

42 C.F.R. § 405.2462

Payment for RHC and FQHC services.

- (a) Payment to independent RHCs that are authorized to bill under the reasonable cost system. (1) RHCs that are authorized to bill under the reasonable cost system are paid on the basis of an all-inclusive rate, subject to a payment limit per visit determined in paragraph (b) of this section, for each beneficiary visit for covered services. This rate is determined by the Medicare Administration Contractor (MAC), in accordance with this subpart and general instructions issued by CMS.
- (2) The amount payable by the MAC for a visit is determined in accordance with paragraphs (i)(1) and (2) of this section.
- (b) *RHC payment limit per visit.* (1) In establishing limits on payment for rural health clinic services provided by rural health clinics the limit for services provided prior to April 1, 2021:
- (i) In 1988, after March 31, at \$46 per visit; and
- (ii) In a subsequent year (before April 1, 2021), at the limit established for the previous year increased by the percentage increase in the Medicare Economic Index (MEI) (as defined in section 1842(i)(3) of the Act) applicable to primary care services (as defined in section 1842(i)(4) of the Act) furnished as of the first day of that year.
- (2) In establishing limits on payment for rural health services furnished on or after April 1, 2021, by rural health clinics or any rural health clinic that is enrolled on or after January 1, 2021 under section 1866(j) of the Act), the limit for services provided:
- (i) In 2021, after March 31, at \$100 per visit;
- (ii) In 2022, at \$113 per visit;
- (iii) In 2023, at \$126 per visit;
- (iv) In 2024, at \$139 per visit;
- (v) In 2025, at \$152 per visit;
- (vi) In 2026, at \$165 per visit;
- (vii) In 2027, at \$178 per visit; and
- (viii) In 2028, at \$190 per visit.
- (ix) In a subsequent year, at the limit established for the previous year increased by the percentage increase in MEI applicable to primary care services furnished as of the first day of such year.

- (3) In establishing limits on payment for rural health services furnished on or after April 1, 2021, by provider-based rural health clinics as described in section (c)(4) of this part, the limit for services provided:
- (i) In 2021, after March 31, at an amount equal to the greater of:
- (A) For rural health clinics that had an all-inclusive rate established for services furnished in 2020—
- (1) The all-inclusive rate applicable to the rural health clinic for services furnished in 2020, increased by the percentage increase in the MEI applicable to primary care services furnished as of the first day of 2021, or

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