



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 as a Nevada Medicaid provider. Gainwell Technologies 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 (select “Provider Enrollment” from the “Providers” menu).

Online Provider Enrollment Portal

The Nevada Medicaid and Nevada Check Up Online Provider Enrollment (OPE) 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 Electronic Verification System \(EVS\)](#) 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.

Electronic Visit Verification (EVV) System

Provider types 29 (Home Health Agency), 30 (Personal Care Services - Provider Agency), 48 (Home and Community Based Waiver for the Frail Elderly), 58 (Waiver for Persons with Physical Disabilities (PD)) and 83 (Personal Care Services - Intermediary Service Organization) are required to use an Electronic Visit Verification (EVV) system to electronically document service delivery for Home Health Care Services (HHCS), Personal Care Services (PCS) and certain Home and Community Based Waiver (HCBW) services requiring an in-home visit. Nevada Medicaid utilizes the open-system model, procuring a vendor that providers can choose to utilize, but also allows providers with an existing EVV system to utilize their own system.

All HHCS, PCS and Waiver service claims must be billed through Nevada’s EVV System; this includes claims for services documented using the provider’s existing EVV system.

EVV system training is required prior to providing HHCS, PCS and/or waiver services to Nevada Medicaid recipients. Provider EVV system access credentials are issued by the EVV vendor and will only be granted after successful completion of the required training.

Providers can access the Nevada Medicaid EVV Project site by clicking on <https://Sandata.zendesk.com/hc/en-us>. For EVV training, credentials and general EVV system inquiries, send an email to NVEVV@dncfp.nv.gov.

Provider agencies and Personal Care Attendants (PCAs) providing PCS and Waiver services to Nevada Medicaid recipients are required to have a valid National Provider Identifier (NPI) issued by the National Plan and Provider Enumeration System (NPPES), which must be documented in the EVV system.

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 (OPE) Portal and electronically signed contract.
- Valid NPI issued by NPPES.
- 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 OPE Portal and electronically signed contract.
- Valid NPI issued by NPPES.
- 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. Provider revalidation notices are emailed and mailed to providers 120, 90, 60 and 20 days prior to their revalidation due date. Please ensure Nevada Medicaid has your current email and mailing address contact information on file. 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 Electronic Data Interchange (EDI) Program.

Provider types 29, 30, 48, 58 and 83 who have selected to use the state EVV system called “Sandata Nevada” to document and bill for services provided must set up and authorize Sandata to submit their 837 EDI files and receive their EDI 835 files. In order to set up this authorization, a provider must login to the Provider Web Portal and “Add a Trading Partner.”

Providers are referred to [Electronic Verification System \(EVS\) User Manual](#) Chapter 1: Getting Started for instructions on authorizing a Trading Partner to submit transactions on their behalf.

For information regarding Trading Partner enrollment visit www.medicaid.nv.gov (select “Electronic Claims/EDI” from the “Providers” menu). **If you have any questions**, please call the Nevada Medicaid 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@gainwelltechnologies.com.

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/emergency enrollment will need to be submitted through the OPE 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”). Out-of-state enrollments may be temporary (urgent/emergent - 6 months), full enrollment or enrollment for Medicare crossover claims only. All enrollments are at the discretion of DHCFP.

Once urgent/emergency 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.

Providers (individuals/groups) located in a catchment area are required to submit a Group or Individual provider enrollment application through the OPE Portal. Catchment area providers cannot enroll as an urgent/emergency provider.

Table E-1: Nevada Medicaid Catchment Areas

Catchment Areas	
State	Cities/Zip Codes
Arizona	Bullhead City: 86426, 86427, 86429, 86430, 86439, 86442, 86446 Kingman: 86401, 86402, 86411, 86412, 86413, 86437, 86445 Littlefield: 86432
California	Bishop: 93512, 93514, 93515 Bridgeport: 93517 Davis: 95616, 95617, 95618 Loyalton: 96118 Markleeville: 96120 Needles: 92363 Sacramento: 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 South Lake Tahoe: 96150, 96151, 96152, 96154, 96155, 96156, 96157, 96158 Susanville: 96127, 96130 Truckee: 96160, 96161, 96162
Idaho	Boise: 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 Mountain Home: 83647 Twin Falls: 83301, 83302, 83303

Utah	Cedar City: 84720, 84721 Enterprise: 84725 Orem: 84057, 84058, 84059, 84097 Provo: 84601, 84602, 84603, 84604, 84605, 84606 Salt Lake City: 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 St. George: 84770, 84771, 84790, 84791 Tooele: 84074 Wendover: 84083 West Jordan: 84084
------	--

Email Address

Providers may submit their license updates and voluntary terminations ([form FA-34](#)) via email. The email address is: nv.providerapps@gainwelltechnologies.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://dhcfnv.gov>. Specific enrollment requirements are located in MSM Chapter 100.

Billing Type

Billing Type is a required field on the provider enrollment application for all applicants and providers or will be automatically defaulted. Select Biller, Performer or Both, depending on the appropriate billing structure.

Biller:

Submits claims and receives payments. If Biller is selected, provider may not be listed as Performer.

- A group or organization which submits claims and receives payments for services rendered by qualified enrolled providers linked to the Biller as of the date the services are rendered.

Performer:

Performs services.

- An enrolled provider linked to a Biller. The Biller submits claims and receives payment for services rendered by the Performer within scope of practice. A Performer may not submit claims and/or receive payments directly.

Both:

Receives payments as both Biller and Performer of services rendered.

- A provider may enroll as Both (Biller and Performer) based on provider type and specialty, as well as scope of practice.
- Provider groups that utilize their group NPI as both the billing and rendering provider on a claim should select a billing type of Both.

