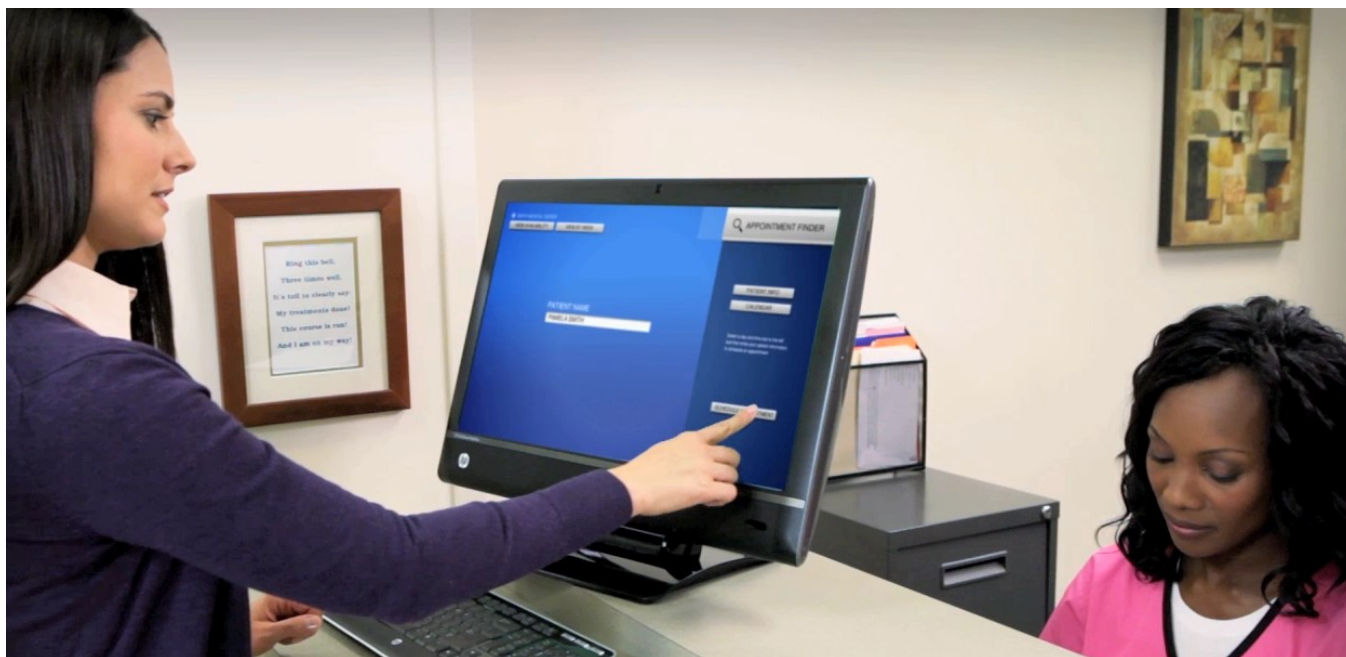


# IHCP *banner page*

INDIANA HEALTH COVERAGE PROGRAMS

BR201152

DECEMBER 27, 2011



## Procedure codes A9274, A5083, L3927, and L3931 have been linked to provider specialty 250 – DME

Effective February 1, 2012, the following Healthcare Common Procedure Coding System (HCPCS) codes will be linked to provider specialty 250 – *Durable Medical Equipment (DME)*:

- A9274 – *External ambulatory insulin delivery system, disposable, each, includes all supplies and accessories*
- A5083 – *Continent device, stoma absorptive cover for continent stoma*
- L3927 – *Finger orthosis, proximal interphalangeal (pip)/distal interphalangeal (dip), without joint/spring, extension/flexion (e.g. static or ring type), may include soft interface material, prefabricated, includes fitting and adjustment*
- L3931 – *Wrist hand finger orthosis, includes one or more nontorsion joint(s), turn-buckles, elastic bands/springs, may include soft interface material, straps, prefabricated, includes fitting and adjustment*

### MORE IN THIS ISSUE

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If you are enrolled as provider specialty 250, you may bill procedure codes A9274, A5083, L3927, and L3931 for dates of service on or after February 1, 2012. The provider [code sets](#) on indianamedicaid.com will be updated to reflect the provider type and procedure code linkages.



