

IHCP *banner page*

INDIANA HEALTH COVERAGE PROGRAMS

BR201722

MAY 30, 2017

IHCP to mass adjust nursing facility, hospice, and PRTF claims for members with patient liability

As stated in Indiana Health Coverage Programs (IHCP) [BR201712](#), dated March 21, 2017, the IHCP identified a system issue that resulted in incorrect reporting of nursing home patient liability amounts (or personal resource contributions) for some members. The patient liability reported as \$0.00 or did not show at all for a particular month when, in fact, the member had a patient liability



greater than \$0.00. This issue affected patient liability amounts for January through March 2017 but did not affect every member in a nursing facility with patient liability. It has since been determined that the same system issue also affected members receiving IHCP hospice and psychiatric residential treatment facility (PRTF) services that have patient liabilities.

The system issue has been corrected. Claims affected by the issue will be systematically mass adjusted to correctly apply the patient liability amount. Adjustments should begin appearing on the provider Remittance Advices (RAs) beginning July 10, 2017, with Claim IDs/ICNs that begin with 52 (mass replacement, non-check-related). For claims that were overpaid, the net difference appears as an accounts receivable. The accounts receivable will be recouped at 100% from future claims paid to the respective provider number.

IHCP reminds nursing facilities of Myers and Stauffer's secure web portal

The Indiana Health Coverage Programs (IHCP) reminds nursing facility providers that Myers and Stauffer LC, the Family and Social Services Administration's (FSSA's) rate-setting contractor, implemented a secure web portal April 3, 2017. The portal allows nursing facility providers and cost-report preparers to securely submit information, including cost reports, correspondence, and compliance review information, electronically to Myers and Stauffer. In addition, the web portal allows Myers and Stauffer to securely transmit information back to providers.

Information may still be submitted to Myers and Stauffer via standard mail (the United States Postal Service, UPS, and FedEx) or by hand delivery. Please note: A submission to any individual or to the Long Term Care Department at Myers and Stauffer via email **will not** be accepted as an official submission.

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For more information on the web portal and for instructions on registering as a user, providers may contact Chrissy Lahey-Hawkins at Myers and Stauffer at (317) 846-9521, ext. 417.

IHCP will no longer provide separate outpatient reimbursement for certain physician-administered drugs

Effective July 1, 2017, the Indiana Health Coverage Programs (IHCP) will no longer provide separate reimbursement for the physician-administered drugs listed in Table 1 when they are administered in an outpatient setting. The Current Procedural Terminology (CPT^{®1}) codes in Table 1 are considered bundled into the rate for other outpatient services. These codes are no longer billable with revenue code 636 – *Drugs Requiring Detailed Coding*, but may be billed with other appropriate revenue codes per national coding guidelines.

This change applies to IHCP claims for dates of service (DOS) on or after July 1, 2017. Claims with earlier DOS will be unaffected. This change applies to services delivered under both the fee-for-service (FFS) and the managed care delivery systems. In some instances, a managed care entity (MCE) may establish and publish unique billing guidance related to these services. Questions should be directed to the MCE with which the member is enrolled.

These changes will be reflected in the next update to the [Outpatient Fee Schedule](#) and the *Procedure Codes Linked to Revenue Code 636 – Drugs Requiring Detailed Coding* code documents on the [Code Sets](#) web page at indianamedicaid.com.

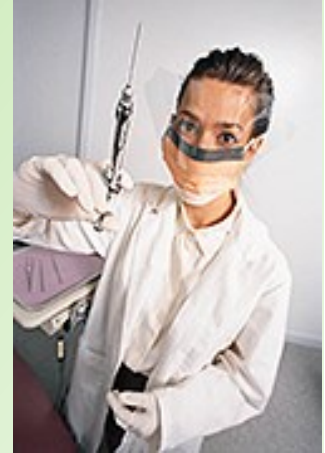


Table 1 – Physician-administered drugs no longer separately reimbursable in the outpatient setting effective for DOS on or after July 1, 2017

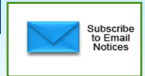
CPT codes	Description
90654	Influenza virus vaccine, trivalent (IIV3), split virus, preservative-free, for intradermal use
90655	Influenza virus vaccine, trivalent (IIV3), split virus, preservative free, 0.25 mL dosage, for intramuscular use
90657	Influenza virus vaccine, trivalent (IIV3), split virus, 0.25 mL dosage, for intramuscular use
90658	Influenza virus vaccine, trivalent (IIV3), split virus, 0.5 mL dosage, for intramuscular use
90660	Influenza virus vaccine, trivalent, live (LAIV3), for intranasal use
J0280	Injection, aminophyllin, up to 250 mg
J2185	Injection, meropenem, 100 mg
Q9965	Low osmolar contrast material, 100-199 mg/ml iodine concentration, per ml
Q9966	Low osmolar contrast material, 200-299 mg/ml iodine concentration, per ml
Q9967	Low osmolar contrast material, 300-399 mg/ml iodine concentration, per ml

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