# PROVIDER news

INDIANA HEALTH COVERAGE PROGRAMS NL201304 APRIL 2013



## **CAQH CORE compliant with Phase II rules**

The Indiana Health Coverage Programs (IHCP) is compliant with Phase II of the federally mandated rules established by the Council on Affordable Quality Healthcare (CAQH) Committee for Operating Rules for Information Exchange (CORE).

Enhancements made to the IHCP system to comply with the CORE Phase II Operating Rules are outlined as follows:

- Companion Guides, provided as a supplement to the ASCX12 TR3 Implementation Guides, were updated to the CORE standard format in December 2012. IHCP Companion Guides are available on the <u>Electronic Data Interchange</u> page of <u>indianamedicaid.com</u>
- Beginning April 1, 2013, providers can check eligibility for a future date of service as long as the date is within the current month. (*Note:* Even though the CORE operating rules require that a provider must be able to inquire on eligibility up to the end of the current month, the IHCP cannot guarantee that a member will be eligible on a future date of service.)
- Beginning April 1, 2013, the IHCP will support CORE Phase II Version 2.2.0 connectivity rules. Trading partners can submit interactive and batch 270/271 eligibility request and response transactions and 276/277 claim status inquiry request and response transactions via the new web service. Trading partners interested in connecting using the CORE web service should contact HP EDI Solutions at INXIXTradingPartner@hp.com.

See <u>BT201308</u>, dated March 26, 2013, for more details.

- Submitting EDI ICD-10 test claims
- IHCP testing ICD-10 systems
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## Submitting EDI ICD-10 test claims to the IHCP

Indiana Health Coverage Providers (IHCP) providers have asked: I cannot submit electronic data interchange (EDI) test claims to the IHCP that have future dates of service (DOS); how do I submit ICD-10 EDI test claims today when ICD-10 is not effective until October 2014?

The IHCP began accepting EDI ICD-10 test claims effective June 1, 2012. Test claims with ICD procedure codes (where applicable) and diagnosis codes can be submitted for DOS on or after June 1, 2012, in ICD-10 format.

See information about ICD-10 vendor testing in the *ICD-10 Vendor Testing Expectations – Hoosier Healthwise/Healthy Indiana Plan (HIP) MCE EDI Transactions and Extracts* on the <u>ICD-10 Testing – MCEs and Extract Vendors</u> page on indianamedicaid.com.

## IHCP is ready to test ICD-10 systems with vendors!

The Indiana Health Coverage Programs (IHCP) is ready to begin testing system changes for ICD-10. HP has developed a new test environment for ICD-10 testing. Have your trading partners contact the IHCP testing team at

INXIXTradingPartner@HP.com before beginning testing to ensure that test files are routed to the ICD-10 test environment.

Note that there are two timeframes of testing for ICD-10: the remaining months in 2013 and also January – June of 2014.

#### April – December 2013

Testing in 2013 will ensure that claims process correctly in the new test environment when submitting ICD-9 or ICD-10 codes. Trading partners are encouraged to submit both ICD-9 and ICD-10 claim files during this time period.



The new ICD-10-related claim rejection and claim denial edits can be tested at this same time. See the <u>ICD-10 Software</u> <u>and Clearinghouse Vendor Newsletter</u> for additional testing information. Your software or clearinghouse vendor should have received a copy of the newsletter via email; you can also find a copy of the newsletter on the <u>ICD-10 Testing -</u> <u>Software and Clearinghouse Vendors</u> page on indianamedicaid.com.

#### January – June 2014

This testing period will focus on claims processing and end-to-end testing to include testing with the new All Patient Refined-Diagnosis Related Group (APR-DRG) grouper. Watch for additional information about end-to end-testing in future software vendor and clearinghouse newsletters. Also, be sure to check out the <u>ICD-10 Testing - Software and</u> <u>Clearinghouse Vendors</u> page on indianamedicaid.com.

## Reminder: ICD-10 codes will not replace DSM codes

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Providers have questioned whether the upgrade of the *Diagnostic and Statistical Manual of Mental Disorders* (DSM) from version IV to version V will affect the transition to ICD-10 and whether the ICD-10 code set contains diagnosis codes that will replace DSM codes. The migration from DSM-IV to DSM-V and the move to ICD-10, though related, are different initiatives. Diagnoses that previously required DSM-IV codes will require DSM-V codes when the new DSM manual is implemented (now set for May 2013); diagnoses that previously required ICD-9 diagnosis codes will require ICD-10 diagnosis codes when ICD-10 is implemented October 1, 2014. ICD-10 codes will not replace DMS codes.

## Links added to website

**APRIL 2013** 

Recent informational links added to indianamedicaid.com include:

- ICD-10 Implementation Timelines
- Plan to Mitigate Risk for a Smooth ICD-<u>10 Transition</u>
- <u>Dispatch from the Front Lines of the</u> <u>Healthcare Information and</u> <u>Management Systems Society (HIMSS)</u>

## ICD-10 Question of the Month: The IHCP wants to hear from you!

In an effort to build a dialogue with providers and vendors concerning ICD-10, the IHCP has added a "Question of the Month" to the <u>ICD-10 Information</u> page on indianamedicaid.com. The question also appears in the IHCP's monthly provider newsletter. The Question of the Month addresses ICD-10 issues and requires a simple click of the mouse – "Yes" or "No." Please take a moment to respond to the April 2013 Question of the Month.

We want to hear

from you!

