



**Substitute House Bill No. 6646**

**Public Act No. 07-101**

**AN ACT CONCERNING MEDICAID BILLING PRACTICES FOR  
FEDERALLY QUALIFIED HEALTH CENTERS.**

Be it enacted by the Senate and House of Representatives in General Assembly convened:

Section 1. Section 17b-245b of the general statutes is repealed and the following is substituted in lieu thereof (*Effective July 1, 2007*):

The Commissioner of Social Services shall, consistent with federal law, make changes to the cost-based reimbursement methodology in the Medicaid program for federally qualified health centers. To the extent permitted by federal law, the commissioner may reimburse a federally qualified health center under the Medicaid program for multiple medical, behavioral health or dental services provided to an individual during the course of a calendar day, irrespective of the type of service provided. On or before [March 1, 2004] January 1, 2008, the commissioner shall report to the joint standing committees of the General Assembly having cognizance of matters relating to appropriations and the budgets of state agencies and human services on the status of the changes to the cost-based reimbursement methodology.

Approved June 11, 2007