

## NETWORK Notification

Notice Date: August 3, 2022

To: Indiana Medicaid Providers

From: CareSource

Subject: Billing Observation Care in the Facility Setting

## **Summary**

To improve alignment with the Outpatient Facility Services guidance that an observation period will last not 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 99217, 99218, 99219, 99220, 99224, 99225, 99226, 99234, 99235, or 99236}.

## Questions?

For questions about claims submitted, please contact your <u>Provider Engagement Specialist</u> or Provider Services at **1-844-607-2831**.

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