PROVIDER *news*

Doing business with Medicaid

Qualified providers wanted to help members through the presumptive eligibility process

by Provider Relations Field Representative Relia Manns

The Indiana Health Coverage Programs (IHCP) is pleased to announce that in its first year, the Presumptive Eligibility (PE) Program has enrolled more than 10,000 pregnant women. Nearly 250 providers have elected to participate as qualified providers (QPs) to assist pregnant women with gaining coverage for prenatal care.

The IHCP needs your help to improve the quality of the PE program. We are looking for additional qualified providers to assist pregnant women with completing the presumptive eligibility application process. QPs may include the following provider types/specialties:

■ Family or general practitioner ■ Pediatrician ■ Internist ■ Obstetrician or gynecologist ■ Certified nurse midwife ■ Advanced practice nurse practitioner ■ Federally qualified healthcare center ■ Medical clinic ■ Rural health clinic ■ Outpatient hospital ■ Local health department ■ Family planning clinic

If you are one of these provider types or specialties and are interested in becoming a qualified provider, please refer to *BT200910*, dated April 30, 2009, for instruction about precertifying as a QP on Web interChange. Once you have completed the precertification, contact your area Provider Relations Field Consultant for training or contact PE Provider Relations Field Consultant Relia Manns at (317) 488-5363.

The IHCP covers newly required 2010-2011 vaccines for school-age children

The IHCP reminds providers that, beginning with the 2010-2011 school year, the Indiana State Department of Health (ISDH) requires all school-age children to receive additional immunizations for meningitis, varicella, and pertussis (whooping cough). The IHCP covers the injection only and not the administration if done in a pharmacy or by a registered pharmacist.

For a current list of requirements and frequently asked questions (FAQs), visit Children and Hoosiers Immunization Registry Program (CHIRP):

- 2010-2011 School Year Immunization Requirements
- 2010-2011 School Immunization Requirements Reference Chart
- 2010-2011 School Immunization Requirement FAQs

IHCP pharmacy providers – bookmark these important pharmacy links:

- Preferred Drug List
- Covered over-the-counter (OTC) drugs
- Mental Health Quality Advisory Committee (MHQAC) edits
- *IHCP Provider Manual – Chapter 9*

Annual IHCP Provider Seminar scheduled for October 19-21

Mark your calendars now for the 2010 IHCP Seminar October 19-21 in Indianapolis. There is no cost to attend. Session topics include Prior Authorization, the National Correct Coding Initiative, and many more. For more information, see BT201033, dated August 31, 2010.

Submit claims to prevent provider termination for no claim activity

If you're enrolled as a provider for Indiana Medicaid, you must submit at least one claim every 18 months to keep your enrollment active.

After 18 months of no claim activity, providers automatically receive a system-generated letter (below) informing them that their provider enrollment with the IHCP will be terminated in 30 days.

To avoid termination, an authorized official must sign the system-generated letter and return it to the IHCP. **Also, providers must submit a claim before the next calendar quarter, or the system will again automatically terminate their enrollment**.

If you have questions, please contact HP Provider Enrollment at 1-877-707-5750.

> Providers must return the system-generated letter and *submit a claim* in order to remain eligible in the IHCP.

HP Enterprise Services
950 North Meridian Street, Suite 1150
Indianapolis, IN 46204
www.hp.com

Provider Enrollment Unit
P.O Box 7263
Indianapolis, IN 46207-7263

1-877-707-5750 Tel

August 16, 2010

Provider ID:

Dear Provider:

It appears you are no longer providing services in the Indiana Health Coverage Programs (IHCP), also known as Indiana Medicaid. There has been no claim activity within the last 18 months with the above listed provider ID; therefore, the IHCP provider enrollment will be terminated effective 30 days from the date of this letter. To stop the termination of this enrollment, please complete this form with the appropriate authorized signature (signature must be on file with the IHCP), and return it to:

HP Provider Enrollment
PO Box 7263
Indianapolis, IN 46207-7263

Please contact 1-877-707-5750 if you have any questions.

☐ Keep my provider enrollment active. I understand that claims need to be submitted at least once every 18 months in order to keep my enrollment status active.

Provider Contact Name: _____   Phone: _____

_____   Date: _____
Authorized Signature of Owner, or Person with Authority
(Signature must be on file with the IHCP)

Respectfully,
HP Provider Enrollment
Indiana Health Coverage Programs

To be ready for testing in 2011, prepare now for these upgrades.

Begin preparing now for HIPAA 5010/NCPDP D.O

by EDI Solutions Analyst Marcia Reed

January 1, 2012, marks the mandatory compliance date for Health Insurance Portability and Accountability Act (HIPAA) version 5010 and the National Council for Prescription Drug Programs (NCPDP) version D.0. To prepare for testing in 2011, begin preparing now for these upgrades.

The IHCP will begin testing the new transactions in first-quarter 2011. Transactions affected by this upgrade include healthcare and pharmacy claims for payment (837I, 837D, 837P, and NCPDP transactions); eligibility verifications (270/271); claim status inquiry (276/277); electronic Remittance Advices (835); prior authorizations (278); managed care enrollment (834); and capitation payments (820).

