

June 17 - 30, 2025

## Systems announcements

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

## Important reminders

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Providers are required to verify member eligibility. Use [MN-ITS](#) or call the automated Eligibility Verification System at 651-431-2700 or 800-366-5411 option 1. Review the [Verifying MHCP Eligibility in MN-ITS](#) and [Understanding Eligibility Results in MN-ITS](#) videos for more information.

## Current news and updates

### Pre-Enrollment Risk Assessment (PERA) effective for Housing Stabilization Services providers effective July 1, 2025

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The Minnesota Legislature made changes to state laws affecting Housing Stabilization Services (HSS), including new requirements for provider enrollment.

Effective July 1, 2025, the Minnesota Department of Human Services (DHS) must complete a Pre-Enrollment Risk Assessment of any agency seeking to enroll as a Housing Stabilization Services provider.

The assessment of the agency will include:

- History of performing services similar to those required for HSS.
- Whether the services require the potential agency to perform duties at a significantly increased scale and, if so, whether the potential agency has the capability and organizational capacity to do so.
- Financial information and internal controls.
- Compliance with other state and federal requirements, including but not limited to debarment and suspension status, and standing with the Secretary of State, if applicable.

At any time when completing the Pre-Enrollment Risk Assessment, DHS may deem the potential agency ineligible and deny or rescind enrollment. A potential agency may appeal a decision regarding its eligibility in writing within 30 business days. The commissioner must notify each potential agency of the commissioner's final decision regarding its eligibility.

Additional information about the process will be published in July.

#### Current HSS providers

We will notify current providers when they must complete the Pre-Enrollment Risk Assessment. An explanation of this notification process will be included in the additional information we will be providing in July.

Any Housing Stabilization Services provider enrolled before July 1, 2025, that billed for services on or after Jan. 1, 2024, must complete the Pre-Enrollment Risk Assessment no later than July 1, 2026, to remain eligible. Any provider enrolled before July 1, 2025, that has not billed for services on or after Jan. 1, 2024, must complete the Pre-Enrollment Risk Assessment to remain eligible.

#### Other HSS-related legislation

The 2025 legislative session resulted in additional changes to [Minnesota Statutes, 256B.051](#) as well as other sections of statute that apply to Housing Stabilization Services. We are preparing a summary of the new legislation that will be shared through GovDelivery and this webpage in July 2025. (pub. 6/27/25)

## Housing Stabilization Services (HSS) and Recuperative Care (RE) provider enrollments require Pre-Enrollment Risk Assessment (PERA) effective July 1, 2025

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Beginning July 1, 2025, providers who want to enroll as an HSS provider or an RE provider need an approved PERA before submitting their enrollment applications. Enrollment applications received on or after July 1, 2025, will not be processed until Provider Eligibility and Compliance receives a copy of the PERA approval letter issued to the provider.

Any HSS or RE provider enrolled before July 1, 2025, that billed for services on or after Jan. 1, 2024, must complete the Pre-Enrollment risk assessment on a schedule determined by the commissioner and no later than July 1, 2026, to remain eligible. Minnesota Department of Human Services will notify providers of this process when it is available.

We are finalizing the PERA process and will have more information for providers. Please continue to watch this webpage for more information.

### Information for House Stabilization Services providers

You should also review the [Risk Levels and Enrollment Verification Requirements](#) table for information about the risk level, a site visit and an enrollment fee. (pub. 6/27/25)

## Medicare fraud scheme involving phishing fax requests targets providers and suppliers

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The Centers for Medicare & Medicaid Services (CMS) has issued an alert about a Medicare fraud scheme that targets providers and suppliers via fax. Refer to the Alert: Medicare Fraud Scheme Involving Phishing Fax Requests message on the CMS' [Crushing Fraud, Waste, & Abuse](#) webpage for more information about the scheme and how to protect yourself. (pub. 6/27/25)

## Revised: Important: single dental benefit administrator (DBA) deadline extended to Jan. 1, 2028

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We revised this message to reflect that Minnesota Health Care Programs (MHCP) members with county-based purchasing coverage are not impacted by the potential implementation of a single DBA for MHCP effective Jan. 1, 2028.

The Minnesota Legislature has extended the deadline for the potential implementation of a single DBA for Minnesota Health Care Programs (MHCP) to Jan. 1, 2028.

