

IHCP Provider Monthly News

May 2009

Indiana Health Coverage Programs

<http://www.indianamedicaid.com>



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Common Abbreviations

ACN	Attachment Control Number	MAC	Maximum Allowable Cost
ADA	American Dental Association	MAR	Management and Administrative Reporting
ASC	Ambulatory Surgical Centers	MCO	Managed Care Organization
AVR	Automated Voice Response	MHS	Managed Health Services
CMS	Centers for Medicare & Medicaid Services	MRO	Medicaid Rehabilitation Option
COB	Coordination of Benefits	NDC	National Drug Code
CPS	Child Protective Services	NOA	Notice of Action
CPT	Current Procedural Terminology	NPI	National Provider Identifier
DCS	Department of Child Services	NPPES	National Plan and Provider Enumeration System
DFR	Division of Family Resources	NTIOL	New Technology Intraocular Lenses
DME	Durable Medical Equipment	NUBC	National Uniform Billing Committee
EDI	Electronic Data Interchange	NUCC	National Uniform Claim Committee
EDS	Electronic Data Systems	OMPP	Office of Medicaid Policy and Planning
EOB	Explanation of Benefits	PA	Prior Authorization
EOMB	Explanation of Medicare Benefits	PMP	Primary Medical Provider
EPSDT	Early and Periodic Screening, Diagnosis, and Treatment	PRTF	Psychiatric Residential Treatment Facility
EVS	Eligibility Verification Systems	RA	Remittance Advice
HCPCS	Healthcare Common Procedure Coding System	RBMC	Risk-Based Managed Care
HIPAA	Health Insurance Portability & Accountability Act	SSN	Social Security Number
ICN	Internal Control Number	SUR	Surveillance and Utilization Review
IHCP	Indiana Health Coverage Programs	TIN	Tax Identification Number
LPI	Legacy Provider Identifier	TPL	Third-Party Liability
		VAN	Value-Added Network

All Providers

New Bulletins on the IHCP Web Site

The following bulletin was posted to the Indiana Health Coverage Programs (IHCP) Web site in recent months:

- [BT200908](#) – National Drug Code Changes for Compound Drugs and Multiple NDC Codes

A complete list of bulletins is available on the IHCP Web site at [Publications/bulletin_results.asp](#). E-mail notifications are sent to subscribers as new bulletins are posted. To subscribe, visit the IHCP Web site at http://www.indianamedicaid.com/ihcp/mailling_list/default.asp and click Open New Account.

To access the [Explanation of Benefits \(EOB\)](#) codes from the IHCP Web site, click Provider Services and then click EOB descriptions. Follow the directions at the top of the EOB Web page to print or download the EOB list.

Tobacco Tax Increase – Opportunity to Promote Tobacco Cessation

Effective March 31, 2009, the federal tax on cigarettes and all other tobacco products increased. The next few months offer a great opportunity for you to promote tobacco cessation to your patients who use tobacco products.

You may refer Indiana patients to the Indiana Tobacco Quitline at 1-800-QUIT-NOW. The Indiana Tobacco Quitline is a program of the Indiana

Tobacco Prevention and Cessation Agency (ITPC). You may contact ITPC at 317-234-1787 if you have questions about Quitline services.

The Quitline offers online resources for tobacco users, healthcare providers, family and friends, and employers at <http://www.indianatobaccoquitline.net>. Quitline services are confidential and provided free of charge to Indiana residents.

The Quitline is staffed by professionally trained smoking-cessation Quit Coaches and is designed so you can easily refer clients to the program. The Indiana Tobacco Quitline also offers a fax referral program for Indiana residents and physicians. The Quitline staff will even fax a report to your office to tell you if the client was reached, enrolled in services, and plans to quit. You can simply ask, advise, and refer tobacco users to the Indiana Quitline using the fax referral form found at <http://www.indianatobaccoquitline.net/documents/QLfaxreferral.pdf>.

Instructions for providers are also available at <http://www.indianatobaccoquitline.net/documents/Hcproviderinstructions.pdf>.

If you choose to counsel patients in your office, Medicaid covers tobacco cessation counseling with HCPCS code S9075 – *Smoking cessation treatment* with a primary diagnosis code of 305.1 – *Tobacco use disorder*. One unit of S9075 is 15 minutes of service. Further instructions can be found in the *IHCP Provider Manual, Chapter 8*.

