


PROVIDER news

INDIANA HEALTH COVERAGE PROGRAMS NL201212 DECEMBER 2012

Are you one of the 100,000-plus active IHCP users enjoying the benefits of Web interChange?



Web interChange
Submit claims, check member eligibility, update your provider profile and much more. [More Information](#)

You can access Web interChange from the home page of indianamedicaid.com – look for the “doc in a box.”

In 2001, the Indiana Health Coverage Programs (IHCP) initiated an electronic method for Indiana Medicaid providers to complete transactions with the IHCP: Web interChange.

“At that time, we had an internal contest to promote the new Web interChange site to providers,” says Marcia Reed, electronic data interchange (EDI) Solutions Analyst. The idea that providers may have been hesitant to embrace an electronic option seems quaint today. “As of October 31, 2012, Web interChange had 103,000 active users, meaning those users had logged into Web interChange in the last 90 days,” says Reed.

Web interChange is a secure, interactive website where IHCP providers can:

INSIDE STORIES

- [ICD-10 span date logic](#)
- [New Indiana Medicaid Pharmacy Benefits Manager](#)
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- [Make tax time easier](#)
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- Submit claims and inquire about claim status (nonpharmacy)
- Check member eligibility
- Check benefit limitations
- Access weekly Remittance Advices (RAs)
- Submit and check the status of prior authorization (PA) requests
- View and update their IHCP provider profiles
- Register for the Indiana Electronic Health Records (EHR) Incentive Program

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Log On

◆ Forget your password?
Reset it yourself! The Reset Password function allows the user to reset their own password. For more information regarding the Reset Password functionality, visit the [Automated Password Reset Help](#) page.
 OR
 Go to your group administrator to have your password reset, or, call the Electronic Solutions Helpdesk @ (317) 488-5160. To find an administrator for your organization, visit the [Administrator Login](#) function.

Many users aren't aware they can reset their own passwords on Web interChange – without calling the EDI Solutions help desk.

Welcome to Web interChange

This secure website allows you to inquire upon your Indiana Health Coverage Programs claim information quickly and easily.

InterChange Home
 Indiana Medicaid
 Birth Expenditures
 Check/RA Inquiry
 Claim Inquiry
 Claim Submission
 CS Notif Inquiry
 Eligibility Inquiry
 LMC Inquiry
 NOP Inquiry
 Pharmacy
 Pharm Member Profile
 Provider Profile
 User Lists
 User Profile
 Help
 FAQ
 How to Obtain an ID
 Contact Us
 Logon

Invalid ID/Password. Please try again

Logon to Web interChange

◆ **Already have a User ID and password?**
 If you already have a User ID and password, enter that information in the following spaces.
 User ID:
 Password:

◆ **Forgot your password?**
 Reset it yourself! The Reset Password function allows the user to reset their own password. For more information regarding the Reset Password functionality, visit the [Automated Password Reset](#) page.
 OR
 Go to your group administrator to have your password reset, or, if you don't yet have an administrator, call the Electronic Solutions Helpdesk @ (317) 488-5160. To find an administrator for your organization, please use the [Administrator Login](#) function.

◆ **First time here?**
 If you are not yet enrolled to use this service, please read [How to Obtain a Web interChange User ID and password](#).

◆ **Need additional help?**
[Web interChange Help](#) and [Web interChange FAQ](#) provide answers to many commonly asked questions.

“Providers who are signed up for Web interChange can submit claims, except pharmacy claims, via Web interChange, and they can view their claim submissions two hours after the claims are submitted,” says Reed.

“Web interChange is free,” says Virginia Hudson, Provider Relations field consultant. “And it can make a biller’s life very easy when it comes to researching denied claims.”

“Many providers don’t realize they can use Web interChange to check the status of claims, whether the claims were submitted using Web interChange, through an EDI vendor or clearinghouse, or on a paper claim form,” says Daryl Davidson, IHCP trainer. Davidson says providers can also submit claim adjustments electronically using the *Replace This Claim* and *Void* functions on Web interChange.

“Claims submitted electronically process in one-third the time required for paper claims. “With that speed,” says Reed, “most providers can be reimbursed for their claim submissions within a week.”

