

PREVAILED	Roll Call No. _____
FAILED	Ayes _____
WITHDRAWN	Noes _____
RULED OUT OF ORDER	

HOUSE MOTION _____

MR. SPEAKER:

I move that Engrossed Senate Bill 566 be amended to read as follows:

- 1 Page 1, between the enacting clause and line 1, begin a new
- 2 paragraph and insert:
- 3 "SECTION 1. IC 12-7-2-47.5 IS ADDED TO THE INDIANA
- 4 CODE AS A NEW SECTION TO READ AS FOLLOWS
- 5 [EFFECTIVE UPON PASSAGE]: **Sec. 47.5. "Covered entity", for**
- 6 **purposes of IC 12-15-23.5, has the meaning set forth in**
- 7 **IC 12-15-23.5-1."**
- 8 Page 1, between lines 9 and 10, begin a new paragraph and insert:
- 9 "SECTION 3. IC 12-15-23.5 IS ADDED TO THE INDIANA CODE
- 10 AS A NEW CHAPTER TO READ AS FOLLOWS [EFFECTIVE
- 11 UPON PASSAGE]:
- 12 **Chapter 23.5. Coordination of Benefits Study**
- 13 **Sec. 1. As used in this chapter, "covered entity" has the meaning**
- 14 **set forth in 45 CFR 160.103.**
- 15 **Sec. 2. Before January 1, 2008, the office shall:**
- 16 **(1) examine all Medicaid claims paid after January 1, 2001,**
- 17 **and before July 1, 2007; and**
- 18 **(2) determine the percentage of the claims examined under**
- 19 **subdivision (1) that were eligible for payment by a third party**
- 20 **other than Medicaid.**
- 21 **The office may require, and a covered entity shall provide, any**
- 22 **information necessary for the office to complete the examination**
- 23 **required by this section. The office, after notice and hearing, may**
- 24 **impose a fine not to exceed one thousand dollars (\$1,000) for each**

1 refusal by a covered entity to provide information under this
2 section.

3 Sec. 3. If the percentage determined under section 2 of this
4 chapter is at least one percent (1%), the office shall develop and
5 implement a procedure to improve the coordination of benefits
6 between:

- 7 (1) the Medicaid program; and
- 8 (2) any other third party source of health care coverage
9 provided to a recipient.

10 Sec. 4. If a procedure is developed and implemented under
11 section 3 of this chapter, the procedure:

- 12 (1) must be automated; and
- 13 (2) must provide a system for determining whether a
14 Medicaid claim is eligible for payment by another third party
15 before the claim is paid under the Medicaid program."

16 Page 3, after line 22, begin a new paragraph and insert:

17 "SECTION 8. An emergency is declared for this act."

18 Renumber all SECTIONS consecutively.

(Reference is to ESB 566 as printed April 3, 2007.)

Representative Welch