The Centers for Medicare & Medicaid Services Issues Quarterly Updates

The Centers for Medicare & Medicaid Services (CMS) has published the January quarterly updates with new and revised codes. Table 1 outlines the program coverage and shows the new Healthcare Common Procedure Coding System (HCPCS) coverage effective April 1, 2009.

Table 1 – Coverage Determination

HCPCS Code	Description	Program Coverage
C9249	<i>Injection, certolizumab pegol, 1 mg</i>	Covered – All Programs
S3865	<i>Comprehensive Gene Sequence Analysis for Hypertrophic Cardiomyopathy</i>	Covered – All Programs
S3866	<i>Genetic Analysis for a Specific Gene Mutation for Hypertrophic Cardiomyopathy (HCM) in an Individual with a Known HCM Mutation in the Family</i>	Covered – All Programs
S3870	<i>Comparative Genomic Hybrization (CGH) Microarray Testing for Developmental Delay, Autism Spectrum Disorder and/or Mental Retardation</i>	Covered – All Programs

HCPCS Code	Description	Program Coverage
K0739	<i>Repair or Nonroutine Service for Durable Medical Equipment Other Than Oxygen Requiring the Skill of a Technician, Labor Component, per 15 Minutes</i>	Not Covered – All Programs
K0740	<i>Repair or Nonroutine Service for Oxygen Equipment Requiring the Skill of a Technician, Labor Component, per 15 Minutes</i>	Not Covered – All Programs

Site-of-Service Reduction Indicator Removed from Current Procedural Terminology Codes 43280 and 47562

The site-of-service reduction indicator was removed from Current Procedural Terminology (CPT®) codes 43280 – *Laparoscopy, Surgical, Esophagogastric Fundoplasty (e.g., Nissen, Toupet Procedures)* and 47562 – *Laparoscopy, Surgical; Cholecystectomy*.

Claims with dates of service between January 1, 2005, and March 24, 2009, with a place of service of 22, 23, or 62 will be systematically mass adjusted. Providers can expect to see affected claims on the April 28, 2009, Remittance Advice.

Outpatient Claims Reprocessing – Revenue Code 636 and HCPCS J2323, Q4098, J1569, and Q4088

The Indiana Health Coverage Programs (IHCP) is performing a systematic reprocessing of outpatient claims billed with revenue code 636 and Healthcare Common Procedure Coding System (HCPCS) codes that previously denied for edit 0520 – *Invalid revenue code/procedure code combination* with the dates of service indicated in Table 2.

The reprocessed claims started appearing on the remittance advice (RA) dated April 7, 2009. Providers who have claims for this revenue-code and procedure-code combination that have not been submitted for processing should submit their claims for payment consideration.

Table 2 – Invalid Revenue/Procedure-Code Combinations

HCPCS Code and Description	Effective Date
J2323 – <i>Injection, Natalizumab, 1 mg</i>	January 1, 2008
Q4098 – <i>Injection Iron Dextran 50 mg</i>	April 1, 2008
J1569 – <i>Injection, Immune Globulin, (Gammagard Liquid), Intravenous, Non-Lyophilized (for example, Liquid), 500 mg</i>	January 1, 2008
Q4088 – <i>Injection, Immune Globulin (Gammagard), Intravenous, Non-Lyophilized (for example, Liquid), 500 mg</i>	July 1, 2007

Fee-for-Service Providers

Use Usual and Customary Fees When Billing IHCP Members

All IHCP providers are reminded to use their usual and customary (U&C) fees when billing for services rendered to members.

Providers should not use the Medicaid calculated allowable for their billed charges unless the Medicaid calculated allowable is equal to the amount charged by the provider to the general public. Additional

information can be found in *Chapter 8* of the *IHCP Provider Manual*.