What you need to do

- If you bill the IHCP directly, contact your electronic data interchange (EDI) department to begin the upgrade process.

- If you are using a billing service or clearinghouse, find out if it is preparing for the HIPAA upgrades to ANSI v5010 and NCPDP vD.0.

Watch for more updates coming soon, including a schedule for transaction testing, in IHCP provider newsletters and on the IHCP Web site. If you have questions, contact INXIXTradingPartner@hp.com or call the EDI Solutions Help Desk at 1-877-877-5182 or (317) 488-5160.

MDS Supportive Documentation Guidelines are posted to the IHCP Web site

Minimum Data Set (MDS) Supportive Documentation Guidelines (SDGs), RUG-III, Version 5.12, 34 Grouper have been posted to the IHCP Web site. The guidelines, updated June 28, 2010, assist providers with identifying and documenting all MDS data elements used to classify nursing facility residents in accordance with the Resource Utilization Group (RUG)-III resident classification system. Revisions are based on MDS 3.0. To see the updated guidelines, visit MDS Supportive Documentation Guidelines, or go to **indianamedicaid.com** > **Provider-Specific Information** > **Long-Term Care** > **MDS 3.0**. If you have questions, contact HP Enterprise Services Long Term Care Unit at (317) 488-5062.

Make the most of the new IHCP Web site
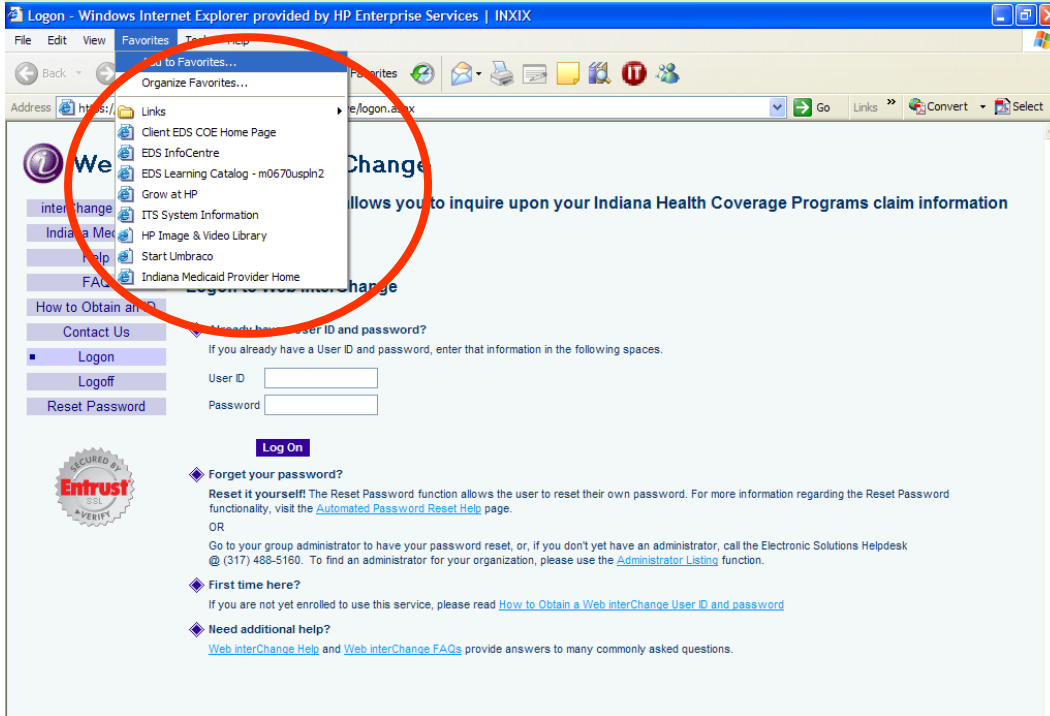
For quick access to Web interChange and electronic claims processing, bookmark the page (left) – click "Bookmark" or "Favorites," and add the page to your list.

Looking for a quick way to access Web interChange?

Bookmark it! Adding Web interChange to your list of bookmarks or favorites makes electronic claim submission and checking claim status just one click away, allowing you to bypass the IHCP Web site's home page and go directly to Web interChange. At the top of your browser page, go to **Bookmarks** > **Bookmark This Page** or **Favorites** > **Add to Favorites**.

