

# IHCP *bulletin*

INDIANA HEALTH COVERAGE PROGRAMS    BT2025114    AUGUST 5, 2025

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## **IHCP corrects outpatient reimbursement issue for procedure code 96127**

The Indiana Health Coverage Programs (IHCP) has identified an issue in its fee-for-service (FFS) claim-processing system that affected outpatient claim reimbursement for Current Procedural Terminology (CPT®<sup>1</sup>) procedure code 96127 – *Brief emotional/behavioral assessment (eg, depression inventory, attention-deficit/hyperactivity disorder [ADHD] scale), with scoring and documentation, per standardized instrument*.

Providers should follow national guidelines for appropriate use of procedure codes with the revenue code billed. Reimbursement for this service is included in the flat rate of the nationally linked revenue code 918 – *Behavioral Health Treatments/Services-Extension of 090X-Testing*.

The claim-processing system has been corrected. FFS claims submitted for procedure code 96127 with dates of service (DOS) on or after **Aug. 5, 2023**, that denied in error will be mass adjusted or reprocessed. Providers should see adjusted or reprocessed claims on remittance advices (RAs) beginning Sept. 3, 2025, with internal control numbers (ICNs)/Claim IDs that begin with 52 (mass replacements non-check related) or 80 (reprocessed denied claims).

Alternatively, providers can submit or resubmit FFS outpatient claims for this procedure code, along with the appropriate revenue code, for DOS within the indicated time frame. Claims resubmitted beyond the original filing limit must include a copy of this bulletin as an attachment and must be submitted within 180 days of the bulletin's publication date.

### **For more information**

Questions about FFS billing and reimbursement should be directed to Gainwell Technologies Customer Assistance at 800-457-4584 or your [Provider Relations consultant](#).

Individual managed care entities (MCEs) establish and publish billing and reimbursement criteria within the managed care delivery system. Questions about managed care billing should be directed to the MCE with which the member is enrolled.

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**QUESTIONS?**

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

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