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Rule Title: RURAL HEALTH CLINICS AND FEDERALLY QUALIFIED HEALTH CENTERS, ALTERNATIVE PAYMENT METHODOLOGIES

Department: PUBLIC HEALTH AND HUMAN SERVICES Chapter: MEDICAID PRIMARY CARE SERVICES

Subchapter: Rural Health Clinics and Federally Qualified Health Centers

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37.86.4420 RURAL HEALTH CLINICS AND FEDERALLY QUALIFIED HEALTH CENTERS, ALTERNATIVE PAYMENT METHODOLOGIES

- (1) In the case of a catastrophic event or extraordinary circumstance that would directly impact the cost of medical services provided by an RHC or FQHC, or upon mutual agreement of the department and the RHC or FQHC the department may provide for payment in any year to an RHC or FQHC for services described in section 1905(a)(2)(B) and (C) of the Social Security Act in an amount determined under an alternative payment methodology that:
 - (a) is agreed to by the department and the RHC or FQHC; and
- (b) results in payment to the RHC or FQHC of an amount which is at least equal to the amount otherwise required to be paid to the RHC or FQHC under the Medicaid prospective payment system.
- (2) Beginning July 1, 2019, RHC or FQHC providers may elect to be reimbursed under an Alternative Payment Methodology (APM) equal to the per-visit cost as calculated utilizing the two most recently completed as-filed Medicare cost reports and/or other requested information. Examples include the Uniform Data Systems report, audited financial statements, and Electronic Health Record visit reconciliation.
- (a) The APM per-visit rate will not be less than the RHC's or FQHC's existing baseline PPS rate.
- (b) RHC or FQHC providers who choose to be reimbursed under the APM, must make the request to the department in writing no later than July 1, 2020.
- (c) The department will provide a written notification of the calculated APM per-visit rate to the RHC or FQHC within 90 days of receiving all information related to the request.
- (3) The effective date of the APM per-visit rate will be the later of the start of the facility's fiscal year following the most recent submitted Medicare as-filed cost report or July 1, 2019.
- (4) If the required information as outlined in (2) is not received prior to July 1, 2020, the option to be reimbursed on the APM is not available.

History: 53-2-201, 53-6-113, MCA; IMP, 53-2-201, 53-6-101, 53-6-111, 53-6-113, MCA; NEW, 1998 MAR p. 2045, Eff. 7/31/98; TRANS, from SRS, 2000 MAR p. 481; AMD, 2001 MAR p. 2043, Eff. 10/12/01; AMD, 2019 MAR p. 1866, Eff. 10/19/19.

MAR Notices	Effective From	Effective To	History Notes
<u>37-877</u>	10/19/2019	Current	History: <u>53-2-201</u> , <u>53-6-113</u> , MCA; <u>IMP</u> , <u>53-2-201</u> , <u>53-6-101</u> , <u>53-6-111</u> , <u>53-6-113</u> , MCA; <u>NEW</u> , 1998 MAR p. 2045, Eff. 7/31/98; <u>TRANS</u> , from SRS, 2000 MAR p. 481; <u>AMD</u> , 2001 MAR p. 2043, Eff. 10/12/01; <u>AMD</u> , 2019 MAR p. 1866, Eff. 10/19/19.
	10/12/2001	10/19/2019	53-6-111 and 53-6-113, MCA; NEW, 1998 MAR p. 2045, Eff. 7/31/98; TRANS, from SRS, 2000 MAR p. 481; AMD, 2001 MAR p. 2043, Eff. 10/12/01.
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