

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State/Territory: FLORIDA

METHODS AND STANDARDS FOR ESTABLISHING PAYMENT RATES –
OTHER TYPES OF CARE

Payment of Medicare Part A and Part B Deductible/Coinsurance, and Payment of
Medicare Part C Deductible/Coinsurance/Copayment

Except for a nominal recipient copayment (as specified in Attachment 4.18 of this State Plan), if applicable, the Medicaid agency uses the following general method for payment:

1. Payments are limited to State plan rates and payment methodologies for the groups and payments listed below and designated with the letters "SP".

For specific Medicare services which are not otherwise covered by this State plan, the Medicaid agency uses Medicare payment rates unless a special rate or method is set out on page 4, in item 7 of this attachment.

2. Payments are up to the full amount of the Medicare rate for the groups and payments listed below, as set out on page 4 in items 7 and 8 of this attachment.
3. Payments are up to the amount of a special rate, or according to a special method, described on pages 3 and 4, in items 4, 5, 6, 9, and 10 of this attachment.
4. Any exceptions to the general methods used for a particular group or payment are specified on __, in item __ of this attachment.

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QMBs:	Part A	<u>SP</u> Deductibles	<u>SP</u> Coinsurance	
	Part B	<u>SP</u> Deductibles	<u>SP</u> Coinsurance	
	Part C	<u>SP</u> Deductibles	<u>SP</u> Coinsurance	<u>SP</u> Copayments

Other	Part A	<u>SP</u> Deductibles	<u>SP</u> Coinsurance	
Medicaid	Part B	<u>SP</u> Deductibles	<u>SP</u> Coinsurance	
Recipients				

Dual	Part A	<u>SP</u> Deductibles	<u>SP</u> Coinsurance	
Eligible	Part B	<u>SP</u> Deductibles	<u>SP</u> Coinsurance	
(QMB Plus)	Part C	<u>SP</u> Deductibles	<u>SP</u> Coinsurance	<u>SP</u> Copayments

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1. or nursing facilities, Medicaid will pay no portion of the Medicare Part A coinsurance when payment that Medicare has made for the services equals or exceeds what Medicaid would have paid if it had been the sole payer.

2. Medicare Part B Deductible and Coinsurance

Florida Medicaid covers the Medicare Part B deductible and coinsurance up to the Medicaid fee, less any amounts paid by Medicare. If this amount is negative, no Medicaid payment is made. If this amount is positive, Medicaid pays the coinsurance and deductible up to the billed or allowed amount, whichever is less.

3. For freestanding end-stage dialysis centers, emergency transportation, and portable x-ray services, Medicaid reimburses 100 percent of the deductible and coinsurance.
4. Florida Medicaid pays 100 percent of the Medicare Part B deductible and coinsurance for services that are covered by Medicare, but are not covered by Medicaid in the Florida State Plan.

Florida Medicaid covers the Part B deductible and coinsurance for QMBs and QMB Plus. Florida Medicaid does not cover Medicaid Part B deductible and coinsurance for the QI1 and SLMB.

5. Medicare Part C Deductible, Coinsurance, and Copayment

Florida Medicaid covers the Medicare Part C deductible and coinsurance up to the Medicaid fee, less any amounts paid by Medicare. If this amount is negative, no Medicaid payment is made. If this amount is positive, Medicaid pays the coinsurance and deductible up to the billed or allowed amount, whichever is less.

Florida Medicaid covers the Medicare Part C copayment up to the Medicaid copayment, less any amounts paid by Medicare. If this amount is negative, no Medicaid payment is made. If this amount is positive, Medicaid pays the coinsurance and deductible up to the billed or allowed amount, whichever is less.

6. The financial obligations of Medicaid for services is based upon Medicare's allowable, not the provider's charge. Except for provider types noted in number seven (7) above, Medicaid will pay no portion of Medicare deductibles and coinsurance when payment that Medicare has made for the service equals or exceeds what Medicaid would have paid had it been the sole payer. The combined payment from Medicare and Medicaid shall not exceed the amount Medicaid would have paid had it been the sole payer