



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

B R 1 9 9 9 1 5

A P R I L 1 3 , 1 9 9 9

To All Indiana Medicaid Pharmacy Providers:

- This is to notify all pharmacy providers of changes to the Medicaid Drug Federal Upper Limit (FUL).

The following products have been deleted from the Medicaid FUL effective April 21, 1999:

Acetaminophen; Propoxyphene Napsylate
650 mg; 100mg, tablet, oral 100

Prednisolone Sodium Phosphate; Sulfacetamide Sodium
Eq. 0.23% Phosphate, 10% Solution/Drops, Ophthalmic 5ml
Eq. 0.23% Phosphate, 10% Solution/Drops, Ophthalmic 10 ml

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:

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.

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

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. (317) 577-3066.

To All Indiana Medicaid Certified Nursing Facilities:

- On November 16, 1998, EDS mailed an Indiana Medicaid Update (E98-40) to all Medicaid certified nursing facilities regarding the changes to the Form 450B process for dates of service on or after October 1, 1998. This bulletin also introduced the new Form 450B State Authorization/Data Entry (SA/DE). It has come to our attention that many nursing facility personnel are unfamiliar with the changes to the 450B process and unaware of the Form 450B SA/DE. It is **imperative** that this Medicaid Update (E98-40) be disseminated to all staff members who are responsible for Form 450B completion. Additionally, please note that the **Form 450B SA/DE issued by the State officially replaces Form 450B** for purposes of both the authorization of nursing facility admission and Medicaid reimbursement. If you need to obtain a copy of this Indiana Medicaid update, please contact EDS Customer Assistance at (317) 655-3240 or 1-800-577-1278.