



**March 12, 2024**

## **Nevada Medicaid Web Announcement 3302**

### **Provider Type 85 (Applied Behavior Analysis) Claims Reprocessed**

Provider type (PT) 85 (Applied Behavior Analysis) claims with the following criteria have been reprocessed automatically:

- Claims submitted by PT 85 for procedure codes 0362T, 0373T, 97151, 97152, 97153, 97154, 97155, 97156, 97157 or 97158 with dates of service on or after January 1, 2022, through claims processed on or before April 10, 2022, that denied with error code 4316 (Procedure code not payable with diagnosis entered). See [Web Announcement 2667](#) regarding implementation of these procedure codes.
- Claims submitted by PT 85 for procedure code 0373T (Group adaptive behavior treatment with protocol modification administered by physician or other qualified health care professional face-to-face with multiple patients, each 15 minutes) that denied with error code 4014 (No pricing segment on file). The impacted claims had dates of service on or after January 1, 2022, and were processed on or before January 24, 2022.
- Claims submitted by PT 85 specialty 814 (Registered Behavior Technicians) with dates of service on or after January 1, 2022, through claims processed on or before January 24, 2022, that were paid the incorrect rate. See [Web Announcement 2673](#) regarding the PT 85 specialty 814 rate increase.

Results of the reprocessed claims appear on remittance advices dated March 15, 2024. 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.