In accordance with 405 IAC 1-1-6 (sanctions against providers; determination after investigation):

(b) Specifically, the office may impose the sanctions in subsection (a) if, after investigation by the office, the office's designee, the Indiana Medicaid Fraud Control Unit (IMFCU), or other governmental authority, the office determines that the provider:

(1) submitted, or caused to be submitted:

(c) Information with the intent of obtaining greater compensation than that which the provider is legally entitled including charges in excess of the:

(i) fee schedule; or (ii) usual and customary charges;

According to the IHCP provider agreement, providers agree:

“...to submit timely billing on Indiana Health Coverage Program approved claim forms, as outlined in the Indiana Health Coverage Programs Provider Manual, bulletins, and banner pages, in an amount no greater than Provider’s usual and customary charge to the general public for the same service.”

Billing using the U&C fees provides the IHCP with accurate information regarding the prevailing charges in the provider community.

Managed Care Providers

Managed Care Organization and Provider Contract Indemnification

The Hoosier Healthwise and Healthy Indiana Plan (HIP) contractual agreements with the State include language that requires the managed care organizations (MCOs) to ensure that subcontractors indemnify and hold harmless the state of Indiana from claims and suits caused by an act or omission of the contractor or subcontractors.

The requirement to indemnify the State created concern within the provider community and has prevented some providers from signing agreements with the Hoosier Healthwise MCOs and HIP insurers.

In response to this concern, the Indiana Office of Medicaid Policy and Planning (OMPP) issued a memo in February 2008 to the Hoosier Healthwise

MCOs indicating that indemnification of the State language was no longer required in Hoosier Healthwise provider agreements. The OMPP maintains the same position with regard to HIP insurers and will formally modify the HIP contract to reflect these requirements.

The OMPP maintains the position that this indemnification clause is required in all contracts between the MCO and another prepaid health plan, physician-hospital organization, and any entity that performs delegated activities related to the State MCO contract, as well as between MCOs and any administrative entities not involved in the actual delivery of medical care. Thus, a medical provider is not defined as a subcontractor for this purpose.

If you have any questions about this article, please contact the health plans with which you are contracted.

Hospice Providers

Revised Instructions for Medicaid Hospice Plan of Care Form

Effective March 6, 2009, the instructions on the Medicaid hospice plan of care were revised to reflect that the hospice must have signatures from two providers belonging to the disciplines listed on the form and the signature of the hospice medical director. The three-signature requirement is consistent with the federal Medicare Conditions of Participation for the Hospice Plan of Care.

The Indiana Medicaid hospice program requires prior authorization of hospice services, and the three signatures for the Medicaid hospice plan of care are required for prior authorization.

The new version of the Medicaid Hospice Plan of Care form is now available and can be downloaded

from the state Web site –

<http://www.state.in.us/icpr/webfile/formsdiv/48731.pdf> – as well as from the Indiana Health Coverage Programs (IHCP) Web site at <http://www.indianamedicaid.com/ihcp/Hospice/content/forms.asp>. If the required three signatures are not on the submitted form, the ADVANTAGE Health SolutionsSM Prior Authorization Unit is required to return the form for the third signature and modify the start dates of the hospice prior authorization. This is consistent with the timeliness requirement that all forms have the required signatures within 10 business days from the start of a hospice benefit period. The IHCP has further information on this revision in the March 2005 *IHCP Provider Newsletter* at <http://www.indianamedicaid.com/ihcp/Newsletters/NL200503.pdf>.

For additional information, refer to the Election, Plan of Care, and Benefit Period Process and Hospice Plan

of Care Documentation Requirements located in *Section 6* of the *IHCP Hospice Provider Manual* (revision date July 2008), which is available online at http://www.indianamedicaid.com/ihcp/Manuals/Other/Hospice_Benefit_Manual.pdf.

Questions regarding the Medicaid hospice forms required for hospice prior authorization may be directed to ADVANTAGE Health Solutions at 1-800-269-5720.

FQHC/RHC Providers

Encounter Code Updates

Effective March 26, 2009, the CPT and HCPCS codes shown in Table 3 were added as valid Federally Qualified Health Center (FQHC) and rural

health clinic (RHC) encounter codes for dates of service on or after January 1, 2009.

Table 3 – Encounter Codes Added

64455	64632	90681	90696	90951	90952	90953	90954	90955	90956
90957	90958	90959	90960	90961	90962	90963	90964	90965	90966
90967	90968	90969	90970	93279	93280	93281	93282	93283	93284
93285	93286	93287	93288	93289	93290	93291	93292	93293	93294
93295	93296	93297	93298	93299	96360	96361	96365	96366	96367
96368	96369	96370	96371	96372	96373	96374	96375	96376	96379
D3222	D3347	D5214							

FQHC and RHC providers who have billed and received denials for these codes for claims with dates of service on or after January 1, 2009, should resubmit those claims.

