DEPARTMENT OF HUMAN SERVICES

August 25-September 7, 2026

{**Fighting fraud, waste and abuse**} {**News and updates**} {**Training and more**} {**Provider Connect**}

News and resources for providers enrolled to serve Minnesota Health Care Programs (MHCP) members. We list the current messages and include links to view older messages. Get provider news and other MHCP updates through our free provider email lists.

## Systems announcements

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

## Steps for providers who cannot access new profile requests in MPSE

Some providers who started an MPSE New Profile Request before the June 13, 2026, migration to LoginMN are not seeing their requests in MPSE, or have been unable to log in to MN–ITS using LoginMN.

The Minnesota Provider Screening and Enrollment (MPSE) portal is Minnesota Health Care Programs' secure online tool that lets providers enroll and manage their enrollment records with MHCP.

Scenario A: If you started an MPSE new profile request before June 13, 2026, and cannot see your request in MPSE and are able to log in to MN–ITS through LoginMN:

- Call the **MHCP Provider Resource Center** and ask for a "**portfolio return key**" ticket to be assigned to an MPSE specialist.

Scenario B: If you started an MPSE new profile request before June 13, 2026, and cannot log into LoginMN:

1. Register with LoginMN to create a temporary MPSE account. Follow the Steps for New Enrollers to Register for MPSE to create your temporary account. You must create a separate temporary account for each new profile request you created. **Use the same email address to create each temporary MPSE account**. Each temporary MPSE account can only be assigned one request.
2. Then, call the **MHCP Provider Resource Center** and ask for a **"portfolio return key"** ticket to be assigned to the MPSE specialist. You must request a separate portfolio return key for each new profile request you started in MPSE.

(pub. 8/3/26)

## Information for providers who started enrollment requests in MPSE before June 13, 2026

Providers who started an enrollment request in the Minnesota Provider Screening and Enrollment (MPSE) portal before the switch to LoginMN on June 13, 2026, may not be able to see their enrollment request ID when accessing MN–ITS and selecting MPSE. This is a known issue and we are working to restore access. We will post a message on this webpage when this is resolved. Creating additional tickets or emailing to report this issue results in an increased backlog. Additionally, we are working through the current backlog of LoginMN tickets in the order they were received. Thank you for your continued patience while waiting for us to get back to you. (pub. 7/6/26)

## A message from Minnesota IT Services regarding LoginMN

MNIT Services moved MN–ITS and MPSE to the new LoginMN sign-in system. Some users have had trouble signing in or getting into these applications since the move.

**This is caused by the system move, not by anything related to a provider's account or status.**

If you're having trouble accessing the application, please reach out to your MN–ITS site primary administrator first. If they can't fix the issue, they should email the MNIT Services MN–ITS Help Desk at dhs.tier2@state.mn.us with a short subject line describing the problem, such as: email change needed, MFA issues, password problems, registration email needed, or SFTP issues.

Thank you for your patience while we work on this move. MNIT Services is responding to reports as quickly as possible. (pub. 6/22/26)

## MN–ITS move to LoginMN Frequently Asked Questions posted

We have posted a MN–ITS move to LoginMN Frequently Asked Questions (PDF). LoginMN is a widescale, all-Minnesota state agency effort to improve security, enhance program integrity and pull all state applications under one sign on. (pub. 6/17/26)

## Instructions for accessing MN–ITS through LoginMN

The MN–ITS login moved to LoginMN on June 13, 2026. Minnesota Health Care Programs providers will use the LoginMN website to access MN–ITS. **You will not be able to log into MN–ITS until after your registration with LoginMN is complete.**

We included instructions in this message to assist providers with using this process for the first time. Follow these instructions if you are a current MN–ITS user. Additionally, the Accessing MN–ITS through LoginMN video explains these instructions with screenshots of the process.

Use the following instructions to access MN–ITS through LoginMN for the first time:

