

**August 26-September 8, 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**

### **Minnesota Department of Human Services to implement CPT codes for all IEP and IFSP health-related services**

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All school providers enrolled with Minnesota Health Care Programs (MHCP) will be required to use current procedural terminology (CPT) codes and healthcare common procedure coding system (HCPCS) codes when billing for Individualized Education Program or Individualized Family Service Plan health-related services.

Beginning with dates of service on or after Oct. 1, 2025, providers will no longer bill using the current T1018+ modifier codes; and services being delivered under the current T1018+ modifier codes will be billed using CPT or HCPCS codes.

Refer to the “DHS to implement CPT codes for all IEP and IFSP health-related services” PDF dropped to school and school district providers’ MN-ITS mailboxes on Sept. 4, 2025, for more information. You will find the memo in the PRVLTR folder.

Call the MHCP Provider Resource Center at 651-431-2700 or 800-366-5411 with questions. (pub. 9/5/25)

### **Coverage changes for some drug manufacturers in the fee-for-service program effective Oct. 1, 2025**

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The Minnesota Department of Human Services (DHS) has been notified that Salix Pharmaceuticals, INC. will no longer participate in the federal Medicaid drug rebate program effective Oct. 1, 2025. As a result, Medical Assistance (MA) is unable to cover their drugs, including Xifaxan® and Relistor®, effective Oct. 1, 2025, in the fee-for-service program.

Participation in the federal Medicaid drug rebate program is optional for drug manufacturers. However, opting out of the program means MA is unable to cover their drugs because state and federal law requires that drugs covered through MA must be eligible for federal funding. A drug manufacturer must participate in the federal Medicaid drug rebate program for a drug to be eligible for federal funding.

Other drug manufacturers have chosen not to participate in the federal Medicaid drug rebate program effective Oct. 1, 2025. Refer to the [Drug Manufacturer Contacts](#) webpage on the U.S. Centers for Medicare & Medicaid website for a list of manufacturers that will no longer participate. (pub. 9/4/25)

## Revised: Early Intensive Developmental and Behavioral Intervention (EIDBI) individual provider changes

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We have revised this message to clarify an individual provider must complete a new fingerprint background study whenever the individual provider becomes affiliated with an EIDBI agency. The Minnesota Department of Human Services (DHS) is implementing new requirements for EIDBI individual providers.

Effective Aug. 5, 2025, EIDBI providers must have a complete DHS fingerprint background study (BGS) through NetStudy 2.0 (NS2) with an “eligible” or “set-aside” result before they provide services.

### What providers must do

- An EIDBI individual provider must complete a new fingerprint BGS any time the individual provider becomes affiliated with an EIDBI agency. Any EIDBI agency enrolling, reenrolling or revalidating individual providers must include the individual’s BGS ID or Application ID from the NS2 system. Submit using the Minnesota Provider Screening and Enrollment (MPSE) portal or by fax.
- If submitting in MPSE, include the BGS ID or Application ID from the NS2 system in the Notes section of an Enrollment Record Request. Upload a [Fee-for Service \(FFS\) only or FFS and Managed Care Organization In-Network Provider Agreement \(DHS-4138\) \(PDF\)](#) and the following applicable forms:
  - [Early Intensive Developmental and Behavioral Intervention \(EIDBI\) Qualified Supervising Professionals \(QSP\) Assurance Statement \(DHS-7120C\) \(PDF\)](#)
  - [Early Intensive Developmental and Behavioral Intervention \(EIDBI\) Level I Provider Assurance Statement \(DHS-7120D\) \(PDF\)](#)
  - [Early Intensive Developmental and Behavioral Intervention \(EIDBI\) Level II Provider Assurance Statement \(DHS-7120E\) \(PDF\)](#)
  - [Early Intensive Developmental and Behavioral Intervention \(EIDBI\) Level III Provider Assurance Statement \(DHS-7120F\) \(PDF\)](#)
- If submitting by fax, you must enter the NS2 BGS ID or Application ID in the Individual Provider Personal Profile section of the [Individual Provider Enrollment Application \(DHS-4016\) \(PDF\)](#), complete and submit the [Fee-for Service \(FFS\) only or FFS and Managed Care Organization In-Network Provider Agreement \(DHS-4138\) \(PDF\)](#) and the following applicable forms:
  - [Early Intensive Developmental and Behavioral Intervention \(EIDBI\) Qualified Supervising Professionals \(QSP\) Assurance Statement \(DHS-7120C\) \(PDF\)](#)
  - [Early Intensive Developmental and Behavioral Intervention \(EIDBI\) Level I Provider Assurance Statement \(DHS-7120D\) \(PDF\)](#)
  - [Early Intensive Developmental and Behavioral Intervention \(EIDBI\) Level II Provider Assurance Statement \(DHS-7120E\) \(PDF\)](#)
  - [Early Intensive Developmental and Behavioral Intervention \(EIDBI\) Level III Provider Assurance Statement \(DHS-7120F\) \(PDF\)](#)

