



**CABINET FOR HEALTH AND FAMILY SERVICES  
DEPARTMENT FOR MEDICAID SERVICES**

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## PROVIDER LETTER

**TO:** Provider Type 90  
Medical Supplies, Equipment, and Appliances (MSEA) Providers  
(formerly Durable Medical Equipment (DME) Providers)

**DATE:** July 18, 2024

**RE:** DME Changes  
Provider Letter #A-47

The Kentucky Department for Medicaid Services is informing providers of the following change:

- A required name change per the Centers for Medicare and Medicaid Services will appear on Regulation, State Plan Amendment, and the Fee schedule. Durable Medical Equipment (DME) will be changing to Medical Services, Equipment, and Appliances (MSEA)

The information provided herein has been offered to clarify changes under the DME/MSEA Provider Type pursuant to 907 KAR 1:479.

Sincerely,

*Justin Dearing*

Electronically signed by:  
Justin Dearing, Director  
Division of Health Care Policy  
Department for Medicaid Services

JD/js/kl