

18. FEDERALLY QUALIFIED HEALTH CENTERS AND RURAL HEALTH CLINICS

Background and History

New York State is served by forty-five Federally Qualified Health Centers and six Rural Health Clinics. Over fifty percent of the Centers operate in New York City. These “safety net providers” have a long history of participation in the Medicaid managed care program. Ten of the FQHCs are affiliated with, or are owners or sponsors of, a Prepaid Health Services Plan (PHSP). During the State’s 1996 Managed Care Organization (MCO) procurement for the managed care program, each Federally Qualified Health Center (FQHC) and Rural Health Clinic (RHC) operating at that time chose to participate as a network provider in at least one MCO.

Consistent with CMS requirements at program start-up, in a county where enrollment in the Medicaid managed care (MMC) program was voluntary, the MCOs were not required to contract with FQHCs. In mandatory counties MCOs were required to contract with FQHCs operating in their service areas. MCOs were allowed to request an exemption to this requirement by documenting adequate capacity and the ability to provide a comparable level of clinical and enabling services to vulnerable populations in lieu of contracting with an FQHC in their service area. MCOs were relieved of the contracting requirement in counties where there was an MCO that was sponsored, owned or operated by a FQHC. Effective with the October 1, 2007 Medicaid managed care/Family Health Plus (MMC/FHPlus) contract amendment, the exemption process was discontinued.

Policy and Program Requirements for Medicaid Managed Care Organizations for the Period October 1, 2007 Forward

In a county where enrollment is voluntary, the MCOs are not required to contract with FQHCs.

In a county where Medicaid enrollment is mandatory and/or the MCO offers a FHPlus product, the MCO must contract with FQHCs operating in that county. MCO Administrators were advised of these changes and provided a CMS-updated list of FQHCs with SDOH correspondence dated February 28, 2008.

The Department may on a case-by-case basis defer the requirement that an MCO contract with FQHCs, if the Department determines there is sufficient access to FQHC services in a county. The Department reserves the right to rescind the deferment at any time should access to FQHC services in the county change.

Managed care MCOs participating in the State’s Medicaid managed care program are not required to contract with FQHC’s whose Scope of Project for their designation is not applicable to New York State’s Medicaid managed care enrollees (e.g., migrant programs) or, if an FQHC (or extension sites) provide(s) limited services or is a part-ti

18. FQHCS AND RURAL HEALTH CLINICS in FHPlus

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