



Substance Use Disorder Treatment Implementation Plans

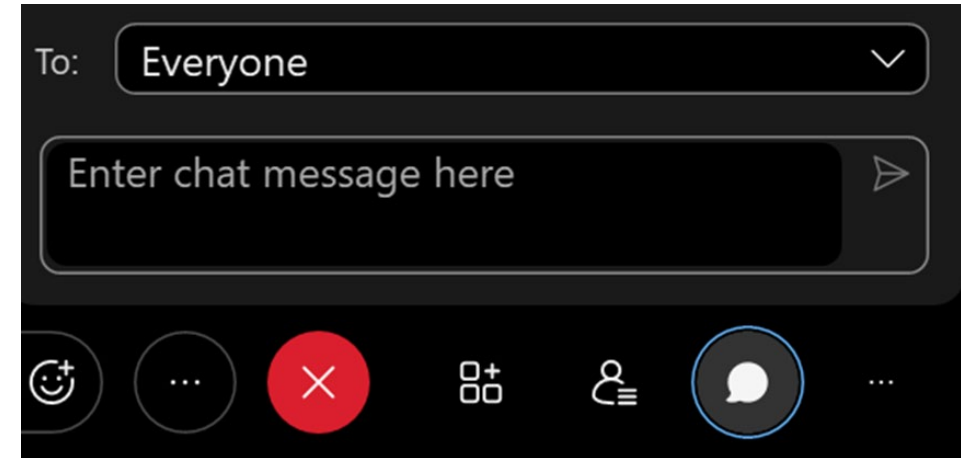
Licensing Division | Behavioral Health Division

Meeting Logistics

- All attendees, except presenters, will remain muted
- Questions submitted via chat will be addressed during Q&A portion of meeting
- Post chat questions to everyone to allow for all attendees to see conversation
- Refrain from using chat during presentations to decrease distractions and side conversations
- To save bandwidth, please keep cameras off
- We will work to address all questions during the time allotted. If there are more questions than can be addressed or if the responses need further research, those responses will be posted on the meeting webpage.

Getting Connected

1. Submit questions in the Chat
2. DHS staff will address questions during the Q&A in the order they are received.
3. A summary of questions, comments and responses will be posted on the Thursday Connections with SUD webpage within two weeks of the meeting date.



Use chat feature to enter questions

Introductions

- Paula Halverson, DHS Licensing MH/SUD/CRF Unit Manager
- Amelia Fink, DHS Behavioral Health Division, SUD Clinical Policy Supervisor
- Amy Anderson, DHS Behavioral Health Division, Human Services Program Consultant
- Keith Koegler, DHS Licensing, Policy Analyst
- Nathaniel Dyess, DHS Behavioral Health Division, SUD Reform and Redesign Team Supervisor
- Mark Berven, DHS Behavioral Health Division, SUD Reform and Redesign Team Operations Lead

Substance use disorder treatment programs: Changes to licensing requirements

Overview and explanation of the contents of the implementation plan at this link:

[Substance Use Disorder Treatment Programs: 2023 legislative changes and program implementation](#)

Withdrawal management and detoxification programs: Changes to licensing requirements

Overview and explanation of the contents of the implementation plan at this link:

[Withdrawal Management and Detoxification Programs: 2023 Legislative changes and program implementation](#)

Changes to children's residential SUD treatment licensing requirements

Overview and explanation of the contents of the implementation plan at this link:

[Children's Residential Facilities: 2023 Legislative changes and program implementation](#)

