

Enrollment with Minnesota Health Care Programs (MHCP)

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After an individual or group provider meets professional certification and licensure requirements, you can apply to be an enrolled MHCP provider using the [Minnesota Provider Screening and Enrollment \(MPSE\) portal](#) or by submitting the application materials required for your services by fax.

Eligible Providers

Providers who choose to participate in MHCP must meet professional certification and licensure requirements according to applicable state and federal laws and regulations specific to the services you wish to provide. Refer to the manual section for the services listed in the following links to learn about the MHCP requirements for that provider type.

Also contact any managed care organizations you have a contract with for their enrollment requirements.

Provider types marked with an asterisk (*) in the following list may not receive direct payment for the services they provide and must bill through an agency.

The following health care provider types may be eligible for MHCP enrollment:

- [Acupuncture](#)
- [Ambulatory Surgical Center \(ASC\)](#)
- [Audiologist](#)
- [Billing Entity for Mental Health](#)
- [Billing Entity for Physician Group](#)
- [Certified Mental Health Rehab Professional*](#)
- [Certified Nurse Midwife \(CNM\)](#)
- [Certified Registered Nurse Anesthetist \(CRNA\)](#)
- [Child and Teen Checkups \(C&TC\)](#)
- [Children's Residential Treatment*](#)
- [Chiropractor](#)
- [Clinical Nurse Specialist \(CNS\)](#)
- [Community Health Clinic](#)
- [Community Health Worker*](#)
- [Community Mental Health Center](#)
- [County Case Manager](#)
- [County Human Services Agency](#)
- [Day Training and Habilitation for ICF/DD](#)
- [Day Treatment](#)
- [Dentist and Dental Group](#)
- [Dental Therapist \(DT\), Advanced Dental Therapist \(ADT\), and Collaborative Practice Dental Hygienist \(CPDH\)](#)

- [Dietician](#)
- [Early Intensive Developmental and Behavioral Intervention \(EIDBI\) Provider Enrollment](#)
- [EDI Trading Partner](#)
- [Family Planning Agency](#)
- [Federally Qualified Health Center \(FQHC\)](#)
- [Health Care Case Coordinator](#)
- [Hearing Aid Services](#)
- [Home and Community-Based Services \(HCBS\) Programs](#)
- [Home Care Nurse](#)
- [Hospice](#)
- [Hospital](#)
- [Housing Stabilization Services](#)
- [Housing Support Supplemental Services](#)
- [Independent Diagnostic Testing Facility](#)
- [Independent Laboratory](#)
- [Independent X-ray](#)
- [Indian Health Service \(IHS\) Facility](#)
- [Individualized Education Program \(IEP\) Services](#)
- [Institution for Mental Disease \(IMD\)*](#)
- [Intensive Residential Treatment Services \(IRTS\)](#)
- [Intermediate Care Facilities \(ICF/DD\)](#)
- [Licensed Independent Clinical Social Worker \(LICSW\)](#)
- [Licensed Marriage & Family Therapist \(LMFT\)](#)
- [Licensed Professional Clinical Counselors \(LPCCs\)](#)
- [Licensed Psychologist](#)
- [Medical Supply or Durable Medical Equipment](#)
- [Moving Home Minnesota \(MHM\)](#)
- [Nurse Practitioner \(NP\)](#)
- [Nursing Facility \(Long-Term Care\)](#)
- [Occupational Therapist \(OT\)](#)
- [Optical \(Optometrist, Ophthalmologist, and Opticians\)](#)
- [PCA Provider Agency Enrollment](#)
- [Personal Care Assistant \(PCA\), Individual*](#)
- [Pharmacist* or Pharmacy](#)
- [Physical Therapist \(PT\)](#)
- [Physician and Clinic](#)
- [Physician Assistant](#)
- [Podiatrist](#)
- [Psychiatric Residential Treatment Facility](#)
- [Public Health Clinic](#)
- [Public Health Nursing Clinic](#)
- [Recovery Community Organizations \(RCOs\)](#)
- [Regional Treatment Center \(RTC\)](#)
- [Rehabilitation Agency](#)
- [Rehabilitation Billing Entity Enrollment Criteria and Forms](#)
- [Renal Dialysis](#)
- [Rural Health Clinic \(RHC\)](#)
- [Speech-Language Pathologist](#)
- [Substance Use Disorder \(SUD\)](#)

- [Targeted Case Management \(TCM\)](#)
- [Transportation](#)

Enrollment Process

Follow these steps to apply to be an enrolled MHCP provider:

1. Check federal and state excluded providers lists

The federal Health and Human Services [Office of Inspector General \(OIG\)](#) has the authority to exclude individuals and entities from participation in Medicare, Medicaid and other federal health care programs. MHCP also excludes individuals and entities from participation in MHCP if they are on either the federal or state excluded provider list.

