

Department of Health & Human Services
Centers for Medicare & Medicaid Services
7500 Security Boulevard, Mail Stop S2-26-12
Baltimore, Maryland 21244-1850



Center for Medicaid and CHIP Services

Patricia Casanova, Director of Medicaid
Indiana Office of Medicaid Policy and Planning
402 West Washington Street, Room W382
P.O. Box 7083
Indianapolis, IN 46204

FEB 25 2013

RE: Indiana 12-011

Dear Ms. Casanova:

We have reviewed the proposed amendment to Attachment 4.19-D of your Medicaid State plan submitted under transmittal number (TN) 12-011. Effective for services on or after July 1, 2012, this amendment proposes to revise reimbursement methodologies for nursing facility (NF) and intermediate care facilities for the mentally retarded (ICF/MR) services. Specifically, this amendment clarifies methodology regarding overpayments; limits reimbursement for the rental costs for low air mattresses, pressure support surfaces, and oxygen concentrators; identifies actions to be taken in the event of cost report deficiencies; clarifies allowable costs for non-state government-owned (NSGO) NFs in a related party transaction; and implements other administrative changes to nursing facility and ICF/MR reimbursement.

We conducted our review of your submittal according to the statutory requirements at sections 1902(a)(2), 1902(a)(13), 1902(a)(30), and 1903(a) of the Social Security Act (the Act) and the regulations at 42 CFR 447 Subpart C. We hereby inform you that Medicaid State plan amendment TN 12-011 is approved effective July 1, 2012. The HCFA-179 and the amended plan pages are attached.

If you have any questions, please call Todd McMillion at (312) 353-9860.

Sincerely,

A handwritten signature in black ink that reads "Cindy Mann". The signature is written in a cursive, flowing style.

Cindy Mann
Director
Center for Medicaid and CHIP Services

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