

MHCP Provider Manual 2021 Manual Revisions

Updates cited below do not include minor grammatical or formatting changes that otherwise do not have bearing on the meaning of the policy contained herein. Refer to [Provider Updates](#) that may contain additional MHCP coverage policies or billing procedures. MHCP incorporates information from these updates into the [Provider Manual](#) on an ongoing basis. Sign up to get [email notices](#) of section changes.

December 30, 2021

Dental Services

- [Authorization Requirement Tables for Non-Pregnant Adults](#) – We added a [Periodontics](#) section explaining how to submit requests for authorization and provided periodontal CDT Codes, D4341 and D4342.

Provider Basics

Provider Requirements

- [Provider Screening Requirements](#) – The application fee for Minnesota Health Care Programs has changed to \$631 per practice location, effective Jan. 1, 2022. We updated the application fee in the [Application Fees](#) section.

HCBS Waiver Services

- [HCBS Waiver Services](#) – We added Hospice and other MA-covered services link under the [Service Authorization](#) section.

December 29, 2021

Mental Health Services

- [Psychotherapy](#) – Under [Covered Services](#), we updated Interactive Complexity information.

Dental Services

- [Authorization Requirement Tables for Children and Pregnant Women](#)
 - In [Periodontics](#), we added CDT codes D4322 and D4323.
 - In [Orthodontics](#), we changed the orthodontic criteria to match the American Association of Orthodontists (AAO) medical necessity standards. This change to the benefit parameters is effective Jan. 1, 2022.

December 28, 2021

Provider Basics

Provider Requirements

- [Access Services](#) – Under [Eligible Members](#) under the Language Interpreter Services heading, we added major program OO as a noncovered major program for sign and spoken language interpreter services.

December 15, 2021

Individualized Education Program (IEP) Services

[IEP Personal Care Assistance \(PCA\) Services](#)

- In [Noncovered Services](#), we replaced "distance learning" with "learning from home."
- In the [PCA Time Studies](#) section, we added location as necessary for time studies.
- In [PCA Plan of Care](#), we clarified that Plan of Care for must be specific to the location and where special education is provided.
- In the [Billing](#) section, in [Billing for PCA services](#), we replaced "distant learning" with "learning from home." We also removed the bullet about billing nursing and PCA services that children need en route separately. That relates to special transportation.

December 14, 2021

Provider Basics

Enroll with MHCP

- [Home and Community-Based Services \(HCBS\) Programs Provider Enrollment](#) – We revised the DHS-6855 and DHS-6383 form links to match their updated form titles.

December 13, 2021

Clinic Services

[Federally Qualified Health Center and Rural Health Clinics](#)

- In the [Covered Services](#) section, we added information on SUD services
- We edited the [Billing](#) section and added section titled [Electronic Claim Attachments](#).
- We clarified the section [Managed Care Organization \(MCO\) Contracts -- FQHC/RHC Carve-Out Process](#).

December 9, 2021

Provider Basics

Enroll with MHCP

- [Pharmacy and Pharmacist Enrollment Criteria and Forms](#) – We changed the provider agreement form DHS-4138 to the correct form: [Individual Non-Pay-To Provider Agreement \(DHS-4611A\) \(PDF\)](#). We also deleted the Provider Agreement Addendum (DHS-5329) and the Unit Dose Approval Letter from the Board of Pharmacy as they are no longer required.

December 8, 2021

Transportation Services

- [State-Administered Transportation Procedure Codes, Modifiers and Payment Rates](#) – In the table for [Transportation Procedure Codes, Modifiers and Payment Rates](#), we corrected Mode 6 - protected transportation payment rate from \$75.00 per loaded mile to \$75.00 per trip (must include an attendant).

November 30, 2021

Early Intensive Developmental and Behavioral Intervention (EIDBI)

- [Early Intensive Developmental and Behavioral Intervention \(EIDBI\) Benefit](#) – Under the [Services that Do Not Require Authorization](#) heading under Service Authorization, we clarified information surrounding the individual treatment plan service delivery to specify allowances for billing.

Provider Basics

Enroll with MHCP

- [Intermediate Care Facilities \(ICF/DD\) Enrollment Criteria and Forms](#) – Created an enrollment criteria and forms page for Intermediate Care Facilities (ICF/DD) providers.

November 19, 2021

COVID-19

- [Coronavirus \(COVID-19\)](#) – Under the **COVID-19 Testing** section under **Covered Services and Modifications**, we added information about [over-the-counter COVID tests](#) being a covered benefit according to the American Rescue Plan Act of 2021.

November 16, 2021

Pharmacy Services

- [Pharmacy Early-Refill Overrides](#) – We clarified the override circumstances for travel. In the [Pharmacy Cash Payment for Controlled Substance](#) section, we deleted "other than weight loss medications that are not part of MA benefit, such as phentermine."

November 15, 2021

Mental Health Services

- [Adult Residential Crisis Stabilization Services \(RCS\)](#) – Under [Billing](#), we added information for value codes 80 and 81 for room and board billing.
- [Intensive Residential Treatment Services \(IRTS\)](#) – Under [Billing](#), we added information for value codes 80 and 81 for room and board billing.

November 12, 2021

COVID-19

- [Coronavirus \(COVID-19\)](#) – Under [COVID-19 Vaccine and Administration Codes](#), in the **Vaccines** section, we added new CPT Administration Codes 0004A, 0034A, 0064A for COVID-19 Vaccine booster codes 91300, 91303 and 91306. We also added new CPT Administration Codes 0071A and 0072A for Pfizer 91307 for ages 5-11.

November 9, 2021

Mental Health Services

- [Psychiatric Residential Treatment Facility \(PRTF\)](#) – We updated this manual section to report an important PRTF eligibility and concurrent review change: The Arkansas Foundation for Medical Care (AFMC) is completing medical necessity reviews as of Oct. 18, 2021.

November 8, 2021

Provider Basics

Enroll with MHCP

- [Certified Registered Nurse Anesthetist Enrollment Criteria and Forms](#) – We updated the certified registered nurse anesthetist (CRNA) requirement description.

November 5, 2021

Early Intensive Developmental and Behavioral Intervention (EIDBI)

- [Early Intensive Developmental and Behavioral Intervention \(EIDBI\) Benefit](#) – Under [Eligible Providers](#), we added information about the new requirement to use NetStudy 2.0 for background studies.

November 4, 2021

Provider Basics

Health Care Programs and Services

- [MHCP Benefits at-a-glance](#) – We added major program [OO](#) to the table.

November 3, 2021

Medication Therapy Management Services (MTMS)

- [Medication Therapy Management Services \(MTMS\)](#)
 - Under [Eligible Providers](#), we replaced DHS-4668 with DHS-4016. Pharmacists no longer need to add NPI of where they will provide services.
 - We replaced the MTMS Delivered via Interactive Video section with a [MTMS Delivered via Telehealth](#) section.
 - Under [Noncovered Services](#), we added Encounters for MTMS for dual-eligible members.

November 2, 2021

COVID-19

- [Coronavirus \(COVID-19\)](#) – We added **Over-the-counter COVID Tests** sections under [Covered Services Changes and Modifications](#) and the [Billing](#) headings.

Substance Use Disorder (SUD) Services

- [Substance Use Disorder \(SUD\) Services](#)
 - We updated to use the term Nonresidential (outpatient) throughout this manual section.
 - In the [Revenue and Procedure Codes table](#), we removed revenue codes and type of bill information from the Treatment Coordination and Comprehensive Assessment rows.

Dental Services

- [Dental Services](#) – Dental Services [Overview](#) added. Providers must follow federal and state regulations and MN Board of Dentistry requirements for documentation, infection control, and patient care.

Reproductive Health/OB-GYN

- [Free-Standing Birth Center Services](#)
 - We revised the [Billing](#) section by removing the evaluation and management visit codes and removing the subsection on "Payment Methodology."
 - We also revised wording throughout this manual section to clarify current policy.

October 29, 2021

Mental Health Services

- [Adult Mental Health Targeted Case Management \(AMH-TCM\) and Children's Mental Health Targeted Case Management \(CMH-TCM\)](#)
 - Under **Covered Services** in the [Assessment](#) heading, we clarified both mental and physical health must be assessed rather than just general health.
 - Under [Billing](#) in the **Adult and Children's Mental Health Targeted Case Management Benefits table**, we reinstated the people who can be involved in face-to-face contact.

October 28, 2021

Certified Community Behavioral Health Clinic (CCBHC)

- [Certified Community Behavioral Health Clinic \(CCBHC\)](#)
 - Under [Eligible Providers](#), we added information about state-certified providers.
 - Under [Eligible Members](#), we clarified CCBHC services member eligibility.
 - Under [Covered Services](#), we added state plan authority information. We also deleted Clinical Care Consultation information.
 - Under [Billing Expanded CCBHC Services](#), we deleted the Clinical Care Consultation for Recipients 21 Years or Older table. We also explained outpatient withdrawal management claims for MA fee for service and MCO enrollees.
 - Under [Additional CCBHC Billing and Payment Provisions](#), we revised to show separate information for Demonstration CCBHCs and SPA CCBHCs.

October 26, 2021

Equipment and Supplies

- [Nutritional Products and Related Supplies](#) – Under **Covered Services**, we added In-line cartridge containing digestive enzymes (HCPCS code [B4105](#)) as a covered MHCP benefit beginning Oct. 1, 2021.

October 22, 2021

Elderly Waiver (EW) and Alternative Care (AC) Program

- [Elderly Waiver \(EW\) and Alternative Care \(AC\) Program](#)
 - In the [Program Access and Administration](#) section under **Roles**, we added the bulleted item: "Inform people of the option to self-direct their own services"
 - And we revised the last two bullets to read:
 - Assuring that all providers meet state standards relevant to their area of service, signed provider agreements

with DHS and meet the provider qualifications when the lead agency is the provider of service.

