

MINNESOTA HEALTH CARE PROGRAMS NEWS

The Minnesota Department of Human Services (DHS) recently released the following provider news regarding a provision passed during the 2025 Minnesota Legislative Session that requires Minnesota Health Care Programs (MHCP) providers with electronic medical records to allow the State Medical Review Team (SMRT) access to and use of those records to support more efficient disability determinations.

Key statute details

- [Minnesota Statutes, 256.01, subdivision 29](#) established the requirement effective May 24, 2025.
- MHCP providers are required to accept electronically signed authorizations submitted by SMRT to release medical records.

We mailed providers a letter via the U.S. Postal Service regarding this statutory requirement. The requirement builds on existing requirements found in the [Fee-for-Service \(FFS\) only or FFS and Managed Care Organization In-Network Provider Agreement \(DHS-4138\) \(PDF\)](#), requiring providers to:

“Comply with all federal and state statutes and rules relating to the delivery of services to individuals and to the submission of claims for such services.”

The existing language in the DHS-4138 provider agreement allows the SMRT to obtain access to electronic health records without requiring a separate contract with individual MHCP providers.

Attestation for use of records with valid authorization

SMRT seeks data according to the valid authorization where the member has specifically requested the disclosure of all health information to SMRT. A valid authorization does not require an attestation under Code of Federal Regulations, title 45, section 164.509. Refer to [Code of Federal Regulations, title 45, section 164.509](#). A valid authorization is sufficient on its own for providers to disclose health information to the State Medical Review Team.

Your next steps

- Ensure your organization's electronic medical record system supports secure access for SMRT when requested.





Bulletin/Update

- Be prepared to accept electronically signed authorizations from SMRT for the release of medical records.
- Review your processes to ensure compliance with this statutory requirement.

Who to contact

Call the State Medical Review Team at 651-431-2493 if you have questions or want more information about the statute or implementation process.

South Country Provider Contact Center

1-888-633-4055

Hours: 8 a.m. - 4:30 p.m.

The Provider Contact Center staff are available as your first point of contact to assist with the following.

Member benefit coverage

Provider web portal issues

Authorization verification

Claim rejection guidance

Website questions

General information

Claims billing and processing guidelines

Remittance adjustment code details and payment information

South Country wants to ensure providers are reimbursed for services provided to our members and following all billing guidelines. Our staff are committed to support and guide you in understanding all South Country processes and procedures. In addition, callers that utilize our Provider Contact Center are provided a reference number that identifies your call in our system. Please keep the reference number in your records to refer to if you have any additional questions or need to check the status of an open issue. The reference number will help the representative locate your issue quickly.