1. Locate the email from **noreply_prod@login.mn.gov** sent on June 13, 2026. Make sure to check your spam and junk mail if you do not find the email in your inbox.
   **Note:** If you cannot locate your email, please email dhs.healthcare-providers@state.mn.us with subject: LoginMN and in the body include the email address you would like the registration email sent. Include all email addresses of all users if you have multiple users who did not receive the registration email.
2. Click the Complete the Registration button to start your LoginMN registration.
3. On the registration page, enter the email address where you received your LoginMN email and click **Send Code**. We will email a verification code to the email address.
4. Locate the verification code and enter it in the **Verification Code** field.
5. Enter the password you want to use for your account in the **New Password** field and then reenter the password in the **Confirm New Password** field.
6. Set up multifactor authentication by selecting your preferred method of authentication. If you are not sure which option to choose, select **Phone**. Then click **Continue**. **Note:** We recommend not using the passkey option as losing your passkey will lock you out of your account. Do not use a phone number with an automatic answering service. You must be able to receive the authentication code by either answering the phone or receiving a text message.
7. Complete your multifactor authentication by following the prompts on your screen. If you selected the **Phone** option, choose either a phone call or a text message to receive your authentication code. If you selected **Authenticator App**, you will need to identify the app you are using and complete the process using that app to receive your authentication code.
8. Enter the authentication code you received in the **Verification Code** field and click **Confirm code**.
9. After confirming your code, you will be taken to the Minnesota Partner Apps website. We recommend bookmarking this website. Select **DHS MN–ITS** on your screen.
10. Agree to the terms and conditions by checking the box and then click **Continue**.

11. If you have access to multiple NPI or UMPIs in MN–ITS, select the NPI/UMPI that you need to be active for this MN–ITS session and then click **Continue**.
12. To choose a different NPI or UMPI, click the **Logout** button at the top of the MN–ITS home page to go back to the Minnesota Partner Apps webpage and select **DHS MN–ITS**. Then agree to the terms and conditions to display the NPI or UMPI selection screen again.

After completing your registration, use your bookmark for the LoginMN website. You will be prompted to log in using your email address and password. Additionally, any links to MN–ITS that you previously saved will automatically redirect you to the LoginMN website. (pub. 6/15/26)

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

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.

## Fighting fraud, waste and abuse

The following online resources are updated on a regular basis:
- Frequently asked questions for the **pre-payment review** process announced by Governor Walz on Oct. 29, 2025.
- Provider frequently asked questions and Minnesota Revalidate 2026 for the current **off-cycle revalidation** effort.
- Medicaid program integrity for the department's broader **program integrity** efforts.

## (July 23, 2026) Moratorium on enrollment of NEMT providers located in the seven-county metro area extended

The Minnesota Department of Human Services has extended the moratorium on enrolling nonemergency medical transportation (NEMT) providers located in the seven-county metro area which includes Anoka, Carver, Dakota, Hennepin, Ramsey, Scott, and Washington counties.

The enrollment moratorium, effective beginning Jan. 27, 2026, is now extended to Jan. 27, 2027. We will not enroll any new NEMT providers located in the seven-county metro area during this time. NEMT providers located in any Minnesota county that is outside the seven-county metro area can enroll.

Email transportation.DHS@state.mn.us with any questions about this message. (pub. 7/23/26)

## (July 14, 2026) Clarifying termination dates for providers appealing a revalidation determination on enrollment records with high-risk services

The Minnesota Department of Human Services has received many questions from providers currently appealing a revalidation termination made for their enrollment records with high-risk services, as part of Minnesota Revalidate 2026. Providers currently engaged in the appeals process as part of Minnesota Revalidate 2026 should refer to the following information for clarification on termination dates.

**Termination dates**

Providers who are working with the Minnesota Department of Human Services through the appeals process will not be terminated – even if their termination date has passed – until an appeal determination is made. Many providers in appeals

currently have an outstanding Request for More Information (RFMI) notice, which requires the provider to respond with the additional information requested within seven business days.

We are working to allow for continued waiver service billing and Service Authorizations to be entered while the appeal is in process.

**Help for providers**

Providers who need assistance are encouraged to respond to calls from the Minnesota Department of Human Services and letters about their appeal and revalidation, and can connect with our staff by:

- Attending a virtual MPSE portal technical drop-in session, held daily, Monday through Friday, from 1 to 2 p.m.
- Sending appeal materials and questions to: provider.enrollment.appeals.dhs@state.mn.us.
- Sending general questions regarding revalidation to: revalidation.inquiries.dhs@state.mn.us.

**If it has been more than 30 days since you submitted your appeal and you have not heard from us** via your MN–ITS mailbox, email, U.S. Postal Service or MPSE notes, call the Provider Resource Center (PRC) at 651-431-2700 or 800-366-5411 or use the PRC contact form so we can check the status of your appeal. The PRC is open 8 a.m. to 4:15 p.m. (closed from noon to 12:45 for lunch), Monday through Friday. The contact form is available online 24 hours a day, seven days a week. (pub. 7/14/26)

## (July 10, 2026) Temporary moratorium on enrolling high-risk service providers extended

The Centers for Medicare & Medicaid Services has approved our request to extend the temporary moratorium on enrollment of providers of 12 of the 14 high-risk services identified by the Minnesota Department of Human Services (DHS). The extension is effective from July 27, 2026, through Jan. 27, 2027.

