

TITLE 1: GOVERNMENT
DIVISION 2: EXECUTIVE BRANCH

§ 20194. Health Care Providers and Services.

(a) It is the policy of the Commonwealth government that when the medical facilities in the Commonwealth Healthcare Corporation are not able to provide adequate diagnostic evaluation or care of a patient's illness, the government is obligated to seek services outside the public health care system for a beneficiary.

(b) The Commonwealth Medicaid Agency will establish policies and procedures in the State Medicaid Plan Amendments for a determination and prior authorization of when services may be provided outside of the Commonwealth Healthcare Corporation.

(c) The Commonwealth Medicaid Agency will establish or utilize an existing Medical Referral Entity to advise on matters pertaining to health and medical care services that are unable to be provided in the Commonwealth. The Medical Referral Entity will review and document in the form and manner required by the Commonwealth Medicaid Agency, the medical necessity for off-island care, why such care is unable to be provided by the Commonwealth Healthcare Corporation or other in-commonwealth provider, and advise and document the specific services authorized for off-island care.

(d) The Commonwealth Medicaid Agency will further determine and adjudge whether the estimated cost of services by an in-commonwealth or out-of-state Provider provides the best value when travel and other costs are considered.

Source: PL 21-28, § 2 (May 22, 2020).

Commission Comment: The Commission numbered this section pursuant to 1 CMC § 3806(a).