

MHCP Provider Manual

Latest Manual Revisions

Revised: June 12, 2024

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.

June 12, 2024

Enroll with MHCP

- [Doula Enrollment Criteria and Forms](#)
 - Under [How to Enroll Doula-Individual](#), we added information about the Minnesota Department of Health Doula Registry requirement.
 - Under [How to Enroll Doula-Organization](#), we added that an organization must have a federal employer identification number.
 - We added a new [Provider Basics](#) training section

Community Health Worker (CHW)

- [Community Health Worker \(CHW\)](#) – Under **Billing**, [G0022](#), we added that E& M visits cannot be a low-level E&M visit. We also added that only one practitioner can bill for community health integration services per month.

June 10, 2024

Dental Services

- [Dental Benefits](#) – Under **Covered Services, Diagnostic, Clinical Oral Evaluations**, we added CDT code D1120 to Service Limits for D0140 limited exam.

May 30, 2024

Rehabilitation Services

- [Rehabilitative Service Codes for OT, PT and Speech-Language Pathology](#) – In the [Evaluative, Therapeutic and Rehabilitative](#) table, we clarified modifiers GO and GN are the only modifiers allowed for billing for codes 97129 and 97130.

May 23, 2024

Equipment and Supplies

- [Respiratory Equipment](#) – Under the [Billing](#) heading, we added that modifier 76 is required on authorizations for a second ventilator.

Program HH (HIV/AIDS) Services

- [Program HH \(HIV/AIDS\) Services](#)
 - Under all [Dental Benefit](#) sections, we replaced the Children and Pregnant Women benefit set links with links to Dental Benefits. MHCP dental benefits no longer have age or pregnancy status as qualifiers effective Jan. 1, 2024.

- Under **Dental Benefit**, [Dental Benefit Authorization Requirements](#), we added authorization criteria information for members with third-party liability or Medicare coverage.
- Under **Dental Benefit**, [Dental Benefit Billing](#), we added more information on covered services.
- Under **Dental Benefit**, [Denied benefit claim questions](#), we removed the Program HH Customer Care email address.

Enroll with MHCP

- [Home Health Enrollment Criteria and Forms](#) – We added a new manual page for home health agency providers.

Hearing Aid Services

- [Hearing Aid Services Codes](#) – We updated Code V5014 to exclude hearing aid remakes, recasing and replating.

May 22, 2024

Transportation Services

- [Medical Transportation Management - Minnesota Nonemergency Transportation \(MTM-MNET\), SmartLink and Local County or Tribal Agency Nonemergency Medical Transportation \(NEMT\) Services Claim, Service and Rate Information](#) – We updated language to clarify that NEMT services providers cannot bill MHCP directly for Mode 3 - Unassisted transport (curb-to- curb) and Mode 4 - Assisted transport (door-to-door and door-through-door) services; and must contract with one of the following organizations for billing and reimbursement.
 - Medical Transportation Management – Minnesota Nonemergency Transportation (MTM-MNET)
 - SmartLink
 - Local county or tribal agency

May 20, 2024

Enroll with MHCP

- [Transportation Driver Enrollment Criteria and Forms](#) – We added definitions for publicly operated transit systems, volunteer drivers and not-for-hire vehicles which are exempt from enrolling drivers along with ambulance services.

May 17, 2024

Transportation Services

- [Local County or Tribal Agency Nonemergency Medical Transportation \(NEMT\) Transportation Services](#)
 - Under [Eligible Providers](#), **Enrollment**, we added definitions for publicly operated transit systems, volunteer drivers and not-for-hire vehicles which are exempt from enrolling drivers along with ambulance services.
 - Under [Covered Services](#), **Nursing Facility Members Approved for State-Administered NEMT Statewide**, we removed the link to State-Administered Nonemergency Medical Transportation (NEMT) Trip Sheet (DHS 7047) (PDF) because it is no longer required.
 - We replaced KEPRO with medical review agent.

May 16, 2024

Dental Services

- [Dental Benefits](#) – Under **Covered Services**, [Prosthodontics](#), we removed CDT codes D5640 and D5650 from Service Limits for adjustments and repairs to complete dentures. Additionally, we removed D5520 from Service Limits for Repairs to partial dentures.

May 8, 2024

Equipment and Supplies

- [Respiratory Equipment](#) – Under the [Authorization](#) heading, we updated to explain that authorization is required for a second ventilator.

