

Insights

Indiana Medicaid Rule Changes to Expect for 2019

January 7, 2019

By: Meghan M. Linvill McNab and Brandon W. Shirley

An Executive Order limiting agency rulemaking has not prevented Indiana Medicaid from moving forward with a number of rulemaking changes expected to be finalized throughout 2019. These rules are in various stages of the rule adoption process, and have a broad impact on the health care community as it relates to the Indiana Medicaid program, e.g., credentialing, pharmacy reimbursement, radiology, eligibility requirements under HIP 2.0, home health, applied behavior analysis (“ABA”) therapy, and provider sanctions and appeals. Interested persons may access further detail regarding these rule changes by accessing the Office of Medicaid Policy and Planning’s (“OMPP”) rulemaking docket.

Below is a brief description of the rule changes that have been proposed, but the details of which have not yet been published.

- **Credentialing.** The rule proposes to establish certain credentialing criteria for purposes of provider enrollment.
- **Pharmacy.** The rule proposes to make various changes to legend and non-legend drug reimbursement and the pharmacy dispensing fee.
- **Radiology.** The rule proposes to create new coverage limitations and reimbursement requirements for certain radiologic procedures.
- **HIP 2.0.** The rule proposes to update HIP 2.0 eligibility requirements and make certain changes impacting presumptive eligibility. The rule also adds a new coverage program referred to as “Gateway to Work.”

The following three rules are in the final stages of the rulemaking process or are expected to become final within the next several months.

- **Home Health.** The rule changes how home health services are reimbursed, including where home health services may be provided. This rule will become final on or around January 21, 2019.
- **ABA Therapy.** The rule changes reimbursement requirements for ABA Therapy services, and imposes new standards and requirements for providing such services. The comment period for this rule is closed and the rule is still under consideration with OMPP.
- **Program Integrity.** The rule makes numerous changes to Indiana Administrative Code provisions impacting provider participation, sanctions, and appeals. The rule will be effective on or around



January 21, 2019.

Medicaid requirements are complicated as often changing. Please contact Brandon W. Shirley at bshirley@kdlegal.com or Meghan M.Linvill McNab at mmcnab@kdlegal.com if you have compliance questions or would like assistance in responding to the proposed rules.