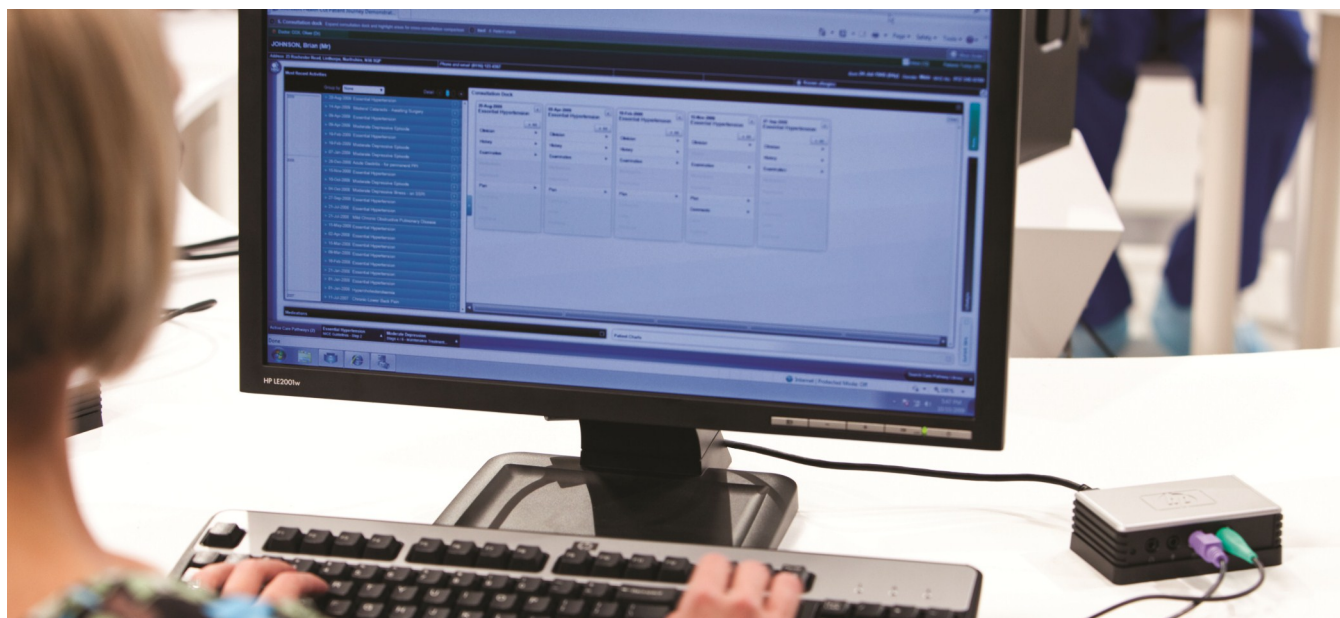


PROVIDER *news*

INDIANA HEALTH COVERAGE PROGRAMS NL201308 AUGUST 2013



Medicare Replacement Plan claim filing indicator code corrected

Effective for claims with dates of service (DOS) on or after August 9, 2012, the Indiana Health Coverage Programs (IHCP) began treating Medicare Replacement Plan claims in the same manner as original Medicare claims. However, IndianaAIM did not accept the claim filing indicator code for Health Maintenance Organization (HMO) Medicare Risk on claims submitted electronically, and providers were notified to hold these claims. The issue has now been resolved.

As announced in [IHCP Bulletin BT201339](#), effective for claims submitted on or after September 1, 2013, providers must include claim filing indicator code 16 – *Health Maintenance Organization (HMO) Medicare Risk* when submitting Medicare Replacement Plan claims electronically via an 837 transaction or via Web interChange. Providers should continue to use claim filing indicator codes MA and MB for original Part A and Part B Medicare claims filed electronically.

See [IHCP Bulletin BT201339](#) for information regarding the appropriate use of claim filing indicator code 16, as well as reminders about completing certain data fields and general requirements for submitting Medicare/ Medicare Replacement Plan claims. The data fields and requirements have not changed.

INSIDE STORIES

- [How claim edits and audits work](#)
- [Sign up for IHCP third-quarter provider workshops](#)
- [Sign up for the EHR incentive program](#)
- [Annual seminar to be held in October](#)

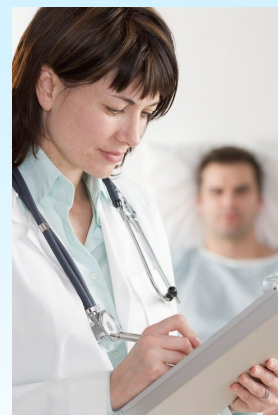
How claim edits and audits work

Where do the explanations of benefits (EOBs) on your Remittance Advice (RA) come from?

When IndianaAIM processes claims, *edits* and *audits* are applied to monitor accuracy and consistency as well as to ensure compliance with Indiana Health Coverage Programs (IHCP) policy and enforce federal and state laws and regulations.

Edits check the data elements on a claim against established internal criteria. *Audits* check the data elements on a claim against claims history and IHCP policy. Each type of edit or audit is associated with a numerical range. For example, *provider edits*, including screening of the provider identification numbers on claims, are numbered from 1000 – 1999; *history audits*, which compare the current claim against paid-claims history, are numbered from 5000 – 5999.

“Clean” claims are those that pass through IndianaAIM without triggering any of the established edits or audits. Obviously, clean claims are preferred because they mean providers are reimbursed quickly and efficiently. If one or more edits or audits are triggered, the claim will deny. The EOB on your RA will identify the specific number of the edits or audits triggered along with a description. Please read your RA information carefully to understand the denial reasons and to avoid repeating the same error on future claims.



