



December 17, 2024

Nevada Medicaid Web Announcement 3504

Attention Provider Type 63 (Residential Treatment Centers): Inpatient Claims Denied with Error Code 5001 Will Be Reprocessed

Some inpatient claims for provider type 63 (Residential Treatment Centers) have been denied in error with error code 5001 (Possible duplicate: Inpatient to Inpatient) when the recipient was discharged from and admitted to the same inpatient facility on the same day by the same provider and the claim was submitted with an appropriate patient status code. Error code 5001 has been updated in the Medicaid Management Information System (MMIS), and inpatient claims meeting the above criteria will no longer be denied in error with error code 5001 effective for claims with dates of service on or after December 16, 2024.

Inpatient claims with dates of service on or after January 1, 2024, that were denied in error with error code 5001 will be reprocessed automatically to adjudicate correctly. Results of the reprocessed claims will appear 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.