



July 1, 2024

## Nevada Medicaid Web Announcement 3384

### Rate Review Surveys for Certain Provider Types and Services

Per Nevada Revised Statute (NRS) [422.2704](#), the State of Nevada Division of Health Care Financing and Policy (DHCFP) / Nevada Medicaid is required to conduct a rate review for each provider enrolled with Nevada Medicaid at a minimum of every four years. The purpose of this statute is to determine whether the rate of reimbursement accurately reflects the actual cost of providing the service or item. Nevada Medicaid has established a rate review schedule and, at this time, the provider types (PTs) listed below are under review.

Beginning **June 13, 2023**, providers enrolled under the PTs listed below are now able to access surveys [on the QRR page](#), complete them and return them to Nevada Medicaid. The surveys request information regarding Current Procedural Terminology (CPT)/Healthcare Common Procedure Coding System (HCPCS)/Revenue codes billed, and the cost of providing each service/item.

Completed surveys must be returned via email to [QRR@DHCFP.nv.gov](mailto:QRR@DHCFP.nv.gov) in Excel® format.

Surveys must be completed and returned by **Tuesday, August 13, 2024**.

As a valued partner with Nevada Medicaid providers, DHCFP strongly encourages all provider types listed below to complete the survey. Data gathered from provider responses directly contributes to the analysis of current reimbursement rates and may assist in justifying rate adjustments in the future.

For more information on Quadrennial Rate Reviews, including a full annual schedule, surveys for each provider type listed below, and detailed instructions, please visit the [QRR \(nv.gov\)](#) webpage on DHCFP website. **Please note:** Rate reviews may or may not result in changes to reimbursement amounts.

The impacted service and provider types for the current survey are:

- **11** (Hospital, Inpatient)
- **13** (Psychiatric Hospital, Inpatient)
- **22** (Dentist, for Individuals with Intellectual and Developmental Disabilities)
- **22** (Dentist, Including Maxillofacial Surgery)
- **23** (Hearing Aid Dispenser & Related Supplies)
- **29** (Home Health Agency and Private Duty Nursing Services)
- **32-249** (Community Paramedicine)
- **32-932** (Ambulance, Air or Ground)
- **33** (Durable Medical Equipment (DME), Disposable, Prosthetics)
- **34** (Therapy)
- **36** (Chiropractor)
- **39** (Adult Day Health Center)
- **44** (Swing-Bed, Acute Hospital)
- **45** (End Stage Renal Disease (ESRD) Facility)
- **48** (Home and Community Based Waiver for the Frail Elderly)
- **55** (Day and Residential Habilitation Services)
- **56** (Inpatient Rehabilitation and Long-Term Acute Care (LTAC) Specialty Hospitals)
- **57** (Home and Community Based Waiver for the Frail Elderly in Residential Facilities for Groups)
- **58** (Home and Community Based Waiver for Persons with Physical Disabilities)
- **59** (Home and Community Based Waiver for the Frail Elderly in an Assisted Living Facility)
- **63** (Residential Treatment Centers (RTC))

- **68** (*Intermediate Care Facilities for Individuals with Intellectual Disabilities, Private*)
- **75** (*Critical Access Hospital (CAH), Inpatient*)
- **77** (*Physician's Assistant*)
- **81** (*Hospital Based End Stage Renal Disease (ESRD) Provider*)
- **86** (*Specialized Foster Care*)

As a reminder, providers are asked to print, post and distribute [Update Your Address](#) and [NV Medicaid App](#) flyers for recipients.