Sign up for IHCP third-quarter provider workshops

The Indiana Health Coverage Programs (IHCP) is offering one-day educational workshops to providers in August and September 2013. The workshops include the following sessions:

- **Transportation...the Right Way:** This session includes information specifically relevant for transportation providers.
- **Introduction to IHCP:** This session covers the overall structure of the IHCP and is ideal for those who are new to Medicaid.
- **IHCP Updates:** This session provides an overview of newly released and updated information for all providers.
- **Indiana Care Select Top 10 Most Common Questions, Concerns, or Issues:** This session, presented by representatives of MDwise Inc. and ADVANTAGE Health Solutions, is directed toward *Care Select* providers.
- **EPSDT and Bright Futures:** This session on Early and Periodic Screening, Diagnosis, and Treatment (EPSDT), presented by managed care entities, is ideal for primary care providers, billing staff, clinical staff, and office management.
- **Anthem Hoosier Healthwise and Healthy Indiana Plan (HIP) Updates:** This session includes updates relevant for Anthem plan providers.
- **Life of a Claim at MDwise:** This session includes updates relevant for MDwise plan providers.
- **Managed Health Services (MHS) and Cenpatico Behavior Health Third-Quarter Updates:** This session includes updates relevant for MHS plan providers.

For more details about session content, workshop dates and locations, and registration visit the [Provider Education](#) page at indianamedicaid.com.

Sign up for the EHR incentive program

Incentive payments for the Electronic Health Records (EHR) initiative amount to more than \$122 million since the program's introduction in May 2011. A total of 1,727 eligible professionals and 109 eligible hospitals have benefited from these payments. For more information about EHR, see the [EHR Incentive Program](#) page at indianamedicaid.com.



Annual seminar to be held in October

Information will be coming soon about the annual Indiana Health Coverage Programs (IHCP) Provider Seminar to be held in October. Watch for upcoming communications.

RECENTLY PUBLISHED TO THE IHCP WEBSITE

BULLETINS

- [BT201320](#) – Update regarding reduction in reimbursement for podiatry services
- [BT201321](#) – Update regarding reduction in reimbursement for chiropractic services
- [BT201322](#) – Update regarding reduction in reimbursement for transportation services
- [BT201323](#) – Update regarding reduction in reimbursement for nonhospital-based laboratory services
- [BT201324](#) – Update regarding reduction in reimbursement for eye care and eyewear
- [BT201325](#) – Update regarding reduction in reimbursement for durable medical equipment and prosthetics
- [BT201326](#) – Update regarding reduction in reimbursement for nonhospital-based freestanding dialysis facilities
- [BT201327](#) – Update regarding reduction in reimbursement for speech/hearing therapists and audiologists
- [BT201328](#) – Update regarding reduction in reimbursement for medical supplies
- [BT201329](#) – Update: Nursing facility rate reduction extended
- [BT201330](#) – Update regarding reduction in reimbursement for nonhospital-based radiology providers
- [BT201331](#) – Update: Reduction in inpatient and outpatient hospital services reimbursement extended
- [BT201332](#) – Update regarding reduction in reimbursement for dental services
- [BT201333](#) – Update: Reduction in reimbursement for nonstate-owned ICF/IID and CRF/DD extended
- [BT201334](#) – Update: Home health services reimbursement reductions extended
- [BT201335](#) – Prospective IHCP transportation providers must obtain a surety bond
- [BT201336](#) – Date extended for nursing facility audit appeals eligible under the QAF appeal reduction plan
- [BT201337](#) – Home health rates for state fiscal year 2014 are effective July 1, 2013
- [BT201338](#) – Pharmacy PA system and criteria changes announced
- [BT201339](#) – Medicare Replacement Plan claim filing indicator code corrected

RECENTLY PUBLISHED TO THE IHCP WEBSITE

PROVIDER MANUAL UPDATES

The Revision History at the front of each manual (or chapter) provides detailed information about the updates made in the most recent revision.

[IHCP Provider Manual](#) – The following chapters of the manual have been updated:

- [Chapter 4](#) – *Provider Enrollment, Eligibility, and Responsibilities*
- [Chapter 6](#) – *Prior Authorization*
- [Chapter 8](#) – *Billing Instructions*
- [Chapter 10](#) – *Claims Processing Procedures*

[Healthy Indiana Plan \(HIP\) Reimbursement Manual](#)

[Medicaid Rehabilitation Option \(MRO\) Provider Manual](#)

NEWS FROM RECENT BANNER PAGES

- [Family Planning Eligibility Program Reminders](#)
- [IHCP third-quarter provider workshops coming soon](#)
- [Waiver mini-workshop scheduled for July 31](#)
- [Coverage changes for S0201 and H0035](#)
- [Updates to FQHC and RHC Encounter Codes](#)
- [Additional codes for influenza virus vaccine](#)
- [Pricing for influenza virus vaccine CPT code 90672 updated](#)
- [HCPCS Code S3870 linked to revenue codes 310/319](#)
- [HCPCS codes J2248 and J2315 linked to revenue code 636](#)

FOR MORE INFORMATION

- Contact your [Provider Relations Field Consultant](#).
- [IHCP Provider Quick Reference](#) – This reference contains a complete list of addresses, telephone numbers, and fax numbers for the IHCP and IHCP vendors.
- Subscribe to [IHCP E-mail Notifications](#).
- Contact Customer Assistance at (317) 655-3240 in the Indianapolis local area or toll-free at 1-800-577-1278.

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TO PRINT

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