Effective January 1, 2009, CPT and HCPCS codes 99300 and 99432 are no longer valid FQHC/RHC encounters and will be removed from the list of valid encounter codes.

The valid FQHC/RHC encounter-code list is reviewed periodically to account for new and end-dated CPT and HCPCS codes, and is available on the Myers and Stauffer Web site at <http://www.mslc.com/>. Please direct questions about this article to Tim Guerrant at Myers and Stauffer, LC, at (317) 846-9521.

Provider Workshops

The IHCP Offers Second-quarter Medicaid Provider Workshops

The IHCP is offering quarterly provider workshops free of charge – see Table 4 for topics, times, and descriptions.

The schedule allows for lunch; however, lunch is not provided. Registrations are processed in the order received, and registration does not guarantee a spot at the workshop – seating is limited in all locations, and only two registrants are allowed per provider number. Confirmation letters are sent upon receipt of

registrations. If you do not receive a confirmation letter, the workshop is full.

Remaining workshop dates, registration deadlines, and locations are listed in Table 5. Addresses of workshop locations are available on the IHCP Web site at <http://www.indianamedicaid.com/ihcp/ProviderServices/workshops.asp>.

Register online at <http://www.indianamedicaid.com>. Click on Provider Services, then Education Opportunities. Another registration option is the form on page 9 of this newsletter. Fax completed registration forms to EDS at (317) 488-5376. The

Provider Workshop Registration form is also available on the Forms page of the IHCP Web site. If

you have questions about a workshop, please contact a field consultant at (317) 488-5072.

Table 4 – Second-quarter Provider Workshop Topics, Times, and Descriptions

Time	Topic	Description
8-9:45 a.m.	IHCP Family Tree, presented by EDS	This session provides an overview of the IHCP as a whole, including functions performed by each contractor in the traditional Medicaid, <i>Care Select</i> , Healthy Indiana Plan, and Risk-Based Managed Care programs. In addition, the payable services and populations served by each program are explained. This session is ideal for those who need a greater familiarity with the IHCP.
10-10:45 a.m.	Electronic Transactions, The Green Alternative, presented by EDS	Indiana is moving toward 100 percent electronic claim billing and 100 percent electronic Remittance Advices. Come and learn about the many benefits of retrieving your Remittance Advices, sending claims, verifying claim status, and correcting claims – all online. Let's go electronic!
11 a.m.-noon	Vaccines for Children (VFC), presented by the Indiana State Department of Health	This session welcomes the Indiana State Department of Health. Providers will learn how to navigate through and use the VFC program. Providers can expect to learn how the VFC program benefits children 18 and under. This session is ideal for all primary medical specialties.
Noon-1 p.m.	Lunch	
1-2 p.m.	Presumptive Eligibility/ Notification of Pregnancy, presented by EDS	This session introduces a strategic new program that will benefit uninsured pregnant women. Providers will learn how to participate in the new program and how to use Web interChange to help pregnant women apply for Hoosier Healthwise. This session is a must for those who treat pregnant women.
2:10-3:30 p.m.	Roundtable: Managed Care and Healthy Indiana Plan (HIP), presented by representatives from the three managed care organizations and two HIP plans	Representatives from the managed care organization (MCO) and HIP plans will discuss plan-specific program updates relating to topics such as Vaccines for Children (VFC), billing, E-billing, the Health Plan Employer Data and Information Set (HEDIS) audit with specific areas of focus, prior authorization, and behavioral health. In addition, providers will have an opportunity for an open Q&A segment.
3:35-4:30 p.m.	Hoosier Healthwise Open Enrollment, presented by EDS	This session provides an overview of the new enrollment platform that allows members to remain with a single MCO for a one-year period. This session highlights an improvement to Hoosier Healthwise and is ideal for all providers.

