

# IHCP *bulletin*

INDIANA HEALTH COVERAGE PROGRAMS    BT2024208    DECEMBER 19, 2024

## IHCP reminds providers of children's out-of-state hospital reimbursement

The Indiana Health Coverage Program (IHCP) reimburses eligible out-of-state children's hospitals. In accordance with *Indiana Code IC 12-15-15-1.2*, the IHCP increased the reimbursement rate for eligible children's hospitals located in a state that borders Indiana to a rate that is comparable to the current federal Medicare reimbursement rate for the service provided, or (for services that do not have a Medicare reimbursement rate) 130% of the standard IHCP rate.

This increased rate applies, as follows, to inpatient and outpatient services provided by eligible out-of-state children's hospitals to IHCP members younger than 19 years of age:

- For inpatient claims – The increased base rate is effective for claims with discharge dates of July 1, 2021, through June 30, 2025. Additionally, for dates of discharge from June 1, 2022, through June 30, 2025, the increased rate also applies to outlier payments. The increase does not apply to the capital per diem or medical education per diem (if applicable), which continue to pay at the standard IHCP rate.
- For outpatient claims – The increased rate is effective for services with “from” dates of service (DOS) of July 1, 2021, through June 30, 2025. The increase does not apply to clinical laboratory codes, prosthetic/orthotic device details billed with revenue code 274 or drug details billed with revenue code 636, which continue to pay at the standard IHCP rate for these services.

This rate applies to both fee-for-service (FFS) and managed care claims. The explanation of benefits (EOB) code 9046 – *Out of state children's hospital additional payment* is used to identify FFS claim details that are reimbursed at the increased reimbursement amount.

For more information, see the [Out-of-State Providers](#) provider reference module at [in.gov/medicaid/providers](https://in.gov/medicaid/providers).



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