

CMS Releases the FY2022 IPPS/LTCH PPS final rule (CMS-1752-P); Medicaid Provider Enrollment and Medicare Cost-sharing for Dually Eligible Beneficiaries

On August 2, 2021, the Centers for Medicare & Medicaid Services (CMS) issued the [FY2022 Inpatient Prospective Payment System/Long-Term Care Hospital Prospective Payment System \(IPPS/LTCH PPS\) final rule \(CMS-1752-F\)](#).

As a reminder, one policy in the rule specifically affects **dually eligible individuals** and the providers or suppliers who serve this population. This policy requires state Medicaid agencies to allow enrollment of all Medicare-enrolled providers and suppliers that serve dually eligible individuals for purposes of processing claims for Medicare cost sharing, by January 1, 2023. This requirement only applies to Medicare-enrolled providers and suppliers that wish to enroll with the state Medicaid agency, including out-of-state providers. CMS finalized this policy as proposed.

Please see Section X (“Medicaid Enrollment of Medicare Providers and Suppliers for Purposes of Processing Claims for Cost-Sharing for Services Furnished to Dually Eligible Beneficiaries”) for more information and the updated regulatory text in 42 CFR 455.10.

ABOUT THE INTEGRATED CARE RESOURCE CENTER

The Integrated Care Resource Center is a national initiative of the Centers for Medicare & Medicaid Services to help states improve the quality and cost-effectiveness of care for individuals dually eligible for Medicare and Medicaid. The state technical assistance activities are coordinated by Mathematica and the Center for Health Care Strategies. For more information, visit www.integratedcareresourcecenter.com.

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