Revision: HCFA-PM-91-4 (BPD) Supplement 2 to

August 1991 Attachment 4.19-B

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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State of VIRGINIA

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

Payment of Medicare Part A and Part B Deductible/Coinsurance

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 3 in item ___ of this attachment (see 3. below).

Not applicable. There are no special rates or methods used for specific Medicare services which are not otherwise covered by this State Plan.

- 2. Payments are up to the full amount of the Medicare rate for the groups and payments listed below, and designated with the letters "MR".
- 3. Payments are up to the amount of a special rate, or according to a special method, described on Page 3 in item ___ of this attachment, for the groups and payments listed below and designated with the letters "NR".
- 4. Any exceptions to the general methods used for a particular group or payment are specified on Page 3 in item __ of this attachment (see 3. above).

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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State of VIRGINIA

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

	Payment	of Medicare	e Part A and Part F	B Deductible/C	oinsurance
QMBs:	Part A	SP	_ Deductibles	SP	_ Coinsurance
	Part B	SP	_ Deductibles	SP	_ Coinsurance
Other Medicaid	Part A	SP	Deductibles	SP	Coinsurance
Recipients	Part B	SP	Deductibles	SP	_ Coinsurance
Dual Eligible	Part A	SP	Deductibles	SP	Coinsurance
(QMB Plus)	Part B	SP	Deductibles	SP	_ Coinsurance

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