Table of Contents

State/Territory Name: IN

State Plan Amendment (SPA) #: 22-0012

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) CMS 179 Form/Summary Form (with 179-like data)
- 3) Approved SPA Pages

DEPARTMENT OF HEALTH & HUMAN SERVICES Centers for Medicare & Medicaid Services Center for Medicaid & CHIP Services 233 North Michigan Ave., Suite 600 Chicago, Illinois 60601



Financial Management Group/ Division of Reimbursement Review

November 10, 2022

Allison Taylor Medicaid Director Indiana Office of Medicaid Policy and Planning 402 West Washington Street, Room W374 Indianapolis, IN 46204

RE: TN: 22-0012

Dear Director Taylor,

We have reviewed the proposed Indiana State Plan Amendment, TN: 22-0012 which was submitted to the Centers for Medicare & Medicaid Services (CMS) on August 31, 2022. This State Plan Amendment (SPA) looks to provide Medicaid coverage for eligible members to receive general pediatric vaccine counseling as part of EPSDT. Beginning with dates of service on or after September 1, 2022, stand-alone general pediatric vaccination counseling as part of the early and periodic screening, diagnostic, and treatment (EPSDT) benefit will be reimbursed under CPT 99401 with modifier EP per the fee schedule. This SPA also relocates payment for Ambulance Response and Treat-no-Transport Services for Emergency Medical Technicians (EMT's) under the direction of a physician.

Based upon the information provided by the State, we have approved the amendment with an effective date of September 1, 2022. We are enclosing the approved CMS-179 and a copy of the new state plan pages.

If you have any additional questions or need further assistance, please contact Matthew Klein at 214-767-4625 or matthew.klein@cms.hhs.gov

Sincerely,

Todd McMillion

Division of Reimbursement Review Director

Enclosures

CENTERS FOR MEDICARE & MEDICAID SERVICES	OMD INC. 0335 013.
TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES TO: CENTER DIRECTOR	1. TRANSMITTAL NUMBER 2. STATE 2. 2 — 0 0 1 2 IN 3. PROGRAM IDENTIFICATION: TITLE OF THE SOCIAL SECURITY ACT XIX XXI 4. PROPOSED EFFECTIVE DATE
CENTERS FOR MEDICAID & CHIP SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES	September 1, 2022
5. FEDERAL STATUTE/REGULATION CITATION 1905(r)(1)(B)(v) of the Social Security Act	6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars) a. FFY 2023 \$ 6.000 b. FFY 2024 \$ 6.000
7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT Attachment 4.19-B Page 1a.2 Attachment 4.19-B Page 5	8. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable) Attachment 4.19-B Page 5
9. SUBJECT OF AMENDMENT 10. GOVERNOR'S REVIEW (Check One) GOVERNOR'S OFFICE REPORTED NO COMMENT COMMENTS OF GOVERNOR'S OFFICE ENCLOSED NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL	
A	5. RETURN TO Ilison Taylor
12. TYPED NAME Allison Taylor 13. TITLE In	ledicaid Director Indiana Office of Medicaid Policy and Planning O2 West Washington Street, Room W374 Indianapolis, IN 46204 TTN: Madison May-Gruthusen, Federal Relations Lead
FOR CMS USE ONLY	
09/30/2022	7. DATE APPROVED November 10, 2022
PLAN APPROVED - ONE COPY ATTACHED	
18. EFFECTIVE DATE OF APPROVED MATERIAL 09/01/2022	9 SIGNATURE OF APPROVING OFFICIAL
Todd McMillion	TITLE OF APPROVING OFFICIAL Director, Division of Reimbursement and Review
22. REMARKS	

State of Indiana Attachment 4.19-B
Page la. 2

8. Effective for dates of service on or after July 1, 2021, EMT's under the directions of the physician will be reimbursed for appropriate and medically necessary medical care when an ambulance is dispatched, and treatment is provided to the patient without the patient being transported to another site. Reimbursement for treat-no-transport will be made for Healthcare Common Procedure Coding System (HCPCS) code A0998 at the Indiana Medicaid physician fee schedule rate for Current Procedural Terminology (CPT) code 99203.

Except as otherwise noted in the plan, state-developed fee schedule rates are the same for governmental and private physicians. All rates are published on the agency's website at www.in.gov/medicaid/providers/business-transactions/billing-and-remittance/ihcp-fee-schedules/

9. Beginning with dates of service on or after September 1, 2022, Medicaid will provide stand-alone general pediatric vaccination counseling as part of the early and periodic screening, diagnostic, and treatment (EPSDT) benefit. The rate will be equal to the rate for CPT 99401 with modifier EP. All rates are published at the State's website, www.in.gov/medicaid/providers/business-transactions/billing-and-remittance/ihcp-fee-schedules/

State of Indiana Attachment 4.19-B

Page 5

Transportation

Payment will be based upon the lower of the provider's submitted charge or the fee schedule rate established by the State for the service billed. Base rate is defined as the allowed payment amount for a one-way trip, not including mileage. Mileage payments are made for loaded miles, defined as the number of miles the Medicaid member is transported in the vehicle. Reimbursement for covered transportation services will be as follows:

Non-emergency Ground Transportation:

A non-emergency medical transportation (NEMT) broker is reimbursed a monthly capitated payment for each Indiana Medicaid FFS member.

<u>Meals and Lodging</u>: Meals and lodging reimbursement is based on the rate established by the Indiana State Legislature paid to Indiana state employees for travel-related expenses.

Emergency Transportation:

Medicaid pays for emergency medical transportation services at the lower of:

- 1. The provider's submitted charge; or
- 2. The allowable amount for that procedure code in the Indiana Medicaid Practitioner Fee Schedule in effect for that date of service. The allowable amount is calculated based upon a survey of billed charges statewide utilization data.