

JUNE 16, 2009

# **All Providers**

## Implementation of Paperless Provider Communications

To move toward to a greener, paperless, operating environment, the Indiana Health Coverage Programs (IHCP) will no longer be printing and mailing certain provider communications. Effective September 1, 2009, the following communications will only be available online:

- · Banner pages
- Newsletters (including Drug Utilization Review Board newsletters)
- Bulletins
- Remittance Advices (RAs)

Banner pages, newsletters, and bulletins are currently published online, in addition to being printed and mailed. On or after September 1, 2009, providers will still be able to access these documents on the IHCP Provider Web site at <a href="http://www.indianamedicaid.com/ihcp/index.asp">http://www.indianamedicaid.com/ihcp/index.asp</a>.

• To keep informed of current communications and policy updates, providers should enroll in the IHCP's E-mail Notifications. To enroll, go to <a href="http://www.indianamedicaid.com/ihcp/mailing\_list/default.asp">http://www.indianamedicaid.com/ihcp/mailing\_list/default.asp</a>. Providers who are already enrolled should verify that their e-mail addresses are correct.

RAs are currently printed and mailed to the provider's Pay To address weekly. As of September 1, 2009, RAs will no longer be printed. Instead, all providers will be able to access RAs online through our secure Web site via Web interChange.

Providers that do not have access to Web interChange are encouraged to apply as quickly as possible to ensure that access to Remittance Advices is not interrupted. Please refer to <u>BT200912</u>, dated May 19, 2009, for Web interChange access instructions.

The paper checks will continue to be mailed on or after September 1, 2009, for providers that are not enrolled in electronic funds transfer (EFT).

# Current Procedural Terminology Code 88299 – Unlisted Cytogenetic Study to Require Manual Pricing

Current Procedural Terminology (CPT®) code 88299 – Unlisted Cytogenetic Study is currently reimbursable at a maximum rate of \$10. Effective for dates of service on or after July 1, 2009, this procedure code will be subject to manual pricing and will require documentation for reimbursement.

For more information, contact Customer Assistance at (317) 655-3240 in the Indianapolis local area or toll-free at 1-800-577-1278.

# **Clarification Regarding Presumptive Eligibility**

As discussed in <u>BT200910</u>, dated April 30, 2009, providers enrolled in the IHCP that meet certain requirements can now enroll as qualified providers to perform duties related to enrolling pregnant women for immediate coverage through presumptive eligibility (PE). Please note that only employees of qualified providers may perform PE duties. Eligibility assistance companies and their employees cannot perform PE duties on behalf of a qualified provider.

EDS P.O. Box 7263 Indianapolis, IN 46207-7263

# **Primary Medical Providers, Clinics, and Hospitals**

# **Reimbursement for Tobacco Cessation Counseling**

Earlier this year, the federal tax on cigarettes and all other tobacco products increased. Providers are encouraged to discuss tobacco cessation with members. The IHCP covers tobacco cessation counseling and prescription cessation aids.

Providers may refer any Indiana patient to the Indiana Tobacco Quitline, 1-800-QUIT-NOW, which offers education and coaching over the telephone, similar to the toll-free smoking quit lines across the country. The services offered by the Quitline are confidential and provided free of charge to Indiana residents.

Telephone counseling has proved effective in improving overall quit rates (a 15 percent quit rate when phone counseling is provided, versus a 10 percent quit rate with no phone counseling). The quit rate further improves when phone counseling is combined with pharmacotherapy – a 28 percent quit rate for phone counseling plus medications versus a 23 percent rate with medication alone). (Source: Surgeon General's Treating Tobacco Use and Dependence: 2008 Update, http://www.surgeongeneral.gov/tobacco/.)

The Quitline also has online resources for tobacco users, healthcare providers, family/friends, and employers at <a href="http://www.indianatobaccoquitline.net">http://www.indianatobaccoquitline.net</a>. The Indiana Tobacco Quitline is a program of the Indiana Tobacco Prevention and Cessation Agency (ITPC). Contact ITPC at (317) 234-1787 if you have any questions about Quitline services.

The Quitline is designed so you can easily refer clients to the program and is staffed by professionally trained smoking cessation Quit Coaches. The Indiana Tobacco Quitline offers a fax referral program for Indiana residents and physicians. Providers can simply ask, advise, and refer tobacco users to the Indiana Quitline using the fax referral form found at <a href="http://www.indianatobaccoquitline.net/documents/QLfaxreferral.pdf">http://www.indianatobaccoquitline.net/documents/QLfaxreferral.pdf</a>. Instructions are also available at <a href="http://www.indianatobaccoquitline.net/documents/HCproviderinstructions.pdf">http://www.indianatobaccoquitline.net/documents/HCproviderinstructions.pdf</a>.

The Quitline staff will even fax back a report to your office to tell you if the client was reached, enrolled in services, and planned to quit.

