



October 2, 2025

Nevada Medicaid Web Announcement 3735

Attention Provider Type 17 (Special Clinics) Specialty 181 (Federally Qualified Health Center):

Shadowing Billing Requirements Coming Soon

New shadow billing requirements for medical, behavioral health and dental encounters will be implemented for Federally Qualified Health Centers (FQHC) under provider type (PT) 17 (Special Clinics) specialty 181 (FQHC) in January 2026. After implementation, if these shadow billing requirements are not met, then the claim could deny with error code 6500 (Required to bill with other procedure).

The shadow billing requirements will be as follows:

Medical encounters:

- If a medical encounter is billed with procedure codes G0466, G0467 or G0468, then at least one qualified medical code must be included on the claim as a shadow procedure code. More than one medical code can be billed under the encounter, but only one medical encounter will be paid per person per day.
- If medical codes are billed, a medical encounter code (G0466, G0467 or G0468) must also be billed.

Behavioral health encounters:

- If a behavioral health encounter is billed with procedure codes G0469 or G0470, then at least one qualified behavioral health code must be included on the claim as a shadow code. More than one behavioral health code can be billed under the encounter but only one behavioral encounter will be paid per person per day.
- If a behavioral health code is billed, a behavioral health encounter code (G0469 or G0470) must also be billed.

Dental encounters:

- Beginning January 1, 2026, new dental encounter code **D2999** will be replacing code 41899 and should be submitted on all regular dental claims in the American Dental Association (ADA) format. The rate for code D2999 will be the same as code 41899. For dental claims with dates of service on or after January 1, 2026, code 41899 will no longer be accepted.
- If a dental encounter is billed with procedure code D2999, then at least one qualified dental code must be included on the claim as a shadow procedure code. More than one dental code can be billed under the encounter, but only one dental encounter will be paid per person per day.
- If dental codes are billed, a dental encounter code (D2999) must also be billed.

Refer to the [FQHC Shadow Billing Codes](#) on the [Nevada Medicaid and Federally Qualified Health Centers](#) webpage for a complete list of the approved medical, behavioral health, and dental codes that can be shadow billed.

No claims will be reprocessed automatically as this will be a go-forward update.