### Form changes

- The [MHCP Individual Provider Profile Change \(DHS-3535\) \(PDF\)](#) is no longer accepted to add EIDBI affiliations.
- Starting Aug. 5, 2025, the [MHCP Individual Provider Profile Change \(DHS-3535\) \(PDF\)](#) may only be used to:
  - End an affiliation
  - Submit a name change
  - Add a National Provider Identifier (if the provider previously had a Unique Minnesota Provider Identifier (UMPI))

Call the Minnesota Health Care Programs Provider Resource Center at 651-431-2700 or 800-366-5411 if you have questions about this message. (pub. 8/7/25, rev. 9/4/25)

## 2025 hearing aid volume purchase contract effective Sept. 1, 2025

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The [2025 Hearing aid contract, vendors, models, prices, and codes \(PDF\)](#) became effective Sept. 1, 2025. The 2024 contract expired Aug. 31, 2025.

Providers have a 30-day grace period for dispensing instruments purchased, but not delivered, before the contract expired. You must dispense hearing aids obtained under the 2024 contract before the end of the grace period which is Sept. 30, 2025. This includes hearing aids with approved authorizations.

Call the Minnesota Health Care Programs Provider Resource Center at 651-431-2700 or 800-366-5411 with questions about this message. (pub. 9/2/25)

## Robotic assistive feeding devices coverage criteria

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Minnesota Health Care Programs (MHCP) has updated the [Robotic Arms](#) section of the MHCP Provider Manual to reflect new coverage criteria for robotic assistive feeding devices. We have renamed this section of the provider manual Robotic Arms and Assistive Technology to reflect new coverage criteria for robotic assistive feeding devices.

Robotic assistive feeding devices are tabletop devices that aid members in eating independently.

- Authorization is always required.
- Use modifier UA with HCPCS code E1399 for these assistive devices.
- MHCP only covers one assistive device per eligible member.
- Refer to the revised manual section for complete coverage criteria, including documentation requirements.

### Authorization for Robotic Arms

When submitting an authorization request for robotic arms, providers must now include documentation explaining why a robotic assistive feeding device, as a less-costly alternative, does not satisfy the members medical needs.

Contact the [MHCP Provider Resource Center](#) at 651-431-2700 or 800-366-5411 if you have questions about this message. (pub. 9/2/25)

## Revised: Minnesota Health Care Programs (MHCP) now covers Casgevy, outside the APR-DRG, for members with fee-for-service coverage; must be used for treatment of sickle cell disease

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We revised this message to clarify that providers should submit prior authorization requests for Casgevy to Prime Therapeutics.

Effective July 2, 2025, MHCP will reimburse providers for Casgevy, a cell-based gene therapy for treating sickle cell disease, outside the APR-DRG, if the following criteria apply:

- Casgevy is provided at an authorized treatment center.
- Casgevy is submitted on a professional claim.
- The individual receiving Casgevy is an MHCP member enrolled in fee-for-service.
- The MHCP member has a diagnosis of sickle cell disease.
- The provider has an approved prior authorization (PA) for Casgevy.
- Casgevy is covered for transfusion-dependent beta-thalassemia, however, not outside the APR-DRG (PA is not required).

