

Improving support and program integrity for substance use disorder treatment programs

Better oversight and updated treatment standards will help protect people in recovery.

Challenge

Minnesota faces significant challenges to sustain treatment programs for substance use disorder, or SUD. Severe workforce shortages make it difficult to hire and retain qualified staff. Many programs across the state have closed.

Current billing practices for SUD services lack clear specifications, hindering payment integrity and creating obstacles for providers. This ambiguity affects the financial stability of treatment programs and their ability to deliver consistent care.

Recovery housing remains a critical part of treatment. However, the existing system of freestanding room and board facilities and sober homes isn't meeting the growing demand for stable, supportive housing options for people in recovery.

Proposals

The Governor's comprehensive proposal addresses three critical areas: recovery housing, Medicaid billing and workforce development.

Establishing a DHS certification process for recovery residences will enhance resident protection and oversight. The state will phase out freestanding room and board facilities, with certified recovery residences becoming eligible for Housing Support agreements starting in 2027.

Another recommendation will switch SUD treatment billing in Medicaid to 15-minute increments instead of hourly. Creating six service categories, instead of two, will reflect the diverse nature of treatment services.

For workforce development, revising qualification requirements for SUD treatment coordinators will emphasize practical experience over formal education. Service delivery options will expand with the creation of a new behavioral health practitioner position.

Why It's Important

The recommendations address critical needs in Minnesota's SUD treatment system. Stable housing is fundamental to successful recovery outcomes. Changes to the recovery residence system will help ensure consistent access to quality housing throughout the recovery journey, regardless of a person's treatment status.

Workforce reforms will address severe staffing shortages in SUD treatment programs. Qualified people will have more pathways into the field with the new behavioral health practitioner role, and treatment coordinators will no longer need to have a bachelor's degree. This approach will allow licensed professionals to focus on specialized therapy, while other staff provide essential support services.

The transition to 15-minute billing increments and expanded service categories aligns with updated standards of the American Society of Addiction Medicine. The changes reflect the complex nature of SUD treatment, promote transparency and support a holistic treatment approach.

For More Information

[Substance Use Disorder Treatment Service Changes](#)
[Improving Supportive Recovery Housing Options](#)
[Governor's Budget Recommendations for Human Services](#)