

Subject Substance use disorder treatment policies

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Overview

This bill modifies medical claim filing timelines, adds requirements for recovery community organization client transfers upon program closure, clarifies the timeline for a provider to complete a mental health diagnostic assessment, and specifies the county of financial responsibility for withdrawal management services.

Summary

Section	Description
1	Claims filing. Amends § 62Q.75, subd. 3. Modifies timelines for filing medical claims after recoupment, under specified circumstances. Allows the six-month timeline for submission of claims to be extended an additional six months if a health plan company or third-party administrator makes any adjustment or recoupment of payment.
2	Licensure or certification required. Amends § 254B.05, subd. 1. Requires recovery community organizations to follow statutory requirements for the transfer of clients and records upon program closure, to be eligible vendors of substance use disorder treatment services.
3	Rate requirements. Amends § 254B.05, subd. 5. Specifies that the requirement to complete a mental health diagnostic assessment within ten days of admission for certain clients excludes weekends and holidays.
4	Withdrawal management services. Proposes coding for § 256G.061. Specifies the county of financial responsibility for purposes of withdrawal management.



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