MHCP cannot enroll and pay providers if they or their employees or contractors are excluded from participation in Medicare, Medicaid or other federal health care programs. The OIG may impose civil monetary penalties against providers who employ or enter into contracts with excluded individuals or entities to provide services or items to members.

The OIG makes a [List of Excluded Individuals and Entities \(LEIE\)](#) available to the public. As enrolling or enrolled MHCP providers, you must make sure you, your company, owners, managers, employees and contractors are not on the list. Search [LEIE](#) by the individual's or entity's name:

- Before you enroll
- Before you hire new employees/enter into a contract with a contractor
- Monthly, to see changes since your last search

Report any new exclusions you find in your search to MHCP Provider Eligibility and Compliance at fax 651-431-7462. Use a cover sheet.

Also see [Excluded Provider Lists](#).

2. Meet all rules and requirements

Provider types who are eligible for MHCP enrollment must meet all of the requirements and certifications for the type of service you want to provide **before** submitting enrollment information to MHCP. To determine what those requirements are:

- Refer to the appropriate service section listed under **Eligible Providers** on this page for licensure or certification requirements for your provider type.
- Review the [MHCP Provider Screening Requirements](#) section of the MHCP Provider Manual.

3. Get a provider identification number

[National Provider Identifiers \(NPIs\)](#) are the standard unique identifiers to use in submitting and processing health care claims and other transactions. If you are a provider eligible for an NPI, you must obtain your NPI number(s) from the [National Plan and Provider Enumeration System \(NPPES\)](#) before you enroll with MHCP.

The following providers are not required to obtain an NPI, but may have the option of using an NPI registered to the provider:

- Home and community based services
- Personal care provider organizations
- Day training and habilitation

Unique Minnesota Provider Identifier (UMPI): Providers who do not meet the federal definition of a health care provider under [HIPAA](#) may not be eligible to receive an NPI. If you are not eligible for an NPI and apply for enrollment, MHCP will assign you a 10-digit UMPI and send you a Welcome Letter to confirm your enrollment.

If you are one of the following providers, do not obtain an NPI before submitting your enrollment forms:

- [Approved day treatment centers](#)
- [Children's residential services](#)
- [Clearinghouses & billing intermediaries](#)
- Health care case coordinators
- Individual PCAs
- [Transportation \(non-medical\)](#)
- [Community Health Workers](#)
- WIC Programs
- Head Start Programs
- EDI Trading Partners
- Clearing Houses
- Billing Intermediaries
- Nonemergency Medical Transportation (NEMT) Drivers

Your NPI or UMPI is required on all claims submitted to MHCP. This number allows you to be paid for MHCP-covered services provided to eligible MHCP members.

4. Submitting enrollment documents to MHCP

Providers who wish to enroll with MHCP or make enrollment requests can do so in one of the following two ways.

- Register to access the [Minnesota Provider Screening and Enrollment \(MPSE\) portal](#) and complete your enrollment online using the [MPSE portal](#) or
- Complete the required documents and fax your materials to Provider Eligibility and Compliance

Click on the link to the manual section specific to the services you wish to provide (listed in the [Eligible Providers](#) section of this page) to see the MHCP requirements and the forms required if submitting by fax.

Application Fees

Some MHCP provider types must pay a nonrefundable application fee. If you are a newly enrolling provider, reenrolling, or revalidating your enrollment, and you are required to pay a fee, you must pay the fee **before** submitting your enrollment application. See [Application Fees](#) in the Provider Screening Requirements section of the Provider Manual for application fee requirements.

