

Care Source NETWORK Notification

Notice Date: November 1, 2022

Indiana Medicaid Providers To:

From: **CareSource**

Subject: Claims Submission and Matching Logic Reminder

Effective Date: January 1, 2023

Summary

As a reminder, Medicaid claims must be submitted with the taxonomy for the billing provider. The National Provider Identifier (NPI) submitted on the claim must crosswalk to one Indiana Health Coverage Programs (IHCP) Provider ID, or the claim will be rejected or denied. Three data elements are used for the standard NPI crosswalk, to establish a one-to-one match.

Indiana Medicaid claims must fulfill the one-to-one matching requirements:

- Billing NPI
- Billing taxonomy code
- Billing provider service location zip code + 4 on file in the CoreMMIS

Importance

Claims submitted without this information may not meet the state's matching logic which could result in rejection or recoupment of paid claims. Also, the claim rendering provider must be linked to the Billing NPI and zip code + 4 service location.

Questions?

Additional information about the state's matching logic and submission requirements can be found in the Indiana Health Coverage Program's modules for Claims Submission and Processing and Provider Enrollment. For questions, please contact Health Partner Services at 1-844-607-2831 (Monday through Friday, 8 a.m. to 8 p.m. Eastern Standard Time).

New Training Available - EPSDT and SBIRT!

Early and Periodic Screening, Diagnosis and Treatment (EPSDT)

This module of the Provider Education Series provides an overview of the federally mandated EPSDT program developed for Medicaid recipients under the age of 21.

Screening, Brief Intervention and Referral to Treatment (SBIRT)

This installment of the Provider Education Series offers information about SBIRT, an evidencedbased practice model that seeks to identify patients who have risky patterns of use for alcohol and other drugs.

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