

Equipment and Assistive Technology Assessments/Consultations- Provider Verification

Equipment and Assistive Technology Assessments/Consultations Definition:

Specialized Medical Equipment and Assistive Technology Assessment/Consultation may be provided (if not covered under the State Plan Medicaid) once a participant's specific need has been identified and documented in the Support Plan. The scope of the work and specifications must be determined. Consultation and assessment may include specific needs related to the participant's disability for which specialized medical equipment and assistive technology will assist the participant to function more independently. Assessment and consultation cannot be used to determine the need for supplies.

Minimum Requirements:

Must be at least one of the following:

1. Licensed, Medicaid-enrolled Occupational or Physical Therapist,
2. Medicaid-enrolled Rehabilitation Engineering Technologist,
3. Assistive Technology Practitioner or Assistive Technology Suppliers certified by the Rehabilitation Engineering Society of North America (RESNA), **or**
4. Medicaid-enrolled Environmental Access/Consultants/contractor.

Information to Submit:

1. [Provider Verification Coversheet](#)
2. Copy of applicable license or certification **OR**
3. Verification of current, applicable Medicaid enrollment **or** current Medicaid enrollment as a Medicaid State Plan Durable Medical Equipment (DME) provider.

Upon receipt of all information listed above, DDSN will, within sixty days of receipt, complete its review. DDSN will notify the applicant in writing of the decision following its review.

Once verified, by DDSN, an online application to enroll with SC DHHS as a DDSN Medicaid Waiver Provider must also be completed. The written letter of decision from DDSN will include the address for this online application.

Please direct any questions to providerapplications@ddsn.sc.gov.
Please submit information for verification to providerapplications@ddsn.sc.gov