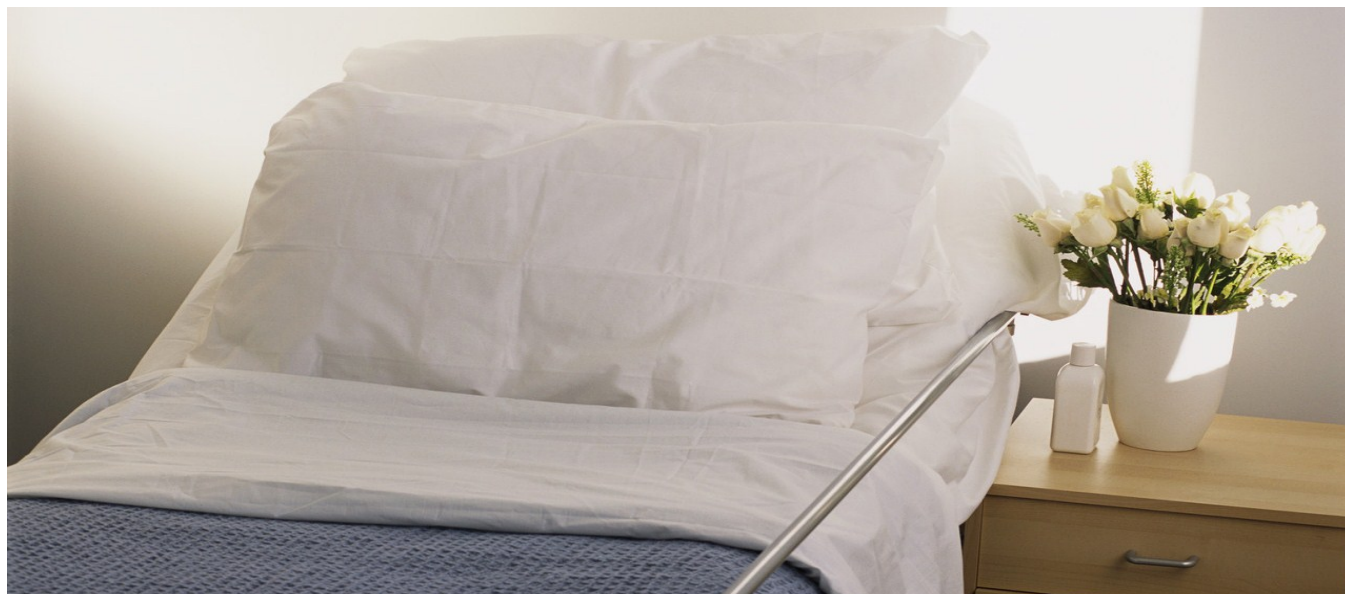


IHCP *banner page*

INDIANA HEALTH COVERAGE PROGRAMS

BR201308

FEBRUARY 26, 2013



Bed-hold days paid in error will be mass adjusted

Indiana Health Coverage Programs (IHCP) bulletin [BT201061](#), dated December 28, 2010, announced the IHCP would no longer cover “bed-hold” days in a nursing facility (NF) effective for dates of service (DOS) on or after February 1, 2011. Claims submitted with a provider specialty 030 – *Nursing Facility* for the revenue codes listed in Table 1 for those DOS are not reimbursable:

Table 1: Bed-hold revenue codes not reimbursable on or after February 1, 2011

Code	Description
180	Leave days
183	For therapeutic purposes
185	From nursing home for hospitalization

The IHCP has identified some claims with these revenue codes and DOS that were paid in error when a mass adjustment and/or a retro-rate adjustment was performed. The affected claims can be identified with either region code 55 – *Mass Adjustments – Nursing Home (retro-rate)* or region code 56 – *Mass Adjustments – Financial* on your Remittance Advice (RA) statement. A system modification has been implemented to appropriately deny these claims with explanation of

benefits (EOB) 6267 – *Leave days for provider specialty 030-nursing facility will no longer be reimbursed*. Adjustments will begin appearing on RAs dated March 12 and will be identified with internal control numbers that begin with region code 56 – *Mass Adjustments – Financial*. Overpayments will appear as accounts receivable and will be recouped at 100% from claims paid to the respective provider number.

MORE IN THIS ISSUE

- [Web interChange now allows claims with billed amount of \\$0.00](#)
- [Register online for IHCP first-quarter workshops](#)

Web interChange now allows claims with billed amount of \$0.00

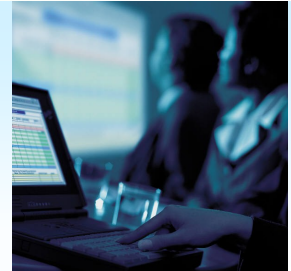
In [BT201247](#), for dates of service January 1, 2013, through December 31, 2014, the Indiana Health Coverage Programs (IHCP) instructed providers using Vaccines for Children (VFC)-provided vaccines to bill:

- V20.2 as the primary diagnosis
- Procedure code of the specific vaccine administered with a billed amount of \$0.00
- Appropriate vaccine administration code (90471-90474) with the SL modifier

In [BT201302](#), providers were notified that a system modification was necessary to allow a \$0.00 billed amount for all claims billed through Web interChange. This system modification is complete. Providers may now bill claims with a \$0.00 billed amount through Web interChange.

Register online for IHCP first-quarter workshops

Registration for in-person and virtual provider workshops, scheduled for dates in February and March 2013, is available via the [Provider Education](#) page at indianamedicaid.com. Learn more about workshop topics and sign up soon to reserve your spot.



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