Electronic funds transfer (EFT) or direct deposit

MHCP recommends all providers sign up to be paid through EFT or direct deposit. EFT payments are a convenient alternative to receiving paper checks and feature many advantages.

EFT payments are:

- **Faster** – You can access your funds quicker. You don't have to wait for a check to arrive and you don't have to make a trip to the bank to make a deposit.
- **Safer** – You won't deal with lost, stolen or misdirected checks.
- **Easier** – You can manage cash flow with less paperwork.

Providers who want to be paid through EFT from MHCP must have an active 10-digit supplier ID and a 3-digit supplier location code assigned from Minnesota Management and Budget (MMB).

Follow these steps to establish a supplier ID for MHCP payments:

1. Go to the [Minnesota Supplier Portal](#) website and select "Register for an Account" and register as a "New Supplier," if you do not already have a supplier ID.
2. To add or update banking information to an existing supplier ID via the Supplier Portal, refer to [Update Supplier Profile](#) or you can submit the [MMB EFT Bank Change Request \(PDF\)](#). If you have questions whether your supplier ID is active for direct deposit, call MMB at 651-201-8106.
3. It will take 10 business days after adding your banking information before your supplier ID becomes active. After that, enter your EFT supplier ID and supplier location code using our online [Minnesota Provider Screening and Enrollment \(MPSE\) Portal](#), or fax a completed [EFT Vendor Number Notification \(DHS-3725\) \(PDF\)](#) to Provider Eligibility and Compliance at 651-431-7462.

Enrollment Approvals

Providers Located in Minnesota

Minnesota providers are approved retroactively:

- As indicated for a Requested Enrollment Date on the application
- To the first day of the month of application
- For up to 90 days to the effective date of Medicare certification of the provider
- To the date of the member's established retroactive MHCP eligibility

Providers Located Outside of Minnesota

Out-of-state providers may apply for MHCP enrollment for the date(s) of service to an MHCP member. To be eligible for payment under MHCP, an out-of-state provider must:

- Comply with the licensing and certification requirements of the state where the provider is located, except for home and community-based waiver services providers who must meet the licensing and certification requirements of Minnesota's federally approved waiver plan.
- Submit a request to MHCP using the [MPSE portal](#), including an uploaded copy of the Provider Agreement, any required assurance statements and credentials; or fax the required documents to Provider Eligibility and Compliance (PEC).

Refer to additional requirements under [Billing Policy](#) and billing information for [Out-of-State Providers](#).

Consolidated Providers

A consolidated provider is defined as a provider with multiple enrollment records assigned to one National Provider Identifier (NPI).

A provider can offer multiple types of services, but not all services can be billed under one enrollment record. So, multiple enrollment records may need to be created depending on the type of service. Provider Eligibility and Compliance will review enrollment record provider types for providers who hold multiple, active credentials for different enrollment records and determine whether records need to be consolidated.

MHCP use of Taxonomy Code(s)

A taxonomy code is a code that describes the provider or organization type, classification, and the area of specialization. Provider taxonomy codes and their description can be found on the [X12 External Codes List](#) web page.

When a provider chooses one NPI to bill for multiple records because they have more than one location or more than one type of service, MHCP will consolidate all the records under a provider type 33 record. The records will remain active, and link to the PT33 record.

- If an NPI represents multiple records that share a physical address or is located in the same zip code, the provider is required to submit taxonomy codes for each record following enrollment and MN-ITS registration. If any records are limited to and share the same available taxonomy code, the provider can enter a custom taxonomy code. The taxonomy codes are used for identification purposes only.
- Providers must submit taxonomy or custom taxonomy codes to MHCP through MN-ITS. For a tutorial, you can watch our [Adding Taxonomy Codes](#) for consolidated providers module.
- If one NPI represents multiple records that each have a unique physical address, the provider is required to submit the service facility location where the service was provided on claims.

Register for MN-ITS

Once your application has been approved by PEC you will be sent a Welcome Letter to confirm your enrollment. You will need to register for MN-ITS. This Welcome Letter includes a MN-ITS initial User ID, Password and [registration instructions](#). [MN-ITS](#) is a free, web-based, HIPAA-compliant system..