Providers should submit prior authorization requests for Casgevy to [Prime Therapeutics](#). Refer to [Casgevy clinical PA criteria](#) for additional details.

Call the Provider Call Center (staffed by Prime Therapeutics) at 844-575-7887 with questions. (pub. 7/3/25) (rev. 8/29/25)

## Important memo sent to family residential services providers

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On Aug. 28, 2025, the Minnesota Department of Human Services (DHS) sent memos to family residential services providers with information about the new rate methodology effective Jan. 1, 2026.

We sent the memo to providers' **PRVLTR** folder in their MN-ITS mailbox. Refer to the memo for information on the new family residential services rate methodology.

In addition, Disability Services Division staff will host a webinar **Oct. 21, 2025, at 1 pm.** for family residential services providers to get more information. Review the memo for information about the webinar.

Call the MHCP Provider Resource Center at 651-431-2700 or 800-366-5411, option 4, if you have questions about this message. (pub. 8/28/25)

## Changes to Elderly Waiver customized living services minimum daily rate adjustments

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The 2025 Minnesota Legislature approved changes to the rate floor adjustment (or minimum daily rate) for Elderly Waiver customized living services providers designated as disproportionate share facilities. Review the [Elderly Waiver customized living services rate adjustment](#) in the Provider Manual for details on the eligible facilities, adjustment amount and how to apply.

Refer to the Aging and Adult Services Division [eList announcement](#) on EW customized living services rate adjustments for disproportionate share facilities for additional information. (pub. 8/26/25)

## Children's Mental Health Residential Treatment or Third Path room and board claims reprocessed

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Minnesota Health Care Programs (MHCP) identified Children's Mental Health Residential Treatment or Third Path room and board claims for dates of services from July 1, 2024, through July 29, 2025, that were incorrectly denied. We fixed the issue and reprocessed the affected claims. The reprocessed claims appeared on your Aug. 15, 2025, remittance advice. Providers do not need to take any action.

Call the MHCP Provider Resource Center at 651-431-2700 or 800-366-5411 if you have if you have questions about this message. (pub. 8/26/25)

## DHS Learning Center planned outage

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The Minnesota Department of Human Services (DHS) Learning Center will be unavailable on the morning of **Thursday, Aug. 28, 2025**, for routine maintenance. We anticipate the outage to last from **8 a.m. to noon**.

Providers use the DHS Learning Center when they access training resources and calculator tools on our webpages. If providers try to access a training resource or calculator during this time and it is unavailable, try again after this scheduled maintenance time.

Call the MHCP Provider Resource Center with any questions about this message at 651-431-2700 or 800-366-5411. (pub. 8/22/25)

## Public comment period open for Housing Stabilization Services termination

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On Thursday, Aug. 21, 2025, the Minnesota Department of Human Services posted for [public comment](#) the [State Plan Amendment](#) that would terminate the Housing Stabilization Services (HSS) program. The comment period is open for 30 days, ending Sept. 20, 2025. This is a required step as part of the termination process.

DHS announced Aug. 1 that it was [moving to terminate the HSS program due to widespread fraud](#). Soliciting public comment is the next step in that process.

DHS has compiled an [FAQ for HSS providers and clients](#) webpage that contains all of the information available at this time. The department is collaborating with the federal Centers for Medicaid and Medicare Services (CMS) to ensure this change is implemented with minimal impacts to people who use the program. DHS will continue to update the FAQs and communicate with partners and providers as more information becomes available.

HSS is a Medicaid benefit to help seniors and people with disabilities, including mental illness and substance use disorder, obtain and maintain housing. HSS does not directly pay rent or provide rental assistance as [other housing programs](#) might.

