

187.6

ARTICLE 7

187.7 **ASSERTIVE COMMUNITY TREATMENT AND INTENSIVE RESIDENTIAL**
187.8 **TREATMENT SERVICES RECODIFICATION CONFORMING CHANGES**

187.9 Section 1. Minnesota Statutes 2024, section 148F.11, subdivision 1, is amended to read:

187.10 Subdivision 1. **Other professionals.** (a) Nothing in this chapter prevents members of
187.11 other professions or occupations from performing functions for which they are qualified or
187.12 licensed. This exception includes, but is not limited to: licensed physicians; registered nurses;
187.13 licensed practical nurses; licensed psychologists and licensed psychological practitioners;
187.14 members of the clergy provided such services are provided within the scope of regular
187.15 ministries; American Indian medicine men and women; licensed attorneys; probation officers;
187.16 licensed marriage and family therapists; licensed social workers; social workers employed
187.17 by city, county, or state agencies; licensed professional counselors; licensed professional
187.18 clinical counselors; licensed school counselors; registered occupational therapists or
187.19 occupational therapy assistants; Upper Midwest Indian Council on Addictive Disorders
187.20 (UMICAD) certified counselors when providing services to Native American people; city,
187.21 county, or state employees when providing assessments or case management under Minnesota
187.22 Rules, chapter 9530; and staff persons providing co-occurring substance use disorder
187.23 treatment in adult mental health rehabilitative programs certified or licensed by the
187.24 Department of Human Services under section 245I.23, 256B.0622, ~~or~~ 256B.0623, or
187.25 256B.0632.

187.26 (b) Nothing in this chapter prohibits technicians and resident managers in programs
187.27 licensed by the Department of Human Services from discharging their duties as provided
187.28 in Minnesota Rules, chapter 9530.

187.29 (c) Any person who is exempt from licensure under this section must not use a title
187.30 incorporating the words "alcohol and drug counselor" or "licensed alcohol and drug
187.31 counselor" or otherwise hold himself or herself out to the public by any title or description
187.32 stating or implying that he or she is engaged in the practice of alcohol and drug counseling,
187.33 or that he or she is licensed to engage in the practice of alcohol and drug counseling, unless
188.1 that person is also licensed as an alcohol and drug counselor. Persons engaged in the practice
188.2 of alcohol and drug counseling are not exempt from the board's jurisdiction solely by the
188.3 use of one of the titles in paragraph (a).

188.4 Sec. 2. Minnesota Statutes 2024, section 245.4662, subdivision 1, is amended to read:

188.5 Subdivision 1. **Definitions.** (a) For purposes of this section, the following terms have
188.6 the meanings given them.

188.7 (b) "Community partnership" means a project involving the collaboration of two or more
188.8 eligible applicants.

397.15

ARTICLE 12

397.16 **ASSERTIVE COMMUNITY TREATMENT AND INTENSIVE RESIDENTIAL**
397.17 **TREATMENT SERVICES RECODIFICATION CONFORMING CHANGES**

397.18 Section 1. Minnesota Statutes 2024, section 148F.11, subdivision 1, is amended to read:

397.19 Subdivision 1. **Other professionals.** (a) Nothing in this chapter prevents members of
397.20 other professions or occupations from performing functions for which they are qualified or
397.21 licensed. This exception includes, but is not limited to: licensed physicians; registered nurses;
397.22 licensed practical nurses; licensed psychologists and licensed psychological practitioners;
397.23 members of the clergy provided such services are provided within the scope of regular
397.24 ministries; American Indian medicine men and women; licensed attorneys; probation officers;
397.25 licensed marriage and family therapists; licensed social workers; social workers employed
397.26 by city, county, or state agencies; licensed professional counselors; licensed professional
397.27 clinical counselors; licensed school counselors; registered occupational therapists or
397.28 occupational therapy assistants; Upper Midwest Indian Council on Addictive Disorders
397.29 (UMICAD) certified counselors when providing services to Native American people; city,
397.30 county, or state employees when providing assessments or case management under Minnesota
397.31 Rules, chapter 9530; and staff persons providing co-occurring substance use disorder
397.32 treatment in adult mental health rehabilitative programs certified or licensed by the
398.1 Department of Human Services under section 245I.23, 256B.0622, ~~or~~ 256B.0623, or
398.2 256B.0632.