Table 5 – Dates, Registration Deadlines, and Locations

Workshop Date	Registration Deadline	Location
May 5, 2009	April 21, 2009	Parkview Hospital Corporate Office, 10501 Corporate Drive, Fort Wayne, IN 46845
May 8, 2009	April 24, 2009	Floyd Memorial Hospital, Paris Education Center, 1850 State Street, New Albany, IN 47150
May 13, 2009	April 29, 2009	St. Joseph Regional Hospital, Education Center, 801 E. LaSalle Avenue, South Bend, IN 46617

Workshop Date	Registration Deadline	Location
May 20, 2009	May 6, 2009	St. Catherine's Professional Office Building, 4321 Fir Street, East Chicago, IN 46312
May 26, 2009	May 12, 2009	Wishard Hospital, Myers Auditorium, 1001 W. 10 th Street, Indianapolis, IN 46237
June 2, 2009	May 19, 2009	Reid Hospital, Lingle Auditorium, 1100 Reid Parkway, Richmond, IN 47374
June 4, 2009	May 21, 2009	Unity Hospital, Unity Medical Pavilion, 1345 Unity Place, Lafayette, IN 47905
June 9, 2009	May 26, 2009	Good Samaritan Hospital, Eva Hill Auditorium, 520 S. 7 th Street, Vincennes, IN 47592
June 18, 2009	June 4, 2009	Bloomington Hospital, Wagmiller Auditorium, 601 W. 2 nd Street, Bloomington, IN 47403

INDIANA HEALTH COVERAGE PROGRAMS



PROVIDER WORKSHOP REGISTRATION

Indicate the workshop you will attend in Indiana. Print or type the information on this form and fax it to (317) 488-5376.

IHCP Family Tree (8-9:45 a.m.)

<input type="checkbox"/> Fort Wayne, May 5, 2009	<input type="checkbox"/> East Chicago, May 20, 2009	<input type="checkbox"/> Lafayette, June 4, 2009
<input type="checkbox"/> New Albany, May 8, 2009	<input type="checkbox"/> Indianapolis, May 26, 2009	<input type="checkbox"/> Vincennes, June 9, 2009
<input type="checkbox"/> South Bend, May 13, 2009	<input type="checkbox"/> Richmond, June 2, 2009	<input type="checkbox"/> Bloomington, June 18, 2009

Electronic Transactions, The Green Alternative (10-10:45 a.m.)

<input type="checkbox"/> Fort Wayne, May 5, 2009	<input type="checkbox"/> East Chicago, May 20, 2009	<input type="checkbox"/> Lafayette, June 4, 2009
<input type="checkbox"/> New Albany, May 8, 2009	<input type="checkbox"/> Indianapolis, May 26, 2009	<input type="checkbox"/> Vincennes, June 9, 2009
<input type="checkbox"/> South Bend, May 13, 2009	<input type="checkbox"/> Richmond, June 2, 2009	<input type="checkbox"/> Bloomington, June 18, 2009

Vaccines for Children (VFC) (11 a.m.-noon)

<input type="checkbox"/> Fort Wayne, May 5, 2009	<input type="checkbox"/> East Chicago, May 20, 2009	<input type="checkbox"/> Lafayette, June 4, 2009
<input type="checkbox"/> New Albany, May 8, 2009	<input type="checkbox"/> Indianapolis, May 26, 2009	<input type="checkbox"/> Vincennes, June 9, 2009
<input type="checkbox"/> South Bend, May 13, 2009	<input type="checkbox"/> Richmond, June 2, 2009	<input type="checkbox"/> Bloomington, June 18, 2009

Presumptive Eligibility/Notification of Pregnancy (1-2 p.m.)

<input type="checkbox"/> Fort Wayne, May 5, 2009	<input type="checkbox"/> East Chicago, May 20, 2009	<input type="checkbox"/> Lafayette, June 4, 2009
<input type="checkbox"/> New Albany, May 8, 2009	<input type="checkbox"/> Indianapolis, May 26, 2009	<input type="checkbox"/> Vincennes, June 9, 2009
<input type="checkbox"/> South Bend, May 13, 2009	<input type="checkbox"/> Richmond, June 2, 2009	<input type="checkbox"/> Bloomington, June 18, 2009

Managed Care and HIP Roundtable (2:10-3:30 p.m.)

