STATE: MINNESOTA ATTACHMENT 4.19-B Effective: January 1, 2026 Page 27b

TN: 26-03 Approved:

Supersedes: 21-24 (19-12, 17-19,14-03,(11-19, 11-02, 10-21, 10-02, 09-25, 04-

05, 02-02)

7.c. Medical supplies, equipment, and appliances suitable for use in any setting in which normal life activities take place(continued).

Effective for services provided on or after October 1, 2011, home infusion therapy services provided by home infusion pharmacies are paid the lower of:

- (1) the submitted charge; or
- (2) a per diem amount for home infusion therapy services as defined in home infusion HCPCS codes. The per diem rate is equal to the combined payment rates for the component services which include, but are not limited to, medical supplies and equipment, professional pharmacy services, care coordination, delivery and shipping and products used in a standard total parental nutrition formula.

No dispensing fee is paid for home infusion therapies when dispensed by home infusion pharmacies.

The base rates as described above in this item, are adjusted by the following clauses of Supplement 2 of this Attachment:

- U. Facility services rate decrease 2009.
- aa. Miscellaneous services and materials rate decrease 2011.
- ee. Rate decrease effective July 1, 2014.
- gg. Miscellaneous services and materials rate increase effective September 1, 2014.
- hh. Rate increase effective July 1, 2015.
- ii. Rate increase for miscellaneous services, effective July 1, 2015.

Effective January 1, 2026, long-term ambulatory electrocardiogram monitoring services are reimbursed at 100 percent of the Medicare Physician Fee Schedule rate.