



## I M P O R T A N T I N F O R M A T I O N

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**To All Providers:**

- This notifies that the interest rate on Medicaid underpayments and overpayments will decrease from six percent to four percent beginning January 1, 2003. The IHCP discovered in the spring of 2000 that there is a discrepancy in the Indiana Code that affects how Medicaid establishes the rate paid to certain providers because of statutory requirements to pay interest on late payments as well as the rate collected from providers required to pay the IHCP interest on late payments.

Per *IC 12-15-13-3(F)(1) and (2)*, the IHCP uses the same interest rate for both underpayments and overpayments, and the IHCP bases its rate for the next calendar year on the interest rate established by the Department of Revenue by November 1 the previous year. Based on the *Department of Revenue Notice #3*, this rate is four percent for 2003. The Department of Revenue is statutorily required to base this announcement on the average yield on state funds, except for pension trust funds, for the fiscal year ending June 30, 2002, published in the State Auditor's Comprehensive Financial Report (CAFR).

- Due to an overwhelming response to the Indiana Health Coverage Programs (IHCP) fourth quarter 2002 workshops, the Merrillville location is at capacity. A few seats remain for the December 3 Columbus workshop, the December 17 Fort Wayne workshop, and the December 19 Evansville workshop. For any provider not able to attend a fourth quarter workshop, information about the first quarter 2003 workshops will be published in a future IHCP bulletin.
- On January 1, 2003, the 2003 Health Care Procedure Coding System (HCPCS) and Current Procedural Terminology (CPT) code updates will be loaded in IndianaAIM for crossover claims. The code updates will be effective for normal billing on January 1, 2003, but will not be billable until April 1, 2003. For services beginning January 1, 2003, through March 31, 2003, providers should continue billing 2002 HCPCS and CPT codes. After April 1, 2003, providers must bill 2003 HCPCS and CPT codes. The IHCP will deny claims submitted with 2003 codes for dates of service before April 1, 2003. The 2003 HCPCS and CPT codes will be published in a future IHCP bulletin. Direct questions about this billing practice to Health Care Excel (HCE) Medical Policy Department at (317) 347-4500.
- EDS identified claims paid as duplicate for edit 5008 – *This is a duplicate of another claim*. This affects claim types A, B, and C. These claims will be adjusted on January 6, 2003, and appear on the January 14, 2003, RA.

**To All Ophthalmology, Optometry, and Optician Providers:**

- This corrects the IHCP banner pages, *BR200237*, dated September 10, 2002, and *BR200238*, dated September 17, 2002. The replacement of eyeglasses represents the beginning of a new limitation period. Members younger than 19 years of age that have met the criteria for replacement eyeglasses may be eligible for a new pair of eyeglasses one year from the date the

replacement eyeglasses were provided. Members 19 years of age and older that have met the criteria for replacement eyeglasses may be eligible for a new pair of eyeglasses two years from the date the replacement eyeglasses were provided. Refer questions about this policy to HCE Medical Policy Department at (317) 347-4500.

### To All Providers of Hospital Care for the Indigent:

- The Office of Medicaid Policy and Planning (OMPP) has instructed EDS to add a hospital-specific remittance to the November 25, 2002, claim payment total. Myers and Stauffer LC sent a letter dated October 28, 2002, to qualifying acute care hospitals explaining the additional remittance. This hospital-specific payment amount for State fiscal year ending June 30, 2002, is listed on the Financial Transaction page of the remittance advice, and is included in the total check amount for the week. This payment is not claim specific for either the IHCP or hospital care for the indigent (HCI) claim activity. Refer to the IHCP bulletin, *BT199930*, for more information about the HCI program. Direct questions about this payment to Myers and Stauffer LC at (317) 846-9521 in the Indianapolis local area or 1-800-877-6927.

### To All Pharmacy Providers and Prescribing Practitioners:

*Note: The information referenced below is not directed to those providers rendering services in the risk-based managed care (RBMC) delivery system.*

- The new pharmacy vendor, ACS, reminds providers that provider training will be held at various locations in Indiana during the week of December 9, 2002. Refer to IHCP bulletin *BT200259* for a complete list of schedules and locations. Registration must be made by December 6, 2002, to ensure adequate seating for all participants. For assistance with registration call ACS at 1-866-345-8344.
- The IHCP bulletin, *BT200260*, dated November 18, 2002, incorrectly states, "...the Provider Training Meetings will be held at various locations throughout Indiana during the week of December 9, 2003." The correct date is **December 9, 2002**. Refer to IHCP bulletin, *BT200259*, for the session schedules and locations. *BT200260*, also states, "The appropriate completed forms and necessary supporting documentation must be mailed to the following address beginning December 18, 2003." The correct date for mailing completed forms and necessary documentation is **December 18, 2002**.

### To All Hoosier Healthwise MCO-enrolled Primary Medical Providers:

- Effective January 1, 2003, Hoosier Healthwise primary medical providers (PMPs) enrolled with a managed care organization (MCO) will no longer receive semi-monthly member enrollment rosters from EDS. The MCO networks currently provide, and will continue to provide, member enrollment roster information to their contracted network PMPs. The OMPP is implementing this change as a program cost control measure. This change does not affect PMPs enrolled in the PrimeStep primary care case management program. PrimeStep PMPs will continue to receive membership roster information from EDS on a semi-monthly basis.

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