



April 16, 2024

Nevada Medicaid Web Announcement 3334

Attention Provider Type 19 (Nursing Facility): Provider-Specific Rates Updated

During the 82nd Nevada Legislative Session (2023), Assembly Bill 237 and Senate Bill (SB) 504 allowed rate increases for provider type (PT) 19 (Nursing Facility). The adjusted provider-specific rates have been entered in the Medicaid Management Information System (MMIS) and are effective with dates of service on or after January 1, 2024.

Any claims submitted by PT 19 or PT 65 (Hospice, Long Term Care) with dates of service on or after January 1, 2024, through claims processed prior to April 13, 2024, that did not reimburse correctly per the updated rates will be reprocessed automatically at a later date. Results of any reprocessed claims will be reported 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.