



## Nevada Medicaid and Nevada Check Up

### Provider Enrollment Information Booklet

#### Welcome!

Thank you for your interest in the Nevada Medicaid and Nevada Check Up program. To bill for services rendered or to order, prescribe and refer services to Nevada Medicaid recipients (hereafter referred to as “recipients”), you must enroll with DXC Technology as a Nevada Medicaid provider. DXC Technology is the current Quality Improvement Organization (QIO)-like vendor for the Nevada Medicaid/Nevada Check Up program, and is referred to as Nevada Medicaid throughout this document.

**If you have any questions** about enrollment, please call Nevada Medicaid at (877) 638-3472. When calling, select the prompts for “Nevada Medicaid Provider,” then 0 for all other calls, and then 5 for “Provider Enrollment.”

#### Website

Enrollment information and the Online Provider Enrollment Portal link are at [www.medicaid.nv.gov](http://www.medicaid.nv.gov) (select “Provider Enrollment” from the “Providers” menu).

#### Online Provider Enrollment Portal

The Nevada Medicaid and Nevada Check Up Online Provider Enrollment Portal allows providers, or their delegates, to complete enrollment, re-enrollment, revalidation and provider changes using an online application.

The portal is accessed from the Provider Enrollment webpage by clicking on the “Online Provider Enrollment” link. For revalidation and provider changes, you can log into the Provider Web Portal through the [Provider Login \(EVS\)](#) link and click on the “Revalidate-Update Provider” link on the My Home page.

Prior to starting the application, review the Provider Enrollment Checklist for your provider type and gather all pertinent information, including applicable ownership, agent and managing employee information.

For helpful instructions, refer to the “Online Provider Enrollment User Manual,” which is posted on the [Provider Enrollment](#) webpage.

#### Required for Enrollment or Revalidation

The following are **required** for your enrollment in the Nevada Medicaid program:

- Provider Initial Enrollment Application submitted through the Online Provider Enrollment Portal and electronically signed contract.
- All documentation listed on the Enrollment Checklist for your provider type

The following are **required** for your revalidation in the Nevada Medicaid program:

- Provider Revalidation Application submitted through the Online Provider Enrollment Portal and electronically signed contract.
- All documentation listed on the Enrollment Checklist for your provider type

The Nevada Medicaid Provider Revalidation Report on the [Provider Enrollment](#) webpage lists each provider and the date their next revalidation is due. To avoid contract termination, your revalidation application must be processed and approved prior to the revalidation due date. Providers may revalidate up to a year in advance of their revalidation due date.

## Trading Partners

If you use a Trading Partner to submit your claims, you must use a Trading Partner who is enrolled and certified in the EDI Program. For information regarding Trading Partner enrollment visit [www.medicaid.nv.gov](http://www.medicaid.nv.gov) (select “Electronic Claims/EDI” from the “Providers” menu.) **If you have any questions**, please call our EDI Department at (877) 638-3472. When calling, select the prompts for “Nevada Medicaid Provider,” then 0 for all other calls, and then 3 for “Electronic Billing” or send an email to: [nvmmis.edisupport@dxc.com](mailto:nvmmis.edisupport@dxc.com).

Providers are referred to [EVS User Manual](#) Chapter 1 for instructions on authorizing a Trading Partner to submit your transactions on your behalf.

## Out of State Providers

### Urgent/Emergency Services

Providers enrolled with Medicaid in their home state that have provided urgent/emergency services to Nevada Medicaid recipients: Full Nevada Medicaid enrollment is not required. To receive payment for urgent/emergency services rendered to recipients outside of Nevada borders an application for urgent/emergent enrollment will need to be submitted through the Online Provider Enrollment Portal as mentioned above. Proof of Medicaid enrollment in your home state will be required with this request. Providers not enrolled with Medicaid in their home state: Complete enrollment documents as described for in-state providers (see “Required Documents”).

Once urgent/emergent enrollment is approved, the billing provider will need to register and log into the secure web portal to submit a claim. If you are requesting urgent/emergency enrollment as an individual provider and have a separate billing provider, the billing provider will need to enroll with Nevada Medicaid as a billing provider. Once they are enrolled, you will then need to be linked to the group for claims to process appropriately. The group can be a fully enrolled provider or an urgent/emergency provider.

Instructions on submitting a retro authorization for services that require prior authorization can be found in Chapter 4 of the [Billing Manual](#).

### Non-emergency Care Out-of-State in Catchment

When medical care within Nevada is unavailable for recipients residing near state borders, the contiguous out-of-state physician/clinic is considered the primary provider. All in-state benefits and/or limitations apply.