To terminate the program, DHS must submit a State Plan Amendment to CMS. Before submitting to CMS, DHS is required to post the State Plan Amendment for public comment. After 30 days, DHS could submit the State Plan Amendment to CMS for final approval.

All members of the general public, including HSS providers and clients, are eligible to submit responses as part of the public comment period. The process for submitting responses is outlined on the [State Plan Amendment public comment](#) webpage.

DHS will review and respond to feedback submitted during the public comment period as it moves forward with program termination. After CMS approves the State Plan Amendment, DHS will know the program termination date and will communicate that date to providers and enrollees.

Eligible HSS providers can continue to deliver services to enrolled individuals, and individuals may continue applying to the program at this time and until the program is terminated.

As the program comes to an end, DHS is committed to working closely with counties, Tribes, managed care organizations, local advocacy groups, and providers to coordinate resources and support transition planning. DHS will share more detailed information and guidance before the program's end date. (pub. 8/22/25)

## Important cost reporting memo in PCA/CFSS providers' MN-ITS mailbox

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On Aug. 14, 2025, the Minnesota Department of Human Services (DHS) sent memos to Personal Care Assistance (PCA) and Community First Services and Supports (CFSS) providers selected to complete CFSS cost reporting this calendar year but have **not submitted their cost report yet**.

We sent the memo to providers PRVLTR folder in their MN-ITS mailbox titled:

"NPI/UMPI\_PRVLTR\_20250814\_You\_have\_been\_selected\_to\_complete\_CFSS\_cost\_reporting"

If your agency was not selected or if your agency was selected and already submitted your cost report, then your agency did not receive this memo.

In addition to this memo, these providers received at least two emails about their cost reporting requirement, but have not completed their cost report yet. The deadline to submit the cost report is **Aug. 31, 2025**. Failure to complete the cost report by this deadline can result in a stop payment for services.

Refer to the memo for more information on cost reporting and how to complete your cost report by the deadline.

For questions, go to the [CFSS cost reporting](#) webpage or contact the CFSS Cost Reporting Team at [dhs.costreport@state.mn.us](mailto:dhs.costreport@state.mn.us). (pub. 8/19/25)

## Early Intensive Developmental and Behavioral Intervention (EIDBI) provisional licensing update

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Refer to the [EIDBI licensing news and updates](#) DSD eList announcement for information and resources about new provisional licensing requirements for all enrolled EIDBI agencies, as directed by the 2025 Minnesota Legislature. We will gather provider feedback and work with the EIDBI Advisory Council to develop full licensing standards and update you when we have more information. (pub. 8/14/25)

## DHS requests public comments on amendments to Elderly Waiver plan

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The Minnesota Department of Human Services (DHS) requests public comments on amendments to the Elderly Waiver (EW) plan before submitting the amendments to the Centers for Medicare & Medicaid Services for approval. Submit comments to [AASD.Publiccomments@state.mn.us](mailto:AASD.Publiccomments@state.mn.us) by **4 p.m. Friday, Sept. 12, 2025**.

Review the [DHS requests public comments on EW plan amendments](#) Aging and Adult Services Division eList announcement for more information. (pub. 8/13/25)

## Understanding Change of Ownership: What Early Intensive Developmental and Behavioral Intervention (EIDBI) Providers Need to Know training offered

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The Minnesota Department of Human Services is offering a training session for EIDBI providers on how to manage a change of ownership, including how to properly submit the Provider Entity Sale or Transfer Addendum (DHS-5550) and other required documents. The session will cover timelines, credentialing steps, and how to avoid billing or enrollment disruptions during ownership transitions.

The online training session is scheduled for Wednesday, Sept. 10, 2025, from 9 to 10 a.m. Registration is required.

Refer to the [Training announcement: Understanding Change of Ownership: What Early Intensive Developmental and Behavioral Intervention \(EIDBI\) Providers Need to Know](#) Disability Services Division announcement for more information and to register. (pub. 8/13/25)

## FAQ webpage available for Housing Stabilization Services termination

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On Friday, Aug. 1, the Minnesota Department of Human Services (DHS), on the guidance of its own DHS Office of Inspector General, [moved to terminate the Housing Stabilization Services program](#) due to large-scale fraud found by OIG's data analysis and investigatory work.

