



August 24, 2023

Nevada Medicaid Web Announcement 3150

Attention Behavioral Health Providers:

Procedure Code H2017 Limitations

Effective with dates of service on or after August 21, 2023, claims for procedure code H2017 (Psychosocial rehabilitative services, per 15 min) that exceed the daily limit of 4 hours/16 units will deny with error code 5626 (16 units allowed per day). No single day claim can exceed 16 units per recipient.

A prior authorization (PA) is required for procedure code H2017 for provider types (PTs) 14 (Behavioral Health Outpatient Treatment), 26 (Psychologist) and 82 (Behavioral Health Rehabilitative Treatment).

Note: Any span dating of claims must be equal in units billed per day and cannot span from one month to the next. For example, more than 496 units cannot be billed over 31 days of the same month. Claims that span over the limit one month to the next will be denied.

No claims will be reprocessed automatically as this update is a go-forward change.

The limitation of 16 hours per day for procedure code H2017 applies to the following provider types and specialties:

Provider Type	Provider Specialty
14 – Behavioral Health Outpatient Treatment	300 – Qualified Mental Health Professional (QMHP) 301 – Qualified Mental Health Associate (QMHA) 305 – Licensed Clinical Social Worker 306 – Licensed Marriage and Family Therapist 307 – Clinical Professional Counselor (All of the above providers must be linked to specialty 814 - Behavioral Health Community Network Entity/Agency/Group) (Specialties 305, 306 and 307 may also be linked to PT 82 specialty 882 - Behavioral Health Rehabilitative Treatment Entity/Agency/Group)
26 – Psychologist	
82 – Behavioral Health Rehabilitative Treatment	300 – Qualified Mental Health Professional (QMHP) 301 – Qualified Mental Health Associate (QMHA) (These providers must be linked to specialty 882 - Behavioral Health Rehabilitative Treatment Entity/Agency/Group)