If your business/practice/facility is in one of the following “catchment areas,” submit Nevada Medicaid enrollment documents as described for **in-state** providers (see “Required Documents”). To qualify, the provider must meet all federal requirements, Nevada Medicaid state requirements **and** be a Medicaid provider in the state where services are rendered.

Table E-1: Nevada Medicaid Catchment Areas

Catchment Areas	
State	Cities/Zip Codes
Arizona	<b>Bullhead City:</b> 86426, 86427, 86429, 86430, 86439, 86442, 86446 <b>Kingman:</b> 86401, 86402, 86411, 86412, 86413, 86437, 86445 <b>Littlefield:</b> 86432
California	<b>Bishop:</b> 93512, 93514, 93515 <b>Bridgeport:</b> 93517 <b>Davis:</b> 95616, 95617, 95618 <b>Loyalton:</b> 96118 <b>Markleeville:</b> 96120 <b>Needles:</b> 92363 <b>Sacramento:</b> 94203, 94204, 94205, 94206, 94207, 94208, 94209, 94211, 94229, 94230, 94232, 94234, 94235, 94236, 94237, 94239, 94240, 94244, 94245, 94246, 94247, 94248, 94249, 94250, 94252, 94254, 94256, 94257, 94258, 94259, 94261, 94262, 94263, 94267, 94268, 94269, 94271, 94273, 94274, 94277, 94278, 94279, 94280, 94282, 94283, 94284, 94285, 94286, 94287, 94288, 94289, 94290, 94291, 94293, 94294, 94295, 94296, 94297, 94298, 94299, 95811, 95812, 95813, 95814, 95815, 95816, 95817, 95818, 95819, 95820, 95821, 95822, 95823, 95824, 94825, 95826, 95827, 95828, 95829, 95830, 95831, 95832, 95833, 95834, 95835, 95836, 95837, 95838, 95840, 95841, 95842, 95843, 95851, 95852, 95853, 95860, 95864, 95865, 95866, 95867, 95887, 95894, 95899 <b>South Lake Tahoe:</b> 96150, 96151, 96152, 96154, 96155, 96156, 96157, 96158 <b>Susanville:</b> 96127, 96130 <b>Truckee:</b> 96160, 96161, 96162

Idaho	<b>Boise:</b> 83701, 83702, 83703, 83704, 83705, 83706, 83707, 83708, 83709, 83711, 83712, 83713, 83714, 83715, 83716, 83717, 83719, 83720, 83721, 83722, 83724, 83725, 83726, 83727, 83728, 83729, 83730, 83731, 83732, 83733, 83735, 83756, 83757, 83799 <b>Mountain Home:</b> 83647 <b>Twin Falls:</b> 83301, 83302, 83303
Utah	<b>Cedar City:</b> 84720, 84721 <b>Enterprise:</b> 84725 <b>Orem:</b> 84057, 84058, 84059, 84097 <b>Provo:</b> 84601, 84602, 84603, 84604, 84605, 84606 <b>Salt Lake City:</b> 84101, 84102, 84103, 84104, 84105, 84106, 84107, 84108, 84109, 84110, 84111, 84112, 84113, 84114, 84115, 84116, 84117, 84118, 84119, 84120, 84121, 84122, 84123, 84124, 84125, 84126, 84127, 84128, 84130, 84131, 84132, 84133, 84134, 84136, 84138, 84139, 84141, 84143, 84144, 84145, 84147, 84148, 84150, 84151, 84152, 84153, 84157, 84158, 84165, 84170, 84171, 84180, 84184, 84189, 84190, 84199 <b>St. George:</b> 84770, 84771, 84790, 84791 <b>Tooele:</b> 84074 <b>Wendover:</b> 84083 <b>West Jordan:</b> 84084

## Email Address

Providers may submit their license updates and voluntary terminations through email. The email address is: [nv.providerapps@dcx.com](mailto:nv.providerapps@dcx.com).

No other forms will be accepted through the email inbox and will be returned.

## State Policy

The Division of Health Care Financing and Policy (DHCFP) determines Nevada Medicaid state policy. This policy is contained in the [Medicaid Services Manual \(MSM\)](#). The MSM is published on the DHCFP website at <http://dhcfp.nv.gov>. Specific enrollment requirements are located in MSM Chapter 100.

## Provider Groups

Nevada Medicaid can pay a group entity billing under one NPI. To request this, each individual provider in the group must be enrolled in the Nevada Medicaid program (i.e., submit their own, individual enrollment application). The **group then submits its own set of enrollment documents** (in addition to the documents submitted by the individual providers). In order for the individuals to be linked to the group that will be paid, the **individual names and NPIs of all providers** that will be paid under the group must be listed on the group's Enrollment Application. Each provider must sign the list on the application to acknowledge participation in the group.

