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Section

1 Physician, dental, and other provider reimbursement. Amends § 256B.76. Requires an entity that operates a Medicare certified rehabilitation facility that is designated as an essential community provider and for whom at least 25 percent of the clients receiving rehabilitation services are MA recipients to be reimbursed under MA, for services provided on or after July 1, 2003, at rates that are 50 percent greater than the maximum rate that would otherwise be allowed. Provides a definition of rehabilitation services and also requires the facility to certify that the MA caseload requirement is satisfied.