April 12 – 25, 2022

**Systems announcements**

We will update this section with information about MN–ITS availability, technical information and other systems announcements when necessary.

**Log in to MN–ITS via the MN–ITS: Home webpage or new URL**

Please access MN–ITS using this link to the MN–ITS: Home webpage or the new URL, https://mn-its.dhs.state.mn.us. Do not access MN–ITS using bookmarks or links you have saved. (pub. 12/7/21, rev. 12/8/21, 12/9/21, 12/10/21, rev. 3/29/22)

**Children’s Mental Health Outcome Measures Reporting System update**

We have revised the Children’s Mental Health (CMH) Outcome Measures Reporting System User Manual effective April 12, 2022. The revisions reflect recent updates to the system and include:

- Improvements to the “Submission History” function
- Additional response options for client demographic information
- Addition of the “Strengths and Difficulties Questionnaire” forms for ages 2-4 and Informant report (ages 18 and up)
- Increased functionality and improved user experience of the “CMH Reports” function
- Improvements to the appearance and accessibility of the application

The system updates do not change any current reporting requirements. We recommend providers and staff who administer or enter outcome measures download and review the newest version of the User Manual. Review the [Outcome measures](#) webpage for more information about the measures and reporting system. (pub. 4/20/22)

**Updates made to Housing Focused Person-Centered Plan (DHS-7307)**

We have updated the Housing Focused Person-Centered Plan (DHS-7307) (PDF) with the following:

- Assessed Needs Box: We added a new box that requires staff to check one or more areas of assessed need that was identified in the assessment.
- Areas in Need of Housing: New instructions require staff to write at least 3-4 sentences explaining how the person’s needs (mobility, communication, decision making, or managing challenging behaviors) affect their ability to find or keep housing.
- Support Instructions: New instructions require staff to write at least 3-4 sentences explaining how the provider will support the person with their assessed needs and help them find or keep their housing; as well as identify if they are starting with transition or sustaining services.
- Signature blocks: Members and providers may sign the Housing Focused Person-Center Plan electronically. The new signature page explains how the member and the provider may sign electronically.

Providers and targeted case managers who use the Housing Focused Person-Centered Plan (DHS-7307) must use the updated version beginning Aug. 1, 2022.

Older versions of the Housing Focused Person-Centered Plan (DHS-7307) will be accepted through July 31, 2022. Beginning Aug. 1, 2022, any Housing Stabilization Services request submitted with an out-of-date Housing Focused Person-Centered Plan will be denied.

Email dhshousingstabilization@state.mn.us if you have questions about this message. (pub. 4/20/22)
U.S. Department of Health and Human Services (HHS) extends the federal COVID-19 public health emergency

HHS Secretary Xavier Becerra renewed the federal COVID-19 public health emergency effective April 16, 2022. Visit the HSS' Renewal of Determination That A Public Health Emergency Exists webpage to read the official declaration of this renewal.

Continue following existing COVID-19 policies and procedures for Minnesota Health Care Programs until further notice. We will provide more guidance as it becomes available. (pub. 4/14/22)

1115 Substance Use Disorder (SUD) System Reform Demonstration rate enhancements approved

The Centers for Medicare & Medicaid Services approved Minnesota’s 1115 Substance Use Disorder System Reform Demonstration additional rate enhancements from the 2021 first legislative special session. SUD providers that are approved and enrolled in the 1115 SUD System Reform Demonstration are eligible for these rate enhancements:

- Outpatient SUD providers enrolled in the demonstration are eligible for a 20% base rate enhancement over the rate in effect on Dec. 31, 2020.
- Residential SUD providers enrolled in the demonstration are eligible for a 25% base rate enhancement over the rate in effect on Dec. 31, 2019.

The rate enhancements are effective for dates of service on or after Jan. 1, 2022, for Medical Assistance (MA) members. We will communicate more information about billing and how to receive the rate enhancement when the systems have been updated. Email 1115demonstration.dhs@state.mn.us with any additional questions. (pub. 4/12/22)

Medical supplies codes with rural updates; claims to be reprocessed

We updated all applicable medical supplies codes with a rural rate effective Jan. 1, 2022. Some of the codes for dates of service between Jan. 1, 2022, through March 30, 2022, were reimbursing using nonrural rates instead of rural rates. We have corrected the issue and we will reprocess claims. The reprocessed claims will appear on a future remittance advice. (pub. 4/12/22)

Early Intensive Developmental and Behavioral Intervention (EIDBI) enrollment compliance change

The Minnesota Department of Human Services (DHS) is implementing the EIDBI advance certification requirement due to a legislative change in 2019, which goes into effect July 1, 2022.

