

May 12, 1998

To: All Home Health Agency Providers

The new rates for home health services, effective January 1, 1998 and as published in the April 21 bulletin, have been loaded for claims processing. Claims that have been submitted at the new rates will process at the new rates after April 21. Claims processed for dates of service January 1, 1998 and thereafter that were paid at the old rate will be mass adjusted. The net mass adjustment will appear on April 28 and May 5 RAs. Mass-adjusted claims are assigned region number 56 as the first two numbers in the ICN. For claims that were overpaid, recoupment will be made by an offset. For claims that were underpaid, the net difference will be paid and reflected on the RA for April 28 or May 5.

To: All Long Term Care Facilities

This is to inform LTC facilities that have experienced a problem with patient liability not being deducted, that the mass adjustment will appear on this weeks RA, May 5th. This adjustment will include all claims processed during the period of February 1995 through December 1997. The adjustments will appear as region 56 and will establish an Account Receivable for the liability amount.

To: All Indiana Medicaid Providers

The following is an excerpt from page 10-3-3 of the Indiana Medical Assistance Programs Provider Manual:

4

Diagnosis codes that bypass TPL edits are noted below. These diagnoses encompass certain prenatal care, preventive pediatric care, and antepartum conditions or complications. The reference for this provision is 42 CFR 433.139 (b) (3) (I).

- Prenatal Care: V22.0, V22.1, V23.0 - V23.9, V28.0 - V28.9
- Preventive Pediatric Care: V01.0 - V01.9,
V02.0 - V02.9,
V03.0 - V06.9,
V07.0 - V07.9
V20.0 - V20.2
V70.0
V72.0 - V72.3
V73.0 - V75.9
V77.0 - V77.7
V78.2 - V78.3
V79.2 - V79.3
V79.8
V82.3 - V82.4

Claims with the following diagnosis codes are also paid regardless of other insurance coverage or liability as long as the fifth digit of the diagnosis code is "3" (e.g., 640.03): 640.0 - 648.9, 650.0, 651.0 - 658.9, 671.0 - 671.9, 673.0 - 673.8, 675.0 - 676.9. **Please note: in order to bypass the TPL edits, the diagnoses mentioned above must be entered as the primary diagnosis.**

To: All Pharmacy Providers

This is to inform all pharmacy providers that some claims may have erroneously denied on NDC 63395-0101-05 (Floxin 0.3% ear drops) for edit 1016 'Non-participating manufacturer'. The manufacturer of this product, Daiichi Pharmaceutical Corporation, is a participant in the Drug Rebate Program. Any claims that have denied inappropriately for this NDC can now be resubmitted for payment.