

## Health and Human Services Bill – Article Section List

Revisor # 19-5223

May 24, 2019

### Article 1: Children and Families Services

Section	Description	Source
1-5 and 7-18	Child care assistance program (CCAP) federal compliance	House
6	Requiring counties to provide applicants and recipients with information about fraud	House
19	Tribal delivery of child welfare services – commissioner authority to authorize alternative screening methods	House
20	Increasing the MFIP cash portion of the transitional standard	House
21-22	Child protection grant allocation to counties modified to remove 20 percent withhold	Both (identical)
23-33	Modifying out-of-home placement provisions to allow for placement of a child in foster care co-located with a parent in a residential family-based substance use disorder treatment program Requiring official documentation that a youth was formerly in foster care, for transition plan purposes	House
34	Removing exception for parents incarcerated due to nonpayment of child support	Both
35	IV-D services collections fee increase	Senate
36	Children’s residential treatment facility background study implementation	House
37-38	Child welfare training academy; child welfare caseload study	House
39	Homeless youth access to birth records and Minnesota identification cards	House
40-41	Kinship navigator models and out-of-home placement relative searches	House
42	Revisor instruction: update “food stamps” references to “SNAP”	Senate
43	Repealer	House

### Article 2: Operations

Section	Description	Source
1	DHS dissemination of CCAP data to commissioner of education	Both
2	Disclosure of certain welfare investigative data	House
3	Limiting public posting of license inspection data	Senate
4, 7	Classification of CCAP data	Both
5	Civil penalties under the False Claims Act	Both
6, 127	Program evaluation; Results First	New
8-11	Child care assistance program (CCAP) program integrity	Both

Section	Description	Source
12, 74, 75	Background study set-asides for individuals in the substance use disorder treatment field	Both
13	Limits on public funds	Both (similar)
14-20, 22-29, 31, 33-39	Department of Human Services (DHS) licensing provisions, including new requirements for change of ownership and modifications to license sanctions and child care inspection dispute resolution process	House
21	Supervision of school-aged children in licensed child care centers modified	House
30	Variances for licensed family foster care capacity	House
32	Family childcare handbook	Senate
40	Special family day care homes clarifications and variances	House
41	Consolidating child care center staff training requirements	House
42	Licensed child care center transportation requirement to have valid driver’s license	House
43	Reusable water bottles in child care centers	House
44	DHS development of child care maltreatment reporting policies and procedures.	House
45	Child care license licensing agency phone number displayed	House
46	Supervision of family child care license holder’s own child by individual not licensed	House
47	Adding certified license-exempt child care center to fire marshal inspection requirement	House
48	Variances for substitute care in family child care; reporting of fires	House
49	Child passenger restraint training requirements	House
50	Mandates county and DHS licensors to report suspected fraud	Both (modified)
51, 52	Child care center training requirements clarified and consolidated; emergency preparedness plan requirements modified.	House
53	Child care provider training	Senate
54	Emergency preparedness plan requirements modified for family child care	Both (combination)
55-57	Family child care safety licensing requirements	House
58	Substitute caregiver and emergency replacement care in family child care	House (modified)
59-60	Child care center risk reduction plan provisions	House
61-62, 66, 69-70, 72, 76, 79-81	DHS background study requirements modified; certified licensed exempt child care centers added	House
63	Children’s residential facility background study requirements modified	House
64	Defines “substance use disorder treatment field” for background study variance purposes	Both
65, 67, 71	Adding children’s residential facilities to background study requirements	House
68	Minors background study non-fingerprint based data	House

Section	Description	Source
73	Modifies background study notice requirements when information from another state is delayed	House
77	Modifying bar to set aside a permanent background study disqualification	House (modified)
78	Children’s residential facilities set-aside five year bar	House
82	CCAP fraud investigation program integrity	House
83	SUD care coordination provider requirements	New
84	SUD license holder requirements when responsible for supervision of a child	New
85-102	Modifies provisions related to certification of license-exempt child care centers	House
103	Certified license-exempt child care center written emergency plan requirements modified	House
104-105	SUD services vendor eligibility	New
106	DHS hearing authority	House
107	Administrative disqualification of certain child care providers and modification of disqualification period	House
108	Adding housing supports to the statutes governing wrongfully obtaining assistance	Senate
109	Recipient disqualification based on fraud finding	House
110	Child care provider financial misconduct	Senate (modified)
111, 113-126	Medical Assistance program integrity, including establishing billing and documentation requirements for home and community-based services	Both
112	MA provider enrollment exception for failure to bill services to MA	Senate
128	Direction to Commissioner: County level correction order enforcement review	Senate
129	Fraud investigations in public programs	New
130	Self-employment income in public programs	New
131	SUD county staff qualifications	New
132	Family Child Care Task Force	Senate (modified)
133	Direction to Commissioner: Duplicative/unnecessary child care licensing and background study regulations review	Senate
134	Repealer – child care fire safety requirements and telephone requirements moved to statute; certified license-exempt child care center direct contact; child care provider overpayment claims for providers who fail to comply with records access requirement; foster care capacity	House