The Billing Type selected will not override existing restrictions and criteria necessary to submit claims and receive payments for providers.

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
- Doula Group – provider type 90
- 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
- Registered Dietitian Group – provider type 15
- Substance Use Treatment Groups – provider type 93
- 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 (5) 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.

Provider Enrollment Linkage Restrictions

The following table is a guide for **Individual providers** and the groups they can link to.

Individual Provider Type	OPE Requires Linkage	Group Provider Type that Individuals can be linked to
14 - Behavioral Health Outpatient Treatment		
14 - Behavioral Health Outpatient Treatment (Individual) specialties 300 QMHP, 301 QMHA, 302 QBA	Yes	14 - Behavioral Health Outpatient Treatment (specialties 814, 308) 82 - Behavioral Health Rehabilitative Treatment (specialty 882)

Individual Provider Type	OPE Requires Linkage	Group Provider Type that Individuals can be linked to
14 - Behavioral Health Outpatient Treatment (Individual) specialties 305 LCSW, 306 LMFT, 307 CPC	No	14 - Behavioral Health Outpatient Treatment (specialties 814, 308) 20 - Physician, M.D., Osteopath, D.O. 24- Advanced Practice Registered Nurses (specialties 305, 306 and 307 only) 34 - Therapist - only for PT 34 specialty 028 26 - Psychologist Group 77 - Physician's Assistant (specialties 305 and 307 only) 82 - Behavioral Health Rehabilitative Treatment (specialty 882) 93 - Substance Use Treatment (specialties 704, 707 and 708)
15 - Registered Dietitian		
15 - Registered Dietitian	No	15 - Registered Dietitian 20 - Physician, M.D., Osteopath, D.O. 24 - Advanced Practice Registered Nurses 74 - Nurse Midwife 77 - Physician's Assistant
20 - Physician, M.D., Osteopath, D.O. (Individual)		
20 - Physician, M.D., Osteopath, D.O. (Individual)	No	14 - Behavioral Health Outpatient Treatment (specialty 814) with specialty 308 15 - Registered Dietitian 20 - Physician, M.D., Osteopath, D.O. 21 - Podiatry 22 - Dentist 24 - Advanced Practice Registered Nurses 25 - Optometrist 26 - Psychologist 34 - Therapist 36 - Chiropractor 74 - Nurse Midwife 76 - Audiologist 77 - Physician's Assistant 82 - Behavioral Health Rehabilitative Treatment 90 - Doula 93 - Substance Use Treatment (specialties 704, 707 and 708)
21 - Podiatrist		
21 - Podiatrist	No	20 - Physician, M.D., Osteopath, D.O. 21 - Podiatry 24 - Advanced Practice Registered Nurses 72 - Nurse Anesthetist 74 - Nurse Midwife 77 - Physician's Assistant

Individual Provider Type	OPE Requires Linkage	Group Provider Type that Individuals can be linked to
22 - Dentist		
22 - Dentist	No	20 - Physician, M.D., Osteopath, D.O. 22 - Dentist
24 - Advanced Practice Registered Nurses		
24 - Advanced Practice Registered Nurses	No	14 - Behavioral Health Outpatient Treatment 15 - Registered Dietitian 20 - Physician, M.D., Osteopath, D.O. 21 - Podiatry 24 - Advanced Practice Registered Nurses 25 - Optometrist 26 Psychologist (specialty 826) 34 - Therapist 36 - Chiropractor 72 - Nurse Anesthetist 74 - Nurse Midwife 76 - Audiologist 77 - Physician's Assistant 90 - Doula 82 - Behavioral Health Rehabilitative Treatment 93 - Substance Use Treatment (specialties 704, 707 and 708)
25 - Optometrist		
25 - Optometrist	No	20 - Physician, M.D., Osteopath, D.O. 21 - Podiatry, Specialty 821 24 - Advanced Practice Registered Nurses 25 - Optometrist 74 - Nurse Midwife 77 - Physician's Assistant
26 - Psychologist (specialties 160, 161, 162, 071, 926)		
26 - Psychologist (specialties 160, 161, 162, 071, 926)	No	14 - Behavioral Health Outpatient Treatment (specialty 814) 20 - Physician, M.D., Osteopath, D.O. 24 - Advanced Practice Registered Nurses 26 - Psychologist 77 - Physician's Assistant 82 - Behavioral Health Rehabilitative Treatment specialty 882
26 - Psychologist (specialties 246, 247, 248)		
26 - Psychologist (specialties 246, 247, 248)	Yes	26 - Psychologist (specialty 826)
32 specialty 249 ONLY - Community Paramedicine		
32 specialty 249 ONLY - Community Paramedicine	Yes	32 specialty 249 - Community Paramedicine

Individual Provider Type	OPE Requires Linkage	Group Provider Type that Individuals can be linked to
34 - Therapy		
34 Therapist Specialties: 27 Physical Therapy, 28 Occupational Therapy, 29 Speech Pathologist, 176 Respiratory Therapy, 219 Speech Pathologist (Language)	No	14 - Behavioral Health Outpatient Treatment (specialties 814, 308) 20- Physician, M.D., Osteopath, D.O. 24 - Advanced Practice Registered Nurses 34 - Therapist Group 72 - Nurse Anesthetist (only PT 34 specialty 28) 74 - Nurse Midwife, 76 - Audiologist (PT 34 specialty 219) 77 - Physician's Assistant 34 - Therapist (specialty 028) can link to 14/814, 26/826 and 14/308
36 - Chiropractor		
36 - Chiropractor	No	20 - Physician, M.D., Osteopath, D.O. (Group) 24 - Advanced Practice Registered Nurses 36- Chiropractor 74 - Nurse Midwife 77 -Physician's Assistant
38 - Home & Community Based Waiver - Individuals with Intellectual Disabilities and Related Conditions		
38 - Home & Community Based Waiver - Individuals with Intellectual Disabilities and Related Conditions	Yes	Can only link to PT 38 ASD NPIs
72 - Nurse Anesthetist		
72 - Nurse Anesthetist	No	15 - Registered Dietitian 20 - Physician, M.D., Osteopath, D.O. 21 - Podiatrist 24 -Advance Practice Registered Nurse 25 - Optometrist 26 - Psychologist 34 - Therapist, except 34/027, 34/029, 34/176, 34/219 36 - Chiropractor 72 - Nurse Anesthetist 74 - Nurse Midwife 76 - Audiologist 77 - Physician's Assistant (PA/PA-C) 90 – Doula