May 2, 2024

Program HH (HIV/AIDS) Services

- [Program HH Dental Authorization Requirement Chart](#)
 - We renamed the Authorization Requirements Table to Children and Pregnant Women link to **Dental Authorization Requirement Tables**. This change reflects that dental benefits have no age or pregnancy status as qualifiers effective Jan. 1, 2024.
 - Additionally, we aligned the prior authorizations criteria for services covered under Program HH with those covered under the main Dental Benefit set.
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April 26, 2024

Recuperative Care

- [Recuperative Care](#)
 - We added a [note](#) about the temporary hold on recuperative care provider enrollment.
 - Under [Overview](#), we added information about referrals.
 - Under [Eligible Providers](#), we added information and clarified language about **facility providers** and **health services providers**. Additionally, we added links to the new Recuperative Care Enrollment Criteria and Forms manual page.
 - Under [Covered Services](#), we added information about only providing services within a facility's or provider's scope of practice. Additionally, we added information about how a physical condition is needed to receive recuperative care services.
 - Under [Authorization](#), we added links to Recuperative Care Extended Stay Request (DHS-8513) (PDF). We also added information about discharge locations.
 - Under [Billing](#), we added information about when the recuperative care facility rate is reimbursed and the option to receive only the recuperative care health services rate.
 - Under **Billing**, [Recuperative Care Health Services Claim \(Professional Claim\)](#), we removed condition code 17. We clarified who can render and bill health services for recuperative care services.
 - Under **Billing**, [Recuperative Care Facility Rate](#), we added the daily room and board rate.
 - Under **Billing**, [Recuperative Care Facility Claim](#), we updated the billing format to 837I.
 - Under [Managed Care Members](#), we updated language for clarity.

Reproductive Health/OB-GYN

- [Obstetric Services](#)
 - Under **Covered Services**, [Lactation](#), we added a link to the new Breast Pumps manual page.
 - Under [Billing](#), we added links to Provider Requirements and 837P MN-ITS billing instructions.

April 25, 2024

Hearing Aid Services

- [Bone-Anchored Hearing Aids \(BAHA\)](#)
 - We updated the Dispensing Fee section title to [Dispensing Fee for Nonsurgical or Non Osseointegrated](#).
 - Under [Billing](#), we added information about referring to the MHCP fee schedule for the fitting and follow-up of surgical/osseointegrated bone anchored devices.

Transportation Services

- [Local County or Tribal Agency Nonemergency Medical Transportation \(NEMT\) Transportation Services](#) – Under **Overview**, [Local Agency NEMT Coordination](#), we added SmartLink information for Carver and Scott counties.

April 19, 2024

Dental Services

- [Dental Authorization Requirement Tables](#) – Under [Restorative](#), we removed CDT codes D2930, D2931, D2932 and D2933 because they do not require prior authorization.
- [Dental Benefits](#) – Under [Restorative](#), we updated the Service Limits for CDT codes D2930-2934 and removed that authorization is required. We also added Service Limit information for CDT code D2991.

Reproductive Health/OB-GYN

- [Doula Services](#)
 - Under [Covered Services](#), we updated that MHCP will cover up to 18 visits without prior authorization effective May 1, 2024. We also updated language for clarity.
 - Under [Billing](#), we replaced National Provider Identifier with provider identification number.

April 17, 2024

Equipment and Supplies

- [Breast Pumps](#) – We have added a new section of the MHCP Provider Manual for breast pumps.
- [Hospital Beds](#) – Under the [Typically Noncovered Services](#) heading, we added technology hub.
- [Seizure Detection Devices](#) – We clarified language on FDA requirements for seizure detection devices under the [Overview](#) and [Noncovered Services](#) headings.

Mental Health Services

- [Mental Health Services](#) – We have reformatted this section of the manual to serve as a landing webpage for Mental Health. Links to services falling under Mental Health are included under [Covered Services](#) in this manual section and have been removed from the left navigation on the MHCP Provider Manual.

April 12, 2024

Transportation Services

- [Local County or Tribal Agency Nonemergency Medical Transportation \(NEMT\) Services Claim, Service, and Rate Information](#)
 - We updated the section header "**Transportation Personal Mileage Codes, Modifiers and Payment Rates**" to "[Local County or Tribal Agency–Administered Transportation Personal Mileage Codes, Modifiers and Payment Rates](#)." Additionally, we updated mileage reimbursement with the new April 1, 2024, fuel adjuster in this section.

- We clarified language for rural urban commuting area base and mileage adjustments.
- We added a [Legal References](#) section.

April 11, 2024

Provider Basics

- [Billing Policy Overview](#)
 - We changed the [Remittance Advice](#) section to clarify that MHCP-enrolled providers receive their RAs in one of the following formats:
 - Readable PDF file placed in the provider's MN-ITS mailbox
 - X12 835 batch file placed in the provider's MN-ITS mailbox *Note for X12 835 batch files, software is required to translate the batch file. DHS does not have the software to translate the file for you.
 - Use the [Electronic Remittance Advice Request \(DHS-4087\) \(PDF\)](#) to add or remove an electronic RA on a provider's MN-ITS account, to change the format you will receive your RA, or remove an RA affiliation with a billing organization.
 - We also added a link to the [How to Read Your Remittance Advice](#) on-demand video.

Waiver and Alternative Care (AC) Program

- [Waiver and Alternative Care \(AC\) Program](#) – We added a **Waiver and Alternative Care (AC) Program** manual section that links to each specific provider manual section for better organization of the MHCP Provider Manual.

April 8, 2024

Transportation Services

- [State-Administered Transportation Procedure Codes, Modifiers and Payment Rates](#)
 - Under [Transportation Procedure Codes, Modifiers and Payment Rates](#), we updated mileage reimbursement with the new April 1, 2024, fuel adjuster.
 - We clarified language for rural urban commuting area base and mileage adjustments.

