

Attachment to Blocks 8 & 9 of CMS Form 179

Transmittal Number 12-022

**Number of the
Plan Section or Attachment**

**Number of the Superseded
Plan Section or Attachment**

Supplement 1 to Attachment 4.19B

Page 1

Page 2

Page 3

Supplement 1 to Attachment 4.19-B

Page 1 (11-045)

Page 2 (11-045)

Page 3 (11-045)

STATE	<u>Texas</u>	A
DATE REC'D	<u>5-22-12</u>	
DATE APPV'D	<u>8-20-12</u>	
DATE EFF	<u>5-1-12</u>	
NOFA 179	<u>12-72</u>	

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT
State/Territory: Texas

METHODS AND STANDARDS FOR ESTABLISHING PAYMENT RATES
OTHER TYPES OF CARE

Payment of Medicare Part A and Part B Deductible/Coinsurance

QMBs:	Part A <u>SP</u> Deductibles	<u>SP</u> Coinsurance
	*Part B <u>SP</u> Deductibles	<u>SP</u> Coinsurance

Other Medicaid Recipients	Part A <u>SP</u> Deductibles	<u>SP</u> Coinsurance
	*Part B <u>SP</u> Deductibles	<u>SP</u> Coinsurance

Dual Eligible (QMB Plus)	Part A <u>SP</u> Deductibles	<u>SP</u> Coinsurance
	*Part B <u>SP</u> Deductibles	<u>SP</u> Coinsurance

* The payment of the Medicare Part B deductible and coinsurance for services listed in Supplement 1 to Attachment 4.19-B, Page 3, item 5 is based on the Medicare rate.

SUPERSEDES: TN- 11-45

TN: 12-22 Approval Date: 8-20-12 Effective Date: 5-1-12
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METHODS AND STANDARDS FOR ESTABLISHING PAYMENT RATES -
OTHER TYPES OF CARE

Payment of Medicare Part A and Part B Deductible/Coinsurance

Except for a nominal recipient copayment (as specified in Attachment 4.18 of this state plan), if applicable, the Medicaid agency uses the following general method for payment:

1. Payments are limited to state plan rates and payment methodologies for the groups and payments listed below and designated with the letters "SP".

For specific Medicare services which are not otherwise covered by this state plan, the Medicaid agency uses Medicare payment rates unless a special rate or method is set out on Page 3 in items 1&2 of this attachment.

2. Payments are up to the full amount of the Medicare rate for the groups and payments listed below, and designated with the letters "MR."
3. Payments are up to the amount of a special rate, or according to a special method, described on Page 3 in item of this attachment, for those groups and payments listed below and designated with the letters "NR".
4. Any exceptions to the general methods used for a particular group or payment are specified on Page 3 in items 4&5 of this attachment.

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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State/Territory: Texas

METHODS AND STANDARDS FOR ESTABLISHING PAYMENT RATES
OTHER TYPES OF CARE

Payment of Medicare Part A and Part B Deductible/Coinsurance

* The payment of the Medicare Part A deductible and coinsurance for inpatient hospital services and the payment of the Medicare Part B deductible and coinsurance for outpatient and professional services are based on the following. The payment of all other Part A deductible and coinsurance is based on the Medicare rate.

1. If the Medicare payment amount equals or exceeds the Medicaid payment rate, the State is not required to pay the Medicare deductible/coinsurance on a crossover claim.
2. If the Medicare payment amount is less than the Medicaid payment rate, the State is required to pay the Medicare deductible/coinsurance on a crossover claim, but the amount of payment is limited to the lesser of the deductible/coinsurance (resulting in a combined Medicare/State payment amount equal to the Medicare payment rate) or the amount remaining after the Medicare payment amount is subtracted from the Medicaid payment rate (resulting in a combined Medicare/State payment amount equal to the Medicaid payment rate).
3. Coverage of a recipient's deductible and/or coinsurance liabilities as specified in this section satisfies the State's obligation to provide Medicaid coverage for services that would have been paid in the absence of Medicare coverage.
4. On crossover claims from renal dialysis facility providers, the payment will be equal to the Medicare deductible/coinsurance minus five percent.
5. The payment of the Medicare Part B deductible and coinsurance for the following types of crossover claims is based on the Medicare rate:
 - services provided by psychiatrists, psychologists, and licensed clinical social workers; and
 - codes R0070 and R0075, related to the transport of portable x-ray equipment.

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