

9505.0215 COVERED SERVICES; OUT-OF-STATE PROVIDERS.

Subpart 1. **Out-of-state provider.** For purposes of this part, "out-of-state provider" means a provider who is located outside of Minnesota and outside of the recipient's local trade area.

Subp. 2. **Reimbursement requirements.** A health service provided to a recipient by an out-of-state provider is eligible for medical assistance payment if the service meets the requirements of items A, B, and C.

A. The service must be a covered service as defined in part 9505.0175, subpart 6.

B. The provider must obtain prior authorization if prior authorization is required under Minnesota Statutes, section 256B.0625, subdivision 25, parts 9505.0170 to 9505.0475, or parts 9505.5000 to 9505.5030.

C. The service must meet one of the following conditions:

(1) the department determines, on the basis of medical advice from a consultant as defined in part 9505.5005, subpart 3, that the service is not available in Minnesota or the recipient's local trade area;

(2) the service is in response to an emergency; or

(3) the service is needed because the recipient's health would be endangered if the recipient was required to return to Minnesota.

Subp. 3. **Inapplicability when recipient not out-of-state.** The requirements in subpart 2, item C, do not apply when, at the time of service, the recipient is located within Minnesota or the recipient's local trade area.

Statutory Authority: *MS s 256B.04*

History: *12 SR 624; 17 SR 3047; 36 SR 10*

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