IHCP banner page

INDIANA HEALTH COVERAGE PROGRAMS

BR201637

SEPTEMBER 13, 2016

IHCP reminds providers of policies regarding billing new patient office visits

During a recent review of paid professional claims, the Indiana Health Coverage Programs (IHCP) identified several providers incorrectly billing for new patient office or other outpatient visit evaluation and management (E/M) services when the patient clearly had an established relationship with the provider within the past three years. Physicians and other qualified healthcare providers are reminded that this billing practice is inconsistent with the IHCP's policies and billing guidelines for new patient office visits.



New patient office visits are limited to one visit per member, per provider, per three years. A new patient is defined as a patient who has not received any professional services from the provider or from another rendering provider with the same specialty and subspecialty belonging to the same group practice within the past three years.

Providers should be aware that incorrect coding of claims may lead to overpayments, which are subject to recoupment. Providers can refer to the Medical Policy Manual and the Evaluation and Management Services provider reference module for additional information and guidance.

IHCP issues correction to Banner Page BR201633

The Indiana Health Coverage Programs (IHCP) announced in IHCP Banner Page BR201633 that mass adjustments or mass reprocessing would occur for certain outpatient claims billed with two particular IDC-10 diagnosis codes. One of the affected diagnosis codes was incorrectly listed as N18.9 - End stage renal disease. The diagnosis code that should have been referenced is N18.6 - End stage renal disease. All other information in the article remains unchanged. The mass adjustments or reprocessing of affected claims billed with ICD-10 diagnosis codes N18.6 or N19 remains scheduled to begin with the Remittance Advice (RA) statements dated October 4, 2016.

QUESTIONS?

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