



**January 25, 2024**

**Nevada Medicaid Web Announcement 3267**

## **Prior Authorization Requirements for Laboratory Services Used for Biomarker Testing**

Effective March 1, 2024, the [Nevada Medicaid Services Manual \(MSM\) Chapter 800 Laboratory Services](#) Section 803.1C will be updated to include prior authorization (PA) requirements for laboratory services used for biomarker testing. Laboratory services used for medically necessary biomarker testing for the diagnosis, treatment, appropriate management, and monitoring of cancer when supported by medical and scientific evidence became a covered benefit effective October 1, 2023. The coverage and limitations for these services can be found in MSM Chapter 800 Section 803.1A(1)(q).

**Effective March 1, 2024**, prior authorization requests must be submitted in order to consider reimbursement to providers for biomarker testing and the PA request must document the medical necessity of the services as supported by medical and scientific evidence as defined in MSM Chapter 800 Section 803.1A(1)(q)(3), which states:

3. Biomarker testing considered as supported by medical and scientific evidence meets one or more of the following:

- a. The labeled indications for the biomarker test or medication have been approved or cleared by the United States Food and Drug Administration (USFDA);
- b. The indicated tests for the drug have been approved by the USFDA or warnings and precautions included on the label of such a drug;
- c. A national coverage determination or local coverage determination, as defined in 42 C.F.R. § 400.202, has been issued for the biomarker test;
- d. Nationally recognized clinical practice guidelines or consensus statements, such as those issued by the National Comprehensive Cancer Network (NCCN) and United States Preventive Services Task Force, support the indicated use of the biomarker test;
- e. National guidelines and recommendations issued by medical professional societies support the indicated use of the biomarker test; and
- f. The biomarker test is supported by evidence in peer-reviewed, scientific studies, biomedical compendia, and other medical literature published by nationally recognized medical journals or available through the National Library of Medicine at the National Institutes of Health or Medical Literature Analysis and Retrieval System Online (MEDLARS).

All claims submitted with dates of service of October 1, 2023, through February 29, 2024, will be reviewed at a later date to determine if the coverage criteria outlined in MSM Chapter 800 Section 803.1A(1)(q) were met. For claims reimbursed where Nevada Medicaid has determined the coverage criteria were not met, the Division of Health Care Financing and Policy (DHCFP) will pursue recoupment of funds paid to providers for biomarker testing services.

For questions and additional information on medical/dental policy updates, please contact the DHCFP Medical Benefits Coverage Unit by sending an email to: [medicalprograms@dchfp.nv.gov](mailto:medicalprograms@dchfp.nv.gov).