

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

1.3 Page 34, after line 13, insert:

1.4 "Sec. ... Minnesota Statutes 2011 Supplement, section 256B.0659, subdivision 11,
1.5 is amended to read:

1.6 Subd. 11. **Personal care assistant; requirements.** (a) A personal care assistant
1.7 must meet the following requirements:

1.8 (1) be at least 18 years of age with the exception of persons who are 16 or 17 years
1.9 of age with these additional requirements:

1.10 (i) supervision by a qualified professional every 60 days; and

1.11 (ii) employment by only one personal care assistance provider agency responsible
1.12 for compliance with current labor laws;

1.13 (2) be employed by a personal care assistance provider agency;

1.14 (3) enroll with the department as a personal care assistant after clearing a background
1.15 study. Except as provided in subdivision 11a, before a personal care assistant provides
1.16 services, the personal care assistance provider agency must initiate a background study on
1.17 the personal care assistant under chapter 245C, and the personal care assistance provider
1.18 agency must have received a notice from the commissioner that the personal care assistant
1.19 is:

1.20 (i) not disqualified under section 245C.14; or

1.21 (ii) is disqualified, but the personal care assistant has received a set aside of the
1.22 disqualification under section 245C.22;

1.23 (4) be able to effectively communicate with the recipient and personal care
1.24 assistance provider agency;

1.25 (5) be able to provide covered personal care assistance services according to the
1.26 recipient's personal care assistance care plan, respond appropriately to recipient needs,

2.1 and report changes in the recipient's condition to the supervising qualified professional
2.2 or physician;

2.3 (6) not be a consumer of personal care assistance services;

2.4 (7) maintain daily written records including, but not limited to, time sheets under
2.5 subdivision 12;

2.6 (8) effective January 1, 2010, complete standardized training as determined
2.7 by the commissioner before completing enrollment. The training must be available
2.8 in languages other than English and to those who need accommodations due to
2.9 disabilities. Personal care assistant training must include successful completion of the
2.10 following training components: basic first aid, vulnerable adult, child maltreatment,
2.11 OSHA universal precautions, basic roles and responsibilities of personal care assistants
2.12 including information about assistance with lifting and transfers for recipients, emergency
2.13 preparedness, orientation to positive behavioral practices, fraud issues, and completion of
2.14 time sheets. Upon completion of the training components, the personal care assistant must
2.15 demonstrate the competency to provide assistance to recipients;

2.16 (9) complete training and orientation on the needs of the recipient within the first
2.17 seven days after the services begin; and

2.18 (10) be limited to providing and being paid for up to 275 hours per month, except
2.19 that this limit shall be 275 hours per month for the period July 1, 2009, through June 30,
2.20 2011, of personal care assistance services regardless of the number of recipients being
2.21 served or the number of personal care assistance provider agencies enrolled with. The
2.22 number of hours worked per day shall not be disallowed by the department unless in
2.23 violation of the law.

2.24 (b) A legal guardian may be a personal care assistant if the guardian is not being paid
2.25 for the guardian services and meets the criteria for personal care assistants in paragraph (a).

2.26 (c) Persons who do not qualify as a personal care assistant include parents and
2.27 stepparents of minors, spouses, paid legal guardians, family foster care providers, except
2.28 as otherwise allowed in section 256B.0625, subdivision 19a, or staff of a residential
2.29 setting. ~~When the personal care assistant is a relative of the recipient, the commissioner
2.30 shall pay 80 percent of the provider rate. For purposes of this section, relative means the
2.31 parent or adoptive parent of an adult child, a sibling aged 16 years or older, an adult child,
2.32 a grandparent, or a grandchild.~~

2.33 **EFFECTIVE DATE.** This section is effective July 1, 2012.

