STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT State <u>Nebraska</u> METHODS AND STANDARDS FOR ESTABLISHING PAYMENT RATES

MEDICAL SUPPLIES, EQUIPMENT, AND APPLIANCES FOR SUITABLE USE IN THE HOME

Nebraska Medicaid pays for covered durable medical equipment, medical supplies, orthotics and prosthetics, at the lower of:

- 1. The provider's submitted charge; or
- 2. The allowable amount for that procedure code in the Nebraska Medicaid DMEPOS Fee Schedule

in effect for that date of service. The allowable amount is indicated in the fee schedule as:

- a. The unit value multiplied by the conversion factor;
- b. The invoice cost (indicated as "IC" in the fee schedule);
- c. The maximum allowable dollar amount; or
- d. The reasonable charge for the procedure as determined by the Medicaid Division (indicated as "BR" by report or "RNE" rate not established in the fee schedule). When a code is without a modifier and is notated as BR/RNE, the code is manually priced to mirror the current year Medicare rate. In the absence of the Medicare rate, the rate is determined as the average of available rates from other states.
- For DMEPOS items associated with Section 1903(i)(27) of the Social Security Act, amended by Section 5002 of the 21 Century Cures Act, and identified by the Centers of Medicare and Medicaid Services (CMS) as covered by Medicare, Medicaid will pay the lower of the following:
 (1) The Medicare DMEPOS fee schedule rate for Nebraska geographic, non-rural areas, set as of January 1 of each year, which will be reviewed on a quarterly basis and updated as Medicare updates the fee schedule; (2) the Medicare competitive bidding program rate for the specific item of DME, or (3) the provider's billed charges.

When services which are reimbursed per a fee schedule, except as otherwise noted in the plan, state-developed fee schedule rates are the same for both governmental and private providers. The agency's rates were set as of July 1, 2024, and are effective for medical supplies, equipment, and applications services on or after that date. All rates are published at: <u>http://dhhs.ne.gov/Pages/Medicaid-Provider-Rates-and-Fee-Schedules.aspx</u>. From the landing page, scroll down to the fee schedule for the specific program and year.

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