



February 6, 2025

Nevada Medicaid Web Announcement 3549

Attention Provider Types 44 (Swing-Bed, Acute Hospital) and 75 (Critical Access Hospital, Inpatient):

Provider-Specific Rates Established

During the 82nd Nevada Legislative Session (2023), Senate Bill (SB) 241 was passed requiring inpatient services provided by a Critical Access Hospital (CAH) to be reimbursed at a rate equal to the actual cost of providing the services. Per this requirement, new provider-specific rates for CAHs under provider type (PT) 44 (Swing-Bed, Acute Hospital) and 75 (Critical Access Hospital, Inpatient) have been entered in the Medicaid Management Information System (MMIS) and are effective on claims with dates of service on or after January 1, 2024.

Claims submitted by PTs 44 or 75 with dates of service on or after January 1, 2024, that paid the incorrect rate will be automatically reprocessed. 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.