The effectiveness of counseling is comparable to pharmocotherapy alone. Counseling plus medication provides additive benefits. Preferred tobacco deterrent agents include bupropion SR 150, Chantix, Commit lozenges, Nicoderm, Nicorette, nicotine gum, and nicotine patches.

Even brief counseling is effective for facilitating quit attempts. If you choose to counsel patients in your office, the IHCP covers tobacco cessation counseling with Healthcare Common Procedure Coding System (HCPCS) code S9075 – Smoking–Smoking cessation treatment. One unit of S9075 is 15 minutes of service. Further instructions can be found in the IHCP Provider Manual, Chapter 8.

# **Providers Using Web interChange**

# Web interChange Password Rule Changes

Beginning June 30, 2009, the password rule for Web interChange passwords will be enhanced. Web interChange users will not be allowed to change their passwords using the Change Password function more than once each day. If users have changed their passwords and attempt to change them a second time during the same day, they will receive a message indicating that the password change is not allowed. The user must wait until the following day to change the password.

Additionally, Web interChange users will not be able to reset their own passwords using the Automated Password Reset function more than three times each day. If users reset their passwords three times in the same day and attempt to reset it a fourth time, they will receive a message indicating that the password reset is not allowed. The user must wait until the following day to reset the password.

#### **Password Change or Password Reset Assistance**

If users need to change a password more than once in the same day or reset their passwords more than three times in the same day, they must contact their Web interChange administrator. The administrator can reset the password. Users must answer their two security questions before the administrator will reset the password.

Users who are not sure who the Web interChange administrator is for their organization can use the Administrator Listing function, available on the logon screen of Web interChange at <a href="https://interchange.indianamedicaid.com">https://interchange.indianamedicaid.com</a>.

Questions regarding this enhancement to Web interChange password security should be directed to the EDS EDI Solutions Help Desk toll-free at 1-877-877-5182 or locally at (317) 488-5160.

## **Vision Providers**

#### Correction!

Please note: The effective date for coverage of this benefit has changed.

## Polycarbonate Lenses for Members Age 19 and Younger

Effective January 1, 2010, 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 January 1, 2010, 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 years old and younger.

# **Pharmacy and Prescribing Practitioners**

# **CMS** Reverses Directive for Polyethylene Glycol

Banner page <u>BR200921</u>, dated May 26, 2009, advised pharmacy and prescribing practitioners of an April 23, 2009, directive from the Centers for Medicare & Medicaid Services (CMS) instructing states to cease reimbursing for six prescription-only polyethylene glycol (PEG) 3350 oral products. CMS has reversed its stance by issuing to states the following statement on May 26, 2009:

We recently emailed the attached notification which instructed you to change the DESI code of several Polyethylene Glycol 3350 NDCs from a code of 2 (i.e., rebate-eligible) to a code of 5 (i.e., non-rebate-eligible). These changes resulted from a Federal Register notice issued by the FDA on October 24, 2008, which proposed to withdraw approval of several Polyethylene Glycol 3350 Abbreviated New Drug Applications (ANDAs). After further review, however, we have determined that no action should be taken with respect to these NDCs at this time. As a result, the NDCs in the attached remain eligible for coverage under the Medicaid Drug Rebate Program and should be changed in your Medicaid Drug Rebate system to reflect a DESI code of 2 as of the date of this email.

We apologize for any inconvenience that this may cause.

Sincerely

**CMS MDR Operations** 

The "attached notification" referred to above contained the following products/National Drug Codes (NDCs):

- 00574-0412 Polyethylene Glycol 3350 NF Powder for Oral Solution
- 10572-0810 MiraLAX
- 49884-0146 Polyethylene Glycol
- 51991-0457 Polyethylene Glycol 3350 NF
- 52268-0800 MiraLAX
- 62175-0442 GLYCOLAX

In accordance with CMS' retraction of noncoverage, these products are again reimbursable under the fee-for-service Indiana Medicaid pharmacy benefit as of May 26, 2009.

EDS Page 3 of 4 P. O. Box 7263 Because of the April 23 CMS determination of noncoverage status for the legend PEG products, the over-the-counter (OTC) MiraLAX products listed below were added to the OTC Drug Formulary. Given the federal reversal of noncoverage policy for the prescription-only PEG products, these MiraLAX products are being removed from the OTC Drug Formulary and are noncovered under the fee-for-service pharmacy benefit as of the date of this banner page:

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

# **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.

If you need additional copies of this banner page, please download them from the IHCP Web site at <a href="http://www.indianamedicaid.com/ihcp/Publications/banner">http://www.indianamedicaid.com/ihcp/Publications/banner</a> results.asp. To receive e-mail notifications of future IHCP publications, subscribe to the IHCP E-mail Notifications at <a href="http://www.indianamedicaid.com/ihcp/mailing">http://www.indianamedicaid.com/ihcp/mailing</a> list/default.asp.