In 2021, the Minnesota Legislature established a utilization benchmark of 55 percent for managed care organizations (MCOs) and county-based purchasing plans that contract with the Minnesota Department of Human Services (DHS) to administer the dental benefit in Medical Assistance (MA) ([Minnesota Statutes, 256B.0371](#)). This benchmark was set for calendar year 2024. The original legislation stated that if this benchmark was not met, DHS would be required to contract with a single DBA for MHCP by Jan. 1, 2026; however, the deadline for implementation is now Jan. 1, 2028.

DHS began planning for the potential 2026 deadline, including issuing a request for proposal and selecting Delta Dental of Minnesota as the DBA. We will continue to work with Delta Dental of Minnesota in accordance with the new deadline.

**Note, if the 55 percent utilization benchmark is met, the single DBA will not be implemented. If the benchmark is not met, the single DBA will go into effect on Jan. 1, 2028.** This would apply to all MHCP members, including those with coverage from MA, MHCP fee-for-service, managed care, Program HH or MinnesotaCare.

Providers do not need to take any action at this time.

We will provide updates and instructions throughout the coming months. (pub. 6/17/25, rev. 6/24/25)

## DHS sends notice of SEIU Healthcare MN and IA contract terms for 2025-2027 with July 1 effective date for some terms

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The Minnesota Department of Human Services sent the following providers a memo in their MN–ITS **PRVLTR** folder on June 16, 2025:

- Personal Care Assistance (PCA) Choice and
- Community First Services and Supports (CFSS) budget model agencies
- Financial Management Service (FMS) providers

The subject of the memo was “Service Employees International Union (SEIU) Healthcare Minnesota and Iowa Contract Requirements for 2025-2027.”

PCA Choice, CFSS **budget** model agencies and FMS providers are responsible for knowing the information contained in the memo and for implementing the contract terms on their effective dates. (pub. 6/18/25)

## MinnesotaCare coverage changes for undocumented adults in Minnesota effective June 15

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The Minnesota Legislature has acted to end MinnesotaCare eligibility for adults who are undocumented in the state. The mandated changes are effective June 15, 2025. Minnesota Department of Human Services continues work to implement these changes and the following is what we know right now about MinnesotaCare coverage for undocumented adults and children effective June 15. We will share more information as it becomes available.

**Kids under the age of 18 who are undocumented and from low-income families will keep their coverage and can continue to apply and gain new eligibility.**

After coverage begins for eligible undocumented kids, it can last up until the month after a child's 18th birthday.

**Adults who are undocumented and currently covered remain eligible for the program through the end of 2025.**

Those who had coverage on June 15, 2025, will keep it through the end of the year as long as they continue to pay their premium, if they have one, and meet the income and other eligibility factors. Coverage for these adults will end at the close of the day Dec. 31, 2025.

**Any new applications for coverage will be denied for Minnesotans age 18 or older who are undocumented.**

We will update the MinnesotaCare eligibility system in the next couple of weeks and applications submitted by undocumented adults might be approved in the online system. However, those adults will receive a denial letter in the mail soon after applying in compliance with the change made by the Legislature. This may create confusion for people, and DHS is educating partners about the issue to minimize problems.

MinnesotaCare eligibility remains available for low-income Minnesotans who are:

- U.S. citizens or U.S. nationals
- Deferred Action for Childhood Arrivals grantees, also known as DACA or Dreamers.
- Residents who are lawfully present, as defined in the [Minnesota Health Care Programs Eligibility Policy Manual](#).
- Undocumented children under age 18.

**Some options remain for Minnesotans who need care and have no insurance.**

- Emergency Medical Assistance remains available for people who are undocumented. This program pays for emergency care. Learn more on the [Emergency Medical Assistance](#) webpage.
- Medical Assistance is available to any pregnant person regardless of immigration status and for 12-months postpartum or after giving birth. Learn more on the [Health care coverage for pregnant people](#) webpage. Medical Assistance is also available for people receiving services at the Center for Victims of Torture.
- Minnesotans can receive health care from Minnesota Health Centers regardless of their ability to pay. Find a health center near you on the Minnesota Health Centers' [Find a Health Center](#) webpage.
- Minnesotans may be eligible for low-cost insulin through the Minnesota Insulin Safety Net Program. Learn more on the [Minnesota Insulin Safety Net Program](#) webpage.

(pub. 6/17/25)

## Mobility devices authorization requirements update

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Minnesota Health Care Programs (MHCP) revised authorization and billing requirements for mobility devices and accessories effective June 1, 2025.

