



December 17, 2024

Nevada Medicaid Web Announcement 3505

Expansion of Medicaid Coverage to Include Medically Necessary Abortions

Effective December 16, 2024, Nevada Medicaid is expanding its abortion coverage to include abortions that are deemed medically necessary, as defined in [Medicaid Services Manual Chapter 100](#). Prior authorization (PA) for these procedures is required, and the [Outpatient Medical/Surgical Services Prior Authorization Request](#) (Form FA-6) documenting medical necessity must be submitted with PA requests.

Additionally, all claims for abortion procedures must have a condition code, or the claim will deny. This change is applicable to professional and institutional claims. The abortion condition codes are below.

Condition Code	Description
AA	Abortion performed due to rape
AB	Abortion performed due to incest
AD	Abortion performed due to life-endangering physical condition
AE	Abortion performed due to physical health of mother that is not life endangering
AF	Abortion performed due to emotional/psychological health of mother

Use of condition codes AH (elective abortion), AC (Abortion performed due to serious fetal genetic defect, deformity, or abnormality) and AG (Abortion performed due to social or economic reasons) or diagnosis code Z33.2 (elective term of pregnancy) will result in claim denial.

Please note that claims for abortions for pregnancies resulting from rape or incest or if the abortion is necessary to save the life of the recipient do not require PA. These claims will use the AA, AB, or AD condition codes and must be submitted with the appropriate declaration or certification attachment.

See the [Sterilization and Abortion Policy Billing Instructions](#) for more information about billing abortion claims.

No claims will be reprocessed automatically as this is a go-forward change.