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Your First Point of Contact

Provider Contact Center

Hours: Monday - Friday,
8:00 a.m. - 4:30 p.m. (Central Time)

Closed from 12 noon - 1 p.m.

Phone: 1-888-633-4055 (toll free)

Subscribe Today

Click the envelope icon to receive the Provider Network Newsletter and other provider communications by email.



Mandatory Enrollment with MHCP

Effective January 1, 2024, all providers must be enrolled with Minnesota Health Care Programs (MHCP) before submitting a contract application to South Country Health Alliance (South Country) for consideration. MHCP is administered by the Minnesota Department of Human Services (DHS). The following must be enrolled:

- All clinic or facility National Provider Identifiers (NPIs);
- Every clinic or facility location (if one NPI is affiliated with multiple locations); and
- All affiliated practitioners.

Please do not submit a contract application to South Country until you have received an enrollment or welcome letter/notification from MHCP.

Instructions for enrolling with MHCP may be found on the [DHS website](#).



All Contracted South Country Providers Must Enroll with MHCP

This is a reminder that the screening and enrollment process for contracted managed care organization (MCO) providers started July 17, 2023. The 21st Century Cures Act requires states to enroll contracted MCO providers who are currently or wish to provide services to members enrolled in MHCP managed care.

All providers who already have an existing contract with South Country must enroll by **July 15, 2024**, except for the following provider types that will require a site visit from DHS:

- Provider type 10 – Community Mental Health Center;
- Provider type 11 – Rehab Agency;
- Provider type 46 – Day Treatment;
- Provider type 64 – O-Home Care Nursing Organization; and
- Provider type 82 – Medical Transportation.

The providers in the bulleted list must enroll by **December 31, 2024**. Note MHCP will conduct an announced site visit within 60 days of the referral date (a letter will be sent) for the providers. You must complete both the enrollment process and site visit by **December 31, 2024**.

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To ensure you meet the enrollment deadline, submit your enrollment application as soon as possible. Actively enrolled fee-for-service (FFS) providers who have an existing contract with an MCO will not need to go through the screening and enrollment process again.

Refer to [Enrollment with MHCP](#) Provider Manual page for steps to enroll and a list of provider types that can enroll. Refer to the [Minnesota Provider Screening and Enrollment \(MPSE\) portal training webpage for MPSE training](#) on how to use the MPSE portal to enroll. Refer to the enrollment process for MCO network providers on the [Enroll with Minnesota Health Care Programs](#) webpage for more information.

SUD Providers Enrollment Dates

Substance Use Disorder Providers requiring January 1, 2024, enrollment date

The following substance use disorder (SUD) providers are required to enroll in the [1115 Demonstration](#) by **January 1, 2024**:

- Minnesota residential treatment providers licensed by DHS and enrolled in MHCP;
- Minnesota withdrawal management providers licensed by DHS and enrolled in MHCP; and
- Out-of-state residential SUD providers enrolled in MHCP.



Providers requiring January 1, 2025, enrollment date

The following SUD providers are required to enroll in the demonstration by **January 1, 2025**:

- Minnesota nonresidential treatment providers licensed by DHS and enrolled in MHCP; and
- Hospital-based residential treatment providers licensed by DHS and enrolled in MHCP.

Tribally licensed providers may elect to participate in the demonstration.

These enrollment requirements are according to [Minnesota Statute 256B.0759, subdivision 2](#). Send an email to 1115demonstration.dhs@state.mn.us if you have questions or would like assistance in completing your enrollment application.



New Pharmacy Prior Authorization Platform

Effective January 1, 2024, South Country is transitioning to a new prior authorization (PA) platform. Prescribers can expect an improved PA experience that includes the potential for quicker response rates to their PA requests along with enhanced Electronic Prior Authorization (ePA) capabilities and improved portal experience.

To submit electronically, please submit an ePA through your Electronic Health Record (EHR) tool software, or you can submit through any of the following online portals:

- CoverMyMeds; or
- Surescripts.

For support needs through the ePA Provider Portals, please contact CoverMyMeds at 1-866-452-5017 or Surescripts at 1-866-797-3239.

For general prior authorization related questions, please contact PerformRx provider services at 1-866-935-8874 for Medicaid or 1-866-935-6681 for Medicare.