- Assuring all providers comply with DHS requirements if opting to review and approve non-enrolled providers as qualified to deliver EW and AC services (see [CBSM –Lead agency oversight of waiver/AC approval-option service vendors](#)). Authorizing funds for all HCBS services provided to those eligible for enrollment in MHCP
- In the [Informed Choice](#) section, we deleted:
 - Inform a person nearing age 65 of the other community support options so that the person can choose which alternative will best meet his or her needs. A member receiving waiver services before age 65 remains eligible for the respective waiver after turning 65 years old if he or she meets all other eligibility criteria. Other options may include the EW, remaining on their current HCBS waiver or other alternatives that may meet the needs and preferences of the member. For information about HCBS waivers for people under age 65 on one of these disability waivers program: Brain Injury (BI), Community Alternative Care (CAC), Community Access for Disability Inclusion (CADI) and Developmental Disabilities (DD) services, refer to the webpage.
- After the first [Covered Services](#) table, we deleted the sentence, "Lead agencies may negotiate with providers in their contracts for any additional specific performance standards or requirements needed to meet needs of specific individuals" and added a link to the [Community-Based Services Manual \(CBSM\)](#).
- We changed the title of the second table in Covered Services to, "[Extended Home Care Services - EW Program Only](#)."
- We updated the section [Additional information to extended home care services](#).
- We updated the [Service Authorization](#) section to include provider credentialing requirements for approval of service authorizations.
- In the [Payment Rates](#) section, in **Billing**, we deleted the bullets and added a link to [Long-Term Services and Supports Service Rate Limits \(DHS-3945-ENG\)\(PDF\)](#).
- In [Legal References](#), we added [Minnesota Statutes, 256S](#) (Medical Assistance Elderly Waiver).

October 21, 2021

COVID-19

- [Coronavirus \(COVID-19\)](#) – Under the [Targeted Case Management](#) section under **Covered Services Changes and Modifications**, we deleted Relocation service coordination targeted case management (RSC-TCM).

Mental Health Services

- [Adult Mental Health Targeted Case Management \(AMH-TCM\) and Children's Mental Health Targeted Case Management \(CMH-TCM\)](#)
 - Under [Billing](#), we removed Federally Qualified Health Centers from the Adult and Children's Mental Health Targeted Case Management Benefits table.

October 20, 2021

MHCP Provide Manual

- [MHCP Provider Manual – Home](#) - Added link to Enrollment with Minnesota Health Care Programs.

October 15, 2021

Early Intensive Developmental and Behavioral Intervention (EIDBI)

- [Early Intensive Developmental and Behavioral Intervention \(EIDBI\) Benefit](#) – We updated language with recent state plan updates. Under [Covered Services](#) and [Service Authorization](#), we added higher intensity intervention services language.
- [Early Intensive Developmental and Behavioral Intervention \(EIDBI\) billing grid](#) – Added new and updated billing code information for legislative service changes approved back to July 1, 2021.

Behavioral Health Home Services

- [Behavioral Health Home Services](#) – Under the [Billing](#) and [Telemedicine](#) sections, we updated language for the six month face-to-face requirement. New language removes the requirement for a six-month face-to-face visit. This language is replaced by the new requirement that a provider must, at a minimum, offer a face-to-face visit with the person receiving services every six months.

October 12, 2021

HCBS Waiver Services

- [HCBS Waiver Services](#) – Updated the [Service Authorization](#) section to include provider credentialing requirements for approval of service authorizations.

Provider Basics

Health Care Programs and Services

- [MHCP Benefits at-a-glance](#) – We changed Alcohol and Drug Abuse: Residential & Outpatient to Substance Use Disorder.

October 11, 2021

Equipment and Supplies

- [Urological and Bowel Supplies](#) – Under [Covered Services](#), we clarified the accessory unit for anal irrigation system code is A9900.

COVID-19

- [Coronavirus \(COVID-19\)](#)
 - Under [Targeted Case Management \(TCM\)](#) under the **Covered Services Changes and Modifications** heading, we explained the waiver will continue until the federal public health emergency ends.
 - We added information explaining TCM documentation under the [Changes in Requirements](#) heading. We explained the waiver will continue until the end of the federal public health emergency and how to document TCM for auditing purposes.
 - We added billing information for [TCM](#) under the **Billing** heading.

October 7, 2021

Hospital Services

- [Outpatient Hospital Services](#)
 - We added incarceration outpatient hospital services billing process.
 - We merged observation services covered and noncovered and billing policy.
 - We merged [Pulse Oximetry](#), [Blood Transfusion](#), [Mental Health Partial Hospitalization](#) sections together.

October 5, 2021

Early Intensive Developmental and Behavioral Intervention (EIDBI)

- [Early Intensive Developmental and Behavioral Intervention \(EIDBI\) Benefit](#) – Under [Responsibilities](#) under the Service Authorization heading, we clarified that EIDBI provider agencies may submit a CMDE for medical necessity when given a completed CMDE by a family or other provider.

October 4, 2021

Equipment and Supplies

- [Positioning Equipment](#) – Under [Positioning Cushions, Pillows, and Wedges](#) in Covered Services, we added that positioning sleep systems should be billed using code E0190.

October 1, 2021

Child and Teen Checkups (C&TC)

- [Child and Teen Checkups \(C&TC\)](#)
 - In the **Covered Services-Medical Screening** section under [Developmental and Social-Emotional or Mental Health Screenings](#), we updated developmental screening information to include the use of The Survey of Well-being of Young Children (SWYC) as an acceptable developmental screening tool as part of a complete C&TC in clinical settings only.
 - In the **Covered Services-Medical Screening** section under [Laboratory or Risk Assessment](#), we updated the tuberculosis risk assessment information to match the recent change of the periodicity schedule.

September 30, 2021

Day Training and Habilitation (DT&H)

- [Day Training and Habilitation \(DT&H\) Day Services](#)
 - We deleted the Provider Type Home Page links table at the beginning of this manual page.
 - In the [Overview](#) section, we added information about this service changing during the rolling implementation of the Waiver Reimagine project that started Jan. 1, 2021. We also added a link to the [HCBS Waiver Services](#) section of the Provider Manual for more information about Day Support Services.
 - In the [Two-Party and Three-Party Agreements](#) section, we added the option to submit agreements using the [Minnesota Provider Screening and Enrollment \(MPSE\) portal](#).
 - We changed the reference to "recipients" to "members" throughout this section to clarify that we are referencing a person enrolled with Minnesota Health Care Programs.

September 24, 2021

Housing Stabilization Services

- [Housing Stabilization Services](#) – Under the [Documentation requirements](#) heading under Billing, we changed the 20% remote support limitation to no more than half.

September 23, 2021

Provider Basics

Enroll with MHCP

- [Substance Use Disorder \(SUD\) Services Enrollment Criteria and Forms](#) - Under Enrollment criteria, we removed verbiage about meeting 245G requirements and removed a sentence about out of state providers credentials. We added the following new subheadings and information:
 - [Enrollment Criteria](#)

- [Programs or Organizations Enrollment Requirements](#)
- [For Individuals providing SUD Services in Private Practice](#)
- [How to enroll as a licensed professional in Private Practice to provide SUD services](#)
- [Counties and Tribes](#)
- [Recovery Community Organizations](#)
- [1115 SUD System Reform Federal Demonstration](#)

September 22, 2021

Provider Basics

Provider Requirements

- [Risk Levels and Enrollment Verification Requirements](#) – We added the risk verification for Licensed Alcohol and Drug Counselor (DC) and for Recovery Community Organization (RC).

September 21, 2021

Elderly Waiver (EW) and Alternative Care (AC)

- [Elderly Waiver \(EW\) and Alternative Care \(AC\) Program](#) – We updated the following information in the Elderly Waiver (EW) and Alternative Care (AC) Program section of the MHCP Provider Manual:
 - In [Case Management](#), in the **Lead Agency** subsection, we added a link to the [Community-Based Services Manual \(CBSM\)](#) for ease of access.
 - We clarified the text in the [Eligible Providers](#) section.
 - In the [Billing](#) section, we included Managed Care Organization (MCO) billing instructions.
 - We added the subsection: [Elderly Waiver Customized Living Services Rate Adjustment](#) in the **Billing** section.
 - We added the legal citation for Customized Living Services; Disproportionate Share Rate Adjustments in the [Legal References](#) section.
 - We deleted **Diagnosis Codes (ICD Codes) and Maximizing Other Payers** subsections under the **Billing** section because it is already on our Billing Waiver and Alternative Care (AC) Program section of the Provider Manual.
 - We deleted **Clients Leaving Nursing Facilities (Conversion Rates)** section because this information has been moved to the [CBSM - Elderly Waiver \(EW\) conversion rates](#).

Hospital Services

- [Inpatient Hospital Services](#)
 - We added a link to "Hospital Services" in the [Eligible Providers](#) section.
 - We updated the title of the subsection "[If the incarcerated member had Medicare as the primary insurance and Medicare does not cover an inpatient hospital service](#)" section in **Covered Services**.
 - We replaced "recipient" with "member" to clarify that the services apply to a person enrolled in Minnesota Health Care Programs.
 - We added the legal reference for dental services, Minnesota Rules, 9505.0270 in the [Legal References](#) section.

September 20, 2021

Hospital Services

- [Critical Access Hospital \(CAH\) Services](#)
 - We changed Consolidated Chemical Dependency Treatment Fund (CCDTF) to Behavioral Health Fund (BHF) through out this section.
 - We revised the outpatient and inpatient payments. We deleted Payments through your Fiscal Year Ending in 2016 and Retroactive adjustments information under Outpatient Payments.
 - Under [CRNA Services](#), we have revised how to bill for Inpatient CRNA services and Outpatient CRNA Exemption and CRNA Non-Exemption. services.
 - Under [Exhausted Medicare Benefits](#), we added attachment requirements language when submitting claim for exhausted Medicare benefits.
 - Under [Outpatient Payments](#) and [Inpatient Payments](#), we updated Critical Access Hospital new rates, dates and when it goes into effect.