All current MHCP-enrolled EIDBI providers are required to meet the requirements on the EIDBI Provider Agency Assurance Statement (DHS-7120B) (PDF) and resubmit the form by July 1, 2022, to avoid billing interruption.

An agency representative must complete the DHS-7120B and initial the DHS-approved treatment modality that is provided at the agency. The person listed as the advanced certification holder in that treatment modality on your DHS-7120B must be actively enrolled with MHCP. If you provide multiple modalities, you must indicate an advanced certification holder for each modality.

The requirement to employ a person with advanced certification in the treatment modality you provide does not replace the requirement for EIDBI agencies to employ a qualified supervising professional (QSP), who is a licensed mental health professional. EIDBI agencies must employ a QSP.

Review the EIDBI Provider Enrollment section of the MHCP Provider Manual for more information and for full enrollment requirements. Upload the completed forms, along with all other required MHCP provider enrollment documents, through the online Minnesota Provider Screening and Enrollment (MPSE) Portal or fax to 651-431-7462.
Mental Health Uniform Service Standards webinar held March 31, 2022

The Minnesota Department of Human Services (DHS) Behavioral Health Division held a Mental Health Uniform Service Standards webinar on Thursday, March 31, 2022. The goal of the webinar was to explain how to implement the new Mental Health Uniform Service Standards and the steps you need to take to meet the new requirements which become effective July 1, 2022.

The webinar focused on the implementation plan for Minnesota Health Care Programs enrolled mental health service providers. Review the Implementation Plan: Covered Mental Health Services (PDF) to read the new law, an overview of what is changing, and instructions for what you need to do in response to the changes. We explained the plans, provided additional details and context, and responded to questions during the webinar.

Participants did not need to register to attend the webinar. See Uniform Service Standards Implementation: Mental Health Covered Services for the PowerPoint presentation provided during the webinar.

Community Conversations on building racial equity into Medicaid continue with sessions on calls to action, next steps

Minnesota Department of Human Services (DHS) will host another round of Community Conversations this spring about building racial equity into Minnesota’s Medicaid program for U.S.-born Black Minnesotans.

The online meetings will focus on the report co-created with the community in previous conversations, Building Racial Equity into the Walls of Minnesota Medicaid: A focus on U.S.-born Black Minnesotans, DHS Medicaid Medical Director Dr. Nathan Chomilo and colleagues will share the final report’s recommendations, discuss actions all can take to support this work and gather feedback on the report and the process that created it from community members through facilitated discussion. U.S.-born Black Minnesotans enrolled in Medicaid and those working to advance racial equity in health care are encouraged to participate in one of the Community Conversations from 6 to 7:30 p.m. Tuesday, April 19, or Monday, May 9.

- Register to attend the session April 19
- Register to attend the session May 9

Closed captioning will be available. Email BREWMedicaid.DHS@state.mn.us for other accommodations.

Some Home and Community-Based Services providers must submit new remote support assurance statement

Minnesota Health Care Programs (MHCP) is requiring Home and Community-Based Services (HCBS) programs providers who choose to add waiver services with remote support to their record to submit an updated HCBS Programs Service Request (DHS-6638) (PDF) along with the new Waiver Services Remote Support Provider Assurance Statement (DHS-8059) (PDF) to MHCP.

You can find a list of waiver services that require both form DHS-8059 and an updated DHS-6638 in the “Applicability” row on the Remote support policy webpage.

Call the MHCP Provider Resource Center at 651-431-2700 or 800-366-5411 if you have questions about this message.
Interim process changes to 1115 Substance Use Disorder (SUD) Demonstration utilization management

The 1115 SUD System Reform Demonstration will begin the interim utilization management (UM) process for participating SUD providers on Monday, April 4, 2022. See the Interim utilization management process set for 1115 Demonstration Behavioral Health Division e-memo for more information.