<input type="checkbox"/> Fort Wayne, May 5, 2009	<input type="checkbox"/> East Chicago, May 20, 2009	<input type="checkbox"/> Lafayette, June 4, 2009
<input type="checkbox"/> New Albany, May 8, 2009	<input type="checkbox"/> Indianapolis, May 26, 2009	<input type="checkbox"/> Vincennes, June 9, 2009
<input type="checkbox"/> South Bend, May 13, 2009	<input type="checkbox"/> Richmond, June 2, 2009	<input type="checkbox"/> Bloomington, June 18, 2009

Hoosier Healthwise Open Enrollment (3:35-4:30 p.m.)

<input type="checkbox"/> Fort Wayne, May 5, 2009	<input type="checkbox"/> East Chicago, May 20, 2009	<input type="checkbox"/> Lafayette, June 4, 2009
<input type="checkbox"/> New Albany, May 8, 2009	<input type="checkbox"/> Indianapolis, May 26, 2009	<input type="checkbox"/> Vincennes, June 9, 2009
<input type="checkbox"/> South Bend, May 13, 2009	<input type="checkbox"/> Richmond, June 2, 2009	<input type="checkbox"/> Bloomington, June 18, 2009

Registrant Information (One registrant per form)

Name of Registrant: _____

Provider Name: _____ Provider Number: _____

Provider Address: _____

City: _____ State: _____ ZIP: _____

Provider Telephone: _____ Provider Fax: _____

Provider E-mail Address: _____

Contact Information

Table 6 – Provider Relations Field Consultants

Territory Number	Provider Relations Consultant	Telephone	Counties Served
1	Jean Downs	(317) 488-5071	Jasper, Lake, LaPorte, Newton, Porter, Pulaski, Starke
2	Rhonda Rupel	(317) 488-5080	Allen, Dekalb, Elkhart, Fulton, Kosciusko, Lagrange, Marshall, Noble, St. Joseph, Steuben, Whitley
3	Tawanna Danzie	(317) 488-5197	Benton, Boone, Carroll, Cass, Clinton, Fountain, Hamilton, Howard, Miami, Montgomery, Tippecanoe, Tipton, Warren, White
4	Daryl Davidson	(317) 488-5388	Adams, Blackford, Delaware, Grant, Hancock, Henry, Huntington, Jay, Madison, Randolph, Wabash, Wayne, Wells
5	Bill Woodruff	(317) 488-5098	Marion – UB-04 Billing Providers and Dental Providers
	Mona Green	(317) 488-5309	Marion – CMS-1500 Billing Providers
6	Shantel Silnes	(317) 488-5123	Bartholomew, Brown, Clark, Dearborn, Decatur, Fayette, Floyd, Franklin, Harrison, Jackson, Jefferson, Jennings, Ohio, Ripley, Rush, Scott, Shelby, Switzerland, Union, Washington
7	Virginia Hudson	(317) 488-5148	Clay, Greene, Johnson, Hendricks, Lawrence, Monroe, Morgan, Owen, Parke, Putnam, Sullivan, Vermillion, Vigo
8	Ken Guth	(317) 488-5153	Crawford, Daviess, Dubois, Gibson, Knox, Martin, Orange, Perry, Pike, Posey, Spencer, Vanderburgh, Warrick
9	Tawanna Danzie	(317) 488-5197	Out-of-State

Table 7 – Provider Relations Field Consultants for Bordering States

State	City	Provider Relations Consultant	Telephone
Illinois	Chicago/Watseka	Jean Downs	(317) 488-5071
Illinois	Danville	Virginia Hudson	(317) 488-5148
Kentucky	Owensboro	Ken Guth	(317) 488-5153
Kentucky	Louisville	Shantel Silnes	(317) 488-5123
Michigan	Sturgis	Rhonda Rupel	(317) 488-5080
Ohio	Cincinnati/Hamilton/Harrison/Oxford	Shantel Silnes	(317) 488-5123

Out-of-state providers not located in these states, or those with a designated out-of-state billing office supporting multiple provider sites throughout Indiana, should direct calls to (317) 488-5197.