We know this news brings up many questions for HSS providers and clients, especially about the timeline for termination and whether providers can continue providing services for the time being. DHS has compiled an [Housing Stabilization Services program termination FAQ](#) webpage for HSS providers and clients that contains all of the information available at this time.

Terminating the entire HSS program is a complex action involving numerous parties, and it cannot be immediately enacted. Until then, eligible HSS providers can continue to deliver services to enrolled individuals and individuals may continue applying to the program at this time.

This is a developing situation and DHS will update the FAQs and communicate with providers as more information is received.

We are hearing that there is confusion between Housing Support and Housing Stabilization Services. It might be helpful to clarify whenever possible that these are two separate programs:

- **Housing Stabilization Services** helps a person find and keep housing.
- **Housing Support** (formerly known as Group Residential Housing or GRH) is a resource for adults with low incomes who have a disability or are 65 or older that helps eligible recipients pay for their housing costs. Counties and some tribes administer the Housing Support program for the state and are responsible for determining eligibility.

(pub. 8/12/25)

## Correction to claim adjustment code for Medicare Economic Index on remittance advice for mental health services

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We have updated the claim adjustment group code and claim adjustment reason code related to the Medicare Economic Index (MEI) adjustment as it appears on the remittance advice for mental health services.

Previously, this adjustment was reported as "OA 209." It has now been corrected to "CO 144," which more accurately reflects the nature of the adjustment.

Note: This is a reporting correction only. There is no impact on claims or claim payments. We will not be reprocessing any claims because of this update.

Contact the [Minnesota Health Care Programs Provider Resource Center](#) at 651-431-2700 or 800-366-5411 with any questions. (pub. 8/7/25)



## Recuperative care (RE) provider enrollment with Minnesota Health Care Programs (MHCP) requires surety bond effective July 1, 2025

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Beginning July 1, 2025, MHCP will require providers to submit the new Recuperative Care Surety Bond (DHS-8748) before submitting the application to enroll as an RE provider.

Providers should know the following:

### The Recuperative Care Surety Bond (DHS-8748)

- The Recuperative Care Surety Bond (DHS-8748) will be available soon. It will be posted on [Recuperative Care Enrollment Criteria and Forms](#) when available.
- The surety bond must be in the amount of \$50,000 for first-time enrolling providers.
- MHCP does not provide a list of surety bond companies to consider. It is the provider's responsibility to find a surety bond company to work with.

### Received on or after July 1, 2025: All enrollment applications

- Providers need to complete and comply with the new requirements including the Recuperative Care Surety Bond (DHS-8748). We will process applications after MHCP receives the completed Recuperative Care Surety Bond (DHS-8748).

### Received before July 1, 2025: Approved or complete enrollment applications

- Providers do not need to submit the surety bond at this time. The Minnesota Department of Human Services will notify providers when they need to submit the surety bond.

### Received before July 1, 2025: Incomplete enrollment applications

- Providers need to complete and comply with the new requirements including the Recuperative Care Surety Bond (DHS-8748).

We will post a message on this webpage when updates are available. (pub. 8/6/25)

## DHS has sent CFSS Steps for Success certificates for June 25-27 workshop

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The Minnesota Department of Human Services (DHS) has sent providers who attended the entire Community First Services and Supports (CFSS) Steps for Success workshop on June 25-27, 2025, their certificates of completion.

DHS sent the certificates to the email address used to register for the June CFSS Steps for Success workshop. Providers who completed the entire training should have received their certificate by the end of the business day Aug. 4, 2025.