Individual Provider Type	OPE Requires Linkage	Group Provider Type that Individuals can be linked to
74 - Nurse Midwife		
74 - Nurse Midwife	No	15 - Registered Dietitian 20 - Physician, M.D., Osteopath, D.O. 21 - Podiatry, 24 - Advanced Practice Registered Nurses 25 - Optometrist 26 - Psychologist 34 - Therapist 36 - Chiropractor 72 - Nurse Anesthetist 74 - Nurse Midwife 76 - Audiologist 77 - Physician's Assistant 90 Doula 93 - Substance Use Treatment (specialties 704, 707 and 708)
76 - Audiologist		
76 - Audiologist	No	20 - Physician, M.D., Osteopath, D.O. 24 - Advanced Practice Registered Nurses, 34 - Therapy (specialty 219, 34/027 linked to Individual PT 76/976, 34/027 may link to Individual 76/876, 34/834 may link to 76/976) 76 - Audiologist 77 - Physician's Assistant
77 - Physician's Assistant		
77 - Physician's Assistant	No	14 - Behavioral Health Outpatient Treatment (specialty 814) 15 - Registered Dietitian 20 - Physician, M.D., Osteopath, D.O. 21 - Podiatry 24 - Advanced Practice Registered Nurses 25 - Optometrist 26 - Psychologist 34 - Therapist 36 - Chiropractor 72 - Nurse Anesthetist 74 - Nurse Midwife 76 - Audiologist 77 - Physician's Assistant 90 - Doula 93 - Substance Use Treatment (specialties 704, 707 and 708)

Individual Provider Type	OPE Requires Linkage	Group Provider Type that Individuals can be linked to
82 - Behavioral Health Rehabilitative Treatment		
82 - Behavioral Health Rehabilitative Treatment specialties 300, 301, 302	Yes	14 - Behavioral Health Outpatient Treatment specialty 814 82 - Behavioral Health Rehabilitative Treatment specialty 882
85 - Applied Behavior Analysis (ABA)		
85 - Applied Behavior Analysis (ABA) (Individual) specialties 310 (BCBA), 311 Psychologist, 312 (BCaBA), 314 (RBT)	No	85 - Applied Behavior Analysis (ABA) Entity/Agency/Group
89 - Community Health Worker (CHW)		
89 - Community Health Worker (CHW)	Yes	14 - Behavioral Health Outpatient Treatment (effective July 15, 2024) 20 - Physician, M.D., Osteopath, D.O. 24 - Advanced Practice Registered Nurses 77 - Physician's Assistant 82 - Behavioral Health Rehabilitative Treatment (effective July 15, 2024)
90 - Doula		
90 - Doula	Yes	20 - Physician, M.D., Osteopath, D.O. 24 - Advanced Practice Registered Nurses 74 - Nurse Midwife 77 - Physician's Assistant 90 - Doula
91 - Pharmacist		
91 - Pharmacist	No	14 - Behavioral Health Outpatient Treatment (specialty 814) 20 - Physician, M.D., Osteopath, D.O. 24 - Advanced Practice Registered Nurses 74 - Nurse Midwife 77 - Physician's Assistant 93 - Substance Use Treatment (specialties 704, 707 and 708)
93 - Substance Use Treatment specialties 701, 702, 703, 705, 706 and 709		
93 - Substance Use Treatment specialties 701, 702, 703, 705, 706 and 709	Yes	93 - Substance Use Treatment
94 - Medicare Cost Sharing		
94 - Medicare Cost Sharing	No	No restrictions needed

The following table is a guide for **Group providers** and the Individuals who can be linked to their groups.

Group Provider Type	OPE Requires Linkage	Individual Provider Types that can be linked to group
14 - Behavioral Health Outpatient Treatment		
14 - Behavioral Health Outpatient Treatment specialty 814	Yes	14 - Behavioral Health Outpatient Treatment specialties 300 QMHP, 301 QMHA, 302 QBA, 305, 306, 307 20 - Physician, M.D., Osteopath, D.O. 24 - Advanced Practice Registered Nurses 26 - Psychologist 34 - Therapist, specialty 028 74 - Nurse Midwife 77 - Physician's Assistant 82 - Behavioral Health Rehabilitative Treatment (specialties 300, 301, 302) 91 - Pharmacist
15 - Registered Dietitian		
15 - Registered Dietitian	No	15 - Registered Dietitian 20 - Physician, M.D., Osteopath, D.O. 24 - Advanced Practice Registered Nurses 74 - Nurse Midwife 77 - Physician's Assistant
20 - Physician, M.D., Osteopath, D.O. (Individual)		
20 - Physician, M.D., Osteopath, D.O. (Individual)	Yes	14 - Behavioral Health Outpatient Treatment (Should only be specialties 305, 306, 307) 15 - Registered Dietitian, 20 - Physician, M.D., Osteopath, D.O. 21 - Podiatry 22 - Dentist 24 - Advanced Practice Registered Nurses 25 - Optometrist 26 - Psychologist, (Only specialties 160, 161, 162, 071, 926) 34 - Therapist 36 - Chiropractor 72 - Nurse Anesthetist 74 - Nurse Midwife 76 - Audiologist 77 - Physician's Assistant 89 Community Health Worker (CHW) 90 - Doula 91 - Pharmacist

