

IHCP *banner page*

INDIANA HEALTH COVERAGE PROGRAMS

BR201142

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The HIPAA 5010 compliance date is fast approaching!

Has your billing software vendor or clearinghouse been approved?

The mandatory compliance date for the American National Standards Institute (ANSI) *Health Insurance Portability and Accountability Act (HIPAA)* version 5010 for all covered entities is January 1, 2012.

Effective January 1, 2012, the Indiana Health Coverage Programs (IHCP) will reject electronic transactions that are not submitted in the HIPAA-compliant 5010 format. Providers that are unable to submit claims in the compliant 5010 format risk possible delay in claim payment.

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The IHCP is in the process of vendor testing 5010 transactions. All software vendors and clearinghouses have been sent testing information and encouraged to begin testing. Testing should be completed by October 31, 2011, to allow plenty of time to convert clients to 5010 before the January 1 deadline. However, as of October 17, 2011, 43% of the software vendors and clearinghouses had begun submitting test transactions. Only 23% of vendors and clearinghouses had been approved for 5010 compliance.

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You can find a list of the [software vendors and clearinghouses approved for 5010 compliance](#) on indianamedicaid.com. If you do not see your software vendor or clearinghouse on the approved list, you must contact your vendor or clearinghouse to ensure that it is in the process of testing with the IHCP.

As of October 17, 2011, only 23% of vendors and clearinghouses had been approved for 5010 compliance.

Additional information about Indiana Medicaid and HIPAA 5010

- **New Trading Partner Agreement available now** – The revised [Trading Partner Agreement](#) is now available on indianamedicaid.com (General Provider Services > Electronic Data Interchange Solutions (EDI) > Trading Partner Registration Procedures). All trading partners are required to submit new Trading Partner Agreements before exchanging version 5010 transactions.
- **Submission Summary Report (SSR)** – The Submission Summary Report (SSR) will replace the Biller Summary Report that trading partners now receive for 4010A1 transactions. The SSR provides detailed information about claims that reject due to HIPAA compliance errors. The SSR also points the trading partners to the exact claims that caused the rejection, and displays technical and business explanations of the errors. This report will enable trading partners and providers to correct and resubmit rejected claims in a timely manner.
- **Trading partner IDs** – Trading partners will not be issued new trading partner IDs for submitting version 5010 transactions. You will continue to use your current production trading partner ID.
- **Web interChange users** – Providers that submit claims, verify eligibility, or view claim inquiry information via Web interChange will not need to test for HIPAA 5010. Web interChange will be updated with the appropriate HIPAA 5010 requirements.
- **Dual processing** – Indiana Medicaid will not allow dual processing of version 4010A1 and 5010 transactions. When a trading partner begins submitting the HIPAA 5010 version of a transaction, it will not be able to submit the 4010A1 version using the same submitter ID.

Contact information

If you have questions related to the 5010 conversion, please email the HP 5010 testing team at INXIXTradingPartner@hp.com or call (317) 488-5160 or 1-877-877-5182 toll free.

Beware of construction if you plan to attend the IHCP Annual Provider Seminar

The Indianapolis Marriott East, site of the October 25-27 IHCP Annual Provider Seminar, is under construction. The main entrance of the hotel is closed. All attendees must enter via the Conference Center at the north side of the facility. Follow the signs posted around the hotel. For more information, see the [Provider Education page](#) of indianamedicaid.com.

Reimbursement of CPT code 88361 in the facility setting

The Indiana Health Coverage Programs (IHCP) established reimbursement for Current Procedural Terminology (CPT^{®1}) code 88361 – *Morphometric analysis, tumor immunohistochemistry (e.g., HER-2/NEU, estrogen receptor/progesterone receptor), quantitative or semiquantitative* when billed in the facility setting. For dates of service on or after December 1, 2011, the outpatient facility reimbursement for CPT code 88361 will be \$56.42. Also, consistent with the current UB Editor, effective November 11, 2011, CPT code 88361 has been linked to revenue codes 310 – *Pathology Lab*, 312 – *Pathology/Histology*, and 319 – *Pathology Other*. For reimbursement, providers must bill the procedure and a revenue code together for dates of service on or after November 11, 2011.

Please note that the IHCP reimbursement methodology for payment of outpatient surgical claims remains unchanged. Outpatient surgeries continue to be reimbursed at all-inclusive rates that include related nonsurgical procedures.



CPT code 51798 linked to revenue codes 360 and 490

In response to provider requests, the Office of Medicaid Policy and Planning (OMPP) reviewed the revenue code linkages for Current Procedural Terminology (CPT^{®1}) code 51798 – *Measurement of post-surgical urine and/or bladder capacity by ultrasound* and determined that linkage to revenue codes 360 – *Operating Room Services* and 490 – *Ambulatory Surgical Care* is appropriate. As a result, for reimbursement, providers must bill CPT code 51798 together with revenue code 360 or 490 for dates of service on or after December 1, 2011. Additionally, the outpatient facility rate will be updated to \$21.86 for dates of service on or after December 1, 2011.

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QUESTIONS?

If you have questions about this publication, 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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