Provider groups may be formed for the following provider types:

- Applied Behavior Analysis (ABA) – provider type 85
- Audiologist Group – provider type 76
- Behavioral Health Outpatient Treatment Group – provider type 14
- Behavioral Health Rehabilitative Treatment Group – provider type 82
- Chiropractic Group – provider type 36
- Dentist Group – provider type 22
- Optometrist Group – provider type 25
- Physician Group – includes any combination of provider types 20, 24, 72, 74 and 77
- Podiatrist Group – provider type 21
- Psychologist Group – provider type 26
- Therapist Group – provider type 34

Claims for a provider group are submitted using the Professional Health Care Claim: Fee-for-Service (837P) with the group's NPI and the servicing provider's NPI in the appropriate fields. Use Direct Data Entry (DDE) or a Trading Partner to submit claims. See Electronic Verification System (EVS) User Manual Chapter 3 Claims or the 837P Companion Guide for billing instructions.

You may **add or remove a group member** by completing a change/update via the secure web portal (EVS). Any changes to group membership must be reported within five business days.



**If you submit claims to Medicare as a Provider Group and you wish for the claims to automatically cross over to Nevada Medicaid, then you must also enroll that same Provider Group with Medicaid.**

## Reporting Business Information

### Individual (Servicing) Provider:

Individuals must enroll with their individual information instead of reporting the group's information. The individual will enroll with their own information then be linked to the group or billing provider for claims processing, payment and reporting purposes. If you are an individual linking to a group, the tax liability of income received from Nevada Medicaid will be on the billing provider. You would only receive tax documents if you are receiving payment directly from Nevada Medicaid.

As an individual provider you will need to answer the following questions related to how you report doing business as:

- If you would like to be linked to a group, please enter the group provider's National Provider Identifier (NPI).
- Only enter your personal social security number and/or personal tax ID if you have one in the provider information section under "Tax and Business Information."
- Your legal name and "Doing Business As" will be your own name as recognized by the IRS for tax purposes.
- Only report "Secretary of State" name and business ID if you personally have a business license under your name. It is not required for an individual enrollment linking to a group.
- For the EFT Information section, select Yes if you will be receiving payment through the group.
- You would not need to report owners as you are not enrolling as a business. Note, you will need to still report a managing individual. This could be yourself or anyone that can report changes on your behalf.

### Group (Billing) Provider:

Group enrollments are for businesses that will be billing for services provided by the servicing provider.

As a group/billing provider you will need to answer the following as a group applicant:

- Enter the Federal Tax ID recognized by the IRS for the business.
- Enter the Provider Legal Name as recognized by the IRS.
- Select individual/servicing provider(s) by NPI(s) to be linked to the group applicant.
- Enter EFT information and include the EFT authorization form and proof of account information in the attachments panel.
- Enter owners (individuals or parent corporations) of 5% or more direct or indirect interest, Board Members, Managing individuals and/or Agents in the entity information. Note if a parent corporation is listed, then Nevada Medicaid will need the owners, managing individuals or agents of that parent corporation. Please see Ownership and Disclosure section of the Medicaid Provider Enrollment Compendium (MPEC) for additional instructions via: <https://www.medicaid.gov/affordable-care-act/program-integrity/index.html>

### Managed Care Organization (MCO) Network Providers:

- All MCO Network providers must be enrolled in Fee-for-Service (FFS) prior to enrolling with any of the MCOs.
- MCO Network providers must use the same NPI type (Type 1 for individual enrollment or type 2 for group enrollment) and NPI they want to use to credential with the MCOs.
- Please note: MCO Network providers enrolled in Nevada Medicaid FFS are not required to accept Medicaid FFS recipients.

## Frequently Asked Questions (FAQs)

### *Which questions are required on the Application?*

All questions are required unless otherwise stated with special instructions. Required fields will be marked with an asterisk and an error message will display if a required field is needed to continue the application.

### *Where do I sign the Application and Contract?*

The provider (for an individual practice) or the provider, agent, business owner or managing employee (for a business, facility or provider group) must electronically sign the application, revalidation or change request.

### *What if I need more room to answer a question on the Application?*

If additional information is necessary to answer each question completely you can attach a document explaining the additional information to the online application.