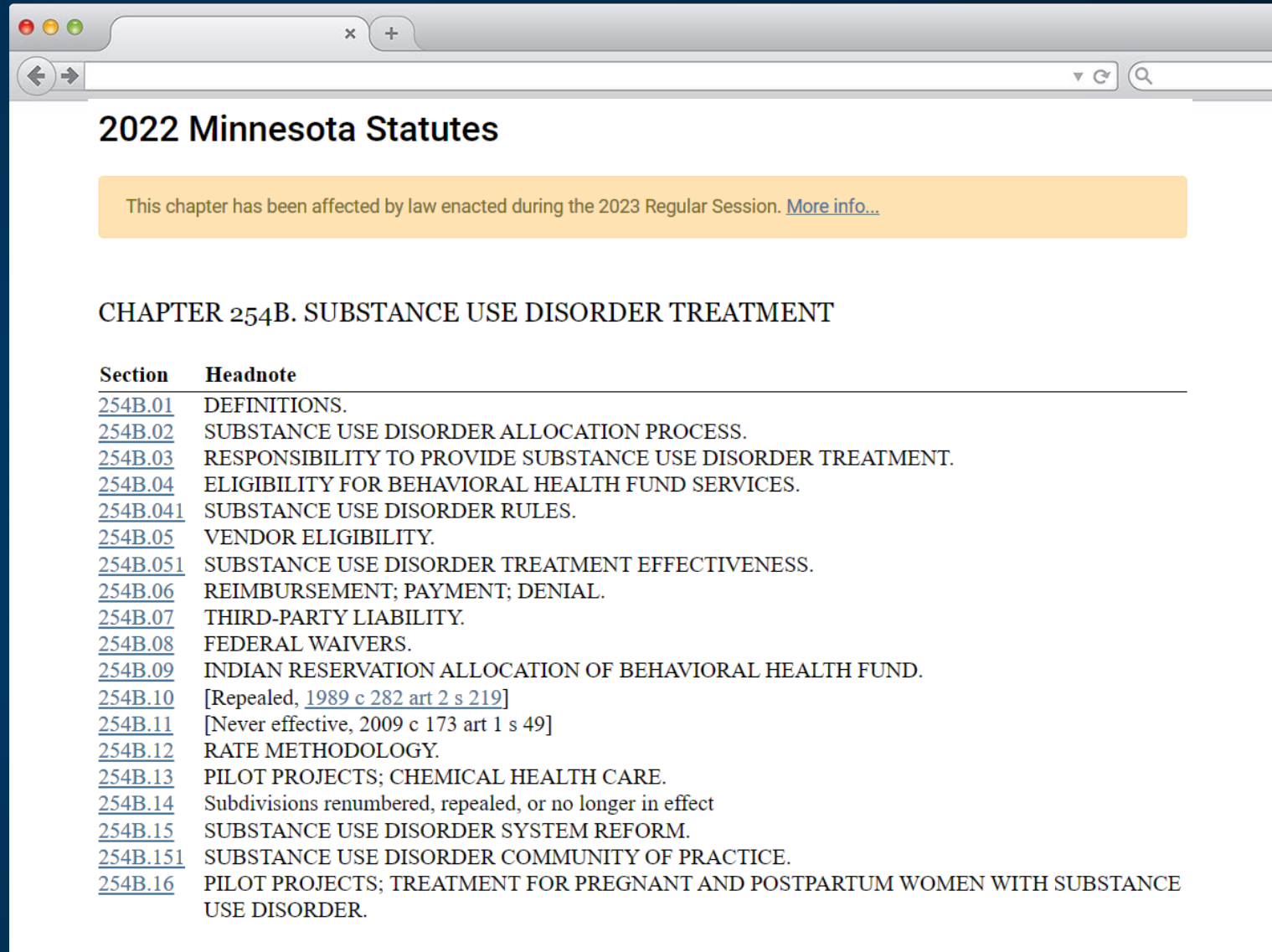
Direct Access Webpage

The screenshot shows the 'Direct Access' webpage. At the top, there is a navigation bar with 'People we serve', 'Partners and providers', 'General public', and 'Media'. A 'How do I' button is in the top right. Below the navigation bar is a breadcrumb trail: Home > Partners and providers > News, initiatives, reports, work groups > Alcohol, drug and other addictions > Direct Access. The main content area has a left sidebar under the heading 'Partners and providers' with links for Program overviews, Policies and procedures, Enroll with MHCP, eDocs library of forms and documents, News, initiatives, reports, work groups, Training and conferences, Contact us, Grants and RFPs, Licensing, and IT systems and supports. The main content area has a heading 'Direct Access' followed by a paragraph: 'Direct Access allows an individual to go directly to a provider they choose to receive a comprehensive assessment and access care immediately. Direct Access removes barriers of timing associated with going through a placing authority, allows for individual choice, and removes duplication of comprehensive assessments.' Below this is a section 'News and Current Reminders' with a bulleted list: 'Counties and tribes please accept the Behavioral Health Fund Request for Behavioral Health Fund eligibility determination.', 'The limitation of two billable comprehensive assessments within a six-month period has been removed.', 'Please add Thursday Connections with SUD at DHS to your calendars the 3rd Thursday of every month for updates from the Substance Use Disorder unit of the Behavioral Health Division.', and 'DHS e-memos'. The next section is 'Legislative' with a paragraph: 'Below are side-by-side comparisons of SUD-related statutory language passed in the 2023 legislative session structured by chapter or topic.' followed by a bulleted list of links: Minnesota Statutes 245F, Minnesota Statutes 245G, Minnesota Statutes 254B, Minnesota Statutes 245I, Direct Access changes, Opioid related, and Sober Homes.