#### **Responses to March 2013 question**

Do you know what the most common diagnosis code is for your specialty?

- Yes 6
- No 4
- Not affected by ICD-10 3

Here is a good way to start tackling ICD-10: Begin with your provider specialty and the codes that cross your desk most often. How will those codes look in ICD-10?

#### **Implications of April 2013 question**

APRIL 2013 QUESTION

## Has your coding or billing staff received any training on ICD-10?

(Click the link below that corresponds to your answer. An email containing your answer will be created. Add your comments to the email and click **Send**.)

- <u>Yes</u>
- No
- Not affected by ICD-10

Industry experts recommend that by the end of first-quarter 2013, providers should have finalized their ICD-10 training plans, established ICD workgroups, and determined who in their organization will lead the ICD-10 charge. In fact, timelines developed by the Centers for Medicare & Medicaid Services (CMS) suggest high-level training for ICD-10 testing teams begin in March 2013 and extend through December of this year.

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## **Dental workshops scheduled for April**

The Indiana Health Coverage Programs (IHCP) is providing three two-hour workshops for dental providers in April. In the workshop, providers will learn about: using Web interChange to submit dental claims, billing and reimbursement for services to Qualified Medicare Beneficiary (QMB) members, general dental policy, and member billing and spend-down.

The dental workshops are scheduled from 9 a.m. to 11 a.m. as follows:

- Thursday, April 11, 2013, and Tuesday, April 23, 2013, via Virtual Room
- Thursday, April 18, 2013, at Wishard Hospital in Myers Auditorium at 1001 W 10th Street, Indianapolis

Go to the <u>Provider Education</u> page at indianamedicaid.com to register for the dental workshops.



## Sixth National Drug Take-Back Day set for April 27

The sixth <u>National Prescription Drug Take-Back Day</u> will take place Saturday, April 27, from 10 a.m. to 2 p.m. Drug Take-Back Day allows people with unwanted, unused prescription drugs to safely dispose of the drugs at designated locations throughout the United States. In previous Take-Back events, the Drug Enforcement Administration (DEA) and its law-enforcement and community partners removed more than 2 million pounds (1,018 tons) of prescription medications from circulation.

Collection sites are currently being organized. Please check the <u>National</u> <u>Prescription Drug Take-Back Day</u> website to locate collection sites near you.

### **Questions about ICD-10?**

Email the <u>ICD-10 Questions Mailbox</u> and you'll receive a direct answer from the IHCP. Your question, along with the answer, may also be added to the IHCP's <u>ICD-10 FAQs</u> web page on indianamedicaid.com.

## Be sure to sign up for the EHR incentive program

Incentive payments for the Electronic Health Records (EHR) initiative amount to more than \$111 million since the program's introduction in May 2011. A total of 1,475 eligible professionals and 97 eligible hospitals have benefited from these payments. For more information about EHR, see the EHR Incentive Program page on indianamedicaid.com.

## Sign up for IHCP email notifications



Stay in the know about ICD-10 and other changes coming to healthcare in Indiana. To receive email notifications of the latest Indiana Medicaid publications, look for the blue sign-up envelope on indianamedicaid.com. Notices about policy changes, billing information, and upcoming changes will arrive directly in your Inbox. You can visit the <u>News, Bulletins, and Banner Pages</u> section of indianamedicaid.com and search the index for topics of interest to you.

## IHCP second-quarter workshops are coming soon

Registration for in-person and online provider workshops, scheduled for dates in May and June 2013, will soon be available via the <u>Provider Education</u> page at indianamedicaid.com. Workshops will include Provider Enrollment, IHCP Updates, and Web interChange Claims Billing for UB-04 Billers. Watch upcoming IHCP publications and announcements on <u>indianamedicaid.com</u> for details.

#### **RECENTLY PUBLISHED TO THE IHCP WEBSITE**

#### BULLETINS

- BT201305 SmartPA Pharmacy PA enhancement and changes to the Preferred Drug List
- <u>BT201306</u> Public Hearing for HIP Program
- <u>BT201307</u> New Indiana Medicaid Pharmacy Benefit Manager targeted to be implemented in late May 2013
- <u>BT201308</u> The IHCP complies with CAQH CORE Phase II operating rules

#### **PROVIDER MANUAL UPDATES**

<u>IHCP Provider Manual</u> – The following chapters of the manual have been updated:

- <u>Chapter 2</u> Member Eligibility and Benefit Coverage
- <u>Chapter 6</u> Prior Authorization
- Chapter 12 Financial Services

Hospice Provider Manual

## LOOKING FOR MORE INFORMATION ABOUT PROVIDER MANUAL UPDATES?

- Subscribe to <u>IHCP E-mail Notifications</u>.
- 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**

- Some Family Planning Eligibility Program claims to be adjusted
- CPT 36595 ASC pricing indicator assigned
- Age restriction correction for procedure codes 99478, 99479, and 99480
- Age restriction correction for procedure code D1204
- CPT code 87653 linked to revenue code 306
- CPT code 28041 linked to revenue code 360
- Dental workshops scheduled for April
- Register online for IHCP first-quarter workshops
- Correction: CPT code 96523 not linked to nonflat-rate revenue codes 940 and 949
- For the most up-to-date news from Indiana Medicaid, check bulletins and banner pages first
- Use current version of IHCP enrollment forms
- CPT code 96376 noncovered effective May 1, 2013
- Balance billing of members is not appropriate
- Three dental workshops scheduled in April

#### 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.