

DMEPOS

DURABLE **M**EDICAL **E**QUIPMENT, **P**ROSTHETICS, **O**RTHOTICS AND
DISPOSABLE MEDICAL **S**UPPLIES

Policies are updated on a regular and ongoing basis. To ensure compliance with DHCFP's policies, always use current versions of all policies.

Medicaid Services Manual

<http://dhcfp.nv.gov/Resources/AdminSupport/Manuals/MSM/MSMHome/>

Introduction

42 Code of Federal Regulations (CFR), Section 1902 of the Social Security Act, and Nevada Revised Statutes (NRS) 422.2356 with oversight by Centers for Medicare and Medicaid Services (CMS) the DHCFP reimburses for medically necessary equipment and supplies.

- **Nevada Medicaid covers standard medical equipment that meet the basic medical need of the recipient.**
- **Products must have been approved by the FDA and be consistent with the approved use.**

** Products or usage that are experimental or investigational and/or items classified as educational or rehabilitative by nature are non covered (MSM 1300)*

DME Request Process

1. Recipient's treating physician conducts a face-to-face appointment for the equipment that clearly documents why, what, when, and for length of need for any prescribed DMEPOS
2. Recipient provides the prescription to a DME Provider of their choice
3. DME provider obtains all required medical documents from the treating physician.
 - The recipient will need a mobility evaluation completed by a Physical Therapist (PT), Occupational Therapist (OT) and/or physician.
4. DME provider submits the required prior authorization with all the above documentation to Medicaid for review and determination.

DME Request Process Cont.

5. Fiscal agent has 2 days to process the documents submitted by DME provider:

1. Documents may be sent to physician for review or pended back for additional information.
2. DME provider has five days to obtain any additional information and return
3. Fiscal agent has two days to complete PA
4. If a prior authorization request is denied or reduced, the provider and recipient will be sent a Notice of Decision (NOD) with a citation/reason to provide a general explanation of the denial.

DMEPOS- Resources

MSM Chapter 1300- DMEPOS Policy

<http://dhcfp.nv.gov/Resources/AdminSupport/Manuals/MSM/C1300/Chapter1300/>

Medicaid District Office Healthcare Coordinator

- Assists recipients with communication between Medicaid, the DME provider, physicians, and other therapists.

Las Vegas: 702-668-4200

Reno: 775-687-1900

Carson: 775-684-3651

Elko: 775-753-11941

Contact

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