STATE: MINNESOTA ATTACHMENT 4.19-B Effective: July 1, 2023 Page 8f TN: 23-07 Approved: Supersedes: 22-24, (22-16, 17-10, 16-17, 14-09, 13-14) 4.b.Early and periodic screening, diagnosis, and treatment services.

Effective for services provided on or after July 1, 2013, Family Psychoeducation services are paid in 15 minute units using the same methodology that applies to psychotherapy services in item 5.a. Physicians' services.

In-reach Care Coordination services are paid using the same methodology that applies to in-reach care coordination services in item 5.a., Physicians' services.

Effective for services provided on or after July 1, 2013, Clinical Care Consultation services are paid the lower of:

- 1. the submitted charge, or
- 2. the state established rate of:
 - 90899U8 (5 10 min) \$14.10
 - 90899U9 (11 20 min) \$29.14
 - 90899UB (21 30 min) \$47.94
 - 90899UC (>30 min) \$76.02

If the service is provided over the phone, the state established rate is equal to 75% of the amount listed above.

An entity of the type described in item 4.b, section 1, of Attachment 3.1-A and 3.1-B, may employ a mental health professional, and a clinical trainee, as described in item

6.d.A. of Attachments 3.1-A and 3.1-B, to provide psychotherapy, psychoeducation, crisis assistance, clinical care consultation, and individual treatment plan development as part of an intensive treatment program. Effective for services provided on or after July 1, 2017, payment is the lower of:

1) submitted charge, or

2) the payment rate otherwise specified for the component service under item 4.b. of Attachment 4.19-B, except when an intensive level of therapeutic interventions are provided to foster children <u>and children considered to be</u> <u>at-risk who are living with their legal guardians</u>, at least three days per week for two hours per encounter (or during a subsequent period when reduced units of service are specified in the treatment plan and for no more than 60 days in order to meet the needs of the client and family, or pursuant to a discharge plan to another service or level of care), the payment rate of \$386.11 per child per diem. Billing and payment are prohibited for days on which no services are delivered and documented.

Effective for services provided on or after September 1, 2016, Certified Family Peer Specialist services are paid the lower of:

- 1. the submitted charge, or
- 2. the state established rate of:
 - H0038 HA (individual) \$15.02 per 15 minutes
 - H0038 HA HQ (group) \$7.55 per 15 minutes