MHCP is changing authorization from always to sometimes required for most manual wheelchairs, regardless of the device being requested for purchase or rental. The following devices only require authorization for excess quantities or as backup devices for power wheelchair users:

- Standard wheelchairs (HCPCS code K0001)
- Standard hemi wheelchairs (K0002)
- Lightweight wheelchairs (K0003)
- High-strength, lightweight wheelchairs (K0004)
- Heavy-duty wheelchairs (K0006)
- Extra-heavy-duty wheelchairs (K0007)
- Rollabout chairs (E1031)
- Transport chairs (E1037 to E1039)

MHCP requires authorization for all purchases and rentals of the following mobility devices:

- Ultralightweight manual wheelchairs (HCPCS code K0005)
- Tilt-in-space manual wheelchairs (E1161)
- Pediatric-size wheelchairs (E1229, E1231 to E1239)
- Custom or other manual wheelchairs (K0008, K0009)
- Power-operated vehicles (K0800 to K0802, K0806 to K0808)
- Power wheelchairs (K0813 to K0891)

Previously, the [Mobility Devices](#) section of the MHCP Provider Manual instructed providers to list all HCPCS codes on authorization requests for purchase, even if an individual HCPCS code does not require authorization. We have updated language for listing accessories. Providers should continue to document medical necessity for all items to be dispensed in the medical record, but only request authorization if the individual HCPCS code requires authorization.

We revised information under the Authorization heading of the [Mobility Devices](#) section of the MHCP Provider Manual to instruct providers to list all options and accessories, the specific medical justification for the mobility device, and each option or accessory in the medical record. Only include devices and accessories on authorization requests that always require authorization or for excess quantities. The following items always require authorization:

- One-arm drive attachments (HCPCS code E0958)
- Push-rim activated power assist systems (E0986)
- Power tilt seating systems (E1002)
- Power recline seating systems (E1003 to E1005)
- Power tilt and recline seating systems (E1006 to E1008)
- Mechanical leg elevation systems (E1009)
- Power leg elevation systems (E1010, E1012)
- Gimbale ventilator trays (E1030)
- Multi-positional transfer systems (E1035, E1036)
- Gear reduction drive wheelchairs (E2227)
- Wheel braking systems (E2228)
- Manual standing systems (E2230)
- Power seat elevation systems (E2298)
- Power standing systems (E2301)
- Electronic components for motors controlled by interfaces (E2310, E2311)
- Alternative interface devices (E2313, E2321 to E2331, E2373, E2399)
- Custom fabricated seating systems (E2609, E2617)
- Powered seat cushions (E2610)
- Mobile arm supports and additions (E2626 to E2623)

Previously, custom fabricated seating systems required authorization if the submitted charge was over \$1,200. Authorization is now required always for HCPCS codes E2609 and E2617, regardless of the total amount. Powered seat cushions, which did not require authorization, also now always require authorization.

Authorization is required for HCPCS code K0108 when the submitted charge is \$400 or more. Authorization is no longer required for any individual part that costs \$400 or more. Authorization is only required if the individual HCPCS code always requires authorization or for excess quantities.

Under the Billing heading of the [Mobility Devices](#) section of the MHCP Provider Manual, we instruct providers to document which accessories and options are included with a mobility device. Do not bill MHCP for standard items included at the time of the initial issue of a wheelchair. Bill two claims, one for HCPCS codes that do not require authorization, and one for HCPCS codes that do require authorization.

Review the [Mobility Devices](#) section of the MHCP Provider Manual and the [Medical Supply Coverage Guide \(PDF\)](#) for information on MHCP authorization requirements and quantity limits by HCPCS code. Contact the MHCP Provider Resource Center at 651-431-2700 or 800-366-5411 if you have questions about this message. (pub 6/17/25)

## **IEP resources and MN–ITS training session scheduled for July 16**

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Minnesota Health Care Programs will host an additional training session on Wednesday, July 16, 2025, because of the unexpected technical issues experienced during the June 11, 2025, session.

Visit the [IEP Resources and MN–ITS Training](#) webpage for more information and to register for the training. (pub. 6/17/25)

## **Certain Certified Community Behavioral Health Clinic (CCBHC) claims reprocessed**

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Minnesota Health Care Programs (MHCP) recently made system updates to enhance the processing of certain Certified Community Behavioral Health Clinic (CCBHC) claims.