398.3 (b) Nothing in this chapter prohibits technicians and resident managers in programs
398.4 licensed by the Department of Human Services from discharging their duties as provided
398.5 in Minnesota Rules, chapter 9530.

398.6 (c) Any person who is exempt from licensure under this section must not use a title
398.7 incorporating the words "alcohol and drug counselor" or "licensed alcohol and drug
398.8 counselor" or otherwise hold himself or herself out to the public by any title or description
398.9 stating or implying that he or she is engaged in the practice of alcohol and drug counseling,
398.10 or that he or she is licensed to engage in the practice of alcohol and drug counseling, unless
398.11 that person is also licensed as an alcohol and drug counselor. Persons engaged in the practice
398.12 of alcohol and drug counseling are not exempt from the board's jurisdiction solely by the
398.13 use of one of the titles in paragraph (a).

398.14 Sec. 2. Minnesota Statutes 2024, section 245.4662, subdivision 1, is amended to read:

398.15 Subdivision 1. **Definitions.** (a) For purposes of this section, the following terms have
398.16 the meanings given them.

398.17 (b) "Community partnership" means a project involving the collaboration of two or more
398.18 eligible applicants.

188.9 (c) "Eligible applicant" means an eligible county, Indian tribe, mental health service
188.10 provider, hospital, or community partnership. Eligible applicant does not include a
188.11 state-operated direct care and treatment facility or program under chapters 246 and 246C.

188.12 (d) "Intensive residential treatment services" has the meaning given in section ~~256B.0622~~
188.13 256B.0632.

188.14 (e) "Metropolitan area" means the seven-county metropolitan area, as defined in section
188.15 473.121, subdivision 2.

188.16 Sec. 3. Minnesota Statutes 2024, section 245.4906, subdivision 2, is amended to read:

188.17 Subd. 2. **Eligible applicants.** An eligible applicant is a licensed entity or provider that
188.18 employs a mental health certified peer specialist qualified under section 245I.04, subdivision
188.19 10, and that provides services to individuals receiving assertive community treatment ~~or~~
188.20 ~~intensive residential treatment services~~ under section 256B.0622, intensive residential
188.21 treatment services under section 256B.0632, adult rehabilitative mental health services
188.22 under section 256B.0623, or crisis response services under section 256B.0624.

188.23 Sec. 4. Minnesota Statutes 2024, section 254B.04, subdivision 1a, is amended to read:

188.24 Subd. 1a. **Client eligibility.** (a) Persons eligible for benefits under Code of Federal
188.25 Regulations, title 25, part 20, who meet the income standards of section 256B.056,
188.26 subdivision 4, and are not enrolled in medical assistance, are entitled to behavioral health
188.27 fund services. State money appropriated for this paragraph must be placed in a separate
188.28 account established for this purpose.

188.29 (b) Persons with dependent children who are determined to be in need of substance use
188.30 disorder treatment pursuant to an assessment under section 260E.20, subdivision 1, or in
188.31 need of chemical dependency treatment pursuant to a case plan under section 260C.201,
189.1 subdivision 6, or 260C.212, shall be assisted by the local agency to access needed treatment
189.2 services. Treatment services must be appropriate for the individual or family, which may
189.3 include long-term care treatment or treatment in a facility that allows the dependent children
189.4 to stay in the treatment facility. The county shall pay for out-of-home placement costs, if
189.5 applicable.

189.6 (c) Notwithstanding paragraph (a), any person enrolled in medical assistance or
189.7 MinnesotaCare is eligible for room and board services under section 254B.05, subdivision
189.8 5, paragraph (b), clause (9).

189.9 (d) A client is eligible to have substance use disorder treatment paid for with funds from
189.10 the behavioral health fund when the client:

189.11 (1) is eligible for MFIP as determined under chapter 142G;

189.12 (2) is eligible for medical assistance as determined under Minnesota Rules, parts
189.13 9505.0010 to 9505.0150;

398.19 (c) "Eligible applicant" means an eligible county, Indian tribe, mental health service
398.20 provider, hospital, or community partnership. Eligible applicant does not include a
398.21 state-operated direct care and treatment facility or program under chapters 246 and 246C.

398.22 (d) "Intensive residential treatment services" has the meaning given in section ~~256B.0622~~
398.23 256B.0632.

