

6.b. Optometrist services require prior authorization from the Nevada Medicaid Office. Refractions are limited to one in 24 months except for those required as a result of an EPSDT examination.

6.c. Chiropractor services are limited to individuals under the age of 21 and referred as a result of a Healthy Kids (EPSDT) screening.

6.d. Other practitioner services

Services of a licensed Physician Assistant.

Services of a licensed Advanced Practice Registered Nurse

Services of a licensed Psychologist

Services of a licensed Registered Nurse within their scope of practice according to Nevada State Law.

Community Paramedicine services:

1. Services must be part of the care plan ordered by the recipient's primary care provider. The primary care provider consults with the ambulance service's Medical Director to ensure there is no duplication of services.

A. The following services are covered under the supervision of the Medical Director:

~~a~~.1. Evaluation/health assessment.

~~b~~.2. Chronic disease prevention, monitoring and education.

~~c~~.3. Medication compliance.

~~d~~.4. Immunizations and vaccinations.

~~e~~.5. Laboratory specimen collection and point of care lab tests.

~~f~~.6. Hospital discharge follow-up care.

~~g~~.7. Minor medical procedures and treatments within their scope of practice as approved by the Community Paramedicine Agency's Medical Director.

~~h~~.8. A home safety assessment.

~~i~~.9. Telehealth originating site.

B. The following are 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. Duplication of services.
6. Personal care services.

Registered Pharmacist Services:

1. A Registered Pharmacist is a health care professional licensed to engage in pharmacy duties including dispensing prescription drugs, monitoring drug interactions, administering vaccines and counseling patients regarding the effects and proper usage of drugs and dietary supplements.

A The following registered pharmacist services are covered:

1. The dispensing of self-administered hormonal contraceptives based on the protocols established by the Nevada State Board of Pharmacy regardless of whether a patient has obtained a prescription from a practitioner.
2. The prescribing, dispensing and administration of drugs to prevent the acquisition of Human Immunodeficiency Virus (HIV) and ordering and conducting certain HIV laboratory tests based on protocols established by the Nevada State Board of Pharmacy.

- B. Registered pharmacists' services are not covered when provided in an inpatient or outpatient hospital, emergency department, or inpatient psychiatric facility.

Doula Services:

1. A doula is a non-medical trained professional who provides education, emotional and physical support during pregnancy, labor/delivery, and postpartum period. Doula services may be provided upon the confirmation of pregnancy.

A. The following doula services are covered:

1. Emotional support, including bereavement support
2. Physical comfort measures during peripartum (i.e. labor and delivery)
3. Facilitates access to resources to improve health and birth-related outcomes
4. Advocacy in informed decision making
5. Evidence-based education and guidance

B. The following are non-covered services:

1. Travel time and mileage
2. Services requiring medical or clinical licensure

Community Health Worker Services:

1. Community Health Workers (CHW) are trained public health educators improving health care delivery requiring integrated and coordinated services across the continuum of health. CHWs provide recipients culturally and linguistically appropriate health education related to disease prevention and chronic disease management. CHWs must be supervised by a Nevada Medicaid enrolled physician, physician assistant or APRN.

A. The following CHW services are covered:

1. Guidance in attaining health care services
2. Identify recipient needs and provide education for preventative health services to chronic disease self-management
3. Information on health and community resources
4. Connect recipients to preventive services or community services to improve health outcomes
5. Promote health literacy

B. The following are non-covered services:

1. Delegate the CHW to perform or render services that require licensure
2. Transport a recipient to an appointment
3. Make appointments not already included within the CHW visit/service
4. Deliver appointment reminders
5. Employment support
6. Coordinate and participate in community outreach events not related to individual or group Medicaid recipients
7. Case management
8. Accompanying a recipient to an appointment
9. Provide child-care while the recipient has an appointment
10. Application assistance for social service programs
11. Mental health/alcohol and substance abuse services, including peer support services

7. Home health care services

Services: As regulated under 42 CFR 484, 42 CFR 440.70 and other applicable state and federal law or regulation.

Home health services are certified by a physician and provided under a physician approved Plan of Care. These services may be provided in any setting where normal life activities occur. The provider must be enrolled as a Medicare Certified Home Health Agency licensed and authorized by state and federal laws to provide health care services in the home. Home health services include the following services and items:

- a. Physical therapy.
(Reference Section 11 “a” of Attachment 3.1-A)
- b. Occupational therapy.
(Reference Section 11 “b” of Attachment 3.1-A)
- c. Speech therapy.
(Reference Section 11 “c” of Attachment 3.1-A)

Provider Qualifications:

(Reference Section 7 “e” of Attachment 3.1-A)

- d. Skilled nursing services (RN/LPN visits)