



February 15, 2022

Web Announcement 2714

Attention Provider Types 20 (Physician, M.D., Osteopath, D.O.), 24 (Advanced Practice Registered Nurse) and 77 (Physician Assistant):

Claims for Cognitive Assessment and Care Planning Procedure Code 99483 Reprocessed

Update to [Web Announcement 2554](#): Claims for procedure code 99483 (Assessment of and Care Planning for Patient with Cognitive Impairment, typically 50 minutes) for recipients age 55 and older with dates of service on or after July 1, 2021, that processed on or before September 27, 2021, and denied with error codes 3340 (Service not covered by Nevada Medicaid) or 4021 (No coverage rule for procedure) or 1009 (Contract could not be determined - detail) have been automatically reprocessed to adjudicate correctly. The impacted provider types are 20 (Physician, M.D., Osteopath, D.O.), 24 (Advanced Practice Registered Nurse) and 77 (Physician Assistant).

Results of the reprocessed claims appear on remittance advices dated February 18, 2022. Please note: When claims are reprocessed, please be aware that all system and clinical claim editor edits are applicable. As a result, there may be no additional payment, and other claim denials may be received. Providers have the right to appeal denied claims, including those denied upon reprocessing. Please refer to [Medicaid Services Manual Chapter 100](#) and the [Billing Manual](#) for information concerning the claim appeal process and time frames.