398.24 (e) "Metropolitan area" means the seven-county metropolitan area, as defined in section
398.25 473.121, subdivision 2.

398.26 Sec. 3. Minnesota Statutes 2024, section 245.4906, subdivision 2, is amended to read:

398.27 Subd. 2. **Eligible applicants.** An eligible applicant is a licensed entity or provider that
398.28 employs a mental health certified peer specialist qualified under section 245I.04, subdivision
398.29 10, and that provides services to individuals receiving assertive community treatment ~~or~~
398.30 ~~intensive residential treatment services~~ under section 256B.0622, intensive residential
398.31 treatment services under section 256B.0632, adult rehabilitative mental health services
398.32 under section 256B.0623, or crisis response services under section 256B.0624.

399.1 Sec. 4. Minnesota Statutes 2024, section 254B.04, subdivision 1a, is amended to read:

399.2 Subd. 1a. **Client eligibility.** (a) Persons eligible for benefits under Code of Federal
399.3 Regulations, title 25, part 20, who meet the income standards of section 256B.056,
399.4 subdivision 4, and are not enrolled in medical assistance, are entitled to behavioral health
399.5 fund services. State money appropriated for this paragraph must be placed in a separate
399.6 account established for this purpose.

399.7 (b) Persons with dependent children who are determined to be in need of substance use
399.8 disorder treatment pursuant to an assessment under section 260E.20, subdivision 1, or in
399.9 need of chemical dependency treatment pursuant to a case plan under section 260C.201,
399.10 subdivision 6, or 260C.212, shall be assisted by the local agency to access needed treatment
399.11 services. Treatment services must be appropriate for the individual or family, which may
399.12 include long-term care treatment or treatment in a facility that allows the dependent children
399.13 to stay in the treatment facility. The county shall pay for out-of-home placement costs, if
399.14 applicable.

399.15 (c) Notwithstanding paragraph (a), any person enrolled in medical assistance or
399.16 MinnesotaCare is eligible for room and board services under section 254B.05, subdivision
399.17 5, paragraph (b), clause (9).

399.18 (d) A client is eligible to have substance use disorder treatment paid for with funds from
399.19 the behavioral health fund when the client:

399.20 (1) is eligible for MFIP as determined under chapter 142G;

399.21 (2) is eligible for medical assistance as determined under Minnesota Rules, parts
399.22 9505.0010 to 9505.0150;

189.14 (3) is eligible for general assistance, general assistance medical care, or work readiness
189.15 as determined under Minnesota Rules, parts 9500.1200 to 9500.1318; or

189.16 (4) has income that is within current household size and income guidelines for entitled
189.17 persons, as defined in this subdivision and subdivision 7.

189.18 (e) Clients who meet the financial eligibility requirement in paragraph (a) and who have
189.19 a third-party payment source are eligible for the behavioral health fund if the third-party
189.20 payment source pays less than 100 percent of the cost of treatment services for eligible
189.21 clients.

189.22 (f) A client is ineligible to have substance use disorder treatment services paid for with
189.23 behavioral health fund money if the client:

189.24 (1) has an income that exceeds current household size and income guidelines for entitled
189.25 persons as defined in this subdivision and subdivision 7; or

189.26 (2) has an available third-party payment source that will pay the total cost of the client's
189.27 treatment.

189.28 (g) A client who is disenrolled from a state prepaid health plan during a treatment episode
189.29 is eligible for continued treatment service that is paid for by the behavioral health fund until
189.30 the treatment episode is completed or the client is re-enrolled in a state prepaid health plan
189.31 if the client:

190.1 (1) continues to be enrolled in MinnesotaCare, medical assistance, or general assistance
190.2 medical care; or

190.3 (2) is eligible according to paragraphs (a) and (b) and is determined eligible by a local
190.4 agency under section 254B.04.

190.5 (h) When a county commits a client under chapter 253B to a regional treatment center
190.6 for substance use disorder services and the client is ineligible for the behavioral health fund,
190.7 the county is responsible for the payment to the regional treatment center according to
190.8 section 254B.05, subdivision 4.

190.9 (i) Persons enrolled in MinnesotaCare are eligible for room and board services when
190.10 provided through intensive residential treatment services and residential crisis services under
190.11 section ~~256B.0622~~ 256B.0632.

