

## December 16, 2025 Nevada Medicaid Web Announcement 3794

## Attention All Providers: Issue Related to Claims with Prior Authorization (PA) to Exceed Service Limits Has Been Resolved

Claims submitted with prior authorization (PA) to exceed service limits have been paying for only the units on the PA and not the total units allowed for the claim. Effective December 15, 2025, error codes related to PA override have been updated in the Medicaid Management Information System (MMIS) to ensure that claims are properly paid when PA is used to exceed service limits.

Claims that processed before December 15, 2025, that were submitted with PA to exceed service limits but paid incorrectly will be reprocessed automatically to adjudicate with the appropriate number of units allowed prior to pulling units from the PA. Results of the reprocessed claims will appear on a future remittance advice.

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">Medicaid Services Manual Chapter</a> 100 and the <a href="Billing Manual">Billing Manual</a> for information concerning the claim appeal process and time frames.