Accurate Provider Information Needed

It is critical that we have accurate provider information in our system and that our directories contain correct information about your organization. The Centers for Medicare & Medicaid Services (CMS) requires that we confirm this information directly with our contracted providers each quarter. Please communicate to us if your organization has had any changes to:

- Contracted entity/practitioner name;
- Contracted entity address;
- Billing address/information;
- Contact information for contracting, billing or credentialing;
- Ownership;
- Tax ID or NPI/UMPI number;
- Telephone/fax numbers;
- Addition or removal of a contracted entity or practitioner;
- Addition or removal services offered;
- Directory email address;
- Web address;
- Organization hours; and
- Accepting new Medicare/Medicaid patients (yes or no).

New forms to ensure accurate provider information!

Use the following forms to notify South Country of any changes:

- List changes on the **Contracted Entity Change Update Form #5073**.
- If you have added or terminated a location, use the **Contracted Entity Location Add/Remove Form #5079**.
- If you are changing any services at a particular location, use the **Change of Services web form**.

These forms are located on our South Country Health Alliance website, under Providers/Forms/Contracted Providers, at <https://mnscha.org/>.

Forward these changes to us via email at providerinfo@mnscha.org, fax to South Country at 507-444-7774 or mail to South Country Health Alliance, Attn: Contracting, 6380 West Frontage Road, Medford, MN 55049. If you have any questions on this process, please reach out to our **Provider Contact Center at 1-888-633-4055**.

South Country provides our members with a current list of providers on our website with the [South Country Provider Online Directory](#) or other downloadable, printable directories.

Thank you for your assistance!

Contracted Entity Update Form
 South Country Health Alliance
 6380 West Frontage Road, Medford, MN 55049
 507-444-7774
 Fax: 507-444-7774
 Email: providerinfo@mnscha.org

Contracted Entity Name: _____
Effective Date of Change: _____
Tax ID Number: _____
Organizational NPI or UMPI: _____

CHANGES MUST BE SUBMITTED BEFORE 10:00 AM ON THE CHANGED EFFECTIVE DATE. Incomplete Contracted Entity Update Form or missing NPI forms will delay the change process. Please submit a 90-9 with your new tax identification number, legal name and/or billing address changes with this completed form.

Contracted Entity Location Add/Remove Form
 South Country Health Alliance
 6380 West Frontage Road, Medford, MN 55049
 507-444-7774
 Fax: 507-444-7774
 Email: providerinfo@mnscha.org

Location Information
Type of Request: Add Location Remove Location
Location Name: _____
Requested Effective Date: _____
Location Address: _____
City: _____ **State:** _____ **Zip:** _____
Location Phone: _____ **Location Fax:** _____
Contracting Contact Name: _____
Contracting Contact Phone: _____
Specialties: _____
Location Type: Primary Care Specialty Care Mental Health Other
Hospital Affiliates (if any): _____
Practitioner: _____
Directory Suppressed: Yes No
Mailing Information: _____
Billing Address: _____
City: _____ **State:** _____ **Zip:** _____
Comments: _____

LOCATION ADDITIONS/REMOVALS MUST BE SUBMITTED BEFORE 10:00 AM ON THE EFFECTIVE DATE. Incomplete Facility Change/Update Form or missing NPI forms will delay the change process. Please submit a 90-9 with this completed form.

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Updated Doula Coding for 2024

Effective January 1, 2024, DHS MHCP FFS Medicaid updated doula coding for billing.

The updated billing policy reads:

- Bill all non-labor and non-delivery sessions with T1033.
- Bill the labor and delivery session with T1033 and the U4 modifier (U4 will ensure they receive the higher rate designated for a labor and delivery session).

More information on DHS MHCP FFS doula services billing policy can be found: [Reproductive Health/OB-GYN - Doula Services \(state.mn.us\)](#).



Category II CPT Codes to Improve Prenatal Care

South Country requests that all providers submit the appropriate Category II Current Procedural Terminology (CPT) codes for prenatal care, regardless of whether global billing will be used after a newborn delivery or not. This includes requesting providers bill a Category II CPT code for the initial prenatal visit as a no-charge line item when billing either a global or standalone maternity service. Adding these Category II codes enables South Country to identify pregnant members for outreach and increase the number of members receiving prenatal care. This will also assist in closing Healthcare Effectiveness Data and Information Set (HEDIS) gaps, avoid the need for additional medical records, and provide South Country with quality tracking.

The codes below have been identified as acceptable for the Prenatal/Postpartum Care Measure.

