

- 1.1 ..... moves to amend H.F. No. 2847, the delete everything amendment  
1.2 (H2847DE1), as follows:
- 1.3 Page 2, delete section 3
- 1.4 Page 2, line 14, delete "entities" and insert "entity"
- 1.5 Page 6, lines 25 and 26, delete the new language
- 1.6 Page 33, line 16, before the period, insert "of human services"
- 1.7 Page 33, line 20, delete "of human services"
- 1.8 Page 37, line 29, before the period, insert "of human services"
- 1.9 Page 37, line 33, delete "of human services"
- 1.10 Page 38, line 18, after "commissioner" insert "of human services"
- 1.11 Page 38, line 25, delete "required under paragraph (a)"
- 1.12 Page 39, line 3, delete "of human services"
- 1.13 Page 43, line 25, strike "2021" and insert "2022"
- 1.14 Page 51, line 5, after "(c)" insert "Effective January 1, 2025,"
- 1.15 Page 53, line 1, delete "within" and delete "of" and insert "after"
- 1.16 Page 58, line 30, delete "or" and after "3b" insert ", 4, or 9"
- 1.17 Page 60, line 8, delete "Supreme Court by the advisory committee" and insert "advisory  
1.18 committee established by the Supreme Court"
- 1.19 Page 60, after line 8, insert:

2.1 "Sec. .... SUPPORTING NEW AMERICANS IN THE LONG-TERM CARE  
2.2 WORKFORCE GRANTS.

2.3 Subdivision 1. **Definition.** For the purposes of this section, "new American" means an  
2.4 individual born abroad and the individual's children, irrespective of immigration status.

2.5 Subd. 2. **Grant program established.** The commissioner of human services shall  
2.6 establish a grant program for organizations that support immigrants, refugees, and new  
2.7 Americans interested in entering the long-term care workforce.

2.8 Subd. 3. **Eligibility.** (a) The commissioner shall select projects for funding under this  
2.9 section. An eligible applicant for the grant program in subdivision 1 is an:

2.10 (1) organization or provider that is experienced in working with immigrants, refugees,  
2.11 and people born outside of the United States and that demonstrates cultural competency;  
2.12 or

2.13 (2) organization or provider with the expertise and capacity to provide training, peer  
2.14 mentoring, supportive services, and workforce development or other services to develop  
2.15 and implement strategies for recruiting and retaining qualified employees.

2.16 (b) The commissioner shall prioritize applications from joint labor management programs.

2.17 Subd. 4. **Allowable grant activities.** Money allocated under this section must be used  
2.18 to:

2.19 (1) support immigrants, refugees, or new Americans to obtain or maintain employment  
2.20 in the long-term care workforce;

2.21 (2) develop connections to employment with long-term care employers and potential  
2.22 employees;

2.23 (3) provide recruitment, training, guidance, mentorship, and other support services  
2.24 necessary to encourage employment, employee retention, and successful community  
2.25 integration;

2.26 (4) provide career education, wraparound support services, and job skills training in  
2.27 high-demand health care and long-term care fields;

2.28 (5) pay for program expenses, including but not limited to hiring instructors and  
2.29 navigators, space rentals, and supportive services to help participants attend classes.

2.30 Allowable uses for supportive services include but are not limited to:

2.31 (i) course fees;

- 3.1 (ii) child care costs;
- 3.2 (iii) transportation costs;
- 3.3 (iv) tuition fees;
- 3.4 (v) financial coaching fees; or
- 3.5 (vi) mental health supports and uniforms costs incurred as a direct result of participating  
 3.6 in classroom instruction or training; or
- 3.7 (6) repay student loan debt directly incurred as a result of pursuing a qualifying course  
 3.8 of study or training.

3.9 Sec. .... **APPROVAL OF CORPORATE FOSTER CARE MORATORIUM**  
 3.10 **EXCEPTIONS.**

3.11 (a) The commissioner of human services may approve or deny corporate foster care  
 3.12 moratorium exceptions requested under Minnesota Statutes, section 245A.03, subdivision  
 3.13 7, paragraph (a), clause (5), prior to approval of a service provider's home and  
 3.14 community-based services licensed under Minnesota Statutes, chapter 245D. Approval of  
 3.15 the moratorium exception shall not be construed as final approval of a service provider's  
 3.16 home and community-based services or community residential setting license.

3.17 (b) Approval under paragraph (a) shall be available only for service providers that have  
 3.18 requested a home and community-based services license under Minnesota Statutes, chapter  
 3.19 245D.

3.20 (c) Approval under paragraph (a) shall be rescinded if the service provider's application  
 3.21 for a home and community-based services or community residential setting license is denied.

3.22 (d) This section expires December 31, 2023.

3.23 **EFFECTIVE DATE.** This section is effective the day following final enactment.

3.24 Sec. .... **BUDGET INCREASE FOR CONSUMER-DIRECTED COMMUNITY**  
 3.25 **SUPPORTS.**

3.26 (a) Effective January 1, 2024, or upon federal approval, whichever is later,  
 3.27 consumer-directed community support budgets identified in the waiver plans under Minnesota  
 3.28 Statutes, sections 256B.092 and 256B.49, and chapter 256S, and the alternative care program  
 3.29 under Minnesota Statutes, section 256B.0913, must be increased by 8.49 percent.

4.1 (b) Effective January 1, 2025, or upon federal approval, whichever is later,  
4.2 consumer-directed community support budgets identified in the waiver plans under Minnesota  
4.3 Statutes, sections 256B.092 and 256B.49, and chapter 256S, and the alternative care program  
4.4 under Minnesota Statutes, section 256B.0913, must be increased by 4.53 percent."