Providers enrolled in the 1115 Demonstration will receive further UM instructions from the DHS 1115 Team and the utilization management vendor, Kepro, via email in the next week.

Please email 1115demonstration.dhs@state.mn.us if you have questions or are interested in providing feedback about the future of SUD utilization management. (pub. 4/5/22)

Remote qualified professional (QP) visits reinstated temporarily retroactive to Sept. 1, 2021

Remote delivery of QP visits was temporarily reinstated retroactive to Sept. 1, 2021, through June 30, 2022, as part of section 3 of Minnesota Session Laws - 2022 Regular Session, Chapter 40, which allowed Minnesota Department of Human Services to temporarily reinstate or extend COVID-19 waivers.

Call the Minnesota Health Care Programs Provider Resource Center at 651-431-2700 or 800-366-5411, option #4, if you have questions about this message. (pub. 4/1/22)

Adjustments on PDF remittance advice for some providers

The following providers of certain services eligible for a Federal Medical Assistance Percentage increase may see claims with adjustment reason code 673 on their March 28, 2022, readable PDF remittance advices (RAs).

- Waiver
- Personal Care Assistance
- Homecare
- Behavioral Health
- Substance Use Disorder
- Intermediate Care Facilities

The adjustments show negative and positive amounts. These were internal Minnesota Department of Human Services adjustments to allocate state and federal funds. The adjustments were made to claims to allocate the correct funding source under section 9817 of the American Rescue Plan Act (ARPA). The sum of the adjusted amounts total zero and have no effect on your finances. You can disregard the adjustments. (pub. 3/30/22)

Instructions for checking on submitted document status

We have noticed an increase in calls to the Minnesota Health Care Programs (MHCP) Provider Resource Center (formerly known as the Provider Call Center) from providers regarding documents submitted via fax and not processed within 30 days.

We encourage providers to use the Minnesota Provider Screening and Enrollment (MPSE) Portal to enroll or make changes to your record. This online platform allows you to see the documents you uploaded and allows you to track progress. You will find guides and the following videos to assist you with using MPSE on the Minnesota Provider Screening and Enrollment (MPSE) Portal webpage:

- Introduction to the MPSE Portal (5 min., 9 sec.)
- Managing User Roles in MPSE (8 min., 40 sec.)
- Introduction to Owners and Authorized Persons in MPSE (6 min., 11 sec.)
- MPSE Registration for New Provider Enrollers (5 min., 33 sec.)
- Managing Existing Affiliations to an Individual Provider in MPSE (8 min., 34 sec.)
- Managing Existing Affiliations to a Direct Support Worker in MPSE (8 min., 33 sec.)
If you have faxed documents to MHCP more than 30 days ago and the documents have not been processed, contact the MHCP Provider Resource Center at 651-431-2700 or 800-366-5411. Please have the following information available when you call:

- Time and date of documents sent to MHCP
- Explanation of documents sent
- Number of pages sent
- Phone or fax number you sent the documents from

If you have faxed documents to MHCP more than 60 days ago and the documents have not been processed, we request that you fax us the documents again. (pub. 3/25/22)

**Provider resource for affordable employee health insurance**

The Disability Services Division has created a webpage for employers to help their employees access affordable health, dental and vision insurance. Review the [Guidance for employers on offering health, dental and vision benefits webpage for tips and information](#). Additional employer resources for employee recruitment and retention can be found under the “Providers” tab on the [Direct care workforce resources](#) webpage. (pub. 3/24/22)

**Minnesota Health Care Programs (MHCP) covers over-the-counter (OTC) COVID-19 tests**

MHCP covers OTC antigen and polymerase chain reaction (PCR) tests according to the American Rescue Plan Act of 2021. The coverage of the OTC COVID-19 tests applies to members covered under the fee-for-service (FFS) program as well those covered through Managed Care Organizations (MCOs).

MHCP members are not able to receive direct reimbursement from Minnesota Department of Human Services (DHS) or MCOs for OTC COVID-19 tests purchased by the member; the provider must bill DHS or the MCOs directly for the OTC tests. Providers submitting claims for OTC tests must have an order from a prescriber for the OTC tests.

The federal Public Readiness and Emergency Preparedness Act expanded prescriptive authority for OTC COVID-19 tests to pharmacists during the public health emergency.

