

2019 DRAFTING REQUEST

Bill

For: **Administration-Budget** Drafter: **swalkenh**
 By: **Ames** Secondary Drafters:
 Date: **10/23/2018** May Contact:

Same as LRB:

Submit via email: **YES**
 Requester's email:
 Carbon copy (CC) to: **DOASBOSStatLanguage@wisconsin.gov**
sarah.walkenhorstbarber@legis.wisconsin.gov
tamara.dodge@legis.wisconsin.gov

Pre Topic:

DOA:.....Ames, BB0025 -

Topic:

Critical access payments to dental providers

Instructions:

See attached

Drafting History:

<u>Vers.</u>	<u>Drafted</u>	<u>Reviewed</u>	<u>Submitted</u>	<u>Jacketed</u>	<u>Required</u>
/?	swalkenh 2/17/2019	wjackson 2/18/2019			
/P1	swalkenh 2/19/2019		dwalker 2/18/2019		State
/P2	swalkenh 2/20/2019	wjackson 2/19/2019	wjackson 2/19/2019		State
/P3		anienaja 2/20/2019	lparisi 2/20/2019		State

FE Sent For:

<END>

Dodge, Tamara

From: Hanaman, Cathlene
Sent: Tuesday, October 23, 2018 3:29 PM
To: Dodge, Tamara; Walkenhorst Barber, Sarah
Subject: FW: Statutory Language Drafting Request - 2019-21
Attachments: CAP.docx

From: Ames, Kyle - DOA
Sent: Tuesday, October 23, 2018 3:18 PM
To: Hanaman, Cathlene <Cathlene.Hanaman@legis.wisconsin.gov>
Cc: Dombrowski, Cynthia A - DOA <Cynthia.Dombrowski@wisconsin.gov>; Ames, Kyle - DOA <Kyle.Ames@wisconsin.gov>
Subject: Statutory Language Drafting Request - 2019-21

Biennial Budget: 2019-21

Topic: Critical Access Payments

Tracking Code: BB0025

SBO Team: HSI

SBO Analyst: Ames, Kyle
Phone: 608-266-2214
E-mail: kyle.ames@wisconsin.gov

Agency Acronym: 435

Agency Number: 435

Priority: Low

Intent:

In place of the dental reimbursement pilot project please create conditional reimbursement payments to critical access providers. (Please reference the attachment.)

Attachments: True

Please send completed drafts to SBOSatlanguage@spsmail.enterprise.wisstate.us

Please reference attached Minnesota statute that can serve as the basis for the eligibility requirements (Minn. Stat. 256B.76, Subdivision 4). DHS would provide a payment to non-profit providers of 50 percent of base reimbursement and a payment to for-profit providers of 30 percent of base reimbursement. In order to qualify, 50 percent or more of those individuals served by a non-profit provider would need to have been without dental insurance or enrolled in Medicaid and 5 percent or more of those individuals served by a for-profit provider would need to have been enrolled in Medicaid. In the event a provider had more than one service location, the threshold would apply to each location and the payment would be made on a service location basis. In addition, providers would need to meet quality of care standards developed by the Department.

Incentive amounts for providers rendering services to those in managed care plan are based upon the rate that would have been paid to the provider, had the individual not been enrolled in a managed care plan (i.e., incentive payments are based on the fee-for-service reimbursement schedule).

Critical Access dental providers are defined as those which are:

1. Non-profit community clinics that:
 - a. Have nonprofit status in accordance with Minn. Stat. 317A;
 - b. Have tax exempt status in accordance with the Internal Revenue Code, section 501(c)(3);
 - c. Are established to provide oral health services to patients who are low income, uninsured, have special needs, and are underserved;
 - d. Have professional staff familiar with the cultural background of the clinic's patients;
 - e. Charge for services on a sliding fee scale designed to provide assistance to low-income patients based on current poverty income guidelines and family size;
 - f. Do not restrict access or services because of a patient's financial limitations or public assistance status; and
 - g. Have free care available as needed
2. Federally qualified health centers, rural health clinics, and public health clinics;
3. Hospital-based dental clinics owned and operated by a city, county, or former state hospital as defined in Minn. Stat. 62Q.19(1)(a)(4);
4. A dental clinic or dental group owned and operated by a nonprofit corporation in accordance with Minn. Stat. 317A with more than 10,000 patient encounters per year with patients who are uninsured or covered by medical assistance or MinnesotaCare;
5. A dental clinic owned and operated by the University of Minnesota or the Minnesota State Colleges and Universities system; and

6. Private practicing dentists if:

- a. The dentist's office is located within the seven-county metropolitan area and more than 50 percent of the dentist's patient encounters per year are with patients who are uninsured or covered by medical assistance or MinnesotaCare; or
- b. The dentist's office is located outside the seven-county metropolitan area and more than 25 percent of the dentist's patient encounters per year are with patients who are uninsured or covered by medical assistance or MinnesotaCare.