DHS will continue to:

- No longer accept new provider enrollment applications for these services.
- Not process any new provider enrollment submissions, including those previously submitted and currently pending in the queue.
- Keep the moratorium in place for at least six months and may extend it if necessary.

A moratorium on enrolling Early Intensive Developmental and Behavioral Intervention providers was previously extended to Oct. 31, 2026. The Housing Stabilization Services program ended Oct. 31, 2025, and we stopped enrolling Housing Stabilization Services providers.

This moratorium does not impact member enrollment. (pub. 7/10/26)

## View all fighting fraud waste and abuse messages

View all fighting fraud, waste and abuse messages.

## News and updates

## (Sept. 2, 2026) CTSS IEP claims incorrectly denying

The Minnesota Department of Human Services is aware that claims for Children's Therapeutic Services and Supports (CTSS) Individualized Education Program (IEP) services in schools are incorrectly denying.

We are working on system update and will automatically reprocess all impacted claims. School districts and providers do not need to take any action or resubmit claims. You may continue to submit new claims as usual, however they will continue to be denied until the system update is complete.

We will post a provider news message with an update on this webpage when available. Call the Minnesota Health Care Programs Provider Resource Center at 651-431-2700, option 3, or 800-366-5441, option 3, with questions about this message. (pub. 9/2/26)

## (Sept. 1, 2026) Individualized Education Program (IEP) services FY 2025 final and FY 2027 interim rates available

The Minnesota Department of Human Services has sent the IEP Fiscal Year (FY) 2025 final and FY 2027 interim rates to IEP providers via their MN–ITS mailboxes on Aug. 31, 2026.

The document is titled "School NPI #_IEP_20260831_4074_07_FinalFY25_InterimFY27_Rates" and located in the IEP folder. Review the rates and email DHS_RATES_IEP@state.mn.us with questions. (pub. 9/1/26)

## (Sept. 1, 2026) 2026 hearing aid volume purchase contract effective Sept. 1, 2026

The 2026 Hearing aid contract, vendors, models, prices, and codes (PDF) became effective Sept. 1, 2026. The 2025 contract expired Aug. 31, 2026.

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, 2026. 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. 9/1/26)

## (Aug. 28, 2026) Extended PCA services end Sept. 30, 2026

As part of the current phase of the transition from PCA and CSG to CFSS, members can no longer receive extended personal care assistance (PCA) services after **Sept. 30, 2026**.

Members' case managers or care coordinators are responsible for updating members' extended PCA service authorization lines to end extended PCA on the end date. Providers must not provide extended PCA services beyond Sept. 30, 2026.

Members can continue to receive regular PCA services until they complete the transition to Community First Services and Supports (CFSS).

Refer to the May 12, 2026, eList: Extension to CFSS transition timeline and Aug. 18, 2026, eList: Extended PCA ends Sept. 30, 2026 for more information on these changes. (pub. 8/28/27)

## (Aug. 27, 2026) New and renewing CDCS plans must contain unbundled categories by Sept. 1, 2026

The rolling implementation of the Consumer Directed Community Supports (CDCS) unbundling project that began on Feb. 1, 2025, is ending Sept. 1, 2026.

**What this means is that starting Sept. 1, 2026**:

- Lead agencies must only approve Consumer Directed Community Supports plans developed by the member that use unbundled CDCS service categories.
- The Minnesota Department of Human Services (DHS) will remove the CDCS - Service categories section from the CDCS Policy Manual. We have removed the old version of the CDCS Community Support Plan (DHS-6532) from the DHS Searchable document library (eDocs).

- People receiving CDCS services will submit their CDCS community support plan using unbundled CDCS service categories on the CDCS Community Support Plan (DHS-5788A) (PDF) or using an alternative format containing the same information. Paid CDCS certified support planners must use CDCS Community Support Plan (DHS-5788A) for new and renewing CDCS plans.