Group Provider Type	OPE Requires Linkage	Individual Provider Types that can be linked to group
21 - Podiatrist		
21 - Podiatrist	Yes	20 - Physician, M.D., Osteopath, D.O. 21 - Podiatry 24 - Advanced Practice Registered Nurses 72 - Nurse Anesthetist 74 - Nurse Midwife 77 - Physician's Assistant
22 - Dentist		
22 - Dentist	Yes	22 - Dentist
24 - Advanced Practice Registered Nurses		
24 - Advanced Practice Registered Nurses	Yes	14 - Behavioral Health Outpatient Treatment (specialties 305, 306, 307) 15 - Registered Dietitian, 20 - Physician, M.D., Osteopath, D.O. 21 - Podiatry 24 - Advanced Practice Registered Nurses 25 - Optometrist 26 - Psychologist, only (specialties 160, 161, 162, 071, 926) 34 - Therapist 36 - Chiropractor 72 - Nurse Anesthetist 74 - Nurse Midwife 76 - Audiologist 77 - Physician's Assistant 82 - Behavioral Health Rehabilitative Treatment 89 - Community Health Worker 90 - Doula <u>91 - Pharmacist</u>
25 - Optometrist		
25 - Optometrist	Yes	20 - Physician, M.D., Osteopath, D.O. 24 - Advanced Practice Registered Nurses 25 - Optometrist 74 - Nurse Midwife 77 - Physician's Assistant
26 - Psychologist (specialties 160, 071, 161, 162, 826)		
26 - Psychologist	Yes	14 - Behavioral Health Outpatient Treatment specialties 305 and 306 24 - Advanced Practice Registered Nurses, specialty 023 26 - Psychologist 74 - Nurse Midwife linked to PT 26 specialties 926, 071, 060, 061 and 062 400 – Ordering, Prescribing, Referring (OPR)

Group Provider Type	OPE Requires Linkage	Individual Provider Types that can be linked to group
32 specialty 249 ONLY - Community Paramedicine		
32 specialty 249 ONLY - Community Paramedicine	Yes	32 Spec. 249 - Community Paramedicine
34 - Therapy		
34 - Therapist Group	Yes	14 - specialties 305, 306, 307 but only to PT 34 specialty 028 20 - Physician, M.D., Osteopath, D.O. 24 - Advanced Practice Registered Nurses 34 - Therapist Group 72 - Nurse Anesthetist 74 - Nurse Midwife 76 - Audiologist (with specialty 219, Allow 34/027 to link to individual 76/ 976 and 76/876), 76/976 may link to 34/834 77 - Physician's Assistant
36 - Chiropractor		
36 - Chiropractor	Yes	20 - Physician, M.D., Osteopath, D.O. 24 - Advanced Practice Registered Nurses 36 - Chiropractor 74 - Nurse Midwife 77 - Physician's Assistant
38 - Home & Community Based Waiver - Individuals with Intellectual Disabilities and Related Conditions		
38 - Home & Community Based Waiver - Individuals with Intellectual Disabilities and Related Conditions	Yes	Can only link to PT 38 ADSD NPIs
72 - Nurse Anesthetist		
72 - Nurse Anesthetist	Yes	20 - Physician, M.D., Osteopath, D.O. 21 - Podiatry 24 - Advanced Practice Registered Nurses 72 - Nurse Anesthetist 74 - Nurse Midwife 77 - Physician's Assistant

Group Provider Type	OPE Requires Linkage	Individual Provider Types that can be linked to group
74 - Nurse Midwife		
74 - Nurse Midwife	Yes	15 - Registered Dietitian 20 - Physician, M.D., Osteopath, D.O. 21 - Podiatry 24 - Advanced Practice Registered Nurses 25 - Optometrist 26 - Psychologist, (Only specialties 160, 161, 162, 071, 926) 34 - Therapist 36 - Chiropractor 72 - Nurse Anesthetist 74 - Nurse Midwife 77 - Physician's Assistant 90 - Doula 91 - Pharmacist
76 - Audiologist		
76 - Audiologist	Yes	20 - Physician, M.D., Osteopath, D.O. 24 - Advanced Practice Registered Nurses 34 - Therapy (specialty 219) 74 - Nurse Midwife 76 - Audiologist 77 - Physician's Assistant
77 - Physician's Assistant		
77 - Physician's Assistant	Yes	14 - Behavioral Health Outpatient Treatment (specialties 305, 306, 307) 15 - Registered Dietitian 20 - Physician, M.D., Osteopath, D.O. 21 - Podiatry 24 - Advanced Practice Registered Nurses 25 - Optometrist 26 - Psychologist, (only specialties 160, 161, 162, 071, 926) 34 - Therapist 36 - Chiropractor 72 - Nurse Anesthetist 74 - Nurse Midwife 76 - Audiologist 77 - Physician's Assistant 89 - Community Health Worker 90 - Doula 91 - Pharmacist

