On or before September 30, 2019, the Montana Department of Public Health and Human Services will submit the following Medicaid State Plan Amendments for approval to the Centers for Medicare and Medicaid Services.

Effective July 1, 2019, the Federally Qualified Health Centers (FQHC) and Rural Health Clinics (RHC) State Plans will allow providers to elect reimbursement under an Alternative Payment Methodology (APM). The APM requires providers who elect the APM option to send the facility’s most current two complete fiscal year as-filed Medicare cost reports to the Department. The reports are used to calculate the facility-specific APM per visit rate. The update allows FQHC’s and RHC’s the option to be reimbursed their facility-specific baseline Prospective Payment System rate or APM.

The total estimated annual fiscal impact for the FQHC change is $11,354,623; and the total annual fiscal impact for the RHC change is $8,472,295.

We invite your comments and questions postmarked through July 15, 2019. You may direct comments to Mary Eve Kulawik, Medicaid State Plan Amendment and Waiver Coordinator, at (406) 444-2584 or mkulawik@mt.gov; or Director’s Office, PO Box 4210, Helena, MT 59604-4210.