

Emergency Rule

LSA Document #10-493(E)

DIGEST

Temporarily adds a noncode provision affecting [405 IAC 1-11.5-2](#) to revise Medicaid reimbursement for physician-administered drugs, which shall not apply to parenteral nutrition and blood factor products. Authority: [IC 4-22-2-37.1](#)(a)(19); [IC 12-15-21-2](#); [IC 12-15-21-3](#). Effective July 30, 2010.

SECTION 1. Rates paid to providers for physician-administered drugs in accordance with the methods described in [405 IAC 1-11.5](#) shall be one hundred five percent (105%) of the published wholesale acquisition cost (WAC) of the benchmark National Drug Code (NDC). For benchmark NDCs without a published WAC, the reimbursement for physician-administered drugs shall be the Medicare payment amount as published by the Centers for Medicare and Medicaid Services (CMS). If no WAC or Medicare payment amount is available, other pricing metrics may be used as determined by the office. This policy shall not apply to parenteral nutrition and blood factor products.

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