- [Minnesota Statutes 245F](#)
- [Minnesota Statutes 245G](#)
- [Minnesota Statutes 254B](#)
- [Minnesota Statutes 245I](#)
- [Direct Access changes](#)
- [Opioid related](#)
- [Sober Homes](#)

254B Substance Use Disorder Treatment

- Changes in 9 of the current sections
- 254B.041 -Repealed
- Added Sections
 - 254B.121 - Rate Methodology: MOUD
 - 245B.17 – WDM Grants
 - 254B.18 – Safe Recovery Site Grants
 - 254B.181 – Sober Homes
 - 254B.19 – ASAM Standards of Care
 - 254B.191 – Evidence Based Training



2022 Minnesota Statutes

This chapter has been affected by law enacted during the 2023 Regular Session. [More info...](#)

CHAPTER 254B. SUBSTANCE USE DISORDER TREATMENT

Section	Headnote
254B.01	DEFINITIONS.
254B.02	SUBSTANCE USE DISORDER ALLOCATION PROCESS.
254B.03	RESPONSIBILITY TO PROVIDE SUBSTANCE USE DISORDER TREATMENT.
254B.04	ELIGIBILITY FOR BEHAVIORAL HEALTH FUND SERVICES.
254B.041	SUBSTANCE USE DISORDER RULES.
254B.05	VENDOR ELIGIBILITY.
254B.051	SUBSTANCE USE DISORDER TREATMENT EFFECTIVENESS.
254B.06	REIMBURSEMENT; PAYMENT; DENIAL.
254B.07	THIRD-PARTY LIABILITY.
254B.08	FEDERAL WAIVERS.
254B.09	INDIAN RESERVATION ALLOCATION OF BEHAVIORAL HEALTH FUND.
254B.10	[Repealed, 1989 c 282 art 2 s 219]
254B.11	[Never effective, 2009 c 173 art 1 s 49]
254B.12	RATE METHODOLOGY.
254B.13	PILOT PROJECTS; CHEMICAL HEALTH CARE.
254B.14	Subdivisions renumbered, repealed, or no longer in effect
254B.15	SUBSTANCE USE DISORDER SYSTEM REFORM.
254B.151	SUBSTANCE USE DISORDER COMMUNITY OF PRACTICE.
254B.16	PILOT PROJECTS; TREATMENT FOR PREGNANT AND POSTPARTUM WOMEN WITH SUBSTANCE USE DISORDER.

254B.01 Definitions - Effective 8/1/23

• Added Definitions

- American Society of Addiction Medicine criteria or ASAM criteria
- *Behavioral Health Fund*
- *Client*
- *Co-Payment*
- *Department*
- *Drug and Alcohol Abuse Normative Evaluation System or DAANES*
- *Minor child*
- *Policyholder*

• Added Definitions Cont.

- *Responsible relative*
- Skilled treatment services
- *Third Party payment source*
- *Vendor*

• Revised Definitions

- Local Agency
- Recovery Community Organization

245B.02 and 254B.03 – Effective 8/1/23

- 254B.02 Subd. 5 - **Local agency allocation**
 - The commissioner may make payments to local agencies from money allocated under this section to support individuals with substance use disorders. The payment must not be less than 133 percent of the local agency payment for the fiscal year ending June 30, 2009, adjusted in proportion to the statewide change in the appropriation for this chapter.
- 254B.03 Subd. 1 (a) (c) (d) – **Local agency duties**
 - (a) Every local agency must determine financial eligibility for substance use disorder services and provide substance use disorder services to persons residing within its jurisdiction who meet criteria established by the commissioner. Substance use disorder money must be administered by the local agencies according to law and rules adopted by the commissioner under sections 14.001 to 14.69.
 - (c) and (d) remove Rule 25 references
- 254B.03 Subd. 2 - **Behavioral Health Fund Payment**
 - (b) removed
- 254B.03 Subd. 5 - **Rules; appeal**
 - The commissioner shall adopt rules as necessary to implement this chapter.

