254B.121 RATE METHODOLOGY; SUBSTANCE USE DISORDER TREATMENT SERVICES WITH MEDICATIONS FOR OPIOID USE DISORDER.

Subdivision 1. **Rates established.** Notwithstanding sections 254B.03, subdivision 9, paragraph (a), clause (2); 254B.05, subdivision 5, paragraph (a); and 254B.12, subdivision 1, the commissioner shall use the rates in this section for substance use disorder treatment services with medications for opioid use disorder.

Subd. 2. **Rate updates.** Effective each January 1, the commissioner must update the rates for substance use disorder treatment services with medications for opioid use disorder that are licensed according to sections 245G.01 to 245G.17 and 245G.22, or applicable Tribal license, to equal the corresponding Minnesota-specific, locality-adjusted Medicare rates for the same or comparable services in the calendar year in which the services are provided. This rate does not apply to federally qualified health centers, rural health centers, Indian health services, and certified community behavioral health centers.

Subd. 3. **Nondrug weekly bundle annual limit.** No more than 30 weekly nondrug bundle charges are eligible for coverage in the first calendar year that an enrollee is being treated by an opioid treatment provider and no more than 15 weekly nondrug bundle charges are eligible for coverage in subsequent calendar years. The commissioner may override the coverage limitation on the number of weekly nondrug bundle charges for an enrollee if the provider obtains authorization to exceed the limit and documents the medical necessity, services to be provided, and rationale for requiring the enrollee to report to the provider's facility for a face-to-face encounter more frequently.

History: *2023 c 61 art 4 s 11*

NOTE: This section, as added by Laws 2023, chapter 61, article 4, section 11, is effective upon federal approval. The commissioner shall notify the revisor of statutes when federal approval is obtained. Laws 2023, chapter 61, article 4, section 11, the effective date.