

5101:3-10-10      **Dialysis equipment.**

- (A) ~~Unless otherwise indicated, equipment~~ Equipment and all related medical supplies necessary for the home dialysis ~~patient~~ consumer are covered under the Ohio medicaid program when billed by suppliers/providers, except when the ~~patient~~ consumer elects to receive dialysis under "Method F", I," as referenced in rule 5101:3-13-07 of the Administrative Code.
- ~~(B) Requests for dialysis equipment and all related supplies should only be submitted to medicaid if medicare has denied coverage for a reason other than a lack of medical necessity. This medicare denial should be kept in the provider's file, to be reviewed by the department upon request.~~
- (B) Dialysis equipment and supplies are reimbursed according to the department fee schedule contained in appendix DD to rule 5101:3-1-60 of the Administrative Code.

Effective: 04/16/2007

R.C. 119.032 review dates: 01/02/2007 and 04/01/2012

CERTIFIED ELECTRONICALLY

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Certification

03/30/2007

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Date

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