



NETWORK *Notification*

Notice Date: August 15, 2023
To: Indiana Medicaid Providers
From: CareSource
Subject: UPDATE - Billing Observation Care in the Facility Setting

This notification is an update to the [network notification](#) posted on Aug. 3, 2022. Updated information is indicated in **red**.

Summary

The updated billing conditions are to improve alignment with the Outpatient Facility Services guidance that an observation period will last no more than 3 days or 72 hours, as well as the flat rate reimbursement methodology. See below for updated billing conditions:

- For a period of observation care which, continuing more than one calendar day and beginning with the admission date, Revenue Code 0762 should be reported by a maximum of three separate claim lines each containing a single date of service and one unit.
- G0378 is non-covered per the Indiana Health Coverage Programs (IHCP) Outpatient Fee Schedule, neither single nor multiple units would be reported in conjunction with Revenue Code 0762. When utilizing a E/M (Evaluation and Management) CPT/HCPCS code, it should correspond with any submitted professional claim content {examples would include **99221, 99222, 99223, 99231, 99232, 99233, 99234, 99235, 99236, 99238 or 99239** ~~99217, 99218, 99219, 99220, 99224, 99225, 99226, 99234, 99235, or 99236~~}.

Questions?

For questions about claims submitted, please contact your [Provider Engagement Specialist](#) or Provider Services at **1-844-607-2831**.

IN-MED-P-1174709a; Issued Date: 08/16/2023

OMPP Approved: 08/11/2023