

## Mental Health Services

Revised: [September 22, 2025](#)

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### Overview

Minnesota's publicly provided mental health system, as reflected in the Mental Health Uniform Service Standards Act and the Minnesota Comprehensive Mental Health Acts, is supervised by Minnesota Department of Human Services (DHS) and administered by counties. Counties act as the local mental health authority. Review the [General MHCP Non-Enrollable Mental Health Provider Requirements](#) webpage for information about criteria to be an eligible Minnesota Health Care Programs (MHCP) mental health provider.

### Covered Services

Providers may deliver some mental health services by [Telehealth](#). Review the [Mental Health Codes, Maximum FFS Rates, and Eligible Providers](#) chart.

The following are covered mental health services (refer to the linked sections for additional service-specific information):

- Crisis Services
  - [Adult and Children's Crisis Response Services](#)
  - [Adult and Children's Mental Health Targeted Case Management](#)
- Outpatient Mental Health Services
  - [Adult Day Treatment](#)
  - [Children's Intensive Behavioral Health Services](#)
  - [Children's Mental Health Clinical Care Consultation](#)
  - [Diagnostic Assessment \(DA\)](#)
  - [Dialectical Behavior Therapy Intensive Outpatient Program \(DBT IOP\)](#)
  - [Explanation of Findings](#)
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  - [Mental Health Provider Travel Time](#)
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  - [Telehealth Delivery of Mental Health Services](#)
  - [Treatment Supervision](#)
- Rehabilitative Mental Health Services
  - [Adult Day Treatment](#)
  - [Adult Rehabilitative Mental Health Services \(ARMHS\)](#)
  - [Assertive Community Treatment \(ACT\)](#)
  - [Certified Family Peer Services](#)

- [Certified Peer Specialist Services](#)
- [Children's Therapeutic Services and Supports \(CTSS\)](#)
- [CTSS Children's Day Treatment](#)
- [Youth Assertive Community Treatment \(Youth ACT\)/Intensive Rehabilitative Mental Health Services \(IRMHS\)](#)
- Residential Treatment
  - [Adult Residential Crisis Stabilization \(RCS\)](#)
  - [Children's Mental Health Residential Treatment](#)
  - [Intensive Residential Treatment Services \(IRTS\)](#)
  - [Psychiatric Residential Treatment Facility \(PRTF\)](#)
- Physician Mental Health Services
  - [Extended Inpatient Psychiatric Services](#)
  - [Health and Behavior Assessment/Intervention](#)
  - [Inpatient Visits](#)
  - [Physician Consultation, Evaluation and Management](#)
  - [Psychiatric Consultations to Primary Care Providers](#)

### **Components of Mental Health Service Delivery**

- [Diagnostic assessment](#)
- [Functional assessment \(Adult\)](#)
- [Level of care assessment \(Adult\)](#)
- Individual treatment plan (ITP)
- Service delivery
- Reassessment

### **Eligible Providers**

Mental health providers include agencies and individual professionals. Each mental health agency must have at least one mental health professional on staff. Other agency staff may be eligible to provide services but not eligible to enroll as MHCP providers (review the [General MHCP Non-Enrollable Mental Health Provider Requirements](#) webpage).

When qualified state staff provide mental health services, they are considered part of the certified local provider entity, and their services may be billed according to typical billing practices as appropriate to the specific service.

### **Mental Health Professionals**

The following mental health professionals may enroll with MHCP:

- [Licensed independent clinical social worker \(LICSW\)](#)
- [Licensed marriage and family therapist \(LMFT\)](#)
- [Licensed professional clinical counselor \(LPCC\)](#)
- [Licensed psychologist \(LP\)](#)
- [Certified psychiatry or osteopathic physician](#)
- [Nurse practitioner \(NP\)\\*](#)
- [Clinical nurse specialist \(CNS\)\\*](#)
- Tribal-certified professional

### **Mental Health Providers**

The following are not eligible to enroll as an MHCP provider (refer to the [General MHCP Non-Enrollable Mental Health Provider Requirements](#) section of the MHCP Provider Manual):

- [Mental health practitioner](#)

