

## MHCP Provider Manual

### Latest Manual Revisions

**Revised:** January 9, 2026

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.

#### January 9, 2026

##### Individualized Education Program Services

- [Covered and Noncovered Services IEP Health-Related Services](#) – Under **Initial Evaluations, Reevaluations and Health-Related Assessments**, [Covered Health-Related Components of an IEP Evaluation or Reevaluation](#), we added information about indirect services including its definition, exception and billable and non-billable services.

##### Provider Basics

- [Health Care Programs and Services](#) – We added a new [Cost of Care of Tuberculosis](#) section. Under **Overview**, we added a hyperlink for the new section. Under [Legal References](#), we added a hyperlink to Minnesota Statutes, 144.4812.

#### January 8, 2026

##### Early Intensive Developmental and Behavioral Intervention

- [Early Intensive Developmental and Behavioral Intervention \(EIDBI\) Benefit](#) – Under the [Service Authorization](#) heading, we updated the medical review agent's authorization timeline under the Responsibilities, Request Additional Authorization of Services, and Transition and/or Discharge from an agency subheadings.

##### Reproductive Health/OB-GYN

- [Abortion Services](#) – Under [Billing](#), we added information for billing MHCP directly for a member with Medicare as their primary insurance and does not qualify for an abortion under Medicare policy.
- [Family Planning](#) – Under [Billing](#), we added criteria for billing CPT Code 58301 when billing for a member with Medicare as a primary insurer.

#### January 6, 2026

##### Rehabilitative Services

- [Audiology Service s Procedure Codes](#) – We removed CPT codes 92590-92595 as these are no longer covered effective Jan.1, 2026. We added audiology codes 92628, 92629, 92631, 92632, 92634-92639, 92641, and 92642 as covered effective Jan.1, 2026.
- [Rehabilitative Service Codes for OT, PT and Speech-Language Pathology](#) – We updated the [Evaluative, Therapeutic and Rehabilitative table](#). We added CPT codes 98979, 98984 and 98985 as covered codes and updated the descriptions of CPT codes 98976 and 98977 effective Jan. 1, 2026.

#### January 5, 2026

## Enrollment with MHCP

- [Transportation Driver Enrollment Criteria and Forms](#)
  - We clarified the definition for a volunteer driver.
  - Under [How to Enroll](#), we clarified information for medical transportation organizations. Additionally, we added a new section for [individual drivers](#).

## Individualized Education Program (IEP) Services

- [Personal Care Assistance \(PCA\) Services](#)
  - Under [Eligible Members](#), we removed "Require assistance and be determined dependent in one activity of daily living or Level 1 behavior" from the criteria list.
  - Under [PCA Time Studies](#), we updated the procedure code to T1019.
  - Under [Billing](#), we added information to bill MA 1 unit using procedure code T1019.

## January 2, 2026

### Immunizations and Vaccinations

- [Immunization and Vaccine Benefits Codes for Adults](#) – Under **Seasonal Respiratory Illness Vaccines**, we added CPT code 90382.

## January 1, 2026

### Anesthesia Services

- [Anesthesia Services](#) – Under the **Billing** heading, we have added the [2026 Anesthesia Rates](#) table and removed the 2024 Anesthesia Rates table.

### Mental Health Services

- [Psychological Testing](#)
  - Under the [Billing](#) heading, we increased the service hours limit from 8 hours to 10 hours
  - We added an [Authorization](#) section explaining newly created authorization process and criteria.
  - We added a [Resources](#) section listing CMS guidance for psychological testing services.

### Reproductive Health/OB-GYN

- [Breast and Cervical Cancer \(BRCA\) Genetic Mutation Testing](#)
  - We updated the page title to **Breast and Cervical Cancer (BRCA) Genetic Mutation Testing**.
  - We removed content about presumptive eligibility (PE) because we added a new [Presumptive Eligibility for Medical Assistance for Breast or Cervical Cancer Care](#) page.
  - Under [Covered Services](#), **BRCA Genetic Mutation Testing for Breast and Ovarian Cancer Susceptibility**, we removed prior authorization requirements because they are no longer required beginning Jan. 1, 2026.
  - We updated policy coverage language to reflect changes and for clarity.
  - We added a new manual page for [Presumptive Eligibility for Medical Assistance for Breast or Cervical Cancer Care](#).

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## Previous Revisions

[2025 Manual Revisions](#)

[2024 Manual Revisions](#)

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