April 4, 2024

Dental Services

- [Dental Benefits](#) – Under, **Prosthodontics**, we clarified language and authorization requirements for [CDT codes](#) D5110 - D5140, D5810 and D5811.

Dental Services

- [Dental Benefits](#) – Under, **Prosthodontics**, we clarified language and authorization requirements for [CDT codes](#) D5110 - D5140, D5810 and D5811.
- [Dental Authorization Requirement Tables](#)
 - Under [Restorative](#), we added Dental CDT codes D2930-2934 for a prefabricated crown.
 - Under [Prosthodontics](#), we removed content about all prosthodontics having a service limit of one of every three years and initial placement authorizations.
 - Under **Prosthodontics**, we named the **Removable Prosthodontics** section to [Removable Prosthodontics Including Complete and Partial Dentures](#) and clarified language.
 - Under **Prosthodontics**, we renamed the **Fixed Prosthodontics** section to [Fixed Prosthodontics Including Crown and Dental Bridge](#) and clarified language.

HCBS Waiver Services

- [HCBS Waiver and AC Training Requirements](#) – Under the [HCBS Waiver and AC Provider Training 101](#) section, we included a list of acceptable proofs of completion.

Physician and Professional Services

- [Physician and Professional Services](#) – We removed the link for the **Health Care Homes** page from the left navigation of the MHCP Provider Manual and added the link to the **Physician and Professional Services** page.

April 3, 2024

Enroll with MHCP

- [Housing Support Supplemental Services Enrollment Criteria and Forms](#) – We added [Revalidation](#) and [Reporting Changes](#) sections. We also modified and reformatted to be more consistent with other enrollment criteria and forms manual sections.
- [Moving Home Minnesota \(MHM\) Enrollment Criteria and Forms](#) – We updated the page to include [Revalidation](#) information for Moving Home Minnesota providers.

Equipment and Supplies

- [Mobility Devices](#) – Under **Covered Services, Wheelchair Options and Accessories** heading, we replaced HCPCS code E2300 Seat elevation feature with [E2298 Power seat elevation system](#) due to CMS publishing code updates related to power seating systems. HCPCS code E2300 has been discontinued and replaced by code E2298. Coverage criteria is the same.

Physician and Professional Services

- [Physician and Professional Services](#) – Under the Stem Cell Transplant Coverage heading under Transplant Services, we added information about coverage for [allogenic stem cell transplants](#) per a Centers for Medicare & Medicaid Services update for myelodysplastic syndromes.

April 2, 2024

Home page

- [MHCP Provider Manual Home](#) – Updated the [Table of Contents](#). Moved links to the Authorization Criteria: Cardiac Magnetic Resonance Imaging of the Coronary Arteries and the Coverage Criteria: Computed Tomography Colonography to under Radiology/Diagnostic Services. Removed the link to Laboratory Authorization Code List as it is no longer in use.

Transportation Services

- [Protected Transportation Services](#)
 - Under [Eligible Providers](#), **Protected Transportation Provider Service Requirements**, we updated the Minnesota Department of Human Services contact from Bob Ries to Brian Ombongi.
 - We updated language for clarity.

Laboratory/Pathology, Radiology & Diagnostic Services

- We deleted the **Laboratory, Pathology, Radiology & Diagnostic Services** from the left-hand navigation. We created new pages for the [Laboratory and Pathology Services](#) and the [Radiology/Diagnostic Services](#) that can be found on the left-hand navigation.

Member Evidence of Coverage

- [MHCP Member Evidence of Coverage](#) – Under the [Housing Stabilization Services](#) heading under Covered Services, Specific health care services, we added information about a new benefit, Moving Expenses.

April 1, 2024

Enroll with MHCP

- [Housing Stabilization Services Enrollment Criteria and Forms](#) – In the bullet points under the opening paragraph, we clarified where to find the required training modules.

Reproductive Health/OB-GYN

- [Family Planning](#)
 - Under [Eligible Members](#), we clarified language.
 - We added a new [Telehealth Services](#) section.
 - Under [Billing](#), we updated that 12 months of contraceptives are now allowed to be dispensed at a time. Additionally, we added links to the MN-ITS 837P Professional User Guide and Equipment and Supplies in the MHCP Provider Manual.

Housing Stabilization Services

- [Housing Stabilization Services](#) – We added information about Moving Expenses as a covered service under the [Eligible Providers](#), [Covered Services](#) and [Billing](#) headings.
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March 26, 2024

Home page

- [MHCP Provider Manual Home](#) – We reorganized the content on this page for clarity. We also added additional links under the [Resources](#) section and added the [Provider Manual Table of Contents](#) section, which are links to the pages in the MHCP Provider Manual.

Provider Basics

- [MHCP Provider Manual - Provider Basics](#) – We removed the link to "Enroll with MHCP" and added it to the left-hand navigation. We also removed the link to the "Provider Manual Home" page and added it to the left navigation.

March 20, 2024

Provider Basics

Enroll with MHCP

- [Recuperative Care Enrollment Criteria and Forms](#) – We added information that MHCP is temporarily holding on processing enrollment for recuperative care services providers.

