Chapter 6. Search Fee Schedule

The Nevada Medicaid and Nevada Check Up Provider Web Portal allows providers, or their delegates, the ability to search fee schedules online through the unsecured and secured areas of the Provider Portal.

6.1 Gaining access to Search Fee Schedule

To access the Search Fee Schedule page using the unsecured area of the Provider Portal:

1. Open a web browser such as Internet Explorer or Firefox.
2. Enter www.medicaid.nv.gov in the address bar.
3. The Provider Web Portal Home page opens as shown below. Then click EVS. The submenu displays “User Manual” or “Provider Login (EVS).”
4. Click Provider Login (EVS). The EVS Home page opens.
5. Click Search Fee Schedule.
To access the Search Fee Schedule page using the secured area of the Provider Portal:

1. Open a web browser such as Internet Explorer or Firefox.
2. Enter www.medicaid.nv.gov in the address bar.
3. The Provider Web Portal Home page opens as shown below. Then click EVS. The submenu displays “User Manual” or “Provider Login (EVS).”

What can you do in the Provider Portal
Through this secure and easy-to-use internet portal, healthcare providers can inquire on the status of their claims and payments, inquire on a patient’s eligibility, process prior authorization requests and access Remittance Advises. In addition, healthcare providers can use this site for further access to contact information for services provided under the Nevada Medicaid program.
4. Click **Provider Login (EVS)**. The EVS Home page opens.

5. Log into the Provider Web Portal.
6. On the “My Home” page, under Resources click the “Search Fee Schedule” link to open the Search Fee Schedule page:
6.2 Terms of Agreement

When the Search Fee Schedule link is clicked on either the unsecured or secured area of the Provider Portal, the Terms of Agreement page is displayed. In order to continue to the Search Fee Schedule search page, users need to read and agree to the Terms of Agreement, and click “Submit” button.
6.3 Search Fee Schedule

The following fields are displayed on the Search Fee Schedule page:

1. Code Type
2. Procedure Code or Description
3. Service Category

The fields marked with a red * are required fields.

Attention all Providers: Provider “Search Fee Schedule” Feature
It has come to the attention of the Division of Health Care Financing and Policy (DHCFP) and Gainwell Technologies that the “Search Fee Schedule” function on the Nevada Medicaid Provider Portal is producing some results that are duplicative or erroneous. To prevent confusion, DHCFP suggests that providers, delegates, and staff use the DHCFP Fee-For-Service (FFS) Fee Schedules in Excel format as your primary guide to existing Medicaid reimbursement rates.

The FFS Fee Schedules by Provider Type are located here: [http://dhcfp.nv.gov/Resources/Rates/FeeScheduled/](http://dhcfp.nv.gov/Resources/Rates/FeeScheduled/)

Select a code type, then enter the procedure code or description and provider type.
- This page is used only for Nevada Fee For Service (FFS) rates.
- The fee displayed to the user as a result of the search may not be the amount the provider receives; Information on the claim may affect actual fee amount. The information contained in the schedule is made available to provide information and is not a guarantee by the State or the Department or its employees as to the present accuracy of the information contained herein. For example, coverage as well as an actual rate may have been revised or updated and may no longer be the same as posted on the website.
- Revenue code pricing for inpatient and nursing home provider types 011, 013, 019, 051, 055, 063, 065, 075, and 078 that is specific to a provider is not available through the Fee Schedule. Provider specific rates override the fee schedule. In addition, fees are not currently available for PT 064.
- Modifier and specialty do not affect ASC and ESRD bundled rates, so the modifier and specialty will not be used or displayed in the search results for those rates.

Financial Payor and Benefit: Nevada Medicaid Title XIX Fee For Service

<table>
<thead>
<tr>
<th>*Code Type</th>
<th>Select</th>
</tr>
</thead>
</table>

| Procedure Code or Description

<table>
<thead>
<tr>
<th>*Service Category</th>
<th>Select</th>
</tr>
</thead>
</table>

Search  Reset
**Note:** The procedure code or description allows for wildcard searching. Enter three (3) or more asterisks and the first 13 codes will be displayed in the list for selection. Users can also enter three (3) or more characters to display items in the list that match the characters. For example, enter 992 or outpatient in the Procedure Code or Description and a list matching the characters will display.

