



August 19, 2024

Nevada Medicaid Web Announcement 3420

Attention All Providers: Professional and Institutional Claims That Paid in Error Have Been Reprocessed

Professional and institutional claims submitted for the procedure codes below may have paid in error when they should have denied with error code 6104 (Evaluation Previously Paid for Calendar Year) when there was a paid evaluation claim in history. The impacted claims had dates of service on or after February 1, 2019, through May 7, 2024, and were processed on or after February 1, 2019, through May 7, 2024.

- 97161 (Physical therapy evaluation, low complexity, 20 min.)
- 97162 (Physical therapy evaluation, moderate complexity, 30 min.)
- 97163 (Physical therapy evaluation, high complexity, 45 min.)
- 97165 (Occupational therapy, low complexity, each 30 min.)
- 97166 (Occupational therapy evaluation, moderate complexity, each 45 min.)
- 97167 (Occupational therapy evaluation, high complexity, each 60 min.)

Claims submitted for the above procedure codes with dates of service on or after February 1, 2019, through May 7, 2024, that paid in error have been automatically reprocessed. Results of the reprocessed claims will appear on the remittance advice dated August 23, 2024.

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.