

SENATE
STATE OF MINNESOTA
NINETY-SECOND SESSION

S.F. No. 2402

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04/12/2021	2266	Introduction and first reading Referred to Health and Human Services Finance and Policy
04/22/2021	3042	Author added Jasinski
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- 1.1 A bill for an act
- 1.2 relating to human services; increasing reimbursement for critical access dental
- 1.3 providers; amending Minnesota Statutes 2020, section 256B.76, subdivision 4.
- 1.4 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MINNESOTA:
- 1.5 Section 1. Minnesota Statutes 2020, section 256B.76, subdivision 4, is amended to read:
- 1.6 Subd. 4. **Critical access dental providers.** (a) The commissioner shall increase
- 1.7 reimbursements to dentists and dental clinics deemed by the commissioner to be critical
- 1.8 access dental providers. For dental services rendered on or after July 1, 2016, the
- 1.9 commissioner shall increase reimbursement by ~~37.5~~ 50 percent above the reimbursement
- 1.10 rate that would otherwise be paid to the critical access dental provider, except as specified
- 1.11 under paragraph (b). The commissioner shall pay the managed care plans and county-based
- 1.12 purchasing plans in amounts sufficient to reflect increased reimbursements to critical access
- 1.13 dental providers as approved by the commissioner.
- 1.14 (b) For dental services rendered on or after July 1, 2016, by a dental clinic or dental
- 1.15 group that meets the critical access dental provider designation under paragraph (d), clause
- 1.16 (4), and is owned and operated by a health maintenance organization licensed under chapter
- 1.17 62D, the commissioner shall increase reimbursement by 35 percent above the reimbursement
- 1.18 rate that would otherwise be paid to the critical access provider.
- 1.19 (c) Critical access dental payments made under paragraph (a) or (b) for dental services
- 1.20 provided by a critical access dental provider to an enrollee of a managed care plan or
- 1.21 county-based purchasing plan must not reflect any capitated payments or cost-based payments
- 1.22 from the managed care plan or county-based purchasing plan. The managed care plan or
- 1.23 county-based purchasing plan must base the additional critical access dental payment on

the amount that would have been paid for that service had the dental provider been paid according to the managed care plan or county-based purchasing plan's fee schedule that applies to dental providers that are not paid under a capitated payment or cost-based payment.

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

(1) nonprofit community clinics that:

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

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

(iii) are established to provide oral health services to patients who are low income, 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) hospital-based dental clinics owned and operated by a city, county, or former state hospital as defined in section 62Q.19, subdivision 1, paragraph (a), clause (4);

(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 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:

(i) 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

- 3.1 (ii) the dentist's office is located outside the seven-county metropolitan area and more
- 3.2 than 25 percent of the dentist's patient encounters per year are with patients who are uninsured
- 3.3 or covered by medical assistance or MinnesotaCare.