

September 5, 2023 Nevada Medicaid Web Announcement 3158

2023 Annual New Code Update: Claims for Some Procedure Codes Have Been Reprocessed

During the annual update of new procedure codes, some non-covered procedure codes became covered with various effective dates. Claims for the impacted procedure codes have been reprocessed automatically to adjudicate correctly and with the 2023 rates.

The following procedure codes were impacted and claims for these codes have been reprocessed.

Procedure Code	Effective Date	Dates Impacted Claims Were Submitted
99437	Dates of service on or after January 1, 2022	With dates of service on or after January 1, 2022, and were processed prior to May 22, 2023
E0183	Dates of service on or after October 1, 2022	With dates of service on or after October 1, 2022, and were processed prior to May 22, 2023
J0219, J0491, J9071, J9273, J9359 and Q5124	Dates of service on or after April 1, 2022	With dates of service on or after April 1, 2022, and were processed prior to April 7, 2023
J0739, J1306, J1551, J2356, J2779, J3299, J9331, J9332 and J2998	Dates of service on or after July 1, 2022	With dates of service on or after July 1, 2022, and were processed prior to April 7, 2023
J1932, J1302, J2777, J9274 and J9298	Dates of service on or after October 1, 2022	With dates of service on or after October 1, 2022, and were processed prior to April 7, 2023
K1024 and K1025	Dates of service on or after October 1, 2021	With dates of service on or after October 1, 2021, and were processed prior to May 22, 2023
K1031, K1032, K1033 and V2525	Dates of service on or after April 1, 2022	With dates of service on or after April 1, 2022, and were processed prior to May 22, 2023

Results of the reprocessed claims appear on remittance advices dated September 8, 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.