Group Provider Type	OPE Requires Linkage	Individual Provider Types that can be linked to group
82 - Behavioral Health Rehabilitative Treatment		
82 - Behavioral Health Rehabilitative Treatment	Yes	14 - (Individual) specialties 301 QMHA, 300 QMHP 302 QBA, 305, 306, 307 PT 82 specialties 300, 301, 302 20 - Physician, M.D., Osteopath, D.O., specialties 146, and 920 24 - Advance Practice Registered Nurses allow when Group PT 82 specialty 882 is linked to Individual PT 24 specialty 924 and Group 82 specialty 882 link to Individual 24 specialty 023 26 - Psychologist 82 specialty 882 linked to 26 specialty 162
85 - Applied Behavior Analysis (ABA)		
85 - Applied Behavior Analysis (ABA) (specialties 885, 310 through 314)	Yes	85 can only link to 85
90 - Doula		
90 - Doula	Yes	90 - Doula
93 - Substance Use Treatment		
93 - Substance Use Treatment	Yes	14 - Behavioral Health Outpatient Treatment (specialties 305, 306, 307) 20 - Physician, M.D., Osteopath, D.O. 24 - Advanced Practice Registered Nurses 26 - Psychologist 74 - Nurse Midwife 77 - Physician's Assistant 91 - Pharmacists 93 - Substance Use Treatment
94 - Medicare Cost Sharing		
94 - Medicare Cost Sharing	No	No restrictions needed

Reporting Business Information

Individual (Servicing) Provider:

Individual health care providers, including those with a Sole Proprietor business license type, must obtain a Type 1 - Individual NPI. Individuals must enroll with their individual 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, unless permitted to stand-alone per request and licensure status.

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 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.
- If you are a Sole Proprietor per Nevada Revised Statute (NRS) 76, NRS 616A, and Nevada Secretary of State (SOS) NT7 rules, you must provide your Sole Proprietor business license under your name. When enrolling and selecting "Sole Proprietor" as the individual enrollment type, this must match the business structure reported to the Nevada SOS and comply with NRS.
- For the Electronic Funds Transfer (EFT) Information section: If you will be receiving direct payments from Nevada Medicaid, you must provide your individual EFT information. If you will only be receiving payments through a group, indicate that in the EFT section and do not enter any EFT information.
- Ownership is not required if you are linking to a group.
- Individuals enrolling as a Sole Proprietor must report ownership as well as a managing individual and/or agent/authorized representative. This could be yourself or anyone that can report changes on your behalf.

Group (Billing) Provider:

Provider Groups, Single Member Limited Liability Companies (LLCs) and Incorporated Individuals must obtain a Type 2 - Organization NPI. Group enrollments are for businesses that will be billing for services provided by the servicing provider. When enrolling with Nevada Medicaid, any entity that is operating as an LLC or Corporation must separately submit a group enrollment for the business and an individual enrollment for the provider(s) to link to the group.

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 five (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 the 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>

How far back can I enroll?

Enrollment may be backdated for up to six (6) months from the application submission date. If retroactive enrollment is requested, the applicant shall provide a letter of justification and list of claims associated with the retroactive time period. Please note that this does not extend the timely filing policy set forth in Medicaid Services Manual Chapter 100 Medicaid Program. Please allow up to 30 days for administrative processing of a complete enrollment request.

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. Once necessary corrections have been made, please allow thirty (30) days for administrative processing. Once the application review is completed and if the application is 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. You may also download your enrollment letters in the EVS Portal. Please see the [EVS User Manual Chapter 10 Report Download](#) for instructions.

Nevada Medicaid Provider Types and Specialties

Nevada Medicaid has defined approximately 65 different medical service types, also referred to as “provider types (PTs).” The **2-digit PT 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 PT you are enrolling** (i.e., provider enrollment or revalidation application and the documents listed on the relevant Enrollment Checklist for that provider type).

- For example, if you supply Durable Medical Equipment (PT 33) as well as pharmaceutical drugs (PT 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 PT number and the attachments required per the Enrollment Checklists.

A specialty is required for all provider types. **The 3-digit specialty code is shown next to each bulleted item in Table E-2.**

- For PT 17, a provider enrollment or revalidation must be submitted for each specialty being enrolled.
- PT 14, 82 and 85 **groups** may only enroll with the applicable specialty code, i.e., 814, 882 or 885. PT 14 also performing Day Treatment services must be enrolled with specialties 814 and 308. The provider must

first enroll as a PT 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](#)).

- Specialty 400 is required for providers who are enrolling only as an Ordering, Prescribing or Referring (OPR) provider. Providers enrolled as an OPR provider may not be reported as a rendering or attending provider on Nevada Medicaid claims.
- The use of an EVV system is required by PT 29, 30 specialty 930; PT 48 specialties 039, 191, 199, 208; PT 58 specialties 039, 189, 191, 199; and PT 83 specialty 983.

Table E-2: Nevada Medicaid Provider Types and Specialties

Provider Type Number	Description and Specialties
10	Outpatient Surgery, Hospital Based <i>Specialty type code:</i> <ul style="list-style-type: none"> • 910: Outpatient Surgery, Hospital Based
11	Hospital, Inpatient <i>Specialty type code:</i> <ul style="list-style-type: none"> • 911: Hospital, Inpatient
12	Hospital, Outpatient <i>Specialty type code:</i> <ul style="list-style-type: none"> • 912: Hospital, Outpatient • 250: Crisis Stabilization Center
13	Psychiatric Hospital, Inpatient <i>Specialty type code:</i> <ul style="list-style-type: none"> • 913: Psychiatric Hospital, Inpatient
14	Behavioral Health Outpatient Treatment <i>Specialty type codes:</i> <ul style="list-style-type: none"> • 814: Behavioral Health Outpatient Treatment Group • 300: Qualified Mental Health Professional (QMHP) • 301: Qualified Mental Health Associate (QMHA) • 302: Qualified Behavioral Aide (QBA) • 305: Licensed Clinical Social Worker • 306: Licensed Marriage and Family Therapist • 307: Clinical Professional Counselor • 308: Day Treatment Model • 400: Ordering, Prescribing, Referring (OPR)
15	Registered Dietitian <i>Specialty type code:</i> <ul style="list-style-type: none"> • 915: Registered Dietitian
16	Intermediate Care Facilities for Individuals with Intellectual Disabilities / Public <i>Specialty type code:</i> <ul style="list-style-type: none"> • 916: Intermediate Care Facilities for Individuals with Intellectual Disabilities / Public

