



**March 6, 2023**

**Nevada Medicaid Web Announcement 3025**

## **Physician-Administered Drug (PAD) Claims That Denied with Explanation of Benefits Code 8684 Reprocessed**

Physician-administered drug (PAD) claims processed on or after July 1, 2022, through September 1, 2022, that denied with Explanation of Benefits (EOB) code 8684 (70-Product/service not covered) and were not included in a previous claim reprocessing effort have been reprocessed automatically to adjudicate correctly.

The results of the reprocessed claims appear on remittance advices dated March 10, 2023, and/or March 17, 2023. 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.