Active Providers Must Use New Re-Enrollment Applications

Effective immediately, active providers who receive their re-enrollment letter must use one of two new provider re-enrollment applications. An application for individual providers and a separate application for group/facility providers make it easier and faster for providers to complete the re-enrollment process. The applications are available on the Provider Enrollment webpage under Re-Enrollment Documents.

Beginning June 1, 2012, providers are required to re-enroll in Nevada Medicaid and Nevada Check Up once every 36 months. Providers who do not re-enroll within 60 days of the date on their re-enrollment letter will have their provider contract terminated. The result of the termination is that no payment will be made to the provider for dates of service after the effective date of the termination.

When providers receive their re-enrollment letter, they must re-enroll in Nevada Medicaid by submitting a completed and signed re-enrollment application and Nevada Medicaid and Nevada Check Up Provider Contract. Each document listed on the Enrollment Checklist for their provider type must be included with the submission.