Overview

This bill extends cost-based reimbursement under MA for certain rural health clinics and federally qualified health centers until December 31, 2002, and also allows new clinics and health centers to qualify for cost-based reimbursement.

1 Application. Amends § 62Q.19, subd. 2. Specifies that the two-year limit for essential community provider (ECP) applications does not apply to federally qualified health centers or rural health clinics seeking this status for purposes of obtaining cost-based reimbursement.

2 Other clinic services. Amends § 256B.0625, subd. 30. Allows cost-based reimbursement under MA for rural health clinics and federally qualified health centers to continue at 100 percent until December 31, 2002, for those clinics and centers that have applied for ECP status. (Without this change, cost-based reimbursement would expire in late 1999 or early 2000, depending upon when the facility applied for essential community provider status.) Eliminates the requirement that ECP status be applied for within six months of the adoption of rules. Makes a conforming change and strikes language that provides that these cost-based reimbursement provisions remain in effect only as long as the health care reform waiver is in effect.

3 Appropriation. Appropriates money from the general fund to the commissioner of human services for the next biennium, for purposes of section 2.