Refer to the [Over-the-Counter COVID-19 Test Coverage for Members covered under Fee for Service or Managed Care Organizations](#) chart for a summary of how FFS and MCOs cover OTC COVID-19 tests. (pub. 3/15/22)

**Health Care Month employer survey**

Governor Tim Walz proclaimed January 2022 as Health Care Month in Minnesota to highlight the work of health care employees and raise awareness about the many employment opportunities in the field.

We ask representatives of health care organizations, including long-term care, direct care, hospitals and clinics and other health care organizations, to take a few minutes to respond to the Minnesota Department of Employment and Economic Development’s (DEED) [Survey of Health Care Employers about Health Care Month](#). Your responses will help DEED plan for future Health Care Months. You can also find workforce resources on Career Force’s [Health Care](#) webpage. (pub. 3/3/22)

**Minnesota Women, Infants, and Children (WIC) program update regarding Similac formula recall**

Abbott Nutrition initiated a voluntary national recall of certain powdered Similac formula products on Feb. 17, 2022. The recall expanded Feb. 28. The Minnesota WIC program uses Similac as their contract formula. The WIC program is allowing temporary substitutions for this contract formula in response to the recall. Review the Minnesota Department of Health’s [Abbott Formula Recall – Health Care Providers (PDF)](#) to see a list of substitutes and more information. (pub. 3/3/22)
Minnesota Health Care Programs (MHCP) will cover vaccine counseling-only visits effective Jan. 1, 2022

MHCP covers vaccine counseling-only visits effective Jan. 1, 2022. Providers may counsel for COVID-19 vaccinations and standard vaccines to children and adults. You may provide counseling both in-person and via telehealth, and providers billing for counseling services must be able to administer the vaccine for which they are counseling. Vaccine counseling-only visits cannot be billed separately if vaccine counseling is a required component of another service provided in the same visit. Refer to the Immunizations and Vaccinations section of the MHCP Provider Manual for billing information. (pub. 2/4/22)

Telehealth provider assurance statement changes and updates

The Telephonic Telemedicine Provider Assurance Statement (DHS-6806A) was created during the public health emergency to temporarily give more providers the ability to provide services via telehealth through audio only.

Legislative changes were made to Minnesota Statutes, 256B.0625, subdivision 3b (Telehealth Services) and these providers can continue providing services via telehealth beyond the public health emergency. The following apply to providers who want to provide and bill for services via telehealth:

- All MHCP providers who are currently enrolled with the Telephonic Telemedicine Provider Assurance Statement (DHS-6806A) and plan to continue providing and billing services via telehealth for dates of services June 1, 2022, and later must submit the Telehealth Provider Assurance Statement (DHS-6806) before June 1, 2022.

Audio-only continues to be an allowable telehealth modality. These changes to the assurance statement do not impact the use of audio only telehealth.

No further action is required from providers who already have an existing and approved Telehealth Provider Assurance Statement (DHS-6806) on file with MHCP, formerly named Telemedicine Provider Assurance Statement (DHS-6806).

Call the MHCP Provider Resource Center at 651-431-2700 or 800-366-5411 if you have questions about this message. (pub. 2/1/22)

Co-pay or family deductible charge for COVID-19 vaccine administration code 0051A-0054A

You will see cost-sharing co-pay or family deductible charges for COVID-19 vaccine administration code 0051A-0054A incorrectly displaying on your claim and remittance advice. The cost-sharing co-pay or family deductible will be deducted from the allowable amount until system changes are made. Providers should not collect the co-pay or family deductible amount from the member. We will reprocess claims after the system changes are complete to bypass cost-sharing and family deductible for the COVID-19 administration codes. Watch for a future provider news message on this webpage regarding updates and billing.

