



September 19, 2022

Web Announcement 2896

Attention All Providers: Claims Impacted by Provider's Location Status

On May 16, 2022, the Online Provider Enrollment system was updated to automatically correct the location status of enrolled providers, if needed. Due to this correction effort, claims that had processed inappropriately because the provider was enrolled with the incorrect location status have been reprocessed automatically to adjudicate correctly. The impacted providers had enrolled in Nevada Medicaid prior to 2022.

The following claims have been reprocessed:

- Claims submitted by providers whose location indicator changed from catchment or in-state to out-of-state and denied in error with error codes 676 (Date of service exceeds timely filing limit) or 677 (Timely filing limit exceeded).
- Claims submitted by providers whose location indicator changed from out-of-state to catchment or in-state, were submitted 180 days or more after the date of service and paid in error.

Reminder: Claims from catchment and in-state providers have a timely filing limit of 180 days. Claims from out-of-state providers have a timely filing limit of 365 days.

Results of the reprocessed claims appear on remittance advices dated September 23, 2022. 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.