



All Providers

Screening and Brief Intervention Services

For dates of service on or after October 1, 2008, the Indiana Health Coverage Programs (IHCP) reimburses providers for screening and brief intervention (SBI) services. SBI identifies and intervenes with individuals who are at risk for substance abuse-related problems or injuries. Providers may bill procedure code 99408 or 99409 only after an individual has received screening for alcohol or drug abuse by a healthcare professional. These services are separate from an initial evaluation and should not be billed with procedure code 90801. Screening and brief intervention services no longer require prior authorization. Procedure codes 99408 and 99409 are limited to one structured screening and brief intervention per individual, every three years, when billed by the same provider. This will not be counted toward the number of annual office visits allowed per year for an individual.

Precertified Qualified Provider Training for Presumptive Eligibility

Providers in the Muncie area that are interested in becoming qualified providers for Presumptive Eligibility need to start the enrollment process by answering the three qualifying questions on Web interChange and registering as soon as possible to ensure a place in the training session in that area. A training session has been scheduled in Muncie on May 22, 2009, from 1-4 p.m. If you have questions, refer to [BT200910](#), dated April 30, 2009, regarding Presumptive Eligibility for Pregnant Women on the IHCP Web site at <http://www.indianamedicaid.com/ihcp/index.asp> or contact the Presumptive Eligibility workshop information line at (317) 488-5101 for workshop dates, times, and locations. Or call the Presumptive Eligibility Provider Representative at (317) 488-5363 if you need additional information.

Note: Kosciusko and Martin counties were inadvertently omitted from the list of modernized counties listed in bulletin [BT200910](#), which introduced Presumptive Eligibility (PE). These counties have since been added to the list, and the corrected bulletin has been posted to the IHCP Web site at <http://www.indianamedicaid.com/ihcp/Bulletins/BT200910.pdf>.

Removal of Prior Authorization for Kyphoplasty

Banner page [BR200621](#), dated May 23, 2006, stated that effective July 1, 2006, prior authorization (PA) was required for kyphoplasty. Effective May 1, 2009, PA for kyphoplasty is no longer required. Providers are required to maintain documentation that supports medical necessity for kyphoplasty. The documentation must include evidence that standard medical therapy has failed to alleviate the member's symptoms. Claims for kyphoplasty are subject to audit to verify medical necessity.

Healthcare Common Procedure Coding System (HCPCS) codes for kyphoplasty include 22523, 22524, and 22525.

Medicare Payer Identification Code Update

The Indiana Health Coverage Programs (IHCP) has performed a system upgrade to valid Medicare Payer Identification (ID) Codes. The new codes are valid as of April 17, 2009. The old codes will be valid until May 15, 2009.

The new code list is available at http://www.indianamedicaid.com/ihcp/Misc_PDF/Medicare_Payer_IDs.pdf.

Please direct questions regarding the update to the EDI Solutions Help Desk at (317) 488-5160 or 1-877-877-5182.

Vision Providers

Polycarbonate Lenses Now Reimbursable for Members Age 19 and Younger

Effective June 1, 2009, the IHCP will routinely reimburse providers for polycarbonate lenses for members age 19 years old and younger. Providers may submit claims for services rendered for dates of service beginning June 1, 2009, using procedure code V2784 – Lens, polycarbonate or equal, any index, per lens with the appropriate corresponding lens procedure code. Polycarbonate lenses will no longer require prior authorization and will not be subject to specific medical conditions for members age 19 and younger.

Dental Providers

Dental Workshop Scheduled for June

EDS Provider Relations is offering workshops for the dental provider community. This is an excellent opportunity to become more familiar with Medicaid dental policies, procedures, and billing tools and methodology. Details about the workshops follow:

Dental Workshop
June 11, 2009
1-3 p.m.
St. Catherine's Professional Office Building
4321 Fir Street
East Chicago, IN 46312

The agenda includes the following:

- National Provider Identifier (NPI) information and updates
- Dental billing and rendering provider information
- Working with the dental cap
- Dental policies
- Live demonstration and discussion of all facets of Web interChange
- An extensive question-and-answer period

Providers may enroll in the workshop at <http://www.indianamedicaid.com/ihcp/index.asp> under Provider Services > Education Opportunities > Workshop Registration. If you have questions, please call Provider Relations at (317) 488-5072.

Home and Community-Based Waiver Providers

Special Processing Required for Home and Community-Based Services Overlapping Hospice Level-of-Care or Long-Term Care Discharge Dates

It is appropriate for transition-related Home and Community-Based Services (HCBS) Waiver services to be provided on the same day as long-term care client discharges. Provision of certain HCBS Waiver services to clients with hospice level of care may also be appropriate. Payment for services provided under either of these circumstances will be systematically denied unless specially handled.

Providers submitting claims for waiver services on the client's date of discharge from the long-term care facility or during a period of hospice level of care should contact their EDS field consultant for special claim handling. Providers who have had claims previously denied for these reasons should also contact their field consultant for special handling. To locate the EDS field consultant assigned to your area, follow the Provider Services links from the IHCP Web page: <http://www.indianamedicaid.com/ihcp/index.asp>.

Provider Workshops

Second-quarter Workshops Are Here!

The IHCP is offering quarterly provider workshops free of charge. Topics include the IHCP Family Tree, electronic transactions, presumptive eligibility and notification of pregnancy, Hoosier Healthwise open enrollment, a managed care roundtable, and more. Workshop agendas, dates, registration deadlines, and locations are online at <http://www.indianamedicaid.com/ihcp/ProviderServices/workshops.asp>. You may register online or by using the registration form printed in the IHCP provider newsletter. For more information about the workshops, please contact the workshop line at (317) 488-5072.

Correction!

IHCP provider workshops will take place across the state during May and June. Workshop descriptions on page 8 of the April IHCP provider newsletter, [NL200904](#), incorrectly stated that the Vaccines for Children (VFC) Program benefits children under age 21. The VFC program benefits children ages 18 and under.

Contact Information

If you have questions about the articles published in this banner page, please contact Customer Assistance at (317) 655-3240 in the Indianapolis local area or toll-free at 1-800-577-1278, unless otherwise noted.

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