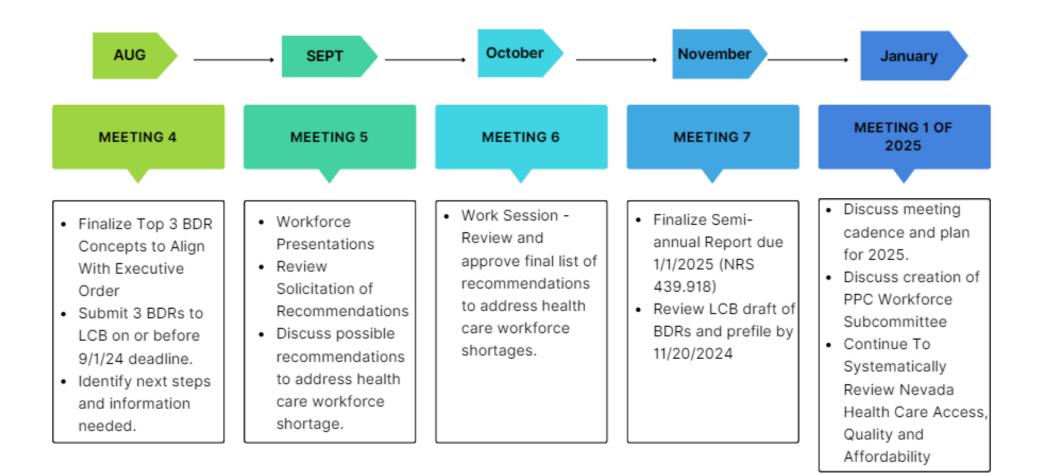
Agenda Item 5

For Possible Action: Discuss the Governor's Executive Order 2024-002 and Proposed Next Steps



Patient Protection Commission (PPC)

Meeting Plan (August 2024 - January 2025)





Contact Information

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Acronyms

- Bill Draft Request (BDR)
- Executive Order (EO)
- Graduate Medical Education (GME)
- Patient Protection Commission (PPC)
- Physician Assistant (PA)