### *What if I Need Additional Guidance to Complete the Application?*

Please review the Online Provider Enrollment User Manual for guidance on how to complete the application. The Manual can be found via the Provider Enrollment webpage <https://www.medicaid.nv.gov/providers/enroll.aspx>

## After Your Enrollment is Submitted

The application will be put into queue for review. If your enrollment application is incomplete or requires correction, Nevada Medicaid will email the contact listed on the application for corrections. Your application cannot be processed if there is missing information or corrections needed. If applications need to be returned for corrections, the processing time can take up to 2 to 3 weeks. If the application review was completed and the application approved, Nevada Medicaid will mail you a welcome letter and the completed contract. It will be sent to the mailing address you listed on the application.

## Nevada Medicaid Provider Types and Specialties

Nevada Medicaid has defined approximately 60 different medical service types, also referred to as “provider types.” The **2-digit provider type numbers are shown in the left column of Table E-2 that follows.**

Some providers provide more than one type of service. You must submit **one complete set of enrollment or revalidation documents for each provider type you are enrolling** (i.e., Provider Enrollment or Revalidation Packet and documents listed on the relevant Enrollment Checklist for that provider type).

- For example, if you supply Durable Medical Equipment (provider type 33) as well as pharmaceutical drugs (provider type 28), complete two sets of enrollment documents. The same NPI would be noted on each Application. The difference between the two Applications would be the provider type number and the attachments required per the Enrollment Checklists.

All provider types require you to identify a 3-digit specialty code on your Application.

**The 3-digit specialty code is shown next to each bulleted item in Table E-2.**

- **A specialty is required for provider types 14, 17, 19, 20, 34, 38, 48, 58, 82 and 85.** For provider type 17, a Provider Enrollment or Revalidation Packet must be submitted for each specialty being enrolled. Provider types 14, 82 and 85 **groups** may only enroll with the applicable specialty code, i.e., 814, 882 or 885. Provider type 14 also performing Day Treatment services must be enrolled with specialties 814 and 308. The provider must first enroll as a provider type 14 with specialty 814 before they are eligible to apply for and enroll with the Day Treatment Specialty 308 (See the Billing Guide for PT 14).
- To assist in Medicaid tracking, **Nevada Medicaid requires a specialty type.**
- Specialty 400 is required for providers who are enrolling only as an Ordering, Prescribing or Referring (OPR) provider.

Table E-2: Nevada Medicaid Provider Types and Specialties

Provider Type Number	Description and Specialties
10	<b>Outpatient Surgery, Hospital Based</b> <i>Specialty type code:</i> <ul style="list-style-type: none"> <li>• 910: Outpatient Surgery, Hospital Based</li> </ul>
11	<b>Hospital, Inpatient</b> <i>Specialty type code:</i> <ul style="list-style-type: none"> <li>• 911: Hospital, Inpatient</li> </ul>
12	<b>Hospital, Outpatient</b> <i>Specialty type code:</i> <ul style="list-style-type: none"> <li>• 912: Hospital, Outpatient</li> </ul>
13	<b>Psychiatric Hospital, Inpatient</b> <i>Specialty type code:</i> <ul style="list-style-type: none"> <li>• 913: Psychiatric Hospital, Inpatient</li> </ul>
14	<b>Behavioral Health Outpatient Treatment</b> <i>Specialty type codes:</i> <ul style="list-style-type: none"> <li>• 814: Behavioral Health Outpatient Treatment Group</li> <li>• 300: Qualified Mental Health Professional (QMHP)</li> <li>• 301: Qualified Mental Health Associate (QMHA)</li> <li>• 302: Qualified Behavioral Aide (QBA)</li> <li>• 305: Licensed Clinical Social Worker</li> <li>• 306: Licensed Marriage and Family Therapist</li> <li>• 307: Clinical Professional Counselor</li> <li>• 308: Day Treatment Model</li> <li>• 400: Ordering, Prescribing, Referring (OPR)</li> </ul>
15	<b>Registered Dietitian</b> <i>Specialty type code:</i> <ul style="list-style-type: none"> <li>• 915: Registered Dietitian</li> </ul>
16	<b>Intermediate Care Facilities for Individuals with Intellectual Disabilities / Public</b> <i>Specialty type code:</i> <ul style="list-style-type: none"> <li>• 916: Intermediate Care Facilities for Individuals with Intellectual Disabilities / Public</li> </ul>

