



Nevada Medicaid and Nevada Check Up – Submitting Claims with Other Insurance Frequently Asked Questions (FAQ)

| Question | Answer |
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| What is Third Party Liability? | Third Party Liability (TPL) or Other Health Coverage (OHC) is any other insurance coverage that is not Nevada Medicaid. |
| As a provider, where can I access a recipient's TPL information? | Providers/users can login to their Electronic Verification System (EVS) portal and select "Eligibility Verification" from the menu bar. See the EVS User Manual Chapter 2: Eligibility Benefit Verification for more information. |
| Who should a provider contact if incorrect commercial TPL or Medicare Replacement information is on file? | Providers will need to contact Nevada Medicaid's TPL vendor: Health Management Systems, Inc. (HMS) Phone: 775-335-1040 or Toll Free: 855-528-2596 Email: NVTPL@hms.com NOTE: When emailing HMS, "escalation" should be included in the subject line and the email request must include Recipient Name, Date of Birth (DOB), Medicaid ID, and commercial policy information. |
| Who should a provider contact if incorrect Medicare information is on file? | The Division of Health Care Financing and Policy at: TPL@dncfp.nv.gov . As a reminder, use this contact only for incorrect Medicare information. All other incorrect files, including Medicare Replacement plans, must be referred to HMS as stated above. |
| Does an Explanation of Benefits (EOB) need to be attached? | No. Nevada Medicaid does not require an EOB attachment on any claim submission. |
| What is timely filing for a claim with other insurance? | 365 days from the date of service or date of eligibility decision, whichever is later. |
| Can Nevada Medicaid be billed first if a recipient has other insurance? | Nevada Medicaid is the payer of last resort. Providers should review Chapter 100 of the Medicaid Services Manual and the Billing Manual for more information. |
| Is there a resource a provider can reference on how to submit claims with other insurance? | Yes. Users can review EVS User Manual Chapter 3: Claims for more information. |
| For an Institutional Claim, where does a provider input the Claim Adjustment Reason Code (CARC)? | Institutional claims require the CARC to be entered at the header level (Step 2 of the claim submission process). |
| Are Medicare Replacement plans considered TPL? | Medicare Replacement plans follow the Medicare Crossover Claim submission rules. If the Replacement Plan makes a payment or leaves patient responsibility, the claim should be entered as a Crossover Claim. Do not submit a Crossover Claim with the Replacement Plan as an "Other Insurance" detail. |



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| For Institutional Inpatient Claims when a recipient only has Medicare Part B or their Part A benefits are exhausted, what is the process for billing Nevada Medicaid? | <p>Providers are to bill Medicare Part B for Ancillary Charges, then submit an Institutional Claim (not a Crossover Claim).</p> <p>Providers will need to select “Other Insurance” in Step 1, with the Medicare Part B payment listed in the “Other Insurance” section and use indicator “MB.”</p> <p>If the recipient’s benefits are exhausted, providers will need to submit with an Occurrence Code of “A3, B3 or C3” to indicate the exhausted benefits.</p> <p>For more information, review the Submitting an Institutional Claim for Medicare Part B Coverage – Tip Sheet</p> |
| For a Professional or a Dental Claim, where does the provider input the Claim Adjustment Reason Code (CARC)? | <p>Professional and Dental Claims require the CARC to be entered at the detail level (Step 3 of the claim submission process).</p> <p>Do not enter Claim Adjustments in Step 2 of the claim – this panel will need to be collapsed.</p> |
| What information should be included when submitting claims with other insurance? | <p>Professional and Dental: After selecting the TPL Carrier, input only payment information at the header level. When inputting the service details, include detail payment information and applicable CARC.</p> <p>Institutional: After selecting the TPL Carrier, enter the payment information and CARC at the header level.</p> |