IHCP bulletin

INDIANA HEALTH COVERAGE PROGRAMS

BT2023147 OCTOBER 31, 2023

IHCP allows reimbursement of cost sharing for dually eligible noncovered IHCP services

As announced in Indiana Health Coverage Programs (IHCP) Bulletin BT202313, the IHCP began enrollment for Medicare-only providers (provider type 37, specialty 370) that serve dually eligible (Medicare and Medicaid) members.

These providers are only eligible to receive reimbursement for any applicable cost-sharing obligations for dually eligible IHCP members.

In addition to this new provider specialty, the IHCP modified its claim-processing logic for services covered by Medicare but not covered by the IHCP. For Qualified Medicare Beneficiary (QMB) dually eligible members, the IHCP will reimburse a member's Medicare coinsurance and/or deductible amount for IHCP-noncovered professional or outpatient services. Providers will see explanation of benefits (EOB) code 0885 - Provider payment of coinsurance and



deductible for non-covered services - on impacted claims. This logic change impacts all IHCP providers.

All remaining claim-processing logic for dually eligible (Medicare and Medicaid) members remains the same.

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 IHCP Bulletins 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 IHCP provider website at in.gov/medicaid/providers.

