

1.1 moves to amend H.F. No. 2847, the first engrossment, as follows:

1.2 Page 20, delete section 12

1.3 Page 28, after line 17, insert:

1.4 "Sec. Minnesota Statutes 2022, section 256B.0659, is amended by adding a subdivision
1.5 to read:

1.6 Subd. 14a. **Qualified professional; remote supervision.** (a) For recipients with chronic
1.7 health conditions or severely compromised immune systems, a qualified professional may
1.8 conduct the supervision required under subdivision 14 via two-way interactive audio and
1.9 visual telecommunications if, at the recipient's request, the recipient's primary health care
1.10 provider:

1.11 (1) determines that remote supervision is appropriate; and

1.12 (2) documents the determination under clause (1) in a statement of need or other document
1.13 that is subsequently included in the recipient's personal care assistance care plan.

1.14 (b) Notwithstanding any other provision of law, a care plan developed or amended via
1.15 remote supervision may be executed by electronic signature.

1.16 (c) A personal care assistance provider agency must not conduct its first supervisory
1.17 visit for a recipient and complete its initial personal care assistance care plan via a remote
1.18 visit.

1.19 (d) A recipient may request to return to in-person supervisory visits at any time.

1.20 **EFFECTIVE DATE.** This section is effective July 1, 2023, or upon federal approval,
1.21 whichever is later. The commissioner of human services shall notify the revisor of statutes
1.22 when federal approval is obtained."

1.23 Page 45, line 12, reinstate the stricken "9a" and delete "9"

2.1 Page 59, line 7, delete "(a) For the purposes of this subdivision,"

2.2 Page 59, delete lines 8 to 13

2.3 Reletter the paragraphs in sequence

2.4 Page 62, after line 14, insert:

2.5 "Sec. 12. **PROVIDER CAPACITY GRANTS FOR RURAL AND UNDERSERVED**
2.6 **COMMUNITIES.**

2.7 Subdivision 1. **Establishment and authority.** (a) The commissioner of human services
2.8 shall award grants to organizations that provide community-based services to rural or
2.9 underserved communities. The grants must be used to build organizational capacity to
2.10 provide home and community-based services in the state and to build new or expanded
2.11 infrastructure to access medical assistance reimbursement.

2.12 (b) The commissioner shall conduct community engagement, provide technical assistance,
2.13 and establish a collaborative learning community related to the grants available under this
2.14 section and shall work with the commissioner of management and budget and the
2.15 commissioner of the Department of Administration to mitigate barriers in accessing grant
2.16 money.

2.17 (c) The commissioner shall limit expenditures under this subdivision to the amount
2.18 appropriated for this purpose.

2.19 (d) The commissioner shall give priority to organizations that provide culturally specific
2.20 and culturally responsive services or that serve historically underserved communities
2.21 throughout the state.

2.22 Subd. 2. **Eligibility.** An eligible applicant for the capacity grants under subdivision 1 is
2.23 an organization or provider that serves, or will serve, rural or underserved communities
2.24 and:

2.25 (1) provides, or will provide, home and community-based services in the state; or

2.26 (2) serves, or will serve, as a connector for communities to available home and
2.27 community-based services.

2.28 Subd. 3. **Allowable grant activities.** Grants under this section must be used by recipients
2.29 for the following activities:

2.30 (1) expanding existing services;

2.31 (2) increasing access in rural or underserved areas;

3.1 (3) creating new home and community-based organizations;

3.2 (4) connecting underserved communities to benefits and available services; or

3.3 (5) building new or expanded infrastructure to access medical assistance reimbursement."

3.4 Page 62, line 20, delete "licensed" and insert "license"

3.5 Page 80, line 5, delete "the adjusted phase-in in"

3.6 Page 80, line 6, delete "subdivision 2" and insert "any rate adjustments under this section"

3.7 Page 81, line 28, delete "section"

3.8 Page 81, line 29, delete "256S.2101," and delete "2" and insert "4"

3.9 Page 84, delete lines 17 to 23 and insert:

3.10 "(a) The commissioner of human services shall work collaboratively with stakeholders
 3.11 to undertake an actuarial analysis of Medicaid costs for nursing home eligible beneficiaries
 3.12 for the purposes of establishing a monthly Medicaid capitation rate for the program of
 3.13 all-inclusive care for the elderly (PACE). The analysis must include all sources of state
 3.14 Medicaid expenditures for nursing home eligible beneficiaries including but not limited to
 3.15 capitation payments to plans and additional state expenditures to skilled nursing facilities
 3.16 consistent with Code of Federal Regulations, chapter 42, part 447, and long-term care costs.

3.17 (b) The commissioner shall also estimate the administrative costs associated with
 3.18 implementing and monitoring PACE.

3.19 (c) The commissioner shall provide a report to the chairs and ranking minority members
 3.20 of the legislative committees with jurisdiction over health care funding on the actuarial
 3.21 analysis, proposed capitation rate, and estimated administrative costs by December 15,
 3.22 2023. The commissioner shall recommend a financing mechanism and administrative
 3.23 framework by July 1, 2024.

3.24 (d) By September 1, 2024, the commissioner shall inform the chairs and ranking minority
 3.25 members of the legislative committees with jurisdiction over health care funding on the
 3.26 commissioner's progress toward developing a recommended financing mechanism. For
 3.27 purposes of this section, the commissioner may issue or extend an RFP to an outside vendor."

3.28 Page 85, line 19, before "Minnesota" insert "(a)"

3.29 Page 85, after line 19, insert:

3.30 "(b) Minnesota Statutes 2022, section 256B.0917, subdivisions 1a, 6, 7a, and 13, are
 3.31 repealed."

