SENIOR & LONG TERM CARE DIVISION
COMMUNITY SERVICES BUREAU

	Section: ELIGIBILITY FOR SERVICES
	Subject: Specialized Medical Equipment, Supplies and Technology: Consultation

ARM References: 37.40.1487

DEFINITION

Consultation is defined as providing expert advice by a licensed or certified professional in a particular area. Consultations are used to assess and determine the appropriateness of the member's need for specialized medical equipment, supplies, and assistive technology prior to the member receiving the service. The procedure code for Specialized Medical Equipment and Supplies includes reimbursement for consultation and training.

PROVIDER REQUIREMENTS

Consultants must comply with all applicable State laws relating to qualification or licensure.

SERVICE REQUIREMENTS

A consultation is mandated, but not limited to the following (see Big Sky Policy 733-2):

1. Adaptive Equipment such as adaptive eating devices, bathroom aids, adaptive switches and buttons, door openers by a physician, occupational, physical or speech therapist;

2. Air conditioner, purifier, or humidifier by a physician, nurse practitioner, or respiratory therapist;

3. Assistive Technology (AT) devices such as environmental control units, computer interface systems, mobile devices, smart phones, tablets or any other new or unusual high tech item by an occupational, physical or speech therapist or MonTECH at the University of Montana http://montech.ruralinstitute.umt.edu/);

4. Augmentative communication devices and electronic communication devices for communication, memory, organization, or tracking of household management by a speech-language therapist or pathologist;

5. Beds including hospital beds, specialized beds and mattresses by a physician, occupational or physical therapist;

6. Dietary or nutritional supplements by a physician, naturopathic physician, nurse practitioner, dietitian, or nutritionist;

7. Environmental safety devices such as portable ramps, threshold ramps, grab bars, railings, standing poles by an occupational, physical therapist or an assistive technology practitioner (ATP);

8. Exercise or therapy equipment by the appropriate licensed therapist;

9. Generators by a physician, nurse practitioner or respiratory therapist for members who require back up power for life sustaining equipment (e.g. ventilators, electric pumps for nutrition);

10. Hearing aid by a licensed audiologist;

11. Lifts including hydraulic or electric by an occupational, physical therapist or an assistive technology practitioner (ATP);

12. Mobility aids such as wheelchairs, scooters, lifts, strollers, canes, sticks, crutches, walkers, rollators, and stair climbers by an occupational or physical therapist or an assistive technology practitioner (ATP);

13. Pulse oximeter by a physician, nurse practitioner, or respiratory therapist;

14. Supplies, including those coverable under state plan but available in an insufficient quantity to meet the needs of the member, by a physician, nurse practitioner or the appropriated licensed provider;

15. Upgrades or add-ons to otherwise approved Medicare or Medicaid State Plan items that are determined necessary to meet the needs identified in the person's service plan (e.g. wheelchair seat lifts) by the appropriate licensed provider; and

16. Maintenance, repair or replacement of equipment by the appropriate licensed provider.

Consultation results must be provided in writing, be present in the member's case record and support the member's need for the item requested.

Exceptions to consultation requirements must be prior authorized by the Department (e.g. no available consultant in member's service area).