

**Honorable Senators Hoffman and Abeler, Committee Members,**

I am writing in support of SF1966, particularly the section on clawbacks, which would reset the start of the timely filing period for a payer responsible for treatment payment when the need to bill that payer is triggered by a clawback from another payer who has paid the claim incorrectly.

My name is Liina Roth, and I am deeply invested in ensuring fair and sustainable reimbursement practices for Substance Use Disorder (SUD) treatment providers. One area where we see repeated inefficiencies and unnecessary administrative burdens is in SUD billing.

There are many occasions of clawbacks of payment for SUD treatment for various reasons, but especially due to errors in coordination of benefits. The impetus for the amendment arose in 2023 when Blue Cross/Blue Shield clawed back millions of dollars from multiple SUD providers a year after the original payment was made. Besides the significant burden placed on providers to rebill these claims to the rightful payer, many—if not most—of the refiled claims were denied as “past timely filing.” In many instances, providers could not even afford to fight these denials, resulting in substantial financial losses. Under today’s already tight reimbursement rates, this kind of cash flow disruption could literally bankrupt a small provider. These billing problems persist today, albeit in smaller amounts.

While I support the principles of the new clawback amendment, I strongly encourage a revision to one word in the bill. As currently written, the bill states that the timely filing period “may” be extended six months from the date of a clawback. As you know, in legal language, distinctions such as “may” vs. “must” or “may” vs. “will” are critical in statutory interpretation. The current wording does not specify who has the authority to decide whether to extend the filing period. Without greater clarity, payers who owe reimbursement may interpret this provision as optional, potentially denying valid claims and defeating the amendment’s intended purpose.

To ensure the effectiveness of this amendment, I urge you to revise SF1966 at Minnesota Statutes 2024, Section 62Q.75, Subd. 3(d), line 2.1, by replacing the word “may” with “will” or “must” as deemed appropriate by the Committee. This change is necessary to prevent payers from arbitrarily refusing to extend the filing period and to protect providers from financial hardship caused by administrative errors beyond their control.

Please amend and pass SF1966 to support fair and just reimbursement practices for SUD providers.

Sincerely,

**Liina Roth**

Director of Business Operations

Club Recovery, LLC