

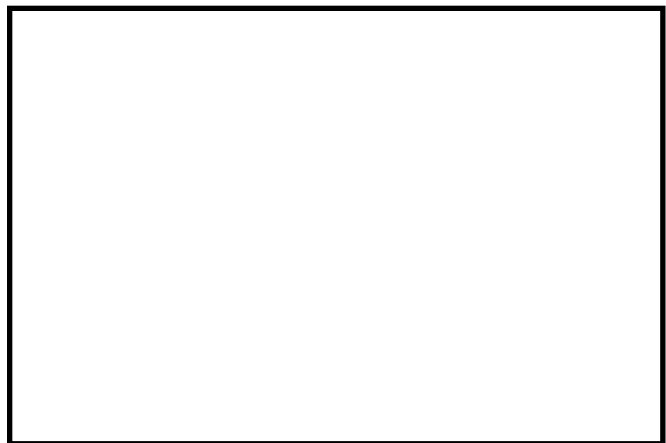
IHCP *bulletin*

INDIANA HEALTH COVERAGE PROGRAMS BT202258 JULY 21, 2022

OMPP clarifies care coordination policies with MCEs

To ensure improved communication between our managed care entities (MCEs) and our Indiana Health Coverage Programs (IHCP) providers, the Office of Medicaid Policy and Planning (OMPP) is clarifying the requirements for IHCP inpatient facilities, community mental health centers (CMHCs) and substance use disorder (SUD) residential providers regarding care coordination with our MCEs.

In the past month, the OMPP has received notice that some facilities have begun requesting a five-digit patient code be provided before speaking with an MCE case manager regarding a member. The OMPP wants to clarify that a member's five-digit code should not be required to speak to a discharge planner, case manager or a therapist of a member admitted to an inpatient or residential facility or receiving care through a CMHC. It is also not required for follow-up after a member's hospitalization. Additionally, the IHCP MCEs do not need a release of information agreement for this level of care coordination.



QUESTIONS?

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