



## Overview for Prosthetic and Orthotic Providers

New Regulations Effective June 2, 2019

On May 3, 2019, Lieutenant Governor Kevin Meyer signed regulations affecting Durable Medical Equipment (DME) and Supply providers and Prosthetic and Orthotic (P&O) providers. These regulations, effective June 2, 2019, are the culmination of multi-year efforts by the Department of Health and Social Services.

The full text of the regulations and associated fee schedules are available at [Alaska Online Public Notices](https://aws.state.ak.us/OnlinePublicNotices/Notices/View.aspx?id=194126) (<https://aws.state.ak.us/OnlinePublicNotices/Notices/View.aspx?id=194126>). This document is intended to serve as a supplement to, and not a replacement for the regulations.

Regulations are now separated, with DME/Supply remaining at 7 AAC 120.200 and P&O regulations beginning at 7 AAC 120.300. P&O providers are not required to maintain a separate enrollment to provide durable medical equipment and supplies to patients; however, all regulations pertaining to those products must be followed.

Other changes also include, but are not limited to:

- Clarifying enrollment requirements. 7 AAC 120.300(a)
- Requiring providers to review continued medical necessity of equipment or supplies annually, and, if repairing an item, to request payment only if the product or service is still medically necessary. 7 AAC 120.305(b)
- Clarifying requirements needed for a valid prescription order and certificate of medical necessity. 7 AAC 120.300(e) – (h)
- Requiring providers to bill under appropriate Healthcare Common Procedure Codes (HCPC) when available. 7 AAC 120.310(b)
- Permitting the department to pay for covered items and services only when rendered while a provider is in compliance with enrollment requirements, and for items and services that require prior authorization and for which the provider sought and received such authorization prior to rendering the item or service. 7 AAC 120.305(d), 7 AAC 120.310(b) – (c), 7 AAC 145.421(c) – (d)
- Providing requirements for payments based on 100% of the current quarter's Medicare DMEPOS Fee Schedule established by CMS, except items and services billable only by P&O providers will be based on 120% of the current quarter's Medicare DMEPOS Fee Schedule for these items and services in this state. 7 AAC 145.421(b)(1)
- Providing a payment methodology for items and services for which CMS has not issued a rate and for custom-fabricated prosthetics, orthotics, and related items and services manufactured under the oversight of and signed off by a certified professional. 7 AAC 145.421(g)
- Permitting providers to use the department's price research form to request formal research of a state-based specific price established by the department that has not been established by CMS using the Alaska Medicaid DMEPOS Price Research Form. This process will allow for validation of current state-based rates or identify necessary changes to ensure suitable rates. 7 AAC 145.421(j)

Please contact Jamin Sprague at [jamin.sprague@alaska.gov](mailto:jamin.sprague@alaska.gov), 907.334.2418, or Karen Benson at [Karen.benson@alaska.gov](mailto:Karen.benson@alaska.gov), 907.334.2660 if you have any questions.