IHCP bulletin

INDIANA HEALTH COVERAGE PROGRAMS BT202453 APRIL 30, 2024

Claims paid incorrectly for CIH Waiver Community Transition service

The Indiana Health Coverage Programs (IHCP) identified an issue where claims may have paid incorrectly for the Community Transition service for members enrolled in the Division of Disability and Rehabilitative Services (DDRS) Home- and Community-Based Services (HCBS) Community Integration and Habilitation (CIH) Waiver.

Payment on claims may have been reduced when rendering providers billed the Community Transition service with procedure code T2038 and modifiers U7 U5. This service had an increased limitation from \$1,500 to \$2,500 effective for dates of service (DOS) on or after **July 1, 2023**.

The claim-processing system has been corrected. Claims that paid in error will be mass adjusted or reprocessed. Providers should see the reprocessed claims on remittance advices (RAs) beginning June 5, 2024, with internal control numbers (ICNs)/Claim IDs that begin with 52 (mass replacements non-check related) or 80 (reprocessed denied claims).



QUESTIONS?

If you have questions about this publication, please contact Customer Assistance at 800-457-4584.

COPIES OF THIS PUBLICATION

If you need additional copies of this publication, please download them from the <u>IHCP Bulletins</u> page of the IHCP provider website at in.gov/medicaid/providers.

SIGN UP FOR IHCP EMAIL NOTIFICATIONS

To receive email notices of IHCP publications, subscribe

by clicking the blue subscription envelope or sign up from the <u>IHCP provider website</u> at in.gov/medicaid/providers.