Provider Type Number	Description and Specialties
17	<p><b>Special Clinic</b>  <i>Specialty type codes:</i></p> <ul style="list-style-type: none"> <li>• 166: Family Planning</li> <li>• 167: Genetic</li> <li>• 169: Licensed Birth Centers</li> <li>• 171: Methadone</li> <li>• 174: Public Health</li> <li>• 179: School Based Health Centers (SBHC)</li> <li>• 180: Rural Health Clinic</li> <li>• 181: Federally Qualified Health Center</li> <li>• 182: Indian Health Programs, Non-Tribal</li> <li>• 183: Comprehensive Outpatient Rehabilitation Facilities (CORF)</li> <li>• 195: Community Health Clinics – State Health Division</li> <li>• 196: Special Children’s Clinics</li> <li>• 197: TB Clinics</li> <li>• 198: HIV</li> <li>• 215: Substance Abuse Agency Model (SAAM)</li> </ul>
19	<p><b>Nursing Facility</b>  <i>Specialty type codes:</i></p> <ul style="list-style-type: none"> <li>• 184: Free Standing</li> <li>• 185: Hospital Based</li> <li>• 186: Veterans Facility</li> </ul>

Provider Type Number	Description and Specialties
20	<p><b>Physician, M.D., Osteopath, D.O.</b>  <i>Specialty type codes:</i></p> <ul style="list-style-type: none"> <li>• 920: Physician, M.D., Osteopath, D.O.</li> <li>• 820: Physician, M.D., Osteopath, D.O. Group</li> <li>• 102: Adolescent/Aerospace Medicine</li> <li>• 103: Allergy</li> <li>• 057: Anesthesiology</li> <li>• 104: Bronchoesophagology</li> <li>• 105: Burns</li> <li>• 106: Cardiovascular</li> <li>• 107: Cardiovascular Surgery</li> <li>• 108: Chemotherapy</li> <li>• 058: Colon/Rectal Surgery</li> <li>• 109: Critical Care</li> <li>• 059: Dermatology</li> <li>• 110: Diabetes</li> <li>• 218: Diagnostic Radiology</li> <li>• 111: Emergency Medicine</li> <li>• 112: Endocrinology</li> <li>• 053: Family Practice</li> <li>• 113: Forensic Psychiatry</li> <li>• 114: Gastroenterology</li> <li>• 056: General Practice</li> <li>• 073: General Surgery</li> <li>• 116: Geriatrics</li> <li>• 117: Gynecology</li> <li>• 118: Hand Surgery</li> <li>• 119: Head/Neck Surgery</li> <li>• 120: Hematology</li> <li>• 121: Immunology</li> <li>• 122: Infectious Disease</li> <li>• 060: Internal Medicine</li> <li>• 123: Laryngology</li> <li>• 100: Mammography</li> <li>• 124: Maternal Fetal Medicine</li> <li>• 170: Maxillofacial Surgery</li> <li>• 067: Neonatology</li> <li>• 125: Nephrology</li> <li>• 126: Neurology</li> <li>• 127: Neuropathology</li> <li>• 061: Neurosurgery</li> <li>• 128: Nuclear Medicine</li> <li>• 129: Obstetrics</li> <li>• 062: Obstetrics/Gynecology</li> <li>• 130: Occupational Medicine</li> <li>• 131: Oncology</li> <li>• 063: Ophthalmology</li> <li>• 064: Orthopedic Surgery</li> <li>• 065: Otolaryngology</li> <li>• 132: Otology</li> <li>• 133: Otorhinolaryngology</li> <li>• 134: Pain Management</li> <li>• 066: Pathology</li> <li>• 136: Pediatric Intensive Care</li> <li>• 135: Pediatric Neurology</li> <li>• 137: Pediatric Ophthalmology</li> <li>• 138: Pediatric Surgery</li> <li>• 139: Pediatrics</li> <li>• 140: Pediatrics-Allergy</li> <li>• 141: Pediatrics-Cardiology</li> <li>• 142: Pediatrics-Hematology</li> <li>• 143: Pediatrics-Oncology</li> <li>• 144: Pediatrics-Pulmonary</li> <li>• 145: Perinatal Medicine</li> <li>• 068: Physical Medicine</li> <li>• 146: Psychiatry</li> <li>• 147: Psychiatry-Child</li> <li>• 148: Public Health</li> <li>• 149: Pulmonary Diseases</li> <li>• 150: Radiation Therapy</li> <li>• 072: Radiology</li> <li>• 101: Reconstructive Surgery</li> <li>• 092: Rehabilitation</li> <li>• 151: Respiratory Diseases</li> <li>• 152: Rheumatology</li> <li>• 159: Rhinology</li> <li>• 153: Sports Medicine</li> <li>• 074: Thoracic Surgery</li> <li>• 154: Traumatic Surgery</li> <li>• 155: Urgent Care</li> <li>• 156: Urologic Surgery</li> <li>• 157: Vascular Surgery</li> <li>• 158: Vitreoretinal Surgery</li> <li>• 400: Ordering, Prescribing, Referring (OPR)</li> </ul>