Review the Aug. 4, 2026, eList for the full announcement ending the CDCS unbundling project. (pub. 8/27/26)

## (Aug. 27, 2026) Billing obstetric services by component transition in progress; new labor and delivery CPT codes available Jan. 1, 2027

The Minnesota Department of Human Services (DHS) will be switching to billing obstetric services by component as recommended by the American College of Obstetricians & Gynecologists (ACOG). The Centers for Medicare & Medicaid Services (CMS) has accepted the new labor and delivery CPT codes into their fee schedule and the new codes will launch Jan. 1, 2027.
Refer to the provider news message "Obstetric coding changes update on recommendations, timeline and resources" posted on July 2 for more information. Additional resources include the following.

- CPT Maternity Care Services Codes and Guidelines | AMA
- New Obstetric Billing Codes: Virtual Town Hall Series | ACOG

Important, CMS is considering implementing HCPCS G-codes that would mimic the current bundled codes and be used instead of the new OB CPT codes if the provider chooses to do so. **DHS reaffirms that we will only accept billing my component (unbundled OB CPT codes) and the G-codes will not be accepted regardless of what is implemented by CMS.** (pub. 8/27/26)

## (Aug. 25, 2026) Early Intensive Developmental and Behavioral Intervention (EIDBI) service authorization timeline update

Minnesota Department of Human Services' (DHS) medical review agent Acentra Health is experiencing longer-than-required timelines for EIDBI service authorizations due to an increase in review volume. DHS recognizes the impact on providers and individuals receiving services and appreciates continued patience as Acentra works to return to required timelines.
DHS and Acentra Health are actively increasing review capacity, improving workflow efficiency, and prioritizing cases to reduce the backlog. Acentra Health is prioritizing the following to minimize service disruption:

- Initial Comprehensive Multidisciplinary Evaluations (CMDE) and Individual Treatment Plans (ITP)
- ITPs nearing the end of a service agreement or at risk of an authorization gap

Acentra Health will process incomplete, incorrect, or duplicate cases only after the required corrections are made.

### EIDBI provider role in timely review

Timely review depends on accurate routing, complete documentation, and efficient submission practices. The most common causes of avoidable delays include incorrect routing, incomplete submissions and duplicate requests.

**Confirm health plan before submission**

- Acentra Health reviews and authorizes fee-for-service Medicaid only.
- If the individual is enrolled in a managed care organization (MCO), submit authorization requests directly to the MCO. Acentra Health will reject requests submitted for MCO members and return them to the provider.

**Submit complete and accurate CMDEs and ITPs**
Complete submissions allow reviewers to process cases without interruption. The following resources support accurate and complete documentation:

- Acentra Health Administrative Submission Checklist_CMDE

- Acentra Health Service Authorization Check_ITP

Incomplete submissions are rejected, denied, or pended and require correction before Acentra Health can continue review.

**Avoid duplicate submissions**
Duplicate submissions require additional sorting and review, which slows processing for all requests. You should not resubmit cases unless:

- Acentra Health requests resubmission, OR
- You are providing new information

### Submit requests early

EIDBI service authorizations may be retroactively approved up to 180 days. Acentra Health cannot retroactively approve authorizations beyond 180 days and will deny the requested dates of service beyond that time. Providers should submit requests at least 30 days before the intended start date to ensure timely review and prevent gaps in authorization. Early submission is especially important for:

- Initial CMDEs and ITPs
- Renewals nearing the end of a service agreement
- Requests at risk of an authorization gap

Incomplete or late submissions may require additional processing time and can further delay review.

### Atrezzo review status

Avoid making nonurgent status inquiries so Acentra Health's time may be spent completing service authorization requests. Use the Atrezzo portal for real-time status updates for all requests. (pub. 8/25/26)

## (Aug. 25, 2026) Workplace Rights Week scheduled Sept. 13-19, 2026

Workplace Rights Week will take place Sept. 13-19, 2026. The week is an opportunity for workers and employers to learn about their rights and responsibilities in the workplace. Safe and healthy workplaces are what make our economy and communities strong, and it's important Minnesotans understand their workplace rights and are empowered to assert those rights. Visit the Minnesota Department of Labor and Industry's Workplace Rights Week webpage for information about the event and worker rights and responsibilities. (pub. 8/25/26)

## (Aug. 24, 2026) Nonemergency Medical Transportation (NEMT) Services program reviews conducted in 2026

The Minnesota Department of Human Services (DHS) has contracted with Myers & Stauffer to review NEMT provider claims for compliance with state and federal requirements. DHS and Myers & Stauffer will conduct provider outreach and review NEMT programs throughout 2026.

Providers do not need to take any action. We will contact you directly if you are selected for review and will provide direction at that time.

