



# June 12, 2025 AMHI/CSP Statewide Meeting

Pam Sanchez, Breanna Bertozzi, Chris Ederer, Jamie Preuss, Stacy Livingston & Sara Erie

**AMHI/CSP Team**

# Agenda

Time	Topic
1pm – 1:15	Welcome & Updates
1:15 – 1:30	Direct Payment Update
1:30 – 2pm	Monitoring Visits Overview
2pm – 2:30	AMHI/CSP Uncompensated Care Guidance
2:30 – 3pm	Q & A

# AMHI/CSP Team at DHS



**Chris Ederer**  
*Team Lead*



**Pam Sanchez**  
*Supervisor*



**Breanna Bertozzi**  
*Team Lead*

# AMHI/CSP Team Continued



**Jamie Preuss**  
*Consultant*



**Stacy Livingston**  
*Consultant*



**Sara Erie**  
*Consultant*

# Equity Acknowledgement

- Be willing to learn through listening.
- Respect Differences.
- Align efforts and focus on solutions for equity.

- Value others' time.
- When speaking, re-introduce yourself (and the County/Region/Tribe you represent).

- Practice compassionate accountability.
- All members are encouraged to ask questions and share ideas during the meeting.
- Hold each other accountable.

- Make explicit what is implicit.
- Allow yourself to be vulnerable.
- Offer recognition for others.



# AMHI/CSP Updates

Breanna Bertozzi | *Team Lead*

- **Communication Request**

- Please send all inquiries to our team email address:
  - [MN DHS amhi.dhs@state.mn.us](mailto:MN_DHS_amhi.dhs@state.mn.us)
- Include AMHI/CSP name, fiscal agent (if applicable), and brief description in email subject line and document names
  - *Example:* Region 2, Beltrami Co. AMHI 2025 Budget Revision Request

# Information Request



Email sent Wednesday, June 11<sup>th</sup> requesting information related to clubhouses/drop in centers



Responses due back by **Wednesday, June 25<sup>th</sup>**



Information received will help inform inter-departmental conversations



# Budget, Workplan & Provider Revisions



Budget, workplan & provider revisions are needed from those who listed RFP/parked funds on 2025-2026 application.



All funding stream specific revisions need to be submitted together on one form as one request.



Revisions cannot be made/submitted more often than every 90 days.



Keep in mind – budget revisions that exceed 10% of that budget year total require an amendment & additional processing time.



## Direct Payment Update

Pam Sanchez | *AMHI/CSP Supervisor*

# Current Legislative Session

- AMHI/CSP is working to implement direct payments.
- Implementation Goal Date: 2027
- What this would mean:
  - AMHIs and CSPs would receive annual allocation in two payments (January and July of each calendar year).
  - Reduced administrative requirements.
  - Increased focus on monitoring funds, data & sub-contractors.

## Current Tasks in Progress:

The project team is awaiting confirmation of specific language from the special session and planning the next steps.

### Deliverable 1:

- ✓ Finalize statute language
  - In special session

### Deliverable 2:

- ✓ Design reporting requirements
  - In progress

### Deliverable 3:

- ✓ Define & document financial processes
  - Designing future process

## Finalize payment process

- Via internal inter-departmental conversations
- Developing control plans

## Finalize reporting requirements

- In collaboration with MACSSA chairs
- Planning on continued use of 2895s for financial/expenditure tracking
- Seeking additional feedback from coordinators

# Coordinator Feedback Request

## Questions to consider about reporting requirements:

- What AMHI/CSP related data is currently being entered into SSIS?
- What outcomes do we want to report on?
- What county outcomes are already reported on?
- What outcomes would be helpful for AMHI/CSP?
- What data could support potential outcomes we want to see in the future?
- What picture do we need to paint to support adding some SMI eligibility into AMHI/CSP?

Questions?





## Monitoring Visits Overview

Chris Ederer | *Team Lead*



Per [OGM Policy 08-10](#), the State of Minnesota must conduct at least one grant monitoring visit before final payment is made on all grants totaling over \$50,000

## **Purpose of Monitoring Visits:**

- Collect feedback and requests for training, support and technical assistance
- Foster partnerships through open discussion
- Acknowledge and appreciate grantee efforts
- Gain a general overview of processes and procedures
- Confirm compliance with AMHI/CSP rules and regulations

## Initial email sent by AMHI/CSP team to grantee will include:

- Timeline and details with request for documentation
- Scheduling options for the virtual monitoring visit

*Required documents will be due two weeks from date of initial email*

## DHS Document Review

- AMHI/CSP team will have two weeks to review submitted documents

## Monitoring Visit Meeting

- Virtual
- Two hours

Questions?