Table 8 – For Provider Concerns

Name	Title	Telephone
Tina King	Provider Relations Supervisor	(317) 488-5154



Indiana Health Coverage Programs Quick Reference

Assistance, Enrollment, Eligibility, Help Desks, and Prior Authorization			
ADVANTAGE Health SolutionsSM Prior Authorization – FFS P.O. Box 40789 Indianapolis, IN 46240 1-800-269-5720 Fax: 1-800-689-2759	Automated Voice Response (AVR) System (including eligibility verification) (317) 692-0819 or 1-800-738-6770	EDS Administrative Review Written Correspondence P.O. Box 7263 Indianapolis, IN 46207-7263	EDS Customer Assistance (317) 655-3240 or 1-800-577-1278 Opt 1 = Pharmacy
EDS Electronic Solutions Help Desk (317) 488-5160 or 1-877-877-5182 INXIXElectronicSolution@eds.com	EDS Forms Requests P.O. Box 7263 Indianapolis, IN 46207-7263	EDS Member Hotline (317) 713-9627 or 1-800-457-4584 Opt 1 = Member Services Opt 2 = Pharmacy Opt 3 = First Steps	EDS Omni Help Desk (317) 488-5051 or 1-800-284-3548
EDS TPL (317) 488-5046 or 1-800-457-4510 Fax: (317) 488-5217	EDS Provider Enrollment and Waiver P.O. Box 7263 Indianapolis, IN 46207-7263 1-877-707-5750	EDS Provider Written Correspondence P.O. Box 7263 Indianapolis, IN 46207-7263	IHCP Provider and Member Concern Line (Fraud and Abuse) (317) 347-4527 or 1-800-457-4515
IHCP SUR Department P.O. Box 531700 Indianapolis, IN 46253-1700 (317) 347-4527 or 1-800-457-4515	Premium Collection Services Package C Payment Line 1-866-404-7113 Package C Payment Mailing Address Hoosier Healthwise P.O. Box 3127 Indianapolis, IN 46206-3127	M.E.D. Works 1-866-273-5897 M.E.D. Works Payment Mailing Address P.O. Box 946 Indianapolis, IN 46206	
Pharmacy Services Contact Information			
ACS Drug Rebate ACS State Healthcare ACS – Indiana Drug Rebate P. O. Box 2011332 Dallas, TX 75320-1332	EDS Pharmacy Services Help Desk for POS Claims Processing (317) 655-3240 or 1-800-577-1278 INXIXPharmacy@EDS.com	EDS Pharmacy Claims P.O. Box 7268 Indianapolis, IN 46207-7268	EDS Pharmacy Claims Adjustments P.O. Box 7265 Indianapolis, IN 46207-7265
Pharmacy Benefit Management Inquiries PDL@fssa.in.gov	Indiana Administrative Review/Pharmacy Claims EDS Pharmacy Claims Admin. Review P.O. Box 7263 Indianapolis, IN 46207-7263	PA For Pro-DUR and Preferred Drug List – ACS Clinical Call Center 1-866-879-0106 Fax: 1-866-780-2198	To make refunds to the IHCP for pharmacy claims, send check to: EDS Pharmacy Refunds P.O. Box 2303, Dept 130 Indianapolis, IN 46206-2303
Enrollment Broker Helplines (MAXIMUS)	Hoosier Healthwise Managed Care Organizations (MCOs)		
Hoosier Healthwise http://www.healthcareforhoosiers.com 1-800-889-9949 Care Select http://www.indianacareselect.com 1-866-963-7383 HIP http://www.HIP.in.gov 1-877-438-4479	Anthem http://www.anthem.com Claims 1-888-232-9613 Member Services 1-866-408-6131 PA 1-866-408-7187 Fax: 1-866-406-2803 Provider Services 1-866-408-6132 Fax: 1-866-408-7087 Prospective Providers 1-800-618-3141 Fax: 1-866-408-7087 Transportation 1-800-508-7230 Pharmacy 1-866-629-1608 PA: 1-877-652-1223 PA Fax: 1-866-408-7103	MDwise http://www.mdwise.org Claims, Member Services, PA/Medical Management, Provider Services, and Pharmacy (317) 630-2831 or 1-800-356-1204	Managed Health Services (MHS) https://www.managedhealthservices.com Claims, Member Services, PA/Medical Management, Provider Services, and Nursewise 1-877-MHS-4U4U or 1-877-647-4848 Pharmacy – US Script (PBM) 1-800-460-8988 Pharmacy PA 1-866-399-0928 Fax: 1-866-399-0929