### Take the IHCP's ICD-10 survey!

A link to the ICD-10 IHCP Provider Readiness Survey will be posted on [indianamedicaid.com](http://indianamedicaid.com) February 7 – watch IHCP publications for announcements.

## Claims for pain management services to be mass adjusted

Professional claims for pain management services performed by provider specialties 311 – *Anesthesiologist* and 094 – *Certified Registered Nurse Anesthetist (CRNA)* that have billed codes within the range of 64400-64530 will be mass adjusted. The code range 64400-64530 has been removed from the code auditing logic rules 4192 – *Non-anesthesia Services are not eligible for cross walk to an anesthesia procedure code* and 4193 – *Service billed not reimbursable by an anesthesiologist* for provider specialties 311 – *Anesthesiologist* and 094 – *CRNA*. Mass-adjusted claims will begin appearing on the January 17, 2012, Remittance Advice (RA) and will be identified with internal control numbers (ICNs) that begin with region code 56.

If the original paid claim was underpaid, the net difference is paid and reflected on the RA. If the claim was overpaid, the net difference appears as an accounts receivable. The accounts receivable will be recouped at 100% from future claims paid to the respective provider number.

## Get ready for the *Affordable Care Act* – sign up for IHCP training now!

The Indiana Health Coverage Programs (IHCP) will offer virtual-room training in January to prepare for the impact of the *Affordable Care Act* (ACA) on provider enrollment. The training was created for credentialing staff and organization owners, and includes:

- New provider screening requirements
- Fees associated with enrolling and revalidating with the IHCP
- How to pay the enrollment fee
- Identification of “high-risk” providers
- Database checks to which owners and managers are subject

Best of all, because this is virtual training, your staff doesn't need to leave the office!

Register now – participation is limited to 125 per session. Dates for the two-hour session are:

- January 6, 2012, at 10 a.m.\*
- January 13, 2012, at 10 a.m.\*

\*Please note times listed are Eastern Standard Time.

Visit the [Provider Education page](http://indianamedicaid.com) of [indianamedicaid.com](http://indianamedicaid.com) (General Provider Services > Provider Education) today to register for the ACA sessions and check other provider education offerings.



## Web interChange virtual room training coming in January 2012!

- January 11, 2012, 1:30 p.m.
- January 26, 2012, 10 a.m.

This virtual training session provides an excellent tutorial for using Web interChange. Topics covered include:

- Creating new users
- Assigning permissions
- Identifying the reason for claim denials
- Correcting claims online
- Obtaining prior authorization status
- And more



### Make life easier by attending one of these convenient sessions!

Can't get away from the office? With virtual room training, you can stay at the office and receive valuable information to increase your understanding of how Medicaid claims processing works and learn to streamline your Medicaid transactions. Choose your date and register early – see the [Provider Education page](#) on indianamedicaid.com to secure your place at one of these sessions. Participants are limited to 125 per session.

## Claims submitted after 4 p.m. Eastern Time Wednesdays may not appear on the following week's Remittance Advice

Claims submitted electronically by 4 p.m. Eastern Time Wednesdays will appear on the following week's Remittance Advice (RA). Electronic claims submitted after 4 p.m. Eastern time Wednesdays may also appear on the following week's RA; however, there is no assurance. Regardless, electronic claim submission is always more efficient than paper claim submission. We encourage you to visit [Best Practices for Medicaid Nonpharmacy Claims Submission](#) on indianamedicaid.com to find out more about electronic claim submission if you are not using it today.

### 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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