

URGENT Update for PTs 20, 24 and 74: Regarding Resubmitting Claims for Obstetrical Deliveries for Medicaid Recipients with Emergency Service Only Eligibility

Provider types 20 (Physician, M.D., Osteopath), 24 (Certified R.N. Practitioner) and 74 (Nurse Midwife), who had funds recouped for claims for obstetrical care services that are not covered for Nevada Medicaid recipients with emergency service only eligibility, may resubmit the claim for the obstetrical delivery only. Only emergency services (obstetrical delivery) are covered for illegal non US citizens (Nevada Medicaid State Plan 3.1(a)(6)(III)). Providers may bill the recipients for the prenatal and postpartum care that was rendered.

Following are details and instructions regarding the affected claims for obstetrical care services:

- Funds were recouped on claims with dates of service January 1, 2006, through September 9, 2012. Remittance advices dated December 28, 2012, show the results of the recoupment.
- Providers may resubmit the claim for the obstetrical delivery only.
- Claims for the obstetrical delivery only that are beyond timely filing must be resubmitted to HP Enterprise Services on a paper claim form no later than April 1, 2013. Please indicate "Attn: OB Recoupment Claims" on the envelope and the cover letter.
- In the event that the recoupment created a negative balance, all expected reimbursement (for new day claims, as well as the delivery only resubmissions) will be applied to the provider's negative balance until it reaches a zero amount.