Indiana Health Coverage Programs Quick Reference

Care Select – Care Management Organizations (CMOs)		Healthy Indiana Plan (HIP) Organizations	HIP – Enhanced Services Plan (ESP) Organizations	
ADVANTAGE Health Solutions SM http://www.advantageplan.com/ Member Services 1-800-784-3981 Provider Services 1-866-504-6708 PA 1-800-784-3981 Fax: 1-800-689-2759 P.O. Box 80068 Indianapolis, IN 46280 Hospice Member Disenrollment Fax: (317) 810-4488	MDwise http://www.mdwise.org Member Services and Provider Services 1-866-440-2449 Member Services Fax 1-877-822-7188 PA 1-866-440-2449 Fax: 1-877-822-7186 P.O. Box 44214 Indianapolis, Indiana 46244-0214	MDwise with AmeriChoice http://www.mdwise.org Claims, Member Services and Provider Services 1-877-822-7196 or 317-822-7196 Fax: 1-877-822-7192 or 317-822-7192 Medical Claims P.O. Box 31363 Salt Lake City, UT 84131-0363 Behavioral Health Claims 1-800-818-6872 3405 W. Dr. Martin Luther King, Jr., Ste. 101 Tampa, FL 33607	ACS – Non-Pharmacy P.O. Box 33077 Indianapolis, IN 46203-0077 1-866-674-1461 or 317-614-2032 Pharmacy PA ACS 1-866-879-0106 Fax: 1-877-822-7186 EDS Pharmacy Claims P.O. Box 7268 Indianapolis, IN 46207-7268 1-800-577-1278 or 317-655-3240	
Pharmacy See Pharmacy Services Contact Information above	EDS Claims Providers (317) 655-3240 1-800-577-1278 Members (317)-713-9627 1-800-457-4584	Anthem Blue Cross and Blue Shield http://www.anthem.com Member Services 1-800-553-2019 Provider Inquiry 1-800-345-4344 P.O. Box 37010 Louisville, KY 40233-7180 PA 1-866-398-1922		
Paper Claim Filing				
EDS 590 Program Claims P.O. Box 7270 Indianapolis, IN 46207-7270	EDS Adjustments P.O. Box 7265 Indianapolis, IN 46207-7265	EDS CCFs P.O. Box 7266 Indianapolis, IN 46207-7266	EDS Dental Claims P.O. Box 7268 Indianapolis, IN 46207-7268	EDS CMS-1500 Claims P.O. Box 7269 Indianapolis, IN 46207-7269
EDS Claim Attachments P.O. Box 7259 Indianapolis, IN 46207-7259	EDS Waiver Programs Claims P.O. Box 7269 Indianapolis, IN 46207-7269	EDS Medical Crossover Claims P.O. Box 7267 Indianapolis, IN 46207-7267	EDS Institutional Crossover/UB-04 Inpatient Hospital, Home Health, Outpatient, and Nursing Home Claims P.O. Box 7271 Indianapolis, IN 46207-7271	
Check Submission				
To make refunds to the IHCP EDS Refunds P.O. Box 2303, Dept. 130 Indianapolis, IN 46206-2303	To make refunds for CA-PRTF EDS/CA-PRTF Refunds P.O. Box 7247 Indianapolis, IN 46207	To make refunds for MFP EDS/MFP Refunds P.O. Box 7194 Indianapolis, IN 46207	To Return Uncashed IHCP Checks EDS Finance Department 950 N. Meridian St., Suite 1150 Indianapolis, IN 46204-4288	Pharmacy See Pharmacy Services Contact Information above
Restricted Card Program				
ADVANTAGE Health Solutions – FFS Attn: Restricted Card Program P.O. Box 40789 Indianapolis, IN 46240 1-800-784-3981 Fax: 1-800-689-2759		ADVANTAGE Health Solutions – <i>Care Select</i> Attn: Restricted Card Program P.O. Box 40789 Indianapolis, IN 46240 1-800-784-3981 Fax: 1-800-689-2759		MDwise – <i>Care Select</i> Attn: Restricted Card Program 1099 N. Meridian St., Suite 320 P.O. Box 44214 Indianapolis, IN 46204 1-866-440-2449 or Fax: 1-877-822-7188