State of Wisconsin
2019 - 2020 LEGISLATURE

LRB-0546(2)
SWB:..
WJ
P1

DOA:.....Ames, BB0025 - Critical access payments to dental providers

FOR 2019-2021 BUDGET -- NOT READY FOR INTRODUCTION

INZ/17

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

Analysis by the Legislative Reference Bureau

HEALTH AND HUMAN SERVICES

MEDICAL ASSISTANCE

~~#1~~ ***Reimbursement to critical access dental providers***

This bill requires DHS to provide enhanced reimbursement payments under the Medical Assistance program to dental providers who meet certain qualifications. Any of the following types of provider may qualify to as a critical access dental provider eligible for enhanced reimbursement: certain non-profit community clinics, federally qualified health centers, rural health centers, or public health clinics, dental clinics or dental groups owned and operated by a nonprofit corporation, dentists in private practice, or a dental clinic owned and operated by the University of Wisconsin School of Medicine and Public Health.

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 non-profit provider must be without dental insurance or enrolled in the Medical Assistance program for the non-profit provider to qualify for enhanced reimbursement, and for-profit providers must have at least five percent of patients enrolled in the Medical Assistance program.

For services rendered by a qualified non-profit critical access dental provider, DHS must increase reimbursement by 50 percent above the reimbursement rate that

would otherwise be 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 based on 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. ^{on the basis of}

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:

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

2 49.45 (24L) REIMBURSEMENT PAYMENTS TO CRITICAL ACCESS DENTAL PROVIDERS. (a)

3 If a provider otherwise meets the standards established under this subsection, any
4 of the following providers may qualify as a critical access dental provider for
5 purposes ^{of} enhanced reimbursement under this subsection:

6 1. A non-profit community clinic that meets all of the following qualifications:

7 a. Is a private ^{nonprofit} organization, as defined ⁱⁿ under s. 108.02 (19),[✓] or a
8 nonprofit corporation, as defined ⁱⁿ under s. 256.01 (12).[✓]

9 b. Is established to provide oral health services to patients who are low income,
10 uninsured, have special needs, and are underserved.

11 c. Has professional staff familiar with the cultural background of the clinic's
12 patients.

13 d. Charges for services on a sliding fee scale designed to provide assistance to
14 low-income patients based on current poverty income guidelines and family size.

15 e. Does not restrict access or services because of a patient's financial limitations
16 or public assistance status.

17 f. Has free care available as needed.

1 2. A federally qualified health center, rural health center, or public health
2 clinic. ✓

****NOTE: Would you want tribal health centers included on the list in 2.? On its website, DHS lists federally qualified health centers, rural health centers, and tribal health centers on its page for "Free or Low Cost Health Clinics."

3 3. A dental clinic or dental group owned and operated by a nonprofit
4 corporation, as defined ⁱⁿ under s. 256.01 (12). ✓

5 4. A dental clinic owned and operated by the University of Wisconsin School of
6 Medicine and Public Health.

7 5. A private practicing dentist.

8 (b) The department shall increase reimbursements to dentists and dental
9 clinics ^{who} who meet the qualifications under this subsection, are determined by the
10 department to be critical access providers, and ^{who} who meet quality of care standards,
11 as established by the department.

12 (c) For dental services rendered on or after January 1, 2020[^], by a qualified
13 non-profit critical access provider, the department shall increase reimbursement by
14 50 percent above the reimbursement rate that would otherwise be paid to that
15 provider. For dental services rendered on or after January 1, 2020[^], by a qualified
16 for-profit critical access provider, the department shall increase reimbursement by
17 30 percent above the reimbursement rate that would otherwise be paid to that
18 provider. For providers rendering services to individuals in managed care under the
19 Medical Assistance program, for services rendered on or after January 1, 2020, the
20 department shall increase reimbursement to pay an additional amount based on the ^{on the}
21 rate that would have been paid to the provider had the individual not been enrolled ^{basis}
22 in managed care. ^{of}

****NOTE: I have included a placeholder date of July 1, 2020[^] for the start of the new reimbursement rates. Please let me know if you would like the date changed.

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

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

6 1. For a non-profit provider, 50 percent or more of the individuals served by the
7 provider are individuals who have been without dental insurance or enrolled in the
8 Medical Assistance program.