Provider Type Number	Description and Specialties
21	<p><b>Podiatrist</b></p> <p><i>Specialty type codes:</i></p> <ul style="list-style-type: none"> <li>• 921: Podiatrist</li> <li>• 821: Podiatrist Group</li> <li>• 400: Ordering, Prescribing, Referring (OPR)</li> </ul>
22	<p><b>Dentist</b></p> <p><i>Specialty type codes:</i></p> <ul style="list-style-type: none"> <li>• 922: Dentist</li> <li>• 822: Dentist Group</li> <li>• 078: General Dentistry</li> <li>• 079: Orthodontia</li> <li>• 080: Oral Surgery</li> <li>• 081: Periodontics</li> <li>• 164: Emergency Dentistry</li> <li>• 165: Family Dentistry</li> <li>• 170: Maxillofacial Surgery</li> <li>• 172: Maxillofacial Prosthetics</li> <li>• 173: Pediatric Dentistry</li> <li>• 175: Prosthodontics</li> <li>• 187: Dental Hygienist</li> <li>• 400: Ordering, Prescribing, Referring (OPR)</li> </ul>
23	<p><b>Hearing Aid Dispenser &amp; Related Supplies</b></p> <p><i>Specialty type code:</i></p> <ul style="list-style-type: none"> <li>• 923: Hearing Aid Dispenser &amp; Related Supplies</li> </ul>
24	<p><b>Advanced Practice Registered Nurse (APRN)</b></p> <p><i>Specialty type codes:</i></p> <ul style="list-style-type: none"> <li>• 924: Advanced Practice Registered Nurse (APRN)</li> <li>• 824: Advanced Practice Registered Nurse (APRN) Group</li> <li>• 400: Ordering, Prescribing, Referring (OPR)</li> </ul>
25	<p><b>Optometrist</b></p> <p><i>Specialty type codes:</i></p> <ul style="list-style-type: none"> <li>• 925: Advanced Practice Registered Nurse (APRN)</li> <li>• 825: Optometrist Group</li> <li>• 400: Ordering, Prescribing, Referring (OPR)</li> </ul>
26	<p><b>Psychologist</b></p> <p><i>Specialty type codes</i></p> <ul style="list-style-type: none"> <li>• 926: Psychologist</li> <li>• 826: Psychologist Group</li> <li>• 071: Neuropsychology</li> <li>• 160: Adolescent Psychology</li> <li>• 161: Child Psychology</li> <li>• 162: Clinical Psychology</li> <li>• 400: Ordering, Prescribing, Referring (OPR)</li> </ul>
27	<p><b>Radiology &amp; Noninvasive Diagnostic Centers</b></p> <p><i>Specialty type code:</i></p> <ul style="list-style-type: none"> <li>• 927: Radiology &amp; Noninvasive Diagnostic Centers</li> </ul>

Provider Type Number	Description and Specialties
28	<b>Pharmacy</b> <i>Specialty type code:</i> <ul style="list-style-type: none"> <li>• 928: Pharmacy</li> </ul>
29	<b>Home Health Agency</b> <i>Specialty type code:</i> <ul style="list-style-type: none"> <li>• 929: Home Health Agency</li> </ul>
30	<b>Personal Care Services - Provider Agency</b> <i>Specialty type code:</i> <ul style="list-style-type: none"> <li>• 930: Personal Care Services - Provider Agency</li> </ul>
32	<b>Ambulance, Air or Ground</b> <i>Specialty type code:</i> <ul style="list-style-type: none"> <li>• 932: Ambulance, Air or Ground</li> </ul>
33	<b>Durable Medical Equipment, Prosthetics, Orthotics and Disposable Medical Supplies (DMEPOS)</b> <i>Specialty type code:</i> <ul style="list-style-type: none"> <li>• 933: Durable Medical Equipment, Prosthetics, Orthotics and Disposable Medical Supplies (DMEPOS)</li> </ul>
34	<b>Therapy</b> <i>Specialty type codes:</i> <ul style="list-style-type: none"> <li>• 834: Therapy Group</li> <li>• 027: Physical Therapy</li> <li>• 028: Occupational Therapy</li> <li>• 029: Speech Pathologist</li> <li>• 176: Respiratory Therapy</li> <li>• 219: Speech Pathologist (Language)</li> </ul>
36	<b>Chiropractor</b> <i>Specialty type codes:</i> <ul style="list-style-type: none"> <li>• 936: Chiropractor</li> <li>• 836: Chiropractor Group</li> </ul>
38	<b>Home &amp; Community Based Services Waiver – Individuals with Intellectual Disabilities and Related Conditions</b> <i>Specialty type codes:</i> <ul style="list-style-type: none"> <li>• 211: Habilitation-Community</li> <li>• 212: Habilitation-Prevocational</li> <li>• 214: Supported Environment</li> <li>• 215: Counseling Services</li> <li>• 216: Supported Living Services</li> </ul>
39	<b>Adult Day Health Care (facility)</b> <i>Specialty type code:</i> <ul style="list-style-type: none"> <li>• 939: Adult Day Health Care</li> </ul>
41	<b>Optician, Optical Business</b> <i>Specialty type code:</i> <ul style="list-style-type: none"> <li>• 941: Optician, Optical Business</li> </ul>
43	<b>Laboratory, Pathology/Clinical</b> <i>Specialty type code:</i> <ul style="list-style-type: none"> <li>• 943: Laboratory, Pathology/Clinical</li> </ul>