4.5 Page 61, line 6, after "with" insert "the" and after "Union" insert "Healthcare Minnesota  
4.6 and Iowa"

4.7 Page 64, line 3, after "for" insert "older adults on medical assistance and" and delete the  
4.8 comma and insert "and"

4.9 Page 64, line 4, delete ", and older adults"

4.10 Page 72, line 26, after "section" insert "626.557, or for multidisciplinary teams under  
4.11 section 626.5571"

4.12 Page 76, delete line 27

4.13 Page 76, line 28, delete "section 256S.211, subdivision 3," and insert "rate adjustments  
4.14 under this section"

4.15 Page 79, line 1, delete "Subdivision 4 is" and insert "Subdivisions 2 to 4 are"

4.16 Page 79, line 21, delete "16.28" and insert "15.8"

4.17 Page 80, line 25, delete the first "\$1,000,000" and insert "\$3,000,000" and delete  
4.18 everything after "2025"

4.19 Page 80, line 26, delete everything before the period

4.20 Page 81, line 4, delete the first "\$575,000" and insert "\$1,725,000" and delete everything  
4.21 after "2025"

4.22 Page 81, line 5, delete everything before the period

4.23 Page 84, after line 8, insert:

4.24 "**EFFECTIVE DATE.** This section is effective January 1, 2024."

4.25 Page 86, after line 21, insert:

4.26 "**EFFECTIVE DATE.** This section is effective January 1, 2024."

4.27 Page 87, line 1, delete everything after "245.4863"

4.28 Page 87, line 2, delete everything before the semicolon

4.29 Page 87, line 11, after the semicolon, insert "and"

5.1 Page 87, line 12, delete "naloxone" and insert "an opiate antagonist" and delete the  
5.2 semicolon and insert a period

5.3 Page 87, delete lines 13 to 15

5.4 Page 87, after line 18, insert:

5.5 "EFFECTIVE DATE. This section is effective January 1, 2024."

5.6 Page 88, after line 7, insert:

5.7 "EFFECTIVE DATE. This section is effective January 1, 2024."

5.8 Page 88, line 21, delete "254B.05" and insert "254B.19, subdivision 1"

5.9 Page 88, line 22, delete everything before "under"

5.10 Page 88, after line 30, insert:

5.11 "EFFECTIVE DATE. This section is effective January 1, 2024."

5.12 Page 89, after line 19, insert:

5.13 "EFFECTIVE DATE. This section is effective January 1, 2024."

5.14 Page 89, line 26, delete "254B.05, subdivision 5" and insert "254B.19, subdivision 1"

5.15 Page 89, line 27, before the comma, insert "or residential hospital-based services"

5.16 Page 90, line 6, before "opioid" insert "nonresidential"

5.17 Page 90, after line 13, insert:

5.18 "EFFECTIVE DATE. This section is effective January 1, 2024."

5.19 Page 90, line 26, strike "245G.05" and insert "254B.04, subdivision 4"

5.20 Page 91, delete section 13

5.21 Page 91, after line 4, insert:

5.22 "EFFECTIVE DATE. This section is effective January 1, 2024."

5.23 Page 92, line 8, strike "1" and insert "3"

5.24 Page 92, line 17, strike "and" and before the semicolon insert ", and 3a"

5.25 Page 92, after line 19, insert:

5.26 "EFFECTIVE DATE. This section is effective January 1, 2024."

5.27 Page 93, line 12, delete the new language and strike the old language

6.1 Page 93, strike lines 13 to 16

6.2 Page 93, after line 16, insert:

6.3 **"EFFECTIVE DATE. This section is effective January 1, 2024."**

6.4 Page 98, after line 12, insert:

6.5 "Sec. .... Minnesota Statutes 2022, section 254B.04, is amended by adding a subdivision  
6.6 to read:

6.7 **Subd. 4. Assessment criteria and risk descriptions. (a) The level of care determination**  
6.8 **must follow criteria approved by the commissioner.**

6.9 **(b) Dimension 1: Acute intoxication/withdrawal potential. A vendor must use the criteria**  
6.10 **in Dimension 1 to determine a client's acute intoxication and withdrawal potential, the**  
6.11 **client's ability to cope with withdrawal symptoms, and the client's current state of**  
6.12 **intoxication.**

6.13 **"0" The client displays full functioning with good ability to tolerate and cope with**  
6.14 **withdrawal discomfort, and the client shows no signs or symptoms of intoxication or**  
6.15 **withdrawal or diminishing signs or symptoms.**

6.16 **"1" The client can tolerate and cope with withdrawal discomfort. The client displays**  
6.17 **mild to moderate intoxication or signs and symptoms interfering with daily functioning but**  
6.18 **does not immediately endanger self or others. The client poses a minimal risk of severe**  
6.19 **withdrawal.**

6.20 **"2" The client has some difficulty tolerating and coping with withdrawal discomfort.**  
6.21 **The client's intoxication may be severe but responds to support and treatment such that the**  
6.22 **client does not immediately endanger self or others. The client displays moderate signs and**  
6.23 **symptoms of withdrawal with moderate risk of severe withdrawal.**

6.24 **"3" The client tolerates and copes with withdrawal discomfort poorly. The client has**  
6.25 **severe intoxication, such that the client endangers self or others, or intoxication has not**  
6.26 **abated with less intensive services. The client displays severe signs and symptoms of**  
6.27 **withdrawal, has a risk of severe but manageable withdrawal, or has worsening withdrawal**  
6.28 **despite detoxification at less intensive level.**

6.29 **"4" The client is incapacitated with severe signs and symptoms. The client displays**  
6.30 **severe withdrawal and is a danger to self or others.**

6.31 **(c) Dimension 2: biomedical conditions and complications. The vendor must use the**  
6.32 **criteria in Dimension 2 to determine a client's biomedical conditions and complications, the**

7.1 degree to which any physical disorder of the client would interfere with treatment for  
7.2 substance use, and the client's ability to tolerate any related discomfort. If the client is  
7.3 pregnant, the provider must determine the impact of continued substance use on the unborn  
7.4 child.

7.5 "0" The client displays full functioning with good ability to cope with physical discomfort.

7.6 "1" The client tolerates and copes with physical discomfort and is able to get the services  
7.7 that the client needs.

7.8 "2" The client has difficulty tolerating and coping with physical problems or has other  
7.9 biomedical problems that interfere with recovery and treatment. The client neglects or does  
7.10 not seek care for serious biomedical problems.

7.11 "3" The client tolerates and copes poorly with physical problems or has poor general  
7.12 health. The client neglects the client's medical problems without active assistance.

