

IHCP *banner page*

INDIANA HEALTH COVERAGE PROGRAMS

BR202032

AUGUST 11, 2020

Midlevel practitioners eligible under prospective payment system for FQHC and RHC services

The Indiana Family and Social Services Administration (FSSA) Office of Medicaid Policy and Planning (OMPP) is announcing the addition of midlevel practitioners to the list of qualifying practitioners that may bill for Federally Qualified Health Center (FQHC) and Rural Health Center (RHC) services, for reimbursement consideration. Effective October 1, 2020, the CoreMMIS claim-processing system will allow for the following midlevel practitioners to bill with Healthcare Common Procedure Coding System (HCPCS) encounter code T1015 – *Clinic visit/encounter, all-inclusive* and applicable valid encounter codes.

Effective for claims with dates of service (DOS) on or after October 1, 2020, the following practitioners will be eligible providers under the prospective payment system (PPS):

- Licensed clinical addiction counselors (LCACs)
- Licensed marriage and family therapists (LMFTs)
- Licensed mental health counselors (LMHCs)

As a reminder, these midlevel practitioners must use an IHCP-enrolled supervising practitioner National Provider Identifier (NPI) for the rendering provider on the claim, as described in *Indiana Health Coverage Programs (IHCP) Bulletin [BT201943](#)*. Providers must use one of the modifiers listed in [BT201943](#) when billing for HCPCS encounter code T1015. Additionally, the FSSA has requested approval from the Centers for Medicare & Medicaid Services (CMS) to separately enroll these midlevel practitioners. Watch for future IHCP publications regarding this change to enrollment.



IHCP clarifies guidance on resolving claims for transgender members

The Indiana Health Coverage Programs (IHCP) previously announced in *Banner Page [BR201441](#)*, guidance for resubmitting claims that denied based on the member's gender versus diagnosis, or a procedure edit in the CoreMMIS claim-processing system.

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The IHCP is reissuing this guidance and clarifying that this is an ongoing policy for claims submission. When a provider treats a transgender member for a diagnosis code restricted to the member's biological sex, the system will automatically deny the claim unless the provider requests the claim to be special-batched for processing. Claims submitted for a special batch must include the following information:

- Medical records showing that the procedure performed is consistent with the member's transgender status
- A statement of medical necessity based on the patient's biological status

Claims must be special-batched by your [Provider Relations field consultant](#) or the DXC Written Correspondence Unit, through the IHCP Provider Healthcare Portal or by mail. You should contact your field consultant for clarification or submit a request for special-batching to the DXC Written Correspondence Unit by sending the hard copy *CMS-1500* paper claim form and the appropriate medical documentation to the following address:

DXC Written Correspondence
P. O. Box 7263
Indianapolis, IN 46207-7263

Note: Claims with dates of service (DOS) before January 1, 2019, must be resubmitted within 1 year of the banner page's publication date. Claims with DOS on or after January 1, 2019, must be resubmitted within 180 days of the banner page's publication date.

Providers with questions about claims for members who are enrolled with managed care entities (MCEs) should contact the MCE with which the member is enrolled.

IHCP introduces 2020 IHCP Works Seminar

The Indiana Health Coverage Programs (IHCP) is introducing the IHCP Works Seminar for 2020. It replaces the IHCP Annual Provider Seminar of previous years. The revamped and rebranded annual seminar will be known as the IHCP Works Seminar.

This year's annual seminar will be virtual, with virtual sessions (meetings) to stay in compliance with guidance from the Centers for Disease Control and Prevention (CDC) limiting the number of people at in-person events to reduce potential exposure to the coronavirus disease 2019 (COVID-19).

Dates for virtual sessions

The IHCP Works Seminar virtual sessions (meetings) are scheduled for October 14, 15, and 16, 2020. Times will be communicated in a future announcement.

Format for 2020

This year's virtual sessions will offer some flexibility around providers' schedules for attending the meetings, and let providers listen to recorded sessions later at their convenience.



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Sessions will feature presentations by all IHCP partners, including the Indiana Family and Social Services Administration (FSSA), DXC Technology, Anthem, MDwise, MHS, and CareSource.

Registration

Registration for the 2020 IHCP Works Seminar will be different than in previous years. The virtual sessions (meetings) will be interactive with an attendance limit and require registration in advance. Information about registration will be announced in a future IHCP publication.

Q&A sessions

Following the 2020 IHCP Works Seminar, the IHCP will schedule Q&A virtual sessions to give providers opportunities to ask questions about the sessions.

More information

More information about the virtual sessions (meetings) will be announced in future IHCP publications. Sessions will be posted to the website at in.gov/medicaid/providers.

IHCP to host webinar for personal care and home health providers about EVV implementation, August 20, 2020

The Indiana Health Coverage Programs (IHCP) will host a town hall style webinar on Thursday August 20, 2020, at 1 p.m. (Eastern Time) to address the overall requirements for providers to document personal care services and home health services using an electronic visit verification (EVV) system. The webinar will include steps that providers must take during the implementation of EVV.

To participate in the webinar on August 20, go to <https://indiana.adobeconnect.com/indiana> to sign in. Ensure that Guest is selected, type your name, and click **Enter Room**.

Please note:

- The audio will be voice-over-internet, so participants will need to use speakers or headphones to hear the presentation.
- Prior to the webinar, participants can go to https://indiana.adobeconnect.com/common/help/en/support/meeting_test.htm to test the connection. The test will prompt the user for any updates or add-ins needed to participate in the webinar.
- Do not log in to the webinar using Citrix or a virtual private network (VPN) because these services will not be able to play back audio.
- If you wish to log in using your mobile device, download the [Adobe Connect Mobile app](#).

For those who cannot attend on August 20, a recording of the webinar will be posted later on the [IHCP Live](#) web page at in.gov/medicaid/providers.



QUESTIONS?

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