HCBS Waiver Services

- [Billing for Waiver and Alternative Care \(AC\) Program](#)
 - In the [Home and Community-Based Services \(HCBS\) Provider Service Documentation Requirements](#) section:
 - We moved the "Reference: Home and community-based services (HCBS) service documentation requirements are Laws of Minnesota 2019, 1st Spec. Sess. chapter 9, article 2, sections 122-126" to the top of the section for easier access for providers to reference.
 - We changed the reference from the Laws of Minnesota 2019, 1st Spec. Sess. chapter 9, article 2, sections 122-126 to reference the Minnesota Statutes, 256B.4912, subdivisions 11-15.
 - Under the For services authorized using a unit other than hourly or minute-based (such as daily or per

occurrence), we changed the example Corporate Adult Foster Care to 24-hour customized living.

- In the [Waiver services in a residential setting subsection](#), we added the 3 new waiver reimagine streamlined services to the list of waiver services covered in a residential settings:
- Community residential services (Effective Jan 2021)
- Family residential services (Effective Jan 2021)
- Integrated community supports (Effective Jan 2021)

September 17, 2021

Moving Home Minnesota (MHM)

- [Moving Home Minnesota \(MHM\)](#)
 - We changed the section title Eligibility to **Eligible Members**.
 - In the [Eligible Members](#) section, we made the following changes to the Qualified institution subsection:
 - We added the following two new categories that we define as a qualified institution:
 - 1115 Substance Use Disorder (SUD) System Reform Demonstration
 - Psychiatric Residential Treatment Facilities (PRTF) for children and adolescents
 - We added hyperlinks to most of the qualified institutions listed for providers to find more information
 - We clarified the eligibility for an individual residing in the qualified institution listed as the fourth bullet: Institution for Mental Diseases (IMD), such as Anoka Metro Regional Treatment Center. An individual residing in an IMD is eligible to the extent that the services are covered by federally funded Medical Assistance, as referenced in the Eligibility Policy Manual: [Program for People Living in Institutions for Mental Diseases](#) (section 2.5.4)."
 - In the [Eligible Providers](#) section, in "**The following forms are required for MHM enrollment and participation**," we removed "The 180 days of eligibility for transition coordination begins on the first date of the service that is billed in MMIS" since this is explained in the [Covered Services](#) section.
 - In the [Eligible Providers](#) section, in "**Currently Enrolled Providers**,"
 - We removed "the following services require specific qualifications and may be delivered only with DHS approval. These services include: certified peer specialist, youth assertive community treatment services, supported employment."
 - We changed the header "MHM Member Enrollment" to "**MHM Individual Application**."
 - In the **Assessment for MHM Services** subsection, in "Re-institutionalization," we changed the title to "**Re-institutionalization During MHM Participation**." We also clarified the text in this section.
 - In the [Billing](#) section,
 - We removed billing instructions for submitting claims for T2029 U6 Specialized Equipment and Supplies with its modifiers. This can now be found on the [Moving Home Minnesota Demonstration and Supplemental Services Table \(PDF\)](#).

September 15, 2021

Elderly Waiver (EW) and Alternative Care (AC)

- [Elderly Waiver \(EW\) and Alternative Care \(AC\) Program](#) – We updated the following information in the Elderly Waiver (EW) and Alternative Care (AC) Program section of the MHCP Provider Manual:
 - In [Case Management](#), in the **Lead Agency** subsection, we added a link to the [Community-Based Services Manual \(CBSM\)](#) for ease of access.
 - We clarified the text in the [Eligible Providers](#) section.
 - In the [Billing](#) section, we included Managed Care Organization (MCO) billing instructions.
 - We added the subsection: [Elderly Waiver Customized Living Services Rate Adjustment](#) in the **Billing** section.
 - We added the legal citation for Customized Living Services; Disproportionate Share Rate Adjustments in the [Legal References](#) section.
 - We deleted **Diagnosis Codes (ICD Codes)** and **Maximizing Other Payers** subsections under the **Billing** section because it is already on our Billing Waiver and Alternative Care (AC) Program section of the Provider Manual.
 - We deleted **Clients Leaving Nursing Facilities (Conversion Rates)** section because this information has been moved to the [CBSM - Elderly Waiver \(EW\) conversion rates](#).

September 9, 2021

Early Intensive Developmental and Behavioral Intervention (EIDBI)

- [Early Intensive Developmental and Behavioral Intervention \(EIDBI\) Benefit](#) – We added a [Transition and/or Discharge from an agency](#) section under Service Authorization that includes a new form to help providers when members are making a transition for EIDBI.

Equipment and Supplies

- [Urological and Bowel Supplies](#) – In the [Anal Irrigation System and Accessory Unit](#) section under Covered Services, we added that accessory units not provided in the initial dispensing of A4459 can be billed separately with A9900. We updated the accessory unit code from A9999 to A9990.

Pharmacy Services

• [Pharmacy Services](#)

- We removed the link for Unit Dose Dispensing in the table of contents links since we had already removed that section from this manual page.
- In [Prescribing Providers](#) section, we added:
- "Prescribers are required to comply with section 5042 of the Substance Use–Disorder Prevention that Promotes Opioid Recovery and Treatment (SUPPORT) for Patients and Communities Act when prescribing controlled substances to MHCP members. Section 5042 of the SUPPORT for Patients and Communities Act requires prescribers to check the prescription drug monitoring program (PDMP), hosted by the Minnesota Board of Pharmacy, before prescribing a controlled substances to an MHCP member. If a prescriber is unable to check the PDMP prior to prescribing a controlled substance, then the prescriber must document the good faith effort, including the reason why they were unable to check the PDMP. Prescribers may be required to submit the documentation of the failure to check the PDMP prior to prescribing a controlled substance to an MHCP member to DHS upon request."
- [Pharmacy Service Limitations](#):
- We removed the text stating that MHCP allows only one dispensing fee for a 34-day supply prescription.
- We added:
- "The medication must be listed on the 90-Day Supply Prescription Drug List."
- "If the smallest commercially available package size of a prescription drug would exceed a 34-day supply and the package cannot be divided, MHCP may issue an override for the increased supply."
- [Automatic Refills](#):
- We removed "cycle fills are only allowed for enrolled unit dose dispensing pharmacies for members residing in skilled nursing facilities."
- [Accepting Cash Payments](#):
- We removed "other than weight loss medications that are not part of the MA benefit, such as phentermine" in the fourth bullet.

Tribal and Federal Indian Health Services

• [Tribal and Federal Indian Health Services](#)

- We changed "recipient" to "MHCP member" throughout.
- In the [Examples of programs, facility type and applicable rate](#) section, we changed PMAP to MCO.
- We clarified text in the [Billing](#) section.

September 8, 2021

Provider Basics

Enroll with MHCP

- [Federally Qualified Health Center \(FQHC\) Enrollment Criteria and Forms](#) – We updated the Alternate Payment Methodology (APM) Election (DHS-3903) (PDF) form. We updated the title of the EFT Supplier ID Notification (DHS-3725) (PDF) form.

Chiropractic Services

- [Chiropractic Services](#) – In the [Evaluation and Management Services](#) chart, we deleted codes for 99201 and added codes 99204, 99205, 99214 and 99215, and updated and simplified existing descriptions for the codes effective Jan. 1, 2021.

September 2, 2021

Physician and Professional Services

• [Physician and Professional Services](#)

- In [Physician Services for Members in Inpatient Status](#), we added a section titled, "[Professional Services for Incarcerated Members](#)" to explain services covered for this group of members.
- We added a new section titled "[Telemonitoring \(Remote Physiological Monitoring Services\)](#)" to explain telemonitoring policy changes that are effective July 1, 2021.
- In [Legal References](#), we added the legal citation for the telemonitoring policy changes.

Mental Health Services

• [Youth Assertive Community Treatment \(Youth ACT\)/Intensive Rehabilitative Mental Health Services \(IRMHS\)](#)

- Under [Eligible Members](#), we expanded age eligibility to 8 years old or older and under 26 years old and changed an eligibility requirement to "Likely need for services from the adult mental health system during adulthood." In addition, the level of care determination for eligibility was amended to read "ages 8 through 18 must receive a level of 4 on the CASII and ages 19 through 26 must receive a level of 4 on the LOCUS."
- Under the [Service Standards](#) heading under Covered Services, we added a requirement for two separate

treatment teams: one for youth at least eight years old or older and under 16 years of age; and one for youth at least 14 years old or older and under 26 years old. We also added a requirement for teams to have specialized training in providing services to the specific age group of youth that the team will serve and re-established requirement for each client to have an individual treatment plan, which was inadvertently left off the last statute revision.

Equipment and Supplies

- [Diabetic Equipment & Supplies](#) – Under [Covered Services](#), we added external ambulatory insulin delivery system (insulin pods, A9274). Prior authorization is always required. We also added a [Noncovered Services](#) section.

Transportation Services

- [State-Administered Transportation Procedure Codes, Modifiers and Payment Rates](#)
 - We added a new [Overview section](#) in regards to billing claims in MN-ITS. We added the following **Note**: Any claims submitted on or after July 1, 2022, that do not list an MHCP-enrolled driver's unique Minnesota provider identifier (UMPI) as the rendering provider will deny. State-administered transportation organizations should begin the process of enrolling NEMT drivers in MHCP to qualify as a rendering provider. Previously the transportation organization was both the pay-to provider and the rendering provider. The enrollment process will take some time, so NEMT drivers should enroll with MHCP now.
 - We added a new [Claim Information](#) section to clarify information on claim submissions. updated information in regards to both the pay-to provider and the rendering provider. The pay-to-provider number must be the national provider Identification (NPI) or the unique Minnesota provider identifier (UMPI). The rendering provider number is the drivers UMPI number.
 - [Nonemergency Medical Transportation \(NEMT\) Services \(Overview\)](#)
 - We added new information to the Nonemergency Medical Transportation (NEMT) Services (Overview) for the public transit pass in the [Use of Public Transit](#) section.
 - The following information was deleted from the **Use of Public Transit** section: "The transportation coordinator compares the cost of the individual trips to the cost of a pass for the period and authorizes a pass when it is cost effective. If a pass is not cost effective, the transportation coordinator issues individual tickets for the exact number of rides requested."