Targeted Case Management

- [Targeted Case Management](#) – We added a Targeted Case Management (TCM) manual section that links to each specific TCM service provider manual section for better organization of the MHCP Provider Manual.

March 18, 2024

Clinic Services

- [Federally Qualified Health Center and Rural Health Clinics](#) – We clarified that the audio-only telehealth service will [end July 1, 2025](#), as part of the face-to-face encounter payment methodology.

Equipment and Supplies

- [Robotic Arms](#) – We have created this new Minnesota Health Care Programs (MHCP) Provider Manual section because we now cover robotic arms for MHCP members with heavily restricted use of their upper extremities. Robotic arms require prior authorization and a three-month rental period. The effective date for this update is March 18, 2024.

March 14, 2024

Dental Services

- [Dental Benefits](#)
 - Under **Covered Services, Diagnostic**, [Clinical Oral Evaluations](#), we added service limits for CDT D0120.
 - Under **Covered Services, Restorative**, we updated the description for CDT D2710-D2722. Additionally, separated out CDT D2930-2934 from CDT D2710-D2722.
 - Under **Covered Services, Periodontics**, we added service limits for CDT D4341 and D4342.
 - Under **Covered Services, Prosthodontics**, we added service limits for CDT D5110-D5140, D5810 and D5811.
 - Under **Covered Services, Prosthodontics**, we added service limits for CDT D5211-D5226, D5820 and D5821.

March 13, 2024

COVID-19

- [Coronavirus \(COVID-19\)](#) – We added the end date of July 1, 2025, to Federally Qualified Health Center and Rural Health Center for [audio-only telehealth services](#) included as part of the face-to-face encounter payment methodology.

Reproductive Health/OB-GYN

- [Free-Standing Birth Center Services](#) – We added a new [Telehealth Services](#) section.

March 12, 2024

Hearing Aid Services

- [Bone-Anchored Hearing Aids \(BAHA\)](#)
 - Under **Eligible Members**, we added a new [Dispensing Fee](#) section with information about MHCP covering dispensing fees for non osseointegrated or non surgical hearing aids.
 - Under **Billing**, we added a new [Dispensing Fee Claims](#) section.

Reproductive Health/OB-GYN

- [Minnesota Family Planning Program \(MFPP\)](#)
 - Under [Contraceptive and Medication Supplies](#), we updated that 12 months of contraceptives are now allowed to be dispensed at a time.
 - We added a [Telehealth Services](#) section.

March 7, 2024

Provider Basics

Enroll with MHCP

- [Enrollment with Minnesota Health Care Programs \(MHCP\)](#) – We added "**Doula providers (individual and organizational providers)**" in the [Unique Minnesota Provider \(UMPI\)](#) section at number 3.

March 6, 2024

Provider Basics

- [Billing Organizations/Responsibilities](#) – We added steps for providers to change billing organizations.

Equipment and Supplies

- [Orthotics](#) – Under **Covered Services**, [Cranial prostheses](#), we explained one medical wig per calendar year is covered for members for treatment of medical conditions that result in hair loss. We added this information to this manual section to align with the [Medical Supply coverage guide \(PDF\)](#).

March 5, 2024

Reproductive Health/OB-GYN

- [Obstetric Services](#)
 - We removed HIV counseling from the page title. HIV counseling is still considered an obstetric service and the policy information remains on the manual page.
 - We replaced "at-risk" with "high-risk" to meet best practice language.
 - Under **Covered Services**, we added a new [Lactation](#) section.
 - We removed the Authorization Requirements and Ambulatory Uterine Monitoring Device sections because it is no longer covered.
 - Under **Covered Services**, [Prenatal Screening and Enhanced Services for High-risk Pregnancies](#), we removed subcutaneous terbutaline pump content because it is no longer covered.
 - We updated language for clarity.

March 4, 2024

Provider Basics

Provider Requirements

- [Provider Screening Requirements](#) – We added **Recuperative Care** to the list of [MHCP Institutional Providers](#).

Physician and Professional Services

- [Physician and Professional Services](#) – We added the sections [Sleep Testing Covered Services](#) and [Sleep Testing Noncovered Services](#).

February 29, 2024

Provider Basics

Enroll with MHCP

- [Targeted Case Management \(TCM\) Enrollment Criteria and Forms](#)

- We added vulnerable adult/developmental disability to the types of targeted case management services.
- Under [Revalidation](#), we added clarifying information.
- [Housing Stabilization Services Enrollment Criteria and Forms](#)
 - We reformatted this enrollment criteria and forms webpage to match our other enrollment criteria and forms webpages.
 - Under [Revalidation](#), we added clarifying information.

Pharmacy Services

- [Pharmacy Services](#)
 - Under **Covered Services**, [Pharmacy Service Limitations](#), we updated that contraceptive drugs can be dispensed in up to 365-day supplies.
 - Under [Authorization and Limitation Requirements](#), we updated the MHCP prescription drug PA review agent call center hours to 8 a.m. to 5:30 p.m., Monday through Friday.