- **Subd. 1** - Scope and Applicability (revised)
- **Subd. 1a** – *Client Eligibility*
- **Subd. 2a** – Eligibility for room and board services for persons in outpatient substance use disorder treatment (revised)
- **Subd. 2b and 2c** – Repealed
- **Subd. 4** - Assessment criteria and risk descriptions
- **Subd. 5** – *Local agency responsibility to provide services*
- **Subd. 6** – *Local agency to determine client financial eligibility*
- **Subd. 7** – *Client Fees*
- **Subd. 8** – *Vendor must participate in DAANES system*

245B.04
Effective
8/1/2023

Eligibility for Behavioral Health Fund Services

Includes
additions
from *Rule 24*
and ASAM
additions

- **Subd. 1 - Scope and Applicability (revised)**
 - **Scope and applicability.** This section governs the administration of the behavioral health fund, establishes the criteria to be applied by local agencies to determine a client's financial eligibility under the behavioral health fund, and determines a client's obligation to pay for substance use disorder treatment services.
- **Subd. 2a – Eligibility for room and board services for persons in outpatient (revised)**
 - **Eligibility for room and board services for persons in outpatient substance use disorder treatment.** A person eligible for room and board services under section 254B.05, subdivision 5, paragraph (b), clause (12), must score at level 4 on assessment dimensions related to readiness to change, relapse, continued use, or recovery environment in order to be assigned to services with a room and board component reimbursed under this section. Whether a treatment facility has been designated an institution for mental diseases under United States Code, title 42, section 1396d, shall not be a factor in making placements.
- **Subd. 4 - Assessment criteria and risk descriptions**
 - **Assessment criteria and risk descriptions.** (a) The level of care determination must follow criteria approved by the commissioner.
 - Describes ASAM Dimensions 1-6

- **Subd. 1 – License Required**
 - (c) Counties can be an eligible vendor of peer services
 - (d) provides additional guidance for RCO's
 - (f) Hospital, federally qualified health centers and rural health clinics are eligible vendors of comprehensive assessment
- **Subd.1A – Room and board provider requirements**
 - Changes in 24-hour staffing requirements
 - Some children's residential services are eligible vendors
- **Subd. 5 – Rate Requirements**
 - Adds ASAM levels of care
 - Removes 5/15/30 hour requirements for residential treatment programs
 - Changes payment to date of service initiation

254B.05
Multiple
Effective
Dates

**Vendor
Eligibility**

Expand access
assessments,
RCO's, Rate
requirements
related to ASAM

245B.05 Subd. 5 (b) Rate Requirements

(b) Eligible substance use disorder treatment services include: those licensed, as applicable, according to chapter 245G or applicable Tribal license and provided according to the following ASAM levels of care:

- (i) ASAM level 0.5 early intervention services provided according to section 254B.19, subdivision 1, clause (1)
- (ii) ASAM level 1.0 outpatient services provided according to section 254B.19, subdivision 1, clause (2);
- (iii) ASAM level 2.1 intensive outpatient services provided according to section 254B.19, subdivision 1, clause (3);
- (iv) ASAM level 2.5 partial hospitalization services provided according to section 254B.19, subdivision 1, clause (4);

Effective January 1, 2025, or upon federal approval, whichever is later

- v. ASAM level 3.1 clinically managed low-intensity residential services provided according to section 254B.19, subdivision 1, clause (5);
- vi. ASAM level 3.3 clinically managed population-specific high-intensity residential services provided according to section 254B.19, subdivision 1, clause (6); and
- vii. ASAM level 3.5 clinically managed high-intensity residential services provided according to section 254B.19, subdivision 1, clause (7);

