IHCP bulletin

INDIANA HEALTH COVERAGE PROGRAMS

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Institutional claims require attending provider NPI

The Indiana Health Coverage Programs (IHCP) reminds providers that an attending provider National Provider Identifier (NPI) is required when submitting claims for inpatient, outpatient, ambulatory surgical center (ASC) and long-term care (LTC) services.

This requirement is stated in the <u>Claim Submission and Processing</u> provider reference module at in.gov/medicaid/ providers. The attending provider should always be an individual person. When adding an attending provider to the institutional claim (*UB-04* claim form or electronic equivalent), be sure to use the NPI of the individual provider that

rendered the service, not the NPI of the group to which the rendering provider may be linked. (A taxonomy for the attending provider is optional.)

The IHCP is enforcing this requirement with explanation of benefits (EOB) code 1142 – *Missing/incomplete/invalid attending provider identifier*. This requirement is applicable for claims submitted through both the fee-forservice and managed care delivery systems. Claims submitted, adjusted or reprocessed on or after Nov. 26, 2024, that do not meet this requirement will deny with EOB code 1142.



The attending provider must be enrolled with the IHCP as an ordering, prescribing or referring (OPR) provider or as a rendering provider on the date of the first service provided. Claims submitted with the attending provider enrolled as a group or billing provider enrollment classification will cause claims to deny with EOB code 1142.

The requirement is in alignment with Code of Federal Regulations 42 CFR 455.410(b) and 42 CFR 455.440.

QUESTIONS?

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