



**February 16, 2023**

**Nevada Medicaid Web Announcement 3009**

## **Instructions for Requesting a Change in Revenue Code or Procedure Code**

An Unscheduled Revision request should be used for any change in revenue code or procedure code if the prior authorization request has already been submitted. Please submit the Unscheduled Revision request on the appropriate form for the prior authorization type.

- For an increase in level of care for the procedure code or revenue code, the Unscheduled Revision must be submitted prior to the change if it is non-emergent or within five business days of the change if it is emergent and include medical justification for the change.
- For a lateral or decrease in level of care for the procedure code or revenue code, the Unscheduled Revision must be submitted prior to the submission of the claim.

The above instructions apply to all provider types except provider type 33 (Durable Medical Equipment, Prosthetics, Orthotics and Supplies), who instead must submit a new prior authorization request.