

Ordering, Recommending & Providing Medical Care Outside of New York State

Policies and procedures for providing out of state services have been updated to reflect December 2009 revisions to Title 10 NYCRR 86-1.33 regarding payment to out of state providers. (<http://nyhealth.gov/nysdoh/phforum/nycrr10.htm>)

Medicaid beneficiaries should obtain medical care and services from qualified providers located in New York State. Provision of medical care and services provided out of state are subject to the New York State Medicaid rules, regulations, policies, procedures and rates applicable to in-state providers.

For beneficiaries obtaining services through the NYS Office of Mental Health, the NYS Office of Mental Retardation and Developmental Disabilities, the NYS Office of Alcohol and Substance Abuse Services, the NYS Office of Long Term Care and/or the NYS Office of Children and Family Services, concurrence from those agencies may be required for provider enrollment, care, services and placement out of state.

Prior Approval is required when referring a Medicaid beneficiary to an out-of-state provider for the following medical care and services:

- High Level Care (HLC) or Special Level of Care (SPC) long term care services. See the Residential Health Manual- Prior Approval Guidelines at: [http://www.emedny.org/ProviderManuals/ResidentialHealth/PDFS/PA%20Form%20Instructions\(HLC-SPC%20o-o-s\).pdf](http://www.emedny.org/ProviderManuals/ResidentialHealth/PDFS/PA%20Form%20Instructions(HLC-SPC%20o-o-s).pdf).
- Certain inpatient and clinic services not available in New York State. See the Inpatient and Clinic updated procedures for instructions on prior approval for services not available in New York State:
<http://www.emedny.org/ProviderManuals/Clinic/communications.html>
<http://www.emedny.org/ProviderManuals/Inpatient/communications.html>

Medicare: Providers must follow Medicare rules for care and services provided to Medicare primary beneficiaries. Medicare approved care and services provided to Medicare primary beneficiaries do not require prior approval from New York State Medicaid.

Enrollment: Out-of-State providers must enroll in the New York State Medicaid Program in order to be reimbursed by the Program. Out of state providers must meet the licensing requirements of the appropriate agency of the state where the provider practices. Only providers in the United States, Canada, Puerto Rico, Guam, the United States Virgin Islands and American Samoa are eligible for enrollment in the New York State Medicaid Program. Enrollment contact information is available in the **Information for All Providers - Inquiry Manual** at: <http://www.emedny.org/ProviderManuals/AllProviders/index.html>.