

**SENATE
STATE OF MINNESOTA
NINETY-FOURTH SESSION**

S.F. No. 8

(SENATE AUTHORS: BOLDON)

DATE
01/16/2025

D-PG

Introduction and first reading
Referred to Health and Human Services

OFFICIAL STATUS

1.1 A bill for an act
1.2 relating to human services; providing medical assistance coverage of psychiatric
1.3 Collaborative Care Model; amending Minnesota Statutes 2024, section 256B.0671,
1.4 by adding a subdivision.

1.5 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MINNESOTA:

1.6 Section 1. Minnesota Statutes 2024, section 256B.0671, is amended by adding a subdivision
1.7 to read:

1.8 Subd. 14. **Psychiatric Collaborative Care Model.** (a) Medical assistance covers the
1.9 psychiatric Collaborative Care Model for clients.

1.10 (b) "Psychiatric Collaborative Care Model" means the evidence-based, integrated
1.11 behavioral health service delivery method described at Federal Register, volume 81, page
1.12 80230, provided through a formal collaborative arrangement among a primary care team
1.13 consisting of a primary care provider, a care manager, and a psychiatric consultant. The
1.14 psychiatric Collaborative Care Model includes but is not limited to the following elements:

1.15 (1) care directed by the primary care team;

1.16 (2) structured care management;

1.17 (3) regular assessments of clinical status using validated tools; and

1.18 (4) modification of treatment as appropriate.

1.19 (c) Medical assistance covers the psychiatric Collaborative Care Model for clients when
1.20 the following Current Procedural Terminology or Healthcare Common Procedure Coding
1.21 System billing codes are used:

2.1 (1) 99492;

2.2 (2) 99493;

2.3 (3) 99494;

2.4 (4) G2214; and

2.5 (5) G0512.

2.6 **EFFECTIVE DATE.** This section is effective July 1, 2025, or upon federal approval,
2.7 whichever is later. The commissioner of human services shall notify the revisor of statutes
2.8 when federal approval is obtained.