Mental health claims submitted by CCBHC Federal Demonstration providers incorrectly processed with a 3% mental health rate add on.

We have completed a claim adjustment to correct the impacted claims with dates of services Jan. 1, 2024, through June 6, 2025. The reprocessing was finalized on June 6, 2025, and the corrected claims are expected to appear on your June 17, 2025, remittance advice.

You do not need to take any further action. (pub. 6/16/25)

## **Revised: Mental health services claims reprocessing to incorporate Medicare Economic Index (MEI) update**

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We have revised this message to explain reprocessed claims may appear on the June 17 or July 1 remittance advice. Minnesota Health Care Programs has begun reprocessing certain mental health service claims to incorporate a 3.27% inflationary adjustment to 2025 reimbursement rates.

The adjustment is based on the MEI and reflects the change in MEI from the midpoint of the previous rate year (2024) to the midpoint of the current rate year (2025). We used the MEI forecast published in the fourth quarter of calendar year 2024 by the Centers for Medicare & Medicaid Services. Minnesota uses MEI to account for changes in the cost of providing services, such as wages, benefits, and overhead.

Impacted claims will be adjusted according to the Rate adjustments for certain mental health services message posted March 10, 2025, on the [Provider news and updates \(PDF\)](#).

We will reprocess claims submitted with dates of services Jan. 1, 2025, through June 3, 2025. You do not need to take further action while we reprocess claims. The reprocessed claims will appear on your June 17, 2025, or July 1, 2025, remittance advice. (pub. 6/12/25, rev. 6/16/25)

## Resubmit claims for individual direct support worker (DSW) records marked as inactive

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Providers who submitted Personal Care Assistance and Community First Services and Supports claims and received MN–ITS claim status code 132 and remittance advice (RA) remark code N290 on their June 3 or June 17 RA need to resubmit their denied or replace partially paid claims. We changed inactive DSW enrollment records to active on June 4, 2025.

If you have resubmitted claims on or after June 4, 2025, and are still experiencing denied claims with these claim status and remark codes, call the Minnesota Health Care Programs Provider Resource Center at 651-431-2700 or 800-366-5411. (pub. 6/6/25)

## PCA and CFSS cost reporting demonstration and Q&A webinars offered

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The Minnesota Department of Human Services' (DHS) Community First Services and Supports (CFSS) Cost Reporting Team will host demonstration and question and answer (Q&A) webinars about cost reporting for personal care assistance (PCA) and CFSS agency providers. The team will explain what cost reporting is, demonstrate how to use the system and answer attendees' questions.

Webinars will be held from 10 - 11:30 a.m. on the following dates:

- June 11, 2025
- July 9, 2025
- Aug. 6, 2025

Review the Disability Services Division's [Webinar announcement](#) for more information. Register to attend the webinars at [PCA and CFSS Cost Reporting Demonstration and Q&A](#).

The Minnesota Legislature directed DHS to develop a provider cost reporting process for agencies that provide agency model PCA or CFSS services ([Minnesota Statutes, 256B.851](#), subdivision 8).

All agencies that provide agency model PCA or CFSS services must submit a completed cost report by the deadline established by DHS. DHS may stop paying you for services you provide if you fail to complete the cost report. Refer to the [CFSS cost reporting](#) webpage for more information and timelines about when your agency will be selected to complete cost reporting.

Email questions about CFSS cost reporting to [dhs.costreport@state.mn.us](mailto:dhs.costreport@state.mn.us). (pub. 6/5/25)

## New residential support services criteria effective July 1, resources available

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Minnesota Department of Human Services will implement new residential support services criteria (RSSC) effective July 1, 2025, requiring members to meet criteria to access community residential services (CRS) and customized living (CL) services. The criteria will apply to members on Brain Injury (BI), Community Alternative Care (CAC), Community Access for Disability Inclusion (CADi), and Developmental Disabilities (DD) waivers who are accessing either CRS or CL services.

Refer to the [Residential support service criteria effective July 1, 2025](#), Community-Based Services Manual to review the criteria, policy and process guidance, and provider responsibilities.

