

## June 2025 AMHI/CSP Statewide Meeting

### Meeting Notes:

- Welcome
- Introductions
  - AMHI/CSP Supervisor – Pam Sanchez
  - AMHI/CSP Team Leads – Breanna Bertozzi & Chris Ederer
  - AMHI/CSP Consultants – Jamie Preuss, Stacy Livingston & Sara Erie
- Agenda
- Equity Acknowledgement
- AMHI/CSP Updates
  - Communication Request
    - Send all inquiries to the AMHI/CSP shared email box: [MN\\_DHS\\_amhi.dhs@state.mn.us](mailto:MN_DHS_amhi.dhs@state.mn.us)
    - Must 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 Reminder
    - Email was sent out Wednesday, 6/11/2025
    - Request to complete three-question survey regarding clubhouses/drop-in centers.
    - Responses due by Wednesday, 6/25/2025
    - Information received will be used to help inform inter-departmental conversations.
  - Budget, Workplan & Provider Revisions
    - Revisions are required from AMHIs/CSPs that listed RFP and/or parked funds on 2025-2026 workplan/budgets.
      - Revisions cannot be made/submitted more often than every 90 days.
      - All revisions related to one funding stream (AMHI or CSP) must be submitted together on one form as one request.
      - Budget revisions that exceed 10% of the revised budget year total requires an amendment and additional processing time.
    - Tips for completing the revision form:
      - Under the 'AMHI Region' field, list the County/Region/Tribe and identify if the revisions are for AMHI or CSP.
      - Under the 'changes to the AMHI and/or CSP budget' field:
        - Identify the budget year for the revisions.
        - List out how much money is being added or removed from each revised BRASS code and why (only full dollars, no cents).
    - The revision request form can be found on the [AMHI website](#), under Forms.
      - Always access the revision request form from the [AMHI website](#) or [eDocs](#) to ensure use of the current version.

- Direct Payment Update
  - Legislative Session Information
    - Passed legislation – waiting to get details confirmed.
    - 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.
  - Project Status/Next Steps:
    - Finalize statute language
    - Design reporting requirements
      - Moving towards reporting more outcomes.
      - Exploring options for different platforms
    - Define and document financial process
  - Questions:
    - Will Direct Payment impact the application process?
      - Possibly. AMHI/CSP team is considering platforms and processes to ensure a simple, effective and efficient application process.
    - Does AMHI/CSP team have a list of DHS required data?
      - AMHI/CSP team is working with SSIS team and MHIS team to determine what data is currently being collected, why it is being collected, and how the data is being used. AMHI/CSP team does not have access to SSIS or MHIS, which is why feedback from our grantees is so important.
    - Are there any updates on a replacement for the spreadsheet? Where/how should 2024 data be uploaded to?
      - 2024 data will not be uploaded into any reporting system at this time, but grantees should keep the data.
- Monitoring Visits Overview
  - Office of Grants Management [Policy 08-10](#)
    - 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.
  - Process:
    - Initial emails from AMHI/CSP team will go out to individual grantees over the next year and a half (remainder of the contract term) with timeline and details.
    - Grantees will have two weeks to submit required documentation.
    - DHS will have two weeks to review submitted documents.

- Monitoring visits will be virtual and scheduled for two-hours.
- Questions:
  - Will monitoring visits continue after Direct Payment is implemented?
    - Yes.
  - Is there flexibility with scheduling monitoring visits and document due dates?
    - Yes, the AMHI/CSP team is happy to be flexible and provide support and assistance throughout the entire process.
- AMHI/CSP Uncompensated Care Guidance
  - AMHI: [Sec. 245.4661 MN Statutes](#)
    - Newly added statute language was approved with Direct Payment: 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.
  - CSP: [Sec. 245.4712 MN Statutes](#)
    - Important statute language: 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.
  - Allowable use of AMHI/CSP funds:
    - Uncompensated care for undocumented & uninsured individuals.
    - Must meet AMHI/CSP criteria:
      - Adults (Age 18 and over)
      - Serious and Persistent Mental Illness (SPMI)
      - Mental health services only (not SUD services)
  - AMHI/CSP funds cannot be used to pay:
    - Lump sums
    - 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
  - Sample Policy 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
  - Questions 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:
  - Can AMHI/CSP funds be used to pay co-pays or deductibles for people with private insurance?
    - This is up to each individual AMHI/CSP. Keep in mind that paying co-pays and deductibles can be considered income for certain programs and could impact eligibility.
  - Is there a six-month limit for covering services for individuals without MA or who are uninsured/under-insured?
    - This is up to each individual AMHI/CSP. The six-month rule is a Targeted Case Management requirement, not an overall AMHI/CSP requirement.
  - If Medicare covers a service, does that funding source need to be pursued before AMHI/CSP funds can be used?
    - Yes, per statute all other funding sources must be applied before using AMHI/CSP funds.
    - As a reminder, if a previously uninsured individual gets services covered using AMHI/CSP funds and then gets approved for MA, MA would then have to be billed for the service that was previously paid using AMHI/CSP funds and AMHI/CSP funds must be reimbursed.
  - Since AMHI/CSP funds can be used to cover services for undocumented individuals, how do grantees document when individuals are undocumented?
    - This is up to each individual AMHI/CSP to determine their documentation process.

#### **Upcoming AMHI/CSP Statewide Meetings**

- Add the meetings to your calendars!
  - Details are available on the [AMHI website](#).
- Thursday, September 18, 2025 from 1pm – 3pm
- Thursday, December 11, 2025 from 1pm – 3pm

→ Send follow-up inquiries and feedback to the AMHI/CSP Team email address:

[MN\\_DHS\\_amhi.dhs@state.mn.us](mailto:MN_DHS_amhi.dhs@state.mn.us)