You can find the covered codes and MHCP COVID-19 vaccine billing instructions in the Coronavirus (COVID-19) Billing section of the MHCP Provider Manual. (pub. 2/1/22)

Co-pay or family deductible charge for COVID-19 vaccine administration codes 0004A and 0034A

We are aware of cost-sharing co-pay or family deductible charges for COVID-19 vaccine administration codes 0004A and 0034A incorrectly displaying on your claim and remittance advice. The cost-sharing copay or family deductible will be deducted from the allowable amount until system changes are made. Providers should not collect the co-pay or family deductible amount from the member. We will reprocess claims after the system changes are complete to bypass cost-sharing and family deductible for the COVID-19 administration codes. Watch for a future provider news message on this webpage regarding updates and billing. (pub. 1/25/22)
Minnesota Health Care Programs (MHCP) now covers over-the-counter (OTC) tests for COVID-19

MHCP covers OTC COVID-19 tests (antigen and polymerase chain reaction). OTC COVID-19 tests are a covered benefit according to sections 9811 and 9821 of the American Rescue Plan Act of 2021. See guidance issued by the Centers for Medicare & Medicaid Services #SHO 21-003 (PDF) for more information. Please review the Covered Services Changes and Modifications and the Billing sections of the Coronavirus (COVID-19) section of the MHCP Provider Manual for more information about providing OTC COVID-19 tests. (pub. 11/19/21)

Revised: COVID-19 vaccine booster shot codes approved


Minnesota Health Care Programs (MHCP) will only reimburse for the administration of the vaccine. As a reminder, vaccines are exempt from cost-sharing. Use the following administration codes to report the administration of the booster dose for Pfizer, Moderna and Janssen COVID-19 vaccines:

- **Pfizer-BioNTech, CPT 91300**
  - Administration code 0004A: ADM SARCOV2 30 mcg/0.3mL BOOSTER DOSE

- **Moderna, CPT 91306**
  - Administration code 0064A: ADM SARCOV2 50 mcg/0.25mL BOOSTER DOSE

- **Janssen, CPT 91303**
  - Administration code 0034A: ADM SARCOV2 50X10^16 viral particles/0.5mL BOOSTER DOSE

You may now submit claims. MHCP will cover administration code 0004A retroactive to dates of service beginning Sept. 22, 2021. MHCP will cover administration codes 0064A and 0034A retroactive to dates of service beginning Oct. 20, 2021. You can find the covered codes on the MHCP fee schedule. You can find COVID-19 vaccine billing instructions under Billing in the Coronavirus (COVID-19) section of the MHCP Provider Manual. (pub. 11/15/21, rev. 11/23/21)

**Pfizer COVID-19 vaccine for children ages 5-11 codes approved**

The American Medical Association approved a new Current Procedural Terminology (CPT) code for COVID-19 Pfizer vaccine (91307) and administration codes (0071A and 0072A) for ages 5-11 years. The Advisory Committee on Immunization Practices (ACIP) has issued recommendations for children between the ages of 5 and 11 years receiving the Pfizer-BioNTech pediatric COVID-19 vaccine. Visit the Centers for Disease Control and Prevention COVID-19 ACIP Vaccine Recommendations webpage for more information.

Minnesota Health Care Programs (MHCP) will only reimburse for the administration of the vaccine. As a reminder, vaccines are exempt from cost-sharing. Use the following administration codes to report the administration of the Pfizer vaccine for ages 5-11:

- **Pfizer-BioNTech, CPT 91307**
  - Administration code 0071A: ADM SARCV 10MCG TRS/SUCR 1, 1st DOSE
  - Administration code 0072A: ADM SARCV 10MCG TRS/SUCR 1, 2nd DOSE

You may now submit claims. MHCP will cover administration code 0071A and 0072A retroactive to dates of service beginning Oct. 29, 2021. You can find the covered codes on the MHCP fee schedule. You can find COVID-19 vaccine billing instructions under Billing in the Coronavirus (COVID-19) section of the MHCP Provider Manual. (pub. 11/15/21)
Federal Medical Assistance Percentage (FMAP) increases for claims paid in new federal fiscal year, COVID-19 FMAP percentage continues

Beginning with claims paid on or after Oct. 1, 2021, coinciding with the beginning of the federal fiscal year until the end of the federal fiscal year 2022 (Sept. 30, 2022), regular FMAP increases from 50% to 50.51% (1905(b) of Social Security Act).

Review the Federal Financial Participation in State Assistance Expenditures; Federal Matching Shares for Medicaid, the Children's Health Insurance Program, and Aid to Needy Aged, Blind, or Disabled Persons for October 1, 2021 Through September 30, 2022 Federal Register webpage for more information.

