

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State/Territory: MINNESOTA

METHODS AND STANDARDS FOR ESTABLISHING PAYMENT RATES -  
OTHER TYPES OF CARE

Payment of Medicare Part A and Part B Deductible/Coinsurance

---

**Item A. Nursing Facility Payment, Part A Coinsurance**

Medicaid payment is the lesser of the actual coinsurance amount or the amount by which the Medicaid State plan case mix payment rate exceeds the Medicare rate less the coinsurance amount.

**Item B. Part B Coinsurance and Deductibles**

Medicaid Payment is the Medicare allowed amount for the following services:

- Mental health services, except for psychiatrist services and advanced practice nurse services.
- Dialysis for end stage renal disease.
- Durable medical equipment subject to the Medicare Durable Medical Equipment Prosthetics/Orthotics and Supplies (DMEPOS) competitive bidding program.
- Services provided by a federally qualified health center, Indian Health Service (IHS) facilities and tribal providers operating under 638 agreements, or a rural health clinic.

TN No. 19-08

Supersedes

Approval Date: 11/5/19

Effective Date: 7/1/2019

TN No. 16-03 (13-37,13-24, 12-02, 03-21)