

H.F. 716

As introduced

Subject Home and community-based waivers shared services

Authors Finke and others

Analyst Danyell A. Punelli

Date February 2, 2023

Overview

This bill: (1) makes various changes to home and community-based services waivers related to expanding access to shared services; and (2) directs the commissioner of human services to submit to CMS any necessary changes to the home and community-based waiver plans to allow for indirect billing and out-of-state billing for individualized home supports.

Home- and community-based waiver services (HCBS) help people remain in their homes and communities while receiving services, rather than be institutionalized. The waiver programs allow for federal Medicaid reimbursement for certain services provided to persons with chronic illnesses, persons with disabilities, and the elderly, which are not otherwise covered under Medicaid state plan services.

In order to participate in and receive federal reimbursement for home- and community-based Medicaid expenditures, states must apply to the federal Department of Health and Human Services (DHHS) to seek approval for each home- and community-based waiver program.

Minnesota currently administers the five home- and community-based waiver programs that are tailored to people: (1) with developmental disabilities; (2) with chronic illnesses; (3) with a disability where the person needs nursing home care; (4) with a brain injury; and (5) who are elderly.

Summary

Section Description

1 Shared services.

Amends § 256B.4912, by adding subd. 16. Paragraph (a) limits MA payments for shared services under the home and community-based waiver services and alternative care to this subdivision.

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Paragraph (b) defines "shared services."

Paragraph (c) lists the services that may be included in shared services.

Paragraph (d) lists services that may not be included in shared services.

Paragraph (e) specifies who must develop the plan for shared services and the process for developing the plan. Requires the plan for shared services in a coordinated service and support plan to include the intention to utilize shared services based on individuals' needs and preferences.

Paragraph (f) requires individuals whose coordinated service and support plans include an intent to utilize shared services to jointly develop a shared services agreement. Lists the information that must be included in the agreement.

Paragraph (g) allows an individual or an individual's representative to withdraw from participating in a shared services agreement at any time.

Paragraph (h) requires the lead agency for each individual to authorize the use of shared services based on the criteria that the shared service is appropriate to meet the needs, health, and safety of each individual for whom the lead agency provides case management or care coordination.

Paragraph (i) prohibits this subdivision from being construed as reducing the total authorized budget for an individual.

Paragraph (j) requires the commissioner of human services, no later than September 30, 2023, to submit an amendment to the Centers for Medicare and Medicaid Services to allow for shared services under the home and community-based services waivers and to develop guidance for shared services.

Provides a January 1, 2024, effective date, or upon federal approval, whichever is later. Requires the commissioner of human services to notify the revisor of statutes when federal approval is obtained.

2 Unit-based services with programming; component values and calculation of payment rates.

Amends § 256B.4914, subd. 8. Modifies units of service for individualized home supports with training, shared services for individualized home supports with training, and individualized home supports with family training under the Disability Waiver Rate System (DWRS).

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Provides a January 1, 2024, effective date, or upon federal approval, whichever is later. Requires the commissioner of human services to notify the revisor of statutes when federal approval is obtained.

3 Unit-based services without programming; component values and calculation of payment rates.

Amends § 256B.4914, subd. 9. Modifies shared services for individualized home supports without training under DWRS.

Provides a January 1, 2024, effective date, or upon federal approval, whichever is later. Requires the commissioner of human services to notify the revisor of statutes when federal approval is obtained.

4 Authorization of elderly waiver services and service rates.

Amends § 256S.16, by adding subd. 2. Requires the commissioner to provide a rate system for shared homemaker services and shared chore services, based on rates under the elderly waiver. Specifies rate limits for services shared by two and three persons. Specifies these rates only apply when all of the criteria for shared services have been met.

Provides a January 1, 2024, effective date, or upon federal approval, whichever is later. Requires the commissioner of human services to notify the revisor of statutes when federal approval is obtained.

5 Direction to commissioner; disability waiver shared services rates.

Requires the commissioner of human services to provide a rate system for shared homemaker services and shared chore services provided under the MA disability waivers. Sets rate limits for two and three persons sharing services. Specifies these rates apply only when all of the criteria for the shared service have been met.

6 Direction to commissioner; indirect billing authorized for individualized home supports with training.

By December 1, 2023, requires the commissioner of human services to submit to CMS any necessary changes to home and community-based services waiver plans to allow for providers providing individualized home supports with training to bill for services provided indirectly on behalf of the person. Lists allowable tasks.

7 Direction to commissioner; out-of-state billing.

By December 1, 2023, requires the commissioner of human services to submit to CMS any necessary changes to home and community-based services waiver plans to ensure that individualized home supports with training and individualized home supports without training are included in the definition of "direct care staff services"

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that may be authorized and provided to a waiver participant who is either traveling temporarily out of state or attending an out-of-state postsecondary school.



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