



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.

Kosciusko and Martin Counties Added to List of Modernized Counties

Kosciusko and Martin counties were inadvertently omitted from the 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.

Pharmacy and Prescribing Practitioners

Indiana Health Coverage Programs Ceases Reimbursement for Polyethylene Glycol

The Centers for Medicare & Medicaid Services (CMS) advised on April 23, 2009, that the Drug Efficacy Study Implementation (DESI) status of prescription-only polyethylene glycol (PEG) 3350 oral products changed from a payable DESI 2 code (safe and effective or non-DESI) to a nonpayable DESI 5 code (indicates a less-than-effective or DESI drug). As a result, the Indiana Medicaid fee-for-service pharmacy benefit ceased reimbursement of these products. Please refer to the complete CMS notification posted at www.indianamedicaid.com under the Pharmacy tab and CMS Releases.

The following MiraLAX products are covered by the fee-for-service pharmacy benefit and have been added to the over the counter (OTC) Drug Formulary with a state maximum allowable cost (SMAC) of \$0.03529 per gram:

- 11523-7234-02 – MiraLAX Powder, 119 Grams
- 11523-7234-03 – MiraLAX Powder, 238 Grams
- 11523-7234-04 – MiraLAX Powder, 510 Grams

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.

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.

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.