



**April 18, 2025**

**Nevada Medicaid Web Announcement 3611**

**Attention Provider Types 11 (Hospital, Inpatient), 12 (Hospital, Outpatient), and 20 (Physician, M.D., Osteopath, D.O.):**

**Billing Guides Updated**

The billing guides for the provider types (PT) below have been updated and posted on the Nevada Medicaid Provider website, effective April 18, 2025, to include information about prior authorization (PA) for transplants.

- 11 (Hospital, Inpatient)
- 12 (Hospital, Outpatient)
- 20 (Physician, M.D., Osteopath, D.O.)

Outpatient medical/surgical authorization requests for transplants must be submitted as soon as the recipient is placed on a wait list and include PT 12 or 20 as the rendering provider and the transplant Current Procedural Terminology (CPT) code. Dates of service for these requests will be 365 days. This request will be reviewed for the medical necessity of the service.

Once the organ is available and the recipient is admitted to the hospital, an inpatient medical/surgical authorization request must be submitted to cover the inpatient stay.

Please review the complete billing guides on the [Billing Information](#) page.