

IHCP *banner page*

INDIANA HEALTH COVERAGE PROGRAMS BR201843 OCTOBER 23, 2018

IHCP enhances Portal to allow electronic submission of CHOWs for extended care facilities

Effective November 1, 2018, the Indiana Health Coverage Programs (IHCP) will enhance the IHCP Provider Healthcare Portal (Portal) to accept electronic change of ownership (CHOW) applications and the required supporting documentation from extended care facilities.

According to [Indiana Administrative Code \(IAC\) 405 IAC 1-20](#), the provider assuming ownership of an extended care facility is required to take over the seller's Medicaid enrollment and identification number when undergoing a CHOW. This requirement applies to type 03 – Extended Care Facility providers with any of the following specialties:

- 030 – Nursing Facility
- 031 – Intermediate Care Facility for Individuals with Intellectual Disabilities
- 032 – Pediatric Nursing Facility
- 033 – Residential Care Facility



To submit an extended care facility CHOW via the Portal, follow these steps:

1. The purchaser must log in to the Portal using the registered seller's security credentials and click the **Extended Care Facility CHOW** link on the *My Home* page (see [Figure 1](#)).

Note: Once the CHOW is processed, the new owner can establish new security credentials and change access delegations for the provider's Portal account as appropriate.

2. The *Provider Enrollment* page will display, allowing the purchaser to start a new CHOW application, resume an unfinished CHOW application, or check the status of a previously submitted CHOW application (see [Figure 2](#)).

3. To complete a new Extended Care Facility CHOW application, the purchaser must enter the new owner's taxpayer ID, new ownership disclosure information, and any other pertinent information related to the change of ownership.

The supporting documentation required as attachments to the CHOW application include:

- Internal Revenue Service (IRS) W-9 form
- Copy of the bill of sale

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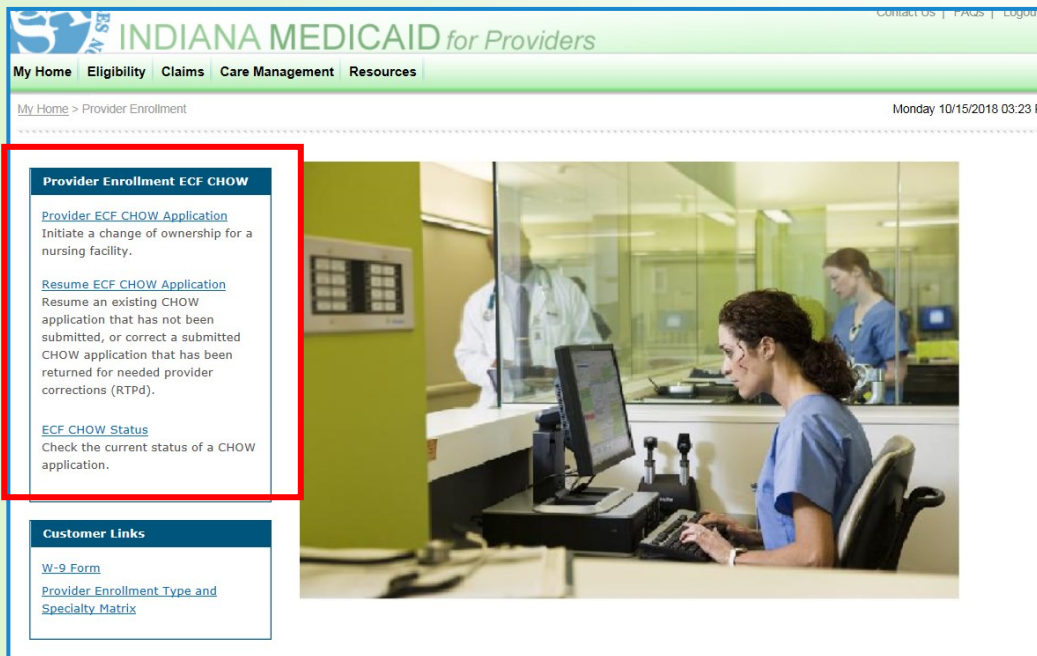
Currently extended care facility CHOWs require use of the paper application process. Beginning November 1, 2018, electronic submissions via the Portal are encouraged, although the IHCP will continue to accept paper applications for these CHOW transactions.

continued

Figure 1 – New Extended Care Facility CHOW link on the My Home page of the Portal



Figure 2 – New Extended Care Facility CHOW application links on the Provider Enrollment page of the Portal



continued

If the previous owner was set up to receive the electronic remittance advice (ERA) 835 transactions, and the trading partner ID that will be receiving the ERA 835 is not changing, then no new trading partner information from the new owner is needed. However, if the trading partner receiving the ERA 835 is changing, then the new owner must access the *Provider Maintenance/ERA Information* page on the Portal and change the trading partner ID on that page.

