August 17, 2026

Nevada Medicaid Web Announcement 3986

Attention Provider 46 (Ambulatory Surgical Centers):

Physician's Prior Authorization Can Be Used for Professional Claims

Update to Web Announcement: 3786: Facilities under provider type (PT) 46 (Ambulatory Surgical Centers [ASC]) who submit professional claims may use a prior authorization (PA) obtained by a physician if the recipient, service, and date of service are the same. The ASC facility should be listed as the rendering provider to allow both the physician and facility to view the PA in the Provider Web Portal (PWP). This update is effective for claims with dates of service on or after December 15, 2025.

Claims for PT 46 with dates of service on or after December 15, 2025, that were submitted with PA obtained from a physician that were denied will be reprocessed automatically. 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 Medicaid Services Manual Chapter 100 and the Billing Manual for information concerning the claim appeal process and time frames.