

IC 12-15-33.5

Chapter 33.5. Medicaid Clinical Advisory Committee

IC 12-15-33.5-1

"Committee" defined

Sec. 1. As used in this chapter, "committee" refers to the Medicaid clinical advisory committee established under this chapter.
As added by P.L.42-1995, SEC.25.

IC 12-15-33.5-2

Establishment

Sec. 2. The office shall establish a clinical advisory committee to provide clinical insights and applications of clinical policy issues related to programs administered by the office, including issues related to:

- (1) current standards of care;
- (2) quality of care;
- (3) accessibility of care;
- (4) appropriateness of care; and
- (5) cost-effectiveness of care.

As added by P.L.42-1995, SEC.25.

IC 12-15-33.5-3

Membership; meetings; consultations; ad hoc clinical advisory committee

Sec. 3. (a) The committee consists of at least seven (7) members and not more than thirteen (13) members.

(b) The office's medical consultant shall serve as the chairperson of the committee.

(c) The committee shall include at least seven (7) physicians who are:

- (1) licensed under IC 25-22.5; and
- (2) actively engaged in the practice of medicine.

(d) The office shall select the remaining committee members from the medical provider community to represent the services most critical to the Medicaid recipient population.

(e) The committee shall meet:

- (1) one (1) time every two (2) months; or
- (2) as determined necessary by the chairperson.

(f) The committee may consult as needed with other persons who have expertise in any clinical policy issue being considered by the committee.

(g) If the committee established under subsection (a) considers a change in clinical policy related to care and services provided under:

- (1) IC 25-10 (chiropractic services);
- (2) IC 25-14 (dental services);
- (3) IC 25-24 and IC 25-26 (eye care services); or
- (4) IC 25-29 (foot care services);

the office shall establish an ad hoc clinical advisory committee comprised of three (3) licensed non-physician practitioners directly

affected by the proposed clinical policy change.

(h) The chairperson of a committee under subsection (g) shall be the office's medical consultant.

(i) When an ad hoc clinical advisory committee is established under subsection (g)(3), one (1) member of the committee shall be a physician licensed under IC 25-22.5 who provides services similar to those provided by an optometrist licensed under IC 25-24 or IC 25-26.

(j) A committee established under subsection (g) shall provide clinical insights and applications of clinical policy issues relating to:

- (1) current standards of care;
- (2) quality of care;
- (3) accessibility of care;
- (4) appropriateness of care; and
- (5) cost-effectiveness of care.

As added by P.L.42-1995, SEC.25.