## AMHI/CSP Uncompensated Care Guidance

Pam Sanchez | *AMHI/CSP Supervisor*

## **245.4661 ADULT MENTAL HEALTH INITIATIVE SERVICES.**

### **Subdivision 1. Adult mental health initiative services.**

Each county board, county boards acting jointly, or tribal government must provide or contract for sufficient infrastructure for the delivery of mental health services under the Minnesota Comprehensive Adult Mental Health Act, sections [245.461](#) to [245.486](#).

# AMHI Statute Language Continued

## Subdivision 2. **Program design and implementation.**

Adult mental health initiatives shall be responsible for designing, planning, improving, and maintaining a mental health service delivery system for adults with serious and persistent mental illness that would:

- (1) provide an expanded array of services from which clients can choose services appropriate to their needs;
- (2) be based on purchasing strategies that improve access and coordinate services without cost shifting;
- (3) prioritize evidence-based services and implement services that are promising practices or theory-based practices so that the service can be evaluated according to subdivision 5a;
- (4) incorporate existing state facilities and resources into the community mental health infrastructure through creative partnerships with local vendors; and
- (5) utilize existing categorical funding streams and reimbursement sources in combined and creative ways, except appropriations and all funds that are attributable to the operation of state-operated services under the control of the Direct Care and Treatment executive board are excluded unless appropriated specifically by the legislature for a purpose consistent with this section.

# Upcoming Changes to AMHI Statute Language

## Subdivision 2. **Program design and implementation.**

Adult mental health initiatives shall be responsible for designing, planning, improving, and maintaining a mental health service delivery system for adults with serious and persistent mental illness that would:

(5) utilize existing categorical funding streams and reimbursement sources in combined and creative ways, **except adult mental health initiative funding only after all other eligible funding sources have been applied.** Appropriations and all funds that are attributable to the operation of state-operated services under the control of the Direct Care and Treatment executive board are excluded unless appropriated specifically by the legislature for a purpose consistent with this section.

## [245.4712](#) **COMMUNITY SUPPORT AND DAY TREATMENT SERVICES**

### Subdivision 3. **Benefits assistance.**

The county board must offer to help adults with serious and persistent mental illness in applying for state and federal benefits, including Supplemental Security Income, medical assistance, Medicare, general assistance, and Minnesota supplemental aid. The help must be offered as part of the community support program available to adults with serious and persistent mental illness for whom the county is financially responsible and who may qualify for these benefits.



# Uncompensated Care Guidance

## **AMHI/CSP Uncompensated Care funding cannot be used toward:**

- ✗ Lump sum payments
- ✗ All/any Medical Assistance (MA) program spenddowns
- ✗ All/any Medical Assistance (MA) program co-pays
- ✗ Medicare premiums and co-pays
- ✗ MinnesotaCare premiums and co-pays
- ✗ Hospital-level of care and care for incarcerated individuals

# Uninsured/Underinsured Sample Language

AMHI/CSP grant funds may be used to provide Medical Assistance-approved mental health services to individuals with Serious and Persistent Mental Illness (SPMI) who do not have insurance, or insurance does not cover the service(s).

This may include but is not limited to; Targeted Case Management (TCM) or Assertive Community Treatment (ACT) for uninsured or underinsured individuals who meet AMHI/CSP eligibility criteria when all other payment options have been explored and denied.

# Individual Policy Creation

## **What to consider when developing policies:**

- ⚙ Is the policy equitable?
- ⚙ Is the policy easy to interpret and implement?
- ⚙ How will unique requests be addressed and processed?
- ⚙ How will agencies/providers submit their requests?
- ⚙ Who will be involved in the decision process?
- ⚙ How will decisions be communicated with requestors?

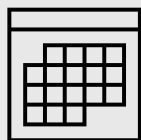
Questions?



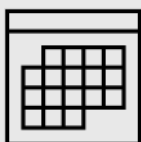
# Upcoming 2025 AMHI/CSP Statewide Meetings

★ *Don't forget to add them to your calendar!* ★

*Meeting details will be posted on the AMHI website*



**Thursday, September 18<sup>th</sup> 1pm-3pm**



**Thursday, December 11<sup>th</sup> 1pm-3pm**

[Adult Mental Health Initiatives / Minnesota Department of Human Services \(mn.gov\)](https://mn.gov/adult-mental-health-initiatives/)

# THANK YOU!



Please email us at

[MN DHS amhi.dhs@state.mn.us](mailto:MN_DHS_amhi.dhs@state.mn.us)