

1.1 moves to amend H.F. No. 358, the first engrossment, as follows:

1.2 Page 1, delete section 1

1.3 Page 3, line 15, delete "also"

1.4 Page 3, line 16, delete the comma

1.5 Page 3, delete lines 17 and 18

1.6 Page 3, line 19, delete "state health care program" and delete "with a serious
1.7 emotional disturbance and for" and insert "or"

1.8 Page 3, line 20, delete "26" and insert "21 with a serious emotional disturbance who
1.9 has frequented the hospital emergency room two or more times in the previous consecutive
1.10 three months or been admitted to an inpatient psychiatric unit two or more times in the
1.11 previous consecutive four months, or is being discharged to a shelter"

1.12 Page 3, line 26, after "children" insert "and young adults"

1.13 Page 3, line 27, after "coordination" insert "includes navigating and arranging for
1.14 community-based services prior to discharge to address a client's mental health, chemical
1.15 health, social, educational, family support and housing needs, or any other activity targeted
1.16 at reducing multiple incidents of emergency room use, inpatient re-admissions, and other
1.17 nonmedically necessary health care utilization. In-reach services"

1.18 Page 3, line 34, after "(c)" insert "(1)"

1.19 Page 4, after line 6, insert:

1.20 "(2) Hospitals utilizing in-reach service coordinators shall report annually to
1.21 the commissioner on the number of adults, children, and adolescents served, the
1.22 post-discharge services which they accessed, and emergency department/psychiatric
1.23 hospitalization readmissions. The commissioner shall ensure that services and payments
1.24 provided under in-reach care coordination do not duplicate services or payments provided
1.25 under section 256B.0753, 256B.0755, or 256B.0625, subdivision 20."

1.26 Page 4, line 30, after "A" insert "or a clinical trainee, as defined in Minnesota Rules,
1.27 part 9505.0371, subpart 5, item C"

2.1 Page 5, delete section 7

2.2 Page 7, delete section 8 and insert:

2.3 "Sec. 8. Minnesota Statutes 2012, section 256B.0625, is amended by adding a
2.4 subdivision to read:

2.5 Subd. 63. **Mental health service plan development.** Effective July 1, 2013,
2.6 and subject to federal approval, medical assistance covers mental health service plan
2.7 development for a person up to age 21 with a diagnosed mental illness, when performed or
2.8 supervised by a licensed mental health professional, as defined in Minnesota Rules, part
2.9 9505.0371, subpart 5, item A, or a clinical trainee, as defined in Minnesota Rules, part
2.10 9505.0371, subpart 5, item C. "Mental health service development" includes:

2.11 (1) development, review, and revision of a child's individual treatment plan, as
2.12 provided in Minnesota Rules, part 9505.0371, subpart 7, including involvement of the
2.13 client or client's parents, primary caregiver, or other person authorized to consent to
2.14 mental health services for the client, and including arrangement of treatment and support
2.15 activities specified in the individual treatment plan; and

2.16 (2) administering standardized outcome measurement instruments, determined
2.17 and updated by the commissioner, as periodically needed to evaluate the effectiveness
2.18 of treatment for children receiving clinical services and reporting outcome measures, as
2.19 required by the commissioner."

2.20 Page 8 line 19, after "pediatric" insert "home health care"

2.21 Renumber the sections in sequence and correct the internal references

2.22 Amend the title accordingly