

# 1915(c) Waiver Case Management

## Division of Nevada Medicaid

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# CM Provider Types

All CM providers (public/private) must be enrolled as Medicaid Waiver Providers:

- Provider Type (PT) 48 – FE Waiver (Community)
- PT 57 FE Waiver (Residential Group Homes)
- PT59 FE Waiver (Assisted Living Facility)
- PT 58 – Physically Disabled (Community) and Assisted Living Facility
- **PT 95 – Structured Family Caregiving** - no CM providers at this time

# Provider Enrollment Requirements

**Case Management providers must be enrolled as a Waiver Case Management Provider Agency through Nevada Medicaid's fiscal agent.**

The following requirements must be verified upon enrollment:

- Documentation of taxpayer ID
- Business license from the Secretary of State (for in-state providers) or a copy of the Secretary of State business license in the provider's home state (for out-of-state provider).
- Proof of Worker's Compensation Insurance
- Proof of Unemployment Insurance Account
- Proof of Commercial General Liability
- Proof of Business Automobile Liability Coverage
- Proof of Commercial Crime Insurance
- Local or toll-free phone number accessible during traditional business hours (8:00 am - 5:00 pm).
- Business office that is accessible to the public during established and posted business hours OR demonstrate availability to waiver individuals during traditional business hours (8:00 am - 5:00 pm).
- FBI Criminal Background Check

# Provider Enrollment Requirements (con't)

**Employees who provide case management must meet the requirements listed above and:**

- Have a valid driver's license and means of transportation to conduct home visits.
- Adhere to Health Insurance Portability and Accountability Act (HIPAA) requirements.
- FBI criminal history background check.
- Licensed Social Worker by the State of Nevada Board of Examiners for Social Workers, licensed as a Registered Nurse by the State of Nevada Board of Nursing, or have a professional license or certificate in a medical specialty applicable to the assignment; **OR have at minimum a Bachelor's degree** from an accredited college or university in social work, gerontology, counseling, nursing, psychology, human growth and development, special education, sociology, criminal justice or a closely related social science or human services field. One year of professional experience providing case management services in a social or health related field is preferred but can be obtained through on the job training; or have an equivalent combination of education and experience.

# Two (2) Types of Case Management (CM)

## Case Management Providers:

- Public Case Management: State, county, and local entities
  - Payment for services may be cost settled
- Private Case Management – all other agencies that are not state, local or county - Payment for services based on the Medicaid rate

# Rates Determination

The initial rate for Case Management was set by ADSD in 2002 using actual costs for case management.

In 2005, the rate was reviewed, and a 20% increase was proposed by ADSD, again using actual costs for case management in 2005. The rate increase was approved by Nevada Medicaid. Only costs directly attributable to case management services and a reasonable allocation of indirect costs are included in the rate.

Indirect costs are developed in conformance with the Division's cost allocation plan and include agency administrative costs and travel.

The current rate for Private CM is \$15.84/15 mins.