IHCP banner page

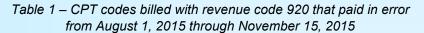
INDIANA HEALTH COVERAGE PROGRAMS

BR201549

DECEMBER 8, 2015

IHCP will mass adjust claims for certain CPT codes billed with revenue code 920

The Indiana Health Coverage Programs (IHCP) has identified a claims processing issue that affects certain claims processed from August 1, 2015, through November 15, 2015. Fee-for-service claims for the Current Procedural Terminology (CPT®1) codes in Table 1, billed with revenue code 920 – *Other Diagnostic Services-General*, paid in error. These CPT codes are not linked to revenue code 920 and therefore payment should have denied.





CPT Code	Description
59025	Fetal non-stress test
93970	Duplex scan of extremity veins including responses to compression and other maneuvers; complete bilateral study
93971	Duplex scan of extremity veins including responses to compression and other maneuvers; unilateral or limited study
95810	Polysomnography; age 6 years or older, sleep staging with 4 or more additional parameters of sleep, attended by a technologist
95923	Testing of autonomic nervous system function; sudomotor, including 1 or more of the following: quantitative sudomotor axon reflex test (QSART), silastic sweat imprint, thermoregulatory sweat test, and changes in sympathetic skin potential
95924	Testing of autonomic nervous system function; combined parasympathetic and sympathetic adrenergic function testing with at least 5 minutes of passive tilt

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The claims processing system has been corrected. Claims processed during the indicated time frame that previously paid in error will be mass adjusted. Providers should begin to see the adjusted claims on Remittance Advices (RAs) beginning January 12, 2016, with internal control numbers (ICNs) that begin with region code 56 (mass adjusted). If a 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.

As a reminder, a list of CPT codes linked with revenue code 920 can be found in IHCP Banner Page BR201526.

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