

IHCP *bulletin*

INDIANA HEALTH COVERAGE PROGRAMS BT201028 AUGUST 10, 2010

Note: This bulletin is obsolete. Please see BT201037 for the updated version of this bulletin.



Cost invoices for DME, supplies, and hearing aids

Effective September 24, 2010, Healthcare Common Procedure Coding System (HCPCS) codes for durable medical equipment (DME), supplies, and hearing aids that are currently manually priced will require a cost invoice with the claim. A cost invoice is an itemized bill issued directly from the seller of the supply to the provider listing the goods supplied and stating the sum of money due to the supplier.

Retail invoices or invoices custom generated by the provider that include the price of the goods plus the provider's margin will no longer be accepted for HCPCS codes identified in this bulletin.* This new initiative will aid the Office of Medicaid Policy and Planning (OMPP) with its continued efforts to establish reimbursement for the HCPCS codes identified in this bulletin.

General

Reimbursement for DME, supplies, and hearing aid HCPCS codes listed in the table on the next page with a "From" date of service on or after September 24, 2010, will be denied if anything other than a cost invoice is submitted with the claim.* Claims submitted with HCPCS procedure codes listed

in the table on the next page, along with a retail or provider custom-generated invoice, will be denied with Explanation of Benefit Code 9024 – *Inappropriate invoice attached to the claim, please resubmit with the proper attachment.*

***Note:** Providers that are creating or manufacturing custom-molded items specific to an individual member's needs, such as a custom-molded seating system produced in house, may continue to submit a retail invoice for processing the claim. The item should be identified as "custom" in the description field on the attached invoice.

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