

## **Table of Contents**

**State/Territory Name: Minnesota**

**State Plan Amendment (SPA) #: 24-0029**

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) CMS Form 179
- 3) Approved SPA Pages

**DEPARTMENT OF HEALTH & HUMAN SERVICES**  
Centers for Medicare & Medicaid Services  
601 E. 12th St., Room 355  
Kansas City, Missouri 64106



Medicaid and CHIP Operations Group

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October 30, 2024

John Connolly  
Assistant Commissioner and State Medicaid Director  
Minnesota Department of Human Services  
540 Cedar Street  
P.O. Box 64983  
St. Paul, MN 55164-0983

Re: Minnesota State Plan Amendment (SPA) 24-0029

Dear State Medicaid Director Connolly:

The Centers for Medicare & Medicaid Services (CMS) reviewed your Medicaid State Plan Amendment (SPA) submitted under transmittal number (TN) 24-0029. This amendment allows licensed outpatient hospitals, with Center for Medicare and Medicaid approved hospital accreditation, to apply to become adult day treatment providers.

We conducted our review of your submittal according to statutory requirements in Title XIX of the Social Security Act and implementing regulations at 42 CFR §440. This letter informs you that Minnesota's Medicaid SPA 24-0029 was approved on October 30, 2024, with an effective date of July 1, 2024.

Enclosed are copies of Form CMS-179 and approved SPA pages to be incorporated into the Minnesota State Plan.

If you have any questions, please contact Sandra Porter at (312) 353-8310, or via email at [Sandra.Porter@cms.hhs.gov](mailto:Sandra.Porter@cms.hhs.gov).

Sincerely,

James G. Scott, Director  
Division of Program Operations

Enclosures

cc: Patrick Hultman  
Melorine Mokri  
Alexandra Zoellner

**TRANSMITTAL AND NOTICE OF APPROVAL OF  
STATE PLAN MATERIAL  
FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES**

1. TRANSMITTAL NUMBER

2 4 — 0 0 2 9

2. STATE

MN

3. PROGRAM IDENTIFICATION: TITLE OF THE SOCIAL SECURITY ACT

XIX  XXI

TO: CENTER DIRECTOR  
CENTERS FOR MEDICAID & CHIP SERVICES  
DEPARTMENT OF HEALTH AND HUMAN SERVICES

4. PROPOSED EFFECTIVE DATE

July 1, 2024

5. FEDERAL STATUTE/REGULATION CITATION

42 CFR § 440 and Title XIX of the Social Security Act

6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars)

a. FFY 2025 \$ 0  
b. FFY 2026 \$ 0

7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT

Attachment 3.1-A Page 54a-1  
Attachment 3.1-B Page 53a-1

8. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable)

same

9. SUBJECT OF AMENDMENT

Changes accreditation for Adult Day Treatment Providers.

10. GOVERNOR'S REVIEW (Check One)

- GOVERNOR'S OFFICE REPORTED NO COMMENT  
 COMMENTS OF GOVERNOR'S OFFICE ENCLOSED  
 NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL

OTHER, AS SPECIFIED:

11. SIGNATURE OF STATE AGENCY OFFICIAL

12. TYPED NAME  
Patrick Hultman

13. TITLE  
Deputy Medicaid Director

14. DATE SUBMITTED  
August 15, 2024

15. RETURN TO

Patrick Hultman  
Minnesota Department of Human Services  
Federal Relations Unit  
540 Cedar Street, PO Box 64983  
Saint Paul, MN 55164

**FOR CMS USE ONLY**

16. DATE RECEIVED

August 15, 2024

17. DATE APPROVED

October 30, 2024

**PLAN APPROVED - ONE COPY ATTACHED**

18. EFFECTIVE DATE OF APPROVED MATERIAL

July 1, 2024

19. S

20. TYPED NAME OF APPROVING OFFICIAL

James G. Scott

21. TITLE OF APPROVING OFFICIAL

Director, Division of Program Operations

22. REMARKS

STATE: MINNESOTA  
Effective: July 1, 2024  
TN: 24-29  
Approved: October 30, 2024

Supersedes: 22-24, (21-22, 18-06, 11-04, 06-12, 05-01, 04-08, 03-26)

13.d. Rehabilitative services. (continued)

community board of directors. Providers must be capable of providing the services to recipients who are diagnosed with both mental illness or emotional disturbance and chemical dependency, and to recipients dually diagnosed with a mental illness or emotional disturbance and developmental disability.

The following are included in the **CMHC services** payment:

1. Diagnostic assessment
2. Explanation of findings
3. Family, group and individual psychotherapy, including crisis intervention psychotherapy services, multiple family group psychotherapy, psychological testing, and medication management
4. Adult day treatment services provided as described below.
5. Professional home-based mental health services
6. For Medicare-certified centers, partial hospitalization for mental illness, as defined at §1861(ff) of the Act
7. Neuropsychological services provided as described below.

Adult day treatment includes at least one hour of group psychotherapy and must include group time focused on rehabilitative interventions or other therapeutic services that are provided by a multidisciplinary staff. Rehabilitative interventions are linked to goals and objectives identified in an individual's treatment plan which will lead to improvement in functioning that has been impaired by the symptoms of individual's mental illness or emotional disturbance. Other therapeutic services may include such services as harm reduction or cognitive behavior therapy. Coverage is limited to services provided up to 15 hours per week and 115 service hours annually. Providers can request authorization to provide services above 115 hours, at a rate of 15 hours per week, if medically necessary for the beneficiary.

Individual members of the adult day treatment multidisciplinary team must meet, at a minimum, the standards for a mental health practitioner that apply to adult rehabilitative mental health services as defined in this item. Members of the multidisciplinary team provide only those day treatment services that are within their scope of practice.

The following agencies may apply to become adult day treatment providers:

- o Licensed outpatient hospitals with ~~JCAHO accreditation~~ Centers for Medicare and Medicaid approved hospital accreditation;
- o MHCP-enrolled community mental health centers; or
- o Entities under contract with a county to operate a day treatment program.

Neuropsychological services include neuropsychological assessment and neuropsychological testing.

TN: 24-29

Approved: October 30, 2024

Supersedes: 22-24 (21-22, 18-06, 11-04, 06-12, 05-01, 04-08, 03-26)

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13.d. Rehabilitative services. (continued)

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