



September 23, 2021

Web Announcement 2591

Transplant Maximum Reimbursement Rates Updated

The Division of Health Care Financing and Policy (DHCFP) has updated the transplant maximum reimbursement rates for transplant services not reimbursed with a Letter of Agreement (LOA). The updated rates are retro effective January 1, 2020, and July 1, 2020. In the near future, rates will be updated retroactively again to be effective July 1, 2021. Going forward the rates will be updated on an annual basis. Current rates are available on the following DHCFP website: <https://dhcfp.nv.gov/Resources/Rates/FeeSchedules/>.

If providers have claims within the timely filing period that have **not** been previously submitted and reimbursed, they will need to submit these claims with a reference to this Web Announcement via the Exception Batch claim submission process. Instructions for submitting claims via the Exception Batch process are located in the [Electronic Verification System \(EVS\) User Manual Chapter 3 Claims](#). **These claims must be received within the timely filing period.**

Previously paid claims will be automatically reprocessed to reflect the updated rates. A future web announcement will notify providers when the claims will be reprocessed. Providers have the option of voiding and resubmitting the claims instead of waiting for the automatic reprocessing. If the timely filing period is approaching, providers are encouraged to follow the instructions to void and resubmit the claims.

If providers have claims that have been previously reimbursed with outdated rates and they would like the claims processed with the updated rates prior to the automatic reprocessing being completed, they will first need to void the previously paid claim. Instructions for voiding a claim are located in the [EVS User Manual Chapter 3 Claims](#). Once the void has been completed, a new claim will need to be submitted with a reference to this Web Announcement via the Exception Batch claim submission process. Instructions for submitting claims via the Exception Batch process are located in the [EVS User Manual Chapter 3 Claims](#). **Claims within the timely filing period as of the date of this Web Announcement must be received within the timely filing period. Claims outside of the time period as of the date of the Web Announcement will need to be received no later than December 1, 2021.**

Please note: When claims are resubmitted for processing, please be aware that all system 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.

The following table provides the transplant maximum reimbursement rates for transplant services.

Transplant Maximums Effective 1/1/2020		
	Hospital Services	Procurement
Organ		
Liver	\$ 153,847	\$ 104,632
Kidney	\$ 46,104	\$ 92,957
Tissue		
Bone Marrow - Autologous	\$ 81,838	\$ 11,785
Bone Marrow - Allogeneic Related	\$ 184,878	\$ 61,347
Bone Marrow - Allogeneic Unrelated	\$ 184,878	\$ 61,347
Cornea	\$ 7,710	\$ 2,753
Transplant Maximums Effective 7/1/2020		
	Hospital Services	Procurement
Organ		
Liver	\$ 160,692	\$ 109,287
Kidney	\$ 48,155	\$ 97,093
Tissue		
Bone Marrow - Autologous	\$ 85,479	\$ 12,309
Bone Marrow - Allogeneic Related	\$ 193,104	\$ 64,076
Bone Marrow - Allogeneic Unrelated	\$ 193,104	\$ 64,076
Cornea	\$ 8,053	\$ 2,876