Provider Type Number	Description and Specialties
17	<p>Special Clinic</p> <p><i>Specialty type codes:</i></p> <ul style="list-style-type: none"> • 166: Family Planning • 167: Genetic • 169: Licensed Birth Centers • 174: Public Health • 179: School Based Health Centers (SBHC) • 180: Rural Health Clinic • 181: Federally Qualified Health Center • 182: Indian Health Programs, Non-Tribal • 183: Comprehensive Outpatient Rehabilitation Facilities (CORF) • 188: Certified Community Behavioral Health Center (CCBHC) • 195: Community Health Clinics – State Health Division • 196: Special Children’s Clinics • 197: TB Clinics • 198: HIV
19	<p>Nursing Facility</p> <p><i>Specialty type codes:</i></p> <ul style="list-style-type: none"> • 184: Free Standing • 185: Hospital Based • 186: Veterans Facility

Physician, M.D., Osteopath, D.O.*Specialty type codes:*

- 920: Physician, M.D., Osteopath, D.O.
- 820: Physician, M.D., Osteopath, D.O. Group
- 102: Adolescent/Aerospace Medicine
- 103: Allergy
- 057: Anesthesiology
- 104: Bronchoesophagology
- 105: Burns
- 106: Cardiovascular
- 107: Cardiovascular Surgery
- 108: Chemotherapy
- 058: Colon/Rectal Surgery
- 109: Critical Care
- 059: Dermatology
- 110: Diabetes
- 218: Diagnostic Radiology
- 111: Emergency Medicine
- 112: Endocrinology
- 053: Family Practice
- 113: Forensic Psychiatry
- 114: Gastroenterology
- 056: General Practice
- 073: General Surgery
- 116: Geriatrics
- 117: Gynecology
- 118: Hand Surgery
- 119: Head/Neck Surgery
- 120: Hematology
- 121: Immunology
- 122: Infectious Disease
- 060: Internal Medicine
- 123: Laryngology
- 100: Mammography
- 124: Maternal Fetal Medicine
- 170: Maxillofacial Surgery
- 067: Neonatology
- 125: Nephrology
- 126: Neurology
- 127: Neuropathology
- 061: Neurosurgery
- 128: Nuclear Medicine
- 129: Obstetrics
- 062: Obstetrics/Gynecology
- 130: Occupational Medicine
- 131: Oncology
- 063: Ophthalmology
- 064: Orthopedic Surgery
- 065: Otolaryngology
- 132: Otology
- 133: Otorhinolaryngology
- 134: Pain Management
- 066: Pathology
- 136: Pediatric Intensive Care
- 135: Pediatric Neurology
- 137: Pediatric Ophthalmology
- 138: Pediatric Surgery
- 139: Pediatrics
- 140: Pediatrics-Allergy
- 141: Pediatrics-Cardiology
- 142: Pediatrics-Hematology
- 143: Pediatrics-Oncology
- 144: Pediatrics-Pulmonary
- 145: Perinatal Medicine
- 068: Physical Medicine
- 146: Psychiatry
- 147: Psychiatry-Child
- 148: Public Health
- 149: Pulmonary Diseases
- 150: Radiation Therapy
- 072: Radiology
- 101: Reconstructive Surgery
- 092: Rehabilitation
- 151: Respiratory Diseases
- 152: Rheumatology
- 159: Rhinology
- 153: Sports Medicine
- 074: Thoracic Surgery
- 154: Traumatic Surgery
- 155: Urgent Care
- 156: Urologic Surgery
- 157: Vascular Surgery
- 158: Vitreoretinal Surgery
- 400: Ordering, Prescribing, Referring (OPR)

21	<p>Podiatrist</p> <p><i>Specialty type codes:</i></p> <ul style="list-style-type: none"> • 921: Podiatrist • 821: Podiatrist Group • 400: Ordering, Prescribing, Referring (OPR)
22	<p>Dentist</p> <p><i>Specialty type codes:</i></p> <ul style="list-style-type: none"> • 922: Dentist • 822: Dentist Group • 078: General Dentistry • 079: Orthodontia • 080: Oral Surgery • 081: Periodontics • 083: Dental Therapist • 164: Emergency Dentistry • 165: Family Dentistry • 170: Maxillofacial Surgery • 172: Maxillofacial Prosthetics • 173: Pediatric Dentistry • 175: Prosthodontics • 187: Dental Hygienist • 400: Ordering, Prescribing, Referring (OPR)
23	<p>Hearing Aid Dispenser & Related Supplies</p> <p><i>Specialty type code:</i></p> <ul style="list-style-type: none"> • 923: Hearing Aid Dispenser & Related Supplies
24	<p>Advanced Practice Registered Nurse (APRN)</p> <p><i>Specialty type codes:</i></p> <ul style="list-style-type: none"> • 023: Advanced Practice Registered Nurse (APRN – Primary) • 924: Advanced Practice Registered Nurse (APRN) • 824: Advanced Practice Registered Nurse (APRN) Group • 400: Ordering, Prescribing, Referring (OPR)
25	<p>Optometrist</p> <p><i>Specialty type codes:</i></p> <ul style="list-style-type: none"> • 925: Optometrist • 825: Optometrist Group • 400: Ordering, Prescribing, Referring (OPR)
26	<p>Psychologist</p> <p><i>Specialty type codes</i></p> <ul style="list-style-type: none"> • 926: Psychologist • 826: Psychologist Group • 071: Neuropsychology • 160: Adolescent Psychology • 161: Child Psychology • 162: Clinical Psychology • 246: Psychological Assistant • 247: Psychological Intern • 248: Psychological Trainee • 400: Ordering, Prescribing, Referring (OPR)

