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

LSA Document #02-121(F)

**DIGEST**

Amends 405 IAC 1-18-2 to specify Medicaid reimbursement methodology for Medicare cross-over claims. Repeals 405 IAC 1-18-3. Effective 30 days after filing with the secretary of state.

**405 IAC 1-18-2**

**405 IAC 1-18-3**

SECTION 1. 405 IAC 1-18-2, AS ADDED AT 25 IR 2477, SECTION 1, IS AMENDED TO READ AS FOLLOWS:

**405 IAC 1-18-2 Reimbursement of cross-over claims**

**Authority:** IC 12-8-6-5; IC 12-15-1-10; IC 12-15-1-15; IC 12-15-21-2; IC 12-15-21-3

**Affected:** IC 12-15-14

Sec. 2. (a) Cross-over claims filed by ~~nursing facilities~~ **Medicaid providers** are reimbursed as set out in this section.

(b) If the Medicare payment amount for a claim exceeds or equals the Medicaid allowable amount for that claim, Medicaid reimbursement will be zero (0).

(c) If the Medicaid allowable amount for a claim exceeds the Medicare payment amount for that claim, Medicaid reimbursement is the lesser of:

- (1) the difference between the Medicaid allowable amount minus the Medicare payment amount; or
- (2) the Medicare coinsurance and deductible, if any, for the claim.

~~(d) Cross-over claims filed by providers other than nursing facilities are reimbursed as described in section 3 of this rule.~~ (Office of the Secretary of Family and Social Services; 405 IAC 1-18-2; filed Mar 18, 2002, 3:32 p.m.: 25 IR 2477; filed Nov 27, 2002, 4:30 p.m.: 26 IR 1079)

SECTION 2. 405 IAC 1-18-3, AS ADDED AT 25 IR 2477, SECTION 1, IS REPEALED.

*LSA Document #02-121(F)*

*Notice of Intent Published: 25 IR 2544*

*Proposed Rule Published: July 1, 2002; 25 IR 3243*

*Hearing Held: July 23, 2002*

*Approved by Attorney General: November 20, 2002*

*Approved by Governor: November 26, 2002*

*Filed with Secretary of State: November 27, 2002, 4:30 p.m.*

*Incorporated Documents Filed with Secretary of State: None*