

October 15, 2025
Nevada Medicaid Web Announcement 3744

## Attention Provider Type 12 (Hospital, Outpatient): Observation Claims That Paid In Error Have Been Reprocessed

Claims submitted by provider type 12 (Hospital, Outpatient) for observation procedure code G0378 (Hospital observation service, per hour) and billed with revenue code 0762 (Observation hours) that paid beyond the 24-hours per day and 48-hours per encounter limits without an approved authorization have been reprocessed automatically. The impacted claims have dates of service from September 11, 2023, through September 8, 2025, and were processed on February 10, 2025, through September 8, 2025.

When claims are reprocessed, error code 5611 (24 Units Allowed Per Day) or error code 5661 (48 Hours Per Encounter-PA Override) will apply when the limitation has been exceeded.

Results of the reprocessed claims will appear on the remittance advice dated October 24. 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 <a href="Medicaid Services Manual Chapter 100">Medicaid Services Manual Chapter 100</a> and the <a href="Billing Manual">Billing Manual</a> for information concerning the claim appeal process and time frames.