Revision: HCFA-PM-94-1 (MB)

FEBRUARY 1994

State/Territory: Indiana

Citation

(I)

4.22 Third Party Liability

42 CFR 433.137

(a) The Medicaid agency meets all requirements of: (1)

42 CFR 433.138 and 433,139,

- (2) 42 CFR 433.145 through 433.148.
- (3) 42 CFR 433,151 through 433.154.
- (4) Sections 1902(a)(25)(H) and (I) of the

Act, of the Act 42 CFR 433.138(f)

1902(a)(25)(H) and

(b) ATTACHMENT 4.22-A --

(1) Specifies the frequency with which the data exchanges required in \$433.138(d)(1),(d)(3) and (d) (4) and the diagnosis and trauma code edits required in \$433.138(e) are conducted;

42 CFR 433.138(g)(1)(ii) and (2)(ii)

(2) Describes the methods the agency uses for meeting the follow up requirements contained in S433.138(g)(1)(i) and (g)(2)(i);

42 CFR 433.138(g)(3)(i) and (iii)

(3) Describes the methods the agency uses for following up on information obtained through the State motor vehicle accident report file data exchange required under \$433.138(d)(4)(ii) and specifies the time frames for incorporation into the eligibility case file and into its third party data base and third party recovery unit of all information obtained through the follow up that identifies legally liable third party resources; and

42 CFR 433,1JS(g)(4)(i) through (iii)

(4) Describes the methods the agency uses for following up on paid claims identified under \$433.138(e) (methods include a procedure for periodically identifying those trauma codes that yield the highest third party collections and giving priority to following up on those codes) and specifies the time frames for incorporation into the eligibility case file and into its third party data base and third party recovery unit of all information obtained through the follow up that identifies legally liable third partyresources.

TN No. 21-017 Supersedes TN No. 95-012

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42 CFR x (c) 433.139(b)(3)

Providers are required to bill liable third parties when services covered under the plan are furnished to an individual on whose behalfchild support enforcement is being carried outby the State IV-D agency.

Effective December 31, 2021, system edits will be updated to require TPL resource validation prior to making payment determinations for claims that contain services for prenatal care including labor and delivery and postpartum care.

Claims for services relating to pediatric preventative care are excluded from cost avoidance and will follow the pay and chase methodology, unless the state has made a determination related to cost-effectiveness and access to care that warrants cost avoidance for up to 90 days.

When coordination of benefits decisions are the result of child support enforcement, claims will not be subject to cost avoidance for up to 100 days following the date the claim has been submitted in accordance with the flexibilities outlined in 1902(a)(25)(F).

ATTACHMENT 4.22-B specifies the following:

42 CFR 433,139(b)(3) (ii) (C)

42 CFR 433.139(f)(2)

42 CFR 433.139(f)(3)

42 CFR 447.20

The method used in determining a provider's compliance with the third party billing requirements at S433.139(b)(3)(ii)(C).

(2) The threshold amount or other guideline used in determining whether to seek recovery of reimbursement from a liable third party, or the process by which the agency deterines that seeking recovery of reimbursement would not be cost effective.

(3) The dollar amount or time period the state uses to accumulate billings from a particular liable third party in making the decision to seek recovery of reimbursement.

(e) The Medicaid agency ensures that the provider furnishing a service for which a third party isliable follows the restrictions specified in 42 CFR 447.20.

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4.22 (continued)

42 CFR 433.1Sl(a)

- f) The Medicaid agency has written cooperative agreements for the enforcement of rights to and collection of third party benefits assigned to the State as a condition of eligibility for medical assistance with the following: (Check as appropriate.)
 - $_{\rm x_{\rm -}}$ State title IV-D agency. The requirements of 42 CFR 433.152(b) are met.
 - x Other appropriate State agency(s)-State Police. Morker's CompensationDivision of Employment
 and Training

Other appropriate agency(s) of another State--

1902(a)(60) of the Act

Courts and law enforcement officials.

1906 of the Act

- (g) The Medicaid agency assures that the State hasin effect the laws relating to medical child support under section 1908 of the Act.
- (h) The Medicaid agency specifies the guidelines used in determining the cost effectiveness of an employer-based group health plan by selecting one of the following.

The Secretary's method as provided in the State Medicaid Manual, Section 3910.

J The State provides methods for determining cost effectiveness on ATTACHMENT 4.22-C4