**Procedure Code or Description.**

**By Procedure Code:**

<table>
<thead>
<tr>
<th>Financial Payer and Benefit</th>
<th>Nevada Medicaid Title XIX Fee for Service</th>
</tr>
</thead>
<tbody>
<tr>
<td><em>Code Type</em></td>
<td>Procedure</td>
</tr>
<tr>
<td><em>Procedure Code or Description</em></td>
<td>Procedure</td>
</tr>
<tr>
<td><em>Service Category</em></td>
<td>Procedure</td>
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- Revenue code pricing for inpatient and nursing home provider types 011, 013, 019, 051, 056, 063, 065, 075, and 078 that is specific to a provider is not available through the Fee Schedule. Provider specific rates override the fee schedule. In addition, fees are not currently available for PT 054.
- Modifier and specialty do not affect ASC and ESRD bundled rates, so the modifier and specialty will not be used or displayed in the search results for these rates.

Current Procedural Terminology (CPT) and Current American Dental Association (ADA), respectively, are trademarks of the American Medical Association (AMA) and the American Dental Association (ADA), respectively, and are used herein under license. CPT is a registered trademark of the American Medical Association (AMA).
By Description of the code:

**Search Fee Schedule**

* Indicates a required field.

**Attention all Providers: Provider "Search Fee Schedule" Feature**

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The FFS Fee Schedules by Provider Type are located here: [http://dhcpp.nv.gov/Resources/Rates/FeeSchedules/](http://dhcpp.nv.gov/Resources/Rates/FeeSchedules/)

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</table>

- 99202-OFFICE O/P NEW SF 15-29 MIN
- 99203-OFFICE O/P NEW LOW 30-44 MIN
- 99204-OFFICE O/P NEW MOD 45-99 MIN
- 99205-OFFICE O/P NEW HI 60-74 MIN
- 99211-OFFICE O/P EST MINIMAL PROB
- 99212-OFFICE O/P EST SF 10-19 MIN
- 99213-OFFICE O/P EST LOW 20-29 MIN
- 99214-OFFICE O/P EST MOD 30-29 MIN
- 99215-OFFICE O/P EST HI 40-54 MIN

Current Procedural Terminology (CPT) and Current Dental Terminology, published by the American Dental Association (ADA), respectively, are not contained on this website and are available at ADA.org. The ADA codes are used to report dental procedures to dental plans and dental providers.
6.4 Search Results

After all of the search criteria has been entered, click “Search” button to display the search results.

**Financial Payer and Benefit**
- Nevada Medicaid Title XIX Fee for Service

<table>
<thead>
<tr>
<th>Procedure Code or Description</th>
<th>Provider Type</th>
<th>Provider Specialty</th>
<th>Modifier</th>
<th>Fee Amount</th>
<th>PA Required</th>
<th>Age Restrictions</th>
<th>Effective Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>28008-INCISION OF FOOT FASCIA</td>
<td>24-Advanced Practice Registered Nurses</td>
<td>All Specialties</td>
<td>$182.49</td>
<td>N</td>
<td>000 - 999</td>
<td>7/1/2015 - 12/31/2299</td>
<td></td>
</tr>
<tr>
<td>28008-INCISION OF FOOT FASCIA</td>
<td>77-Physician Assistant</td>
<td>All Specialties</td>
<td>$182.49</td>
<td>N</td>
<td>000 - 999</td>
<td>7/1/2015 - 12/31/2299</td>
<td></td>
</tr>
</tbody>
</table>

(Note: All procedure code results may not be shown in the above screenshot.)

If multiple rows are returned, the search results can be sorted by:
- Provider Specialty
- Modifier
- Fee Amount
- PA Required
- Age Restrictions
- Effective date

The example below is sorted by Fee Amount:
6.5 Print Preview

Click on the Print Preview button to open a new window to print the search Results.
Attention all Providers: Provider "Search Fee Schedule" Feature

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Financial Payer and Benefit: Nevada Medicaid Title XIX Fee For Service

*Procedure Code or Description: 28008-INCISION OF FOOT FASCIA

Service Category: Practitioner Svcs

Search Results: Total Records: 4

<table>
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<tr>
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<th>Provider Type</th>
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1. Click **Print** to print
2. Click **Close** to close the window