COVID-19

- [Coronavirus \(COVID-19\)](#)
 - In [COVID-19 under Billing for Vaccines](#), we added the 3rd administration dose effective 8/12/2021 for Pfizer-Biontech and Moderna COVID-19 Vaccine. In addition, added a link from Minnesota Department of Health (MDH) for more information about who can receive vaccinations.
 - Under [Recertification](#), we explained the waiver will end and we added recertification deadlines of Aug. 30, 2021, for four mental health services providers.
 - Under **Changes in Requirements** in the [Documentation](#) section, we explained the waiver allowing providers to accept verbal consent in lieu of written consent for individual treatment plans for seven mental health providers will continue until further notice.
 - Under the [Customized Living Rate Add-On for EW, CADI or BI](#) section we made the following revisions:
 - Added a hyperlink to the Minnesota Statutes, 12.A. 10.
 - Moved the sentence referencing "Changes to COVID-19 rate add-on policy for customized living providers" up to the end of the 2nd paragraph for reference.
 - Added "The application deadline for this program was Sept. 30, 2020. After Sept. 30, 2021, DHS plans to end payments for this program" and added an updated eList announcement "Payments ending for COVID-19 customized living rate add-on" to reference for more details.

August 31, 2021

Substance Use Disorder (SUD) Services

- [Substance Use Disorder \(SUD\) Services](#) – Under the [1115 Substance Use Disorder System Reform Demonstration](#) residential treatment services billing heading in the Billing section, we added a sentence clarifying billing with the 1115 value 24 code.

August 30, 2021

Provider Basics

Provider Requirements

- [Access Services](#) – In the [Language Interpreter Services](#) section, we clarified when members may use their own interpreter.

Provider Basics

Enroll with MHCP

- [Housing Stabilization Services Enrollment Criteria and Forms](#) – In the first list of bullet points, we clarified mandated reporter training must be completed annually.

August 19, 2021

Substance Use Disorder (SUD) Services

- [Rule 25 Process](#) – We have changed Consolidated Chemical Dependency Treatment Fund (CCDTF) to Behavioral Health Fund (BHF). We also updated the contact lists under the [Placing Authority and MCO Notification](#) heading.

August 18, 2021

Substance Use Disorder (SUD) Services

- [Substance Use Disorder \(SUD\) Services](#)
 - We have added a [Utilization Management](#) section for 1115 SUD System Reform Demonstration
 - We have changed references from Consolidated Chemical Dependency Treatment Fund (CCDTF) to Behavioral Health Fund (BHF).

Individualized Education Program (IEP) Services

- [IEP Personal Care Assistance \(PCA\) Services](#)
 - Under [Noncovered Services](#), we clarified services provided in the home of the child or youth are not covered **except** during the time the child or youth is distance learning
 - Under [Billing](#), we clarified Place of service 12 (home) may be used when the child is distance learning and PCA services are identified in the child's IEP.

August 13, 2021

Early Intensive Developmental and Behavioral Intervention (EIDBI)

- [EIDBI and MCO Contact Information Grid](#) – MCO data has been updated with current information.

August 12, 2021

Provider Basics

- [Billing Policy Overview](#) – We added an [Overlapping MHCP and managed care organization \(MCO\) coverage](#) section which provides instructions for pharmacies on how to submit for overlapping coverage.

Provider Basics

Enroll with MHCP

- [Enrollment with Minnesota Health Care Programs \(MHCP\)](#) – In [section 4, Electronic funds transfer \(EFT\) or direct deposit](#), we changed the reference to "vendor number" to "supplier ID" to reflect changes to the language in the Supplier Portal enacted by the Minnesota Management and Budget office. We also clarified the [steps to sign up](#) for EFT direct deposit.
- [Physician and Physician Clinic Enrollment Criteria and Forms](#) – We revised the [How to Enroll](#) section to add the option to enroll using the Minnesota Provider Screening and Enrollment (MPSE) portal.

August 6, 2021

Provider Basics

[Health Care Programs and Services](#)

- We added major [program OO](#) to the Minnesota Health Care Programs (MHCP) table.
- Under [Incarcerated Members](#), we updated Incarcerated Member's Living Arrangement contact information and Incarcerated Member Billing information to explain a person may be eligible for MA payment for hospital services.

Rehabilitation Services

- [Rehabilitative Service Codes for Occupational Therapy, Physical Therapy and Speech-Language Pathology](#) – In the table section, "[Occupational Therapy and Physical Therapy](#)," we removed CPT 97610. This is a noncovered service.

August 5, 2021

COVID-19

[Coronavirus \(COVID-19\)](#)

- We moved the entry on **Family Members of MHCP-Enrolled PCA Members** from the Eligible Providers section and put it in the [Home Care and PCA Services](#) section under Cover Services Changes and Modifications.
- The [Family Members Providing Services for MHCP-enrolled Members](#) section informs providers that the

Minnesota Legislature reinstated the waiver allowing eligible family members of individuals enrolled in MHCP to be reimbursed for providing PCA care to their family members. This waiver is effective again starting July 1, 2021, and until further notice.

- In the [Targeted Case Management](#) section, clarified: Effective July 1, 2021, the Minnesota Legislature extended the telehealth program modification for targeted case management (TCM) services set to expire following the expiration of the state peacetime emergency. Until further notice, TCM services allows telephone and video-conferencing in place of in-person face-to-face contact.

Mental Health Services

- [Dialectical Behavior Therapy Intensive Outpatient Program \(DBT IOP\)](#) – Under [Concurrent Therapy](#) under the Authorization heading, we updated guidance on what services are allowed to be provided concurrently with DBT IOP. Other listed services remain excluded.

Provider Basics

Enroll with MHCP

- [Early Intensive Developmental and Behavioral Intervention \(EIDBI\) Provider Enrollment](#) – We changed the terminology for remote services from telemedicine to [telehealth](#).

August 4, 2021

School-Based Community Services (SBCS)

- [School-Based Community Services \(SBCS\)](#)
 - [Overview](#): We revised and condensed this section and removed Information on qualified professionals.
 - [Eligible Providers](#): We deleted the list of SBCS eligible providers. Schools will be able to find a complete list of eligible providers for each service area under Covered Services.
 - [Enrollment](#): We edited this section to clarify the enrollment instructions.
 - We added a [note](#) stating: Schools that are interested in providing Public Health Nursing Clinic Services will need to enroll as a [Public Health Nursing Clinic \(PHNC\)](#). PHNCs do not need to submit the School-Based Community Services (Intent to Bill) (DHS-8084) (PDF). Schools enrolling with Minnesota Health Care Programs as a PHNC use the PHNC national provider identifier (NPI) for billing. Please refer to the [PHNC Provider Manual](#) for more information on the PHNC covered services and billing information.
 - [Rendering Providers](#): We added this section to explain what schools need to do to verify that the rendering provider is qualified to provide SBCS.
 - **Managed Care**: We deleted this section.
 - **Third Party Liability (TPL)**: We deleted this section.
 - [Covered Services](#): We separated the SBCS Rehabilitation services links to individual covered services into headings for both [Rehabilitation Services](#) and [Mental Health services](#).
 - [Billing](#): We deleted links to each covered SBCS and removed specific billing claim information. Billing information can be located in [Billing Policy Overview](#), [MN-ITS User Manual](#), [MHCP Fee schedule](#).
 - **Resources**: This section was deleted.
 - [Legal References](#): We added a Legal citation.

August 3, 2021

Transportation Services

- [Local County or Tribal Agency Nonemergency Medical Transportation \(NEMT\) Services Claim, Service and Rate Information](#)
 - In [Overview](#), added Note: Beginning on July 1, 2021, local county and tribal agencies will now be required to use the NEMT driver's unique Minnesota provider identifier (UMPI) as the rendering provider on claims once the driver is enrolled with MHCP. Any claims submitted on or after July 1, 2022, not using the NEMT Drivers UMPI will deny. Previously the local county and tribal agencies were both the pay-to-provider and the rendering provider.
 - In [Claim Information](#), clarified pay-to provider number must be the local agency (county or tribe) national provider number or unique Minnesota provider identifier. The rendering provider number must be the driver's individual unique Minnesota provider identifier.

Substance Use Disorder (SUD) Services

- [Substance Use Disorder \(SUD\) Withdrawal Management Services](#) – We have changed references of Consolidated Chemical Dependency Treatment Fund (CCDTF) to Behavioral Health Fund (BHF).

Provider Basics

Enroll with MHCP

- [Recovery Community Organizations \(RCOs\)](#) – We changed Consolidated Chemical Dependency Treatment Fund

(CCDTF) to Behavioral Health Fund (BHF). We added information on [enrolling](#) using the Minnesota Provider Screening and Enrollment (MPSE) portal. Updated the list of required enrollment forms.

August 2, 2021

Transportation Services

- [Local County or Tribal Agency Nonemergency Medical Transportation \(NEMT\) Services](#) – In the [Enrollment](#) section, added the following new requirement:
 - Starting on July 1, 2021, nonemergency medical transportation (NEMT) drivers must now be enrolled with Minnesota Health Care Programs (MHCP) and be affiliated with the transportation provider organization.
 - Publicly operated transit systems, volunteers, not-for-hire vehicles and ambulance services are exempt from this enrollment requirements and do not need to enroll.
 - See [Transportation Enrollment Criteria and Forms](#) in the [Enroll with MHCP](#) section of the MHCP Provider Manual for how to enroll with MHCP.

July 29, 2021

Provider Basics

Enroll with MHCP

- [County Human Services Agency Enrollment Criteria and Forms](#) – Added information on [enrolling](#) using the Minnesota Provider Screening and Enrollment (MPSE) portal. Updated the list of required enrollment forms.

July 26, 2021

COVID-19

- [Coronavirus \(COVID-19\)](#) – Added a section titled [Targeted Case Management](#). Extended the Covid-19 parameters for Targeted Case Management (TCM) for covid-19 waiver extensions.

Immunizations and Vaccinations

- [Immunizations and Vaccinations](#) – In [Pharmacy](#) subsection, removed "Graduate from a college of pharmacy in 2001 or after" to update the credential requirements for Eligible Providers.

