

Indiana Medicaid Surety Bond Requirements



For transportation providers that must have a surety bond to enroll in the Indiana Medicaid program, as specified in *Indiana Code 12-15-11-2.5*, the bond must meet the following requirements:

- The surety bond must be continuously in effect for at least three years after the provider enrollment application is made.
- The surety bond must provide coverage for liability of at least \$50,000.
- The surety bond must name the:
 - Transportation provider as the principal
 - Office (Office of Medicaid Policy and Planning) as the obligee
 - Person that issues the surety bond, including the person's heirs, executors, administrators, successors, and assignees, jointly and severally, as surety
- The surety bond must provide the surety's name, street address or post office box number, city, state, and ZIP Code.
- The surety bond must provide that the surety is liable under the surety bond for a duplicate, erroneous, or false Medicaid claim paid by the Office or its fiscal agent to the transportation provider during the term of the surety bond.
- The surety bond must provide that the bond may not be void on a first recovery, but that suits may be instituted until the penalty is exhausted.
- The surety bond must guarantee that the surety will, no later than 30 days after the surety receives written notice from the Office containing sufficient evidence to establish the surety's liability under the surety bond as described in subdivision (5), pay to the Office the following amounts, not to exceed the full amount of the surety bond:
 - The amount of the duplicate, erroneous, or false claim that was previously paid by the Office or its fiscal agent to the transportation provider, plus accrued interest
 - An assessment imposed under *IC 12-15-22* by the Office on the transportation provider
- The surety bond must provide that if the transportation provider's provider agreement is not renewed or is terminated, the surety bond submitted by the transportation provider remains in effect until the last day of the surety bond coverage period and the surety remains liable for a duplicate, erroneous, or false claim paid by the Office or its fiscal agent to the transportation provider during the term of the surety bond.
- The surety bond must provide that actions under the surety bond may be brought by the Office or by the Office of the Indiana Attorney General.

Information about purchasing a Medicaid Transportation Provider Surety Bond is available through the following companies:

- Ellinger Riggs Insurance at (317) 774-9400
- Knight Insurance Agency at (317) 927-8711 or james@jamesknightinsurance.com
- Lance Surety at 1-877-514-5146 or suretybonds.org
- Merchants Bonding Company at 1-800-678-8171
- SuretyBonds.com at 1-800-308-4358 or suretybonds.com
- VGM Insurance Services at vgminsurance.com/bonds

Bond underwriters can find Indiana's *Medicaid Transportation Provider Surety Bond* form (State Form 55382) in the [State Forms Online Catalog](#) at in.gov/icpr.