7.13 "4" The client is unable to participate in substance use disorder treatment and has severe  
7.14 medical problems, a condition that requires immediate intervention, or is incapacitated.

7.15 (d) Dimension 3: Emotional, behavioral, and cognitive conditions and complications.  
7.16 The vendor must use the criteria in Dimension 3 to determine a client's: emotional, behavioral,  
7.17 and cognitive conditions and complications; the degree to which any condition or  
7.18 complication is likely to interfere with treatment for substance use or with functioning in  
7.19 significant life areas; and the likelihood of harm to self or others.

7.20 "0" The client has good impulse control and coping skills and presents no risk of harm  
7.21 to self or others. The client functions in all life areas and displays no emotional, behavioral,  
7.22 or cognitive problems or the problems are stable.

7.23 "1" The client has impulse control and coping skills. The client presents a mild to  
7.24 moderate risk of harm to self or others or displays symptoms of emotional, behavioral, or  
7.25 cognitive problems. The client has a mental health diagnosis and is stable. The client  
7.26 functions adequately in significant life areas.

7.27 "2" The client has difficulty with impulse control and lacks coping skills. The client has  
7.28 thoughts of suicide or harm to others without means; however, the thoughts may interfere  
7.29 with participation in some activities. The client has difficulty functioning in significant life  
7.30 areas. The client has moderate symptoms of emotional, behavioral, or cognitive problems.  
7.31 The client is able to participate in most treatment activities.

7.32 "3" The client has a severe lack of impulse control and coping skills. The client also has  
7.33 frequent thoughts of suicide or harm to others including a plan and the means to carry out

8.1 the plan. In addition, the client is severely impaired in significant life areas and has severe  
8.2 symptoms of emotional, behavioral, or cognitive problems that interfere with the client's  
8.3 participation in treatment activities.

8.4 "4" The client has severe emotional or behavioral symptoms that place the client or  
8.5 others at acute risk of harm. The client also has intrusive thoughts of harming self or others.  
8.6 The client is unable to participate in treatment activities.

8.7 (e) Dimension 4: Readiness for change. The vendor must use the criteria in Dimension  
8.8 4 to determine a client's readiness for change and the support necessary to keep the client  
8.9 involved in treatment services.

8.10 "0" The client is cooperative, motivated, ready to change, admits problems, committed  
8.11 to change, and engaged in treatment as a responsible participant.

8.12 "1" The client is motivated with active reinforcement to explore treatment and strategies  
8.13 for change but ambivalent about illness or need for change.

8.14 "2" The client displays verbal compliance, but lacks consistent behaviors; has low  
8.15 motivation for change; and is passively involved in treatment.

8.16 "3" The client displays inconsistent compliance, minimal awareness of either the client's  
8.17 addiction or mental disorder, and is minimally cooperative.

8.18 "4" The client is:

8.19 (i) noncompliant with treatment and has no awareness of addiction or mental disorder  
8.20 and does not want or is unwilling to explore change or is in total denial of the client's illness  
8.21 and its implications; or

8.22 (ii) the client is dangerously oppositional to the extent that the client is a threat of  
8.23 imminent harm to self and others.

8.24 (f) Dimension 5: Relapse, continued use, and continued problem potential. The vendor  
8.25 must use the criteria in Dimension 5 to determine a client's relapse, continued use, and  
8.26 continued problem potential and the degree to which the client recognizes relapse issues  
8.27 and has the skills to prevent relapse of either substance use or mental health problems.

8.28 "0" The client recognizes risk well and is able to manage potential problems.

8.29 "1" The client recognizes relapse issues and prevention strategies but displays some  
8.30 vulnerability for further substance use or mental health problems.

8.31 "2" The client has:



9.1 (i) minimal recognition and understanding of relapse and recidivism issues and displays  
9.2 moderate vulnerability for further substance use or mental health problems; or

9.3 (ii) some coping skills inconsistently applied.

9.4 "3" The client has poor recognition and understanding of relapse and recidivism issues  
9.5 and displays moderately high vulnerability for further substance use or mental health  
9.6 problems. The client has few coping skills and rarely applies coping skills.

9.7 "4" The client has no coping skills to arrest mental health or addiction illnesses or prevent  
9.8 relapse. The client has no recognition or understanding of relapse and recidivism issues and  
9.9 displays high vulnerability for further substance use disorder or mental health problems.

9.10 (g) Dimension 6: Recovery environment. The vendor must use the criteria in Dimension  
9.11 6 to determine a client's recovery environment, whether the areas of the client's life are  
9.12 supportive of or antagonistic to treatment participation and recovery.

9.13 "0" The client is engaged in structured meaningful activity and has a supportive significant  
9.14 other, family, and living environment.

9.15 "1" The client has passive social network support, or family and significant other are  
9.16 not interested in the client's recovery. The client is engaged in structured meaningful activity.

9.17 "2" The client is engaged in structured, meaningful activity, but peers, family, significant  
9.18 other, and living environment are unsupportive, or there is criminal justice involvement by  
9.19 the client or among the client's peers, significant other, or in the client's living environment.

9.20 "3" The client is not engaged in structured meaningful activity and the client's peers,  
9.21 family, significant other, and living environment are unsupportive, or there is significant  
9.22 criminal justice system involvement.

9.23 "4" The client has:

9.24 (i) a chronically antagonistic significant other, living environment, family, peer group,  
9.25 or long-term criminal justice involvement that is harmful to recovery or treatment progress;  
9.26 or

9.27 (ii) the client has an actively antagonistic significant other, family, work, or living  
9.28 environment that poses an immediate threat to the client's safety and well-being. "

9.29 Page 101, after line 33, insert:

9.30 "EFFECTIVE DATE. (a) Paragraph (b), clause (1), items (i) to (iv), are effective  
9.31 January 1, 2025, or upon federal approval, whichever is later. Paragraph (b), clause (1),

10.1 items (v) to (vii), are effective January 1, 2024, or upon federal approval, whichever is later.