Web interChange further enhances claims processing by offering access to Clear Claim Connection, which allows providers to check claims against National Correct Coding Initiative (NCCI) edits before the claims are submitted.

Web interChange security

With so many Web interChange users, it’s important to make sure Web interChange is secure, per the *Health Insurance Portability and Accountability Act* (HIPAA). “Security has definitely been a focus for us, especially in recent months,” says Reed. (For more details about Web interChange security, see bulletin [BT201242](#).)

Web interChange users can reset their own passwords

“Many Web interChange users aren’t aware they can reset their own Web interChange passwords,” says Reed. “In fact, more than 60% of the Web interChange-related calls we get at the EDI Solution help desk are requests to reset passwords.” The Help area on Web interChange provides step-by-step instructions for resetting user passwords.

To find out more about Web interChange, talk to your IHCP Provider Relations Field Consultant. (To find out who your field consultant is, see the [Provider Relations Field Consultant page](#) on indianamedicaid.com.)

Claims submitted electronically process in one-third the time required for paper claims. “With that speed, most providers can be reimbursed for their claim submissions within a week,” says Reed.



Be sure you understand ICD-10 span date logic

During the 2012 Annual IHCP Provider Seminar in October, many providers asked questions about the span date logic the Indiana Health Coverage Programs (IHCP) plans to use for ICD-10. The overriding rule of span date logic is that providers will not be allowed to mix ICD-9 and ICD-10 codes on the same claim. Claims submitted with mixed coding will deny.

The following is an abbreviated version of the ICD-10 span date logic table that appears on the [ICD-10 Decisions page](#) on indianamedicaid.com. Visit this page frequently to keep up with ICD-10-related decisions and other changes.

Institutional provider claims

Facility type/service	Claims processing requirement	Effective October 1, 2014
Inpatient hospital (hospital, prospective payment system [PPS] hospital, long-term care [LTC] hospital, critical access hospital [CAH]) Claim types I (inpatient) and A (inpatient crossover)	The IHCP requires the use of Occurrence Code 51 to indicate discharge. Occurrence Code 51 will continue to be required for this purpose, but will not be used to validate the ICD-10 code. The IHCP now uses the FROM date of service for inpatient (I) and inpatient crossover (A) claim types; however, with ICD-10 implementation, this will change to use of the THROUGH date.	Use THROUGH date
Outpatient Claim type C (outpatient crossover) and O (outpatient)	For dates of service that span the ICD-10 compliance date, providers must separate claims submissions so that ICD-9 codes remain on one claim (dates of service before October 1, 2014) and all ICD-10 codes remain on the other claim (dates of service on or after October 1, 2014). Providers now use the FROM date; continue to use the FROM date.	Use FROM date
Federally Qualified Health Clinic (FQHC)	FQHC crossover claims from Medicare are processed as outpatient crossover claims. However, when an FQHC claim is for a member without Medicare, the claim is submitted on a <i>CMS-1500</i> claim form.	Use FROM date
Skilled nursing, including intermediate care facility for the intellectually disabled (ICF/ID, formerly ICF/MR)	If the long-term care (LTC) claim has a THROUGH date on or after October 1, 2014, the entire claim is billed using ICD-10.	Use THROUGH date
Home health Claim type H (home health)	For dates of service that span October 1, 2014, providers must separate claim submissions so ICD-9 codes remain on one claim (dates of service before October 1, 2014) and the ICD-10 codes remain on the other claim (dates of service on or after October 1, 2014).	Use FROM date

Professional claims

Facility type/service	Claims processing requirement	Effective October 1, 2014
All anesthesia claims All specialties billed on professional claims (including waiver) Claim types M (medical) and B (medical crossover)	Anesthesia procedures that begin on September 30, 2014, but end on October 1, 2014, are to be billed with ICD-9 diagnosis codes using the September 30, 2014, as both the FROM and THROUGH dates. Use the FROM date on the detail.	Use FROM date on the detail

[Continue](#)

Supplier claims

Facility type/service	Claims processing requirement	Effective October 1, 2014
Durable medical equipment (DME) Claim type M (medical) and B (medical crossover)	Billing for certain items or supplies (such as capped rentals or monthly supplies) may span October 1, 2014 (as when the FROM date of service occurs before October 1, 2014, and the THROUGH date of service occurs on or after October 1, 2014).	Use FROM date on the detail

Visit the ICD-10 pages on indianamedicaid.com

Information about ICD-10 is continuously updated and presented during association meetings and made available on the [ICD-10 Information pages](#) on indianamedicaid.com. Be sure to check the site frequently for new and updated information.