Since Jan. 1, 2020, until the end of the quarter the COVID-19 federal public health emergency ends, the Families First Coronavirus Response Act (Public Law No. 116-127, section 6008) provides a temporary increase of 6.2% in the FMAP rate for the following services for children, parents or guardians with children under 19, individuals 65 and older and individuals blind or disabled:

- Individualized Education Program
- Rule 5 Children’s Residential includes Institutions for Mental Disease, which receives an increase in state funds equal to the federal fund increase.
- County-provided Targeted Case Management services (Child Welfare, Mental Health and Vulnerable Adult-Developmental Disability)

The 6.2% COVID-19 FMAP increase and the Federal Fiscal Year FMAP increase to 50.51% does not apply to adults without children whose eligibility was gained under the Affordable Care Act and some other populations already receiving an enhanced FMAP.

Minnesota Health Care Programs (MHCP) will automatically reprocess paid claims from warrant date Oct. 12, 2021. Counties and providers do not need to do anything to receive the increased FMAP. Claims paid from Oct. 27, 2021, until the end of the quarter the COVID-19 federal public health emergency has ended (defined by federal government) will be paid at the higher 56.71% rate. If the COVID-19 federal public health emergency ends before Sept. 30, 2022, the percentage paid will be 50.51%.

Contact the MHCP Provider Call Center at 651-431-2700 or 800-366-5411 if you have questions about this message. (pub. 11/9/21)

Temporary targeted case management face-to-face contact requirements extended

Federally approved policy modifications to targeted case management (TCM) services to temporarily allow telephone and video-conferencing in place of in-person face-to-face contact during the COVID-19 pandemic have been extended until the end of the federal public health emergency.

See the Coronavirus (COVID-19) section of the Minnesota Health Care Programs Provider Manual and Bulletin #21-69-04: DHS extends temporary changes to Targeted Case Management changes Face-to-face contact requirements for information and requirements about providing targeted case management services during the federal public health emergency.

The change was effective Mar. 19, 2020, and allows case managers to conduct targeted case management visits by phone or video with adults receiving services or their legal guardians, and with children receiving services and their parents or legal guardians. The change runs through the end of the public health emergency.

The affected services include:
- Child welfare targeted case management
- Children’s mental health targeted case management
- Adult mental health targeted case management
- Vulnerable adult or adult with developmental disabilities (VA/DD) targeted case management
Tribal provider requirements
This change means that Indian Health Services (IHS), Sec. 638 Tribal providers, may receive the daily encounter payment when the contact between the case manager and the person receiving services happens by telephone instead of through an in-person face-to-face visit. Although the mode of how a service may be delivered is temporarily changing (for example, targeted case management services can be delivered via telephone temporarily), there are no changes to the payment methodology for the daily encounter payment. The same services and types of providers that are required to generate a daily encounter payment continue to be required when targeted case management services are delivered during the federal public health emergency. (pub. 10/22/21)

Third dose for COVID-19 vaccines approved for certain immunocompromised individuals
The American Medical Association approved Current Procedural Terminology COVID-19 vaccine third dose codes 0003A for Pfizer and 0013A for Moderna for only certain immunocompromised individuals effective Aug. 12, 2021. The Centers for Disease Control and Prevention (CDC) has issued guidance on people recommended to receive a third dose of the COVID-19 vaccine. See the COVID-19 Vaccines for Moderately to Severely Immunocompromised People and How to Talk with Patients Who Are Immunocompromised CDC webpages. The CDC-recommended third dose of an mRNA COVID-19 vaccine is to be administered 28 or more days from administration of the second dose. However, the physician or other qualified health care professional should use clinical judgment to determine whether a third dose is appropriate for the patient.

Minnesota Health Care Programs (MHCP) will only reimburse for the administration of the vaccine. As a reminder, vaccines are exempt from cost-sharing. Use the following administration codes to report the administration of the third dose for only Pfizer and Moderna COVID-19 vaccines:

- **Pfizer-BioNTech**
  - Administration code 0003A: ADM SARSCOV2 30MCG/0.3ML 3RD DOSE

- **Moderna**
  - Administration code 0013A: ADM SARSCOV2 100MCG/0.5ML 3RD DOSE

You may now submit claims. MHCP will cover administration codes 0003A and 0013A retroactive to dates of service on or after Aug. 12, 2021.