Refer to the Minnesota Department of Human Services portal hosted by Myers and Stauffer LC or contact Myers & Stauffer LC at 844-987-0492 for more information. (pub. 8/24/26)

## (Aug. 19, 2026) Join the Beneficiary Advisory Council to improve Medical Assistance for Minnesotans

The Department of Human Services invites you to apply for the Beneficiary Advisory Council (BAC). The BAC includes people who have Medical Assistance currently, have had it in the past or help someone who has Medical Assistance. BAC members share their ideas and experiences to help improve Medical Assistance for people across Minnesota.

Learn more at the Medicaid Advisory Committee and Beneficiary Advisory Council webpage.
To apply fill out the BAC Application. The deadline to apply is **August 31, 2026**.

Share this message with others who may want to apply:

- Social media post (PNG)
- Slide for waiting room screens (PNG)
- Letter-sized handout (PDF)

(pub. 8/19/26)

## (Aug. 18, 2026) Billing FQHC and RHC claims for CDT Code D5899

The Minnesota Department of Human Services has confirmed that federally qualified health center (FQHC) and rural health clinics (RHC) claims for CDT Code D5899 are currently paying correctly. Additionally, we identified the following guidance when submitting FQHC claims for CDT Code D5899 related to fabrication and insertion of removable prosthodontics.

- **Do not** list a prior authorization number on claims for CDT Code D5899.
- Enter "**Encounter in preparation for denture/partial**" in the Claim Note field. **Do not** list any additional claim note description.

Refer to Fee-for-Service (FFS) Members and MCO Enrollees Dental Services under Federally Qualified Health Center and Rural Health Clinics in the Minnesota Heath Care Programs Provider Manual for denture, partial or root canal services guidelines. (pub. 8/18/26)

## (Aug. 18, 2026) CPT code billing and provider enrollment implementation updates for school providers

The Minnesota Department of Human Services (DHS) Behavioral Health Administration and Health Care Administration continue to implement federal Medicaid requirements for Individualized Education Plan (IEP) and Individualized Family Service Plan (IFSP) school-based services while working to reduce administrative burden for schools and school-based providers.

Sept. 1, 2027, is the final date to implement federal Medicaid requirements for IEP and IFSP school-based services which require the following:

- Eligible school-based providers must enroll in Minnesota Health Care Programs (MHCP) before billing for covered Medicaid services.
    - Providers can start the process of enrollment beginning Sept. 1, 2026.
    - Eligible mental health providers who have been in process of enrollment should continue enrolling in MHCP in accordance with existing policy.
- Schools must include the individual rendering provider's National Provider Identifier on applicable Medicaid claims.

IEP providers should refer to the PDF titled **CPT Code Billing and Provider Enrollment Update for School Providers** dropped to MN–ITS mailboxes on Aug. 7, 2026, for more information.
(pub. 8/18/26)

## (Aug. 17, 2026) New email distribution list for direct care professionals

The Minnesota Department of Human Services (DHS) has created a new email distribution list (eList) for direct care professionals. This new eList is to share important DHS news and resources to direct care professionals. Subscribing is optional but encouraged to keep updated on relevant news.

Topics we will cover include:

- Free or low-cost training and other resources
- Invitations to events and webinars
- FAQs on what workers should expect regarding service or policy changes
- Guidance on regulations
- Opportunities for direct caregivers to provide feedback

**Who should subscribe to this eList?**
This eList is intended for all types of paid professionals or unpaid caregivers providing direct care or support for people receiving disability, aging or behavioral health services. This includes providing assistance with bathing, helping someone eat, giving medications, providing transportation, doing household chores, teaching skills or providing job support.

The job titles commonly used for direct care professionals, include:

- Direct support professional or worker
- Direct care professional or worker
- Personal care assistant (PCA) or aide
- Rehabilitation worker
- Community First Services and Supports (CFSS) worker
- Behavioral or mental health aide
- Home health aide
- Certified nursing assistant or aide
- Employment supports worker
- Hospice worker
- Shelter worker

**Help spread the word**
We ask provider agencies or organizations that employ direct care professionals to share the direct care professionals eList sign-up with their workers. (pub. 8/17/26)

## (Aug. 14, 2026) DHS requests public comments on amendments to Elderly Waiver plan

The Minnesota Department of Human Services (DHS) requests public comments on fall 2026 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 by **4 p.m. Saturday, September 12, 2026.**

Review the DHS requests public comments on EW plan amendments Aging and Adult Services Division eList announcement for more information. (pub. 8/14/26)

## (Aug. 13, 2026) Individualized Education Program (IEP) special transportation claims reprocessed

The Minnesota Department of Human Services has resolved system errors that caused IEP special transportation claims with X12 Remittance Advice Remark Code N30 for dates of service between Oct. 1, 2025, through May 22, 2026, to be incorrectly denied.

