

January 12, 1999

**To All Indiana Medicaid Providers of RBMC Dental Services:**

As referenced in Indiana Medicaid Bulletin E98-23 Dental Program Changes and Workshop Schedule and banner pages dated 7/28/98, 8/4/98, and 8/11/98, dental services rendered by dental providers and submitted on dental claim forms are excluded from Risk Based Managed Care for dates of service 8/1/98 or greater. MCOs, however, are responsible for approving and adjudicating ancillary oral health services provided by non-dental specialists (such as anesthesiologists) or dental provider services submitted on HCFA or UB forms. MCOs appreciate the member's right to choose a Medicaid enrolled dental provider and, in turn, request dental providers notify them prior to the rendering of dental services to their members. For prior notification of managed care member dental services, please utilize the following directory:

RBMC Central Region

MaxiHealth: 1-800-344-8672; MaxiHealth/ProHealth: (317)-588-7575

Managed Health Services: (317)-630-2831 (Indianapolis calls only); 1-800-356-1204 (from outside Indianapolis); fax phone (317)-630-2835

RBMC Southern Region

MaxiHealth/MHS: (812)-473-0488 or (812)-473-2002; 1-800-466-0988; fax phone (812)-473-2711

RBMC Northern Region

MaxiHealth/MHS: (219)-756-7234; 1-800-414-9475; fax phone (219)-756-7239

**To All Indiana Medicaid Pharmacy Providers:**

The following labelers have entered into a drug rebate agreement and are joining the rebate program effective April 1, 1999:

CollaGenex Pharmaceuticals, Inc. (Labeler Code 27280)

Capellon Pharmaceuticals (Labeler Code 64543)

**To All Indiana Medicaid Providers:**

The purpose of this banner page is to inform providers that the new 1999 HCPCs codes have been added to the IndianaAIM claims processing system. New RVUs have not yet been implemented for existing codes, but will be discussed in an upcoming bulleting. The new codes are effective for dates of service on or after January 1, 1999. Please note that the standard global billing procedures and edits apply when utilizing the new codes. EDS recognizes the same deleted HCPCS codes identified and recognized by Medicare. Providers will have a three-month grace period for deleted codes.

In an upcoming bulletin, Indiana Medicaid will provide a listing of all new and deleted codes with Prior authorization, coverage, modifier, and rate information. Please be advised that Indiana Medicaid Program will adopt Medicare's non-facility practice expense RVUs when calculating the rates for the 1999 HCPC codes that are subject to RBRVS pricing.

**To All Providers of Hoosier Healthwise for Persons with Disabilities Services:**

**Effective for dates of service 1/1/1999 and after, claims for dental provider services are to be submitted directly to EDS for processing and payment for the Hoosier Healthwise for Persons with Disabilities and Chronic Illnesses (HHPD) program** (formerly Managed Care for Persons with Disabilities and Chronic Illnesses or MCPD). The HHPD program is designed to meet the medical needs of those Medicaid recipients with disabilities and chronic illnesses. The HHPD program is currently available in Marion County only through TeamSelect. Dental claims for dates of service prior to 1/1/1999 should continue to be submitted to TeamSelect.

Only dental claims billed by the appropriate provider specialties will be carved out of this program. Dental specialists include: Endontists, General Dentistry Practitioners, Oral Surgeons, Orthodontists, Pediatric Dentists, Periodontists, Pedodontists, Prosthodontists, and Dental Clinics. HCFA claims and UB claims submitted by dental providers and oral health services provided by non-dental specialists (i.e. anesthesiology) are not included in this carve out and should continue to be submitted to TeamSelect. In addition, out of state dental providers are still subject to prior authorization requirements.

On 8/1/1998 the dental services carve out was effective for the Risk-Based Managed Care (RBMC) portion of the Hoosier Healthwise program with the exception of the HHPD program. With the advent of the dental carve out for the HHPD program for dates of service 1/1/1999 and greater, dental services submitted on dental claim forms by the above referenced dental providers are now carved out from all of the Hoosier Healthwise RBMC organizations: MaxiHealth and MHS and TeamSelect (for HHPD program).

**To All Indiana Medicaid Providers:**

In the Indiana Medicaid Update bulletin, E98-41, dated December 23, 1998, the zip code for Medicaid returned checks was listed incorrectly. The correct address is 950 North Meridian, Indianapolis, Indiana **46204**.

**To All Indiana Medicaid Providers:**

Beginning January 1, 1999, Health Care Excel (HCE) will assume operations responsibility for (1) medical policy, (2) review of requests for prior authorization (PA), and (3) surveillance and utilization review (SUR). (Please refer to Indiana Medicaid Transition Newsletter T98-01 for additional background information.) Providers will be pleased to learn that many of the telephone numbers (see below) will remain the same to support a seamless transition from EDS to HCE. HCE will be closed on Friday, January 1, 1999, and on Saturday and Sunday, January 2 and 3, 1999. However, mail and faxed requests will be processed on Monday, January 4, 1999.

**Prior Authorization.** HCE will be assuming the current PA toll-free number (800) 457-4518 (see below). Providers in Marion County should use (317) 347-4511. For those facilities previously faxing PA requests, notification regarding HCE's PA fax number will be provided under separate cover.

**Surveillance and Utilization Review.** HCE will also be assuming the current SUR toll-free number (800) 475-4515 (see below), effective January 1, 1999. Providers in Marion County should use (317) 347-4527. An additional toll-free number will be available to providers and recipients to report potential fraud and/or abuse and should not be confused with the EDS Provider Assistance number.

Included below are the HCE address, PA and SUR P.O. Box addresses and telephone numbers.

**Health Care Excel, Incorporated**

<b><u>General Administrative and Medical Policy Office Information</u></b>	<b><u>Surveillance and Utilization Review Department</u></b>
Work Hours: 8:00 a.m. to 5:00 p.m. (EST)	Work Hours: 8:00 a.m. to 5:00 p.m. (EST)
Address: P.O. Box 53380 Indianapolis, IN 46253-0380	Address: P.O. Box 531700 Indianapolis, IN 46253-1700
Phone: (317) 347-4500	Phone: (Local) (317) 347-4527 (Marion County) (Toll-free) (800) 457-4515 (Effective January 1, 1999)
	<b><u>Provider and Recipient Concern (Fraud and Abuse)</u></b>
<b><u>Prior Authorization Department</u></b>	Phone: (Local) (317) 347-4527 (Marion County) (Toll-free) (800) 216-5938 (Effective January 1, 1999)
Work Hours: 7:30 a.m. to 6:00 p.m. (EST)	
Address: P.O. Box 531520 Indianapolis, IN 46253-1520	
Phone: (Local) (317) 347-4511 (Marion County) (Toll-free) (800) 457-4518 (Effective January 1, 1999)	