



## All Providers

### First Steps Web Site Update

The following new reference items have been posted to the First Steps Web site at

<https://www.infirststeps.com/matrix/default.asp>: Subscribers to the IHCP E-mail Notification service were notified of these changes on April 19, 2006. To subscribe to this service visit the IHCP Web site at [http://www.indianamedicaid.com/ihcp/mailling\\_list/default.asp](http://www.indianamedicaid.com/ihcp/mailling_list/default.asp).

- Provider Billing Information Quick Reference (<https://www.infirststeps.com/matrix/docs/misc/TR320-FSBillingQuickReference.pdf>)
- Provider Quick Reference (<https://www.infirststeps.com/matrix/docs/misc/TR329-FSQuickReference.pdf>)
- Reading the Remittance Advice (<https://www.infirststeps.com/matrix/docs/misc/TR318-FSReadingtheRemittanceAdvice.pdf>)

The following links have been added to the *Other Links* section under the **Provider Enrollment** tab:

- Report your National Provider Identifier (NPI) to the IHCP (<http://www.indianamedicaid.com/ihcp/ProviderServices/npi.asp>)
- Subscribe to receive IHCP Email Notifications ([http://www.indianamedicaid.com/ihcp/mailling\\_list/default.asp](http://www.indianamedicaid.com/ihcp/mailling_list/default.asp))

Changes have been made to the **Edit Matrix/Log In** tab of the First Steps Web site at <https://www.infirststeps.com/matrix/update/portal/login.asp>. The *What's New!* section of the *Update Your Matrix* page briefly outlines the added functionality. (This page can be accessed after logging into the Matrix.)

- First Steps providers now may update Matrix information regarding their *Fax Number, Mobile Number, and E-mail Address*.
- The *Misc Info* section has been changed to be the *Agency Info* section. Providers may enter text information regarding the agency similar to the *Additional Comments* section.

### National Provider Identifier Web Page

A National Provider Identifier (NPI) Web page has been added to the IHCP Web site at <http://www.indianamedicaid.com/ihcp/ProviderServices/npi.asp>. This page contains information about the *IHCP NPI Implementation Plan*, instructions for obtaining an NPI, links to other resources on the Web, and informational documents like the *NPI Fact Sheet*. This page is scheduled to be updated weekly.

### Hints for IHCP Electronic Claims Processing

The purpose of this article is to help providers submit claims to the Indiana Health Coverage Programs (IHCP) to ensure more effective, and efficient adjudication. Providers may electronically submit claims using the 837 HIPAA-compliant claim submission or Web interChange.

**837 Transactions:** Providers may electronically submit claims using an approved software vendor, clearinghouse, billing service.

For more information about electronic submission of claims, see the IHCP Provider Manual, Chapter 3 available on the IHCP Web site at <http://www.indianamedicaid.com/ihcp/Publications/manuals.htm>.

**Web InterChange:** Web interChange is a Web-based application for electronic claims submission where providers can inquire about claims status and payment information, verify member eligibility, view provider profile information, and submit and view prior authorizations. The application is **free** to all IHCP providers who have Internet connectivity.

To apply for a user ID and password, complete the application found at <https://interchange.indianamedicaid.com> by clicking on **How To Obtain an ID**. Print, complete, and mail the application to the following address:

**EDS Indiana Title XIX  
Electronic Solutions Help Desk  
950 North Meridian Street, Suite 1150  
Indianapolis, IN 46204-4288**

Keep a copy for your records. You will be notified via e-mail when your application is approved.

For more information about Web interChange, see the *IHCP Provider Manual*, Chapter 3, Section 3.

Direct questions about Web interChange to the Electronic Solutions Helpdesk at (317) 488-5160 in the Indianapolis local area, or 1-877-877-5182, or by e-mail at [INXIXElectronicSolution@eds.com](mailto:INXIXElectronicSolution@eds.com).

**Attachments for Electronic Claims Submission:** If a claim is submitted electronically and requires an attachment, all attachments must be submitted on paper and the provider must complete a *Claims Attachment Coversheet* available on the IHCP Web site at <http://www.indianamedicaid.com/ihcp/Publications/forms.asp> under the heading of *Claim Forms (Non-Pharmacy)*.

A *Claims Attachment Coversheet* must be completed for each claim submitted. When sending supporting documentation for an electronic claim submission, the provider must write a unique attachment control number (ACN) at the top of each page of the attachment. The ACN is unique; therefore, it may be used only once.

If an electronic claim requires an attachment, it will suspend for processing until the attachment arrives.

If a claim is resubmitted to the IHCP, the provider must use a different ACN when resubmitting the attachment.

**IHCP E-Mail Notifications Program**

On January 17, 2006, EDS and the IHCP launched the IHCP E-Mail Notifications program. This program automatically issues e-mails to subscribers when IHCP publications and announcements are posted to the IHCP Web site. Complete information about this feature is available in the April 2006 issue of the Provider Monthly Newsletter (*NL200604*). To subscribe to the service, visit the IHCP Web site at [http://www.indianamedicaid.com/ihcp/mailling\\_list/default.asp](http://www.indianamedicaid.com/ihcp/mailling_list/default.asp).