To change the trading partner ID, follow these steps:

1. From the *My Home* page in the Portal, click the **Provider Maintenance** link.
2. On the *Provider Maintenance: Instructions* page, click the **ERA Changes** link.
3. Enter the new trading partner ID in the New ERA 835 Information section of the *Provider Maintenance: ERA Information* page.
4. Choose **Change ERA** from the Reason For Submission drop-down menu.
5. Type in an authorized electronic signature.
6. Click **Submit** at the bottom of the page to submit the change.

Figure 3 – Fields for changing the trading partner ID on the Provider Maintenance/ERA Information page of the Portal

Provider Maintenance: ERA Information ?

Providers that would like to receive claim payment information using electronic remittance advice (ERA/835) transactions should enter all the fields in the below panel.

If ERAs/835s are to be electronically exchanged, then an account should be established using this page within the maintenance application.

* Indicates a required field.

Current ERA/835 Information

Trading Partner ID R475

Authorized Signature _

Provider Identifiers Information

Provider Name OLDER AMERICANS SERVICE CORP

Provider Federal Tax Identification Number(TIN) or
Employer Identification Number(EIN)

Provider National Provider Identifier (NPI) _

New ERA/835 Information

Trading Partner ID

Preference for Aggregation of Remittance Data (e.g., Account Number Linkage to Provider Identifier):

Provider Federal Tax Identification Number(TIN) or
Employer Identification Number(EIN)

Provider National Provider Identifier (NPI) _

Submission Information

*Reason For Submission

*Authorized Signature

Printed name of Person submitting Enrollment.

Code set corrected for provider specialty 250 – DME/Medical Supply Dealer

The Indiana Health Coverage Programs (IHCP) has identified errors related to the code set for Durable and Home Medical Equipment and Supplies providers (specialty 250) with the conversion to CoreMMIS.

- The CoreMMIS claim-processing system accurately includes the Healthcare Common Procedure Coding System (HCPCS) codes in Table 1 in the code set for DME providers. These procedure codes, however, were inadvertently not included on the published code set on the provider website. The *Durable and Home Medical Equipment and Supplies Codes* tables on the [Code Sets](#) web page at indianamedicaid.com will be updated to reflect the codes in Table 1. No claims were adversely impacted.
- The HCPCS codes in [Table 2](#), were accurately included on the published code set for DME providers; however, these procedure codes were inadvertently not included in the code set for DME providers in the CoreMMIS claim-processing system. CoreMMIS has been corrected to add the codes in Table 2 to the code set for DME providers. No claims were adversely impacted.

Table 1 – HCPCS codes allowable for provider specialty 250 (DME/Medical Supply Dealer) to be added to the published code set

Procedure code	Description
A4321	Therapeutic agent for urinary catheter irrigation
A4459	Manual pump-operated enema system, includes balloon, catheter and all accessories, reusable, any type
A4602	Replacement battery for external infusion pump owned by patient, lithium, 1.5 volt, each
A7048	Vacuum drainage collection unit and tubing kit, including all supplies needed for collection unit change, for use with implanted catheter, each
L3981	Upper extremity fracture orthosis, humeral, prefabricated, includes shoulder cap design, with or without joints, forearm section, may include soft interface, straps, includes fitting and adjustments
L6026	Transcarpal/metacarpal or partial hand disarticulation prosthesis, external power, self-suspended, inner socket with removable forearm section, electrodes and cables, two batteries, charger, myoelectric control of terminal device, excludes terminal device(s)
L7259	Electronic wrist rotator, any type
L8696	Antenna (external) for use with implantable diaphragmatic/phrenic nerve stimulation device, replacement, each

continued

Table 2 – HCPCS codes allowable for provider specialty 250 (DME/Medical Supply Dealer) corrected in CoreMMIS claim-processing system

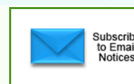
Procedure code	Description
A9274	External ambulatory insulin delivery system, disposable, each, includes all supplies and accessories
E0271	Mattress, innerspring
E0272	Mattress, foam rubber
E0273	Bed board
E0274	Over-bed table

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