10.2 Paragraph (b), clauses (2) to (10), are effective January 1, 2024."

10.3 Page 102, line 4, after "programs" insert "licensed under chapter 245F"

10.4 Page 102, lines 22 and 23, delete "naloxone" and insert "an opiate antagonist"

10.5 Page 104, line 1, delete "naloxone" and insert "an opiate antagonist"

10.6 Page 104, line 9, delete "naloxone" and insert "opiate antagonists"

10.7 Page 108, after line 18, insert:

10.8 "EFFECTIVE DATE. This section is effective January 1, 2024."

10.9 Page 108, delete section 26

10.10 Page 110, after line 17, insert:

10.11 "Sec. 26. EVIDENCE-BASED TRAINING.

10.12 The commissioner must establish training opportunities for substance use disorder  
10.13 treatment providers under chapters 245G and 245F, and applicable Tribal licenses, to increase  
10.14 knowledge and develop skills to adopt evidence-based and promising practices in substance  
10.15 use disorder treatment programs. Training opportunities must support the transition to  
10.16 ASAM standards. Training formats may include self or organizational assessments, virtual  
10.17 modules, one-to-one coaching, self-paced courses, interactive hybrid courses, and in-person  
10.18 courses. Foundational and skill-building training topics may include:

10.19 (1) ASAM criteria;

10.20 (2) person-centered and culturally responsive services;

10.21 (3) medical and clinical decision making;

10.22 (4) conducting assessments and appropriate level of care;

10.23 (5) treatment and service planning;

10.24 (6) identifying and overcoming systems challenges;

10.25 (7) conducting clinical case reviews; and

10.26 (8) appropriate and effective transfer and discharge."

10.27 Page 111, line 10, delete "naloxone" and insert "opiate antagonist"

10.28 Page 111, after line 19, insert:

11.1 "(c) The commissioner must prioritize grant applications for organizations that are  
 11.2 culturally specific or culturally responsive and that commit to serving individuals from  
 11.3 communities that are disproportionately impacted by the opioid epidemic, including:

11.4 (1) Native American, American Indian, and Indigenous communities; and

11.5 (2) Black, African American, and African-born communities.

11.6 (d) For purposes of this section, a "culturally specific" or "culturally responsive"  
 11.7 organization is an organization that is designed to address the unique needs of individuals  
 11.8 who share a common language, racial, ethnic, or social background, and is governed with  
 11.9 significant input from individuals of that specific background."

11.10 Page 112, line 26, after "any" insert "other"

11.11 Page 112, line 27, after "to" insert "subdivision numbers or"

11.12 Page 113, line 1, delete "August 1, 2023" and insert "January 1, 2024"

11.13 Page 114, lines 17, 19, and 21, delete "nasal naloxone" and insert "a nasal opiate  
 11.14 antagonist"

11.15 Page 118, line 9, delete "naloxone" and insert "an opiate antagonist"

11.16 Page 118, line 24, delete "may" and insert "must"

11.17 Page 118, line 27, strike "naloxone" and insert "opiate antagonists"

11.18 Page 124, line 11, delete "naloxone" and insert "an opiate antagonist"

11.19 Page 127, line 23, delete "naloxone" and insert "opiate antagonist"

11.20 Page 129, line 30, before "standards" insert "sanction"

11.21 Page 131, line 19, after "program" insert "on an annual basis"

11.22 Page 131, line 26, strike "(e)" and insert "(g)"

11.23 Page 134, line 12, delete "failing to" and after "assess" insert "the patient"

11.24 Page 139, line 3, delete "246C.01" and insert "246.03"

11.25 Page 139, line 12, delete "commissioner of direct" and insert "Department of Direct  
 11.26 Care and Treatment executive board"

11.27 Page 139, line 13, delete "care and treatment" and delete "143.03" and insert "246C.03"

11.28 Page 139, line 15, delete "commissioner of direct care and treatment's appointment" and  
 11.29 insert "Department of Direct Care and Treatment executive board is appointed"

12.1 Page 140, after line 23, insert:

12.2 **"ARTICLE 7**

12.3 **LICENSING**

12.4 Sec. .... Minnesota Statutes 2022, section 245A.04, subdivision 7, is amended to read:

12.5 Subd. 7. **Grant of license; license extension.** (a) If the commissioner determines that  
 12.6 the program complies with all applicable rules and laws, the commissioner shall issue a  
 12.7 license consistent with this section or, if applicable, a temporary change of ownership license  
 12.8 under section 245A.043. At minimum, the license shall state:

12.9 (1) the name of the license holder;

12.10 (2) the address of the program;

12.11 (3) the effective date and expiration date of the license;

12.12 (4) the type of license;

12.13 (5) the maximum number and ages of persons that may receive services from the program;

12.14 and

12.15 (6) any special conditions of licensure.

12.16 (b) The commissioner may issue a license for a period not to exceed two years if:

12.17 (1) the commissioner is unable to conduct the evaluation or observation required by  
 12.18 subdivision 4, paragraph (a), clause (4), because the program is not yet operational;

12.19 (2) certain records and documents are not available because persons are not yet receiving  
 12.20 services from the program; and

12.21 (3) the applicant complies with applicable laws and rules in all other respects.

12.22 (c) A decision by the commissioner to issue a license does not guarantee that any person  
 12.23 or persons will be placed or cared for in the licensed program.

12.24 (d) Except as provided in paragraphs ~~(f) and (g)~~ (i) and (j), the commissioner shall not  
 12.25 issue ~~or reissue~~ a license if the applicant, license holder, or an affiliated controlling individual  
 12.26 has:

12.27 (1) been disqualified and the disqualification was not set aside and no variance has been  
 12.28 granted;

12.29 (2) been denied a license under this chapter, within the past two years;

13.1 (3) had a license issued under this chapter revoked within the past five years; or  
 13.2 ~~(4) an outstanding debt related to a license fee, licensing fine, or settlement agreement~~  
 13.3 ~~for which payment is delinquent; or~~

13.4 ~~(5)~~ (4) failed to submit the information required of an applicant under subdivision 1,  
 13.5 paragraph (f) or (g), after being requested by the commissioner.

13.6 When a license issued under this chapter is revoked ~~under clause (1) or (3)~~, the license  
 13.7 holder and each affiliated controlling individual with a revoked license may not hold any  
 13.8 license under chapter 245A for five years following the revocation, and other licenses held  
 13.9 by the applicant, or license holder, or licenses affiliated with each controlling individual  
 13.10 shall also be revoked.

