



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 Providers:

- This announcement is to advise Medicaid providers of the prescription coverage status for the new weight loss product Xenical (Orlistat). In accordance with Medicaid regulations, 405 IAC 5-24-3 (b) (1) and 42 USC Section 1396r-8(d)(2)(A), the weight loss drug Xenical, marketed by Roche Laboratories, is not covered under Indiana Medicaid.
- Recently Medicaid providers were advised that the Rotavirus vaccine would be available from the federal Vaccines For Children (VFC) Program, which supplies vaccines at no cost to participating providers. The State Department of Health has just been advised that it will not be possible to add Rotavirus to the list of VFC Program vaccines until after the first of next year. Therefore, Indiana Medicaid will continue to reimburse for the cost of the Rotavirus vaccine and the administration fee of \$2.90, rather than limit Medicaid to the \$8 VFC Program administration fee.

NOTE: The \$8 administration fee is only paid for administration of VFC Program vaccines. The \$8 fee was set to encourage providers to participate in the VFC Program. For vaccines not available through the VFC Program, Medicaid reimburses for the cost of the vaccine plus an administration fee of \$2.90.

Until further notice, Rotavirus **will not be available through the VFC Program** until after January 1, 2000. Please watch future provider bulletins and banner page messages for additional information on this topic.

To All Indiana Medicaid Home Health Care Providers:

- The mass rate adjustment for new home health rates and the associated accounts receivable appeared on the remittance advice (RA) for May 11, 1999. Some of the accounts receivable associated with this mass adjustment were fully and immediately recouped. Instructions for requesting an advance due to full recoupment appeared in the banner page published May 18, 1999, BR199920. Recoupment of accounts receivable that were not fully recouped will be delayed for two weeks so that home health agency providers can review the impact of the mass rate adjustment and when appropriate, submit a request for an extended repayment schedule. Requests for an extended repayment schedule must be submitted in writing and include a brief explanation of the hardship to the

provider's business. Requests must be faxed by June 2, 1999, to EDS at (317) 488-5377, Attention: Director of Finance. A maximum repayment period of four months will be considered for approval. Providers who submit a timely request will receive a response to the request prior to June 8. If an extended repayment period is not requested and approved, full and immediate recoupment of accounts receivable will begin on June 8, 1999, for accounts receivable not fully recouped on the RA dated May 11, 1999. Questions regarding an advance or extended repayment schedule can be left on voice mail at (317) 488-5004.

To All Indiana Medicaid Mental Health Providers:

- On April 9, 1999, EDS updated the IndianaAIM System to process mental health crossover claims with multiple detail lines correctly. This change became effective the week of April 12, 1999. The Medicare mental health reduction amount (Psych Reduction) was being reimbursed on the first detail only. EDS cannot mass adjust or reprocess affected claims because the Medicare mental health reduction amount was not captured during the initial processing of the claim. Providers must continue to submit adjustment requests for crossover claims with multiple details that processed incorrectly prior to the system update.