SEPTEMBER 1985

ATTACHMENT 4.18-C

Page 1

OMB NO.: 0938-0193

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

A. The following charges are imposed on the medically needy for services:

Service	Deduct.	ype of Cha Coins.	rge Copay.	Amount and	Basis for	Determination
Not applicable.				·		
						•
	•		·			
·				,		
			-			

TN No. <u>85-</u>14

Supersedes TN No. NA Approval Date 13-13-85

Effective Date 10-1-85

HCFA ID: 0053C/0061E

Revision: HCFA-PM-85-14 (BERC)

SEPTEMBER 1985

ATTACHMENT 4.18-C

Page 2

STATE	PLAN	UNDER	TITLE	XIX	OF	THE	SOCIAL	SECURITY	ACT

		State:Indiana
в.		method used to collect cost sharing charges for medically needy viduals:
		Providers are responsible for collecting the cost sharing charges from individuals.
	乙	The agency reimburses providers the full Medicaid rate for services and collects the cost sharing charges from individuals.

C. The basis for determining whether an individual is unable to pay the charge, and the means by which such an individual is identified to

Not applicable.

providers, is described helow:

TN No. 85-14 Supercedes TN No. MA

Approval Date 12-13-85

Effective Date 10-1-85

HCFA ID: 0053C/0061E

SEPTEMBER 1985

Page 3

State:	Indiana

D. The procedures for implementing and enforcing the exclusions from cost sharing contained in 42 CFR 447.53(b) are described below:

Not applicable.

- E. Cumulative maximums on charges:
 - // State policy does not provide for cumulative maximums.
 - Cumulative maximums have been established as described below:

Not applicable.

TN No. 85-14

Supersedes TN No. ___

Approval Date 12-13-85

Effective Date __10-1-85

HCFA ID: 0053C/0061E