School districts do not need to take any action or resubmit claims. We automatically reprocessed impacted claims which will appear on the Aug. 11, 2026, warrant.

Call the Minnesota Health Care Programs Provider Resource Center at 651-431-2700 or 800-366-5411, or via TTY at 711 or 800-627-3529 with questions about this message. (pub. 8/13/2026)

## (Aug. 11, 2026) Nonresidential (outpatient) group counseling H0005 U8

Providers of substance use disorder claims for nonresidential (outpatient) group counseling services (procedure code H0005 U8) submitted for dates of service Aug. 1 through Aug. 7, 2026, paid incorrectly. MHCP replaced affected claims and paid them based on the appropriate service limitations for the service. The replaced claims will be on the remittance advice (RA) for the Aug. 25, 2026, payment date. Providers do not need to resubmit claims for the affected dates of service.

DHS has also identified a claim processing error where nonresidential (outpatient) psychoeducation services (procedure codes H2027 U8 and H2027 U8 HQ) submitted for dates of service on and after Aug. 1, 2026, paid incorrectly when billed for more than 8 units a day. MHCP is actively working on corrective action and will share further updates soon. In the meantime, providers are reminded that state policy limits nonresidential substance use disorder services to a maximum of 6 hours per day or 30 hours per week, without prior authorization - a combined daily limit that applies across any mix of:

- H0004 U8 individual counseling
- H0005 U8 group counseling
- H2027 U8 individual psychoeducation
- H2027 U8 HQ group psychoeducation

(pub.8/11/26)

## (Aug. 11, 2026) Early Intensive Developmental and Behavioral Intervention (EIDBI) service agreements during provider revalidation appeals

Providers who are appealing a revalidation determination may have questions about obtaining EIDBI service agreements during the appeal process.

**Service agreement approvals**
If your Minnesota Health Care Programs (MHCP) enrollment remains active during your appeal process and your provider record has a future termination date, Acentra Health may approve EIDBI service agreements for dates of service that occur on or before the provider record end date.

Acentra Health will not approve service agreements for dates of service that begin after the provider record end date.

**Important reminder about claim payment**
An approved service agreement does not guarantee payment of a claim. Providers must continue to meet all MHCP enrollment, billing, and program requirements for claims to be paid.

If a provider becomes inactive, is disenrolled, or is subject to another enrollment action, claims will be processed according to MHCP billing and enrollment requirements.

If a revalidation appeal is denied, MHCP will establish a current termination date rather than retroactively terminating the provider's enrollment. Claims remain subject to all applicable MHCP billing and payment requirements.

Providers should continue to monitor their enrollment status and respond promptly to any revalidation requests to avoid interruptions in authorization and billing.

Call the MHCP Provider Resource Center at 651-431-2700 or 800-366-5411 if you have questions about this message. (pub. 8/11/26)

## (Aug. 11, 2026) Early Intensive Developmental and Behavioral Intervention (EIDBI) legislative update webinar scheduled

Minnesota Department of Human Services invites EIDBI providers to a webinar scheduled for 11 a.m. Aug. 26, 2026, about 2026 legislative changes that affect the EIDBI benefit. The webinar will outline statutory updates, operational impacts and upcoming policy guidance. Refer to the Webinar announcement: EIDBI Legislative Updates announcement for more information about webinar topics, learning objectives and registration information. (pub. 8/11/26)

## (Aug. 6, 2026) DHS requests public comments on amendments to disability waiver plans

The Minnesota Department of Human Services (DHS) requests public comments on disability waiver plan amendments proposed for fall of 2026 before submitting the amendments to the Centers for Medicare & Medicaid Services for approval.

Submit comments to DSD.PublicComments@state.mn.us by **4 p.m. Friday, Sept. 4, 2026.**

Review the DHS requests public comments on amendments to the disability waiver plans Disability Services Division eList announcement for more information. (pub. 8/6/26)

## (Aug. 5, 2026) Join school-based services office hours on Aug. 10 and 19 for update on NPI and MHCP enrollment

The Behavioral Health Administration (BHA) and Health Care Administration (HCA) of the Minnesota Department of Human Services have been working on necessary updates to National Provider Identifier (NPI) and Minnesota Health Care Programs (MHCP) enrollment for school personnel.