July 22, 2021

Individualized Education Program (IEP) Services

- [Covered and Noncovered IEP Health-Related Services](#) – Added [Store-and-Forward Telemedicine for IEP Services](#) section to inform providers that IEP policy has changed. Minnesota schools enrolled to provide Individualized Education Program (IEP) services and approved to provide telemedicine services can now use store-and-forward telemedicine when a child is distance learning at home for physical therapy, occupational therapy, and speech language therapy services.
- [IEP Personal Care Assistance \(PCA\) Services](#) – In [Noncovered Services](#), added an exception for distance learning. In [Billing](#), added place of service "home" is allowed for Individualized Education Program (IEP) Personal Care Assistance (PCA) services, if the child is distance learning.

Early Intensive Developmental and Behavioral Intervention (EIDBI) Benefit

- [Early Intensive Developmental and Behavioral Intervention \(EIDBI\) Benefit](#) – In the Submitting Claims section under Billing, we updated the allowances surrounding telehealth services to reflect the new parameters following legislative updates and the end of the state peacetime emergency.
- [Early Intensive Developmental and Behavioral Intervention \(EIDBI\) billing grid](#) – We revised the grid to change the allowances for telehealth delivery of services.

COVID-19

- [Coronavirus \(COVID-19\)](#)
 - In the [Family Members of MHCP-enrolled PCA Members](#) section, added that family members and spouses have been allowed to provide PCA care again, **starting July 1, 2021**
 - In the [Customized Living Rate Add-On for EW, CADI or BI](#) section, clarified that the rate add-on is available to providers delivering services in a setting that has had a confirmed COVID-19 case among its residents or staff between **Mar. 13, 2020, and July 31, 2020**.
 - In the [Early Intensive Developmental Behavioral Intervention \(EIDBI\) Individual Treatment Plans](#) section, added that this modification expired July 1, 2021, with the end of the state peacetime emergency declared by the governor.
 - In the [HCBS Waiver Services](#) section:
 - In [Remote Delivery of HCBS Waiver Services](#) subsection, added that this modification will **remain in effect**

until 2022, expiring six months after the end of the federal public health emergency.

- In **Adult Day Services** subsection, add that this modification will **remain in effect until 2022**, expiring six months after the end of the federal public health emergency.
- In Adult Day Center Licensing Requirements Modifications subsection, clarified that this modification expired on May 28, 2021.
- In the [Home Care and PCA Services](#) section:
 - In **Remote Delivery and Increased Billable Hours for PCA Services** subsection, clarified that the modification for remote QP visits was **extended through August 30, 2021**, and that the increase in billable hours for PCA services to 310 hours has been made permanent.
 - In **IEP Personal Care Assistance in the Child's Home** subsection, added that this modification will continue. See the [IEP](#) section of the MHCP Provider Manual.
 - In the [Interfacility Transport During COVID-19](#) section, added that this modification expires for dates of service **on or after Sept. 1, 2021**.
 - In the [Medications, Vaccines and Devices](#) section, in the **90-Day Supply for Certain Medications** subsection, clarified that this modification will **continue until Jan. 1, 2022**.
 - In the [Mental Health Services](#) section, in the **Targeted Case Management** subsection, clarified that this modification **expired on July 1, 2021**, with the end of the state peacetime emergency declared by the governor.
 - In the [Telemedicine](#) section, in the **Store-and-Forward Telemedicine for IEP Services** subsection, added that this modification will continue. See the [Telemedicine Services](#) section of IEP in the MHCP Provider Manual.
 - In the [Documentation](#) section, clarified that these modifications will **expire for dates of service on or after Sept. 1, 2021**.
- In the [IEP Personal Care Assistance in the Child's Home](#) section, added that this modification will continue. See the [Personal Care Assistance \(PCA\)](#) section in IEP in the MHCP Provider Manual.

July 21, 2021

Provider Basics

Enroll with MHCP

- [Indian Health Service \(IHS\) Enrollment Criteria and Forms](#) – Updated to add the option of completing [enrollment](#) using the Minnesota Provider Screening and Enrollment (MPSE) portal.

Provider Basics

- [Provider Requirements](#) – We changed references to Consolidated Chemical Dependency Treatment Fund (CCDTF) to [Behavioral Health Fund](#) (BHF).

July 19, 2021

Laboratory/Pathology, Radiology & Diagnostic Services

- [Laboratory and Pathology Services](#) – We changed Consolidated Chemical Dependency Treatment Fund (CCDTF) to [Behavioral Health Fund](#) (BHF).

Hospital Services

- [Inpatient Hospitalization for Detoxification Guidelines](#) – We changed Consolidated Chemical Dependency Treatment Fund (CCDTF) to [Behavioral Health Fund](#) (BHF).

Housing Stabilization Services

- [Housing Stabilization Services](#) – Under [Billing](#), we updated copy under the Documentation requirements heading to explain the name and title of staff who delivered services must be documented.

July 16, 2021

Individualized Education Program (IEP) Services

- [IEP Record Keeping and Documentation](#) – In the [Special Transportation](#) section, we clarified if a school creates a self-designed trip log, it is the responsibility of the school that their version meets the same requirements as the DHS version. DHS does not review or approve documents created by the school. Under [Personal Care Assistance \(PCA\)](#) section, clarified if a school creates a self-designed PCA Activities Checklist, it is the responsibility of the school that their version meets the same requirements as the DHS version. DHS does not review or approve documents created by the school.

July 15, 2021

Provider Basics

Enroll with MHCP

- [Transportation Enrollment Criteria and Forms](#) – In the [How to Enroll](#) section, information has been added for how to enroll non-emergency medical transportation (NEMT) drivers. Transportation agencies need to submit the [MHCP Individual Provider Enrollment Application \(DHS-4016\) \(PDF\)](#) and [MHCP Individual Non-Pay-To Provider Agreement \(DHS-4611A\) \(PDF\)](#) for individual NEMT drivers.

July 12, 2021

Equipment and Supplies

- [Incontinence Products](#) – Removed incontinence policy tables that were good for 2019/2020 as timely filing period for previous tables of quantity limits has passed.

July 8, 2021

School Services

- [School-Based Community Services](#) – This is a new Minnesota Health Care Program (MHCP) Provider Manual section for School-Based Community Services (SBCS).

Effective July 1, 2021, Minnesota public schools will be able to bill for SBCS.

SBCS are not new or expanded services; they are part of the Medical Assistance (MA) benefit package. Schools have the option in providing these services to help students that are not receiving health-related services through an Individualized Education Program (IEP) or an Individualized Family Service Plan (IFSP). In addition, some children on IEP or IFSP may also qualify for SBCS services not covered under their existing program. SBCS are provided in the school by a qualified professional working within their scope of practice.

In this manual section, you will find covered services, eligibility, billing and resources information.

July 7, 2021

Hospital Services

- [Inpatient Hospital Services](#) – In the [Eligible Members](#) section, updated the text for "Incarcerated Member's Eligibility." In [Legal References](#) section, add the legal reference for a person detained by law.

July 2, 2021

Nursing Facilities

- [Nursing Facilities](#) – Under [Physician Visits for NF and Boarding Care Recipients](#), we updated copy to read under state rule, a resident must have a current admission medical history and complete physical examination performed and recorded by a physician, physician assistant or nurse practitioner within five days before or within seven days after admission. After the admitting examination, the physician must see the resident at least every 30 days for the first 90 days after admission and then whenever medically necessary. A physician visit is considered timely if it occurs within 10 days after the date the visit was required.

June 30, 2021

Individualized Education Program (IEP) Services

- [Individual Education Program \(IEP\) Services Providers](#) – Updated [contact](#) for IEP Provider Contact List to dhs.iep.contactlistupdate@state.mn.us.

June 18, 2021

Moving Home Minnesota

- [Moving Home Minnesota Demonstration and Supplemental Services Table](#)
 - We removed outdated dates and simplified the Limits Time Span column for Transition Planning, Transition Coordination, and Services.
 - We updated the **Rates** column to reflect rates effective 7/1/2021.
 - We removed services: Certified Peer Specialist, Psychoeducation Services, Youth Assertive Community Treatment and Family Memory Care Intervention.
 - We changed the service name Post-discharge Case Consultation and Collaboration to **Home Care Training - Family and Non-family** (previously known as Post-discharge Case Consultation and Collaboration).

June 17, 2021

Provider Basics

Enroll with MHCP

- [Moving Home Minnesota \(MHM\) Provider Enrollment](#)

- We removed:
- The number of steps to follow when enrolling and replaced with a bulleted list.
- Processing Timelines was removed and can be found on the [Enroll With MHCP](#) manual page
- We added:
- The option to enroll with MHCP or make enrollment requests using the [Minnesota Provider Screening and Enrollment \(MPSE\) portal](#) as an alternative to faxing documents
- Revalidation section
- Clarification on how changes can be reported
- Correction to the form number for [HCBS Programs Lead Agency Provider Enrollment Request Form \(DHS-6383\) \(PDF\)](#)

Transportation Services

- [Access Services Ancillary to Transportation](#) – In the [Lodging Reimbursement Requirements](#) section, updated following bullet: Reimbursement is allowed for the member and, when appropriate, reimbursement for a second room for one responsible person.

June 10, 2021

Mental Health Services

- [Adult Residential Crisis Stabilization Services \(RC S\)](#) – Under [Billing](#), we updated guidance for billing using MN-ITS 8371.
- [Intensive Residential Treatment Services \(IRTS\)](#) – Under [Billing](#), we updated guidance for billing using MN-ITS 8371.

June 7, 2021

Hospital Services

- [Inpatient Hospital Services](#) – Made the following changes to the following sections:
 - Added billing procedure for incarcerated member enrolled in MCO.
 - Updated [incarceration](#) sections (eligibility and billing) - MA will cover inpatient hospital care for eligible people who are incarcerated and then admitted to an inpatient hospital.
 - [Detoxification](#) section clarified the following sentence, "Do not use Basic Billing Instructions for Substance Use Disorder Services designated for admissions covered under the Behavioral Health Fund (BHF)." Removed the word "Consolidate Chemical Dependency Treatment Fund (CCDTF)."
 - In the [Noncovered Services](#) section, replaced the word chemical dependency with substance use disorder. Replaced the word CCDTF with Behavioral Health Fund (BHF).
 - Removed outdated dates.