Review the [RSSC implementation resources](#) Disability Services Division (DSD) eList announcement for additional information. Use the [DSD Contact Form](#) if you have questions about RSSC policy. (pub. 5/30/25)

## Medical Assistance and MinnesotaCare Fee-For-Service Member Handbook published

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Minnesota Health Care Programs published a handbook for members with coverage through Medical Assistance fee-for-service or MinnesotaCare fee-for-service. This handbook gives members information about who to call with questions,



details on covered services, member rights and responsibilities and more. Review the [Medical Assistance and MinnesotaCare Fee-For-Service Member Handbook \(DHS-8646\) \(PDF\)](#) and share this new resource with members. (pub. 5/29/25)

## MTM-MNET, SmartLink, and local and Tribal agencies mileage claims reprocessing

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Minnesota Health Care Programs (MHCP) has updated the system issue that was incorrectly denying mileage claims for MTM-MNET, SmartLink, and local and Tribal agencies.

We will reprocess impacted claims throughout the next two warrant dates. The reprocessed claims will appear on the June 3, 2025, or June 17, 2025, remittance advice. You do not need to take any action at this time.

If your reprocessed claim is not included on the June 3, 2025, or June 17, 2025, remittance advice, providers should resubmit the claim if it is within timely filing.

Call the MHCP Provider Resource Center at 651-431-2700 or 800-366-5411 with questions about this message. (pub. 5/22/25)

## Webinar session for Customized Living providers

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The Minnesota Department of Human Services Disability Waiver Rate System (DWRS) Cost Reporting team will host a webinar session about DWRS cost reporting for customized living providers June 18, 2025, from 10 to 11:30 a.m.

We will cover the following topics:

- DWRS cost reporting overview
- DWRS cost reporting online system demonstration, including how to sign on and enter data into the system
- Reporting requirements
- Specific information for customized living providers
- DWRS Cost Reporting Team contact information

Review the Disability Services Division [Webinar announcement: DWRS Cost Reporting Demonstration and Q&A – Customized Living Providers](#) webpage for webinar details and registration information. (pub. 5/22/25)

## Minnesota Health Care Programs (MHCP) experiencing high call volume

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Due to new legislative updates and revalidations, the MHCP Provider Resource Center is experiencing high call volume. You may experience a longer wait time or you will have to call back at a different time.

You may also refer to the following webpages:

- [MHCP billing resources](#) webpage for billing resources
- [MHCP provider training](#) webpage for free training sessions for specific provider types and services

We will offer free question and answer sessions for the MPSE Portal beginning Feb. 7, 2024. Refer to the [Minnesota Provider Screening and Enrollment \(MPSE\) portal training](#) webpage for more information about the sessions. (pub. 1/29/24)

## Training

### Minnesota Provider Screening and Enrollment (MPSE) portal Questions and Answers sessions

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The Minnesota Department of Human Services will be offering weekly questions and answers sessions for the [MPSE Portal](#). Questions and answers sessions take place every Wednesday from 1 to 2 p.m. These sessions are free and no registration is required.

MPSE questions and answers sessions will be held virtually using the Microsoft Teams platform, but attendees do not need to have Microsoft Teams installed. Participants can use the browser version. Find the link to join the questions and answers session on the [MPSE portal training](#) webpage.

#### Who should attend?

- Owners of MHCP-enrolled organizations.
- Individual providers who maintain their own MHCP enrollment records.
- Employees of MHCP-enrolled organizations who maintain provider enrollment records.
- Employees of MHCP-enrolled organizations who process affiliations or do credentialing.
- Employees of MHCP-enrolled organizations responsible for MHCP compliance.
- Individuals or organizations interested in becoming an MHCP provider for the first time.
- Anyone interested in learning more about the MPSE portal.

(pub. 3/18/24)

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

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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. All instructor-led training is online only. (pub. 11/22/22)

### Free online Resources and MN-ITS training available

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Minnesota Health Care Programs (MHCP) offers free online training for MHCP-enrolled providers. Go to the [MHCP provider training](#) webpage to review the list of available training. (rev. 3/3/25)

### Free online Provider Basics and MN-ITS training available

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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. Refer to the [MHCP provider training](#) webpage to register for provider-specific claim training. (pub. 2/11/21)

## On-demand training videos

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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 about 10 minutes and provides instructions on a concept or technique. (pub. 6/3/25)

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

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Minnesota Health Care Programs provides free online training for our MPSE online portal. We have scheduled training sessions for 2025. Visit the [MPSE portal training](#) webpage to review the schedule, register for a training session, view brief online tutorials to help prepare you for class and more information. (pub. 12/17/24)

## Additional information

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

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