

October 9, 2023 Nevada Medicaid Web Announcement 3184

COVID-19 UNWIND:

URGENT Announcement for All Providers: Updated Billing Instructions Regarding Medicaid Recipient Reinstatement

Update to Web Announcement 3165: As communicated in the press release linked here issued by the Nevada Department of Health and Human Services (DHHS), approximately 114,000 Nevada Medicaid recipients who lost coverage between June 2023 and September 2023 were retroactively reinstated on September 13 and 14, 2023. The reinstated recipients were placed into Fee-For-Service for this 3-month period.

Effective September 13 and 14, 2023, those who reside in a Managed Care Organization (MCO) coverage area were placed back into their last Managed Care Plan that they were enrolled in before losing coverage:

- Recipients in managed care on August 31, 2023, were placed back into their MCO effective September 1, 2023, with no gap in coverage.
- If applicable, other recipients with previous managed care coverage were placed back into their prior MCO effective September 13 and 14, 2023, when reinstatement was processed.

Recipients who were previously ineligible for services from June to September may now be eligible for Nevada Medicaid services.

If services were provided June 1, 2023, through September 13, 2023, to recipients who were not eligible for Nevada Medicaid, these recipients may now be eligible. Please verify the recipient's eligibility. If the service required an authorization, a retrospective authorization may be requested within 90 calendar days from the recipient's date of the eligibility determination.

All Nevada Medicaid billing requirements and policies must be followed. All claims must be submitted within timely filing limits. Claims without Third-Party Liability (TPL) that are submitted by in-state providers must be received within 180 days of the date of service or date of eligibility decision – whichever is later. Claims with TPL and claims submitted by out-of-state providers must be received within 365 days of the date of service or date of eligibility decision – whichever is later.

Previously submitted claims that denied due to recipient ineligibility will be reprocessed automatically at a later date. Results of the reprocessed claims will be reported on a future remittance advice.