

IHCP *banner page*

INDIANA HEALTH COVERAGE PROGRAMS

BR201714

APRIL 4, 2017

IHCP to mass adjust claims with a detail line for CPT code 77300 that denied incorrectly

The Indiana Health Coverage Programs (IHCP) has identified a claim processing issue that affects certain fee-for-service claims for Current Procedural Terminology¹® code 77300 – *Basic radiation dosimetry calculation, central axis depth dos calculation, TDF, NSD, gap calculation, off axis factor, tissue inhomogeneity factors, calculations of non-ionizing radiation surface and depth dose, as required during course of treatment, only when prescribed by the treating physician*. Affected claims are those for dates of service (DOS) on or after January 1, 2016, that were processed from January 1, 2016, through February 10, 2017. Detail lines for CPT 77300 may have denied inappropriately with explanation of benefits (EOB) 4181 and/or 4182 – *Service denied due to a National Correct Coding (NCCI) edit*. Go to <http://www.medicaid.gov/nationalcorrectcodinginted/> for information regarding NCCI coding policies.



The claim processing system has been corrected. Claims that were processed and paid during the indicated time frame with a detail line that denied for EOB 4181 and/or 4182 will be mass adjusted. Providers should begin to see the adjusted claims on Remittance Advices (RAs) beginning May 9, 2017, with Claim IDs/ICNs that begin with 52 (mass replacement non-check related). For claims that were underpaid, the net difference will be paid and reflected on the RA.

IHCP to reprocess claims that denied incorrectly with EOB 3001



With the implementation of CoreMMIS, the Indiana Health Coverage Programs (IHCP) has identified a number of prior authorization (PA) issues – some that have affected claim processing. Providers may have submitted claims on or after February 13, 2017, for reimbursement consideration before the related PA was approved. This would have caused the claim to deny with explanation of benefits (EOB) 3001 – *Dates of service not on the PA master file*.

The IHCP recognizes that delays and other issues related to processing PAs may have led to these inappropriate claim denials. As a result, the IHCP will mass reprocess all claims previously processed on or after February 13, 2017, that denied for EOB 3001. Providers should begin to see the reprocessed claims on Remittance Advices (RAs) beginning April 11, 2017, with Claim IDs/ICNs that begin with 80 (Reprocessed Denied Claims).

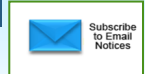
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