190.12 Sec. 5. Minnesota Statutes 2024, section 254B.05, subdivision 1a, is amended to read:

190.13 Subd. 1a. **Room and board provider requirements.** (a) Vendors of room and board
190.14 are eligible for behavioral health fund payment if the vendor:

190.15 (1) has rules prohibiting residents bringing chemicals into the facility or using chemicals
190.16 while residing in the facility and provide consequences for infractions of those rules;

190.17 (2) is determined to meet applicable health and safety requirements;

399.23 (3) is eligible for general assistance, general assistance medical care, or work readiness
399.24 as determined under Minnesota Rules, parts 9500.1200 to 9500.1318; or

399.25 (4) has income that is within current household size and income guidelines for entitled
399.26 persons, as defined in this subdivision and subdivision 7.

399.27 (e) Clients who meet the financial eligibility requirement in paragraph (a) and who have
399.28 a third-party payment source are eligible for the behavioral health fund if the third-party
399.29 payment source pays less than 100 percent of the cost of treatment services for eligible
399.30 clients.

399.31 (f) A client is ineligible to have substance use disorder treatment services paid for with
399.32 behavioral health fund money if the client:

400.1 (1) has an income that exceeds current household size and income guidelines for entitled
400.2 persons as defined in this subdivision and subdivision 7; or

400.3 (2) has an available third-party payment source that will pay the total cost of the client's
400.4 treatment.

400.5 (g) A client who is disenrolled from a state prepaid health plan during a treatment episode
400.6 is eligible for continued treatment service that is paid for by the behavioral health fund until
400.7 the treatment episode is completed or the client is re-enrolled in a state prepaid health plan
400.8 if the client:

400.9 (1) continues to be enrolled in MinnesotaCare, medical assistance, or general assistance
400.10 medical care; or

400.11 (2) is eligible according to paragraphs (a) and (b) and is determined eligible by a local
400.12 agency under section 254B.04.

400.13 (h) When a county commits a client under chapter 253B to a regional treatment center
400.14 for substance use disorder services and the client is ineligible for the behavioral health fund,
400.15 the county is responsible for the payment to the regional treatment center according to
400.16 section 254B.05, subdivision 4.

400.17 (i) Persons enrolled in MinnesotaCare are eligible for room and board services when
400.18 provided through intensive residential treatment services and residential crisis services under
400.19 section ~~256B.0622~~ 256B.0632.

400.20 Sec. 5. Minnesota Statutes 2024, section 254B.05, subdivision 1a, is amended to read:

400.21 Subd. 1a. **Room and board provider requirements.** (a) Vendors of room and board
400.22 are eligible for behavioral health fund payment if the vendor:

400.23 (1) has rules prohibiting residents bringing chemicals into the facility or using chemicals
400.24 while residing in the facility and provide consequences for infractions of those rules;

400.25 (2) is determined to meet applicable health and safety requirements;

190.18 (3) is not a jail or prison;
190.19 (4) is not concurrently receiving funds under chapter 256I for the recipient;
190.20 (5) admits individuals who are 18 years of age or older;
190.21 (6) is registered as a board and lodging or lodging establishment according to section
190.22 157.17;
190.23 (7) has awake staff on site whenever a client is present;
190.24 (8) has staff who are at least 18 years of age and meet the requirements of section
190.25 245G.11, subdivision 1, paragraph (b);
190.26 (9) has emergency behavioral procedures that meet the requirements of section 245G.16;
190.27 (10) meets the requirements of section 245G.08, subdivision 5, if administering
190.28 medications to clients;
190.29 (11) meets the abuse prevention requirements of section 245A.65, including a policy on
190.30 fraternization and the mandatory reporting requirements of section 626.557;
191.1 (12) documents coordination with the treatment provider to ensure compliance with
191.2 section 254B.03, subdivision 2;
191.3 (13) protects client funds and ensures freedom from exploitation by meeting the
191.4 provisions of section 245A.04, subdivision 13;
191.5 (14) has a grievance procedure that meets the requirements of section 245G.15,
191.6 subdivision 2; and
191.7 (15) has sleeping and bathroom facilities for men and women separated by a door that
191.8 is locked, has an alarm, or is supervised by awake staff.
191.9 (b) Programs licensed according to Minnesota Rules, chapter 2960, are exempt from
191.10 paragraph (a), clauses (5) to (15).
191.11 (c) Programs providing children's mental health crisis admissions and stabilization under
191.12 section 245.4882, subdivision 6, are eligible vendors of room and board.
191.13 (d) Programs providing children's residential services under section 245.4882, except
191.14 services for individuals who have a placement under chapter 260C or 260D, are eligible
191.15 vendors of room and board.
191.16 (e) Licensed programs providing intensive residential treatment services or residential
191.17 crisis stabilization services pursuant to section ~~256B.0622~~ or 256B.0624 or 256B.0632 are
191.18 eligible vendors of room and board and are exempt from paragraph (a), clauses (6) to (15).
191.19 (f) A vendor that is not licensed as a residential treatment program must have a policy
191.20 to address staffing coverage when a client may unexpectedly need to be present at the room
191.21 and board site.

