



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 Transportation Providers with Specialties 262, 264, and 265 Regulated by The Indiana Motor Carrier Service:

- The Indiana motor carrier service (MCS) is experiencing short delays in processing registration renewals for buses, ambulatory, and non-ambulatory for-profit common carriers. MCS has informed EDS of the delay and has granted a grace period for registration renewal for the above mentioned specialties through March 31, 2001. Since the MCS has granted a grace period, EDS will be extending Indiana Health Coverage Program (IHCP) eligibility for these providers until March 31, 2001. All other transportation providers should continue to send recertification materials according to the rules governing each transportation specialty. If there are any questions regarding provider eligibility, please contact the EDS Customer Assistance Unit at (317) 655-3240 in the Indianapolis local area or 1-800-577-1278.

To All Indiana Health Coverage Programs HCFA-1500, Home Health, and Outpatient UB-92 Billers:

- During recent system modifications, changes were made to *Explanation of Benefit Code 5001 – Exact Duplicate*. One change caused erroneous payment of HCFA-1500, home health, and outpatient UB-92 claims which should have denied for *EOB 5001*. This change affected claims processed from November 14, 2000, to December 7, 2000. The Office of Medicaid Policy and Planning (OMPP) requested that EDS give providers 45 days notice before mass adjusting affected claims. Mass adjustment of all affected claims will begin the week of February 6, 2001. If there are any questions, please contact the EDS Customer Assistance Unit at (317) 655-3240 in the Indianapolis local area or 1-800-577-1278.

To All Indiana Health Coverage Program Providers:

- The new 2001 Health Care Financing Administration Common Procedure Coding System (HCPCS) codes will be added to the IndianaAIM claims processing system, and will be effective for dates of service on or after January 1, 2001. The new and deleted HCPCS codes are listed in an upcoming Indiana Health Coverage Programs (IHCP) bulletin, projected for publication on April 1, 2001. A grace period of 90 days will be allowed for using the deleted codes.

Note: The standard global billing procedures and edits apply when using the new codes.

The IHCP recognizes the same deleted HCPCS codes as Medicare. Claims submitted using the old codes with service dates prior to the codes being deleted will be accepted. The actual date of deletion will be included in the HCPCS 2001 Bulletin. Claims submitted using deleted or invalid procedure codes with service dates on or after the codes have been deleted, will be denied.

- The detailed National Health and Nutrition Examination Survey (NHANES) Medical Growth Charts designed for each age group, previously identified in *Bulletin BT200035* as available from the Georgia Chapter, American Board of Pediatrics, are now available from the Center for Disease Control (CDC). The CDC can be contacted at the following address:

**National Center for Health Statistics (NCHS)
Division of Data Services
Hyattsville, MD 20782-2003
(301) 458-4636
www.cdc.gov/growthcharts**

Providers are also encouraged to periodically check the CDC/NCHS home page at www.cdc.gov/nchs for announcements and updates about distribution and training materials.

- If a legal entity enrolled in the IHCP is purchased by a new owner who wishes to participate in the IHCP, the new owner must enroll in the IHCP. Claims cannot be billed under the IHCP provider number of the previous owner. Enrollment applications can be requested from the following address:

**EDS Provider Enrollment Unit
PO Box 7263
Indianapolis, IN 46207-7263**

If there are any questions, please contact the EDS Customer Assistance Unit at (317) 655-3240 in the Indianapolis local area or 1-800-577-1278.

- Checks for IHCP approved electronic claims are usually issued in less than nine days. Checks issued for paper claims can take an average of 25 days. Providers who currently bill on paper are encouraged to find out more about Provider Electronic Solutions and how it can decrease claim processing time. For information about Provider Electronic Solutions, or to download the software, please visit the IHCP Website at www.indianamedicaid.com, or contact the Electronic Solutions Helpdesk at (317) 488-5160.

To All Indiana Health Coverage Programs Enrolled Hospitals and End Stage Renal Disease Facilities:

- The procedure for submitting claims to the IHCP for Medicare/Medicaid eligible members who receive renal dialysis services has changed. Banner messages in 1997 requested submission of spenddown claims to the appropriate field consultant for special handling. These claims should not be submitted to the field consultants. For faster payment consideration, current claims for spenddown members who do not meet the spenddown deductible amount the first day of the month should be submitted to the normal crossover claim address:

**EDS HCFA 1500 Crossover Claims
PO Box 7267
Indianapolis, IN 46207-7267**

If there are any questions, please contact the EDS Customer Assistance Unit at (317) 655-3240 in the Indianapolis local area or 1-800-577-1278.

To All Indiana Health Coverage Program Inpatient Hospital Providers:

- On December 18, 2000, EDS updated IndianaAIM to include all 2001 ICD-9 diagnosis and surgical procedure codes on the diagnosis related group (DRG) Mapper. Providers can now bill 2001 ICD-9 diagnosis and surgical procedure codes on the UB-92 claim form for inpatient hospital claims. Claims billed for inpatient services on the UB-92 claim form, that denied in error between October 1, 2000, and December 17, 2000, for *Explanation of Benefit Code 4116 – Diagnosis is not valid for DRG pricing*, will be reprocessed the week of December 18, 2000. The reprocessed claims will appear on the remittance advice dated December 26, 2000. If there are any questions, please contact the EDS Customer Assistance Unit at (317) 655-3240 in the Indianapolis local area or 1-800-577-1278.