

February 28, 2024 Nevada Medicaid Web Announcement 3291

Claims for Vaccine Procedure Codes That Denied in Error Have Been Reprocessed

Update to Web Announcement 3237: Claims for the vaccine procedure codes listed in Table 1 below that were submitted with a National Drug Code (NDC) and denied in error with error codes listed in Table 2 have been reprocessed automatically. The impacted claims had dates of service on or after February 1, 2019, through December 12, 2023.

Table 1.

Tubic 1.						
90585	90647	90657	90674	90690	90713	90734
90620	90648	90658	90676	90691	90714	90736
90621	90649	90660	90680	90696	90715	90739
90630	90650	90661	90681	90698	90716	90743
90632	90651	90662	90685	90700	90717	90744
90633	90654	90670	90686	90702	90723	90746
90634	90655	90672	90687	90707	90732	90748
90636	90656	90673	90688	90710	90733	90750

Table 2.

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Error Code	Error Code Description			
3340	Service not covered by Nevada Medicaid			
3930	No procedure reimbursement rule for billing provider type/provider specialty			
3932	No procedure reimbursement rule for rendering provider type/provider specialty			
3958	No procedure reimbursement rule for procedure			
4014	No pricing segment on file			
4021	No coverage rule for procedure			
4149	Billing provider is not certified to bill service			
4150	Rendering Provider is not certified to perform procedure billed			

Results of the reprocessed claims appear on remittance advices dated March 1, 2024. 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.