



NETWORK *Notification*

Notice Date: December 9, 2022
To: Indiana Medicaid Providers
From: CareSource
Subject: Federally Qualified Health Center (FQHC) Timely Filing Waiver

Summary

In an effort to ensure Federally Qualified Health Center (FQHC) and Rural Health Clinics (RHC) receive appropriate payments, CareSource is waiving timely filing for claims. Claims with dates of service (DOS) of July 1, 2021 to March 31, 2023 will allow for timely filing limits to be bypassed.

Importance

Providers should resubmit new or corrected claims for **T1015** and **D9999** if the claim wasn't initially submitted correctly. In order to receive appropriate payments for the FQHC/RHC wrap-around payment, claims must be resubmitted in accordance with state guidance. Once the corrected or new claims with **T1015** or **D9999** are submitted, the claim will systematically deny for timely filing. However, CareSource will be performing a monthly sweep to reprocess any claims that deny for timely filing. No dispute or appeal is needed for these timely filing denials. FQHC and RHC providers should submit impacted claims in a batch and share the list of claims with your Health Partner Engagement Specialist (see the link below to find the appropriate Provider Engagement Specialist for your region).

Impact

It's imperative reconciliation of claim submission and payments is completed before the timely filing waiver concludes on April 1, 2023. Claims that deny for reasons other than **T1015** or **D9999** will be upheld and must be corrected in accordance with the resolution process found in the [Provider Manual](#).

Questions?

For questions and to coordinate a batch submission of corrected claims, please contact your [Provider Engagement Specialist](#).

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