



## Nevada Medicaid

### Provider Relations Field Service Representative Team Territories

Provider Relations Field Service Representatives are assigned to providers based on provider type and/or zip codes related to the servicing location of the National Provider Identifier (NPI) or Atypical Provider Identifier (API). Please refer to the following tables to determine which Field Service Representative is assigned to assist with inquiries.

<b>Rep Name:</b> Kevin Johnston <b>Email:</b> <a href="mailto:kevin.johnston2@dxc.com">kevin.johnston2@dxc.com</a> <b>Phone:</b> 775-412-9452	
<b>Provider Types: (Statewide)</b> <ul style="list-style-type: none"> <li>10 - Outpatient Surgery, Hospital Based</li> <li>11 - Hospital, Inpatient</li> <li>12 - Hospital, Outpatient</li> <li>19 - Nursing Facility</li> <li>44 - Swing Bed, Acute Hospital</li> <li>56 - Inpatient Rehabilitation and Long Term Acute Care (LTAC) Specialty Hospitals</li> <li>64 - Hospice</li> <li>65 - Hospice, Long Term Care</li> <li>75 - Critical Access Hospital (CAH), Inpatient</li> <li>81 - Hospital Based ESRD Provider</li> <li>All out-of-state providers not otherwise assigned</li> </ul>	<b>Zip Codes:</b> All

<b>Rep Name:</b> Mackenzie Lord <b>Email:</b> <a href="mailto:mackenzie.lord@dxc.com">mackenzie.lord@dxc.com</a> <b>Phone:</b> 775-412-9428	
<b>Provider Types: (Statewide)</b> <ul style="list-style-type: none"> <li>29 - Home Health Agency</li> <li>30 - Personal Care Services - Provider Agency</li> <li>32 - Ambulance, Air or Ground</li> <li>38 - Waiver for Individuals with Intellectual Disabilities and Related Conditions</li> <li>47 - Indian Health Services (IHS) and Tribal Clinics</li> <li>48 - Home and Community Based Waiver for Frail Elderly</li> <li>51 - Indian Health Service Hospital, Inpatient (Tribal)</li> <li>52 - Indian Health Service Hospital, Outpatient (Tribal)</li> <li>57 - Home and Community Based Waiver for the Frail Elderly (Elderly in Adult Residential Care)</li> <li>58 - Home and Community Based Waiver for Persons with Physical Disabilities</li> <li>59 - Home and Community Based Waiver for the Frail Elderly (Augmented Personal Care Services)</li> <li>60 - School Based</li> <li>78 - Indian Health Service Hospital, Inpatient (Non-Tribal)</li> <li>79 - Indian Health Service Hospital, Outpatient (Non-Tribal)</li> <li>83 - Personal Care Services - Intermediary Service Org</li> </ul>	<b>Zip Codes:</b> All



<b>Rep Name: Stephanie Ferrell</b>		<b>Email: <a href="mailto:stephanie.d.ferrell@dxc.com">stephanie.d.ferrell@dxc.com</a></b>		<b>Phone: 775-412-9401</b>	
<b>Provider Types (Statewide):</b> All Behavioral Health providers, including: <ul style="list-style-type: none"> <li>• 13 - Psychiatric Hospital, Inpatient</li> <li>• 14 - Behavioral Health Outpatient Treatment</li> <li>• 16 - Intermediate Care Facilities for Individuals with Intellectual Disabilities/Public</li> <li>• 17 - Special Clinics, Specialty 215 Substance Abuse Agency Model (SAAM)</li> <li>• <b>20 - Physician, M.D., Osteopath, D.O., Specialty 146 Psychiatry</b></li> <li>• 26 - Psychologist</li> <li>• 63 - Residential Treatment Centers (RTC)</li> <li>• 68 - Intermediate Care Facilities for Individuals with Intellectual Disabilities/Private</li> <li>• 82 - Behavioral Health Rehabilitative Treatment</li> <li>• 85 - Applied Behavior Analysis (ABA)</li> </ul>			<b>Zip Codes:</b> All		

<b>Rep Name: Dena Brennan</b>		<b>Email: <a href="mailto:dena.brennan@dxc.com">dena.brennan@dxc.com</a></b>		<b>Phone: 775-412-9447</b>	
<b>Provider Types:</b> The following provider types located in the zip codes noted to the right: <ul style="list-style-type: none"> <li>• 17 - Special Clinics</li> <li>• 17 - Special Clinics, Specialty 179 School Based Health Centers (SBHC)</li> <li>• 20 - Physician, M.D., Osteopath, D.O.</li> <li>• 21 - Podiatrist</li> <li>• 23 - Hearing Aid Dispenser &amp; Related Supplies</li> <li>• 24 - Advanced Practice Registered Nurse</li> <li>• 25 - Optometrist</li> <li>• 27 - Radiology &amp; Non-invasive Diagnostic Centers</li> <li>• 34 - Therapy</li> <li>• 36 - Chiropractor</li> <li>• 39 - Adult Day Health Center</li> <li>• 41 - Optician, Optical Business</li> <li>• 43 - Laboratory, Pathology Clinical</li> <li>• 45 - End Stage Renal Disease (ESRD) Facility</li> <li>• 46 - Ambulatory Surgical Centers</li> <li>• 54 - Targeted Case Management</li> <li>• 55 - Home Based Habilitation Services</li> <li>• 72 - Nurse Anesthetist</li> <li>• 74 - Nurse Midwife</li> <li>• 76 - Audiologist</li> <li>• 77 - Physician's Assistant</li> </ul>			<b>Zip Codes:</b> 89022 89049 89301 89310 89311 89314 89315 89316 89317 89318 89319 89402 89403 89404 89405 89406 89407 89408 89409 89410 89411 89412 89413 89414 89415 89418 89419 89420 89421 89422 89423 89424 89425 89426 89427 89428 89429 89430 89431 89432 89433 89434 89435 89436 89438 89439 89440 89441 89442 89444 89445 89446 89447 89448 89449 89450 89451 89452 89460 89496 89501 89502 89503 89504 89505 89506 89507 89508 89509 89510 89511 89512 89513 89515 89519 89520 89521 89523 89533 89555 89557 89570 89595 89599 89701 89702 89703 89704 89705 89706 89711 89712 89713 89714 89721 89801 89802 89803 89815 89820 89821 89822 89823 89824 89825 89826 89828 89830 89831 89832 89833 89834 89835 89883		



Email: [NevadaProviderTraining@dxc.com](mailto:NevadaProviderTraining@dxc.com)

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<b>Rep Name: Alyssa Kee Chong</b>		<b>Email: <a href="mailto:Alyssa.s.kee@dxc.com">Alyssa.s.kee@dxc.com</a></b>		<b>Phone: 775-412-9444</b>	
<p><b>Provider Types:</b></p> <ul style="list-style-type: none"> <li>• 15 - Registered Dietitian (<b>Statewide</b>)</li> <li>• 22 - Dentist (<b>Statewide</b>)</li> <li>• 28 - Pharmacy (<b>Statewide</b>)</li> <li>• 33 - Durable Medical Equipment (<b>Statewide</b>)</li> </ul>	<p><b>Zip Codes:</b></p> <p>All</p>				

For all other provider types and zip codes not listed above, please send an email to: [NevadaProviderTraining@dxc.com](mailto:NevadaProviderTraining@dxc.com).