We will provide updates at the school-based services online office hours on Monday, Aug. 10 and Wednesday, Aug. 19 at 3 p.m. All school providers are encouraged to join. Office Hours are held online and registration is not required to attend.

- **Monday, Aug. 10 at 3 p.m. Office Hours:** Join the meeting
- **Wednesday, Aug. 19 at 3 p.m. Office Hours:** Join the meeting

(pub. 8/5/26)

## (Aug. 5, 2026) Direct pharmacy dispensing payment list of approved providers available online

The Minnesota Department of Human Services is currently processing Directed Pharmacy Dispensing Payment Assurance Statement (DHS-8750) documents received **July 21 through Aug. 4, 2026**.

Providers can verify if their pharmacy has been approved for the direct pharmacy dispensing payment by reviewing the Provider Records Currently Coded for the Direct Pharmacy Dispensing Payment Rate document. We will post an updated list on Thursday, **Aug. 6, 2026**, Friday, **Aug. 7, 2026**, and Monday, **Aug. 10, 2026**.

Additionally, providers should check their MN–ITS mailbox under “Miscellaneous Received” in the **PRVLTR** folder regularly for communications including if your form was not accepted.

Refer to Pharmacy Services in the Minnesota Health Care Programs Provider Manual for complete policy information. (pub. 8/5/26)

## (Aug. 4, 2026) Early Intensive Developmental and Behavioral Intervention (EIDBI) reimbursement rates for H0032 UB and H0046 UB

Minnesota Health Care Programs (MHCP) reminds providers and other interested parties of the correct reimbursement rates for EIDBI services billed with procedures codes H0032 UB and H0046 UB.
The current EIDBI reimbursement rates have been in effect since Jan. 1, 2024, following the implementation of the 14.99% EIDBI rate increase. The current reimbursement rates for EIDBI claims billed with UB modifier are:

- H0032 UB: $94.80 per unit
- H0046 UB: $0.52 per unit

The MHCP fee schedule does not include the EIDBI-specific reimbursement rates for the H0032 and H0046 with UB modifier. The fee schedule lists the behavioral health reimbursement rates for H0032 and H0046 because these procedure codes are used by multiple MHCP programs.

Because the MHCP fee schedule does not display the EIDBI-specific reimbursement rates for these procedure codes, MCOs and providers may notice that EIDBI claim payments differ from the published fee schedule. This difference is expected and will be posted on the EIDBI Billing Grid.

Call the MHCP Provider Resource Center at 651-431-2700 or 800-366-5411 if you have questions about this message. (pub. 8/4/26)

## (Aug. 4, 2026) Early Intensive Developmental Behavioral Intervention (EIDBI) medical necessity and service authorization request updates

Minnesota Department of Human Services (DHS) is updating EIDBI medical necessity, authorization and documentation requirements for providers to:

- Document functional and developmental needs to establish medical necessity.
- Support requested service intensity with assessed needs and objective clinical evidence.
- Document service coordination with schools, case managers and other providers.
- Review and document ongoing medical necessity to support continued eligibility and service intensity.

Refer to the EIDBI medical necessity and service authorization request updates DSD eList announcement for more information, including the reason for the updates, an implementation timeline, provider responsibilities and DHS actions. (pub. 8/4/26)

## (Aug. 4, 2026) Early Intensive Developmental Behavioral Intervention (EIDBI) legislative updates

The 2026 Minnesota Legislature passed changes that impact the EIDBI benefit in Laws 2026, chapter 95, section 23, Laws 2026, chapter 121, article 9, section 20 and Laws 2026, chapter 121, article 10, section 4.

Refer to the EIDBI legislative updates DSD eList announcement for a summary of the changes. (pub. 8/4/26)

## (Aug. 3, 2026) Substance Use Disorder (SUD) treatment services and outpatient billing changes effective Aug. 1, 2026

SUD treatment services and outpatient billing changes resulting from the 2025 Minnesota Legislative Session took effect on Aug. 1, 2026. These include many changes that will impact providers whose services include SUD treatment, such as:

- New types and descriptions of treatment services for all providers of SUD services
- New SUD billing procedure codes and units for providers of outpatient SUD services

Refer to the Substance Use Disorder (SUD) Services section of the Minnesota Health Care Programs (MHCP) Provider Manual for information. Providers may also refer to the Information on 2026 Changes (PDF) listed under the News and Current Reminders heading on the Substance Use Disorder Reform webpage for information about the SUD changes.

