



## 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 Health Coverage Program Providers:**

- Providers must remember to maintain medical records of sufficient quality to fully disclose and document the extent of services rendered. This requirement is set out in *405 IAC 1-5-1*. Please note that a claim form is not considered sufficient documentation. Minimally, records must include the following information:

1. Identity of the individual to whom service is rendered
2. Identity of the provider, or provider's employee and position, rendering the service
3. Date of service
4. Diagnosis, excluding transportation providers
5. Narrative description of service rendered
6. Location of service
7. Amount charged for the service

Other requirements exist as specified in the provider manual, bulletins, banner pages, *Indiana Administrative Code*, and statutes. In many cases, written evidence of physician involvement and personal patient evaluation that documents the acute medical need is required. For some services, such as therapy, home health, or mental health services, a plan of treatment and evidence of ongoing evaluation is needed. If there are any questions, please contact EDS Customer Assistance at (317) 655-3240 or 1-800-577-1278.

- In an effort to improve service to providers, EDS has reviewed the guidelines that require a provider to wait 14 calendar days before requesting a stop payment of an Indiana Health Coverage Programs (IHCP) check. While providers should allow time for mail delivery delays, **EDS will accept a stop payment request after seven calendar days from the date of check issuance.**

EDS encourages providers to consider using Electronic Funds Transfer (EFT) for receipt of IHCP payments. EFT allows direct deposit of IHCP payments into a provider's designated bank account. EFT decreases the administrative processing required by paper checks. EFT is safe and only allows the direct deposit of funds into a provider's account. Please contact EDS Customer Assistance at (317) 655-3240 or 1-800-577-1278 for more information about EFTs.

- The IHCP Provider Seminars are coming soon to your area. Each seminar is three days in length, and consists of six half-day sessions, which may be selected to meet the needs of specific practices. Attendees may participate in one or all sessions. Preregistration is required along with a refundable deposit of \$25.00 per person, per seminar. The deposit will be returned after attendance at this educational event. Checks should be made payable

to EDS. Please see bulletin, *BT200016*, dated May 5, 2000, or [www.indianamedicaid.com](http://www.indianamedicaid.com) Web site for detailed information and a registration form.

- Effective for dates of service after July 31, 2000, *audit 6010, PHYSICAL EXAMS LIMITED TO ONE (1) PER 12 MONTHS-SAME PROVIDER*, will no longer be used. The following evaluation and management procedure codes will no longer be restricted to one per provider, per year:

99205    99215    99303    99313    99323    99333    99345    99350

The Office of Medicaid Policy and Planning (OMPP) has determined that the frequency of **medically necessary** evaluation and management services should not be restricted. Providers who have had claims deny for any of the procedure codes listed above with dates of service after July 31, 2000, should resubmit the affected claims through the normal claims processing address:

**EDS HCFA 1500 Claims**  
**P.O. Box 7269**  
**Indianapolis, IN 46207-7269**

If there are any questions, please call EDS Customer Assistance at (317) 655-3240 or 1-800-577-1278.

## **To All Indiana Health Coverage Programs Providers Billing HCFA Crossover Claims:**

- The HCFA crossover Part B claims processed this week appear to contain a large number of previously processed claims. EDS has experienced a high denial rate this week of Part B claims for edit *5007 Exact Duplicate Header*. From early research, it appears that these Part B claims were originally processed July 13, 2000, and adjudicated correctly. All providers are advised to verify Part B claims denied for edit 5007 this week were previously processed by EDS on the July 18, 2000, or July 25, 2000, remittance advice. If there are any questions, please contact EDS Customer Assistance at (317) 655-3240 or 1-800-577-1278.

## **To All Indiana Health Coverage Programs Home Health Care Providers:**

- The new rates for home health services, effective January 1, 2000, published in bulletin, *BT20023, Change in Reimbursement Rates for Home Health Providers*, dated June 30, 2000, were loaded for claims processed the week of June 26, 2000. Claims are being processed at the new rate beginning with the remittance advice (RA) notice for July 4, 2000. Claims processed for dates of service January 1, 2000, and after, that were paid at the old rate, will be systematically mass adjusted and will appear on the RA notice on or about August 15, 2000. It is not necessary to submit an adjustment request form. Mass adjusted claims are assigned region number 56 as the first two numbers of the internal control number (ICN). If there are any questions, please contact EDS Customer Assistance at (317) 655-3240 or 1-800-577-1278.