MEASURE	CODE	DEFINITION
Stand Alone Prenatal Visits	0500F	Initial prenatal care visit (report at first encounter with health professional providing obstetrical care)
Stand Alone Prenatal Visits	0501F	Prenatal flow sheet documented in medical record by first prenatal visit
Stand Alone Prenatal Visits	0502F	Subsequent prenatal care visit (excludes patients who are seen for a condition unrelated to pregnancy or prenatal care)
Postpartum Visits	0503F	Postpartum care visit

Providers should also indicate a pregnancy diagnosis on the claim.

Working together, we can improve patient care, reduce transmission of medical records (the more information we have within claims, the less we need to request medical records, giving time back to your administrative staff), and ensure the highest level of quality care for our members.

Child and Teen Checkup Updates

DHS has provided notification of updates to the [MHCP Provider](#) website as of November 2023:

Child and Teen Checkups (C&TC):

- Under **Covered Services** - [Oral Health Screening by a C&TC Medical Provider](#), oral health, including fluoride varnish (FVA) and silver diamine fluoride (SDF), they added information about the application of silver diamine fluoride during an age-related C&TC visit.
- Under **Covered Services - Medical Screening**, [Developmental and Social-Emotional or Mental Health Screenings](#), they added information about the allowance of the Survey of Well-being of Young Children Baby Pediatric Symptom Checklist (BPSC) and the Preschool Pediatric Symptom Checklist (PPSC).

Pediatric Immunization Gaps Due to the COVID-19 Pandemic

Childhood and adolescent vaccination rates decreased during the COVID-19 pandemic. Health care and public health partners play an important role in catching children up on vaccines they need. This is important to prevent future outbreaks of vaccine-preventable diseases. See more detail here: [Pediatric Immunization Gaps Due to the COVID-19 Pandemic - MN Dept. of Health \(state.mn.us\)](#) and other immunization updates from the Minnesota Department of Health here: [Got Your Shots? News - MN Dept. of Health \(state.mn.us\)](#).

DME Rural Rates

DHS has created a durable medical equipment (DME) rural rates price list. South Country will be transitioning to the DME Rural Price List for date of services February 1, 2024, and after. Please reach out to our Provider Contact Center (PCC) at 1-888-633-4055 with any questions.



Mobile Crisis Services

Effective January 1, 2024, providers may start billing with modifier “HT” on their claims with existing mobile crisis codes to effectively indicate when mobile crisis services are delivered by a multi-disciplinary team when submitting claims to both Fee-For-Service, managed care and MCOs. Adding this modifier to the existing mobile crisis billing codes appears to be the simplest way to collect this data.



Drug and Alcohol Abuse Normative Evaluation System Changes

During the 2023 legislative session, changes were made that will impact how providers enter client data into the Drug and Alcohol Abuse Normative Evaluation System (DAANES). This change is effective January 17, 2024, and will affect the following providers:

- DHS and tribally licensed SUD programs;
- Recovery community organizations (RCO);
- Counties and tribes; and
- Licensed professionals in private practice providing SUD services.



Descriptions of the new legislation as well as where to find these changes in statute are below:

- MN 254B.05 Subd. 5 (i) states “Payment for substance use disorder services under this section must start from the day of service initiation, when the comprehensive assessment is completed within the required timelines.”
- MN 254B.04 Subd. 6 (g) states “The local agency must redetermine a client’s eligibility for the behavioral health fund every 12 months.”
- Changes to 254B.05 Subd. 5 (i) allow for service initiation of treatment to begin prior to the completion of a comprehensive assessment within licensed treatment programs. Changes in DAANES were necessary to allow for a licensed treatment provider to complete the first section and add a DAANES admission record without requiring the completion of the comprehensive assessment information. The DAANES Comprehensive Assessment will be replaced and updated to Service Initiation Date and the 183-day updates will extend date spans to one year.

Questions regarding DAANES and the above changes can be sent to dhs.daanes@state.mn.us.

Quality Improvement Projects

As a part of South Country's quality improvement projects, we have two focused studies, two performance improvement projects (PIPs) and two chronic care improvement projects (CCIPs) in 2024.

Focused studies

Focused studies are improvement projects where we "focus" our efforts to improve the health outcome of a specific set of members.