Provider Type Number	Description and Specialties
44	<b>Swing-bed, Acute Hospital</b> <i>Specialty type code:</i> <ul style="list-style-type: none"> <li>• 944: Swing-bed, Acute Hospital</li> </ul>
45	<b>End Stage Renal Disease (ESRD) Facility</b> <i>Specialty type code:</i> <ul style="list-style-type: none"> <li>• 945: End Stage Renal Disease (ESRD) Facility</li> </ul>
46	<b>Ambulatory Surgical Centers</b> <i>Specialty type code:</i> <ul style="list-style-type: none"> <li>• 946: Ambulatory Surgical Centers</li> </ul>
47	<b>Indian Health Program</b> <i>Specialty type code:</i> <ul style="list-style-type: none"> <li>• 947: Indian Health Program</li> </ul>
48	<b>Home and Community Based Services Waiver for the Frail Elderly</b> <i>Specialty type codes:</i> <ul style="list-style-type: none"> <li>• 039: Homemaker Services</li> <li>• 191: Respite (for individual providers only)</li> <li>• 199: Chore</li> <li>• 202: Personal Emergency Response System (PERS)</li> <li>• 208: Adult Companion Service</li> <li>• 209: Social Adult Day Care, out of home</li> </ul>
51	<b>Indian Health Services Hospital, Inpatient (Tribal)</b> <i>Specialty type code:</i> <ul style="list-style-type: none"> <li>• 951: Indian Health Services Hospital, Inpatient (Tribal)</li> </ul>
52	<b>Indian Health Services Hospital, Outpatient (Tribal)</b> <i>Specialty type code:</i> <ul style="list-style-type: none"> <li>• 952: Indian Health Services Hospital, Outpatient (Tribal)</li> </ul>
54	<b>Targeted Case Management</b> <i>Specialty type codes:</i> <ul style="list-style-type: none"> <li>• 954: Targeted Case Management</li> <li>• 237: Severely Mentally Ill</li> <li>• 238: Severely Emotionally Disturbed</li> <li>• 239: Individuals with Intellectual Disabilities and Related Conditions</li> <li>• 240: Developmentally Disabled</li> <li>• 242: Juvenile Justice</li> <li>• 243: Child Protective Services</li> </ul>
55	<b>Home Based Habilitation Services</b> <i>Specialty type code:</i> <ul style="list-style-type: none"> <li>• 955: Home Based Habilitation Services</li> </ul>
56	<b>Inpatient Rehabilitation and Long Term Acute Care (LTAC) Specialty Hospitals</b> <i>Specialty type code:</i> <ul style="list-style-type: none"> <li>• 956: Inpatient Rehabilitation and Long Term Acute Care (LTAC) Specialty Hospitals</li> </ul>