**Article 3: Direct Care and Treatment**

Section	Description	Source
1	Administrative review of county liability for cost of care for days in state-operated direct care and treatment facilities after discharge is appropriate	Both
2	County shares for MSOP cost of care; 25 percent cost of care for MSOP provisional discharge	House
3	Report on clinically inappropriate stays in state-operated direct care and treatment facilities required	Both
4	Repealer – state-operated services account; state-operated services appropriations	House

**Article 4: Continuing Care**

Section	Description	Source
1-8, 10-12, 14-17, 19-24, 26, 29, 30	Nursing facility property payment rate reform	House (modified)
9	Nursing facility moratorium exception projects funding	Both (modified)
13, 18 and 25	Border city nursing facility rate add-on	Senate
27	Developing pilot projects for energy-related programs in nursing facilities	House (modified)
28	Elderly waiver quality incentives	Senate (modified)

**Article 5: Disability Services**

Section	Description	Source
1-10 and 85	Modernization of telecommunications access Minnesota program	House
11-19	Modifies home and community-based services standards	House/Senate combined
20	TEFRA parental contribution reduction	House
21	SILS county contribution reduction	Both
22	Family support grant program modifications	New
23-32	Adult day services modifications	House
33	Prescription coverage for people living with HIV	Both
34	Housing access grant modification to population served	Both
35, 43-47, 49, 50, 52, 53	Long-term care consultation services (MnCHOICES) modifications	Senate

<b>Section</b>	<b>Description</b>	<b>Source</b>
36, 38, 40, 42, 71, 72-75	PCA/CFSS enhanced rate	House
37	Qualified professional enrollment requirement	Senate
39, 41, 54, 69, 72	Non-DWRS labor market reporting requirements	Senate
48	Modifies elderly waiver cost limits due to PCA enhanced rate	House
51	HCBS “innovation” pool	Senate
55-68, 89	DWRS modifications, including adding a competitive workforce factor	House/Senate modified
70	Expanding CFSS eligibility to include certain pregnant women	Both
76-79	Modifications to various housing supports provisions	Senate
80-81	CDCS technical correction and adding shared services	House/Senate combined
82	Modifying electronic visit verification	Both
83	Ratifying the direct support services collective bargaining agreement	House
84	Direct support services provider reimbursement rates increased	House
86	Requiring disability waiver reconfiguration proposal and report	House
87	Requiring a direct care workforce rate methodology study	Both
88	TEFRA option improvement measures	Both
90	DT&H transition to DWRS grants	Senate
91	Allowing a waiver services provider in Hennepin County to transfer service capacity	Both
92	Requiring the commissioner of human services to make recommendations on use of supportive technology for persons with disabilities	New
93	Revisor’s instruction	House/Senate combined
94	Repealer	House/Senate combined

**Article 6: Chemical and Mental Health**

<b>Section</b>	<b>Description</b>	<b>Source</b>
1, 73	Law enforcement mental health screening data sharing	Both (House language – similar)
2-3	School-linked mental health grants improvement	House
4	Community behavioral health clinics updates	House
5	Modifying withdrawal management admission criteria	House
6-39	Chemical dependency licensed treatment facilities updates and modifications to definitions and	New
40	Rules for initial substance use disorder services	Both (House language – similar)
41	Chemical use assessments via telemedicine	Senate
42	Consolidated chemical dependency fund (CCDTF) administrative funds transfer removed	Both
43-45, 48	Modifying provisions governing provider eligibility and CCDTF payment for SUD treatment room and board costs (Senate sets county share at 10%)	House
46	Authorization of peer recovery support and treatment service coordination	New
47, 49	SUD treatment provider eligibility and rate technical changes	New
50	Eliminating CCDTF operating costs deposit	Both
51	Eliminating county share for persons receiving SUD treatment while on MA	House
52, 57	Establishing MA coverage for certified community behavioral health clinic (CCBHC) services; establishing payment system	House
53-54	Removing chemical dependency services exclusion from MA	House
55	Mental health provider travel time documentation	Senate
56	Expanding psychiatric residential treatment facility capacity	House (modified)
58	Technical change – behavioral health homes	Senate
59-66	Behavioral health home services	Both (combination)
67	MA substance use disorder treatment reforms demonstration project	Both (House language – similar)
68-70	Residential treatment housing support payments	Both
71	Reporting requirement: Shelter-linked youth mental health grants	Senate
72	Shelter-Linked Youth Mental Health grant program	Senate
74-75	Extends state-only MA funding for mental health services provided in children’s residential facilities that are IMDs, indefinitely	House
76	Direction to Commissioner: substance use disorder systems improvement	Senate
77	Community competency restoration task force	Both (combination)
78	School-linked mental health program evaluation and report	House
79	CCBHC rate methodology development	House
80	Specialized Mental Health Community Supervision Pilot Project	Senate