February 27, 2024

Reproductive Health/OB-GYN

- [Abortion Services](#)
 - We added a [Telehealth Services](#) section.
 - Under [Billing](#), **Abortion-Related Services**, we updated information to include that pharmacy claims for mifepristone and misoprostol may be billed directly to managed care organizations.

February 23, 2024

Dental Services

- [Allied Oral Health Professional \(Overview\)](#)
 - We added section hyperlinks on the top of the page.
 - We changed the Eligible Recipients section title to **Eligible Members**. Under [Eligible Members](#), we renamed the Dental for Children & Pregnant Women link to **Dental Benefits**. Additionally, we removed the link to the Dental Benefits for Non-Pregnant Adults. MHCP dental benefits no longer have age or pregnancy status as qualifiers effective Jan. 1, 2024.

Provider Basics

Health Care Programs and Services

- [MHCP Benefits at-a-glance](#) – In the **Minnesota Health Care Programs (MHCP) Benefits at-a-glance table**, we updated the listing for Dental for Children & Pregnant Women to Dental Benefits. We also removed the Dental for Non-Pregnant Adults listing. MHCP dental benefits no longer have age or pregnancy status as qualifiers effective Jan. 1, 2024.

Provider Basics

Enroll with MHCP

- [Early Intensive Developmental and Behavioral Intervention \(EIDBI\) Provider Enrollment](#) – We added a section for [Background Studies using NETStudy 2.0](#) and reformatted throughout to clarify enrollment requirements.

Provider Basics

- [Authorization](#)
 - Under the **Review Agents** heading, [How to submit authorization requests to the medical review agent](#) table, we added information for Substance Use Disorder services for Nonresidential (outpatient) group and individual treatment.

- Under the [Review Agents](#) heading, we acknowledged Acentra Health (previously called Kepro) as the medical review agent.
- We added a [Substance Use Disorder Request for Nonresidential \(outpatient\) Group and Individual Treatment](#) section, which includes information about authorization requests for Substance Use Disorder nonresidential (outpatient) group and individual treatment that exceeds six hours per day or 30 hours per week.

Substance Use Disorder (SUD) Services

- [Substance Use Disorder \(SUD\) Services](#)
 - Under the [Covered Services](#) heading, we added: Comprehensive Assessment (An SUD licensed facility can begin providing services before completion of a comprehensive assessment when the comprehensive assessment is completed in the time frame set forth in Minnesota Statutes 245G.)
 - Under the [Noncovered Services](#) heading, we added substance use disorder services provided by counties, recovery community organizations, and licensed professionals in private practice before the comprehensive assessment is completed are not covered unless the comprehensive assessment is conducted before service initiation.
 - We updated the [Revenue and Procedure Codes](#) table to change service limitations for H2035 and H2035 HQ per guidance and direction of Minnesota Statutes 254B.05, subdivision 5 (h).
 - Added [Authorization](#) section for SUD authorization requests for Nonresidential (outpatient) group and individual treatment for more than six hours a day or 30 hours a week.

February 16, 2024

- [HCBS Waiver Services](#) – Corrected the text from "Providers are responsible for submitting cost reporting data annually" to "All Disability Waiver Rate System (DWRS) provider agencies must report at least once during a 5 year cycle".

February 14, 2024

Community Health Worker (CHW)

- [Community Health Worker \(CHW\)](#) – Under [Billing](#), we added information about procedure codes G0019 and G0022 (community health integration services) that community health workers can bill for when providing services to Medicare members.

February 9, 2024

Provider Basics

Enroll with MHCP

- [Licensed Psychologist Enrollment Criteria and Forms](#)
 - Under the [Online MPSE Portal](#) and [Submit Forms via Fax](#) headings, we updated the list of documents required to enroll.
 - Under the [Neuropsychology Post-Doctoral Sub-Specialty Enrollment](#) heading, we updated the requirements to match statute.
 - Under the [Revalidation](#) heading, we added information explaining the revalidation process.

February 8, 2024

HCBS Waiver Services

- [HCBS Waiver Services](#) – In the **Service Authorization** section, we added a subsection for [Provider Responsibilities](#) with information regarding the Disability Waiver Rate System (DWRS) cost report and a link to the DWRS cost reporting webpage.

Equipment and Supplies

- [Equipment and Supplies](#)
 - We have added a [Noncovered Services](#) heading and section and clarified information under the Typically Noncovered Services heading. There was no change to policy for covered, noncovered and typically noncovered services.
 - Under [Billing](#), Billing prior authorization claims and services heading, we clarified policy for billing services that require prior authorization and do not have a fee schedule rate. Pricing documents must be submitted with the claim and with the prior authorization request.

February 7, 2024

Dental Services

- [Dental Authorization Requirement Tables](#)
 - Under [Prosthodontics](#), we made the following changes.
 - Updated the service limit to three years.
 - Changed requests for replacement of existing prosthesis to three years.
 - Added additional criteria for removable prosthodontics.
 - Under **Oral and Maxillofacial Surgery**, [Impacted Teeth](#), we updated language for clarity.

