

IHCP *banner page*

CMS approves deactivation of NCCI MUE for A0425

The Indiana Health Coverage Programs (IHCP) announced in IHCP banner page [BR201720](#) that it was seeking approval from the Centers for Medicare & Medicaid Services (CMS) to deactivate the National Correct Coding Initiative (NCCI) Practitioner Medically Unlikely Edit (MUE) for ground transportation mileage for Healthcare Common Procedure Coding System (HCPCS) code A0425—*Ground mileage, per statute mile*. The IHCP has received approval from the CMS, retroactive to the edit's effective date of October 1, 2016. All other IHCP coverage and billing guidance remains unchanged.



The IHCP will mass reprocess or adjust claims for A0425 retroactive to dates of service (DOS) on or after **October 1, 2016** that denied with explanation of benefits (EOB) code 4183 – *Units of service on the claim exceed the medically unlikely edit (MUE) allowed per date of service*. Providers will begin to see reprocessed or adjusted claims on Remittance Advices (RAs) the week of August 28, 2017, identifiable by internal control numbers (ICNs)/Claim IDs that begin with 80 (reprocessed denied claim) or 52 (mass replacement non-check related).

IHCP adds diagnosis codes for services covered under the Family Planning Eligibility Program

Effective August 25, 2017, the Indiana Health Coverage Programs (IHCP) will add the ICD-10 diagnosis codes listed in Table 1 for services covered under the Family Planning Eligibility Program. These diagnosis codes apply to dates of service (DOS) on or after August 25, 2017.

Table 1: ICD-10 diagnosis codes added under the Family Planning Eligibility Program, effective for DOS on or after August 25, 2017

Diagnosis Code	Description
Z04.41	Encounter for alleged rape, adult
Z04.42	Encounter for alleged rape, child
Z30.42	Encounter for surveillance of injectable contraception

This change will be reflected in updates to the *Family Planning Eligibility Program Codes* on the [Code Sets](#) page at indianamedicaid.com. See the [Family Planning Eligibility Program](#) provider reference module for additional billing information.

MORE IN THIS ISSUE

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IHCP to revise the DME and medical supply items included in the LTC facility per diem rate

Effective August 25, 2017, the Indiana Health Coverage Programs (IHCP) will revise the durable medical equipment (DME) and medical supply items that are included in the long-term care (LTC) facility *per diem* rate. The Healthcare Common Procedure Coding System (HCPCS) codes in Table 2 will be added to those included in the LTC facility *per diem* rate. These changes will apply to dates of service (DOS) on or after August 25, 2017.



Pursuant to *Indiana Administrative Code* (IAC), DME and medical supply items included in the LTC *per diem* rate may not be billed to Medicaid by the facility, an outside pharmacy, or any other provider. Items included in the *per diem* rate that are billed separately for members in LTC facilities will be denied with explanation of benefits (EOB) 2034 – *Medical and Nonmedical Supplies and Routine DME Items are Covered in the Per Diem Rate*.

The items included in the *per diem* rate can be found on the [Long Term Care DME Per Diem Table](#) at indianamedicaid.com. This table will be updated with the changes reflected in Table 2. See the [Claims Submission and Processing](#) and [Long-term Care](#) modules at indianamedicaid.com for billing procedures.

Table 2: DME and medical supply items added to those included in the LTC facility per diem rate, effective for DOS on or after August 25, 2017

HCPCS Code	Description
E1012	Wheelchair accessory, addition to power seating system, center mount power elevating leg rest/platform, complete system, any type, each
E1352	Oxygen accessory, flow regulator capable of positive inspiratory pressure

IHCP to reimburse for certain procedures rendered by LCACs

Effective August 25, 2017, the Indiana Health Coverage Programs (IHCP) will provide reimbursement for the CPT procedure codes listed in Table 3 when the procedures are rendered by licensed clinical addiction counselors (LCACs). When these procedures are rendered by an LCAC, they should be billed with the National Provider Identifier (NPI) of the supervising practitioner, and modifier HF – *Substance abuse program* should be applied to the procedure code. The payment methodology in CoreMMIS will process reimbursement for the procedure at 75% of the allowed rate. This change will apply retroactively to fee-for-service (FFS) claims with dates of service (DOS) on or after **November 1, 2016**.

Beginning August 25, 2017, providers may bill the procedure codes in Table 3 with the HF modifier for DOS on or after November 1, 2016, for reimbursement consideration. Claims submitted beyond the original one-year filing limit must include a copy of this banner page as an attachment, and must be filed within one year of the publication date.

continued

Table 3: Procedure codes reimbursable when rendered by an LCAC and billed with modifier HF, effective for DOS on or after November 1, 2016

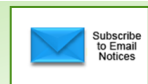
Procedure Code	Description
90785	Interactive complexity
90791	Psychiatric diagnostic evaluation
90832	Psychotherapy; 30 minutes
90834	Psychotherapy; 45 minutes
90837	Psychotherapy; 60 minutes
90839	Psychotherapy for crisis; first 60 minutes
90840	Psychotherapy for crisis
90845	Psychoanalysis
90846	Family psychotherapy, 50 minutes
90847	Family psychotherapy including patient, 50 minutes
90849	Multiple-Family group psychotherapy
90853	Group psychotherapy
99407 U6	Smoking and tobacco use intensive counselling, greater than 10 minutes; per 15 minutes
99408	Alcohol and/or substance abuse screening and intervention, 15-30 minutes
99409	Alcohol and/or substance abuse screening and intervention, greater than 30 minutes
G0444	Annual depression screening, 15 minutes
H0031	Mental health assessment, by non-physician
H2011	Crisis intervention service, per 15 minutes

QUESTIONS?

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