



October 6, 2026

Nevada Medicaid Web Announcement 4025

Update on Claims for Long-Acting Reversible Contraception (LARC) Devices

According to [Web Announcement 3597](#), outpatient claims for long-acting reversible contraception (LARC) device services may be billed by provider type (PT) 12 (Hospital, Outpatient) or 96 (Rural Emergency Hospital, Outpatient) concurrently with an inpatient claim from PT 11 (Hospital, Inpatient) or 75 (Critical Access Hospital). However, inpatient and outpatient claims for LARC device services have been denying inappropriately with error code 5051 (Poss Dupe: INP vs OUTP) when the other claim type was submitted first.

Effective for claims processed on or after October 5, 2026, error code 5051 has been updated in the Medicaid Management Information System (MMIS), and inpatient and outpatient claims for LARC services will no longer deny when billed concurrently.

Claims submitted by PTs 11, 12, 75, or 96 for LARC device services that denied with error code 5051 will be reprocessed automatically. The impacted claims will have dates of service on or after March 31, 2025.

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.