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

11 (END)



State of Wisconsin
2019 - 2020 LEGISLATURE

LRB-0546/P1
SWB:wlj

l
↓
P2
RMR

DOA:.....Ames, BB0025 - Critical access payments to dental providers

FOR 2019-2021 BUDGET -- NOT READY FOR INTRODUCTION

IN 2/19

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

Analysis by the Legislative Reference Bureau

HEALTH AND HUMAN SERVICES

MEDICAL ASSISTANCE

1. Reimbursement to critical access dental providers

This bill requires DHS to provide enhanced reimbursement payments under the Medical Assistance program to dental providers who meet certain qualifications. Any of the following types of provider may qualify as a critical access dental provider eligible for enhanced reimbursement: certain nonprofit community clinics, federally qualified health centers, rural health centers, or public health clinics, dental clinics or dental groups owned and operated by a nonprofit corporation, dentists in private practice, or a dental clinic owned and operated by the University of Wisconsin School of Medicine and Public Health.

tribal centers

and operating for profit

make to name

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 provider must be without dental insurance or enrolled in the Medical Assistance program for the nonprofit 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:

- 1 **SECTION 1.** 49.45 (24L) of the statutes is created to read:
- 2 49.45 (24L) REIMBURSEMENT PAYMENTS TO CRITICAL ACCESS DENTAL PROVIDERS. (a)
- 3 If a provider otherwise meets the standards established under this subsection, any
- 4 of the following providers may qualify as a critical access dental provider for
- 5 purposes of enhanced reimbursement under this subsection:
- 6 1. A nonprofit community clinic that meets all of the following qualifications:
- 7 a. Is a private nonprofit organization, as defined in s. 108.02 (19), or a nonprofit
- 8 corporation, as defined in s. 256.01 (12).
- 9 b. Is established to provide oral health services to patients who are low income,
- 10 uninsured, have special needs, and are underserved.
- 11 c. Has professional staff familiar with the cultural background of the clinic's
- 12 patients.
- 13 d. Charges for services on a sliding fee scale designed to provide assistance to
- 14 low-income patients based on current poverty income guidelines and family size.
- 15 e. Does not restrict access or services because of a patient's financial limitations
- 16 or public assistance status.
- 17 f. Has free care available as needed.

1 2. A federally qualified health center, rural health center, or public health
 2 clinic or tribal health center

***NOTE: Would you want tribal health centers included on the list in 2.? On its website, DHS lists federally qualified health centers, rural health centers, and tribal health centers on its page for "Free or Low Cost Health Clinics."

3 3. A dental clinic or dental group owned and operated by a nonprofit
 4 corporation, as defined in s. 256.01 (12).

5 ^{5.} A private practicing dentist A dentist in private practice, ^{and} operating for profit.

6 ^{4.} A dental clinic owned and operated by the University of Wisconsin School of
 7 Medicine and Public Health.

8 (b) The department shall increase reimbursements to dentists who and dental
 9 clinics that meet the qualifications under this subsection, are determined by the
 10 department to be critical access providers, ^{and (c) that} and meet quality of care standards, as
 11 established by the department.

INS
3-11

12 ^(c) For dental services rendered on or after January 1, 2020, by a qualified
 13 nonprofit critical access ^{dental} provider, the department shall increase reimbursement by
 14 50 percent above the reimbursement rate that would otherwise be paid to that
 15 provider. For dental services rendered on or after January 1, 2020, by a qualified
 16 for-profit critical access ^{dental} provider, the department shall increase reimbursement by
 17 30 percent above the reimbursement rate that would otherwise be paid to that
 18 provider. For ^{dental} providers rendering services to individuals in managed care under the
 19 Medical Assistance program, for services rendered on or after January 1, 2020, the
 20 department shall increase reimbursement to pay an additional amount on the basis
 21 of the rate that would have been paid to the ^{dental} provider had the individual not been
 22 enrolled in managed care.

***NOTE: I have included a placeholder date of July 1, 2020, for the start of the new reimbursement rates. Please let me know if you would like the date changed.

1 ^(e)
2 ~~(d)~~ If a provider has more than one service location, the thresholds described
3 under par. (c) apply to each location, and payment for each service location would be
4 determined separately.

5 ^(c)
6 ~~(e)~~ In order to be eligible for enhanced reimbursement under this subsection,
7 the provider must meet one of the following qualifications:

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

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

(END)

↓
make to
INS
3-11

Walkenhorst Barber, Sarah

From: Ames, Kyle - DOA
Sent: Tuesday, February 19, 2019 3:48 PM
To: Walkenhorst Barber, Sarah
Subject: -0546/P1

Sarah:

First note: Please include tribal health centers in this list.

Second note: Please use January 1, 2020 as the start date for these reimbursements.

Please provide language that defines the private practicing dentists. The intent is to exclude private practices owned by nonprofit entities.

Also, the intent of this draft is to provide reimbursement increases for nonprofit dental providers and for-profit dental providers. The intent is not to provide reimbursement for FQHCs.

Please let us know if you have any questions.