27	Radiology & Noninvasive Diagnostic Centers <i>Specialty type code:</i> <ul style="list-style-type: none"> • 927: Radiology & Noninvasive Diagnostic Centers
28	Pharmacy <i>Specialty type code:</i> <ul style="list-style-type: none"> • 928: Pharmacy
29	Home Health Agency <i>Specialty type code:</i> <ul style="list-style-type: none"> • 929: Home Health Agency (EVV Required)
30	Personal Care Services - Provider Agency <i>Specialty type code:</i> <ul style="list-style-type: none"> • 930: Personal Care Services - Provider Agency (EVV Required)
32	Ambulance, Air or Ground <i>Specialty type code:</i> <ul style="list-style-type: none"> • 932: Ambulance, Air or Ground • 249: Community Paramedicine
33	Durable Medical Equipment, Prosthetics, Orthotics and Disposable Medical Supplies (DMEPOS) <i>Specialty type code:</i> <ul style="list-style-type: none"> • 933: Durable Medical Equipment, Prosthetics, Orthotics and Disposable Medical Supplies (DMEPOS)
34	Therapy <i>Specialty type codes:</i> <ul style="list-style-type: none"> • 834: Therapy Group • 027: Physical Therapy • 028: Occupational Therapy • 029: Speech Pathologist • 176: Respiratory Therapy • 219: Speech Pathologist (Language)
35	Non-Emergency Secure Behavioral Health Transport <i>Specialty type code:</i> <ul style="list-style-type: none"> • 987: Non-Emergency Secure Behavioral Health Transport
36	Chiropractor <i>Specialty type codes:</i> <ul style="list-style-type: none"> • 936: Chiropractor • 836: Chiropractor Group
38	Home & Community Based Services Waiver – Individuals with Intellectual Disabilities and Related Conditions <i>Specialty type codes:</i> <ul style="list-style-type: none"> • 211: Habilitation-Community • 212: Habilitation-Prevocational • 214: Supported Environment • 215: Counseling Services • 216: Supported Living Services
39	Adult Day Health Care (facility) <i>Specialty type code:</i> <ul style="list-style-type: none"> • 939: Adult Day Health Care

41	Optician, Optical Business <i>Specialty type code:</i> <ul style="list-style-type: none"> • 941: Optician, Optical Business
43	Laboratory, Pathology/Clinical <i>Specialty type code:</i> <ul style="list-style-type: none"> • 943: Laboratory, Pathology/Clinical
44	Swing-bed, Acute Hospital <i>Specialty type code:</i> <ul style="list-style-type: none"> • 944: Swing-bed, Acute Hospital
45	End Stage Renal Disease (ESRD) Facility <i>Specialty type code:</i> <ul style="list-style-type: none"> • 945: End Stage Renal Disease (ESRD) Facility
46	Ambulatory Surgical Centers <i>Specialty type code:</i> <ul style="list-style-type: none"> • 946: Ambulatory Surgical Centers
47	Indian Health Program <i>Specialty type code:</i> <ul style="list-style-type: none"> • 947: Indian Health Program
48	Home and Community Based Services Waiver for the Frail Elderly <i>Specialty type codes:</i> <ul style="list-style-type: none"> • 039: Homemaker Services (EVV Required) • 191: Respite (for individual providers only) (EVV Required) • 199: Chore (EVV Required) • 202: Personal Emergency Response System (PERS) • 208: Adult Companion Service (EVV Required) • 209: Social Adult Day Care, out of home • 303: Private Case Management Services
51	Indian Health Services Hospital, Inpatient (Tribal) <i>Specialty type code:</i> <ul style="list-style-type: none"> • 951: Indian Health Services Hospital, Inpatient (Tribal)
52	Indian Health Services Hospital, Outpatient (Tribal) <i>Specialty type code:</i> <ul style="list-style-type: none"> • 952: Indian Health Services Hospital, Outpatient (Tribal)
54	Targeted Case Management <i>Specialty type codes:</i> <ul style="list-style-type: none"> • 954: Targeted Case Management • 237: Severely Mentally Ill • 238: Severely Emotionally Disturbed • 239: Individuals with Intellectual Disabilities and Related Conditions • 240: Developmentally Disabled • 242: Juvenile Justice • 243: Child Protective Services
55	1915(i) Home and Community-Based Services (HCBS) State Plan Option – Habilitation <i>Specialty type code:</i> <ul style="list-style-type: none"> • 315: Day Habilitation • 316: Residential Habilitation

