State of Nevada

Department of Health and Human Services

Community Paramedicine

Marta Jensen, Administrator
Division of Health Care Financing & Policy
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Provider Qualifications

• Emergency Medical Technician (EMT)
• Advanced Emergency Medical Technician (AEMT)
• Paramedic
• Community Paramedic

• An endorsement for community paramedicine must have been obtained from the Nevada Division of Public and Behavioral Health, Office of Emergency Medical Services, or from the Southern Nevada Health District’s Board of Health

• Providers must be employed by a permitted Emergency Medical System (EMS) agency

• A scope of service agreement, based upon the provider’s skills, is required through the medical director of the EMS agency which they are employed

• Both the community paramedic and the medical director of the EMS agency providing community paramedicine services must be enrolled in Nevada Medicaid
Scope of Service

• Community paramedicine services can fill patient care gaps in local health care systems and prevent duplication of services while improving the health care experience for the recipient.

• Services are delivered according to a recipient-specific plan of care under the supervision of a Nevada-licensed primary care provider (PCP).
  
  ➢ The PCP consults with the EMS agency service’s medical director to coordinate the care plan.
### Medicaid Covered Services

<table>
<thead>
<tr>
<th>Evaluation/health assessments</th>
<th>Home safety inspections</th>
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</thead>
<tbody>
<tr>
<td>Chronic disease prevention, monitoring, and education</td>
<td>Minor medical procedures and treatments</td>
</tr>
<tr>
<td>Medication compliance</td>
<td>Telehealth originating site</td>
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<tr>
<td>Immunizations and vaccinations</td>
<td>Point of care laboratory tests</td>
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<tr>
<td>Hospital discharge follow-up care</td>
<td>Laboratory specimen collection</td>
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**Services do not require prior authorization**
Non-Covered Services

• Travel time
• Mileage
• Emergency response
• Duplicated services
• Personal care services
• Services related to a hospital-acquired condition or treatment
Implementation & Outreach

• Implemented July 1, 2016
• Public Workshops
• Public Hearing for State Plan and Policy Updates
• Provider Enrollment trainings
• Medicaid Billing Training
Nevada Program Outcomes

Services:
3 services that have been utilized to date
- 99343 Home Visit New Patient Moderate to Hi Severity (45 min)
- 99348 Home Visit Established Patient Low-Moderate Severity (25 min)
- 99349 Home Visit Established Patient Moderate to High Severity (40 min)

Expenditures:
Minimal expenditures due to low utilization.

Next Steps:
Medicaid staff is working closely with Division of Public & Behavioral Health Emergency Management System staff to develop strategies to encourage increased enrollment and utilization.
Question & Contact

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