

SENATE

STATE OF MINNESOTA

EIGHTY-NINTH SESSION

S.F. No. 2901

(SENATE AUTHORS: ROSEN, Lourey, Abeler, Hayden and Jensen)

DATE	D-PG	OFFICIAL STATUS
03/17/2016	5112	Introduction and first reading Referred to Health, Human Services and Housing
03/29/2016	5325	Author stricken Sheran Author added Jensen
03/30/2016	5331	Comm report: To pass and re-referred to Finance

A bill for an act  
relating to health care; modifying the critical access dental provider designation  
requirements; amending Minnesota Statutes 2015 Supplement, section 256B.76,  
subdivision 4.

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

Section 1. Minnesota Statutes 2015 Supplement, section 256B.76, subdivision 4, is  
amended to read:

Subd. 4. **Critical access dental providers.** (a) Effective for dental services  
rendered on or after January 1, 2002, the commissioner shall increase reimbursements  
to dentists and dental clinics deemed by the commissioner to be critical access dental  
providers. For dental services rendered on or after July 1, 2007, the commissioner shall  
increase reimbursement by 35 percent above the reimbursement rate that would otherwise  
be paid to the critical access dental provider. The commissioner shall pay the managed  
care plans and county-based purchasing plans in amounts sufficient to reflect increased  
reimbursements to critical access dental providers as approved by the commissioner.

(b) 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) ~~city or county~~ hospital-based dental clinics owned and operated ~~hospital-based dental clinics~~ 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~~ health system, group dental practice, or health plan company with more than ~~10,000~~ 50 percent of the clinic or dental groups' 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 a ~~health professional shortage area as defined under Code of Federal Regulations, title 42, part 5, and United States Code, title 42, section 254E;~~

~~(ii) more~~ 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; ~~and~~ or

~~(iii) the level of service provided by the dentist is critical to maintaining adequate levels of patient access within the service area in which the dentist operates.~~

(ii) 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.