400.26 (3) is not a jail or prison;
400.27 (4) is not concurrently receiving funds under chapter 256I for the recipient;
400.28 (5) admits individuals who are 18 years of age or older;
400.29 (6) is registered as a board and lodging or lodging establishment according to section
400.30 157.17;
400.31 (7) has awake staff on site whenever a client is present;
401.1 (8) has staff who are at least 18 years of age and meet the requirements of section
401.2 245G.11, subdivision 1, paragraph (b);
401.3 (9) has emergency behavioral procedures that meet the requirements of section 245G.16;
401.4 (10) meets the requirements of section 245G.08, subdivision 5, if administering
401.5 medications to clients;
401.6 (11) meets the abuse prevention requirements of section 245A.65, including a policy on
401.7 fraternization and the mandatory reporting requirements of section 626.557;
401.8 (12) documents coordination with the treatment provider to ensure compliance with
401.9 section 254B.03, subdivision 2;
401.10 (13) protects client funds and ensures freedom from exploitation by meeting the
401.11 provisions of section 245A.04, subdivision 13;
401.12 (14) has a grievance procedure that meets the requirements of section 245G.15,
401.13 subdivision 2; and
401.14 (15) has sleeping and bathroom facilities for men and women separated by a door that
401.15 is locked, has an alarm, or is supervised by awake staff.
401.16 (b) Programs licensed according to Minnesota Rules, chapter 2960, are exempt from
401.17 paragraph (a), clauses (5) to (15).
401.18 (c) Programs providing children's mental health crisis admissions and stabilization under
401.19 section 245.4882, subdivision 6, are eligible vendors of room and board.
401.20 (d) Programs providing children's residential services under section 245.4882, except
401.21 services for individuals who have a placement under chapter 260C or 260D, are eligible
401.22 vendors of room and board.
401.23 (e) Licensed programs providing intensive residential treatment services or residential
401.24 crisis stabilization services pursuant to section ~~256B.0622~~ or 256B.0624 or 256B.0632 are
401.25 eligible vendors of room and board and are exempt from paragraph (a), clauses (6) to (15).
401.26 (f) A vendor that is not licensed as a residential treatment program must have a policy
401.27 to address staffing coverage when a client may unexpectedly need to be present at the room
401.28 and board site.

191.22 Sec. 6. Minnesota Statutes 2024, section 256.478, subdivision 2, is amended to read:

191.23 Subd. 2. **Eligibility.** An individual is eligible for the transition to community initiative

191.24 if the individual can demonstrate that current services are not capable of meeting individual

191.25 treatment and service needs that can be met in the community with support, and the individual

191.26 meets at least one of the following criteria:

191.27 (1) the person meets the criteria under section 256B.092, subdivision 13, or 256B.49,

191.28 subdivision 24;

191.29 (2) the person has met treatment objectives and no longer requires a hospital-level care,

191.30 residential-level care, or a secure treatment setting, but the person's discharge from the

191.31 Anoka Metro Regional Treatment Center, the Minnesota Forensic Mental Health Program,

191.32 the Child and Adolescent Behavioral Health Hospital program, a psychiatric residential

192.1 treatment facility under section 256B.0941, intensive residential treatment services under

192.2 section ~~256B.0622~~ 256B.0632, children's residential services under section 245.4882,

192.3 juvenile detention facility, county supervised building, or a hospital would be substantially

192.4 delayed without additional resources available through the transitions to community initiative;

192.5 (3) the person (i) is receiving customized living services reimbursed under section

192.6 256B.4914, 24-hour customized living services reimbursed under section 256B.4914, or

192.7 community residential services reimbursed under section 256B.4914; (ii) expresses a desire

192.8 to move; and (iii) has received approval from the commissioner; or

192.9 (4) the person can demonstrate that the person's needs are beyond the scope of current

192.10 service designs and grant funding can support the inclusion of additional supports for the

192.11 person to access appropriate treatment and services in the least restrictive environment.