Equipment and Supplies

- [Respiratory Equipment](#)
 - Under [Covered Services](#), we provided two examples of when both a portable and stationary ventilator may be covered.
 - Under [Noncovered Services](#), we added a reminder that manual resuscitation bags are covered.
 - Under [Authorization](#), we explained authorization requests for a second ventilator must include a letter of medical necessity and we added the criteria that must be addressed and documentation required in the letter of medical necessity.

June 4, 2021

Provider Basics

Enroll with MHCP

- [Community Mental Health Center Enrollment Criteria and Forms](#) – This is a new MHCP Provider Manual section that provides enrollment requirements and lists the enrollment forms for community mental health centers.

June 2, 2021

Provider Basics

Enroll with MHCP

- [Early Intensive Developmental and Behavioral Intervention \(EIDBI\) Provider Enrollment](#) – Under CMDE Providers under the Enrollment for EIDBI Providers heading, we added language to clarify the requirements for enrolling as a [CMDE clinical trainee](#).

Immunizations and Vaccinations

- [Immunization and Vaccine Benefits Codes for Children](#) – Vaxelis (DtAP-IPV-Hib-HepB) is available through

MnVFC program as of June 1, 2021. CPT code [90697](#) and the description have been added to the table "Vaccines and Toxoids Available Through MnVFC." Table descriptions were revised for ease of use.

May 28, 2021

Mental Health Services

- [Intensive Residential Treatment Services \(IRTS\)](#) – Under [Covered Services](#), we added Room and Board for Medical Assistance enrolled members only. Under [Billing](#), we added the Room and Board revenue code and service limitations.
- [Adult Residential Crisis Stabilization Services \(RCS\)](#) – Under [Covered Services](#), we added Room and Board for Medical Assistance enrolled members only. Under [Billing](#), we added the Room and Board revenue code and service limitations.
- [Inpatient Hospitalization for Detoxification Guidelines](#) – Under [Billing](#), we clarified that chemical dependency rehabilitation services should be billed separately from detoxification services.

Child and Teen Checkups (C&TC)

- [Child and Teen Checkups \(C&TC\)](#)
 - We removed 2018 dates throughout the manual where listed with component requirements added in 2018.
 - Under [Covered Services](#), we updated and clarified information under the Screening for Autism Spectrum Disorder (ASD) in Toddlers heading.
 - Under [Resources](#), we updated the Fluoride varnish training information under the Training heading to be consistent with the oral health/FVA Fact Sheet.

May 21, 2021

COVID-19

- [Coronavirus \(COVID-19\)](#) – The U.S. Food and Drug Administration expanded the emergency use authorization (EUA) for the Pfizer-BioNTech COVID-19 vaccine for the prevention of COVID-19 caused by severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) to include [adolescents 12 through 15 years](#) of age. The FDA amended the EUA originally issued on Dec. 11, 2020, for administration in individuals 16 years of age and older. Providers may submit claims from May 10, 2021, and going forward.

May 19, 2021

Provider Basics

Billing Policy

- [Out-of-State Providers](#) – Under [Billing](#), we deleted information about out of state providers submitting paper claim. All claims must be submitted electronically.

Provider Basics

Enroll in MHCP

- [Early Intensive Developmental and Behavioral Intervention \(EIDBI\) Provider Enrollment](#) – We changed enrollment for EIDBI to require an advanced certification in a treatment modality for Qualified Supervising Professionals.

May 18, 2021

- [New License Required for Customized Living Services](#) – Replaced the link to this subpage with a link to the new License requirement changes for customized living services providers webpage.

Provider Basics

Enroll in MHCP

- [Home and Community-Based Services \(HCBS\) Programs Provider Enrollment](#) – We removed the link to the subpage for more information about the new license required for customized living services and [added a link](#) to the new License requirement changes for customized living services providers webpage, effective Aug. 1, 2021.

May 12, 2021

Substance Use Disorder (SUD)

- [Substance Use Disorder \(SUD\)](#)
- In the [1115 Substance Use Disorder System Reform Federal Demonstration Project](#) section under [Covered Services](#), we clarified that hospitals and Withdrawal Management services are not eligible for the 1115 Demonstration residential rate enhancement.

May 11, 2021

Substance Use Disorder (SUD)

- [Substance Use Disorder \(SUD\)](#)
- We added [1115 Substance Use Disorder \(SUD\) System Reform Federal Demonstration Project](#) information to this manual.
- Under [Eligible Members](#), we added a hyperlink to the SUD Withdrawal Management Services section of the MHCP Provider Manual.

Provider Basics

Enroll with MHCP

- [Substance Use Disorder \(SUD\) Services Enrollment Criteria and Forms](#) – We have added [1115 Substance Use Disorder System Reform Federal Demonstration Project](#) enrollment information to this provider enrollment webpage.

May 3, 2021

Provider Basics

Enroll with MHCP

- [Home and Community-Based Services \(HCBS\) Programs Provider Enrollment](#) – We added a paragraph in the list of programs at the beginning of this page (third paragraph) with instructions on how to enroll to provide customized living services. We also provided a link to a [new subpage](#) for more information about the new license required for customized living services, effective Aug. 1, 2021.
- [New License Required for Customized Living Services](#) – This is a new page linked to the [Home and Community-Based Services Programs Provider Enrollment page](#). This page provides information about the legislative changes to the license requirements for customized living services providers. This page explains the new legislation and the steps providers must take to continue to provide customized living services, or if they choose not to obtain the new assisted living facility license.

April 30, 2021

Provider Basics

Provider Requirements

- [Billing Organizations/Responsibilities](#) – Corrected form title for Electronic Remittance Advice (RA) Request (DHS-4087) (PDF).

Provider Basics

Enroll with MHCP

- [Enrollment with Minnesota Health Care Programs \(MHCP\)](#) – Added information on [Consolidated Providers](#).

April 29, 2021

Mental Health Services

- [Diagnostic Assessment](#) – Under [Billing](#), we have updated psychological testing codes to 96130, 96138 and 96146.

April 23, 2021

Child and Teen Checkups

- [Child and Teen Checkups \(C&TC\) – Abbreviations and Acronyms](#) – We have added, updated or deleted entries on this webpage.

Immunizations and Vaccinations

- [Immunization and Vaccine Benefits Codes for Children](#) – In the section [Vaccines and Toxoids Available Through MnVFC](#), added CPT code 90619, eligible for ages 2 - 18 years. Claims may be submitted to MHCP following the Child Billing instructions.

April 20, 2021

Provider Basics

Enroll with MHCP

- [Day Training and Habilitation for ICF/DD Enrollment Criteria and Forms](#)
 - We made multiple revisions to update the enrollment criteria and forms for Day Training and Habilitation (DT&H) services eff. Jan. 11, 2021, as part of the Waiver Reimagine project:
 - Section title changed from "Day Training and Habilitation Enrollment Criteria and Forms" to "Day Training and Habilitation for ICF/DD Enrollment Criteria and Forms."
 - Added verbiage at the top of the page about DT&H being streamlined to Day Support Services covered under the Developmental Disability (DD) effective Jan. 11, 2021, and to see Home and Community-Based Services (HCBS) Programs Provider Enrollment page to enroll for Day Support Services.

- Added verbiage clarifying that DT&H services can only be provided to people living in Intermediate Care Facilities for People with Developmental Disabilities (ICF/DD residences) after Jan. 11, 2021.
- Under [How to Enroll](#), we clarified DT&H providers who are to provide DT&H services to people living in ICF/DD are to follow the enrollment steps.
- Under Step 3, completing the following documents required to enroll as a DT&H provider and fax your materials to MHCP Provider Eligibility and Compliance at 651-431-7493 we revised the following:
- First bullet point, we removed the "Home and Community-Based Services (HCBS) - Provider Enrollment Application (DHS-4015) (PDF)" and replaced it with a new application "Day Training and Habilitation ICF/DD - Provider Enrollment Application (DHS-8121)(PDF)."
- We removed the fourth bullet that had HCBS Programs Service Request Form (DHS-6638) (PDF) with the Waiver Transportation Provider Assurance Statement (DHS-6189Y)(PDF) and Home and Community-Based Settings Provider Assurance Statement (DHS-7618)(PDF).
- After [Proof showing you are qualified to provide the services, including but not limited to:](#), we revised:
- First bullet "Needs Approval Letter" to "Need Determination Authorization letter".
- 6th bullet, we added DHS Licensing Help Desk's contact number for questions regarding licensing standards.
- We removed the bullet that had Designation of HCBS Waiver or AC Program Billing Person (DHS-6855) (PDF).
- We completely removed Step 4. Have the owner or managerial official complete the required HCBS Waiver and AC Provider Training 101 and competency test.
- We removed processing timeframe verbiage because this information is already posted on the [Enroll With MHCP Provider Manual](#) page.

April 15, 2021

Equipment and Supplies

- [Bone Growth Stimulators](#) – In the [table of FDA-approved devices](#), we added ActaStim-S by Theragen under HCPCS code E0748. This device gained FDA approval in December of 2020. See the table for additional information.

April 9, 2021

COVID-19

- [Coronavirus \(COVID-19\)](#)
 - In **Medications**, [Vaccines and Devices](#), in the Investigational Drugs, Vaccines, Devices and Associated Services section, updated text to reflect currently approved COVID-19 medications and vaccines.
 - In **Change in Requirements**, in the [Documentation section](#), added text explaining providers may accept verbal consent in lieu of written consent for individualized treatment plans during COVID-19 for certain services.
 - In **Billing**, in the [Vaccines section](#), the billing for COVID-19 vaccine information was updated. Updated providers who can bill for administering COVID-19 vaccines. Removed billing requirement for reporting COVID-19 vaccine codes. SL modifier will be removed and is no longer needed for child billing (COVID-19 vaccine only). Added eligible ages for COVID-19 vaccines.

April 2, 2021

Mental Health Services

- [Dialectical Behavior Therapy Intensive Outpatient Program \(DBT IOP\)](#) – We added policy guidance and requirements for Adolescent DBT under [Eligible Members](#) and [Covered Services](#). We updated the [Billing grid](#) to include DBT Adolescent billing codes and modifiers. We added Adolescent DBT exclusionary services.