- 4.1 Page 85, line 20, delete "This section" and insert "Paragraph (a)"
- 4.2 Page 117, line 4, after "commissioner" insert "of human services"
- 4.3 Page 117, line 8, after "to" insert "American Society of Addiction Medicine (ASAM)"
- 4.4 and delete the second "ASAM"
- 4.5 Page 119, line 11, delete "centers" and insert "focuses on"
- 4.6 Page 119, line 12, delete the first "with"
- 4.7 Page 122, line 5, before "two" insert "at least"
- 4.8 Page 130, line 23, delete "are available for up to three years" and insert "do not cancel"
- 4.9 Page 131, line 24, delete "are"
- 4.10 Page 131, line 25, delete "available for three years" and insert "do not cancel"
- 4.11 Page 134, line 33, delete "voluntary" and delete "service" and insert "system"
- 4.12 Page 135, line 1, delete "HARM-REDUCTION" and insert "HARM REDUCTION"
- 4.13 Page 135, line 5, delete "harm-reduction" and insert "harm reduction"
- 4.14 Page 135, line 7, delete "Harm-reduction" and insert "Harm reduction"
- 4.15 Page 135, line 8, delete "fentanyl-testing" and insert "fentanyl testing"
- 4.16 Page 135, line 20, after "empower" insert "individuals and providers"
- 4.17 Page 139, delete section 5
- 4.18 Page 139, after line 16, insert:
- 4.19 "Sec. Minnesota Statutes 2022, section 256B.0638, is amended by adding a subdivision
- 4.20 to read:
- 4.21 Subd. 6a. **Waiver for certain provider groups.** (a) This section does not apply to
- 4.22 prescribers employed by, or under contract or affiliated with, a provider group for which
- 4.23 the commissioner has granted a waiver from the requirements of this section.
- 4.24 (b) The commissioner, in consultation with opioid prescribers, shall develop waiver
- 4.25 criteria for provider groups, and shall make waivers available beginning July 1, 2023. In
- 4.26 granting waivers, the commissioner shall consider whether the medical director of the
- 4.27 provider group and a majority of the practitioners within a provider group have specialty
- 4.28 training, fellowship training, or experience in treating chronic pain. Waivers under this
- 4.29 subdivision shall be granted on an annual basis."

5.1 Page 142, delete section 6 and insert:

5.2 "Sec. DIRECTION TO COMMISSIONER OF HUMAN SERVICES; OPIOID
5.3 PRESCRIBING IMPROVEMENT PROGRAM SUNSET.

5.4 The commissioner of human services shall recommend criteria to provide for a sunset
5.5 of the opioid prescribing improvement program under Minnesota Statutes, section 256B.0638.
5.6 In developing sunset criteria, the commissioner shall consult with stakeholders including,
5.7 but not limited to, clinicians that practice pain management, addiction medicine, mental
5.8 health, and either current or former Minnesota health care program enrollees who use or
5.9 have used opioid therapy to manage chronic pain. By January 15, 2024, the commissioner
5.10 shall submit recommended criteria to the chairs and ranking members of the legislative
5.11 committees with jurisdiction over health and human services."

5.12 Page 147, after line 16, insert:

5.13 "(5) When an employee in a temporary unclassified position is transferred to the
5.14 Department of Direct Care and Treatment, the total length of time that the employee has
5.15 served in the appointment shall include all time served in the appointment at the transferring
5.16 agency and the time served in the appointment at the Department of Direct Care and
5.17 Treatment. An employee in a temporary unclassified position who was hired by a transferring
5.18 agency through an open competitive selection process in accordance with a policy enacted
5.19 by Minnesota Management and Budget shall be considered to have been hired through such
5.20 process after the transfer."

5.21 Page 147, line 17, delete "(5)" and insert "(6)"

5.22 Page 157, line 17, delete "6,836,753,000" and insert "6,834,184,000" and delete
5.23 "7,248,630,000" and insert "7,252,890,000"

5.24 Page 157, line 20, delete "6,827,134,000" and insert "6,825,305,000" and delete
5.25 "7,242,928,000" and insert "7,247,928,000"

5.26 Page 157, lines 21, 22, 32, and 33, delete the new language

5.27 Page 157, line 31, delete "90,708,000" and insert "85,879,000"

5.28 Page 162, line 29, delete "\$3,467,000" and insert "\$2,667,000"

5.29 Page 162, line 30, delete "\$3,367,000" and insert "\$2,567,000"

5.30 Page 164, line 14, after "for" insert "provider capacity" and delete "under Minnesota"

- 6.1 Page 164, line 15, delete everything before the period and insert "for rural and
- 6.2 underserved communities"
- 6.3 Page 164, line 18, delete "\$....." and insert "\$25,759,000"
- 6.4 Page 164, line 19, delete "is" and insert "and \$13,000,000 in fiscal year 2025 are"
- 6.5 Page 175, line 6, before "**Council**" insert "(a)"
- 6.6 Page 175, after line 30, insert:
- 6.7 "**(b) Base Level Adjustment.** The general
- 6.8 fund base is \$2,032,000 in fiscal year 2026
- 6.9 and \$2,032,000 in fiscal year 2027."
- 6.10 Page 176, line 2, delete "2,000,000" and insert "1,000,000" and delete "2,000,000" and
- 6.11 insert "1,000,000"
- 6.12 Renumber the sections in sequence and correct the internal references
- 6.13 Amend the title accordingly