



February 21, 2024

Nevada Medicaid Web Announcement 3283

Claims for Add-On Procedure Code 99417 (Prolonged Outpatient Evaluation and Management Service(s))

Current Procedural Terminology (CPT) add-on procedure code 99417 (*Prolonged outpatient evaluation and management service(s) time with or without direct patient contact beyond the required time of the primary service when the primary service level has been selected using total time, each 15 minutes of total time*) is now allowed to be billed with primary office/outpatient consultation/evaluation procedure codes 99245, 99345, 99350 and 99483 on the same date of service.

Effective with dates of service on or after February 20, 2024, claims for procedure code 99417 will no longer deny with error code 6511 (Add-on code billed without paid primary) when billed with procedure codes 99245, 99345, 99350 and 99483 or when a paid claim for procedure codes 99245, 99345, 99350 or 99483 is on file with the same date of service.

Claims for procedure code 99417 with the same date of service as primary procedure codes 99245, 99345, 99350 or 99483 that denied with error code 6511 will be reprocessed automatically at a later date. The claims that will be reprocessed were submitted with dates of service on or after January 1, 2023, and were processed prior to February 21, 2024. Results of the reprocessed claims will be reported 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.