13.11 (e) Notwithstanding paragraph (d), the commissioner may elect not to revoke a license  
 13.12 affiliated with a license holder or controlling individual that had a license revoked within  
 13.13 the past five years if the commissioner determines that (1) the license holder or controlling  
 13.14 individual is operating the program in substantial compliance with applicable laws and rules,  
 13.15 and (2) the program's continued operation is in the best interests of the community being  
 13.16 served.

13.17 (f) Notwithstanding paragraph (d), the commissioner may issue a new license in response  
 13.18 to an application that is affiliated with an applicant, license holder, or controlling individual  
 13.19 that had an application denied within the past two years or a license revoked within the past  
 13.20 five years if the commissioner determines that (1) the applicant or controlling individual  
 13.21 has operated one or more programs in substantial compliance with applicable laws and  
 13.22 rules, and (2) the program's operation would be in the best interests of the community to be  
 13.23 served.

13.24 (g) In determining whether a program's operation would be in the best interests of the  
 13.25 community to be served, the commissioner shall consider factors such as the number of  
 13.26 persons served, the availability of alternative services available in the surrounding  
 13.27 community, the management structure of the program, whether the program provides  
 13.28 culturally specific services, and other relevant factors.

13.29 ~~(e)~~ (h) The commissioner shall not issue or reissue a license under this chapter if an  
 13.30 individual living in the household where the services will be provided as specified under  
 13.31 section 245C.03, subdivision 1, has been disqualified and the disqualification has not been  
 13.32 set aside and no variance has been granted.

14.1 ~~(f)~~ (i) Pursuant to section 245A.07, subdivision 1, paragraph (b), when a license issued  
14.2 under this chapter has been suspended or revoked and the suspension or revocation is under  
14.3 appeal, the program may continue to operate pending a final order from the commissioner.  
14.4 If the license under suspension or revocation will expire before a final order is issued, a  
14.5 temporary provisional license may be issued provided any applicable license fee is paid  
14.6 before the temporary provisional license is issued.

14.7 ~~(g)~~ (j) Notwithstanding paragraph ~~(f)~~ (i), when a revocation is based on the  
14.8 disqualification of a controlling individual or license holder, and the controlling individual  
14.9 or license holder is ordered under section 245C.17 to be immediately removed from direct  
14.10 contact with persons receiving services or is ordered to be under continuous, direct  
14.11 supervision when providing direct contact services, the program may continue to operate  
14.12 only if the program complies with the order and submits documentation demonstrating  
14.13 compliance with the order. If the disqualified individual fails to submit a timely request for  
14.14 reconsideration, or if the disqualification is not set aside and no variance is granted, the  
14.15 order to immediately remove the individual from direct contact or to be under continuous,  
14.16 direct supervision remains in effect pending the outcome of a hearing and final order from  
14.17 the commissioner.

14.18 ~~(h)~~ (k) For purposes of reimbursement for meals only, under the Child and Adult Care  
14.19 Food Program, Code of Federal Regulations, title 7, subtitle B, chapter II, subchapter A,  
14.20 part 226, relocation within the same county by a licensed family day care provider, shall  
14.21 be considered an extension of the license for a period of no more than 30 calendar days or  
14.22 until the new license is issued, whichever occurs first, provided the county agency has  
14.23 determined the family day care provider meets licensure requirements at the new location.

14.24 ~~(i)~~ (l) Unless otherwise specified by statute, all licenses issued under this chapter expire  
14.25 at 12:01 a.m. on the day after the expiration date stated on the license. A license holder must  
14.26 apply for and be granted a new license to operate the program or the program must not be  
14.27 operated after the expiration date.

14.28 ~~(j)~~ (m) The commissioner shall not issue or reissue a license under this chapter if it has  
14.29 been determined that a tribal licensing authority has established jurisdiction to license the  
14.30 program or service.

14.31 Sec. .... Minnesota Statutes 2022, section 245A.07, is amended by adding a subdivision  
14.32 to read:

14.33 Subd. 2b. **Immediate suspension of residential programs.** For suspensions issued to  
14.34 a licensed residential program as defined in section 245A.02, subdivision 14, the effective

15.1 date of the order may be delayed for up to 30 calendar days to provide for the continuity of  
15.2 care of service recipients. The license holder must cooperate with the commissioner to  
15.3 ensure service recipients receive continued care during the period of the delay and to facilitate  
15.4 the transition of service recipients to new providers. In these cases, the suspension order  
15.5 takes effect when all service recipients have been transitioned to a new provider or 30 days  
15.6 after the suspension order was issued, whichever comes first.

15.7 Sec. .... Minnesota Statutes 2022, section 245A.07, is amended by adding a subdivision  
15.8 to read:

15.9 Subd. 2c. **Immediate suspension for programs with multiple licensed service sites.** (a)  
15.10 For license holders that operate more than one service site under a single license, the  
15.11 suspension order must be specific to the service site or sites where the commissioner  
15.12 determines an order is required under subdivision 2. The order must not apply to other  
15.13 service sites operated by the same license holder unless the commissioner has included in  
15.14 the order an articulable basis for applying the order to other service sites.

15.15 (b) If the commissioner has issued more than one license to the license holder under this  
15.16 chapter, the suspension imposed under this section must be specific to the license for the  
15.17 program at which the commissioner determines an order is required under subdivision 2.  
15.18 The order must not apply to other licenses held by the same license holder if those programs  
15.19 are being operated in substantial compliance with applicable law and rules.

15.20 Sec. .... Minnesota Statutes 2022, section 245A.10, subdivision 6, is amended to read:

15.21 **Subd. 6. License not issued until license or certification fee is paid.** The commissioner  
15.22 shall not issue or reissue a license or certification until the license or certification fee is paid.  
15.23 The commissioner shall send a bill for the license or certification fee to the billing address  
15.24 identified by the license holder. If the license holder does not submit the license or  
15.25 certification fee payment by the due date, the commissioner shall send the license holder a  
15.26 past due notice. If the license holder fails to pay the license or certification fee by the due  
15.27 date on the past due notice, the commissioner shall send a final notice to the license holder  
15.28 informing the license holder that the program license will expire on December 31 unless  
15.29 the license fee is paid before December 31. If a license expires, the program is no longer  
15.30 licensed and, unless exempt from licensure under section 245A.03, subdivision 2, must not  
15.31 operate after the expiration date. After a license expires, if the former license holder wishes  
15.32 to provide licensed services, the former license holder must submit a new license application  
15.33 and application fee under subdivision 3.