You can find the covered codes on the MHCP fee schedule webpage. The MHCP COVID-19 vaccine billing instructions are in the Coronavirus (COVID-19) Billing section of the MHCP Provider Manual. (pub. 9/10/21)

Payments ending for COVID-19 customized living rate add-on
Minnesota Department of Human Services (DHS) will not look for new or adjusted claims from providers eligible for customized living rate add-on payments described in Bulletin #20-25-02: Customized living rate add-on payments for settings with confirmed cases of COVID-19 (PDF) effective Sept. 30, 2021.

DHS will make one final round of add-on payments after Sept. 30, 2021, based on any eligible fee-for-service claims submitted before Sept. 30, 2021. DHS has informed managed care organizations (MCOs) of its plan to end payment processing for this program. MCOs will determine when they will stop processing add-on payments for services they coordinate.

See the Payments end for COVID-19 customized living rate add-on eList announcement for more details. (pub. 9/7/21)

Revised: Verbal consent of individual treatment plans (ITPs) through telehealth
We revised language to clarify that the policy is in effect now and remains in effect; it does not begin Sept. 1, 2021. A temporary peacetime emergency waiver allowing the member’s verbal or electronic written approval of the ITP or change in the ITP for mental health services or assessments delivered through telehealth remains in effect Sept. 1, 2021,
based on new legislation. You may document the member’s verbal approval or electronic written approval of the treatment plan or change in the treatment plan instead of obtaining the member’s signature.

This is effective Sept. 1, 2021, for providers of the following services:

- Intensive Rehabilitative Mental Health Services
- Children’s Therapeutic Support Services
- Intensive Treatment Foster Care
- Adult Rehabilitative Mental Health Services
- Adult Mental Health Mobile Crisis Services
- Children’s Mental Health Mobile Crisis Services
- Outpatient Mental Health

Call the Minnesota Health Care Programs Provider Call Center at 651-431-2700 or 800-366-5411 if you have questions about this message. (pub. 8/25/21, rev. 8/26/21)

**Personal Care Assistance (PCA) program policy updates due to the end of the state’s COVID-19 peacetime emergency**

The Minnesota COVID-19 peacetime emergency ended July 1, 2021, and the Minnesota Department of Human Services will end one temporary peacetime emergency PCA program change and reinstate another based on new legislation.

**Change that will expire**
The remote qualified professional visits waiver was extended through Aug. 30, 2021, and then will expire. Follow the rules listed in the [Qualified professional (QP) services](#) PCA policy manual for these visits effective Aug. 31, 2021.

**Change reinstated**
Parents of minors and spouses may care for their family members and be paid for PCA services effective July 1, 2021. Parents and spouses must be enrolled with Minnesota Health Care Programs (MHCP) as an individual PCA.

**Questions**
Call the MHCP Provider Call Center at 651-431-2700 or 800-366-5411, option #4, if you have questions about this message. (pub. 8/4/21)

**Update on COVID-19 waivers and end of the state peacetime emergency**

On June 30, the Minnesota Legislature voted to end the state peacetime emergency effective Thursday, July 1, 2021, at 11:59 p.m. This will end the COVID-19 Peacetime Emergency authority the Department of Human Services (DHS) has under Executive Orders 20-11 and 20-12 to seek federal authority to change or waive federal requirements and to modify and waive certain statutes and rules related to DHS programs. We have used this authority to respond to the COVID-19 pandemic. We are quickly working to analyze the language in the [2021 HHS Omnibus bill](#) that modified the transition timeline for a number of the COVID-19 “CV waivers and modifications” and also made several pandemic changes a part of permanent state law. We will be making updates to our DHS [waivers and modifications](#) webpage to reflect revised dates soon. Please watch DHS bulletins, manuals and other regular communication channels for program-specific guidance over the coming weeks. (pub. 7/2/21)

**Training**

**Minnesota Provider Screening and Enrollment (MPSE) portal training for transportation providers**

Minnesota Health Care Programs (MHCP) is offering free MPSE portal training sessions to transportation providers via Webex. This training will explain how to use and navigate the MPSE portal. We will also show you how to complete an organization to individual affiliation request for enrolling your individual drivers.
The first training session will be Tuesday, Feb. 15, 2022, and additional sessions will be held every two weeks until April 12, 2022. You can register for these sessions by visiting the [Minnesota Provider Screening and Enrollment (MPSE) Portal Training for Transportation Services Providers](#) webpage for the MPSE portal for transportation providers and select the date from the links provided.

