

January 31, 2025 Nevada Medicaid Web Announcement 3545

Attention Provider Type 46 (Ambulatory Surgical Centers):

Prior Authorization Required for Skin Substitute Procedure Codes

Update to <u>Web Announcement 3501</u>: As of August 28, 2024, provider type (PT) 46 (Ambulatory Surgical Centers) is required to submit prior authorization (PA) for the following procedure codes:

- Q4133 (Grafix prime, grafixpl prime, stravix and stravixpl, per square centimeter)
- Q4186 (Epifix, per square centimeter)
- Q4101 (Apligraf, per square centimeter)

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, 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.

For questions regarding skin substitute services, please contact the medicalprograms@dhcfp.nv.gov inbox.