



April 29, 2025

Nevada Medicaid Web Announcement 3621

Updates to Limitation Error Codes

Effective for claims with dates of service on or after April 28, 2025, updates for the procedure codes listed in the table below have been implemented in the Medicaid Management Information System (MMIS). No claims will be reprocessed as these are go-forward changes.

The following provider types (PT) are impacted:

- 12 (Hospital, Outpatient)
- 14 (Behavioral Health Outpatient Treatment)
- 17 (Special Clinics)
- 20 (Physician M.D., Osteopath, D.O.)
- 24 (Advanced Practice Registered Nurses)
- 26 (Psychologist)
- 34 (Therapy)
- 36 (Chiropractor)
- 60 (School Based Services)
- 74 (Nurse Midwife)
- 77 (Physician’s Assistant)

The following table describes the updates for the impacted procedure codes:

Procedure Code	Applicable PT	Update
95004	20	The service limitation has been updated, and new error code 5747 (75 units allowed per rolling year) will apply to claims that exceed the service limitation.
95165	20	The service limitation has been updated, and error code 5502 (12 units allowed per rolling year) will apply to claims that exceed the service limitation.
97016, 97032, 97112	20	The service limitation has been updated, and new error code 5748 (56 units allowed per rolling month with 4 modalities and/or therapeutic procedures per day) will apply to claims that exceed the service limitation.
96138	14, 20, 24, 26, 77	Prior authorization (PA) requirements have been added.
98960	20, 24, 74, 77	These provider types are no longer able to bill this procedure code.
98960	12, 17, 60	The service limitation has been updated, and error codes 5723 (24 units allowed per calendar month) 5603 (4 units allowed per day) will apply to claims that exceed the service limitation.

97010 – 97124	12, 17, 20, 21, 24, 24, 26, 60, 74, 77	<p>The service limitation has been updated, and new error code 5749 (4 modalities and/or therapeutic procedures per day) will apply to claims that exceed the service limitation.</p> <p>Recipients can receive only 4 of these services or a combination of 4 of these services per day, regardless of which provider is billing or rendering the services.</p> <p>This limit applies to all PTs who can bill one or more of these codes.</p>
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