IHCP *banner page*

INDIANA HEALTH COVERAGE PROGRAMS BR202106 FEBRUARY 9, 2021

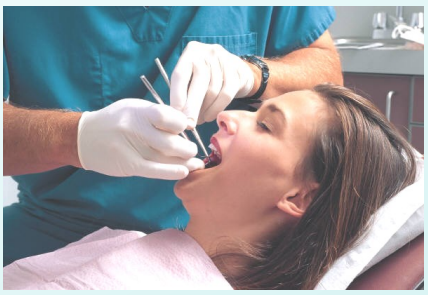
IHCP to mass adjust 837 electronic claims with Medicare information

The Indiana Health Coverage Programs (IHCP) identified a claim-processing issue that affects fee-for-service (FFS) professional and institutional claims for dually eligible members submitted via 837P and 837I electronic transactions, processed from February 13, 2017, through January 12, 2021. For electronic data interchange (EDI) claims submitted with Medicare Third-Party Liability (TPL) information, and the Medicare information was not sent in the payer one area of the transaction, the claim-processing system incorrectly assigned a non-crossover claim type. As a result, some claims may have overpaid.

Note: For more information about TPL and crossover claims, see the Third-Party Liability provider reference module at in.gov/medicaid/providers.

The claim-processing system has been corrected. Claims processed during the indicated time frame will be mass adjusted, as appropriate. Providers should see adjusted claims on Remittance Advices (RAs) beginning March 10, 2021, with internal control numbers (ICNs)/Claim IDs that begin with 52 (mass replacements non-check related). If a claim was overpaid, the net difference will appear as an accounts receivable. The accounts receivable will be recouped at 100% from future claims paid to the respective provider number.

IHCP to cover CDT code D4261, accept resubmitted claims



Effective March 12, 2021, the Indiana Health Coverage Programs (IHCP) will cover Current Dental Terminology (CDT®[1]) code D4261 – *Osseous surgery (including elevation of a full thickness flap entry and closure) – one to three contiguous teeth or tooth bounded spaces per quadrant*. Coverage will apply retroactively to fee-for-service (FFS) dental claims with dates of service (DOS) on or after January 1, 2017. Coverage applies to all Traditional Medicaid and other IHCP programs that include full Medicaid State Plan benefits. This procedure code may not be covered under IHCP plans with limited benefits.

The following reimbursement information applies:

- Pricing: Maximum fee of $920
- Prior authorization (PA): None required

continued

The following reimbursement information applies (continued):

- Billing guidance: Standard billing guidance applies.

Reimbursement, PA, and billing information applies to services delivered under the FFS delivery system. Individual managed care entities (MCEs) establish and publish reimbursement, PA, and billing criteria within the managed care delivery system. Questions about managed care billing and PA should be directed to the MCE with which the member is enrolled.

This change will be reflected in the next regular update to the *Professional Fee Schedule*, accessible from the *IHCP Fee Schedules* web page at in.gov/medicaid/providers.

FFS dental claims for procedure code D4261 with DOS on or after January 1, 2017, may have denied with explanation of benefits (EOB) 4013 – *This procedure code is not covered for this date of service.*

Beginning March 12, 2021, providers may resubmit FFS claims for code D4261 during the indicated time frame that denied with EOB 4013, for reimbursement consideration. Claims resubmitted beyond the original filing limit must include a copy of this banner page as an attachment and must be submitted within 180 days of the banner page's publication date.

IHCP to mass reprocess or mass adjust claims for day habilitation services

The Indiana Health Coverage Programs (IHCP) identified a claim-processing issue that affects fee-for-service (FFS) claims for day habilitation services under the Family Supports Waiver (FSW) and Community Integration and Habilitation (CIH) waiver programs. (Providers were alerted to the issue in *IHCP Banner Page BR202044*.) Claims for the services in Table 1 with dates of service (DOS) on or after August 1, 2020, may have paid incorrectly, or denied with explanation of benefits (EOB) 3001 – *Dates of service not on the P.A. master file*.

The claim-processing system has been corrected. Claims or claim details processed during the indicated time frame for the code and modifier combinations in Table 1 that denied for EOB 3001 or paid incorrectly will be mass reprocessed or mass adjusted, as appropriate. Providers will have seen reprocessed or adjusted claims on Remittance Advices (RAs) beginning January 27, 2021, with internal control numbers (ICNs)/Claim IDs that begin with 80 (reprocessed denied claims) or 52 (mass replacements non-check related).

Questions or concerns should be directed to the Family Social Services Administration (FSSA) Indiana Health Coverage Programs (IHCP) reimbursement mailbox. Please be sure to send communications containing any personal health information (PHI) to this mailbox **via secure email**: FSSA.IHCPReimbursement@fssa.in.gov.

Note: The rates in Table 1 have not changed from those published in IHCP Bulletins BT202020 and BT202083.

continued

Table 1 – FSW and CIH services that may have paid incorrectly or denied for claims with DOS on or after August 1, 2020

Service	Code	Mod 1	Mod 2	Mod 3	CIH and FSW rate	Notes
Day Habilitation, Individual	T2020	U7	U5		$24.85	Hour
Day Habilitation, 2:1, 3:1, 4:1	T2020	U7	U5	U2	$8.90	Hour
Day Habilitation, Medium Group, 5:1, 6:1, 7:1, 8:1, 9:1, 10:1	T2020	U7	U5	UA	$4.96	Hour
Day Habilitation, Large Group, 11:1, 12:1, 13:1, 14:1, 15:1, 16:1	T2020	U7	U5	UB	$3.15	Hour

QUESTIONS?

If you have questions about this publication, please contact Customer Assistance at 1-800-457-4584.

COPIES OF THIS PUBLICATION

If you need additional copies of this publication, please download them from the *Banner Pages* page of the IHCP provider website at in.gov/medicaid/providers.

TO PRINT

A printer-friendly version of this publication, in black and white and without photos, is available for your convenience.

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.