



**February 22, 2024**

**Nevada Medicaid Web Announcement 3285**

**Attention Provider Type 19 (Nursing Facility):**

**Clarification of Managed Care Organization Responsibility for the First 180 Days**

This Web Announcement serves as follow-up clarification to [Web Announcement 3175](#).

Nevada Medicaid Managed Care Organizations (MCOs) are responsible for coverage and care management of an MCO-enrolled Medicaid recipient in need of nursing facility Level of Care (LOC) services up to 180 days.

When a recipient is admitted to a nursing facility, no length of stay is mandated and an MCO-enrolled recipient is not required to stay for the entire 180-day coverage period. Rather, at any time during the 180-day coverage period, an MCO may assess whether a recipient can be discharged to a lower level of care, such as a community setting with appropriate services.

If a Nevada Medicaid recipient remains in a nursing facility throughout the entire 180-day coverage period, then on the 181st day the recipient would be disenrolled from an MCO and then have Fee-For-Service coverage.