Cervical cancer prevention screening: This focused study aims to get members ages 21 to 65, or as recommended by a provider, in to see their primary care physician for routine prevention screenings for cervical cancer and to improve on the early detection of cervical cancer.

Chlamydia screening: This focused study aims to get members ages 16 to 25 who were identified as sexually active to complete a test for chlamydia screening annually. Chlamydia and Gonorrhea screening are advised annually for all sexually active females less than 25 years of age, as well as for some women 25 years of age and older, and also some men, depending on risk factors. Also, depending on risk factors, screening for other sexually transmitted infections (STIs) is advised for both women and men. We advise members to consult their primary care physician for other recommended routine prevention screenings, as well.

Performance improvement projects

South Country is engaged in two performance improvement projects.

The first PIP focuses on addressing the comorbidities of diabetes and depression for the seniors in Minnesota Senior Health Options (MSHO) and Minnesota Senior Care Plus (MSC+) products and the Special Needs Basic Care (SNBC) populations.

The second PIP aims to promote a "Healthy Start" for Minnesota children in the Prepaid Medical Assistance Program (PMAP) and MinnesotaCare populations by focusing on and improving services provided to pregnant people and infants.

Chronic care improvement projects

Cancer screenings for SeniorCare Complete and AbilityCare members: These projects work to increase the number of members who are up-to-date on their colorectal and breast cancer screenings for early detection and to increase the percentage of our members going in for health screenings as recommended by their providers and physicians.

South Country collaborates with providers and various external stakeholders on various projects and initiatives and is always open for new collaborative ideas and approaches to support our members' health and wellness. In 2024, we would like to increase the engagement with communities and providers in the performance improvement projects and request that you email Quality@mnscha.org or call us to discuss opportunities to work together.

Medicare Advantage and Prescription Drug Plan - CAHPS

Overview: The Centers for Medicare & Medicaid Services (CMS) collects information about Medicare beneficiaries' experiences with, and ratings of, Medicare Advantage (MA-only) plans, Medicare Advantage Prescription Drug (MA-PD) plans, and stand-alone Medicare Prescription Drug Plans (PDP) via surveys of beneficiaries who have been enrolled in their plans for six months or longer.

About the survey: The MA & PDP Consumer Assessment of Healthcare Providers & Systems (CAHPS) Survey is administered annually to a large sample of MA & PDP beneficiaries using a mixed mode data collection protocol that includes two survey mailings and telephone follow up of non-respondents to the mailed questionnaire. Questions ask about ease of getting needed care and seeing specialists, getting appointments and care quickly, doctors who communicate well, coordination of members' health care services, health and/or drug plan provides information or help when members need it, ease of getting prescriptions filled, rating of health and/or drug plan, rating of health care quality, annual flu vaccine, and pneumonia vaccine.

We need your help providing the highest level of care to meet the needs of our members and supporting excellent outcomes on the survey.

Updated 2024 Provider Manual Chapters

New South Country benefits, processes and procedures are coming in 2024. Check out these updates in our Provider Manual chapters located on our website at mnscha.org. The Provider Manual chapters are updated regularly throughout the year; check out the “[Summary of Provider Manual Changes](#)” to see what has been updated in the chapters.

Thank you, Providers

South Country would like to thank providers for their support, service and dedication to our members throughout the year. You are helping us make a difference in many lives. We wish you the very best for 2024!



Our friendly provider network team would love to hear from you.

Tell us how we are doing - please take a minute or two to complete our [Satisfaction Survey](#).

Provider Resources

Provider Network News is a publication of South Country Health Alliance. For submission information or reprint permission, contact:

South Country Health Alliance
6380 West Frontage Road
Medford, MN 55049

South Country Health Alliance
Provider Manual, [Chapter 3 Provider Network Resources](#).

Email: ProviderInfo@mnscha.org

Visit us online at www.mnscha.org.

Click the Providers tab to find all the forms, instructions and other resources and information you need.

REPORTING: Fraud, Waste and Abuse

It is everyone's responsibility to report suspected fraud, waste and abuse.

You can report it by sending an email to the South Country compliance department at compliance@mnscha.org, by calling anonymously through our Report it hotline at 1-877-778-5463, or by visiting www.reportit.net.
Username: SCHA, Password: Owatonna

Did You Know?

The DHS website provides updates to personal care attendant (PCA) providers specifically for training requirements, both for individuals and for agency administration staff. [Visit the DHS PCA Provider Training webpage](#).