Section	Description	Source
81	Repealer - division of costs for chemical dependency services	House

## Article 7: Health Care

Section	Description	Source
1	Department of Public Safety data sharing with DHS for benefit recovery.	Both House and Senate (identical)
2	Conforming change to section 17 (provider payments and the provider tax).	House
3-4	Requires MA and MinnesotaCare to provide a step therapy override process.	House
5-6	Technical and conforming changes related to section 15 (provider enrollment).	House
7	Clarifies how money is appropriated or transferred by the commissioner of human services out of the opiate epidemic response account.	New
8	Increases application assistance bonus for navigators and agents who assist with enrollment in MA.	House
9-13	MA hospital reimbursement – modifying DHS limit calculations for HCMC, payment adjustment for hospitals administering high cost drugs, other hospital payment provisions.	House
14	Prohibits competitive bidding for incontinence products.	Senate
15-16	Establishes requirements for provider enrollment, screening, and revalidation.	Both (House)
17	Puts into statute in modified form an MA and MinnesotaCare appropriations rider related to the provider tax (related to continuation of the provider tax in the tax bill).	House (modified)
18	MA coverage for children receiving state foster care or kinship assistance payments.	House
19	Requires an MA enrollee who is absent from the state for 30 consecutive days to be enrolled in fee-for-service.	Senate
20	Provides an asset disregard for a designated employment incentive asset account for MA-EPD individuals who turn 65.	Both (identical)
21	Increases MA spenddown limit for elderly, blind, and persons with disabilities to 100% FPG, effective July 1, 2022.	Both (modified)
22	Permits the local agency to close an enrollee's case file if required information is not submitted within four months of termination from MA.	Senate
23	Allows community health workers to provide telemedicine services; provides exemption from three-visit per week limit for services to treat tuberculosis.	House
24-26	MA outpatient drug rule and federal compliance; cost of dispensing survey.	Both (House)
27-29	Nonemergency medical transportation program integrity.	Both (House)
30	Establishes an alternative payment method for FQHCs and rural health clinics; requires a study of FQHC and rural health clinic costs.	House
31	Indian health services exemption from MA cost-sharing limit for Medicare cross-over claims.	House

Section	Description	Source
32	Allows DHS to sanction pharmacies for failing to respond to the cost of dispensing survey (related to section 25).	Both (identical)
33	Personal care provider agency requirements related to enrollment, reenrollment, and revalidation.	Both (House)
34	Requires DHS to exempt from managed care MA enrollees who are absent from the state for more than 30 consecutive days (related to section 19)	Senate
35	Limits trend increase in MA managed care rates.	Senate (modified)
36	Increases MA payments for doula services.	House
37	Payment for DME and other items and Medicare upper payment limit – provides an up-front payment reduction that replaces delayed takeback.	House
38-42	Makes the integrated care for high-risk pregnant women pilot program an ongoing program.	House
43-44	Provides that the alternative payment methodology for FQHCs and rural health clinics does not apply to services under MinnesotaCare; requires DHS to study the change in FQHC and rural health clinic costs.	House
45	Requires DHS to design, implement, and report on a corrective plan to eliminate duplicative MA enrollee personal identification numbers.	Senate
46	Requires DHS to convene a blue ribbon commission on transforming the health and human services system to obtain greater efficiencies, savings, and outcomes.	New
47	Various repealers, including repeal of the preferred incontinence product program.	Both (combination)

### Article 8: Health Coverage

Section	Description	Source
1	Coverage of digital breast tomosynthesis	Both
2, 18, 21	Health plan and MA coverage of treatments for PANDAS and PANS	House (modified form)
3	Requiring net earnings of nonprofit HMOs to be used for providing comprehensive health care	House
4, 5, 9, 10, 11	Network adequacy: establishing waiver requirements and fees to apply for waivers, enrollee complaint procedures, posting of provider networks and waivers	House
6, 7, 19, 22	Extends the operation of the Minnesota premium security plan (reinsurance), establishes reporting requirements	New
8	Requires a health carrier to file, with their rates, information on prescription drugs	Senate
12, 14	Mental health parity	Both House and Senate
13, 17	Prohibition on use of step therapy for metastatic cancer by health plans and MA	House
15	Imposes a limit on cost sharing requirements for insulin	Senate
16	Requires health carriers, as part of data submissions to the all-payer claims database, to submit data to identify individual market claims	New



Section	Description	Source
20	Extension until 2023 of the moratorium on nonprofit HMO and service plan corporation conversion transactions	Both (combination of House and Senate)