Provider Type Number	Description and Specialties
57	<p><b>Home and Community Based Services Waiver for the Elderly in Adult Residential Care</b>  <i>Specialty type code:</i></p> <ul style="list-style-type: none"> <li>957: Home and Community Based Services Waiver for the Elderly in Adult Residential Care</li> </ul>
58	<p><b>Waiver for Persons with Physical Disabilities (“PD”)</b>  <i>Specialty type codes:</i></p> <p>Specialties that <u>must</u> be performed <u>by an individual provider</u> OR agency are:</p> <ul style="list-style-type: none"> <li>191: Respite Care</li> </ul> <p>Specialties that <u>must</u> be performed <u>through a provider agency</u> are:</p> <ul style="list-style-type: none"> <li>039: Homemaker Services</li> <li>048: Assisted Living</li> <li>199: Chore</li> <li>200: Environmental Accessibility Adaptations</li> <li>202: Personal Emergency Response System (PERS)</li> <li>204: Home Delivered Meals</li> <li>205: Specialized Medical Equipment/Supplies</li> </ul> <p>Specialties that <u>may</u> be performed <u>by an individual provider</u> OR agency are:</p> <ul style="list-style-type: none"> <li>189: Attendant Services</li> </ul>
59	<p><b>Home and Community Based Services Waiver for the Elderly – Augmented Personal Care Services</b>  <i>Specialty type code:</i></p> <ul style="list-style-type: none"> <li>959: Home and Community Based Services Waiver for the Elderly – Augmented Personal Care Services</li> </ul>
60	<p><b>School Based</b>  <i>Specialty type code:</i></p> <ul style="list-style-type: none"> <li>960: School Based</li> </ul>
63	<p><b>Residential Treatment Center (RTC)</b>  <i>Specialty type code:</i></p> <ul style="list-style-type: none"> <li>963: Residential Treatment Center (RTC)</li> </ul>
64	<p><b>Hospice</b>  <i>Specialty type code:</i></p> <ul style="list-style-type: none"> <li>964: Hospice</li> </ul>
65	<p><b>Hospice, Long Term Care</b>  <i>Specialty type code:</i></p> <ul style="list-style-type: none"> <li>965: Hospice, Long Term Care</li> </ul>
68	<p><b>Intermediate Care Facilities for Individuals with Intellectual Disabilities / Private</b>  <i>Specialty type code:</i></p> <ul style="list-style-type: none"> <li>968: Intermediate Care Facilities for Individuals with Intellectual Disabilities / Private</li> </ul>
72	<p><b>Nurse Anesthetist</b>  <i>Specialty type codes:</i></p> <ul style="list-style-type: none"> <li>972: Nurse Anesthetist</li> <li>872: Nurse Anesthetist Group</li> </ul>
74	<p><b>Nurse Midwife</b>  <i>Specialty type codes:</i></p> <ul style="list-style-type: none"> <li>974: Nurse Midwife</li> <li>874: Nurse Midwife Group</li> <li>400: Ordering, Prescribing, Referring (OPR)</li> </ul>

Provider Type Number	Description and Specialties
75	<b>Critical Access Hospital (CAH), Inpatient</b> <i>Specialty type code:</i> <ul style="list-style-type: none"> <li>• 975: Critical Access Hospital (CAH), Inpatient</li> </ul>
76	<b>Audiologist</b> <i>Specialty type codes:</i> <ul style="list-style-type: none"> <li>• 976: Audiologist</li> <li>• 876: Audiologist Group</li> <li>• 245: Hearing Aid Dispenser and Related Supplies</li> </ul>
77	<b>Physician's Assistant (PA/PA-C)</b> <i>Specialty type codes:</i> <ul style="list-style-type: none"> <li>• 977: Physician's Assistant</li> <li>• 877: Physician's Assistant Group</li> <li>• 400: Ordering, Prescribing, Referring (OPR)</li> </ul>
78	<b>Indian Health Services Hospital, Inpatient (Non-Tribal)</b> <i>Specialty type code:</i> <ul style="list-style-type: none"> <li>• 978: Indian Health Services Hospital, Inpatient (Non-Tribal)</li> </ul>
79	<b>Indian Health Services Hospital, Outpatient (Non-Tribal)</b> <i>Specialty type code:</i> <ul style="list-style-type: none"> <li>• 979: Indian Health Services Hospital, Outpatient (Non-Tribal)</li> </ul>
81	<b>Hospital Based End Stage Renal Disease (ESRD) Provider</b> <i>Specialty type code:</i> <ul style="list-style-type: none"> <li>• 981: Hospital Based End Stage Renal Disease (ESRD) Provider</li> </ul>
82	<b>Behavioral Health Rehabilitative Treatment</b> <i>Specialty type codes:</i> <ul style="list-style-type: none"> <li>• 882: Behavioral Health Rehabilitative Treatment Group</li> <li>• 300: Qualified Mental Health Professional</li> <li>• 301: Qualified Mental Health Associate</li> <li>• 302: Qualified Behavioral Aide</li> </ul>
83	<b>Personal Care Services - Intermediary Service Organization</b> <i>Specialty type code:</i> <ul style="list-style-type: none"> <li>• 983: Personal Care Services - Intermediary Service Organization</li> </ul>
85	<b>Applied Behavior Analysis (ABA)</b> <i>Specialty type codes:</i> <ul style="list-style-type: none"> <li>• 885: Applied Behavior Analysis (ABA) Entity/Agency/Group</li> <li>• 310: Licensed and Board Certified Behavior Analyst (BCBA)</li> <li>• 311: Psychologist</li> <li>• 312: Licensed and Board Certified Assistant Behavior Analyst (BCaBA)</li> <li>• 314: Registered Behavior Technician (RBT)</li> </ul>