



I M P O R T A N T I N F O R M A T I O N

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To All Indiana Medicaid Pharmacy Providers:

- New Labelers

The following labeler has entered into a drug rebate agreement and is joining the rebate program effective July 1, 1999.

Excellium Pharmaceutical, Inc. (Labeler Code 64125)

To All Indiana Medicaid Providers:

- The Indiana Academy of Ophthalmology, Inc. will be sponsoring four workshops on Optical Dispensary Coding for All Eye Care Professionals. Speakers for the programs will be Karen Buckler and Maureen Hoffmeyer of Joy Newby & Associates, Inc. The entire program will be devoted to the coding of optical services, including coding for Medicare and Medicaid Programs. The workshops are scheduled for the following dates.

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| April 10 | Ft. Wayne | May 11 | Indianapolis |
| April 24 | Evansville | May 15 | Hammond |

Joy Newby & Associates, Inc. will also be offering Medicaid multi-specialty workshops. These workshops are scheduled for the following dates and will be presented by Maureen Hoffmeyer.

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| Parkview Hospital | April 27, 1999 |
| Indianapolis | April 29, 1998 |
| Nashville | May 5, 1998 |
| Merrillville | May 13, 1998 |
| Evansville | May 20, 1998 |

Each workshop will address important information designed to assist physicians in billing the Indiana Medicaid Program. Topics to be covered include restrictive eligibility categories, Program policies, adjustments, inquires, and troubleshooting. For additional information or registration materials for either series of workshops, contact Joy Newby & Associates, Inc. at (317) 577-3066.

- Banner pages dated February 2, 9, 16, 1999, clarified that explanation of benefit (EOB) attachments did not have to be submitted with the claim when there was a third party liability (TPL) payment made and the TPL amount was entered on the claim form. However, this policy does not apply to Medicare crossover claims that do not cross over and must be submitted to Medicaid on paper. When Medicare has made a payment or denied a payment, the Explanation of Medicare Benefit

(EOMB), must be submitted with the Medicaid paper claim when filing for payment.

- Some claims were inappropriately denied for Edit 4110 in claims cycles March 2, 9, 16, 1999. Edit 4110 states that the interpretation of non-anatomical laboratory procedures, other than consultative pathology, do not require the services of a physician. The intent of this edit is to deny the physician claim when both the laboratory and physician bill for the following services: 80002-80009, 81000-85048, 85150-86076, 86080-87253, 88140-88155, 88230-88289, 89050-89365. These affected claims will be systematically reprocessed and/or mass adjusted and will appear on the remittance advice notices for March 23, 30, 1999.