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State/Territory Name: MN

State Plan Amendment (SPA) #: 15-0021

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) CMS 179 Form/Summary Form (with 179-like data)
- 3) Approved SPA Pages

Department of Health & Human Services Centers for Medicare & Medicaid Services 233 North Michigan Avenue, Suite 600 Chicago, Illinois 60601-5519



May 2, 2016

Marie Zimmerman, State Medicaid Director Minnesota Department of Human Services P.O. Box 64983 St. Paul, MN 55164-0983

Dear Ms. Zimmerman:

Enclosed for your records is an approved copy of the following State Plan Amendment:

Transmittal #15-0021

-- Revises the criteria for participation in the critical access dental program, and increases payment rates for dental providers located outside of the Twin Cities metro area.

-- Effective Date: July 1, 2015

If you have any additional questions, please have a member of your staff contact Sandra Porter at (312) 353-8310 or via e-mail at Sandra.Porter@cms.hhs.gov.

Sincerely,

/s/

Ruth A. Hughes Associate Regional Administrator Division of Medicaid and Children's Health Operations

Enclosures

cc:

Ann Berg, MDHS Sean Barrett, MDHS STATE: MINNESOTA ATTACHMENT 3.1-A Page 40d

Effective: July 1, 2015

TN: 15-21

Approved: 5/2/16

Supersedes: 13-12 (11-15,10-14b,10-14a,10-04,08-13,06-14,06-05,03-37,03-24)

Dental services. (continued)

e) have a sliding fee scale based on current federal poverty income guidelines;

- f) do not restrict access or services because of a patient's financial limitations or public assistance status; and
- q) have free care available as needed.
- 2) Public health clinics;
- 3) A dental clinic or group owned and operated by a nonprofit corporation with more than 10,000 patient encounters per year with patients who are uninsured or covered by medical assistance or MinnesotaCare;
- 4) Dental clinics owned and operated by the University of Minnesota or the Minnesota State Colleges and Universities system;
- 5) County or city owned and operated hospital-based dental clinics; and
- 6) Private practicing dentists if:
 - a) 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;
 - b) 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;
 - c) the dentist does not restrict access or services because of a patient's financial limitations or public assistance status; and
 - d) 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.

STATE: MINNESOTA ATTACHMENT 3.1-B Page 39d

Effective: July 1, 2015

TN: 15-21

Approved: 5/2/16

Supersedes: 13-12 (11-15,10-14b,10-14a,10-04,08-13,06-14,06-05,03-37,03-24)

Dental services. (continued)

e) have a sliding fee scale based on current federal poverty income guidelines;

- f) do not restrict access or services because of a patient's financial limitations or public assistance status; and
- q) have free care available as needed.
- 2) Public health clinics;
- 3) A dental clinic or group owned and operated by a nonprofit corporation with more than 10,000 patient encounters per year with patients who are uninsured or covered by medical assistance or MinnesotaCare;
- 4) Dental clinics owned and operated by the University of Minnesota or the Minnesota State Colleges and Universities system;
- 5) County or city owned and operated hospital-based dental clinics; and
- 6) Private practicing dentists if:
 - a) 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;
 - b) 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;
 - c) the dentist does not restrict access or services because of a patient's financial limitations or public assistance status; and
 - d) 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.

STATE: MINNESOTA ATTACHMENT 4.19-B Page 31c

Effective: July 1, 2015

TN: 15-21

Approved: 5/2/16

Supersedes: 13-23 (12-25,11-19,11-15,10-24,07-12,07-18,06-14,04-15a,03-37)

Dental services (continued):

X-ray services are paid according to the dental services methodology listed above. Effective January 1, 2002, payment for x-ray services provided to recipients under age 21 are paid the lower of:

- 1) the submitted charge; or
- 2) 85% of the median charges submitted in 1999.

Diagnostic examinations are paid according to the dental services methodology listed above. Effective January 1, 2002, payment for diagnostic examinations provided to recipients under age 21 are paid the lower of:

- 1) the submitted charge; or
- 2) 85% of the median charges submitted in 1999.

Effective for services provided on or after October 1, 1999, tooth sealants and fluoride treatments are paid at the lower of:

- 1) submitted charge; or
- 2) 80% of the median charges submitted in 1997.

Effective January 1, 2000, the rate is increased by three percent.

Medical and surgical services (as defined by the Department) furnished by dentists are paid using the same methodology as item 5.a., Physicians' services.

Community health worker services educating patients to promote good oral health and self-management of dental conditions when supervised by a dentist are paid using the same methodology that applies to community health workers in item 5.a., Physicians' services.

The base rates as described in this item are adjusted by the following clauses of Supplement 2 of this Attachment:

- X. Dental Services rate decrease 2011 (does not apply to state operated dental clinics)
- cc. Supplemental payment for medical education
- dd. Dental Services rate increase 2014
- ii. Dental Services rate increase 2015

STATE: MINNESOTA Supplement 2 to ATTACHMENT 4.19-B

Effective: July 1, 2015 Page 16

TN: 15-21

Approved: 5/2/16 Supersedes: NEW

ii. Dental Services rate increase 2015

Effective for dental services provided by dental providers located outside of the seven-county metropolitan area on or after July 1, 2015, payment rates shall be increased by 9.65 percent from the rates in effect on June 30, 2015. This increase does not apply to state-operated dental clinics, federally qualified health centers, rural health centers, Indian Health Service, and tribal 638 facilities.