



April 11, 2022

Web Announcement 2756

Use Modifier QW on Claims when the Clinical Laboratory Improvement Amendments Test Waiver Applies to the Procedure Code

Procedure codes that are identified as “Clinical Laboratory Improvement Amendments (CLIA) waived test with modifier QW (CLIA Waived Test)” must be billed with modifier QW. Effective with claims with dates of service on or after April 1, 2022, if the modifier is not present on the claim and the provider does not have a valid certificate of waiver on file with Nevada Medicaid, the claim will deny with error code 4208 (CLIA license number invalid).

Claims for the impacted procedure codes with dates of service on or after February 1, 2019, through April 1, 2022, that were billed with or without modifier QW and denied incorrectly will be reprocessed automatically. Results of the reprocessed claims will be reported on a future remittance advice.

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.

Reminder: Providers who submit claims for laboratory services must ensure their CLIA number is on file with Nevada Medicaid. The CLIA number does not need to be entered on the claim. See [Web Announcement 1808](#) for instructions on updating your CLIA number with Nevada Medicaid.