192.12 Sec. 7. Minnesota Statutes 2024, section 256B.0615, subdivision 1, is amended to read:

192.13 Subdivision 1. **Scope.** Medical assistance covers mental health certified peer specialist

192.14 services, as established in subdivision 2, if provided to recipients who are eligible for services

192.15 under sections 256B.0622, 256B.0623, ~~and~~ 256B.0624, ~~and~~ 256B.0632 and are provided

192.16 by a mental health certified peer specialist who has completed the training under subdivision

192.17 5 and is qualified according to section 245I.04, subdivision 10.

192.18 Sec. 8. Minnesota Statutes 2024, section 256B.0615, subdivision 3, is amended to read:

192.19 Subd. 3. **Eligibility.** Peer support services may be made available to consumers of (1)

192.20 intensive residential treatment services under section ~~256B.0622~~ 256B.0632; (2) adult

192.21 rehabilitative mental health services under section 256B.0623; and (3) crisis stabilization

192.22 and mental health mobile crisis intervention services under section 256B.0624.

401.29 Sec. 6. Minnesota Statutes 2024, section 256.478, subdivision 2, is amended to read:

401.30 Subd. 2. **Eligibility.** An individual is eligible for the transition to community initiative

401.31 if the individual can demonstrate that current services are not capable of meeting individual

402.1 treatment and service needs that can be met in the community with support, and the individual

402.2 meets at least one of the following criteria:

402.3 (1) the person meets the criteria under section 256B.092, subdivision 13, or 256B.49,

402.4 subdivision 24;

402.5 (2) the person has met treatment objectives and no longer requires a hospital-level care,

402.6 residential-level care, or a secure treatment setting, but the person's discharge from the

402.7 Anoka Metro Regional Treatment Center, the Minnesota Forensic Mental Health Program,

402.8 the Child and Adolescent Behavioral Health Hospital program, a psychiatric residential

402.9 treatment facility under section 256B.0941, intensive residential treatment services under

402.10 section ~~256B.0622~~ 256B.0632, children's residential services under section 245.4882,

402.11 juvenile detention facility, county supervised building, or a hospital would be substantially

402.12 delayed without additional resources available through the transitions to community initiative;

402.13 (3) the person (i) is receiving customized living services reimbursed under section

402.14 256B.4914, 24-hour customized living services reimbursed under section 256B.4914, or

402.15 community residential services reimbursed under section 256B.4914; (ii) expresses a desire

402.16 to move; and (iii) has received approval from the commissioner; or

402.17 (4) the person can demonstrate that the person's needs are beyond the scope of current

402.18 service designs and grant funding can support the inclusion of additional supports for the

402.19 person to access appropriate treatment and services in the least restrictive environment.

402.20 Sec. 7. Minnesota Statutes 2024, section 256B.0615, subdivision 1, is amended to read:

402.21 Subdivision 1. **Scope.** Medical assistance covers mental health certified peer specialist

402.22 services, as established in subdivision 2, if provided to recipients who are eligible for services

402.23 under sections 256B.0622, 256B.0623, ~~and~~ 256B.0624, ~~and~~ 256B.0632 and are provided

402.24 by a mental health certified peer specialist who has completed the training under subdivision

402.25 5 and is qualified according to section 245I.04, subdivision 10.

402.26 Sec. 8. Minnesota Statutes 2024, section 256B.0615, subdivision 3, is amended to read:

402.27 Subd. 3. **Eligibility.** Peer support services may be made available to consumers of (1)

402.28 intensive residential treatment services under section ~~256B.0622~~ 256B.0632; (2) adult

402.29 rehabilitative mental health services under section 256B.0623; and (3) crisis stabilization

402.30 and mental health mobile crisis intervention services under section 256B.0624.

192.23 Sec. 9. Minnesota Statutes 2024, section 256B.82, is amended to read:

192.24 **256B.82 PREPAID PLANS AND MENTAL HEALTH REHABILITATIVE**
192.25 **SERVICES.**

192.26 Medical assistance and MinnesotaCare prepaid health plans may include coverage for
192.27 adult mental health rehabilitative services under section 256B.0623, intensive rehabilitative
192.28 services under section ~~256B.0622~~ 256B.0632, and adult mental health crisis response services
192.29 under section 256B.0624, beginning January 1, 2005.

