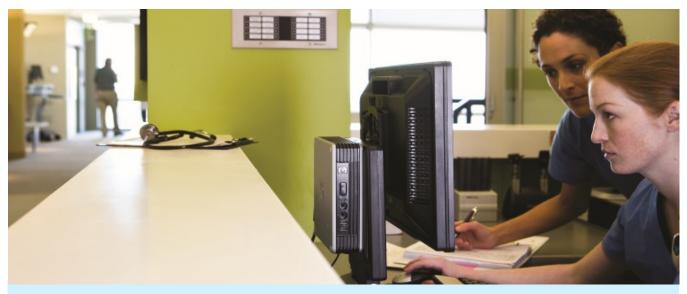
IHCP banner page

INDIANA HEALTH COVERAGE PROGRAMS

BR201239 SEPTEMBER 25, 2012



Annual update of the International Classification of Diseases is effective October 1, 2012

The annual update of the International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), is effective for the Indiana Health Coverage Programs (IHCP) October 1, 2012. You may view the new, revised, and discontinued codes at the <u>Centers for Medicare & Medicaid Services</u> (CMS) website at cms.gov.

To ensure compliance with the *Health Insurance Portability and Accountability Act* (HIPAA), the 90-day grace period no longer applies to ICD-9-CM updates. You must use the appropriate ICD-9-CM diagnosis and procedure codes that are valid for the date of service. Codes not valid for the date of service will deny. Coverage information for the new procedure code is addressed in the following table.

Procedure code	Description	Program coverage
00.95	Injection or infusion of glucarpidase	Noncovered

ICD-9-CM procedure code, effective for dates of service on or after October 1, 2012

MORE IN THIS ISSUE

HMS to perform long-term care RAC audits

Sign up now for the 2012 IHCP Annual Provider Seminar, October 23-25!

The more you know about the Indiana Health Coverage Programs (IHCP), the more efficient, effective, and economical your Medicaid claims processing will be. Plan now to attend this year's seminar! The 2012 seminar will be at a new location – the Caribbean

Cove Hotel and Water Park in Indianapolis. Whether you're a brand-new IHCP provider or you have served Medicaid recipients for years, whether your patients are enrolled through managed care plans or Traditional Medicaid, the 2012 seminar has sessions for you. Topics include:

- Introduction to IHCP
- Life of a Claim
- Manual pricing
- Care Select 101
- Medical equipment guidelines
- Mental health guidelines
- Understanding your Remittance Advice
- Member eligibility
- CMS-1500 and UB-04
- Dental billing
- Vision services

- HCBS waivers
- Prior authorization
- Medicare crossover and replacement plan claims
- Practice optimization
- Cultural competency
- Early and Period Screening, Diagnosis, and Treatment (EPSDT)
- Presumptive Eligibility (PE) and Notification of Pregnancy (NOP)
- Healthy Indiana Plan (HIP)
- The Right Choices Program (RCP)
- Electronic Health Records (EHR)

Make sure you get your first-choice sessions by signing up early! For more information, see <u>BT201234</u> or visit the <u>Pro-</u> <u>vider Education page</u> on indianamedicaid.com. It's easy to register online at indianamedicaid.com, and you'll receive immediate confirmation.

HMS to perform long-term care RAC audits

Health Management Systems (HMS), the Recovery Audit Contractor (RAC) vendor, is expected to begin audits of nursing facilities in September 2012. HMS will perform a comprehensive review of financial activity for Medicaid-enrolled residents in all Indiana Health Coverage Programs' (IHCP) nursing facilities. Each audit will cover a three-year review period adjusted by a one-year look-back period from the date when the audit commences. Because claims filed within the most recent 12 months are excluded (due to timely filing allowances), audited claims can date back four years.

The HMS audits will focus on, but are not limited to:

- Payments made for dates of service after date of discharge
- Duplicate Medicaid payments
- Appropriateness of reporting Medicare or other third-party payments
- Errors related to patient liability application or collection

HMS expects to review all nursing facilities on a two-year cycle.

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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