Best,
Kyle



KYLE AMES | Executive Budget and Policy Analyst
Department of Administration
Division of Executive Budget and Finance
Kyle.Ames@wisconsin.gov
Main: (608) 266-2214 |

Walkenhorst Barber, Sarah

From: Ames, Kyle - DOA
Sent: Wednesday, February 20, 2019 1:40 PM
To: Walkenhorst Barber, Sarah
Cc: Dombrowski, Cynthia A - DOA
Subject: 0546/P2

Sarah:

- Please change the title to read:
 - CRITICAL ACCESS REIMBURSEMENT PAYMENTS TO ~~CRITICAL ACCESS~~ DENTAL PROVIDERS
- Delete paragraph (a) entirely
- Please edit paragraph b (now par. a) to read:
 - The department shall increase reimbursements to dental providers ~~that the department determines are critical access dental providers~~ based on the criteria in pars. ~~(a) and (b) and (c)~~ and that meet quality of care standards, as established by the department.
- Please amend the text in (c)(1) to read:
 - 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.

I think this is the last one. Thank you so much for the quick turnaround with these.

Best,
Kyle



State of Wisconsin
2019 - 2020 LEGISLATURE

LRB-0546/P2

SWB:wlj

Handwritten notes: *2/1/20*, *1/P3*, *RMR*

DOA:.....Ames, BB0025 - Critical access payments to dental providers

FOR 2019-2021 BUDGET -- NOT READY FOR INTRODUCTION

IN 2/20

Italics
Critical access reimbursement payments to dental providers

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

Analysis by the Legislative Reference Bureau

HEALTH AND HUMAN SERVICES

MEDICAL ASSISTANCE

1. Reimbursement to critical access dental providers

This bill requires DHS to provide enhanced reimbursement payments under the Medical Assistance program to dental providers who meet certain qualifications.

Any of the following types of provider may qualify as a critical access dental provider eligible for enhanced reimbursement: certain nonprofit community clinics, rural health centers, or tribal health centers, dental clinics or dental groups owned and operated by a nonprofit corporation, a dental clinic owned and operated by the University of Wisconsin School of Medicine and Public Health, or dentists in private practice and operating for profit.

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 provider must be without dental insurance or enrolled in the Medical Assistance program for the nonprofit 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

*

or Public

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:

1 **SECTION 1.** 49.45 (24L) of the statutes is created to read:
2 49.45 (24L) ^{CRITICAL ACCESS} REIMBURSEMENT PAYMENTS TO CRITICAL ACCESS DENTAL PROVIDERS. (a)

3 Any of the following providers may qualify as a critical access dental provider for
4 purposes of enhanced reimbursement under this subsection:

- 5 1. A nonprofit community clinic that meets all of the following qualifications:
- 6 a. Is a private nonprofit organization, as defined in s. 108.02 (19), or a nonprofit
- 7 corporation, as defined in s. 256.01 (12).
- 8 b. Is established to provide oral health services to patients who are low income,
- 9 uninsured, have special needs, and are underserved.
- 10 c. Has professional staff familiar with the cultural background of the clinic's
- 11 patients.
- 12 d. Charges for services on a sliding fee scale designed to provide assistance to
- 13 low-income patients based on current poverty income guidelines and family size.
- 14 e. Does not restrict access or services because of a patient's financial limitations
- 15 or public assistance status.
- 16 f. Has free care available as needed.
- 17 2. A rural health center or tribal health center.

1 3. A dental clinic or dental group owned and operated by a nonprofit
2 corporation, as defined in s. 256.01 (12).

3 4. A dental clinic owned and operated by the University of Wisconsin School of
4 Medicine and Public Health.

5 5. A dentist in private practice and operating for profit.

6 (b) The department shall increase reimbursements to dental providers that the
7 department determines are critical access dental providers based on the criteria in
8 pars. (a) and (c) and that meet quality of care standards, as established by the
9 department.

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

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

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

17 (d) For dental services rendered on or after January 1, 2020, by a qualified
18 nonprofit critical access dental provider, the department shall increase
19 reimbursement by 50 percent above the reimbursement rate that would otherwise
20 be paid to that provider. For dental services rendered on or after January 1, 2020,
21 by a qualified for-profit critical access dental provider, the department shall increase
22 reimbursement by 30 percent above the reimbursement rate that would otherwise
23 be paid to that provider. For dental providers rendering services to individuals in
24 managed care under the Medical Assistance program, for services rendered on or
25 after January 1, 2020, the department shall increase reimbursement to pay an

1 additional amount on the basis of the rate that would have been paid to the dental
2 provider had the individual not been enrolled in managed care.

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

6 (END)



State of Wisconsin
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

1 **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:

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

2 **49.45 (24L) CRITICAL ACCESS REIMBURSEMENT PAYMENTS TO DENTAL PROVIDERS.** (a)
3 Based on the criteria in pars. (b) and (c), the department shall increase
4 reimbursements to dental providers that meet quality of care standards, as
5 established by the department.

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

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

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

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

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

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

7 (END)