16.1 Sec. .... Minnesota Statutes 2022, section 245A.10, is amended by adding a subdivision  
16.2 to read:

16.3 Subd. 9. License not reissued until outstanding debt is paid. The commissioner shall  
16.4 not reissue a license or certification until the license holder has paid all outstanding debts  
16.5 related to a licensing fine or settlement agreement for which payment is delinquent. If the  
16.6 payment is past due, the commissioner shall send a past due notice informing the license  
16.7 holder that the program license will expire on December 31 unless the outstanding debt is  
16.8 paid before December 31. If a license expires, the program is no longer licensed and must  
16.9 not operate after the expiration date. After a license expires, if the former license holder  
16.10 wishes to provide licensed services, the former license holder must submit a new license  
16.11 application and application fee under subdivision 3.

16.12 Sec. .... Minnesota Statutes 2022, section 245A.13, subdivision 1, is amended to read:

16.13 Subdivision 1. **Application.** (a) In addition to any other remedy provided by law, the  
16.14 commissioner may petition the district court in Ramsey County for an order directing the  
16.15 controlling individuals of a residential or nonresidential program licensed or certified by  
16.16 the commissioner to show cause why the commissioner should not be appointed receiver  
16.17 to operate the program. The petition to the district court must contain proof by affidavit that  
16.18 one or more of the following circumstances exists: (1) that the commissioner has either  
16.19 begun proceedings to suspend or revoke a license or certification, has suspended or revoked  
16.20 a license or certification, or has decided to deny an application for licensure or certification  
16.21 of the program; or (2) it appears to the commissioner that the health, safety, or rights of the  
16.22 residents or persons receiving care from the program may be in jeopardy because of the  
16.23 manner in which the program may close, the program's financial condition, or violations  
16.24 committed by the program of federal or state laws or rules. If the license holder, applicant,  
16.25 or controlling individual operates more than one program, the commissioner's petition must  
16.26 specify and be limited to the program for which it seeks receivership. The affidavit submitted  
16.27 by the commissioner must set forth alternatives to receivership that have been considered,  
16.28 including rate adjustments. The order to show cause is returnable not less than five days  
16.29 after service is completed and must provide for personal service of a copy to the program  
16.30 administrator and to the persons designated as agents by the controlling individuals to accept  
16.31 service on their behalf.

16.32 (1) the commissioner has commenced proceedings to suspend or revoke the program's  
16.33 license, or refused to renew the program's license;



17.1 (2) there is a threat of imminent abandonment by the program or its controlling  
17.2 individuals;

17.3 (3) the program has shown a pattern of failure to meet ongoing financial obligations  
17.4 such as failing to pay for food, pharmaceuticals, personnel costs, or required insurance;

17.5 (4) it appears to the commissioner that the health, safety, or rights of the residents or  
17.6 persons receiving care from the program may be in jeopardy due to the manner in which  
17.7 the program may close, the program's financial condition, or violations of federal or state  
17.8 law or rules committed by the program; or

17.9 (5) the commissioner has notified the program or its controlling individuals that the  
17.10 program's federal Medicare or Medicaid provider agreement will be terminated, revoked,  
17.11 canceled, or not renewed.

17.12 (b) If the license holder, applicant, or controlling individual operates more than one  
17.13 program, the commissioner's petition must specify and be limited to the program for which  
17.14 it seeks receivership.

17.15 (c) The order to show cause shall be personally served on the program through its  
17.16 authorized agent or, in the event the authorized agent cannot be located, on any controlling  
17.17 individual for the program.

17.18 Sec. .... Minnesota Statutes 2022, section 245A.13, subdivision 2, is amended to read:

17.19 Subd. 2. **Appointment of receiver.** (a) If the court finds that involuntary receivership  
17.20 is necessary as a means of protecting the health, safety, or rights of persons being served  
17.21 by the program, the court shall appoint the commissioner as receiver to operate the program.  
17.22 The commissioner as receiver may contract with another entity or group to act as the  
17.23 managing agent during the receivership period. The managing agent will be responsible for  
17.24 the day-to-day operations of the program subject at all times to the review and approval of  
17.25 the commissioner. A managing agent shall not:

17.26 (1) be the license holder or controlling individual of the program;

17.27 (2) have a financial interest in the program at the time of the receivership;

17.28 (3) be otherwise affiliated with the program; or

17.29 (4) have had a licensed program that has been ordered into receivership.

17.30 (b) Notwithstanding state contracting requirements in chapter 16C, the commissioner  
17.31 shall establish and maintain a list of qualified persons or entities with experience in delivering  
17.32 services and with winding down programs under chapters 245A, 245D, or 245G, or other

18.1 service types licensed by the commissioner. The list shall be a resource for selecting a  
18.2 managing agent, and the commissioner may update the list at any time.

