

Network Notification

Notice Date: October 1, 2019
To: Indiana Providers

From: CareSource

Subject: Update to UB -04 Billing Requirements

Effective Date: October 1, 2019

Summary

Effective Oct., 1, 2019, institutional claims (UB-04) submitted for Indiana Marketplace, Hoosier Healthwise artertdientlehaltsiciandialina villa because the date of service (DOS). If the

within the timely filing limit for the date of service (DOS). If the rill be denied upon adjudication.

are in response to a Centers for Medicare and Medicaid Services ment (PERM) audit. Providers are encouraged to ensure current information is submitted to the state's fiscal agent, DXC rce. Self-serve provider rosters for the group are available in the eSource.com > Login > Providers

Questions?

For questions, please contact <u>CareSource Provider Services</u> at 1-844-607-2831 or the <u>Provider Engagement Specialist</u> in your region. Provider Services hours of operation are 8 a.m. to 6 p.m. Eastern time.

You can access contact information by visiting CareSource.com > Providers > Provider Overview > Contact Us.

IN-P-0769

Date Issued: 10/01/2019 Date Approved: 09/25/2019