PROVIDER news

INDIANA HEALTH COVERAGE PROGRAMS

NL201404

APRIL 2014



Changes to PEPW process effective April 1, 2014

As announced in *Indiana Health Coverage Programs (IHCP) Bulletin <u>BT201409</u>, changes to the Presumptive Eligibility for Pregnant Women (PEPW) process become effective April 1, 2014. Changes involve both eligibility determinations and the application process used by qualified PEPW providers. See the <u>PEPW</u> page and the <i>Presumptive Eligibility for Pregnant Women Qualified Provider Manual* at indianamedicaid.com for more information.

Dental provider profiles to include additional information on serving children with special needs

In compliance with a mandate from the Centers for Medicare & Medicaid Services (CMS), all dental providers are encouraged to answer three additional questions to complete their provider profiles.

The questions address whether the facility can provide the following:

- Services for children with mobility limitations
- Sedation for children with complex medical or behavioral conditions
- Services for children with intellectual disabilities

Dental providers that are currently enrolled in the Indiana Health Coverage Programs (IHCP) are encouraged to answer these questions by May 1, 2014 via Web interChange. For new dental providers, the additional questions have been incorporated into the provider enrollment application packets.

INSIDE STORIES

- Provider education opportunities
- <u>Electronic Health Records information for providers</u>

Provider education opportunities

MDS/SDG training for Long Term Care providers beginning April 11

The Indiana Health Coverage Programs (IHCP) is conducting provider training focused on the Minimum Data Set 3.0 Case Mix Audit Review and Supportive Documentation Guidelines (SDGs). The training is offered via virtual room the second Friday of each month at 1 p.m. Eastern Time. The first virtual room session will be held Friday, April 11, 2014. See the Provider Education page at indianamedicaid.com to attend.

Virtual dental workshop April 22

The IHCP is offering a two-hour workshop for dental providers Tuesday, April 22, from 9 a.m. – 11 a.m. Eastern Time via virtual room. See the <u>Provider Education</u> page at indianamedicaid.com to register and attend.

Electronic Health Records information for providers

Eligible professionals can submit 2014 meaningful use attestations beginning May 1

Indiana will begin accepting Program Year 2014 meaningful use (MU) attestations for eligible professionals (EPs) May 1, 2014. The Medical Assistance Provider Incentive Repository (MAPIR) is scheduled to be upgraded to comply with Program Year 2014 changes, and this upgrade will be completed by May 1, 2014. To ensure that the upgrade has been completed, please do not submit your attestation until May 1, 2014, or after.

Any EP Program Year 2014 attestation started in MAPIR before the upgrade is complete will be aborted and will have to be restarted after the system upgrade. Please note that all Indiana Health Coverage Programs (IHCP) providers that attest for MU during Program Year 2014 will have a 90-day reporting period.

For additional information, see the <u>Electronic Health Records Incentive</u>

<u>Program</u> web page at indianamedicaid.com. Direct questions to the Indiana

EHR help desk at 1-855-856-9563 toll-free or send email inquiries to

<u>MedicaidHealthIT@fssa.in.gov</u>.

Sign up for the EHR Incentive Program

Indiana Health Coverage Programs (IHCP) incentive payments for the Electronic Health Records (EHR) initiative amount to more than \$163 million since the program's introduction in May 2011. A total of 2,054 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.



RECENTLY PUBLISHED TO THE IHCP WEBSITE

PROVIDER MANUAL UPDATES

The Revision History in each manual (or chapter) provides detailed information about updates.

- <u>IHCP Provider Manual</u> The following chapters of the manual have been updated:
 - Chapter 1 General Information
 - Chapter 7 Reimbursement Methodologies
- 590 Program Provider Manual

BULLETINS

- <u>BT201410</u> Pharmacy updates approved by Drug
 Utilization Review Board February 2014
- <u>BT201411</u> Updates to the 2014 annual Healthcare Common Procedure Coding System code information
- <u>BT201412</u> Hospital Assessment Fee to resume

NEWS FROM RECENT BANNER PAGES

 Coverage of telemedicine services clarified for FQHCs and RHCs

- CMS provides clarification regarding the Hospital Presumptive Eligibility process
- Nursing Facility Satisfaction Survey informational webinars offered in March
- Duplicate ACA primary care physician fee payments
 issued for fourth quarter 2013
- Only revised CMS-1500 (02/12) claim form accepted as of April 1, 2014
- Top two reasons claims are returned to providers: NPI and ICD indicator
- Reminder LTC LOC services are covered benefits only under the FFS Traditional Medicaid program
- The IHCP rates for clinical laboratory services adjusted based on 2014 Medicare rates
- Date changed to May 1 for submission of EP meaningful use attestations
- ICD-10 Q&A

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.
- 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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