

1.1 moves to amend H.F. No. 2294, the delete everything amendment
1.2 (H2294DE2), as follows:

1.3 Page 24, delete section 2 and insert:

1.4 "Sec. 2. Minnesota Statutes 2011 Supplement, section 245A.03, subdivision 7, is
1.5 amended to read:

1.6 Subd. 7. **Licensing moratorium.** (a) The commissioner shall not issue an
1.7 initial license for child foster care licensed under Minnesota Rules, parts 2960.3000 to
1.8 2960.3340, or adult foster care licensed under Minnesota Rules, parts 9555.5105 to
1.9 9555.6265, under this chapter for a physical location that will not be the primary residence
1.10 of the license holder for the entire period of licensure. If a license is issued during this
1.11 moratorium, and the license holder changes the license holder's primary residence away
1.12 from the physical location of the foster care license, the commissioner shall revoke the
1.13 license according to section 245A.07. Exceptions to the moratorium include:

1.14 (1) foster care settings that are required to be registered under chapter 144D;

1.15 (2) foster care licenses replacing foster care licenses in existence on May 15, 2009,
1.16 and determined to be needed by the commissioner under paragraph (b);

1.17 (3) new foster care licenses determined to be needed by the commissioner under
1.18 paragraph (b) for the closure of a nursing facility, ICF/MR, or regional treatment center, or
1.19 restructuring of state-operated services that limits the capacity of state-operated facilities;

1.20 (4) new foster care licenses determined to be needed by the commissioner under
1.21 paragraph (b) for persons requiring hospital level care; or

1.22 (5) new foster care licenses determined to be needed by the commissioner for the
1.23 transition of people from personal care assistance to the home and community-based
1.24 services.

1.25 (b) The commissioner shall determine the need for newly licensed foster care homes
1.26 as defined under this subdivision. As part of the determination, the commissioner shall
1.27 consider the availability of foster care capacity in the area in which the licensee seeks to

2.1 operate, and the recommendation of the local county board. The determination by the
2.2 commissioner must be final. A determination of need is not required for a change in
2.3 ownership at the same address.

2.4 (c) Residential settings that would otherwise be subject to the moratorium established
2.5 in paragraph (a), that are in the process of receiving an adult or child foster care license as
2.6 of July 1, 2009, shall be allowed to continue to complete the process of receiving an adult
2.7 or child foster care license. For this paragraph, all of the following conditions must be met
2.8 to be considered in the process of receiving an adult or child foster care license:

2.9 (1) participants have made decisions to move into the residential setting, including
2.10 documentation in each participant's care plan;

2.11 (2) the provider has purchased housing or has made a financial investment in the
2.12 property;

2.13 (3) the lead agency has approved the plans, including costs for the residential setting
2.14 for each individual;

2.15 (4) the completion of the licensing process, including all necessary inspections, is
2.16 the only remaining component prior to being able to provide services; and

2.17 (5) the needs of the individuals cannot be met within the existing capacity in that
2.18 county.

2.19 To qualify for the process under this paragraph, the lead agency must submit
2.20 documentation to the commissioner by August 1, 2009, that all of the above criteria are
2.21 met.

2.22 (d) The commissioner shall study the effects of the license moratorium under this
2.23 subdivision and shall report back to the legislature by January 15, 2011. This study shall
2.24 include, but is not limited to the following:

2.25 (1) the overall capacity and utilization of foster care beds where the physical location
2.26 is not the primary residence of the license holder prior to and after implementation
2.27 of the moratorium;

2.28 (2) the overall capacity and utilization of foster care beds where the physical
2.29 location is the primary residence of the license holder prior to and after implementation
2.30 of the moratorium; and

2.31 (3) the number of licensed and occupied ICF/MR beds prior to and after
2.32 implementation of the moratorium.

2.33 (e) When a foster care recipient moves out of a foster home that is not the primary
2.34 residence of the license holder according to section 256B.49, subdivision 15, paragraph
2.35 (f), the county shall immediately inform the Department of Human Services Licensing
2.36 Division, and the department shall immediately decrease the statewide licensed capacity

3.1 for the home foster care settings where the physical location is not the primary residence
3.2 of the license holder. A decreased licensed capacity according to this paragraph is not
3.3 subject to appeal under this chapter. A needs determination process, managed at the state
3.4 level, with county input, will determine where the reduced capacity will occur.

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

3.6 Page 45, delete section 15 and insert:

3.7 "Sec. ... Minnesota Statutes 2011 Supplement, section 256B.49, subdivision 15,
3.8 is amended to read:

3.9 Subd. 15. **Individualized service plan; comprehensive transitional service plan;**
3.10 **maintenance service plan.** (a) Each recipient of home and community-based waived
3.11 services shall be provided a copy of the written service plan which:

3.12 (1) is developed and signed by the recipient within ten working days of the
3.13 completion of the assessment;

3.14 (2) meets the assessed needs of the recipient;

3.15 (3) reasonably ensures the health and safety of the recipient;

3.16 (4) promotes independence;

3.17 (5) allows for services to be provided in the most integrated settings; and

3.18 (6) provides for an informed choice, as defined in section 256B.77, subdivision 2,
3.19 paragraph (p), of service and support providers.

