

Nevada Medicaid/Nevada Check Up

CLAIM SUBMISSION TIP SHEET: Institutional Claims

Login *User ID Log In Forgot User ID? Register Now Where do I enter my password?	Log into the Electronic Verification System (EVS) portal at: <u>https://www.medicaid.nv.gov/</u> <u>hcp/provider/Home/tabid/135/</u> <u>Default.aspx</u>
Nevada Department of Health and Human Services Division of Health Care Financing and Policy Provider Portal Wy Home Eligibility Claims Care Management File Exchange Resources Search Claims Submit Claim I Submit Claim Search Payment History Treatment History Treatment History Submit Claim I Submit Claim Inst Submit Claim Dental Submit Claim Search Claims Submit Claim Inst Submit Claim Prof Search Payment History Treatment History	Select or hover over "Claims" from the top tool bar. If "Claims" is selected, a page with claim options will appear. If the user only hovers over the claims tab, the options will appear in the ribbon just below the tool bar.
Submit Institutional Claim: Step 1 Image: Claim Type Image: Claim: Type Image: Claim: Type Image: Claim: Type Image: Claim: Claim: Claim: Type Image: Claim: Cla	 Step 1 of the Institutional Claim consists of completing the following information: Claim Type Provider Information Patient Information Claim Information Some fields are marked with a red asterisk and are required. Other fields may not have an asterisk, but may be required depending on services rendered. If there is other insurance on file, select "Include Other Insurance" and review the Submitting Secondary Claims



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Diagnosis Codes External Cause of Injury Diagnosis Codes Condition Codes	Step 2 of the Institutional Claim consists of completing the following information, if
Occurrence Codes	applicable to the claim:
Value Codes + Surgical Procedures +	Diagnosis Information
Surgical Procedures Image:	 External Cause of Injury Diagnosis Codes Condition Codes Occurrence Codes Value Codes Surgical Procedures Note: Whenever the "Add" button is available, regardless of which step the user is on, ensure that the "Add" button is selected to populate the information into the claim.
Select the row number to edit the row. Click the Remove link to remove the entire row. To Date Units Charge Amount Action Sw click the row number to edit the row. Click the Remove link to remove the entire row. From Date To Date Units Charge Amount Action	Step 3 of the Institutional Claim consists of completing the
1 0.000	following information:
1 *Revenue Code® HCPCS/Proc Code® Modifiers @	 Service Details Attachments (if applicable)
Attachments Image: Click the Remove link to remove the entire row. # Transmission Method File Control # Attachment Type Action Image: Click to add attachment. Image: Click to add attachment. Image: Click to Step 1 Back to Step 2 Submit Cancel	After all steps have been completed, select "Submit" to review the claim. User will then select "Confirm" to submit the claim and receive
	Claim ID and Adjudication information.

For more details regarding submitting claims, please visit Chapter 3 of the EVS User Manual at: <u>https://www.medicaid.nv.gov/providers/evsusermanual.aspx</u>