

IHCP *banner page*

INDIANA HEALTH COVERAGE PROGRAMS

BR201036

SEPTEMBER 7, 2010




The IHCP covers HCPCS codes E0770, E0441, E0442, E0443, and E0444

The Indiana Health Coverage Programs (IHCP) has identified an error on the fee schedule. The coverage indicator for Healthcare Common Procedure Coding System (HCPCS) codes E0770; E0441; E0442; E0443; and E0444 for durable medical equipment (DME) and home medical equipment (HME) indicated *not covered* for dates of service on and after December 31, 2009. The codes remain covered with no lapse in coverage. The fee schedule is in the process of being updated to reflect the correction. You should not have experienced claim denials for any of the listed codes.

Dates on prior authorization notification letters

The decision date printed on the prior authorization (PA) notification letter (at right) is the date the PA was originally entered into the PA database, not the date the decision was rendered. For example, a PA is received and entered into the system June 1; however, a decision is not rendered until June 8. The decision date included on the letter is June 1, the date the PA is entered into the system.

Administrator Name and Address



Indiana Medicaid Prior Authorization Notification

Member Information	Provider Information
RID: 000000000000	Provider #: 000000000

You are receiving this letter because a Medicaid good or service that requires prior authorization has been requested. This letter explains the service requested and what determination has been made regarding what will be covered. The services requested and the decision is based on the information provided. The services listed do not have to be rendered by the requesting provider. The definitions for the service terms are listed at the end of this letter.

Prior Authorization Number	Decision Date
0000000000	06/01/2010