Laboratory/Pathology, Radiology & Diagnostic Services

- [Laboratory/ Pathology Services](#) – Under the **Billing** heading, [Drug Testing](#), we removed:
 - For outpatient pain management or substance abuse settings, presumptive urine drug testing (UDT) may be considered medically necessary for the following:
 - Baseline screening at the time treatment is initiated: One time per program entry
 - Stabilization phase: Weekly screening for a maximum of four weeks
 - Maintenance phase: Screening once every one to three weeks
 - We added information to be included in a patient's medical record and revised information about the maximum number of presumptive and definitive UDTs that can be billed and the conditions definitive UDTs are medically necessary.

February 6, 2024

Provider Basics

Provider Requirements

- [Excluded Provider Lists](#)
 - We updated the name of the Office of Inspector General to "Health and Human Services–Office of Inspector General."
 - We updated the [Removal from lists](#) section to the following:
 - An individual provider or entity must submit a written request to the DHS Program Integrity Oversight Division to be removed from the state exclusion list. The request must include their full name, date of birth, current address and contact information. The written request can be sent to oig.investigations.dhs@state.mn.us or mailed to PO Box 64982, St. Paul, MN 55164, ATTN: Exclusions.

Provider Basics

Billing Policy Overview

- [Billing the Member \(Recipient\)](#) – Under [Copays and Family Deductible](#), we added copay information about emergency room visits for a toothache or other dental condition.

Equipment and Supplies

- [Mobility Devices](#) – Under the [Billing](#) heading, we clarified the KU modifier can be billed for wheelchair accessories and seat back cushion codes listed in Attachment A of CR 12453 when provided in connection with Group 3 power wheelchairs, complex rehabilitative manual wheelchairs, and certain other manual wheelchairs described by HCPCS codes E1161, E1231-E1238, K0005 and K0008.

February 5, 2024

Provider Basics

Enroll with MHCP

- [Recuperative Care Enrollment Criteria and Forms](#) – We added a new manual page for recuperative care providers.

February 2, 2024

Mental Health Services

- [Psychiatric Residential Treatment Facility \(PRTF\)](#) – Under the [Overview](#) heading, we clarified Psychiatric Residential Treatment Facilities (PRTF) are not considered foster care placements and children or youth are admitted to a PRTF only after medical necessity is determined.

Housing Stabilization Services

- [Housing Stabilization Services](#) – Under the **Billing** heading, we added [Remote Support U4](#) modifier information.

February 1, 2024

Transportation Services

- [Transportation Services - Local County or Tribal Agency Nonemergency Medical Transportation \(NEMT\) Services Claim, Service, and Rate Information](#) – Under **Bus, Paratransit and Air Travel**, we added "round-trip" to the [Rural Urban Commuting Area \(RUCA\) Adjustments Add-on](#) section title and under the [Transport Mileage RUCA Adjustments](#) section for clarification.

January 31, 2024

Home Care Services

- [Home Care Services](#) – Under [Billing](#), we added information about submitting home care claims. The information explains which type of transaction to submit in MN-ITS and includes the home care services (non-PCA) billing codes chart. The home care (non-PCA) billing codes chart is from the MN-ITS (837I) Institutional Home Care (Non-PCA) Services user guide.

Immunizations and Vaccinations

- [Immunizations and Vaccinations](#)
 - Under [Billing for Child Vaccines](#)
 - Under with counseling, CPT administration code 90480, we removed the language "MHCP does not require the use of COVID-19." We also added CPT administration code 96380 (RSV vaccine) for date of service on, or after, Jan. 1, 2024.

- Under without counseling, we added CPT administration code 96381 (RSV vaccine) for date of service on, or after, Jan. 1, 2024.
- Under with or without counseling, CPT administration code 96372, we added the dates of service from July 1, 2023 to Dec. 31, 2023.
- Under [Billing for Adult and Non MnVFC Vaccines](#), CPT administration code 90480, we removed the language "MHCP does not require the use of COVID-19 CPT vaccine codes."

Provider Basics

Enroll with MHCP

- [Health Care Case Coordinator Enrollment Criteria and Forms](#) – We added information to this page to make it match our other enrollment pages. We added a section for [reporting changes](#) to enrollment, and added the Minnesota Provider Screening and Enrollment (MPSE) portal as an option for enrollment.
- [Medical Services Group Enrollment Criteria and Forms](#) – The title of this page was updated from Billing Entity for Physician Group to Medical Services Group.

January 30, 2024

Rehabilitative Services

- [Orthotic Procedures](#) – We performed a full review of the L-codes table. There are no new billable codes, we just updated the document.

Dental Services

- [Dental Benefits](#)
 - Under **Covered Services**, [Preventive](#), we added the following CDT codes D1310, D1320 and D1321. We clarified service limits for D1330.
 - Under **Prosthodontics**, [Service Limits](#), we updated that initial placement or replacement of a removable prosthesis is now limited to once every three years effective Jan. 1, 2024.

January 26, 2024

Housing Support Supplemental Services

- [Housing Support Supplemental Services](#)
 - Under the [Overview](#) heading, we added that individuals are not eligible for Housing Support Supplemental Services if they receive services through Elderly Waiver or Alternative Care and we updated to the 2024 service rate.
 - Under the [Billing](#) heading, we clarified that the member's home is the only place of service currently available for Housing Support supplemental services.