Dental Services

- [Dental Benefits for Children and Pregnant Women](#) – Added in section [Orthodontics \(Children through Age 20\)](#): Orthodontia services approved with a Prior Authorization will now have a 3-year limit. Previously, the limit was 2 years.

Housing Stabilization Services

- [Housing Stabilization Services](#) – Under [Billing](#), we updated language differentiating fee-for-service billing and MCO billing.

March 31, 2021

Substance Use Disorder (SUD) Services

- [Substance Use Disorder \(SUD\) Services](#) – Under [Eligible Providers](#), we added DAANES policy and email contact information.

March 25, 2021

Mental Health Services

- [Psychological Testing](#) – In the [Psychological testing chart](#) under Billing, we explained code 96131 must be used in conjunction with code 96130, code 96137 must be used in conjunction with code 96136 and code 96139 must be used in conjunction with code 96138.

Officer-Involved Community-Based Care Coordination Services

- [Officer-Involved Community-Based Care Coordination Services](#) – Officer involved community-based care coordination helps members navigate services to address a client's mental health, chemical health, social, economic, and housing needs, or any other activity targeted at reducing the incidence of jail utilization and connecting individuals with existing covered services available to them.

Provider Basics

Enroll with MHCP

- [Licensed Independent Clinical Social Worker \(LICSW\) Enrollment Criteria and Forms](#) – Added information about enrolling using the Minnesota Provider Screening and Enrollment (MPSE) portal in [How to Enroll](#) section. Added section on [Medicare Enrollment Denials](#).

March 23, 2021

Substance Use Disorder (SUD)

- [Substance Use Disorder \(SUD\) Withdrawal Management Services](#) – Residential Substance Use Disorder Withdrawal Management services have been added to the state Medicaid benefit and are eligible for reimbursement. Eligible providers include all providers who hold an active 245F license.

March 22, 2021

Provider Basics

- [Managed Care Organizations \(MCOs\)](#) – Under [Carve-out Services](#), we:
 - Clarified text for EW services for EW members on MSHO and MSC+
 - Added new bullet point for new service Officer-Involved Community-Based Care Coordination

March 15, 2021

Immunizations and Vaccinations

- [Immunization and Vaccine Benefits Codes for Adults](#) – This section has been updated for 2020-2021 flu vaccines.

March 10, 2021

Rehabilitative Services

- [Rehabilitative Service Codes for Occupational Therapy, Physical Therapy and Speech-Language Pathology](#) – Corrected modifier from GP to GO for procedure [code 97165](#). Corrected modifier to GP for [code 97161](#). Corrected formatting in section "[Therapeutic techniques with direct patient contact](#)" to show modifiers.

Transportation Services

- [Access Services Ancillary to Transportation](#) – MTM-MNET [contact information](#) was updated for members who reside in Aitkin, Carlton, Lake, and St. Louis County. Smart Link contact information was also added. The word "recipient" was changed to "member" throughout.

March 5, 2021

COVID-19

- [Coronavirus \(COVID-19\)](#) – In Covered Services, added [Interfacility Transport During COVID-19](#) section. In the Vaccines section in Billing, added [CPT codes](#) 91303 and 0031A, definitions and dosages for the newest COVID-19 vaccine.

Reproductive Health/OB-GYN

- [Reproductive Health/OB-GYN](#) – Added link for the Breast and Cervical Cancer (BRCA) Genetic Testing and Presumptive Eligibility Services section to the page.
- [Breast and Cervical Cancer \(BRCA\) Genetic Testing and Presumptive Eligibility Services](#)
 - Presumptive Eligibility has been expanded to include both the Minnesota Department of Health Sage program and the newly added American Indian Cancer Foundation's Screen Our Circle program for urban American Indian Women.
 - This section combines the Presumptive Eligibility for Breast and Cervical Cancer section with the BRCA Genetic Mutation Testing for Breast and Ovarian Cancer Susceptibility section for ease of access and use for providers and recipients.

Anesthesia Services

- [Anesthesia Services](#) – In the MHCP Anesthesia Payment Formulas section under **Billing**, the [2021 Anesthesia Rates chart](#) was added.

Mental Health Services

- [Children's Mental Health Crisis Response Services](#) – Under [Overview](#), we removed language to allow children's crisis response services to be provided in urgent care and outpatient hospital setting according to legislative change.

March 3, 2021

Mental Health Services

- [Mental Health Services](#) – Under [Eligible Providers](#), in the Medicare Enrollment Denials heading, we added providers not eligible to enroll with Medicare may provide services to Minnesota Health Care Programs members, including dually eligible members. You must notify the Medical Review Agent that the treating provider is not eligible to enroll with Medicare when requesting authorization of mental health services.

Provider Basics

Enroll with MHCP

- [PCA Provider Agency Enrollment](#) – MHCP is removing the annual review section as it was made obsolete by legislative session, and adding the new law that revalidation will be every three years for PCA agencies.

March 1, 2021

Early Intensive Developmental and Behavioral Intervention (EIDBI)

- [Early Intensive Developmental and Behavioral Intervention \(EIDBI\) Benefit](#) – Under [Additional Resources](#), we added the Native American EIDBI brochure.

Child and Teen Checkups (C&TC)

- [Child and Teen Checkups \(C&TC\) Health Insurance Portability and Accountability Act \(HIPAA\) Referral Coding Information](#) – In the [Two-character C&TC Referral Codes and HIPAA definitions chart](#), we updated definitions for codes NU, ST, AV and S2.

February 24, 2021

Early Intensive Developmental and Behavioral Intervention (EIDBI)

- [Early Intensive Developmental and Behavioral Intervention \(EIDBI\) billing grid](#)
 - Under **Billing instructions**, we added: The following EIDBI services may be billed without the member present:
 - Comprehensive Multi-Disciplinary Evaluation (CMDE)
 - Individualized Treatment Plan (ITP)
 - Family/ Caregiver Training and Counseling
 - Coordinated Care Conference
 - Travel time
 - In the **chart**, we changed the reimbursement percentage rate to 100% for Level II providers using procedure code 99366 Coordinated Care Conference.

February 22, 2021

Equipment and Supplies

- [Incontinence Products](#) – Under Covered Services, we updated the [table](#) years from 2020 to 2020-2021.

COVID-19

- [Coronavirus \(COVID-19\)](#) – In the [Billing](#) section, added update to billing system to allow billing Individualized Education Program (IEP) Personal Care Assistance (PCA) services in the home.

February 16, 2021

Pharmacy Services

- [Compound Drugs](#)
 - In [Compounded Intravenous \(IV\) and Total Parenteral Nutritional \(TPN\) Drugs](#) section, changed pharmacy dispensing fee to \$10.48 per claim and IV solutions to \$10.48 per bag.
 - In [Compound Billing and Rejected Claim Options](#) section, added: Use the Minnesota Medicaid Fee-For-Service drug search to review coverage parameters for individual national drug codes (NDCs).

February 10, 2021

Home Care Services

- **[Home Care Services](#)**
 - In [Eligible Providers](#) section, clarified in the third bullet that one category of eligible providers must be "Independent registered nurse or independent licensed practical nurse who can attest to all statements on the Home Care Nurse - Individual LPN or RN Provider Assurance Statement (DHS-7099) (PDF)."
 - In [Eligible Members](#) section, changed "Waivered Service Programs" to "Alternative Care Program."
 - In [Covered Services](#) section, added advanced practice registered nurse (APRN) or physician assistant (PA) as new allowable provider types for ordering homecare services.
 - In [Home Care and Individualized Education Plans \(IEP\)](#), removed waiver services. Also, removed, "The IEP services do not count against the prior authorization cap for home care services, will not count again the waiver cap or affect the amount of services available under the waiver, and do not count against DHS service limitations or thresholds for therapies."
 - In [Noncovered Services](#) section, added APRN or PA to first bullet.
 - Also, added, "or MinnesotaCare members over age 18" to fifth bullet.
 - Changed 9th bullet to read: "HCN and PCA Services provided when the number of foster care residents is greater than six, unless conditions are met for granting a variance for a sibling group."
 - In [Authorization Requirements](#), **Submit authorization requests**, changes text to read: "For home care services through the MA state plan, submit authorization requests for SNV, HHA, and HCN following the instructions on MHCP Provider Manual -- Home care authorization requests page."
 - In third paragraph, added, "The home care authorization requests for skilled nurse visits and home health aide visits must be received within 20 business days of the start of service."
 - In table "[Reasons for an exception to prior authorization table](#)," fifth row, third column, changed text to read: "MHCP cannot authorize waiver or Alternative Care (AC) services requested by a home care provider. Refer to [Waiver and Alternative Care programs overview](#) for more information about waiver and AC programs."
 - In "Changes in Medical Status or Primary Caregiver Availability," added "APRN, or PA orders" to second sentence.
 - In [Legal References](#), added "Minnesota Statutes, 245A.04, subdivision 9a (Foster Care Variance)"

Rehabilitation Services

- **[Rehabilitation Services](#)** – Added a link to the [Rehabilitation Billing Entity Enrollment Criteria and Forms](#) page in the bookmarks section at the top of the page and in the [Rehabilitation Billing Entities](#) section.

February 9, 2021

Provider Basics

Enroll with MHCP

- **[Certified Registered Nurse Anesthetist Enrollment Criteria and Forms](#)** – Added information about [enrolling](#) with Minnesota Provider Screening and Enrollment (MPSE) portal.

February 8, 2021

COVID-19

- **[Coronavirus \(COVID-19\)](#)**
- Under [Changes in Requirements](#), we added a **Revalidation** subsection that explains MHCP has postponed provider revalidation efforts during the peacetime emergency.
- Under [Vaccines](#) in the **Billing** section, we clarified the American Medical Association is responsible for the creation or approval of the CPT codes and the Food and Drug Administration approves the vaccine.

February 5, 2021

Dental Services

- **[Dental Benefits for Children and Pregnant Women](#)** – In Diagnostic section, periodic exam ([d0120](#)) service limit removed.

