Attention Provider Types 38, 39, 48, 55, 57, 58 and 59: Explanation of Benefits from Other Health Care Provider Not Required

Effective with claims processed on or after December 21, 2015, provider types 38, 39, 48, 55, 57, 58 and 59 are not required to submit an Explanation of Benefits (EOB) or denial letter from the other health care (OHC) coverage provider with their Nevada Medicaid claims. The Billing Guidelines for these provider types have been updated with this information.