18.3 Sec. .... Minnesota Statutes 2022, section 245A.13, subdivision 3, is amended to read:

18.4 Subd. 3. **Powers and duties of receiver.** ~~Within 36 months after the receivership order,~~  
18.5 ~~the receiver shall provide for the orderly transfer of the persons served by the program to~~  
18.6 ~~other programs or make other provisions to protect their health, safety, and rights. The~~  
18.7 ~~receiver or the managing agent shall correct or eliminate deficiencies in the program that~~  
18.8 ~~the commissioner determines endanger the health, safety, or welfare of the persons being~~  
18.9 ~~served by the program unless the correction or elimination of deficiencies at a residential~~  
18.10 ~~program involves major alteration in the structure of the physical plant. If the correction or~~  
18.11 ~~elimination of the deficiencies at a residential program requires major alterations in the~~  
18.12 ~~structure of the physical plant, the receiver shall take actions designed to result in the~~  
18.13 ~~immediate transfer of persons served by the residential program. During the period of the~~  
18.14 ~~receivership, the receiver and the managing agent shall operate the residential or~~  
18.15 ~~nonresidential program in a manner designed to preserve the health, safety, rights, adequate~~  
18.16 ~~care, and supervision of the persons served by the program. The receiver or the managing~~  
18.17 ~~agent may make contracts and incur lawful expenses. The receiver or the managing agent~~  
18.18 ~~shall collect incoming payments from all sources and apply them to the cost incurred in the~~  
18.19 ~~performance of the functions of the receivership including the fee set under subdivision 4.~~  
18.20 ~~No security interest in any real or personal property comprising the program or contained~~  
18.21 ~~within it, or in any fixture of the physical plant, shall be impaired or diminished in priority~~  
18.22 ~~by the receiver or the managing agent.~~ (a) A receiver appointed pursuant to this section  
18.23 shall, within 18 months after the receivership order, determine whether to close the program  
18.24 or to make other provisions with the intent to keep the program open. If the receiver  
18.25 determines that program closure is appropriate, the commissioner shall provide for the  
18.26 orderly transfer of individuals served by the program to other programs or make other  
18.27 provisions to protect the health, safety, and rights of individuals served by the program.

18.28 (b) During the receivership, the receiver or the managing agent shall correct or eliminate  
18.29 deficiencies in the program that the commissioner determines endanger the health, safety,  
18.30 or welfare of the persons being served by the program unless the correction or elimination  
18.31 of deficiencies at a residential program involves major alteration in the structure of the  
18.32 physical plant. If the correction or elimination of the deficiencies at a residential program  
18.33 requires major alterations in the structure of the physical plant, the receiver shall take actions  
18.34 designed to result in the immediate transfer of persons served by the residential program.  
18.35 During the period of the receivership, the receiver and the managing agent shall operate the

19.1 residential or nonresidential program in a manner designed to preserve the health, safety,  
19.2 rights, adequate care, and supervision of the persons served by the program.

19.3 (c) The receiver or the managing agent may make contracts and incur lawful expenses.

19.4 (d) The receiver or the managing agent shall use the building, fixtures, furnishings, and  
19.5 any accompanying consumable goods in the provision of care and services to the clients  
19.6 during the receivership period. The receiver shall take action as is reasonably necessary to  
19.7 protect or conserve the tangible assets or property during receivership.

19.8 (e) The receiver or the managing agent shall collect incoming payments from all sources  
19.9 and apply them to the cost incurred in the performance of the functions of the receivership,  
19.10 including the fee set under subdivision 4. No security interest in any real or personal property  
19.11 comprising the program or contained within it, or in any fixture of the physical plant, shall  
19.12 be impaired or diminished in priority by the receiver or the managing agent.

19.13 (f) The receiver has authority to hire, direct, manage, and discharge any employees of  
19.14 the program including management level staff for the program.

19.15 (g) The commissioner, as the receiver appointed by the court, may hire a managing agent  
19.16 to work on the commissioner's behalf to operate the program during the receivership. The  
19.17 managing agent is entitled to a reasonable fee. The receiver and managing agent shall be  
19.18 liable only in an official capacity for injury to persons and property by reason of the  
19.19 conditions of the program. The receiver and managing agent shall not be personally liable,  
19.20 except for gross negligence or intentional acts. The commissioner shall assist the managing  
19.21 agent in carrying out the managing agent's duties.

19.22 Sec. .... Minnesota Statutes 2022, section 245A.13, subdivision 6, is amended to read:

19.23 Subd. 6. **Emergency procedure.** (a) If it appears from the petition filed under subdivision  
19.24 1, from an affidavit or affidavits filed with the petition, or from testimony of witnesses  
19.25 under oath if the court determines it necessary, that there is probable cause to believe that  
19.26 an emergency exists in a residential or nonresidential program, the court shall issue a  
19.27 temporary order for appointment of a receiver within five two days after receipt of the  
19.28 petition. ~~Notice of the petition must be served on the program administrator and on the~~  
19.29 ~~persons designated as agents by the controlling individuals to accept service on their behalf.~~  
19.30 ~~A hearing on the petition must be held within five days after notice is served unless the~~  
19.31 ~~administrator or authorized agent consents to a later date. After the hearing, the court may~~  
19.32 ~~continue, modify, or terminate the temporary order.~~

20.1 (b) Notice of the petition must be served on the authorized agent of the program who is  
 20.2 subject to the receivership petition, or if the authorized agent is not immediately available  
 20.3 for service, on at least one of the controlling individuals for the program. A hearing on the  
 20.4 petition must be held within five days after notice is served unless the authorized agent or  
 20.5 other controlling individual consents to a later date. After the hearing, the court may continue,  
 20.6 modify, or terminate the temporary order.

20.7 Sec. .... Minnesota Statutes 2022, section 245A.13, subdivision 7, is amended to read:

20.8 Subd. 7. **Rate recommendation.** For any program receiving Medicaid funds and ordered  
 20.9 into receivership, the commissioner of human services may review rates of a residential or  
 20.10 nonresidential program ~~participating in the medical assistance program which is in~~  
 20.11 ~~receivership and~~ that has needs or deficiencies documented by the Department of Health  
 20.12 or the Department of Human Services. If the commissioner of human services determines  
 20.13 that a review of the rate established under sections 256B.5012 and 256B.5013 is needed,  
 20.14 the commissioner shall:

20.15 (1) review the order or determination that cites the deficiencies or needs; and

20.16 (2) determine the need for additional staff, additional annual hours by type of employee,  
 20.17 and additional consultants, services, supplies, equipment, repairs, or capital assets necessary  
 20.18 to satisfy the needs or deficiencies.

20.19 Sec. .... Minnesota Statutes 2022, section 245A.13, subdivision 9, is amended to read:

20.20 Subd. 9. **Receivership accounting.** The commissioner may ~~use~~ adjust Medicaid rates  
 20.21 and use Medicaid funds, including but not limited to waiver funds, and the medical assistance  
 20.22 account and funds for receivership cash flow, receivership administrative fees, and accounting  
 20.23 purposes, to the extent permitted by the state's approved Medicaid plan."

