
OFFICE OF THE SECRETARY OF FAMILY AND SOCIAL SERVICES

Notice of Proposed Changes in Methods and Standards of Medicaid Reimbursement for Physicians, Limited License Practitioners, and Nonphysician Practitioners

In accordance with public notice requirements established at 42 CFR 447.205, the Indiana Family and Social Services Administration, Office of Medicaid Policy and Planning (Office) publishes this notice of proposed changes to methods and standards governing reimbursement policy for Medicaid-enrolled physicians, limited license practitioners, and nonphysician practitioners.

Effective for State Fiscal Year (SFY) 2007, and on an annual basis thereafter, in the last quarter of each state fiscal year, the Office shall assess the expenditures for physicians, limited license practitioners, and nonphysician practitioners in comparison to the budgeted expenditure amount for the state fiscal year in effect on that date. In the event that the annual expenditures for physicians, limited license practitioners, and nonphysician practitioners are less than the budgeted amount for the state fiscal year, the Office may increase the payment rates paid to physicians, limited license practitioners, and nonphysician practitioners who specialize in primary and preventive care services. The Office is making this change in order to recognize the importance of primary and preventive care.

In determining the amount of the payment adjustment under this provision, the Office shall examine historical utilization from physicians, limited license practitioners, and nonphysician practitioners who specialize in primary and preventive care services. For procedures that use RBRVS pricing, the payment rate adjustment will be procedure code specific and include any combination of changes to the relative value units, geographical practice cost index, and conversion factor such that the adjusted payment rate will not exceed the Medicare payment rate then in effect for each procedure code. For procedures that are exempt from RBRVS pricing, the rate adjustment will be procedure code specific based on an adjustment to the Medicaid payment rate in effect on the date of the assessment.

A Medicaid State Plan Amendment (SPA) implementing this change will be submitted to the Centers for Medicare and Medicaid Services (CMS) with a requested effective date one day after the publication of this notice. No public hearing will be held.

The estimated fiscal impact for SFY 2007, if the SPA is approved by CMS, is expected to be \$9.3 million (state and federal).

Anyone who wishes to comment on the proposed change may submit written comments to: Ms. Pat Nolting, Family and Social Services Administration, Office of Medicaid Policy and Planning, 402 West Washington Street, Room W382, P.O. Box 7083, Indianapolis, IN 46204-7083.

E. Mitchell Roob Jr.
Secretary
Office of the Secretary of Family and Social Services

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