As a reminder, on July 1, 2021, Minnesota legislation began requiring all nonemergency medical transportation (NEMT) drivers to enroll with MHCP and affiliate with a transportation organization by July 1, 2022.

Review past provider notifications for more information:
- [Nonemergency Medical Transportation (NEMT) driver enrollment required, enrollment process has begun](#) MHCP provider news and updates message posted July 8, 2021
- [Incomplete Nonemergency Medical Transportation driver applications delay processing](#) MHCP provider news and updates message posted Dec. 23, 2021
- [How to Enroll](#) information in the Transportation Enrollment and Criteria and Forms section of the MHCP Provider Manual updated Jan. 4, 2022, to make the enrollment process clear for both transportation organizations and individual drivers

**Minnesota Health Care Programs (MHCP) on-demand video and online training updates**

MHCP offers training for providers who provide services for members enrolled in MHCP. We have updated on-demand and online training opportunities on the [MHCP provider training](#) webpage.

**On-demand videos**
On-demand videos are arranged by category, including Minnesota Provider Screening and Enrollment Portal (MPSE), MN–ITS and Billing. Each video can be viewed in 10 minutes or less and provides instructions on a concept or technique.

**Online training**
Online training is arranged by content for all providers or specific providers. Training is led by an instructor who will help attendees navigate the Minnesota Department of Human Services website and locate and use MHCP provider information and other related webpages or internet-based applications such as MN–ITS. Due to COVID-19, all instructor-led training is online only. We will update you on this webpage when, and if, we will continue in-person training. We have recently updated the look of the provider-specific training webpages and added the 2021 training dates. (pub. 12/22/20)

**Free online Resources and MN–ITS training available**

Minnesota Health Care Programs (MHCP) offers free online training for MHCP-enrolled providers. Go to the [MHCP provider training](#) webpage to see the list of available training. (pub. 6/22/21)

**Free online Provider Basics and MN–ITS training available**

Minnesota Health Care Programs (MHCP) is offering free online Provider Basics Resources and MN–ITS training to all enrolled MHCP providers who bill fee-for-services claims. This training is being offered monthly beginning Mar. 10, 2021.

You will learn how to navigate the MHCP provider webpages and the MHCP provider manual, and how to use MN–ITS administration, mailbox and eligibility requests (270/271) features. Go to the [Provider Basics](#) webpage to register for this training.

Claim training is not provided in this training. See our [MHCP provider training](#) webpage to register for provider-specific claim training. (pub. 2/11/21)
New on-demand training videos added

Minnesota Health Care Programs (MHCP) offers free on-demand training videos arranged by category on the [MHCP provider training](#) webpage. Each video can be viewed in 10 minutes or less and provides instructions on a concept or technique.

New videos:
- [How to Read Your Remittance Advice](#) – You will learn what a remittance advice is, how you receive it and the information it contains.
- [Guide to the User Administration Section in MN–ITS](#) – Primary Administrators will learn how to make changes to their organization’s MN–ITS account.
- [Entering Coordination of Benefits (COB) for Medicare Part B](#) – You will learn how to add coordination of benefits to a Professional claim using a Medicare Part B Explanation of Benefits.
- [How to Read Your Payer Claim Control Number, PCN](#) – A PCN is a 17-digit claim number that is automatically generated by our system when a claim is submitted to Minnesota Health Care Programs for processing. This video will focus on the individual components of the PCN that are the most important for billers to understand.

(pub. 3/24/22)

Free online Minnesota Provider Screening and Enrollment (MPSE) training available

Minnesota Health Care Programs is providing free online training for our MPSE online portal.

We have the following videos:
- [Managing Existing Affiliations to an Individual Provider in MPSE](#)
- [Managing Existing Affiliations to a Direct Support Worker in MPSE](#)

See the [MPSE portal training](#) webpage for registration, brief online tutorials to help prepare you for class and more information. (pub. 2/1/20, rev. 2/19/20)

Additional information

- [Provider news and updates archive](#)
- [MHCP provider policies and procedures](#)
- [Latest Manual Revisions](#)
- [Grants and requests for proposals](#)

Call the MHCP Provider Call Center at 651-431-2700 or 800-366-5411 if you have questions about this information.