



South Country Health Alliance

Behavioral Health Notification and Prior Authorization Grid

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Behavioral Health Grid

Category/Name	Procedure Code	Possible Modifiers	Eligible Products	Age	Auth/Notification Required	Auth/Benefit Limit Form	Threshold	Criteria
ARMHS	H2017	HM HQ U3 U3 HM	All	18 & over	Auth at Threshold	4381	Over 300 hours per calendar year combined total of H2017, H2017 HM and H2017 HQ	MHCP Provider Manual: Mental Health Services: ARMHS
ARMHS	90882	HM U3 U3 HM	All	18 & over	Auth at Threshold	4381	10 sessions/month or 72 sessions/year	
ARMHS	H0031	TS	All	18 & over	Auth at Threshold	4381	6 sessions/calendar year	
ARMHS	H0032	TS	All	18 & over	Auth at Threshold	4381	4 sessions/calendar year	
ARMHS	H0034	HQ	All	18 & over	Auth at Threshold	4381	26 hrs/calendar year	
BHH	S0280	U5	All	Any	Notification at Start of Service	DHS-4797	Lifetime limit of six enhanced payments in member's lifetime. One payment/month	https://www.mnscha.org/wp-content/uploads/6715.pdf
BHH	S0281	U5	All	Any	Notification at Start of Service	DHS-4797	One payment/month	
Children's Clinical Care Consultation	90899	U8 U9 UB UC	PMAP, MNCare, SNBC	20 & under	Auth at Threshold	4381	15 hrs/calendar year	MHCP Provider Manual: Mental Health Services: Children's Mental Health Clinical Care Consultation
CTSS	H0031	UA	PMAP, MNCare, SNBC	21 & under	Auth at Threshold	4390	200 hours/calendar year combined CTSS threshold	MHCP Provider Manual: Mental Health Services: CTSS
CTSS	H0032	UA	PMAP, MNCare, SNBC	21 & under	Auth at Threshold	4390	200 hours/calendar year combined CTSS threshold AND up to 24 sessions per calendar year	
CTSS	H2015	UA	PMAP, MNCare, SNBC	21 & under	Auth at Threshold	4390	200 hours/calendar year combined CTSS threshold	
CTSS	H2014	UA UA HQ UA HR	PMAP, MNCare, SNBC	21 & under	Auth at Threshold	4390	200 hours/calendar year combined CTSS threshold	
CTSS	H2019	UA UA HM UA HE	PMAP, MNCare, SNBC	21 & under	Auth at Threshold	4390	200 hours/calendar year combined CTSS threshold	

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Adult Day Treatment	H2012		All	18 & over	Auth at Threshold	4381	115 hrs/calendar year, 15 hrs/week	MHCP Provider Manual: Mental Health Services: Adult Day Treatment
Childrens Day Treatment	H2012	UA HK UA HK U6	PMAP, MNCare, SNBC	21 & under	Auth at Threshold	4390	150 hrs/calendar year, 15 hrs/week, max 3/hrs/day	MHCP Provider Manual: Mental Health Services: Children's Day Treatment
Diagnostic Assessment	90791	52	All	Any	Auth at Threshold	4381	4 sessions/calendar year, cumulative all types	MHCP Provider Manual: Mental Health Services: Diagnostic Assessment
Diagnostic Assessment	90792	52	All	Any	Auth at Threshold	4381	4 sessions/calendar year, cumulative all types	
DBT (Adult)	H2019	U1/U1 HN	All	18 & Older	Auth at Start of Service	4498	Individual: 104 units/six months	MHCP Provider Manual: Mental Health Services: DBT
DBT (Children)	H2019	U1 HA U1 HN HA	PMAP, MNCare, SNBC	12 to 17	Auth at Start of Service	4498	Individual: 104 units/six months	
DBT (Adult)	H2019	U1 HQ U1 HO HN	All	18 & Older	Auth at Start of Service	4498	Group: 312 units/six months	
DBT (Children)	H2019	U1 HQ HA U1 HQ HN HA	PMAP, MNCare, SNBC	12 to 17	Auth at Start of Service	4498	Group: 312 units/six months	
EIDBI	97151	UB	PMAP, MNCare, SNBC	21 & under	Auth at Start of Service	4894	80 units/calendar year, 8 hours per day, multiple providers may bill at the same time	MHCP Provider Manual: Mental Health Services: EIDBI
EIDBI	97153	UB	PMAP, MNCare, SNBC	21 & under	Auth at Start of Service	4894	8 hours per day	
EIDBI	97154	UB	PMAP, MNCare, SNBC	21 & under	Auth at Start of Service	4894	4.5 hours per day, up to 8 people in a group	

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EIDBI	97155	UB	PMAP, MNCare, SNBC	21 & under	Auth at Start of Service	4894	6 hours per day, The requested and authorized amount of CPT 97155 should be approximately 20% of the total authorized intervention time	
EIDBI	97156	UB	PMAP, MNCare, SNBC	21 & under	Auth at Start of Service	4894	4 hours per day, multiple providers may bill at the same time	
EIDBI	97157	UB	PMAP, MNCare, SNBC	21 & under	Auth at Start of Service	4894	4 hours per day, multiple providers may bill at the same time, up to 8 people or couples of caregivers in a group	
EIDBI	H0032	UB	PMAP, MNCare, SNBC	21 & under	Auth at Start of Service	4894	May be billed as clinically necessary, multiple providers may bill at the same time	
EIDBI	0373T	UB	PMAP, MNCare, SNBC	21 & under	Auth at Start of Service	4894	8 hours per day	
Healthy Pathways	G9006	U1	All	17 & older	Auth at Start of Service	Webform	3 months	7187.pdf
Healthy Pathways	G9006	U2	All	17 & older	Auth at Start of Service	Webform	3 months	
Healthy Pathways	G9006	U3	All	17 & older	Auth at Start of Service	Webform	3 months	
Healthy Pathways	G9006	U4	All	17 & older	Auth at Start of Service	Webform	6 months	
Healthy Pathways	G9006		All	17 & older	Auth at Start of Service	Webform	None	
IRTS	H0019		All	18 & over	Auth at Start of Service	4381	90 days/readmission within 15 days of a previous discharge. Additional days passed the initial threshold require authorization in 30 day	MHCP Provider Manual: Mental Health Services: IRTS
CMHRIS	H0019		PMAP, MNCare, SNBC	17 & under	Auth at Start of Service	4381	45 days/readmission within 15 days of a previous discharge. Additional days passed the initial threshold require authorization in 30 day	MHCP Provider Manual: Mental Health Services: CMHRIS

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PHP	H0035	UA	All	All	Auth at Start of Service	4381	21 days/stay or readmission within 45 days	MHCP Provider Manual: Mental Health Services: Partial Hospitalization
PRTF	R0101 (0101)		PMAP, MNCare, SNBC	20 & under	Auth at Start of Service	4381	90 days/stay	MHCP Provider Manual: Mental Health Services: PRTF (Psychiatric Residential Treatment Facility)
SUD: Res Treatment	H2036		All	All	Auth at Start of Service	4505	Notification required within the 5 state area. Authorization required for programs outside the 5 state area.	Substance Use Disorder (SUD) Services
SUD: Res Treatment	R0944 (0944)		All	All	Auth at Start of Service	4505		
SUD: Res Treatment	R0945 (0945)		All	All	Auth at Start of Service	4505		
SUD: Res Treatment	R0953 (0953)		All	All	Auth at Start of Service	4505		
SUD: OON Outpatient	H2035	HQ	All	All	Auth at Threshold	5991	Services provided outside of MN require an auth	Substance Use Disorder (SUD) Services