192.30 By January 15, 2004, the commissioner shall report to the legislature how these services
192.31 should be included in prepaid plans. The commissioner shall consult with mental health
193.1 advocates, health plans, and counties in developing this report. The report recommendations
193.2 must include a plan to ensure coordination of these services between health plans and
193.3 counties, assure recipient access to essential community providers, and monitor the health
193.4 plans' delivery of services through utilization review and quality standards.

193.5 Sec. 10. Minnesota Statutes 2024, section 256D.44, subdivision 5, is amended to read:

193.6 Subd. 5. **Special needs.** (a) In addition to the state standards of assistance established
193.7 in subdivisions 1 to 4, payments are allowed for the following special needs of recipients
193.8 of Minnesota supplemental aid who are not residents of a nursing home, a regional treatment
193.9 center, or a setting authorized to receive housing support payments under chapter 256I.

193.10 (b) The county agency shall pay a monthly allowance for medically prescribed diets if
193.11 the cost of those additional dietary needs cannot be met through some other maintenance
193.12 benefit. The need for special diets or dietary items must be prescribed by a licensed physician,
193.13 advanced practice registered nurse, or physician assistant. Costs for special diets shall be
193.14 determined as percentages of the allotment for a one-person household under the thrifty
193.15 food plan as defined by the United States Department of Agriculture. The types of diets and
193.16 the percentages of the thrifty food plan that are covered are as follows:

193.17 (1) high protein diet, at least 80 grams daily, 25 percent of thrifty food plan;

193.18 (2) controlled protein diet, 40 to 60 grams and requires special products, 100 percent of
193.19 thrifty food plan;

193.20 (3) controlled protein diet, less than 40 grams and requires special products, 125 percent
193.21 of thrifty food plan;

193.22 (4) low cholesterol diet, 25 percent of thrifty food plan;

193.23 (5) high residue diet, 20 percent of thrifty food plan;

193.24 (6) pregnancy and lactation diet, 35 percent of thrifty food plan;

193.25 (7) gluten-free diet, 25 percent of thrifty food plan;

193.26 (8) lactose-free diet, 25 percent of thrifty food plan;

403.1 Sec. 9. Minnesota Statutes 2024, section 256B.82, is amended to read:

403.2 **256B.82 PREPAID PLANS AND MENTAL HEALTH REHABILITATIVE**
403.3 **SERVICES.**

403.4 Medical assistance and MinnesotaCare prepaid health plans may include coverage for
403.5 adult mental health rehabilitative services under section 256B.0623, intensive rehabilitative
403.6 services under section ~~256B.0622~~ 256B.0632, and adult mental health crisis response services
403.7 under section 256B.0624, beginning January 1, 2005.

403.8 By January 15, 2004, the commissioner shall report to the legislature how these services
403.9 should be included in prepaid plans. The commissioner shall consult with mental health
403.10 advocates, health plans, and counties in developing this report. The report recommendations
403.11 must include a plan to ensure coordination of these services between health plans and
403.12 counties, assure recipient access to essential community providers, and monitor the health
403.13 plans' delivery of services through utilization review and quality standards.

403.14 Sec. 10. Minnesota Statutes 2024, section 256D.44, subdivision 5, is amended to read:

403.15 Subd. 5. **Special needs.** (a) In addition to the state standards of assistance established
403.16 in subdivisions 1 to 4, payments are allowed for the following special needs of recipients
403.17 of Minnesota supplemental aid who are not residents of a nursing home, a regional treatment
403.18 center, or a setting authorized to receive housing support payments under chapter 256I.