Catamaran Corporation is the new Indiana Medicaid Pharmacy Benefits Manager

Catamaran Corporation will be responsible for pharmacy benefit management and pharmacy claims processing for the Indiana Health Coverage Programs (IHCP) beginning in spring 2013. For more information, see [BT201237](#), dated October 16, 2012. Watch the [New Indiana Medicaid PBM page](#) of indianamedicaid.com to stay up-to-date on the coming transition.

Provider education

Learn how to complete the IHCP Provider Enrollment Application

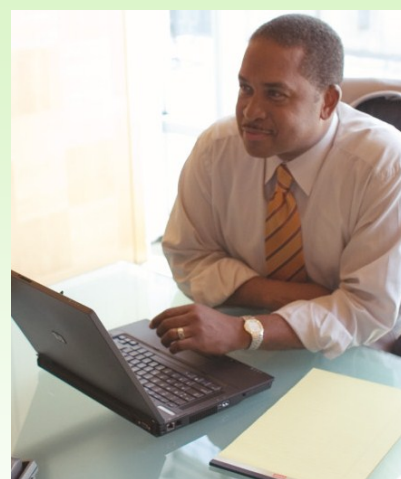
If you need to enroll a new service location, revalidate your existing enrollment, or update your provider profile, the IHCP is offering online "how-to" sessions on provider enrollment in November and December 2012. These two-hour sessions, conducted via HP Virtual Room, focus on:

- Completing the enrollment packet
- Adding rendering practitioners
- Completing a change of ownership
- Correctly completing forms and addenda

For more information and to register, see the [Provider Education page](#) on indianamedicaid.com.


Check out the 2012 IHCP Annual Provider Seminar presentations – now on indianamedicaid.com

If you attended the 2012 IHCP Annual Provider Seminar, check out the PowerPoint presentations from the sessions for a quick review. If you could not get away from the office to attend the annual seminar, these presentations will provide an overview of the helpful sessions you missed. To access the presentations, visit the [Archived Workshop Presentations page](#) on indianamedicaid.com.



IHCP first-quarter workshops are coming soon

In-person and online workshops will be available. Watch upcoming IHCP publications and indianamedicaid.com for details.



Provider Profile Menu

interChange Home	Provider Profile Information
Indiana Medicaid	View a Profile
Birth Expenditures	View Upcoming Providers for Revalidation
Check/RA Inquiry	
Claim Inquiry	Provider Documents
Claim Submission	View Downloadable Documents for Medicaid Providers
CS Notif Inquiry	View List of HP Provider Field Consultants
Eligibility Inquiry	
MRO Inquiry	Electronic Health Record (EHR) Incentive Program
NOP Inquiry	EH and EP EHR Registration
PA Inquiry	
Pharm Member Profile	
Provider Profile	

Make tax time easier by starting now

■ **Verify your provider profile information on Web interChange** – It’s never too early to verify the address and tax information you have on file with the Indiana Health Coverage Programs (IHCP). You can review and verify your “mail to,” “pay to,” and “home office” addresses on Web interChange – go to your provider profile on [Web interChange](#) via indianamedicaid.com.

■ **Correct your address information** – If your “mail to” or “pay to” address has changed, you can update your provider profile online or by mail. Providers wanting to update their “mail to” or “pay to” addresses online via [Web interChange](#) can choose the Provider Profile and the Edit/View option. Providers can also request updates by submitting an *IHCP Name and Address Maintenance Form*, available on the [Update Your Provider Profile page](#) on indianamedicaid.com. Changes to your “home office” address, which is your legal address, must be submitted by mail and require a W-9 be submitted with the form.