Did you know…The new provider Web site boasts searchable news archives

You know you saw a recent news item in the News and Announcements section of the IHCP Web site about a change in the Pharmacy Service Help Desk hours. But you can't remember exactly when or where – and more important, you can't recall the new hours. Let the IHCP Web site remember for you – check the Archived News section of the new provider site. When articles are removed from the home page, they are moved to the Archived News section, and archived news topics also come up when you search the Web site using the "Search" box in the upper-right corner of the home page.
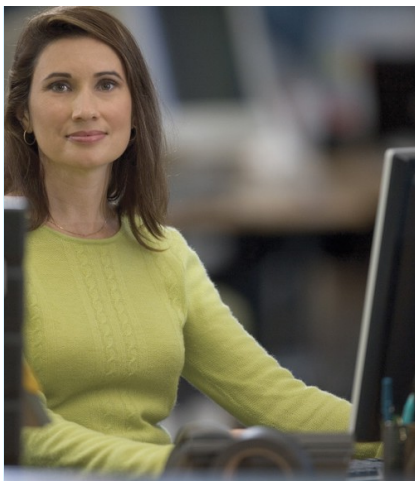
Save time and money
Creating a paperless office – Part II
by Business Analyst Rebecca Siewert

Part I of this article, which appeared in the [August IHCP Newsletter](#), covered how reducing paper can save time and money; scanning documents; what to store; and where to begin.

If you've often thought about the time and money you could save if you reduced – or eliminated – the amount of paper moving through (and being stored in) your office, welcome to the 21st century. A paperless office – or at least, an office with less paper – is well within your reach. All it takes is willingness to change and a well-thought-out plan. Once you have figured out how to scan which documents, what to store, and where to begin, you can begin thinking about:

Backing up your documents

Consider how you'll back up your system. Will backups be full or partial? Will you store backups on or off site or both? Will you use an online backup available through companies that guarantee the safety and security of your information? Be sure to develop a disaster recovery plan that includes strategies for how you will access important documents if your system is down or destroyed, or your business is otherwise incapacitated.

Simple steps for getting started

- Identify your objective.

- Outline your process – scanning, filing, and work flow. Once it's working, review and revise it regularly.

- Develop a backup/disaster recovery plan.

- Test equipment and procedures, train your employees, and modify your system as necessary.

Keep in mind…

- Paperless does not mean people-less –

Use the IHCP Web site as a paperless resource

To boost your plans for a paperless office, remember that you can download forms, find the most up-to-date news and announcements, and refer to new and archived IHCP banners, bulletins, and newsletters online on the newly redesigned IHCP Web site.

You can also submit claims electronically via Web interChange – if you haven't already signed up, do it today.

Often, employees equate reducing paper with reducing staff. In most cases, reducing paper frees your staff to accomplish other, more important tasks – such as providing excellent customer service.

- All stakeholders need to be involved from the beginning – chances are, everyone in your office will feel the impact when you begin reducing paper. Make sure all employees have a chance to contribute their ideas to the process – you'll get better buy-in, and you'll end up with a better process. It's also easier to make changes when everyone understands the process from the inside out.

Paperless office

- Avoid unwieldy customized systems – Customized systems can't withstand frequent changes, so they become difficult and expensive to maintain. It is best if your staff, rather than an outside vendor, develops your paperless system.

- Avoid duplicating the paper process without improving on it – Think about the filing problems that exist with your current paper system. Don't create a paperless process with the same pitfalls. Before you store a piece of paper, ask yourself if it is available electronically. Are you required legally to retain this paper? What value does it add?

Again, start small – but do start. You'll find that even modest reductions in the amount of paper you and your staff handle daily make a big difference.

RECENTLY PUBLISHED TO THE IHCP WEB SITE

BULLETINS

- BT201027 – Enhancement to SmartPA™ Automated Prior Authorization System

- BT201028 – Cost Invoices for DME, Supplies, and Hearing Aids

- BT201029 – Standardized Prenatal Care Coordination Assessment Forms and Outcome Report

- BT201030 – System Enhancements Improve Claim Processing for MRT-Eligible Services

- BT201031 – Changes to the Preferred Drug List

- BT201032 – Early Refill Prior Authorization for Drugs on the OTC Drug Formulary Now Dependent on Allowed Amount

- BT201033 – 2010 IHCP Provider Seminar Scheduled for October 19-21 in Indianapolis

IHCP PROVIDER MANUAL

The following chapter of the *IHCP Provider Manual* has been updated:

- Chapter 1 – General Information, version 10.1

- Chapter 8 – Billing Instructions, version 10.0

- Chapter 12 – Financial Services, version 10.0

LOOKING FOR MORE INFORMATION ABOUT PROVIDER MANUAL UPDATES?

- Subscribe to IHCP E-mail Notifications.

- The Revision History at the front of each section of the *IHCP Provider Manual* provides more detailed information about each revision.

NEWS FROM RECENT BANNER PAGES

- Standardized Prenatal Care Coordination Forms Have Been Updated

- Changes to CPT Code 31254 – Nasal Endoscopy

- Mass Adjustment for HCPCS Code J7321

- Coverage of CPT Codes for Vaccines for Children

- Archived News on IHCP Provider Web Site

- Long-Term Care, Hospice, Pharmacy, and Managed Care Provider Pages on the IHCP Web Site

FOR MORE INFORMATION

- Contact your Provider Relations Field Consultant

- IHCP Provider Quick Reference – a complete list of addresses, telephone numbers, and fax numbers for the IHCP and IHCP vendors