

State of Misconsin 2019 - 2020 LEGISLATURE

LRB-0546/P3 SWB:wlj&amn

DOA:.....Ames, BB0025 - Critical access payments to dental providers FOR 2019-2021 BUDGET -- NOT READY FOR INTRODUCTION

AN ACT ...; relating to: the budget.

Analysis by the Legislative Reference Bureau HEALTH AND HUMAN SERVICES

MEDICAL ASSISTANCE

1. Critical access reimbursement payments to dental providers

This bill requires DHS to provide enhanced reimbursement payments under the Medical Assistance program to dental providers who meet certain qualifications. In order to qualify, a provider must meet quality of care standards established by DHS. In addition, at least 50 percent of those individuals served by a nonprofit or public provider must be without dental insurance or enrolled in the Medical Assistance program for the provider to qualify for enhanced reimbursement and for-profit providers must have at least 5 percent of patients enrolled in the Medical Assistance program.

For services rendered by a qualified nonprofit critical access dental provider, DHS must increase reimbursement by 50 percent above the reimbursement rate otherwise paid to that provider. For services provided by a for-profit provider, DHS must increase reimbursement by 30 percent above the reimbursement rate otherwise paid to that provider. For providers serving individuals in managed care under the Medical Assistance program, DHS must increase reimbursement to pay an additional amount on the basis of the rate that would have been paid to the provider had the individual not been enrolled in managed care. If a provider has more than one service location, reimbursement is determined separately for each location.

For further information see the *state* fiscal estimate, which will be printed as an appendix to this bill.

The people of the state of Wisconsin, represented in senate and assembly, do enact as follows:

SECTION 1. 49.45 (24L) of the statutes is created to read:

49.45 (24L) CRITICAL ACCESS REIMBURSEMENT PAYMENTS TO DENTAL PROVIDERS. (a) Based on the criteria in pars. (b) and (c), the department shall increase reimbursements to dental providers that meet quality of care standards, as established by the department.

(b) In order to be eligible for enhanced reimbursement under this subsection, the provider must meet one of the following qualifications:

1. For a nonprofit or public provider, 50 percent or more of the individuals served by the provider are individuals who are without dental insurance or are enrolled in the Medical Assistance program.

2. For a for-profit provider, 5 percent or more of the individuals served by the provider are enrolled in the Medical Assistance program.

(c) For dental services rendered on or after January 1, 2020, by a qualified nonprofit critical access dental provider, the department shall increase reimbursement by 50 percent above the reimbursement rate that would otherwise be paid to that provider. For dental services rendered on or after January 1, 2020, by a qualified for-profit critical access dental provider, the department shall increase reimbursement by 30 percent above the reimbursement rate that would otherwise be paid to that provider. For dental provider, the department shall increase reimbursement by 30 percent above the reimbursement rate that would otherwise be paid to that provider. For dental providers rendering services to individuals in managed care under the Medical Assistance program, for services rendered on or

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after January 1, 2020, the department shall increase reimbursement to pay an additional amount on the basis of the rate that would have been paid to the dental provider had the individual not been enrolled in managed care.

(d) If a provider has more than one service location, the thresholds described under par. (b) apply to each location, and payment for each service location would be determined separately.

(END)