Mental Health Services

- [Adult Day Treatment](#)
 - Under the **Eligible Members** heading, [Admission Criteria](#), we changed the functional assessment update timeline from 90 to 180 days and added statute language, and removed information stating the level of care must be completed 10 days before discharge. We also clarified requirements for Individual Treatment Plans and reorganized the admission criteria list for clarity.
 - Under the [Covered Services](#) and [Noncovered Services](#) headings, we added service hour requirements and limitations per statute.
 - Under the [Noncovered Services](#) heading, we removed "Day treatment in the member's home" to avoid confusion with allowed telehealth services.
 - Under the [Legal References](#) heading, we added Minnesota Statutes, 245I.

Immunizations and Vaccinations

- [Immunization and Vaccine Benefits Codes for Adults](#) – Under [COVID-19 Vaccines](#), we updated that commercially purchased COVID-19 vaccines are reimbursable through MHCP effective Sept. 11, 2023.

January 25, 2024

Equipment and Supplies

- [Seasonal Affective Disorder \(SAD\) Lights](#) – Under the [Authorization](#) heading, we updated to include seasonal affective disorder as an eligible diagnosis for a therapeutic light box.

January 24, 2024

Hearing Aid Services

- [Hearing Aid Services](#) – Under [Noncovered Items and Services](#), we added hearing mold color upgrades.

Equipment and Supplies

- [Mobility Devices](#) – Under the [Billing](#) heading, we added information explaining the KU modifier can be billed for manual wheelchair accessories and seat and back cushion codes.

January 23, 2024

Provider Basics

Enroll with MHCP

- [PCA Provider Agency Enrollment Criteria and Forms](#)
 - In the [PCPO and PCA Choice Enrollment](#) section, we added information for enrolling using the Minnesota Provider Screening and Enrollment (MPSE) portal.
 - We also updated the [Revalidation](#) and [Reporting Changes](#) sections for clarity.

January 22, 2024

Immunizations and Vaccinations

- [Immunization and Vaccine Benefits Codes for Adults](#) – We removed the language "Minnesota Health Care Programs (MHCP) providers can bill MHCP for vaccines (excluding COVID-19 vaccines) listed in the tables and for vaccine administration. Note, MHCP only reimburses for the administration of the COVID-19 vaccines."

Rehabilitation Services

- [Rehabilitative Service Codes for OT, PT and Speech-Language Pathology](#) –In the [Occupational Therapy, Physical Therapy and Speech-Language](#) table, we added CPT codes 97550, 97551, 97552 for rehabilitative services, effective Jan. 1, 2024.

January 19, 2024

Hospital Services

- [Inpatient Hospital Services](#) – Under **Billing**, we added a new subsection titled [Services with Gender or Procedure Code Conflict](#) with information on how to bill for services that can be subjected to gender-specific editing.

Nursing Facilities

- [Nursing Facilities](#) – In the [Legal References](#) section, we added the citation for Minnesota Statutes, 256R.42 (Rate Adjustment for the First 30 Days).

January 18, 2024

Mental Health Services

- [Intensive Residential Treatment Services \(IRTS\)](#)
 - Under the [Eligible Providers](#) heading, **Provider Requirements**, we clarified providers must have five to 16 beds and not be an institution for mental disease.
 - Under the [Billing](#) heading, we clarified providers should bill room and board service days that are authorized by the managed care organization for medical assistance members directly to MHCP.
 - Under the [Authorization](#) heading, we clarified providers need to submit the member's current individual treatment plan (ITP) and progress notes for two weeks.

Provider Basics

Provider Requirements

- [Provider Screening Requirements](#) – In the [Revalidation Schedule](#) section, we added March revalidations and updated the description for Home and Community-Based Services for January 2024 revalidations.

January 17, 2024

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

- [Waiver and Alternative Care \(AC\) Programs – Specialized Equipment & Supplies Authorization & Billing Responsibilities](#) – We updated the [MHCP-Enrolled Provider Responsibilities](#) section with the following text: "For procedure code, T2029, submit claim to MHCP without Medicare Coordination of Benefits (COB) information."

Hospital Services

- [Inpatient Hospital Services](#)
 - Under **Billing**, [Deliveries and Births](#), we added information about long-acting reversible contraceptives.
 - Under [Forms and Resources](#), we added a link to the Payment methodology for inpatient hospitals webpage.

January 16, 2024

Dental Services

- [Dental Services](#) – In the [Covered Services](#) section, we added the sentence, "Also see the [MHCP Fee Schedule](#) for a current list of all MHCP covered codes."

Provider Basics

Enroll with MHCP

- [Pharmacy and Pharmacist Enrollment Criteria and Forms](#)
 - Under the [How to Enroll as a Pharmacy](#) and [How to Enroll as an Individual Pharmacist](#) sections, we added links to MCO In-Network Provider Agreement (DHS-8355) (PDF).
 - Under [Revalidation](#), we added more information about revalidation.
 - Under [Reporting Changes](#), we added more information about reporting changes.
 - We updated language and formatting for clarity.