20.24 Page 141, line 9, delete "6,839,840,000" and insert "6,836,753,000" and delete  
 20.25 "7,232,523,000" and insert "7,248,630,000"

20.26 Page 141, line 12, delete "6,830,221,000" and insert "6,827,134,000" and delete  
 20.27 "7,226,821,000" and insert "7,242,928,000"

20.28 Page 141, line 17, delete "2,500,000" and insert "500,000"

20.29 Page 141, line 23, delete "93,154,000" and insert "90,708,000" and delete "11,644,000"  
 20.30 and insert "16,057,000"

20.31 Page 141, line 30, delete "\$4,645,000" and insert "\$4,975,000"

- 21.1 Page 141, line 31, delete "\$4,538,000" and insert "\$4,868,000"
- 21.2 Page 142, line 2, delete "1,214,000" and insert "1,073,000" and delete "3,999,000" and  
21.3 insert "3,693,000"
- 21.4 Page 142, delete lines 6 to 8
- 21.5 Page 142, line 9, delete "2,239,000" and insert "2,039,000" and delete "2,322,000" and  
21.6 insert "2,122,000"
- 21.7 Page 142, line 14, delete "\$1,100,000" and insert "\$900,000"
- 21.8 Page 142, line 15, delete "\$1,100,000" and insert "\$900,000"
- 21.9 Page 142, line 18, delete "\$270,000" and insert "\$150,000"
- 21.10 Page 145, line 25, delete "8,690,000" and insert "6,390,000" and delete "10,138,000"  
21.11 and insert "7,838,000"
- 21.12 Page 146, delete line 9
- 21.13 Page 146, line 10, delete everything before the period
- 21.14 Page 146, line 16, delete "pursuant to Minnesota"
- 21.15 Page 146, line 17, delete "Statutes, section 245.891"
- 21.16 Page 146, delete lines 28 to 34
- 21.17 Page 147, delete lines 1 to 17
- 21.18 Reletter the paragraphs in sequence
- 21.19 Page 148, line 28, delete "18,000,000" and insert "5,000,000"
- 21.20 Page 148, line 31, delete "\$18,000,000" and insert "\$5,000,000"
- 21.21 Page 148, line 35, delete "25,925,000" and insert "38,925,000"
- 21.22 Page 149, delete lines 8 to 10 and insert "\$..... in fiscal year 2024 is for supporting new  
21.23 Americans in the workforce grants. This is a onetime appropriation."
- 21.24 Page 150, line 22, delete "160,292,000" and insert "160,792,000"
- 21.25 Page 152, line 26, delete "and\$2,000,000" and insert "and \$2,000,000"
- 21.26 Page 153, line 6, delete "256.935" and insert "256.9365"
- 21.27 Page 153, after line 28, insert:

22.1 **"(m) Community Residential Setting**

22.2 **Transition. \$500,000 in fiscal year 2024 is**  
22.3 **for a grant to Hennepin County to expedite**  
22.4 **approval of community residential setting**  
22.5 **licenses subject to the corporate foster care**  
22.6 **moratorium exception under Minnesota**  
22.7 **Statutes, section 245A.03, subdivision 7,**  
22.8 **paragraph (a), clause (5)."**

22.9 Reletter the paragraphs in sequence

22.10 Page 154, line 19, delete "88,288,000" and insert "89,788,000" and delete "4,997,000"  
22.11 and insert "6,497,000"

22.12 Page 155, line 11, delete "naloxone" and insert "opiate antagonists"

22.13 Page 157, line 4, delete "naloxone" and insert "opiate antagonist"

22.14 Page 157, after line 17, insert:

22.15 **"(k) Project ECHO. \$1,500,000 in fiscal year**  
22.16 **2024 and \$1,500,000 in fiscal year 2025 are**  
22.17 **for a grant to Hennepin Healthcare to expand**  
22.18 **the Project ECHO program. The grant must**  
22.19 **be used to establish at least four substance use**  
22.20 **disorder-focused Project ECHO programs at**  
22.21 **Hennepin Healthcare, expanding the grantee's**  
22.22 **capacity to improve health and substance use**  
22.23 **disorder outcomes for diverse populations of**  
22.24 **individuals enrolled in medical assistance,**  
22.25 **including but not limited to immigrants,**  
22.26 **individuals who are homeless, individuals**  
22.27 **seeking maternal and perinatal care, and other**  
22.28 **underserved populations. The Project ECHO**  
22.29 **programs funded under this section must be**  
22.30 **culturally responsive, and the grantee must**  
22.31 **contract with culturally and linguistically**  
22.32 **appropriate substance use disorder service**  
22.33 **providers who have expertise in focus areas,**  
22.34 **based on the populations served. Grant funds**

23.1 may be used for program administration,  
 23.2 equipment, provider reimbursement, and  
 23.3 staffing hours. This is a onetime  
 23.4 appropriation."

23.5 Page 157, line 24, delete "17 to 21" and insert "19 to 23"

23.6 Reletter the paragraphs in sequence

23.7 Page 158, line 2, delete "June 30" and insert "August 1"

23.8 Page 158, line 5, delete "(a)"

23.9 Page 158, delete lines 15 to 23

23.10 Page 159, after line 31, insert:

23.11 "Sec. .MINNESOTA MANAGEMENT AND  
 23.12 BUDGET

2,000,000

2,000,000

23.13 (a) Office of Addition and Recovery.

23.14 \$750,000 in fiscal year 2024 and \$750,000 in

23.15 fiscal year 2025 are for the Office of Addition

23.16 and Recovery.

23.17 (b) Youth Substance Use and Addiction

23.18 Recovery Office. \$250,000 in fiscal year 2024

23.19 and \$250,000 in fiscal year 2025 are for the

23.20 Youth Substance Use and Addiction Recovery

23.21 Office."

23.22 Page 161, after line 3, insert:

23.23 "Sec. .... EXPIRATION OF UNCODIFIED LANGUAGE.

23.24 All uncodified language contained in this article expires on June 30, 2025, unless a

23.25 different expiration date is explicit."

23.26 Renumber the sections in sequence and correct the internal references