

42 C.F.R. § 417.530

Basis and scope.

This subpart sets forth the principles that CMS follows to determine the amount it pays for services furnished by a cost HMO or CMP to its Medicare enrollees. These principles are based on sections 1861(v) and 1876 of the Act and are, for the most part, the same as those set forth—

This document is only available to subscribers. Please log in or purchase access.

[Purchase Login](#)