

**Document:** Notice of Rule Adoption, **Register Page Number:** 26 IR 61

**Source:** October 1, 2002, Indiana Register, Volume 26, Number 1

**Disclaimer:** This document was created from the files used to produce the official Indiana Register. However, this document is unofficial.

**TITLE 405 OFFICE OF THE SECRETARY OF  
FAMILY AND SOCIAL SERVICES**

**LSA Document #02-13**

Under IC 12-8-3-4.4, LSA Document #02-13, printed at 25 IR 2779, which amends 405 IAC 1-14.6-2, 405 IAC 1-14.6-4, 405 IAC 1-14.6-6, 405 IAC 1-14.6-7, 405 IAC 1-14.6-9, 405 IAC 1-14.6-12, 405 IAC 1-14.6-16, and 405 IAC 1-14.6-22 to revise the case mix reimbursement methodology that the Medicaid program utilizes to reimburse nursing facilities as follows: removes from consideration as allowable cost indirect costs associated with ancillary services provided to non-Medicaid residents; establishes a children's nursing facility designation for Medicaid reimbursement purposes and removes the profit add-on portion of the direct care component for nursing facilities not designated as children's nursing facilities; establishes a minimum occupancy parameter for the direct care, indirect care and administrative rate components; provides for rebasing of Medicaid payment rates every other year, rather than annually; and updates mortgage interest rate parameter used to establish Medicaid reimbursement for capital costs of nursing facilities, was adopted by the Office of the Secretary of Family and Social Services on August 13, 2002. The rule which was adopted is the same version as the proposed rule which was published in the Indiana Register on June 1, 2002.