Call the Minnesota Health Care Programs Provider Resource Center at 651-431-2700 or 800-366-5411 with questions about this message. (pub. 8/4/25)

## DHS seeks proposals to provide consultation services for the Community First Services and Supports program

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The Minnesota Department of Human Services (DHS) is accepting proposals from qualified respondents interested in becoming a Community First Services and Supports (CFSS) consultation services provider. Review the [July 29, 2025 eList announcement](#) or visit our [open grants, RFPs and RFIs](#) webpage for information and instructions on how to submit a proposal. Interested respondents must submit their proposal by 4 p.m. on Aug. 29, 2025. (pub. 8/4/25)

## New EIDBI clinical supervision requirements starting Jan. 1, 2026

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We have revised this message to include level 1 and 2 providers in the monthly observation requirements and limits on telehealth use. The Minnesota Legislature has passed new clinical supervision requirements for qualified supervising professionals (QSPs) for Early Intensive Developmental and Behavioral Intervention (EIDBI) services, effective Jan. 1,

2026. Key changes include minimum supervision ratios for QSPs, monthly QSP, level 1 and 2 provider observation requirements, and limits on telehealth use for QSP, level 1 and 2 provider supervision.

Refer to the [New EIDBI clinical supervision requirements](#) DSD eList announcement to review the requirements. (pub. 7/30/25, rev. 8/14/25)

## PCA and CFSS agency model providers to receive longer RA reports

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The Minnesota Department of Human Services (DHS) recently reprocessed personal care assistance (PCA) and Community First Services and Supports (CFSS) tiered rate claims with dates of service of Jan. 1, 2025, through the current date. As a result, PCA and CFSS agency model providers will see longer than usual remittance advice (RA) reports for warrant cycles over the next 30-45 days. Providers are not required to print their RA reports.

DHS reprocessed these claims because the system was subtracting payments at the tiered rate amount instead of the base rate amount from the service authorization.

Due to the reprocessing, some claims with the adjustment reason code 273 on your RA did not pay at the correct amount. DHS will reprocess those claims to correct the payment on a future remittance advice.

Providers do not need to take any action on the reprocessed claims.

Contact the [MHCP Provider Resource Center](#) at 651-431-2700 or 800-366-5411 with any questions. (pub. 7/29/25)

## Mobility devices policy update

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Minnesota Health Care Programs (MHCP) amended authorization requirements for several mobility device HCPCS codes effective Aug. 1, 2025.

MHCP is changing authorization from sometimes required to always required for wheelchair transportation and transit securement systems and miscellaneous items under the [Mobility Devices](#) section of the MHCP Provider Manual. The following HCPCS codes now require authorization always, regardless of submitted charge:

- E1022: Wheelchair transportation securement system, any type, includes all components and accessories
- E1023: Wheelchair transit securement system, includes all components and accessories
- K0108: Wheelchair component or accessory, not otherwise specified

Refer to [Authorization](#) information in the Mobility Devices section of the MHCP Provider Manual for HCPCS codes listed as always requiring authorization.

Under the [Noncovered Services](#) section, we added a list of accessories under items of convenience. These items are typically noncovered services. Items that address a medical condition should be coded as HCPCS code K0108. MHCP considers these items to be convenience items if they are not requested for the member's specific medical condition. Items only for convenience should be coded as HCPCS code A9270.

Providers must note the reason for requesting HCPCS codes where authorization is sometimes required. These include requests for excess quantities, backup manual wheelchairs, or devices for members who live in a nursing facility. Providers must clearly identify and explain this in documentation submitted to the [medical review agent](#).

Providers must bill two claims when billing MHCP: one for codes that do not require authorization, and one for 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. 7/25/25)



## Medicare crossover claims affected by incorrect mental health adjustment will be reprocessed

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Minnesota Health Care Programs has identified Medicare crossover claims where a 3 percent mental health rate increase was incorrectly applied when Medicare paid only the deductible or coinsurance. We have started reprocessing the affected claims to recoup overpayment. The reprocessed claims will appear on your Aug. 1, 2025, remittance advice. Providers do not need to take any action. (pub. 7/23/25)

## Early Intensive Developmental and Behavioral Intervention (EIDBI) Clinical Supervision trainings offered

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The Minnesota Department of Human Services is offering EIDBI Clinical Supervision trainings to help providers understand supervision requirements, responsibilities, and best practices. These sessions are designed to help EIDBI providers prepare to implement the new clinical supervision requirements passed during the 2025 legislative session.

