

IHCP *banner page*

INDIANA HEALTH COVERAGE PROGRAMS

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Changes to eligibility verification for HIP and HHW members

Changes are being made to the Eligibility Verification System (EVS) for both Healthy Indiana Plan (HIP) and Hoosier Healthwise (HHW) members. These changes, which affect Automated Voice Response, Omni, Web interChange, and the 270/271 transaction systems, will be implemented at the end of March 2011.

With the changes, Anthem's delivery system information will display in EVS with two possible designations: 1) primary medical provider (PMP) and St. Francis delivery system; or 2) PMP and no delivery system. If a member is linked to a delivery system (that is, the St. Francis delivery system), providers should follow Anthem's billing instructions. If a member is not linked to a delivery system (that is, not part of the St. Francis delivery system), claims should be billed directly to Anthem.

MDwise members who do not yet have PMP assignments will be displayed as linked to the Hoosier Alliance network. In this situation, providers should submit claims to Hoosier Alliance. The process for billing claims for MDwise members with PMP assignments remains unchanged.

QUESTIONS?

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.

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