Email sud.direct.access.dhs@state.mn.us if you have questions about this message. Contact the Minnesota Health Care Programs Provider Resource Center at 651-431-2700 or 800-366-5411 if you have questions about claims billing. (pub. 8/3/26)

## (July 2, 2026) Obstetric coding changes update on recommendations, timeline and resources

Minnesota Health Care Programs (MHCP)-enrolled providers can currently bill obstetric services either globally (bundled coding) or by component; however, the American Medical Association (AMA) is eliminating the global CPT codes effective Jan. 1, 2027. Providers have until Dec. 31, 2026, to access the global codes.

Global codes bundle all prenatal visits, delivery, and postpartum care into a single claim. Under the new system, each phase of care — prenatal, labor management, delivery, and postpartum — will be billed separately as services are provided. The Minnesota Department of Human Services will follow updated billing guidance from the American College of Obstetricians & Gynecologists (ACOG).

**ACOG recommends providers switch to billing by component for members who begin prenatal care in 2026 and are expected to deliver in 2027.**

- For members who begin prenatal care in 2026 and are expected to deliver in 2027, providers should bill each prenatal visit using the appropriate Evaluation and Management (E/M) code (99202–99499); and append the TH modifier to indicate the visit is for obstetric care. ACOG recommends providers begin this by June 1, 2026, and no later than **Sept. 1, 2026.**
- Providers can separately bill services that were previously bundled into the global code, including nutrition counseling and other medically necessary services, in the new coding structure. Bill these using the appropriate codes with the E/M visit and TH modifier.

**Timeline**

- **June 1, 2026:** Providers are encouraged to begin billing prenatal visits with E/M codes (99202–99499) + TH modifier
- **Sept. 1, 2026:** Providers are encouraged to fully transition to using the appropriate E/M codes (99202-99499) + TH modifier.
- **Jan. 1, 2027:** Global obstetric care services codes are no longer valid. The Minnesota Department of Human Services fully transitions to the new AMA coding methodology.

Refer to ACOG Maternity Care Coding Resources for guidance and tools to support this transition.

For providers who are unable to meet this timeline, ACOG issued the following recommendations for how to continue billing bundled codes in 2026 for pregnant people who are expected to deliver in 2027:

- **May 15 to July 14, 2026:** Use CPT code 59426 with new delivery only codes to account for anticipated 7 or more prenatal visits
- **July 15 to Sept. 1, 2026:** Use CPT code 59425 with new delivery only codes to account for anticipated 4 to 6 prenatal visits
- **Sept. 1, 2026, and onward:** Full transition to Evaluation and Management (E/M) codes as it is likely obstetric providers will only provide 1 to 3 prenatal visits before delivery

**Resources**

- Webinar video - MHCP Obstetric Coding Changes
- Frequently asked questions: 2027 perinatal billing changes
    - Open Office Hours: We will host open office hours to answer provider questions. Register for the Aug. 13 session from 12:15 to 1 p.m.

Call the MHPC Provider Resource Center at 651-431-2700 or 800-366-5411 with questions about this message. (pub. 7/2/26)

## Check your MN–ITS mailbox regularly

We recommend providers check their MN–ITS mailbox regularly for important correspondence from Minnesota Health Care Programs (MHCP). MHCP delivers the following provider information electronically to each provider's MN–ITS mailbox account.

- Provider news and updates
- Enrollment letters
- Medical, dental and service authorization letters
- Remittance advices

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.

## Sign up for MHCP Provider Connect weekly provider e-newsletter

The department launched an e-newsletter for providers titled MHCP Provider Connect: A weekly roundup of news, updates and reminders to keep Minnesota Health Care Programs providers informed of developments at the Minnesota Department of Human Services. Our goal is help keep you aware of changes that impact your work and the communities we serve together. Sign up for email alerts on the Email Updates webpage to have these emails sent directly to your inbox.

## View more news and updates

View more news and updates.

We keep provider news messages on the Minnesota Department of Human Services website for one year. Refer to the Provider news and updates archive webpage to view archived messages.

## Training and more

- Minnesota Provider Screening and Enrollment (MPSE) portal Questions and Answers sessions
- MHCP on-demand video, online MN–ITS training including Provider Basics and more
- MHCP provider policies and procedures
- Latest Manual Revisions
- Grants and requests for proposals

## 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 review the list of available training. (rev. 1/13/26)

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