- Certified rehabilitation specialist
- Clinical trainee
- [Mental health certified peer specialist](#)
- Mental health certified family peer specialist
- Mental health rehabilitation worker
- [Mental health behavioral aide \(CTSS only\)](#)
- [Mental health case manager or case manager associate](#)

### General Treatment Supervision Requirements

MHCP has more than one mental health treatment supervision standard:

- Refer to [Treatment Supervision](#) for requirements on supervision of diagnostic assessment, psychotherapy and explanation of findings.
- Refer to the [Specialty Specific Mental Health Supervision Requirements](#) chart and specific covered services sections for other supervision requirements.

### Medicare Enrollment Denials

When Medicare denies enrollment as a Medicare provider, the following MHCP providers must submit the [Mental Health Professional Applicant Assurance Statement – Medicare Enrollment Denial \(DHS-3864\) \(PDF\)](#) to [MHCP Provider Enrollment](#). Inform MHCP immediately when Medicare approves enrollment.

- LICSW
- LPs with Education level 2 (doctoral degree) and cannot enroll with Medicare
- Nurse Practitioner or Certified Nurse Specialist with mental health specialty
- Providers that are not eligible to enroll with Medicare may provide services to MHCP members, including dually eligible members. When requesting [authorization](#) of mental health services, notify the [medical review agent](#) that the treating provider is not eligible to enroll with Medicare.

### Right to Appeal Denial of Certification or County Contract

Providers required to be certified by or contracted with a county as part of the criteria to become an authorized provider of mental health services may [appeal](#) a county refusal to grant the necessary contract or certification. A member may initiate an appeal on behalf of a provider-denied certification. Either members or providers may submit a request for a review of the county decision to the Behavioral Health Division by either fax or mail to the following:

**Fax:** 651-431-7566 (Attn: Behavioral Health Appeal Review)

**Mail:** DHS Behavioral Health Division – Appeal Review  
P.O. Box 64981  
540 Cedar St.  
St. Paul, MN 55164-0981

### Eligible Members

Members eligible to receive mental health services must be eligible for [MHCP](#) and [Health Care Programs and Services](#).

A resident of an Institution for Mental Disease (IMD) is eligible to receive MA services only if the member is receiving inpatient psychiatric care in an accredited psychiatric facility and meets one of the following criteria:

- Is under 21 years old
- Is 21 years old, but less than 22 years old and has been receiving inpatient psychiatric care in the IMD continuously since the resident's 21st birthday
- Is at least 65 years old

Members 21 years old and older, but under 65 years old, who reside in an IMD are eligible to receive outpatient mental health services. Inpatient mental health services are only eligible through the IMD. If discharged within 180 days, the member is eligible to receive case management services through relocation service coordination (RSC). Contact the managed care organization (MCO) if the member is receiving services through the MCO.

Most mental health services have member eligibility requirements that require the member to meet the criteria in one or more of the following definitions:

**Child with emotional disturbance:** A child with an organic disorder of the brain, or a clinically significant disorder of thought, mood, perception, orientation, memory or behavior that meets both of the following:

- Is detailed in a [diagnostic code list](#) published by the commissioner
- Seriously limits a child's capacity to function in primary aspects of daily living, such as personal relations, living arrangements, work, school and recreation

**Mental Illness:** An organic disorder of the brain or a clinically significant disorder of thought, mood, perception, orientation, memory or behavior that meets both of the following:

- Is detailed in a [diagnostic code list](#) published by the commissioner
- Seriously limits a person's capacity to function in primary aspects of daily living such as personal relations, living arrangements, work and recreation

For children younger than 6 years old, trained professionals can refer to the current edition of the DC: 0-5 Diagnostic Classification of Mental Health and Development Disorders of Infancy and Early Childhood published by Zero to Three.

Emotional disturbance means an organic disorder of the brain or a clinically significant disorder of thought, mood, perception, orientation, memory, or behavior that:

- is detailed in a diagnostic codes list published by the commissioner; and
- seriously limits a child's capacity to function in primary aspects of daily living such as personal relations, living arrangements, work, school, and recreation.

