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To All Indiana Medicaid Home Health Care Providers:

The mass rate adjustment for new home health rates appeared on the remittance advice (RA) for May 11, 1999, instead of May 18, 1999. Furthermore, accounts receivable relating to the mass adjustment were fully and immediately recouped from the May 11, 1999, claims payment. If a home health agency provider will experience financial hardship due to full and immediate recoupment of accounts receivable relating to the mass adjustment, the provider may submit a request for an advance. Requests for an advance must be submitted by letter and include a brief explanation or justification of the hardship to the provider's business. The request should be faxed to EDS at (317) 488-5377, Attention: Director of Finance. A maximum repayment period of four months will be considered for approval. If a request for an advance is approved, a check in the amount of the advance will be mailed to the provider. Questions regarding an advance can be left on voice mail at (317) 488-5004. Questions regarding an advance and requests for an advance will receive priority attention.

To All Indiana Medicaid Acute Care Hospitals, Freestanding Psychiatric Hospitals, Rehabilitation Hospitals, Distinct Part Unit Psychiatric Facilities, and Ambulatory Surgical Centers:

The following information provides a correction to bulletin BT199902, *Changes in Diagnostic Related Groups/Level of Care Inpatient and Outpatient Methodologies*, published April 1, 1999:

The DRG Burn/1 LOC Rate in Appendix A was reported as:

DRG and LOC Rates	On or After 5/15/99
Burn/1 LOC Rate	\$1,671.15

The DRG Burn/1 LOC Rate in Appendix A has been corrected to reflect:

DRG and LOC Rates	On or After 5/15/99
Burn/1 LOC Rate	\$1,671.75

The following information was excluded from bulletin BT199902:

DRG	Description	Current		On or After 5/15/99	
		DRG Weight	ALOS	DRG Weight	ALOS
807	Combined anterior/posterior spinal fusion w/o cc	0.0000	0.0	5.6748	4.5