

# IHCP *bulletin*

INDIANA HEALTH COVERAGE PROGRAMS    BT201127    MAY 24, 2011



## **The IHCP eliminates reimbursement for targeted case management**

Effective July 1, 2011, the Indiana Health Coverage Programs (IHCP) will eliminate reimbursement for targeted case management (TCM) services for Prenatal Care Coordination, Human Immunodeficiency Virus (HIV) Care Coordination, individuals with a disability residing in a nursing facility, individuals with a traumatic brain injury (closed or open head injury by an external event) residing in a nursing facility, and individuals with intellectual and developmental disabilities. Case management services reimbursed under home and community-based (HCBS) waivers, First Steps, and Medicaid rehabilitation option (MRO) case management are not included in this elimination.

The TCM services in the table on the following page will no longer be covered under Medicaid on or after July 1, 2011.

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*Services no longer covered under Indiana Medicaid on or after July 1, 2011*

Code	Modifier	Description
T1017		Targeted Case Management – elderly and disabled
T1017	U1	DD Targeted Case Management – TCM intake waiting list
T1017	U2	DD Targeted Case Management – TCM deinstitutionalize
T1017	U3	DD Targeted Case Management – TCM diversion
T1023		Screening to determine the appropriateness of consideration of an individual for participation in a specified program, project or treatment protocol, per encounter
T1023	U1	Targeted Case Management Nursing Facility Level of Care Administration – screening to determine the appropriateness of consideration of an individual for participation in a specified program, project or treatment protocol, per encounter – Level 1
T1023	U2	Targeted Case Management Nursing Facility Level of Care Administration – screening to determine the appropriateness of consideration of an individual for participation in a specified program, project or treatment protocol, per encounter – Level 2
G9012		Other Specified Case Management Service Not Elsewhere Classified <sup>1</sup>
H1000		Initial Assessment – one unit per pregnancy
H1004		Reassessment – prenatal care
99501		Home Visit for Postnatal Assessment and Follow-up Care – one unit per child per pregnancy
A0160		Non-emergency transportation: per mile – caseworker or social worker
A0160	U1	Care Coordination, Transportation for Home Visit, Initial Assessment (Nonemergency transport, per mile, caseworker or social worker)
A0160	U2	Care Coordination, Transportation for Home Visit, Reassessment (Nonemergency transport, per mile, caseworker or social worker)

<sup>1</sup> This code is specific to HIV Care Coordination.

**QUESTIONS?**

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