Effective January 1, 2024, or upon federal approval, whichever is later

New Sections in 254B

- **254B.121** - RATE METHODOLOGY; SUBSTANCE USE DISORDER TREATMENT SERVICES WITH MEDICATIONS FOR OPIOID USE DISORDER – Effective January 1, 2024 or upon federal approval, whichever is later.
- **254B.17** – WITHDRAWAL MANAGEMENT START UP AND CAPACITY BUILDING GRANTS
- **254B.18** – SAFE RECOVERY SITES START UP AND CAPACITY BUILDING GRANTS
- **254B.181** - SOBER HOMES
- **254B.19** – AMERICAN SOCIETY OF ADDICTION MEDICINE STANDARDS OF CARE
3rd Edition ASAM Criteria elements incorporated into statute language
- **245B.191** – EVIDENCE BASED TRAINING

254B.181 Sober Homes

- New legislation located in 245B.181
- Includes
 - Requirements – naloxone supply, policies promoting resident safety, staff qualifications, resident rules, abstinence, etc.
 - Bill of Rights – free from abuse, support recovery, financial, medical, referral, environment supportive of recovery, etc.
 - Management of Complaints/Investigation – Ombudsman
 - Private Right of Action to Recover Damages

AMERICAN SOCIETY OF ADDICTION **MEDICINE STANDARDS OF CARE**

- Subd. 1 - Level of care requirements
- Subd. 2 - Patient referral arrangement agreement
- Subd. 3 - Evidence-based practices
- Subd. 4 – Program outreach plan

245B.19 Subd. 1 - Level of Care Requirements

For each client assigned an ASAM level of care (LOC), eligible vendors must implement the standards set by the ASAM criteria for the respective level of care. Additionally, vendors must meet the following requirements:

1) 0.5 Early Intervention

- examples: individual or group counseling, treatment coordination, Peer Recovery services, SBIRT

2) 1.0 Outpatient

- up to 8 hours of skilled treatment services per week/adolescents - 5 hours

3) 2.1 Intensive Outpatient

- 9-19 hours of skilled treatment services per week/adolescents – 6 or more hours

4) 2.5 Partial Hospitalization

- 20 or more of skilled treatment services per week

Levels of care 1.0, 2.1, 2.5, 3.1,.3.3 and 3.5 must also meet co-occurring requirements and be licensed in [245G.20](#) and SUD Demonstration Project requirements found in [256B.0759](#)

245B.19 Subd. 1 - Level of Care Requirements cont.

5) 3.1 Clinically Managed Low–Intensity Residential

- 5 hours of skilled treatment services per week

6) 3.3 Clinically Managed Population Specific High-Intensity Residential

- 24 hour staffing coverage, must be enrolled as disability responsive
- Must provide a minimum of daily skilled treatment service 7 days a week

7) 3.5 Clinically Managed High–Intensity Residential

- 24 hours staffing coverage
- Must provide a daily skilled treatment service 7 days a week

8) 3.2 Withdrawal Management - Clinically Managed (requirements outlined in 245F)

9) 3.7 Withdrawal Management - Medically Monitored (requirements outlined in 245F)

Removes Obsolete Rule 25 language
Increases access to SUD Comprehensive Assessments
Removes placing authority language

- 62N Community Integrated Service Network
- 62Q Health Plan Companies
- 169A Driving While Impaired
- 245A Human Services Licensing
- 245F Withdrawal Management
- 245G Substance Use Disorder Licensed Treatment Facilities
- 245I Mental Health Uniform Service Standards Act
- 253B Civil Commitment
- 254A Treatment for Alcohol and Drug Abuse
- 254B Substance Use Disorder Treatment
- 256 Human Services
- 256B Medical Assistance for Needy Persons
- 256D Economic Assistance and Food Support
- 256L Minnesota Care
- 260B Delinquency
- 260C Juvenile Safety and Placement
- 260E Reporting Maltreatment of Minors
- 299A Department of Public Safety

Please enter your questions in the chat now or feel free to reach out later to the emails below.

- If you have questions about the licensing implementation plans or other licensing requirements, please contact your licenser directly or email dhs.mhcdlicensing@state.mn.us.
- If you have questions about changes in 254B, questions regarding direct access or other policy questions, please Clinical Policy Team member directly or email SUD.Direct.Access.DHS@state.mn.us



Thank You!

Licensing Division | Behavioral Health Division