

State of Minnesota
HOUSE OF REPRESENTATIVES

EIGHTY-SEVENTH SESSION

H. F. No. 2094

02/08/2012 Authored by Norton and Liebling

The bill was read for the first time and referred to the Committee on Health and Human Services Finance

1.1 A bill for an act
1.2 relating to human services; modifying the Minnesota health care program
1.3 provider requirements for critical access dental provider clinics; amending
1.4 Minnesota Statutes 2011 Supplement, section 256B.76, subdivision 4.

1.5 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MINNESOTA:

1.6 Section 1. Minnesota Statutes 2011 Supplement, section 256B.76, subdivision 4, is
1.7 amended to read:

1.8 Subd. 4. **Critical access dental providers.** (a) Effective for dental services
1.9 rendered on or after January 1, 2002, the commissioner shall increase reimbursements
1.10 to dentists and dental clinics deemed by the commissioner to be critical access dental
1.11 providers. For dental services rendered on or after July 1, 2007, the commissioner shall
1.12 increase reimbursement by 30 percent above the reimbursement rate that would otherwise
1.13 be paid to the critical access dental provider. The commissioner shall pay the managed
1.14 care plans and county-based purchasing plans in amounts sufficient to reflect increased
1.15 reimbursements to critical access dental providers as approved by the commissioner.

1.16 (b) The commissioner shall designate the following dentists and dental clinics as
1.17 critical access dental providers:

1.18 (1) nonprofit community clinics that:

1.19 (i) have nonprofit status in accordance with chapter 317A;

1.20 (ii) have tax exempt status in accordance with the Internal Revenue Code, section
1.21 501(c)(3);

1.22 (iii) are established to provide oral health services to patients who are low income,
1.23 uninsured, have special needs, and are underserved;

(iv) have professional staff familiar with the cultural background of the clinic's patients;

(v) 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;

(vi) do not restrict access or services because of a patient's financial limitations or public assistance status; and

(vii) have free care available as needed;

(2) federally qualified health centers, rural health clinics, and public health clinics;

(3) county owned and operated hospital-based dental clinics;

(4) a dental clinic or dental group owned and operated by a nonprofit corporation in accordance with chapter 317A with more than 10,000 patient encounters per year with patients who are uninsured or covered by medical assistance, general assistance medical care, or MinnesotaCare; and

(5) a dental clinic owned and operated by the University of Minnesota or the Minnesota State Colleges and Universities system.

(c) The commissioner may designate a dentist or dental clinic as a critical access dental provider if the dentist or dental clinic is willing to provide care to patients covered by medical assistance, general assistance medical care, or MinnesotaCare at a level which significantly increases access to dental care in the service area.

~~(d) Notwithstanding paragraph (a), critical access payments must not be made for dental services provided from April 1, 2010, through June 30, 2010.~~ A dental clinic that has been designated by the commissioner as a critical access dental provider under this subdivision may use the director's provider identification number when submitting a claim for services rendered by a volunteer provider if the following requirements are met:

(1) the dental director of the clinic or program is enrolled and has an active Minnesota health care program provider number;

(2) the billed services are performed by a volunteer or team of volunteers who are licensed and in good standing under chapter 150A;

(3) the clinic maintains dental records for each claim submitted that include the names, license numbers, and signatures of the volunteer dental professionals rendering each service; and

(4) all services billed under the clinic director's provider identification number are performed under the direction of the clinic or program's dental director.