2.34 Sec. ... Minnesota Statutes 2011 Supplement, section 256B.0659, subdivision 28,
2.35 is amended to read:

3.1 Subd. 28. **Personal care assistance provider agency; required documentation.**

3.2 (a) Required documentation must be completed and kept in the personal care assistance
3.3 provider agency file or the recipient's home residence. The required documentation
3.4 consists of:

3.5 (1) employee files, including:

3.6 (i) applications for employment;

3.7 (ii) background study requests and results;

3.8 (iii) orientation records about the agency policies;

3.9 (iv) trainings completed with demonstration of competence;

3.10 (v) supervisory visits;

3.11 (vi) evaluations of employment; and

3.12 (vii) signature on fraud statement;

3.13 (2) recipient files, including:

3.14 (i) demographics;

3.15 (ii) emergency contact information and emergency backup plan;

3.16 (iii) personal care assistance service plan;

3.17 (iv) personal care assistance care plan;

3.18 (v) month-to-month service use plan;

3.19 (vi) all communication records;

3.20 (vii) start of service information, including the written agreement with recipient; and

3.21 (viii) date the home care bill of rights was given to the recipient;

3.22 (3) agency policy manual, including:

3.23 (i) policies for employment and termination;

3.24 (ii) grievance policies with resolution of consumer grievances;

3.25 (iii) staff and consumer safety;

3.26 (iv) staff misconduct; and

3.27 (v) staff hiring, service delivery, staff and consumer safety, staff misconduct, and
3.28 resolution of consumer grievances;

3.29 (4) time sheets for each personal care assistant along with completed activity sheets
3.30 for each recipient served; and

3.31 (5) agency marketing and advertising materials and documentation of marketing
3.32 activities and costs; ~~and~~

3.33 ~~(6) for each personal care assistant, whether or not the personal care assistant is~~
3.34 ~~providing care to a relative as defined in subdivision 11.~~

3.35 (b) The commissioner may assess a fine of up to \$500 on provider agencies that do
3.36 not consistently comply with the requirements of this subdivision.

4.1 **EFFECTIVE DATE.** This section is effective July 1, 2012."

4.2 Page 50, after line 11, insert:

4.3 "Sec. Laws 2011, First Special Session chapter 9, article 10, section 3, subdivision
4.4 3, is amended to read:

4.5 **Subd. 3. Forecasted Programs**

4.6 The amounts that may be spent from this
4.7 appropriation for each purpose are as follows:

4.8 **(a) MFIP/DWP Grants**

4.9	Appropriations by Fund		
4.10	General	84,680,000	91,978,000
4.11	Federal TANF	84,425,000	75,417,000

4.12	(b) MFIP Child Care Assistance Grants	55,456,000	30,923,000
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4.13	(c) General Assistance Grants	49,192,000	46,938,000
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4.14 **General Assistance Standard.** The
4.15 commissioner shall set the monthly standard
4.16 of assistance for general assistance units
4.17 consisting of an adult recipient who is
4.18 childless and unmarried or living apart
4.19 from parents or a legal guardian at \$203.

4.20 The commissioner may reduce this amount
4.21 according to Laws 1997, chapter 85, article
4.22 3, section 54.

4.23 **Emergency General Assistance.** The
4.24 amount appropriated for emergency general
4.25 assistance funds is limited to no more
4.26 than \$6,689,812 in fiscal year 2012 and
4.27 \$6,729,812 in fiscal year 2013. Funds
4.28 to counties shall be allocated by the
4.29 commissioner using the allocation method
4.30 specified in Minnesota Statutes, section
4.31 256D.06.

4.32	(d) Minnesota Supplemental Aid Grants	38,095,000	39,120,000
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4.33	(e) Group Residential Housing Grants	121,080,000	129,238,000
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5.1	(f) MinnesotaCare Grants	295,046,000	317,272,000
5.2	This appropriation is from the health care		
5.3	access fund.		
5.4	(g) Medical Assistance Grants	4,501,582,000	4,437,282,000
5.5	Managed Care Incentive Payments. The		
5.6	commissioner shall not make managed care		
5.7	incentive payments for expanding preventive		
5.8	services during fiscal years beginning July 1,		
5.9	2011, and July 1, 2012.		
5.10	Reduction of Rates for Congregate		
5.11	Living for Individuals with Lower Needs.		
5.12	Beginning October 1, 2011, lead agencies		
5.13	must reduce rates in effect on January 1,		
5.14	2011, by ten <u>up to five</u> percent for individuals		
5.15	with lower needs living in foster care settings		
5.16	where the license holder does not share		
5.17	the residence with recipients on the CADI		
5.18	and DD waivers and customized living		
5.19	settings for CADI. Lead agencies must adjust		
5.20	contracts within 60 days of the effective date.		
5.21	Reduction of Lead Agency Waiver		
5.22	Allocations to Implement Rate Reductions		
5.23	for Congregate Living for Individuals		
5.24	with Lower Needs. Beginning October 1,		
5.25	2011, the commissioner shall reduce lead		
5.26	agency waiver allocations to implement the		
5.27	reduction of rates for individuals with lower		
5.28	needs living in foster care settings where the		
5.29	license holder does not share the residence		
5.30	with recipients on the CADI and DD waivers		
5.31	and customized living settings for CADI.		
5.32	Reduce customized living and 24-hour		
5.33	customized living component rates.		
5.34	Effective July 1, 2011, the commissioner		