**Pharmacies and Prescribing Providers**

**State MAC Rate Update**

Effective June 1, 2006, the drug groups in Table 1 will be added to the State Maximum Allowable Cost (State MAC) for legend drugs rate list. The State MAC rates for Fentanyl patches will apply to generic products only.

Table 1 – State MAC Legend Drug Rate List **Additions**, Effective June 1, 2006

Drug Name	State MAC Rate	Drug Name	State MAC Rate
FENTANYL 100 MCG/HR PATCH	31.35660	FENTANYL 50 MCG/HR PATCH	14.63580
FENTANYL 25 MCG/HR PATCH	8.15820	FENTANYL 75 MCG/HR PATCH	22.85400

Effective June 1, 2006, the State MAC rates for the drugs in Table 2 will be decreased.

Table 2 – State MAC Legend Drug Rate **Decreases**, Effective June 1, 2006

Drug Name	State MAC Rate	Drug Name	State MAC Rate
MUPIROCIN 2% OINTMENT	0.82255	NABUMETONE 750 MG TABLET	0.48256
ALBUTEROL 0.83 MG/ML SOLUTION	0.04059	LEVOTHYROXINE 137 MCG TABLET	0.39315
WARFARIN SODIUM 1MG TABLET	0.18681	MORPHINE SULF ER 15 MG TABLET	0.39177
AMANTADINE 100 MG CAPSULE	0.26901	ALLOPURINOL 300 MG TABLET	0.09237
PREDNISOLONE AC 1% EYE DROP	0.94080	FLUVOXAMINE MAL 100 MG TAB	0.45723
ERYTHROMYCIN 2% SOLUTION	0.03645	WARFARIN SODIUM 4 MG TABLET	0.17022
PREDNISONE 5 MG TABLET	0.02187	BUPROPION SR 100 MG TABLET	0.87453

(Continued)  
Page 2 of 3

Table 2 – State MAC Legend Drug Rate **Decreases**, Effective June 1, 2006

Drug Name	State MAC Rate	Drug Name	State MAC Rate
SULFASALAZINE 500 MG TABLET	0.10281	PROMETHAZINE W/DM SYRUP	0.01530
CLOTRIMAZOLE 10 MG TROCHE	1.11767	LOVASTATIN 20 MG TABLET	0.36525
LOVASTATIN 40 MG TABLET	0.67277	CLARITHROMYCIN 250 MG TABLET	1.42512

Effective May 1, 2006, the State MAC rates for the drugs in Table 3 are **terminated**.

Table 3 – State MAC Legend Drug Rate List **Terminations**, Effective May 1, 2006

Drug Name	State MAC Rate	Drug Name	State MAC Rate
HYDROCODONE/APAP ELIXIR	0.02603	METRONIDAZOLE ER 750 MG TAB	5.43153
LINDANE 1% SHAMPOO	1.67970		

Direct questions regarding the State MAC for legend drugs to the Myers and Stauffer Pharmacy Unit at (317) 816-4136 in the Indianapolis local area, or 1-800-591-1183, or e-mail at [pharmacy@mslc.com](mailto:pharmacy@mslc.com).

### Albuterol Inhalers, PDL Status

In response to reports of sporadic supply problems associated with albuterol metered dose inhalers, effective Monday, April 3, 2006, the Office of Medicaid Policy and Planning (OMPP) made the following changes to the Indiana Medicaid Preferred Drug List (PDL):

- Proventil HFA inhaler moved from non-preferred to preferred.
- Ventolin HFA inhaler moved from non-preferred to preferred.
- Xopenex HFA inhaler moved from non-preferred to preferred.

Existing quantity limits that currently apply to albuterol inhalers also apply to these products.

For current information related to the albuterol inhaler shortage refer to the *Drug Shortages* page of the U.S. Food and Drug Administration Web site at <http://www.fda.gov/cder/drug/shortages/default.htm>.

**Contact Information:** Direct prior authorization (PA) requests and questions about the PDL to the ACS Clinical Call Center at 1-866-879-0106.

Direct questions about this bulletin to EDS Customer Assistance at (317) 655-3240, in the Indianapolis local area, or 1-800-577-1278. Option 1 is for pharmacy.

### Medicare Prescription Drug Coverage – Medicare Part D

Effective January 1, 2006, the Centers for Medicare and Medicaid Services (CMS) implemented the new Medicare prescription drug coverage, also known as Medicare Part D. This coverage is a new benefit to help Medicare members pay for prescription drugs.

The IHCP Web site includes a section titled *Medicare Prescription Drug Coverage*. Providers should visit this section periodically at <http://www.indianamedicaid.com/ihcp/ProviderServices/MedicareD.asp> for the latest information.

For more information about the Medicare prescription drug benefit, visit the CMS Web site at <http://www.cms.hhs.gov/PrescriptionDrugCovGenIn/>.

If you need additional copies of this banner, please download them from the IHCP Web site at [http://www.indianamedicaid.com/ihcp/Publications/banner\\_results.asp](http://www.indianamedicaid.com/ihcp/Publications/banner_results.asp). To receive e-mail notifications of future IHCP publications, subscribe to the IHCP E-mail Notifications at [http://www.indianamedicaid.com/ihcp/mailing\\_list/default.asp](http://www.indianamedicaid.com/ihcp/mailing_list/default.asp).