



February 9, 2026

Nevada Medicaid Web Announcement 3833

Attention Provider Types 20 (Physician, M.D., Osteopath, D.O.), 24 (Advanced Practice Registered Nurses), 26 (Psychologist), and 77 (Physician's Assistant):

Behavioral Health Procedure Codes Open for Billing

Effective for claims with dates of service on or after February 9, 2026, certain behavioral health procedure codes have been opened for billing by the provider types (PT) below. No claims will be reprocessed automatically as this is a go-forward change.

PT 20 – Physician, M.D., Osteopath, D.O.

Procedure Code	Description
90849*	Multiple-Family Group Psychotherapy
H0001**	Alcohol and/or Drug Assessment
Q3014	Telehealth Originating Site Facility Fee
S9480***	Intensive Outpatient Psychiatric Services, Per Diem

PT 24 – Advanced Practice Registered Nurses

Procedure Code	Description
90849*	Multiple-Family Group Psychotherapy
96112	Administration of Developmental Test, First Hour
96113	Administration of Developmental Test, Each Additional 30 Minutes
96121	Exam of Neurobehavioral Status, Each Additional Hour
H0001**	Alcohol and/or Drug Assessment
Q3014	Telehealth Originating Site Facility Fee
S9480***	Intensive Outpatient Psychiatric Services, Per Diem

PT 26 – Psychologist

Procedure Code	Description
90849*	Multiple-Family Group Psychotherapy
96170	Treatment of Behavior Impacting Health with Family, Initial 30 Minutes
96171	Treatment of Behavior Impacting Health with Family, Each Additional 30 Minutes
H0001**	Alcohol and/or Drug Assessment

Procedure Code	Description
Q3014	Telehealth Originating Site Facility Fee
S9480***	Intensive Outpatient Psychiatric Services, Per Diem

PT 77 – Physician’s Assistant

Procedure Code	Description
90849*	Multiple-Family Group Psychotherapy
96112	Administration of Developmental Test, First Hour
96113	Administration of Developmental Test, Each Additional 30 Minutes
96121	Exam of Neurobehavioral Status, Each Additional Hour
H0001**	Alcohol and/or Drug Assessment
Q3014	Telehealth Originating Site Facility Fee
S9480***	Intensive Outpatient Psychiatric Services, Per Diem

* Procedure code 90849 has the following service limitations that apply to PTs 20, 24, 26, and 77:

- 1 unit allowed per day.
- 26 units per calendar year for recipients aged 17 or younger. Prior authorization (PA) can be used to exceed this limitation.
- 18 units allowed per calendar year for recipients aged 18 or older. PA can be used to exceed this limitation.

** Procedure code H0001 has the following service limitation that applies to PTs 20, 24, 26, and 77:

- 1 unit allowed per 90 rolling days. PA can be used to exceed this limitation.

*** Procedure code S9480 requires PA. Providers must also be linked to an approved Behavioral Health Community Network (BHCN) to bill this code.