February 4, 2021

Provider Basics

Enroll with MHCP

- **[Home Care Nurse Enrollment Criteria and Forms](#)** – Added information about [enrolling](#) using the Minnesota Provider Screening and Enrollment (MPSE) portal.

Provider Basics

Enroll with MHCP

- **[Electronic Data Interchange \(EDI\) Trading Partner Enrollment Criteria and Forms](#)** – Added information about [enrolling](#) using the Minnesota Provider Screening and Enrollment (MPSE) portal.

February 3, 2021

Moving Home Minnesota (MHM)

- [Moving Home Minnesota \(MHM\)](#)

- DHS's **Moving Home Minnesota** program has been extended and more people are now eligible for help moving from institutions into the community.
- At the federal level, the program is known as Money Follows the Person. Late in December, Congress extended the Money Follows the Person grant and eased eligibility requirements. People now can qualify for Moving Home Minnesota after a 60-day stay in an institution rather than a 90-day stay. The 60 days may now include days covered by both Medicare and Medical Assistance (Minnesota's Medicaid program). Previously, only stays covered by Medical Assistance qualified.
- As a result, we made the following updates to this manual page:
- In [Eligibility](#), changed 90-day requirement to 60-day requirement. Deleted that "Medicare paid days do not count toward 90-day requirement."
- In [Eligible Providers](#), changed registered with the state as one of the qualified providers shown on the Moving Home Minnesota Demonstration and Supplemental Services table (PDF) to "an MHCP-enrolled provider of a service identified on the Moving Home Minnesota Demonstration and Supplemental Services table (PDF)."
- In [Changes and Ending Enrollment with MHM](#), under **Post-transition**, during case management, the person, clarified text.
- In [MHM State Plan Services](#), deleted the following:
 - Certified peer specialist for people with mental illness
 - Psychoeducational services for children with mental illness
 - Youth Assertive Community Treatment
 - Family memory care (less than 65 years of age)
- Also, changed "Supported employment (less than 65 years of age)" to "Incentive benchmark payment to Supported Employment."
- In [Legal References](#), updated legal citations.

February 2, 2021

Physician and Professional Services

- [Health Care Homes \(HCH\)](#) – Under Health Care Home there is a change for "[Eligible Providers](#)". Minnesota Department of Health (MDH) will send approved Health Care Homes (HCH) clinics and providers certifications directly to DHS. Providers will no longer have to send the certifications or recertifications directly to DHS.

February 1, 2021

Provider Basics

Enroll with MHCP

- [Home and Community-Based Services \(HCBS\) Programs Provider Enrollment](#) – In the last paragraph of the [opening text](#), clarified that only newly enrolling day support service providers must obtain a needs determination authorization letter from the Department of Human Services - Disability Services Division (DHS-DSD). Providers who are already enrolled in Adult Day Care, Day Training and Habilitation, or Structured Day programs prior to Jan. 1, 2021 do not need to obtain a needs determination authorization letter.

January 28, 2021

COVID-19

- [Coronavirus \(COVID-19\)](#) – Under [Vaccines](#), we clarified providers should bill claims for administering COVID-19 vaccines and pediatric vaccines for children ages three through 18 years old on an 837P professional claim using the enrolled pharmacy's National Provider Identifier (NPI) as the rendering provider and pay-to provider.

Provider Basics

Provider Requirements

- [Access Services](#) – We updated fonts to better differentiate subsections of this manual section from its main sections.

January 26, 2021

Provider Basics

Enroll with MHCP

- [Public Health Nursing Clinic \(PHNC\) Enrollment Criteria and Forms](#) – Revised the section on [Enrollment Criteria](#), Revalidation and [Reporting Changes](#) to clarify the process if using the Minnesota Provider Screening and Enrollment (MPSE) portal versus faxing the forms.

January 22, 2021

Provider Basics

Enroll with MHCP

- [Early Intensive Developmental and Behavioral Intervention \(EIDBI\) Provider Enrollment](#) – Added language to encourage providers to report to DHS when they are no longer providing EIDBI services so that we can remove the information from the [provider directory](#).

January 20, 2021

HCBS Waiver Services

[HCBS Waiver Services](#)

- We added a section titled [Waiver Reimagine Project](#) with a table that shows the streamlined services and available resources related to the waiver reimagine project.
- We also updated the [Covered and Noncovered Services](#) to add the 6 new streamlined services with links to their Community-Based Services Manual pages: Community residential services, Day support services, Family residential services, Individualized home supports (without training, with training, with family training).

Transportation Services

- [Local County or Tribal Agency Nonemergency Medical Transportation \(NEMT\) Services Claim, Service and Rate Information](#) – In the table for [Procedure codes and payment rates for licensed foster parent and volunteer drivers](#), updated rates for A0080 and A0090 UC.

January 19, 2021

MHCP Member Evidence of Coverage

[MHCP Member Evidence of Coverage](#)

- Under Covered Services:
 - In the [Early intensive developmental and behavioral intervention](#) section:
 - We removed the first sentence "Early intensive developmental and behavioral intervention became a covered service as of July 1, 2015."
 - We removed the date July 1, 2015 leading the "covered services are as follows:" and the "noncovered services are as follows:"
 - In the [Home and community-based waiver services](#) section:
 - We removed Day training and habilitation (DT&H), In-home family supports, Remote support - Individualized home supports and supported living services for adults in own home, Personal support, Residential habilitation, Structured day program
 - We added Case management aide, Community Residential Services, Day Support Services, Employment exploration services, Employment development services, Employment support services, Family Residential Services, Individualized home supports (without training, with training, with family training)
 - We made minor name changes for consistency with other manual pages on two services:
 - Independent living skills training and therapies changed to Independent living skills therapy
 - Specialized supplies and equipment changed to Specialized equipment and supplies
 - In the [Moving Home Minnesota \(MHM\)](#) section:
 - We removed Supported employment services (if you are under 65 years of age)(ended Aug. 31, 2018)

January 14, 2021

COVID-19

- [Coronavirus \(COVID-19\)](#) – Reorganized the content in this section into provider service topics so that information related to a service topic is grouped together. Also, rearranged subheads alphabetically. We did not change any policy content in this revision.

Early Intensive Developmental and Behavioral Intervention (EIDBI)

- [Early Intensive Developmental and Behavioral Intervention \(EIDBI\) Benefit](#) – Under [Billing](#), we explained beginning Jan. 1, 2021, EIDBI providers are no longer required to bill a member's commercial insurance policy before billing MA for all services in the EIDBI benefit.

January 8, 2021

COVID-19

[Coronavirus \(COVID-19\)](#)

- In the section, [Pharmacists Ordering and Administering COVID-19 and Pediatric Vaccines](#):
 - Clarified that claims must be billed using the enrolled pharmacy's National Provider Identifier (NPI) as the rendering provider and pay-to provider.

- Also, added [COVID-19 eligible vaccine codes](#) and their corresponding administration codes, along with [billing instructions](#) for the vaccines.
- Vaccine administration will be reimbursed at the rate of \$10.86. As a reminder, vaccines are exempt from cost-sharing.
- The following information applies to the COVID-19 vaccine only. For all other vaccines, follow the instructions found in the [Immunizations and Vaccines](#) section of the MHCP Provider Manual.
- Please contact the MHCP Provider Call Center at 651-431-2700 with any related questions.

January 5, 2021

Provider Basics

Enroll with MHCP

- [Home and Community-Based Services \(HCBS\) Programs Provider Enrollment](#)
 - Before [How To Enroll](#), we added instructions for day support service providers to obtain a needs determination authorization letter from the Department of Human Services - Disability Services Division prior to following the enrollment steps.
 - Under [HCBS Waiver and AC Provider Training 101](#), we clarified that proof of completion must show the name of the owner or managerial official who completed the training and date of completion. We also added a list of acceptable forms of proof of completion that the provider can submit to Provider Eligibility and Compliance.
 - Under [Background Study](#), we changed "Personal Support" to "Individualized Home Supports (without training) formally known as Personal Support" because of the Waiver Reimagine Project's streamlined services phase that goes into effect 1/1/2021.
 - Under [General Liability Insurance Certificate](#), we made a few name changes to service names on the first bullet. We deleted "family supported living services; or family supported living services with in-home respite services" and added "family residential services."
 - Under [Reporting Changes](#), we deleted the list of forms that providers may submit to Provider Eligibility and Compliance to report changes. We referred them to **Changes to Enrollment** in the **Enroll with MHCP** section of the MHCP Provider Manual for details instead.

January 4, 2021

Early Intensive Developmental and Behavioral Intervention (EIDBI)

- [Early Intensive Developmental and Behavioral Intervention \(EIDBI\) billing grid](#) – In the chart, we increased the service limit for 97154 from 3 hours per day to 4.5 hours per day, which increases the allowable units per day for billing 97154 from 12 to 18.

Immunizations and Vaccinations

- [Immunizations and Vaccinations](#)
 - Under [Minnesota Vaccines for Children](#), added statement of following ACIP recommendations and further clarified language for readability.
 - Updated Immunization and Vaccine [Benefits Codes](#) for Children and Adults to include 2020-2021 Influenza Vaccines.
 - Added [administration fee caps](#) for vaccines supplied through Minnesota Vaccines for Children (MnVFC).
 - Added bookmark and section title to [Immunization and Vaccine Benefits Codes](#).

Dental Services

- [Dental Benefits for Non-Pregnant Adults](#) – Under [Adjunctive General Services](#) we added a hyperlink to the Overview page where alveoloplasty/gingivectomy and TMD are maintained.

Provider Basics

- [Authorization](#) – Removed the following :
 - Psychiatric Residential treatment Facility (PRTF) Eligibility for Admission (DHS7696)
 - Psychiatric Residential Treatment Facility (PRTF)
 - Removed "2012" from the ADA Dental Claim form in number 3 in the Dental section.

Previous Revisions

[2020 Manual Revisions](#)

[2019 Manual Revisions](#)

[2018 Manual Revisions](#)

[2017 Manual Revisions](#)

[2016 Manual Revisions](#)

[2015 Manual Revisions](#)
[2014 Manual Revisions](#)
[2013 Manual Revisions](#)
[2012 Manual Revisions](#)
[2011 Manual Revisions](#)