■ **Corrections to your taxpayer identification information** – If your taxpayer identification information, including the name, address, or identification number on the W-9 form on file with the IHCP, needs to be updated, you must submit your update by mail using the *IHCP Tax Identification Maintenance Form* available on the [Update Your Provider Profile page](#) at indianamedicaid.com. A revised W-9 form must be submitted with the form.

Have you signed up for the EHR incentive program?

Incentive payments for the Electronic Health Records (EHR) initiative amount to more than \$80 million since the program’s introduction in May 2011. A total of 1,387 eligible professionals and 87 eligible hospitals have benefited from these payments. For more information about EHR, see the [EHR Incentive Program page](#) on indianamedicaid.com.

Download the HP Summary Report of LTC Facilities Reviewed – and learn!

The current long-term care (LTC) monthly audit report, which contains information ranging from audit validation rates, to analyses by risk category, to summaries of monthly statistics for all facilities reviewed, is available for download under [Monthly Summary Report of LTC Facilities Reviewed](#) (Provider-Specific Information > Long Term Care) at indianamedicaid.com.



IHCP publications go green!

The Indiana Health Coverage Programs (IHCP) now offers a printer-friendly option for printing copies of publications. In response to requests from the provider community, at the end of all publications, you will find a link to a PDF (see box at bottom of page) that will print in black and white without graphics – saving you ink and money.

RECENTLY PUBLISHED TO THE IHCP WEBSITE

BULLETINS

- [BT201243](#) – The IHCP to Implement the Family Planning Eligibility Program
- [BT201244](#) – OBSOLETE: Drug Coverage Change for Dually Eligible Medicaid Members
- [BT201245](#) – REVISED: Drug Coverage Change for Dually Eligible Medicaid Members
- [BT201246](#) – Changes to the Preferred Drug List
- [BT201247](#) – ACA Increases Reimbursement for Primary Care Services in 2013 and 2014
- [BT201248](#) – The OMPP to Change Its Policy Regarding Physician Certification for Long-Term Care Services (450B)
- [BT201249](#) – Policy Change: Electronic Physician Certification for Long-Term Care Services (450B) Process
- [BT201250](#) – The OMPP Updates PA Criteria for PRTF Admissions, Continued Stays, and Re-admissions

PROVIDER MANUAL UPDATES

[IHCP Provider Manual](#) – the following chapter of the manual has been updated:

- [Chapter 3](#) – *Electronic Solutions*

LOOKING FOR MORE INFORMATION ABOUT PROVIDER MANUAL UPDATES?

- Subscribe to [IHCP E-mail Notifications](#).
- The Revision History at the front of each manual (or chapter) provides detailed information about the updates made in the most recent revision.

NEWS FROM RECENT BANNER PAGES

- [The CMS Announces New Hospital-Acquired Conditions](#)
- [Maximum Fee Rates for Manually Priced DME and Supplies](#)
- [HMS Offers Webinar on Long-Term Care RAC Audits](#)
- [2013 HCPCS Updates Are Available](#)
- [The IHCP Announces the IEP-Related Nursing Services Rate for Calendar Year 2013](#)
- [IHCP Publications Go Green](#)
- [Make Tax Time Easier by Starting Now](#)
- [Learn How to Complete the IHCP Provider Enrollment Application](#)
- [CPT Codes 92071/92072 Linked to Provider Specialty 180 – Optometrist](#)
- [Changes to CRNA Coding and Billing](#)
- [The IHCP to Adopt 2013 Medicare Rates for Select Clinical Laboratory Services](#)
- [Updates to Mental Health Utilization Edits](#)
- [New Coverage for Colonic Motility Study](#)

FOR MORE INFORMATION

- Contact your [Provider Relations Field Consultant](#).
- [IHCP Provider Quick Reference](#) – This reference contains a complete list of addresses, telephone numbers, and fax numbers for the IHCP and IHCP vendors.

TO PRINT

A [printer-friendly version](#) of this publication, in black and white and without graphics, is available for your convenience.