

CHAPTER 261

(House Bill 660)

AN ACT concerning

Medical Assistance Program - Federally Qualified Health Centers

FOR the purpose of ~~specifying a certain time and methodology for the Department of Health and Mental Hygiene and a federally qualified health center to determine certain costs of the center~~ requiring the Department of Health and Mental Hygiene, in consultation with the Federally Qualified Health Centers, to establish in regulation as a prospective rate the reasonable cost to a federally qualified health center in providing services to enrollees under the State Medical Assistance Program; requiring certain federally qualified health centers to provide the Department of Health and Mental Hygiene with certain data and reports to assist the Department in making a certain calculation; authorizing a certain federally qualified health center at certain times to make a request for the Department to review certain payments made to the center; establishing the effective date for certain adjustments; requiring the Department, in consultation with certain other groups, to undertake a certain study and submit a certain report to certain persons by a certain date; making certain provisions of this Act subject to a certain contingency; and generally relating to federally qualified health centers under the State Medical Assistance Program.

BY repealing and reenacting, with amendments,

Article - Health - General

Section 15-103(e)

Annotated Code of Maryland

(1994 Replacement Volume and 1998 Supplement)

BY repealing and reenacting, with amendments,

Article - Health - General

Section 15-103(e)(2)(i)

Annotated Code of Maryland

(1994 Replacement Volume and 1998 Supplement)

(As enacted by Section 1 of this Act)

SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND, That the Laws of Maryland read as follows:

Article - Health - General

15-103.

(e) (1) At least quarterly, the Department shall pay to a federally qualified health center the difference between the payment received by the center from a managed care organization for services provided to enrollees of the managed care organization and, AS DETERMINED IN ACCORDANCE WITH PARAGRAPH (2) OF THIS