January 12, 2024

**Provider Basics
Enroll with MHCP**

- [County Human Services Agency Enrollment Criteria and Forms](#) – We added a recording of a training provided on the [revalidation](#) process in MPSE on Dec. 13, 2023.

Reproductive Health/OB-GYN

- [Doula Services](#)
 - We updated language for clarity and to reflect legislation changes to enrollment and billing. Changes include the following.
 - We added a [Recommendation for Doula Services](#) section.
 - Under [Eligible Providers](#):
 - We removed text about doulas needing to be certified by one of the listed organizations and the list of organizations because this is no longer a requirement.
 - We removed the section about Supervision because this is no longer a requirement.
 - Under [Documentation Requirements](#), we added details about what needs to be documented.
 - We added a [Telehealth](#) section.
 - Under [Billing](#):
 - We removed text about entering the NPI for the supervising physician, nurse practitioner or certified nurse midwife because this is no longer a requirement.
 - We added details for billing as of Jan. 1, 2024 and prior to Jan. 1, 2024.
 - We added instructions for how to bill if labor and delivery progresses over multiple days.
 - Under [Legal References](#), we added a link to the Code of Federal Regulations, title 42, chapter 4, subchapter c, part 440.130, c:

January 11, 2024

Child Welfare Targeted Case Management (CW-TCM)

- [Child Welfare Targeted Case Management \(CW-TCM\)](#) – Under the **Covered Services** heading, [Interactive Video \(ITV\)](#), **Exception**, and [CW-TCM Activities and Services](#) subheadings, we removed instructions to submit a claim as a telephone visit.

January 8, 2024

Early Intensive Developmental and Behavioral Intervention (EIDBI)

- [EIDBI MCO Contact Information Grid](#) – We updated contact information for some managed care organizations and reorganized the grid to be in alphabetical order by MCO.

January 3, 2024

Reproductive Health/OB-GYN

- [Family Planning](#) – Under [Billing](#), we added that long-acting reversible contraceptives can be billed outside of a hospital labor and delivery bundle as of Jan. 1, 2024.

January 2, 2024

Transportation Services

- [Local County or Tribal Agency Nonemergency Medical Transportation \(NEMT\) Services Claim, Service, and Rate Information](#) – We added new mileage rates for Jan. 1, 2024.

January 1, 2024

Anesthesia Services

- [Anesthesia Services](#) – Under the [Billing](#) heading, we added the 2024 Anesthesia Rates table and removed the 2022 Anesthesia Rates table.

Dental Services

- [Dental Benefits](#) – We clarified language to reflect that dental benefits have no age or pregnancy status as qualifiers effective Jan. 1, 2024. These changes include the following:
 - We updated the page title to **Dental Benefits**.
 - We removed the text “Children through Age 20” from the Implant Services and Orthodontics section titles.
 - We removed text about pregnant people and children from the Service Limits column in the tables.
- [Dental Authorization Requirement Tables](#)
 - We updated the page title to **Dental Authorization Requirement Tables**. This change reflects that dental benefits have no age or pregnancy status as qualifiers effective Jan. 1, 2024.
 - We removed the Preventive section.
 - We update language for clarity.
- [Dental Services](#)
 - Under [Covered Services](#), we renamed the Dental Benefits for Children and Pregnant Women link to Dental Benefits. We also deleted the link to Dental Benefits for Non-Pregnant Adults.
 - Under [Authorization Requirements](#), we renamed the Authorization Requirement Tables for Children and Pregnant Women link to Authorization Tables for Dental. We also deleted the link to Authorization Requirement Tables for Non-Pregnant Adults.
 - These changes reflect that dental benefits have no age or pregnancy status as qualifiers effective Jan. 1, 2024.
- **Authorization Requirement Tables for Non-Pregnant Adults** – We removed this manual page because dental benefits have no age or pregnancy status as qualifiers effective Jan. 1, 2024.
- **Dental Benefits for Non-Pregnant Adults** – We removed this manual page because dental benefits have no age or pregnancy status as qualifiers effective Jan. 1, 2024.

Equipment and Supplies

- [Equipment and Supplies](#) – We added a link to new Seizure Detection Devices section.
- [Seizure Detection Devices](#) – We created a new section of the MHCP Provider Manual for seizure detection devices.

Recuperative Care

- [Recuperative Care](#) – The Minnesota Department of Human Services will cover Recuperative Care program services effective Jan. 1, 2024, as part of its Minnesota Health Care Programs (MHCP). Recuperative care services are available to eligible MHCP members experiencing homelessness when they are unable to recover from a physical illness when unhoused or living in a shelter, but do not need to be hospitalized. Recuperative Care program services may include basic nursing care, counseling and social services.

Transportation Services

- [State-Administered Transportation Procedure Codes, Modifiers and Payment Rates](#) – We updated transportation [mileage reimbursement rates](#) for Jan. 1, 2024

Previous Revisions

[2023 Manual Revisions](#)

[2022 Manual Revisions](#)

[2021 Manual 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](#)