

IHCP *banner page*

INDIANA HEALTH COVERAGE PROGRAMS

BR201241

OCTOBER 9, 2012



Providers may experience delays in claims processing

HP experienced a delay in claims processing beginning Monday, October 1, 2012. Normal claims processing has now resumed; however, until the backlog of claims has been processed, providers may experience delays in viewing claims on Web interChange Claim Inquiry. This delay affects claims submitted since October 1.

If you have received an internal control number (ICN) for claims submitted via Web interChange, or if you have submitted batch claims and received a Submission Summary Report that verifies your claims have been accepted, please do not resubmit the claims, as this may cause an added delay and a possible claim denial as a duplicate claim.

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HCPCS J9175 changed to noncovered

Effective for dates of service on or after December 1, 2012, Healthcare Common Procedure Coding System (HCPCS) code J9175 – *Injection, Elliott's B solution, 1 ml* will be noncovered due to lack of a rebatable National Drug Code (NDC). The provider [Fee Schedule](#) will be updated on indianamedicaid.com to reflect this coverage and reimbursement information. The list of procedure codes that require an NDC on indianamedicaid.com will be updated to remove this code.



CPT code 93351 may be billed with the TC or 26 modifier

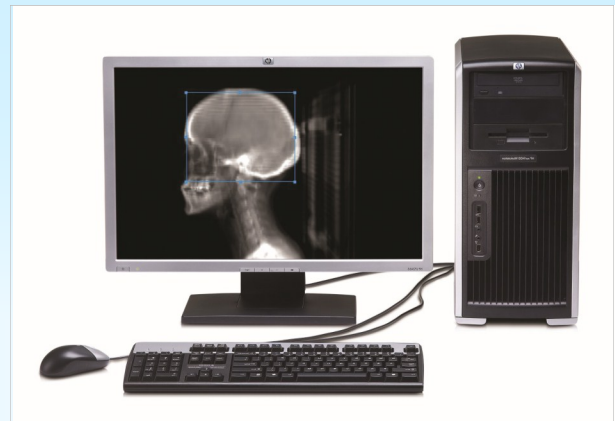
In response to provider inquiries, the Office of Medicaid Policy and Planning (OMPP) reviewed the physician reimbursement for Current Procedural Terminology (CPT^{®1}) code 93351 – *Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, during rest and cardiovascular stress test using treadmill, bicycle exercise and/or pharmacologically induced stress, with interpretation and report, including performance of continuous electrocardiographic monitoring, with physician supervision*. As a result, effective for dates of service on or after December 1, 2012, the Indiana Health Coverage Programs (IHCP) will allow billing of CPT code 93351 with either the TC or 26 modifier. You can find the new physician global, TC, and 26 rates on the [Fee Schedule](#) on indianamedicaid.com.

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CPT code 15831 renumbered to CPT 15847

The Office of Medicaid Policy and Planning (OMPP) identified that Current Procedural Terminology (CPT) code 15831 – *Excision, excessive skin and subcutaneous tissue (includes lipectomy), abdomen (e.g., abdominoplasty)* was renumbered to CPT 15847 – *Excision, excessive skin and subcutaneous tissue (includes lipectomy), abdomen (e.g., abdominoplasty) (includes umbilical transposition and fascial plication)*. As a result, for dates of service on or after December 1, 2012, the IHCP will update the physician reimbursement rate for CPT code 15847

and will change its ambulatory surgical center (ASC) pricing indicator to 8. The provider [Fee Schedule](#) on indianamedicaid.com will reflect these changes. The ASC rates are found on the [Fee Schedule](#) under “ASC Codes.”



CPT 15830 to have ASC pricing indicator of 8

Effective for dates of service on or after December 1, 2012, the Indiana Health Coverage Programs (IHCP) has assigned Current Procedural Terminology (CPT) code 15830 – *Excision, excessive skin and subcutaneous tissue (includes lipectomy); abdomen, infraumbilical panniculectomy* an ambulatory surgical center (ASC) pricing indicator of 8. The provider [Fee Schedule](#) will be updated on indianamedicaid.com to reflect this change. The ASC rates are found on the [Fee Schedule](#) under “ASC Codes.”

HCPCS code G0364 to have ASC pricing indicator of T

The Indiana Health Coverage Programs (IHCP) has assigned Healthcare Common Procedure Coding System (HCPCS) code G0364 – *Bone marrow aspiration performed with bone marrow biopsy through the same incision on the same date of service* an ambulatory surgical center (ASC) pricing indicator of T. Effective for dates of service on or after December 1, 2012, the IHCP will reimburse providers billing claims with HCPCS code G0364 as an outpatient service. The provider [Fee Schedule](#) will be updated on indianamedicaid.com to reflect this change. The ASC rates are found on the [Fee Schedule](#) under “ASC Codes.”



Don't miss the 2012 IHCP Annual Provider Seminar October 23-25!

Register now for the 2012 IHCP Annual Provider Seminar at the Caribbean Cove and Conference Center in Indianapolis. Scheduled for October 23-25, 2012, the annual seminar offers topics for all Medicaid providers, regardless of type and specialty or amount of Indiana Health Coverage Programs (IHCP) experience.

If you are new to the IHCP, plan to attend informative sessions about how Indiana Medicaid claims are processed, how to resolve claim issues, and how to submit fee-for-service (FFS) CMS-1500 claims. Veteran providers can learn important information about *Affordable Care Act* (ACA) provider enrollment and participation requirements, International Classification of Diseases, Tenth Revision (ICD-10), implementation, and program integrity.

Are you a primary medical provider (PMP) for the Healthy Indiana Plan (HIP) or Hoosier Healthwise? Sign up for a managed care roundtable, where you can discuss topics as diverse as mental health, self-referral, third-party liability, and vision services with representatives from the various managed care entities (MCEs). For [more information](#) and [to register](#), visit the Provider Education page of indianamedicaid.com.

QUESTIONS?

If you have questions about this publication, please contact Customer Assistance at (317) 655-3240 in the Indianapolis local area or toll-free at 1-800-577-1278.

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