"Emotional disturbance" is a generic term and is intended to reflect all categories of disorder described in the clinical code list published by the commissioner as "usually first evident in childhood or adolescence."

**Serious mental illness ( SMI):** SMI is when a child with emotional disturbance meets one of the following criteria:

- Has been admitted to inpatient or residential treatment within the last three years or is at risk of being admitted
- Is a Minnesota resident and receiving inpatient or residential treatment for an emotional disturbance through the interstate compact
- Has been determined by a mental health professional to meet one of the following criteria:
  - Has psychosis or clinical depression
  - Is at risk of harming self or others as a result of emotional disturbance
  - Has psychopathological symptoms as a result of being a victim of physical or sexual abuse or psychic trauma within the past year
  - Has a significantly impaired home, school or community functioning lasting at least one year or presents a risk of lasting at least one year, as a result of emotional disturbance, as determined by a mental health professional

**Serious and persistent mental illness (SPMI):** A condition with a diagnosis of mental illness that meets at least one of the following:

- The member had two or more episodes of inpatient care for mental illness within the past 24 months
- The member had continuous psychiatric hospitalization or residential treatment exceeding six months' duration within the past 12 months
- The member has been treated by a crisis team two or more times within the past 24 months
- The member has a diagnosis of schizophrenia, bipolar disorder, major depression or borderline personality disorder; evidences a significant impairment in functioning; and has a written opinion from a mental health professional stating he or she is likely to have future episodes requiring inpatient or residential treatment unless community support program services are provided
- The member has, in the last three years, been committed by a court as a mentally ill person under Minnesota statutes, or the adult's commitment as a mentally ill person has been stayed or continued
- The member was eligible under one of the criteria listed under SPMI, but the specified time period has expired
- The member was eligible as a child with serious mental illness, and the member has a written opinion from a mental health professional, in the last three years, stating that he or she is reasonably likely to have future episodes requiring inpatient or residential treatment of a frequency described in the above criteria, unless ongoing case management or community support services are provided

Refer to [Relocation Services Coordination Targeted Case Management](#) section of the MHCP Provider Manual for more information.

### **Units (bases for measurement)**

In the case of time as part of the code definition, follow HCPCS and CPT guidelines to determine the appropriate units of time to report. Per the guidelines, providers must spend more than half the time of a time-based code performing the service to report the code. If the time spent results in more than half the defined value of the code, and no additional time increment code exists, round up to the next whole number. Any other claim submission for services provided during the remaining balance of the unit of time is duplicative and ineligible. Review the following unit of measurement examples:

#### **15-minute example**

<b>Minutes</b>	<b>Units</b>
0 – 7	None
8 – 15	1

#### **30-minute example**

<b>Minutes</b>	<b>Units</b>
0 – 15	None
16 – 30	1

#### **60-minute example**

<b>Minutes</b>	<b>Units</b>
0 – 30	None
31 – 60	1

### **Outcome Measures Reporting**

The Minnesota Department of Human Services (DHS) requires regular reporting of client outcomes information for publicly funded mental health services using the Mental Health Information System (MHIS) for adults, and the Children's Mental Health (CMH) Outcome Measures Reporting System for adolescents. DHS uses this information in the analysis of those services to assist in policy development, program management, services administration and federal mandated reporting.

**Mental Health Information System (MHIS):** DHS requires MHCP mental health service providers to use MHIS for adult members. MHIS provides two methods of reporting: an individual web-based data entry and batch submissions of data. For more information on reporting criteria, batch reporting resources, and to sign up to receive MHIS email updates or join the MHIS monthly user call, visit the [MHIS technical assistance](#) webpage.

**CMH Outcome Measures Reporting System:** DHS requires mental health service providers to use CMH for children's services. Find technical assistance and contact and other information for the CMH Outcome Measures Reporting System in the [Children's Mental Health Outcome Measures Reporting System User Manual](#).