### Article 9: Prescription Drugs

Section	Description	Source
1	Provides exemption from state Medicare anti-kickback provisions for infusion drugs.	House
2, 3, 5, 6	Allows emergency refills if specified conditions are met. Requires health plans to cover emergency refills as they would regular refills and makes other related changes.	Both (identical)
4	Requires the Board of Pharmacy to provide resources related to obtaining lower priced drugs on its website.	Both (Senate)
7	Requires the Board of Pharmacy to establish a drug repository program by January 1, 2020.	House
8	Requires the board of medical practice and board of nursing to inform licensees of the Board of Pharmacy's website on obtaining lower cost drugs, and requires licensees to make this and other information available to patients.	Both (Senate)

### Article 10: Health-Related Licensing Boards

Section	Description	Source
1	Moves the Board of Nursing Home Administrators fees from rules to statute, adds fees, and increases fee amounts	House
2-3	Modifies licensure requirements for graduates of foreign medical schools	Senate
4	Codifies current traditional midwife licensing fees	House
5	Codifies current naturopathic doctor licensing fees	House
6	Codifies current genetic counselor licensing fees	House
7	Increases Board of Optometry annual licensure renewal fee; adds fees for state juris prudence examination and miscellaneous labels and data retrieval	Both (similar – modified)
8-15	Increase licensure fees for occupational therapists and occupational therapy assistants	House
16	Codifies current athletic trainer licensing fees	House
17	Moves psychology licensure fees from rule to statute. Adds fee for optional post-doctoral supervised experience pre-approval.	House
18	Increases social work licensing fees; clarifying language	House
19	Postdoctoral general dentistry residency program	Senate
20-23	Emeritus dental licensure	Both (identical)

Section	Description	Source
24-48	Pharmacy Practice Act modifications (fee increases from H.F. 2184)	House
49-50	Prescription monitoring program audits to monitor for compliance with permissible use and data access requirements; access termination for former employees	Both (combination)
51	Patient information on prescription monitoring program record access	House
52	Revisor instruction – Board of Pharmacy fee increases	New
53	Repealer - Board of Nursing Home Administrators and Board of Psychology fees in rules; wholesale drug distribution licensing and cancer drug repository program	House

### Article 11: Health Department

Section	Description	Source
1	Authorizing sale of industrial hemp grown in Minnesota to medical cannabis manufacturers	Both
2-3	Removes mandate for interoperable electronic health records	Senate
4-14	Modifications to requirements for wells and borings in chapter 103I	House
15-16	Health Department regulation of security screening systems	Both (Senate bill passed separately)
17	Primary care residency expansion grant program; training grants for duration of residency	Senate
18-20	Authorizes access to certain vital records by agencies operated by Indian tribes	House
21	Increasing annual drinking water service connection fee	Both
22	Statewide tobacco cessation services	Both
23-31	Makes electronic delivery devices subject to the requirements of the Clean Indoor Air Act	Both (Combined House and Senate)
32	Modifications to public interest review process for hospitals seeking moratorium exceptions	Senate (modified form)
33	Increasing the total number of allowed swing bed days at critical access hospitals	House (modified form)
34	Requires a hospital to establish a discharge plan before discharging certain patients	Senate
35	Requires disclosure of hospital billed charges	Senate
36	Newborn hearing screening advisory committee: members added, expiration date changed	Both
37	Authorizing Health Department to use the Health Enforcement Consolidation Act to enforce medical cannabis statutes	House
38-49, 51-67, 112	Changes to regulation of home care providers	House
50	Requires home care providers to comply with labor market reporting requirements	Senate
68	Allows state appropriations for mental health grants to address pre or post-partum mood and anxiety disorders	Senate
69, 70	Grants to address racial and ethnic disparities in prenatal care	Both
71-75	Modifies the SHIP program	Senate

<b>Section</b>	<b>Description</b>	<b>Source</b>
76	Regulates the sale of certain cannabinoids	Senate (modified form)
77-102	Changes to the medical cannabis program	Portions House, portions Senate, portions both
103	Exempts a special event food stand or a seasonal temporary food stand from licensure if certain conditions are met	Senate
104, 111, 112	Repealing Health Department’s HIV/HBV/HCB prevention program	Both
105	Correction to requirements for electronic monitoring in certain facilities	New
106	Plan for a work group on links between health disparities and educational achievement	Senate
107	Community solutions for healthy child development grant program	House
108	Domestic violence and sexual assault prevention program	House
109	Skin lightening products public awareness and education grant program	House
110	Workgroup to study the sale of certain cannabinoids	Senate

**Article 12: Miscellaneous**

<b>Section</b>	<b>Description</b>	<b>Source</b>
1	Month of May designated as Maternal Mental Health Awareness Month	House