6.1 shall reduce elderly waiver customized living
6.2 and 24-hour customized living component
6.3 service spending by five percent through
6.4 reductions in component rates and service
6.5 rate limits. The commissioner shall adjust
6.6 the elderly waiver capitation payment
6.7 rates for managed care organizations paid
6.8 under Minnesota Statutes, section 256B.69,
6.9 subdivisions 6a and 23, to reflect reductions
6.10 in component spending for customized living
6.11 services and 24-hour customized living
6.12 services under Minnesota Statutes, section
6.13 256B.0915, subdivisions 3e and 3h, for the
6.14 contract period beginning January 1, 2012.
6.15 To implement the reduction specified in
6.16 this provision, capitation rates paid by the
6.17 commissioner to managed care organizations
6.18 under Minnesota Statutes, section 256B.69,
6.19 shall reflect a ten percent reduction for the
6.20 specified services for the period January 1,
6.21 2012, to June 30, 2012, and a five percent
6.22 reduction for those services on or after July
6.23 1, 2012.

6.24 **Limit Growth in the Developmental**
6.25 **Disability Waiver.** The commissioner
6.26 shall limit growth in the developmental
6.27 disability waiver to six diversion allocations
6.28 per month beginning July 1, 2011, through
6.29 June 30, 2013, and 15 diversion allocations
6.30 per month beginning July 1, 2013, through
6.31 June 30, 2015. Waiver allocations shall
6.32 be targeted to individuals who meet the
6.33 priorities for accessing waiver services
6.34 identified in Minnesota Statutes, 256B.092,
6.35 subdivision 12. The limits do not include
6.36 conversions from intermediate care facilities

7.1 for persons with developmental disabilities.
 7.2 Notwithstanding any contrary provisions in
 7.3 this article, this paragraph expires June 30,
 7.4 2015.

7.5 **Limit Growth in the Community**

7.6 **Alternatives for Disabled Individuals**

7.7 **Waiver.** The commissioner shall limit
 7.8 growth in the community alternatives for
 7.9 disabled individuals waiver to 60 allocations
 7.10 per month beginning July 1, 2011, through
 7.11 June 30, 2013, and 85 allocations per
 7.12 month beginning July 1, 2013, through
 7.13 June 30, 2015. Waiver allocations must
 7.14 be targeted to individuals who meet the
 7.15 priorities for accessing waiver services
 7.16 identified in Minnesota Statutes, section
 7.17 256B.49, subdivision 11a. The limits include
 7.18 conversions and diversions, unless the
 7.19 commissioner has approved a plan to convert
 7.20 funding due to the closure or downsizing
 7.21 of a residential facility or nursing facility
 7.22 to serve directly affected individuals on
 7.23 the community alternatives for disabled
 7.24 individuals waiver. Notwithstanding any
 7.25 contrary provisions in this article, this
 7.26 paragraph expires June 30, 2015.

7.27 ~~**Personal Care Assistance Relative**~~

7.28 ~~**Care.** The commissioner shall adjust the~~
 7.29 ~~capitation payment rates for managed care~~
 7.30 ~~organizations paid under Minnesota Statutes,~~
 7.31 ~~section 256B.69, to reflect the rate reductions~~
 7.32 ~~for personal care assistance provided by~~
 7.33 ~~a relative pursuant to Minnesota Statutes,~~
 7.34 ~~section 256B.0659, subdivision 11.~~

7.35 (h) **Alternative Care Grants** 46,421,000 46,035,000

8.1 **Alternative Care Transfer.** Any money
8.2 allocated to the alternative care program that
8.3 is not spent for the purposes indicated does
8.4 not cancel but shall be transferred to the
8.5 medical assistance account.

8.6	(i) Chemical Dependency Entitlement Grants	94,675,000	93,298,000
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8.7 **EFFECTIVE DATE.** This section is effective July 1, 2012."

8.8 Renumber the sections in sequence and correct the internal references

8.9 Amend the title accordingly