### **Noncovered Services**

The following are not covered MHCP mental health services:

- Mileage (provider travel time is not the same as mileage)
- Transporting a member
- Telephone calls that do not follow all [Telehealth Delivery of Mental Health Services](#) requirements
- Written communication between provider and member
- Reporting, charting and record keeping (these activities are considered part of providing services)
- Community planning or consultation; program consultation, monitoring and evaluation; public information; training and education activities; resource development and training activities
- Fund-raising
- Court-ordered services for legal purposes only
- Mental health services not related to the member's diagnosis or treatment for mental illness
- Services dealing with external, social or environmental factors not directly addressing the member's physical or mental health
- Staff training
- Mental health case management for members receiving similar services through the Veterans Administration (VA)
- Duplicate services
- Mental health services provided by an entity whose purpose is not health service related (for example, services provided by the Division of Vocational Rehabilitation or Jobs and Training)
- Legal services, including legal advocacy, for the member
- Information and referral services included in the county's community social service plan
- Outreach services through the community support services program
- Assistance in locating respite care, special needs day care, and assistance in obtaining financial resources, except when these services are eligible under a mental health covered service.
- Client outreach
- Recreational services, including sports activities, exercise groups, craft hours, leisure time, social hours, meal or snack times, trips to community activities, etc.

### **Legal References**

[Minnesota Statutes, 147](#) Board of Medical Practice (for psychiatrist licensure requirements)

[Minnesota Statutes, 148](#) Public Health Occupations

[Minnesota Statutes, 148.171 – 148.285](#) Minnesota Nurse Practice Act

[Minnesota Statutes, 148.88 – 148.98](#) Minnesota Psychology Practice Act

[Minnesota Statutes, 148.907](#) Licensed Psychologist

[Minnesota Statutes, 148.925](#) Supervision

[Minnesota Statutes, 148B.29 to 148B.39](#) Marriage and family therapy

[Minnesota Statutes, 148D.055](#) Board of Social Work, License Requirements

[Minnesota Statutes, 245](#) Department of Human Services

[Minnesota Statutes, 245I](#) Mental Health Uniform Service Standards Act

[Minnesota Statutes, 245.461 – 245.486](#) Adult Mental Health Act

[Minnesota Statutes, 245.487 – 245.4887](#) Children’s Mental Health Act

[Minnesota Statutes, 245.4889 – 245.490](#) Children’s Mental Health Grants

[Minnesota Statutes, 245.491 – 245.90](#) Children’s Mental Health Integrated Fund

[Minnesota Statutes, 256B](#) Medical Assistance for Needy Persons (includes covered mental health services)

[Minnesota Statutes, 256B.0671](#) Covered Mental Health Services

[Minnesota Statutes, 256L.03](#) MinnesotaCare, Covered Health Services

[Minnesota Rules, 9505](#) Health Care Programs

[Minnesota Rules, 9505.0322](#) Mental Health Case Management Services

[Minnesota Rules, 9505.0540](#) Criteria for Readmissions

[Minnesota Rules, 9505.2175 – 9505.2180](#) Health Service Records, Financial Records, Access to Records

[Minnesota Rules, 9505.5000 – 9505.5105](#) Conditions for MA and GAMC Payment

[Minnesota Rules, 9520](#) Mental Health Services

[Minnesota Rules, 9520.0900 – 9520.0926](#) Case Management for Children with Severe Emotional Disturbance (SED) (Rule 79)

[Minnesota Rules, 9535.4068](#) Standards for Family Community Support Services for Children with SED and their Families (Rule 15)

[Code of Federal Regulations title 42, 435.1008 – 1009](#) (IMD) FFP in expenditures for medical assistance for individuals who have declared United States citizenship or nationality; Institutionalized individuals

[Code of Federal Regulations title 42, 440.60\(a\)](#) Medical or other remedial care provided by licensed practitioners

[Code of Federal Regulations title 42, 440.160](#) Inpatient psychiatric services for individuals under age 21

[Code of Federal Regulations title 42, 440.170\(e\)](#) Any other medical care or remedial care recognized under State law and specified by the Secretary, Emergency hospital services

[Code of Federal Regulations title 42, 440.230](#) Sufficiency of amount, duration, and scope

[Title XIX, Section 1915\(g\)](#) of the Social Security Act (MH-TCM)