3.20 (b) In developing the comprehensive transitional service plan, the individual
3.21 receiving services, the case manager, and the guardian, if applicable, will identify
3.22 the transitional service plan fundamental service outcome and anticipated timeline to
3.23 achieve this outcome. Within the first 20 days following a recipient's request for an
3.24 assessment or reassessment, the transitional service planning team must be identified. A
3.25 team leader must be identified who will be responsible for assigning responsibility and
3.26 communicating with team members to ensure implementation of the transition plan and
3.27 ongoing assessment and communication process. The team leader should be an individual,
3.28 such as the case manager or guardian, who has the opportunity to follow the recipient to
3.29 the next level of service.

3.30 Within ten days following an assessment, a comprehensive transitional service plan
3.31 must be developed incorporating elements of a comprehensive functional assessment and
3.32 including short-term measurable outcomes and timelines for achievement of and reporting
3.33 on these outcomes. Functional milestones must also be identified and reported according
3.34 to the timelines agreed upon by the transitional service planning team. In addition, the
3.35 comprehensive transitional service plan must identify additional supports that may assist

4.1 in the achievement of the fundamental service outcome such as the development of greater
4.2 natural community support, increased collaboration among agencies, and technological
4.3 supports.

4.4 The timelines for reporting on functional milestones will prompt a reassessment of
4.5 services provided, the units of services, rates, and appropriate service providers. It is
4.6 the responsibility of the transitional service planning team leader to review functional
4.7 milestone reporting to determine if the milestones are consistent with observable skills
4.8 and that milestone achievement prompts any needed changes to the comprehensive
4.9 transitional service plan.

4.10 For those whose fundamental transitional service outcome involves the need to
4.11 procure housing, a plan for the recipient to seek the resources necessary to secure the least
4.12 restrictive housing possible should be incorporated into the plan, including employment
4.13 and public supports such as housing access and shelter needy funding.

4.14 (c) Counties and other agencies responsible for funding community placement and
4.15 ongoing community supportive services are responsible for the implementation of the
4.16 comprehensive transitional service plans. Oversight responsibilities include both ensuring
4.17 effective transitional service delivery and efficient utilization of funding resources.

4.18 (d) Following one year of transitional services, the transitional services planning
4.19 team will make a determination as to whether or not the individual receiving services
4.20 requires the current level of continuous and consistent support in order to maintain the
4.21 recipient's current level of functioning. Recipients who are determined to have not had
4.22 a significant change in functioning for 12 months must move from a transitional to a
4.23 maintenance service plan. Recipients on a maintenance service plan must be reassessed
4.24 to determine if the recipient would benefit from a transitional service plan at least every
4.25 12 months and at other times when there has been a significant change in the recipient's
4.26 functioning. This assessment should consider any changes to technological or natural
4.27 community supports.

4.28 (e) When a county is evaluating denials, reductions, or terminations of home and
4.29 community-based services under section 256B.49 for an individual, the case manager
4.30 shall offer to meet with the individual or the individual's guardian in order to discuss the
4.31 prioritization of service needs within the individualized service plan, comprehensive
4.32 transitional service plan, or maintenance service plan. The reduction in the authorized
4.33 services for an individual due to changes in funding for waived services may not exceed
4.34 the amount needed to ensure medically necessary services to meet the individual's health,
4.35 safety, and welfare.

5.1 (f) At the time of reassessment, local agency case managers shall assess each
5.2 recipient of community alternatives for disabled individuals or traumatic brain injury
5.3 waived services currently residing in a licensed adult foster home that is not the primary
5.4 residence of the license holder, or in which the license holder is not the primary caregiver,
5.5 to determine if that recipient could appropriately be served in a community-living setting.
5.6 If appropriate for the recipient, the case manager shall offer the recipient, through a
5.7 person-centered planning process, the option to receive alternative housing and service
5.8 options. In the event that the recipient chooses to transfer from the adult foster home,
5.9 the vacated bed shall not be filled with another recipient of waiver services and group
5.10 residential housing, unless provided under section 245A.03, subdivision 7, paragraph (a),
5.11 clauses (3) and (4), and the statewide licensed capacity shall be reduced accordingly. If
5.12 the adult foster home becomes no longer viable due to these transfers, the county agency,
5.13 with the assistance of the department, shall facilitate a consolidation of settings or closure.
5.14 This reassessment process shall be completed by June 30, ~~2012~~ 2013. The results of the
5.15 assessments will be used in the statewide needs determination process. Implementation of
5.16 the statewide licensed capacity reduction will begin on July 1, 2013.

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

5.18 Renumber the sections in sequence and correct the internal references

5.19 Amend the title accordingly