56	Inpatient Rehabilitation and Long Term Acute Care (LTAC) Specialty Hospitals <i>Specialty type code:</i> <ul style="list-style-type: none"> • 956: Inpatient Rehabilitation and Long Term Acute Care (LTAC) Specialty Hospitals
57	Home and Community Based Services Waiver for the Elderly in Adult Residential Care <i>Specialty type code:</i> <ul style="list-style-type: none"> • 303: Private Case Management Services • 957: Home and Community Based Services Waiver for the Elderly in Adult Residential Care
58	Waiver for Persons with Physical Disabilities (“PD”) <i>Specialty type codes:</i> Specialties under which an individual provider or an agency may enroll: <ul style="list-style-type: none"> • 189: Attendant Services (EVV Required) Specialties under which only an agency may enroll: <ul style="list-style-type: none"> • 039: Homemaker Services (EVV Required) • 048: Assisted Living • 191: Respite Care (EVV Required) • 199: Chore (EVV Required) • 200: Environmental Accessibility Adaptations • 202: Personal Emergency Response System (PERS) • 204: Home Delivered Meals • 205: Specialized Medical Equipment/Supplies • 303: Private Case Management Services
59	Home and Community Based Services Waiver for the Elderly – Augmented Personal Care Services <i>Specialty type code:</i> <ul style="list-style-type: none"> • 303: Private Case Management Services • 959: Home and Community Based Services Waiver for the Elderly – Augmented Personal Care Services
60	School Based <i>Specialty type code:</i> <ul style="list-style-type: none"> • 960: School Based
63	Psychiatric Residential Treatment Facility (PRTF) <i>Specialty type code:</i> <ul style="list-style-type: none"> • 963: Psychiatric Residential Treatment Facility (PRTF)
64	Hospice <i>Specialty type code:</i> <ul style="list-style-type: none"> • 964: Hospice
65	Hospice, Long Term Care <i>Specialty type code:</i> <ul style="list-style-type: none"> • 965: Hospice, Long Term Care
68	Intermediate Care Facilities for Individuals with Intellectual Disabilities / Private <i>Specialty type code:</i> <ul style="list-style-type: none"> • 968: Intermediate Care Facilities for Individuals with Intellectual Disabilities / Private
72	Nurse Anesthetist <i>Specialty type codes:</i> <ul style="list-style-type: none"> • 972: Nurse Anesthetist • 872: Nurse Anesthetist Group

74	Nurse Midwife <i>Specialty type codes:</i> <ul style="list-style-type: none"> • 974: Nurse Midwife • 874: Nurse Midwife Group • 400: Ordering, Prescribing, Referring (OPR)
75	Critical Access Hospital (CAH), Inpatient <i>Specialty type code:</i> <ul style="list-style-type: none"> • 975: Critical Access Hospital (CAH), Inpatient
76	Audiologist <i>Specialty type codes:</i> <ul style="list-style-type: none"> • 976: Audiologist • 876: Audiologist Group • 245: Hearing Aid Dispenser and Related Supplies
77	Physician's Assistant (PA/PA-C) <i>Specialty type codes:</i> <ul style="list-style-type: none"> • 977: Physician's Assistant • 877: Physician's Assistant Group • 400: Ordering, Prescribing, Referring (OPR)
78	Indian Health Services Hospital, Inpatient (Non-Tribal) <i>Specialty type code:</i> <ul style="list-style-type: none"> • 978: Indian Health Services Hospital, Inpatient (Non-Tribal)
79	Indian Health Services Hospital, Outpatient (Non-Tribal) <i>Specialty type code:</i> <ul style="list-style-type: none"> • 979: Indian Health Services Hospital, Outpatient (Non-Tribal)
81	Hospital Based End Stage Renal Disease (ESRD) Provider <i>Specialty type code:</i> <ul style="list-style-type: none"> • 981: Hospital Based End Stage Renal Disease (ESRD) Provider
82	Behavioral Health Rehabilitative Treatment <i>Specialty type codes:</i> <ul style="list-style-type: none"> • 882: Behavioral Health Rehabilitative Treatment Group • 300: Qualified Mental Health Professional • 301: Qualified Mental Health Associate • 302: Qualified Behavioral Aide
83	Personal Care Services - Intermediary Service Organization <i>Specialty type code:</i> <ul style="list-style-type: none"> • 983: Personal Care Services - Intermediary Service Organization (EVV Required)
85	Applied Behavior Analysis (ABA) <i>Specialty type codes:</i> <ul style="list-style-type: none"> • 885: Applied Behavior Analysis (ABA) Entity/Agency/Group • 310: Licensed and Board Certified Behavior Analyst (BCBA) • 311: Psychologist • 312: Licensed and Board Certified Assistant Behavior Analyst (BCaBA) • 314: Registered Behavior Technician (RBT)
86	Specialized Foster Care <i>Specialty type code:</i> <ul style="list-style-type: none"> • 986: Specialized Foster Care

89	Community Health Worker (CHW) <i>Specialty type code:</i> <ul style="list-style-type: none"> • 989: Community Health Worker
90	Doula Services <i>Specialty type codes:</i> <ul style="list-style-type: none"> • 990: Doula • 890: Doula Group
91	Pharmacist <i>Specialty type codes:</i> <ul style="list-style-type: none"> • 991: Pharmacist • 400: Ordering, Prescribing, Referring (OPR)
93	Substance Use Treatment <i>Specialty type codes:</i> <ul style="list-style-type: none"> • 701: Certified Alcohol and Drug Counselor (CADC) • 702: Licensed Alcohol and Drug Counselor (LADC) • 703: Certified Alcohol and Drug Counselor Intern (CADC-I) • 704: Group Specialty: Residential Substance Use Treatment in an Institution for Mental Disease (IMD) • 705: Licensed Clinical Alcohol and Drug Counselor Intern (LCADC-I) • 706: Peer Recovery Support Specialist (PRSS) • 707: Group Specialty: Substance Use Treatment Clinic • 708: Group Specialty: Opioid Treatment Program • 709: Licensed Clinical Alcohol and Drug Counselor (LCADC)
94	Medicare Cost-Sharing <i>Specialty type code:</i> <ul style="list-style-type: none"> • 401: Medicare Cost-Sharing