The online training sessions are scheduled for the following date and time:

- Wednesday, Sept. 17, 2025, from noon to 1:30 p.m.

The content is the same for both training sessions. Registration is required.

Refer to the [Training announcement: EIDBI Clinical Supervision Trainings](#) Disability Services Division training announcement for more information and to register. (pub. 7/23/25)

## Partial hospitalization rate increase

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Partial hospitalization services rendered Jan. 1, 2024, through June 30, 2024, will receive a payment increase of 3 percent from the rates in effect as of Dec. 31, 2023. The rate increase is based on [Minnesota Statutes, 256.761](#), subdivision e. Partial hospitalization was not approved for the three percent rate increase until July 1, 2024.

The Minnesota Department of Human Services will reprocess claims for the affected dates as a gross adjustment payment for the increased rate. You do not need to take further action while we make these claims adjustments. The adjustments will appear on your Aug. 1, 2025, remittance advice. (pub. 7/22/25)

## Audio-only telehealth services extended through July 1, 2027

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The 2025 Minnesota Legislature extended the use of audio-only telehealth services by providers to July 1, 2027. Audio only is the delivery of health care services or consultations through telephone communication while the patient is at one site and the qualified health care provider is at a distant site. Refer to the [Telehealth Services](#) section of the Minnesota Health Care Programs Provider Manual for more information. (pub. 7/16/25)

## Early Intensive Developmental and Behavioral Intervention (EIDBI) background study requirement changes effective Aug. 5

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Effective Aug. 5, 2025, EIDBI agency owners, operators, and direct service staff must complete a Minnesota Department of Human Services background study through NETStudy 2.0; and receive an eligible or set-aside result before providing EIDBI services. The requirement results from changes passed by the 2025 Minnesota Legislature.

Refer to the [EIDBI background study requirement updates](#) DSD eList announcement for a summary of the changes.

We will share more information and resources in future eList announcements, Minnesota Health Care Programs Provider Manual updates, and on this webpage. (pub. 7/15/25)

## Effective Sept. 1, UCare no longer available in some counties for PMAP and MinnesotaCare

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The following are changes coming to the health care plans available in counties for the Prepaid Medical Assistance Program (PMAP) and MinnesotaCare.

### For PMAP and MinnesotaCare members

Effective Sept. 1, 2025, UCare will no longer be available in the following counties for Prepaid Medical Assistance Program (PMAP) and MinnesotaCare:

Benton	Chisago	Crow Wing	Pennington
Ramsey	Roseau	Sherburne	Stearns
St. Louis	Wadena	Wright	

### For MinnesotaCare Members Only

As of July 1, 2025, Medica became available in Benton, Ramsey and Stearns counties for MinnesotaCare.

Effective Aug. 1, 2025, Medica will expand for MinnesotaCare only into the following counties:

Anoka	Carver	Dakota	Olmsted
Rice	Scott	Washington	

### For PMAP Members Only

Effective Sept. 1, 2025, Medica will be expanding for PMAP only into Benton and Kanabec counties.

### Members Notified

The Minnesota Department of Human Services sent letters out to members notifying them of this change July 1-3, 2025. Members will need to choose a different plan available in their county. Refer members to our [Maps](#) online. Providers must work directly with the members new managed care organization (MCO) for contracting information. Refer to [MCO Contacts for MHCP providers](#).

If you have any questions, call the MHCP Provider Resource Center at 651-431-2700 or 800-366-5411.

If members have questions, refer them to their county or the Health Care Consumer Support line at 651-431-3722 or 833-970-0047. (pub. 7/15/25)

## 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)

## 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.