



December 11, 2024 (Updated December 17, 2024)

Nevada Medicaid Web Announcement 3501

Prior Authorization Required for Skin Substitute Procedure Codes

As of August 28, 2024, the provider types (PT) listed below are required to submit prior authorization (PA) for procedure codes Q4133 (Grafix prime, grafixpl prime, stravax and stravaxpl, per square centimeter), Q4186 (Epifix, per square centimeter), and Q4101 (Apligraf, per square centimeter):

- PT 10 (Outpatient Surgery, Hospital Based)
- PT 12 (Hospital, Outpatient)
- PT 20 (Physician, M.D., Osteopath, D.O.)
- PT 21 (Podiatrist)
- PT 24 (Advanced Practice Registered Nurses)
- PT 77 (Physician's Assistant)

In-state providers have until February 28, 2025, and out-of-state providers have until August 28, 2025, to submit PAs with dates of service from August 28, 2024, through December 31, 2024.

PA for procedure codes Q4133, Q4186, and Q4101 requires that the treating provider submit a signed and dated wound care treatment plan or a letter of medical necessity that includes the following documentation:

- The planned interventions for the problem identified
- The treatment goals
- The expected outcomes

A signed and dated treatment plan or a letter of medical necessity is considered current when signed and dated within 30 calendar days prior to or on the date the procedure is performed. If the signed and dated treatment plan or letter of medical necessity is older than 30 days, PA may be denied.