

January 29, 2019 Web Announcement 1826

Modernization: Instructions Regarding Letters of Agreement and Submitting the Corresponding Claims

The Division of Health Care Financing and Policy (DHCFP) is implementing a new, modernized Medicaid Management Information System (MMIS) on February 1, 2019. As the implementation nears, providers are instructed to use the following process when receiving Letters of Agreement from the DHCFP and submitting the corresponding claims to Nevada Medicaid.

When the DHCFP approves exceptions to State policy regarding provider reimbursement, the provider is contacted by the DHCFP Rates Unit via a letter, which is referred to as the Letter of Agreement. The provider must submit the claim(s) with the required attachment(s) via the Provider Web Portal (PWP) using Direct Data Entry (DDE) with a copy of the Letter of Agreement attached. In the Attachment Description field in DDE, the provider MUST enter EXCP as the first four characters. This entry must be in caps and must be the first thing entered in the Attachment Description field. Additional information can be entered after the EXCP as needed. The <u>Electronic Verification System (EVS) User Manual</u> Chapter 3 Claims for MMIS Modernization provides instructions for submitting a claim for exception batch processing using DDE.

If there are any questions, please do not hesitate to contact Nevada Medicaid.