

Brian Sandoval  
Governor



Marta Jensen  
Administrator  
Division of Health Care Financing and  
Policy

# Nevada Medicaid & Community Paramedicine

Erin Lynch, MPH  
Division of Health Care Financing & Policy  
Chief, Hospital & Physician Services  
775-684-3654  
[erin.lynch@dhcfp.nv.gov](mailto:erin.lynch@dhcfp.nv.gov)



# How did this first start?



## 2015 Legislative Session

- Assembly Bill 305
- NRS 450B – Emergency Medical Services



## Nevada Revised Statute (NRS)



**NRS 450B.0615 “Community paramedicine services” defined.** “Community paramedicine services” means services provided by an emergency medical technician, advanced emergency medical technician or paramedic to patients who do not require emergency medical transportation and provided in a manner that is integrated with the health care and social services resources available in the community. (Added to NRS by [2015, 649](#))



# What does this mean?

- EMTs/Paramedics being allowed to provide medical services to patients in their home rather than the ER.



# How is this regulated?

- Nevada Administrative Code (NAC) – All counties except Clark County
  - Nevada Division of Public & Behavioral Health, State EMS Office
  - Regulations effective 1/27/2017
- Clark County EMS Regulations
  - Southern Nevada Health District, Office of Emergency Medical Services & Trauma System





# What are the requirements to become a Community Paramedic (CP)?

- **Agency** Permit – CP endorsement
  - Application process
    - NAC 450B.482
    - SNHD 100.190, 800.000 – 800.160
- **Individual** endorsement added onto Certificate
  - NAC 450B.486
    - 5 modules – role of CP in health care system, social determinates of health, role of CP in public and primary care, cultural competence, personal safety and wellness for CP.
    - EMT = 30 hrs of didactic instruction, 12 hrs clinical hrs
    - Advanced EMT = 34 hrs of didactic instruction, 12 hrs of clinical
    - Paramedic = 52 hrs of didactic instruction, 24 hrs of clinical
  - Clark County Regs – very similar (6 modules)
    - 51.5 hrs didactic, 24 hrs clinical



# How to Enroll in FFS?

- In order to receive reimbursement from NV Medicaid, the EMS agency and the EMT must enroll into NV Medicaid under Provider Type (PT) 32 (Ambulance, Air or Ground)
- Nevada licensed hospitals
  - But only allowed to conduct community paramedicine activities. Just approved via State Board of Health on 9/7/18 (NAC 450B)
  - Approval will be added to their hospital license from HCQC (temporary compliance agreement)
  - Will enroll at Provider Type 32 for Medicaid reimbursement
  - Individual EMT also has to enroll

## PT 32 Enrollment Checklist

- Community Paramedic NPI validation: Printed page from the NPPES NPI Registry displaying the provider's NPI or a printed copy of the email confirmation showing the provider's NPI
- Medical Director's NPI validation: Printed page from the NPPES NPI Registry displaying the provider's NPI or a printed copy of the email confirmation showing the provider's NPI
- Community Paramedicine Endorsement – Individual (Division of Public and Behavioral Health or Southern Nevada Health District)
- Community Paramedicine Endorsement – Agency (Division of Public and Behavioral Health or Southern Nevada Health District)
- Payment Address/Servicing Agency Address on your enrollment or revalidation application



# How to Enroll in MCO?

- Each has their own process on how to enroll.
- For community paramedicine, they all follow the FFS policy and the services covered.
- May offer same or different reimbursement rates.





# Medicaid Policy

- Effective **7/1/2016**, community paramedicine a reimbursable service
- Medicaid Services Manual (policy/services we cover)
  - MSM Chapter 600
  - Section 604
    - The Division of Health Care Financing and Policy (DHCFP) reimburses for medically necessary community paramedicine services which are designed to provide health care services to the medically underserved. Community Paramedicine services fill patient care gaps in a local health care system and prevent duplication of services while improving the healthcare experience for the recipient. Prevention of unnecessary ambulance responses, emergency room visits, and hospital admissions and readmissions can result in cost reductions for the DHCFP.



# Provider Qualifications

- The following Nevada-licensed providers may provide community paramedicine services for Nevada Medicaid recipients:
  - 1. Emergency Medical Technician (EMT);
  - 2. Advanced Emergency Technician (AEMT);
  - 3. Paramedic; or
  - 4. Community Paramedic.
- Required Individual Endorsement
  - DPBH or SNHD
- Must be enrolled as a Nevada Medicaid provider and employed by a permitted Emergency Medical System (EMS) agency with CP on permit.
- Must possess a scope of service agreement, based upon the provider's skills, with the Medical Director of the EMS agency under which they are employed.
  - The Medical Director of the EMS agency providing community paramedicine services must be enrolled as a Nevada Medicaid Provider.



