

SB 5859-S - DIGEST

(DIGEST AS ENACTED)

Increases payments for recipients eligible for certain medical assistance programs for services provided by a hospital, to one hundred twenty-five percent of the hospital's fee-for-service rates, when services are provided by a rural hospital that: (1) Was certified by the centers for medicare and medicaid services as a sole community hospital as of January 1, 2013;

(2) Had a level III adult trauma service designation from the department of health as of January 1, 2014;

(3) Had less than one hundred fifty acute care licensed beds in fiscal year 2011; and

(4) Is owned and operated by the state or a political subdivision.