



September 27, 2023

Nevada Medicaid Web Announcement 3175

Attention Provider Type 19 (Nursing Facility):

Clarification of Managed Care Organization Responsibility for the First 180 Days of Nursing Facility Level of Care

As outlined in [Web Announcement 2506](#), effective January 1, 2022, Nevada Medicaid Managed Care Organizations (MCOs) are responsible for coverage and care management of the recipient in need of nursing facility level of care through the first 180 days.

Unlike Medicare which only allows a set number of days per benefit period, Nevada Medicaid does not place a limit on the number of covered days. The 180-day MCO coverage requirement applies to every nursing facility admission, regardless of the recipient receiving MCO nursing facility covered days during a previous admission.

For example:

A recipient enrolled with an MCO is admitted to a nursing facility and has a length of stay of 178 days. The recipient is then discharged and admitted to an acute care hospital for 2 days. When the recipient readmits to a nursing facility, the 180-day count for MCO coverage starts over for another 180 days.