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## S.F. No. 164 – Providing separate medical assistance payment for long-acting reversible contraceptives, as proposed to be amended by the A-1 amendment

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Section 1 [256.01, subd. 43] requires the commissioner of human services to require hospitals and primary care providers that serve medical assistance and MinnesotaCare enrollees to develop and implement protocols to provide comprehensive and scientifically accurate information on contraceptive options. Specifies other requirements. Requires the hospitals and providers to make the protocol available to the commissioner upon request.

## Section 2 [256.969, subd. 31]

**Paragraph** (a) requires the commissioner of human services to provide a separate reimbursement to hospitals for long-acting reversible contraceptives provided immediately postpartum in the inpatient hospital setting. Requires this payment to be in addition to the diagnostic related group reimbursement for labor and delivery, and consistent with payments made for these products in the outpatient setting.

**Paragraph (b)** directs the commissioner to require managed care and county-based purchasing plans to comply with this subdivision when providing services to medical assistance enrollees.

States this section is effective January 1, 2024.

Section 3 (256B.0631, subd. 2) states the placement and removal of long-acting reversible contraceptives is not subject to co-payments and deductibles under medical assistance. States this section is effective January 1, 2024.