

# Tip Sheet for Claims Appeals: How to submit a Claims Appeal to Nevada Medicaid

## Things to Remember:

- All providers have the right to appeal a claim that has been denied.
- Appeals <u>must</u> be postmarked no later than 30 calendar days from the date on the remittance advice.
- Fill out a Formal Claim Appeal Request (FA-90) form in its entirety. FA-90 is available online on the Provider Forms webpage at <a href="https://www.medicaid.nv.gov">www.medicaid.nv.gov</a>.
- For each appealed claim, a separate FA-90 must be attached. If the provider has multiple appeals, the provider must complete an FA-90 for each appeal.
- Appeals may be e-mailed to: <a href="maileology: ProviderClaimAppeals@dxc.com">ProviderClaimAppeals@dxc.com</a>. Please send only one secured e-mail per appeal and indicate "Claim Appeal" in the subject line. Appeals may be mailed to: Nevada Medicaid, Attn: Claim Appeals, P.O. Box 30042, Reno, NV 89520

## **Appeals Checklist:**

Is the appeal postmarked no later than 30 calendar days from the remittance advice date
Is the FA-90 filled out and attached, including:

- Detailed reason for the appeal
- 2. Provider's National Provider Identifier (NPI) and name
- The Internal Control Number (ICN) of the denied claim
- 4. Name and telephone number of contact person regarding the appeal
- 5. Documentation that supports why the claim is being appealed
- Original signed paper claim

Read and understand Chapter 8 (Claims Processing and Beyond) of the Billing Manual. The Billing Manual for all provider types is available online on the Provider Billing Information webpage at <a href="https://www.medicaid.nv.gov">www.medicaid.nv.gov</a>.

#### Please Note:

If a claim has been denied due to billing errors, a corrected claim should be submitted as a new claim. Send the corrected claim to Nevada Medicaid, Attn. Claims, P.O. Box 30042, Reno, NV 89520-3042. Do not resubmit the claim through the appeals process.

### **General Inquiries:**

Customer Service Call Center: 877-638-3472 (Monday through Friday 8 a.m. to 5 p.m. Pacific Time)

## **Appeals Specific Training or Information:**

E-mail: NevadaProviderTraining@dxc.com or

Contact your Provider Field Representative: The Provider Field Representative Team Territory List is available online on the Provider Training webpage at <a href="https://www.medicaid.nv.gov">www.medicaid.nv.gov</a>.

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