IHCP bulletin

INDIANA HEALTH COVERAGE PROGRAMS

BT2021108 DECEMBER 14, 2021

Changes to reimbursement for eligible out-of-state children's hospitals

In accordance with <u>House Enrolled Act (HEA) 1305</u>, the Indiana Health Coverage Programs (IHCP) announces Indiana Medicaid will reimburse inpatient hospital and outpatient hospital services provided by eligible out-of-state children's hospitals at 130% of the Medicaid reimbursement rate.

For inpatient claims, the increase does not apply to the capital per diem, medical education per diem (if applicable) or the outlier payment (if applicable). For outpatient claims, the increase does not apply to clinical laboratory codes, prosthetic/orthotic device details billed with revenue code 274, or drug details



billed with revenue code 636. This change is effective for inpatient hospital services with discharge dates on **July 1**, **2021**, through June 30, 2023, and outpatient hospital services with "from" dates of service (DOS) on **July 1, 2021**, through June 30, 2023. A new explanation of benefits (EOB) code 9046 – *Out of State Children's Hospital additional payment* will be used to identify fee-for-service (FFS) claim details that are reimbursed at the new reimbursement amount.

This change in reimbursement applies to both FFS and managed care claims and applies to claims for members less than 19 years of age.

Eligible out-of-state children's hospitals are children's hospitals located in a state bordering Indiana. In addition, the out-of-state children's hospital must be a freestanding general acute care hospital or a facility located within a freestanding general acute care hospital that:

- Is designated by the Medicare program as a children's hospital; or
- Furnishes inpatient and outpatient healthcare services to patients who are predominantly individuals less than
 19 years of age

The IHCP identified the children's hospitals listed in <u>Table 1</u> that are eligible to receive reimbursement under *HEA* 1305.

Table 1 – Children's hospitals eligible to receive reimbursement under HEA 1305

IHCP Provider ID	National provider identifier (NPI)	Hospital Name
300011814	1508315516	Advocate Children's Hospital
300012683	1235234535	Ann & Robert Lurie Children's Hospital
300042834	1538471800	Children's Hospital of Michigan
100069650A	1548212988	Cincinnati Children's Hospital Medical Center
300020322 300037420	1457379448	Dayton Children's Hospital
100275950A	1427146430	La Rabida Children's Hospital
100069780A	1134152986	Nationwide Children's Hospital
100069740A	1982609442	Norton Children's Hospital
100034170A	1831195908	Norton Women's & Children's Hospital
201076690A	1376656538	Shriners Hospitals for Children
201065990B	1659590644	Shriners Hospitals for Children
300030841	1093894990	University of Chicago - Comer's Children's

If a hospital meets the requirements of *HEA 1305* and has not been contacted by the IHCP, please contact Myers and Stauffer LC at INHospital@mslc.com. If a hospital does not meet the requirements of *HEA 1305*, the hospital is not eligible for this payment program.

Managed care and FFS claims will be mass adjusted.

Outpatient FFS claims with DOS from July 1, 2021, through Dec. 15, 2021, will be mass adjusted to apply the updated reimbursement methodology. Inpatient FFS claims with discharge dates on or after July 1, 2021, will also be mass adjusted. Mass adjusted FFS claims will appear on Remittance Advices (RAs) beginning on or after Dec. 29, 2021, and will be identified with internal control numbers (ICNs)/Claim IDs that begin with 52 (mass replacements non-check related).

Managed care claims following the same DOS criteria as FFS claims will be mass adjusted. The timing of the mass adjustment will vary by each managed care entity (MCE). The reimbursement change applies to managed care claims for members enrolled in Hoosier Healthwise and Hoosier Care Connect. Reimbursement for inpatient and outpatient claims for members enrolled in the Healthy Indiana Plan (HIP) will remain unchanged. Providers will see the mass adjustment for Hoosier Healthwise and Hoosier Care Connect claims on RAs no later than the following dates:

Anthem: Jan. 28, 2022

■ CareSource: Jan. 26, 2022

■ Managed Health Services (MHS): Jan. 15, 2022

MDwise: Dec. 31, 2021

UnitedHealthcare: Jan. 28, 2022

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