September 15, 2023

Web Announcement 3164

Attention All Providers: Top 10 Claim Denial Reasons and Resolutions/Workarounds for August 2023 Professional Claims

The Division of Health Care Financing and Policy and the Nevada Medicaid fiscal agent have reviewed all claim submissions for the month of August 2023 and have compiled a list of the top 10 reasons for which professional claims have denied. The table below lists the top 10 error codes along with the Explanation of Benefits (EOB) code that appears on the remittance advice for the claim denials, the error code descriptions and instructions to providers on how to resolve the claim denials.

Error Code	EOB Code on Remittance Advice	Error Code Description	Resolution or Workaround
452	452	No Medicare Coinsurance, Deductible or Copay Due	Provider will need to verify the co-insurance, deductible or co-pay amount in the Medicare crossover details fields. See the Submitting Secondary Claims to Nevada Medicaid Training Video for more billing information when Third-Party Liability (TPL) is present.
2003	3006	Client ineligible on DTL DOS (detail level date of service)	Provider will need to verify that the recipient is eligible for the dates of service and has the appropriate Benefit Plan. This may be completed in the Electronic Verification System (EVS) by reviewing the Member Eligibility tab, by calling (877) 638-3472 and utilizing Gabby™ or by utilizing the Automated Response System (ARS) at (800) 942-6511.
1048	0025	Provider Terminated – DTL DOS (detail level date of service)	Indicates that the provider is not contracted with Nevada Medicaid for the dates of service listed on the claim. Providers should check their status via the Online Provider Enrollment (OPE) tool. If not contracted, you will need to submit a new enrollment application to Nevada Medicaid. Visit the Provider Enrollment webpage for more information.
1076	1012	Prov Contract not Valid on DOS – DTL (detail level date of service)	Indicates that the provider is not contracted with Nevada Medicaid for the dates of service listed on the claim. Providers should check their status via the OPE tool. If not contracted, you will need to submit a new application to Nevada Medicaid. Visit the Provider Enrollment webpage for more information.

Error Code	EOB Code on Remittance Advice	Error Code Description	Resolution or Workaround
4021	0698	No CVG (Coverage) Rule for Procedure	Provider should verify that the code being billed is a payable code by Nevada Medicaid for the specific dates of service. Review the Search Fee Schedule for more information.
908	0908	PAD (Physician Administered Drug) Detail Denied by PBM (Pharmacy Benefits Manager)	The National Drug Code (NDC) on the Physician Administered Drug claim was denied by the Pharmacy Benefit Manager. Provider will need to verify that the NDC is a payable and covered code. Providers may reach out to the Pharmacy Benefits Manager at: (800)-695-5526 or visit https://nevadamedicaid.magellanrx.com/home
1008	1508	Billing Prov is not a Grp/Performing is a Grp Prov	Providers should review claims to ensure that a Group National Provider Identifier (NPI) is listed as the billing NPI and that an individual NPI is listed as the rendering or performing provider. Exception: If the individual provider originally enrolled as a "Biller" or "Performer" they would need to go into their EVS portal and request an update to both Biller and Performer. When updates are needed to the provider's billing status, the provider must complete that via their EVS portal.
1974	0030	OPR (Ordering, Prescribing, Referring) Prov not Enrolled	OPR provider may need to submit an enrollment application to Nevada Medicaid via the OPE tool. For a list of provider types that require the OPR to be listed on the claim, refer to Web Announcement 2832. Visit the Provider Enrollment webpage for more information.
1009	1009	Contract Could not be Determined	Review provider contract dates to verify provider is contracted with Nevada Medicaid for dates in question. Provider may need to submit a new enrollment application to Nevada Medicaid via the OPE tool to be able to bill for dates of service. Visit the Provider Enrollment webpage for more information.
1047	0205	Provider Terminated – DTL Performing	Providers should ensure that the Performing NPI is enrolled with Nevada Medicaid for the dates of service. Providers should check their status via the OPE tool. If not contracted, you will need to submit a new application to Nevada Medicaid. Visit the Provider Enrollment webpage for more information.