Provider Bulletin

Molina Healthcare of Nevada

September 2024

Medicaid physician rate increase

Dear Providers,

Molina Healthcare of Nevada is sharing important information about the rate increased by Medicaid for physicians with certain provider types effective January 1, 2024.

Provider type (PT) 20 receives a rate increase of 5% rate increase. Provider types 24 and 74 receive a rate parity.

To learn more, please see the attached Nevada Medicaid Announcement 3414 or visit <u>https://dhcfp.nv.gov/</u>.

Questions?

We're here to help. Contact your Provider Relations Representative or email the Provider Relations team at <u>NVProviderRelations@MolinaHealthcare.com</u>.

To learn more about provider updates, visit MolinaHealthcare.com/NV.

Thank you for your continued partnership.

Sincerely,

Molina Healthcare of Nevada Provider Relations



August 12, 2024 Nevada Medicaid Web Announcement 3414

Attention Provider Type (PT) 20 (Physician, M.D., Osteopath, D.O.), PT 24 (Advanced Practice Registered Nurses) and 74 (Nurse Midwife):

5% Rate Increase Approved for PT 20 and Rate Parity for PT 24 and PT 74

During the 82nd Legislature, Senate Bill (SB) 504 & SB 439 approved a rate parity to update the provider type (PT) 24 (Advanced Practice Registered Nurse) and PT 74 (Nurse Midwife) rates to PT) 20 (Physician, M.D., Osteopath, D.O.) rates, and the anesthesia conversion factor rate increased from \$22.57 to \$23.70. Additionally, a 5 percent rate increase for PT 20 was approved.

The adjusted rates have been entered in the Medicaid Management Information System (MMIS) and are effective on claims with dates of service on or after January 1, 2024.

Claims submitted by PT 20, PT 24 and PT 74 with dates of service on or after January 1, 2024, that are paying the previous rates will be reprocessed automatically at a later date. Claims submitted with the previous anesthesia conversion factor rate with dates of service on or after January 1, 2024, will be reprocessed automatically at a later date. Results of the reprocessed claims will appear on a future remittance advice.

A future remittance advice will report the result of any reprocessed claims. Please note: 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 <u>Medicaid Services Manual Chapter 100</u> and the <u>Billing</u> <u>Manual</u> for information concerning the claim appeal process and time frames.

Known Issue 179 related to the PT 20 rate increase was identified and will be updated when the issue is resolved.