[Minnesota law](#) requires all persons or entities that provide health care services or supplies within Minnesota for a fee and are eligible for MHCP reimbursement to submit all claims electronically. All providers and their affiliated clinics or billing services must register for MN-ITS. MHCP does not process paper claims.

As a registered MN-ITS user, you can:

- Verify active provider enrollment status
- [Verify program eligibility](#) for one or more MHCP members at one time
- [Submit authorization requests](#) for medical or dental services or medical supplies
- Submit service agreement (SA) requests for home care services
- Retrieve your [authorization and service agreement letters](#) in the MN-ITS mailbox
- [Submit claims](#) (including claims with third party insurance or Medicare)
- Copy previously submitted MN-ITS claims or [replace](#) incorrectly submitted paid claims
- Check a claim's [paid or denied status](#)
- Use the [MN-ITS Mailbox](#) to access information, including Remittance Advices (RAs)

Changes to Enrollment

It is the responsibility of the provider to keep all enrollment information updated. Report any changes and updated information to your enrollment application by submitting a change request through [MPSE](#) or fax the following form appropriate to your practice:

- [Individual Practitioner MHCP Provider Profile Change Form \(DHS-3535\) \(PDF\)](#) to report changes to individual's enrollment information, or to add and remove affiliations
- [Organization MHCP Provider Profile Change Form \(DHS-3535A\) \(PDF\)](#) to report changes to an organization's contact or enrollment information
- [Disclosure of Ownership and Control Interest of an Entity \(DHS-5259\) \(PDF\)](#) to report changes in management or board composition, or ownership (note changes in ownership require new copies of all enrollment documents, along with DHS-5550)
- [Provider Entity Sale or Transfer Addendum \(DHS-5550\) \(PDF\)](#) to report changes in ownership due to a sale or transfer of a provider entity (ownership changes must be reported at least 30 days before the change occurs) **Note:** If reporting a transfer of ownership via [MPSE](#), DHS-5550 must be uploaded with the change request.
- [Electronic Remittance Advice \(RA\) Request Form \(DHS-4718\) \(PDF\)](#) to add electronic RA on a provider's MN-ITS account, or to add or remove an RA affiliation with a billing organization

- [EFT bank change form \(PDF\)](#) to report changes to your direct deposit information, note that this form goes to a different agency, Minnesota Management and Budget (MMB)
- [EFT Vendor Number Notification form \(DHS-3725\) \(PDF\)](#) to report changes to your MMB-issued EFT Vendor Number or Location Code

MHCP will process the change information and notify the agency if any more documentation is necessary. MHCP sends enrollment status letters to providers, including when changes in provider participation occur (such as when providers expand or reduce the services they provide).

Processing Timelines and Actions

Whether you submit your materials using MPSE or by fax, MHCP processes complete requests within 30 days of receiving the request. Each request, including newly submitted, corrected, and resubmitted requests are subject to the same processing timelines (30 days) as an initial request.

Complete Requests

Complete requests mean that all required fields are completed and all required documents have been received.

If a new enrollment request is incomplete, MHCP will send you a request for more information (RFMI) letter via your MN-ITS mailbox or U.S. mail to tell you the information we still need to process your request. You have 60 days to respond and return the missing information. You can submit the missing information by [MPSE](#) or fax. If we receive part of your information, but there is still missing information, we will send an additional RFMI to tell you the information that is still missing and give you an additional 30 days to return the missing information. If information is still missing or incomplete after that, we will deny the request.

If enrollment documents submitted are not complete and correct and we requested additional information or corrections, you must allow up to 30 days from the date you sent the most recent paperwork for processing.

Inactive enrollment records

If your enrollment record becomes inactive due to lack of claims activity, you will be required to re-enroll with Minnesota Health Care Programs.

Billing Organizations

MHCP-enrolled providers can assign [clearinghouses or billing intermediaries](#) as their billing agents to submit claims and other transactions electronically to MHCP.

[Clearinghouses and billing intermediaries](#) sending MHCP claims and other transactions on behalf of enrolled providers must enroll as a [billing organization](#).

Enrollment with Managed Care Organizations

Providers who choose to participate in an MHCP managed care organization's (MCO's) network must [contact the appropriate health plan](#) for participation requirements. Refer to [Prepaid Minnesota Health Care Programs](#) for additional information about MCOs.