# Coverage & Limitations

- Community paramedicine services are delivered according to a **recipient-specific plan of care** under the supervision of a **Nevada-licensed primary care provider (PCP)**, including a **physician (MD/DO)**, an **advanced practice registered nurse (APRN)** or **physician's assistant (PA)** following an appropriate assessment. The **PCP must consult with the EMS agency service's medical director to coordinate the care plan** with all local community health providers and the local public health agencies, including home health and waiver services, to **avoid duplication of services** to the recipient. ~~If a fee-for-service recipient requires more than five visits in the home during a three-month period, they will be referred to the Care Management Organization (CMO) by the EMS agency.~~



# Covered Services



1. Evaluation/health assessment;
2. Chronic disease prevention, monitoring and education;
3. Medication compliance;
4. Immunizations and vaccinations;
5. Laboratory specimen collection and point of care lab tests;
6. Hospital discharge follow-up care;
7. Minor medical procedures and treatments within their scope of practice as approved by the EMS agency's medical director;
8. A home safety assessment; and
9. Telehealth originating site.



# Non-Covered Services



1. Travel time;
2. Mileage;
3. Services related to hospital-acquired conditions or complications resulting from treatment provided in a hospital;
4. Emergency response; for recipients requiring emergency response, the EMS transport will be billed under the ambulance medical emergency code;
5. Duplicated services; and
6. Personal Care Services.



# CPT Codes & Rates (FFS)

CPT Code	Description	Units	Reimbursement Rate
90460	IM Administration 1 <sup>st</sup> only/component	1 unit per claim	\$18.82
90471	Immunization Admin	1 unit per claim	\$18.82
90472	Immunization Admin each addl	1 unit per claim line	\$9.32
90473	Immune Admin oral/nasal	1 unit per claim	\$18.82
90474	Immune Admin oral/nasal addl	1 unit per claim line	\$9.32
99341	Home visit new patient- low severity 20 min	1 unit per claim	\$35.75
99342	Home visit new patient – mod severity 30 min	1 unit per claim	\$51.61
99343	Home visit new patient – mod-hi severity 45 min	1 unit per claim	\$84.25
99344	Home visit new patient – 60 min	1 unit per claim	\$117.79
99345	Home visit new patient – 75 min	1 unit per claim	\$141.97
99347	Home visit established patient – self limited/minor 15 min	1 unit per claim	\$36.00
99348	Home visit established patient – low-mod severity 25 min	1 unit per claim	\$54.40
99349	Home visit established patient – mod-hi severity 40 min	1 unit per claim	\$82.31
99350	Home visit established patient – 60 min	1 unit per claim	\$114.82
Q3014	Telehealth originating site facility fee	1 unit per claim	\$24.24



# What Next?

- Work with your 911 system, local hospital, and identify who your chronic 911 callers are.
- Who takes themselves to the ER frequently?
- Does the Medicaid recipient have a primary care physician?
- Why isn't this recipient utilizing a primary care physician?
- Is transportation an issue?
- Can this recipient benefit from being seen in their home by a Community Paramedic to manage their chronic condition, etc?



# Who is doing Community Paramedicine?

- REMSA (only one billing NV Medicaid)
- Medic West – very soon
- Humboldt General Hospital
- HRSA grant for rural hospitals – very soon
  - Community Paramedicine Endorsement to be added onto their hospital license
    - Mt. Grant General Hospital
    - South Lyon Medical Center
    - Battle Mountain General Hospital
    - William B. Ririe Hospital





# Goals

- Provide care in recipients home
- Reduce utilization of the ER for services that don't need the ER
- Provide care at an appropriate level and by a appropriate provider
- Prevent chronic condition, etc from spiraling out of control



# Current Activities

- Educating EMS Agencies
  - REMSA, North Lake Tahoe, East Fork Fire, City of Reno, Las Vegas Fire, Medic West
- Rural EMS Conference in Elko 9/22/18
  - 300+ attendees
- Speaking at EMT classes (John Mohler) 10/24/18
- State EMS Advisory Committee 10/25/18
- Southern NV Health District Board - TBD
- Technical Bulletin out to Agencies - TBD



# We Need Your Assistance?

- ✓ What will your program look like in your community?
- ✓ Understanding the service
- ✓ Building community relationships
- ✓ Sharing success stories



# Questions?



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