403.19 (b) The county agency shall pay a monthly allowance for medically prescribed diets if
403.20 the cost of those additional dietary needs cannot be met through some other maintenance
403.21 benefit. The need for special diets or dietary items must be prescribed by a licensed physician,
403.22 advanced practice registered nurse, or physician assistant. Costs for special diets shall be
403.23 determined as percentages of the allotment for a one-person household under the thrifty
403.24 food plan as defined by the United States Department of Agriculture. The types of diets and
403.25 the percentages of the thrifty food plan that are covered are as follows:

403.26 (1) high protein diet, at least 80 grams daily, 25 percent of thrifty food plan;

403.27 (2) controlled protein diet, 40 to 60 grams and requires special products, 100 percent of
403.28 thrifty food plan;

403.29 (3) controlled protein diet, less than 40 grams and requires special products, 125 percent
403.30 of thrifty food plan;

403.31 (4) low cholesterol diet, 25 percent of thrifty food plan;

403.32 (5) high residue diet, 20 percent of thrifty food plan;

404.1 (6) pregnancy and lactation diet, 35 percent of thrifty food plan;

404.2 (7) gluten-free diet, 25 percent of thrifty food plan;

404.3 (8) lactose-free diet, 25 percent of thrifty food plan;

193.27 (9) antidumping diet, 15 percent of thrifty food plan;
193.28 (10) hypoglycemic diet, 15 percent of thrifty food plan; or
193.29 (11) ketogenic diet, 25 percent of thrifty food plan.
193.30 (c) Payment for nonrecurring special needs must be allowed for necessary home repairs
193.31 or necessary repairs or replacement of household furniture and appliances using the payment
194.1 standard of the AFDC program in effect on July 16, 1996, for these expenses, as long as
194.2 other funding sources are not available.
194.3 (d) A fee for guardian or conservator service is allowed at a reasonable rate negotiated
194.4 by the county or approved by the court. This rate shall not exceed five percent of the
194.5 assistance unit's gross monthly income up to a maximum of \$100 per month. If the guardian
194.6 or conservator is a member of the county agency staff, no fee is allowed.
194.7 (e) The county agency shall continue to pay a monthly allowance of \$68 for restaurant
194.8 meals for a person who was receiving a restaurant meal allowance on June 1, 1990, and
194.9 who eats two or more meals in a restaurant daily. The allowance must continue until the
194.10 person has not received Minnesota supplemental aid for one full calendar month or until
194.11 the person's living arrangement changes and the person no longer meets the criteria for the
194.12 restaurant meal allowance, whichever occurs first.
194.13 (f) A fee equal to the maximum monthly amount allowed by the Social Security
194.14 Administration is allowed for representative payee services provided by an agency that
194.15 meets the requirements under SSI regulations to charge a fee for representative payee
194.16 services. This special need is available to all recipients of Minnesota supplemental aid
194.17 regardless of their living arrangement.
194.18 (g)(1) Notwithstanding the language in this subdivision, an amount equal to one-half of
194.19 the maximum federal Supplemental Security Income payment amount for a single individual
194.20 which is in effect on the first day of July of each year will be added to the standards of
194.21 assistance established in subdivisions 1 to 4 for adults under the age of 65 who qualify as
194.22 in need of housing assistance and are:
194.23 (i) relocating from an institution, a setting authorized to receive housing support under
194.24 chapter 256I, or an adult mental health residential treatment program under section ~~256B.0622~~
194.25 256B.0632;
194.26 (ii) eligible for personal care assistance under section 256B.0659; or
194.27 (iii) home and community-based waiver recipients living in their own home or rented
194.28 or leased apartment.
194.29 (2) Notwithstanding subdivision 3, paragraph (c), an individual eligible for the shelter
194.30 needy benefit under this paragraph is considered a household of one. An eligible individual
194.31 who receives this benefit prior to age 65 may continue to receive the benefit after the age
194.32 of 65.

404.4 (9) antidumping diet, 15 percent of thrifty food plan;
404.5 (10) hypoglycemic diet, 15 percent of thrifty food plan; or
404.6 (11) ketogenic diet, 25 percent of thrifty food plan.
404.7 (c) Payment for nonrecurring special needs must be allowed for necessary home repairs
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405.6 or leased apartment.
405.7 (2) Notwithstanding subdivision 3, paragraph (c), an individual eligible for the shelter
405.8 needy benefit under this paragraph is considered a household of one. An eligible individual
405.9 who receives this benefit prior to age 65 may continue to receive the benefit after the age
405.10 of 65.

195.1 (3) "Housing assistance" means that the assistance unit incurs monthly shelter costs that
195.2 exceed 40 percent of the assistance unit's gross income before the application of this special
195.3 needs standard. "Gross income" for the purposes of this section is the applicant's or recipient's
195.4 income as defined in section 256D.35, subdivision 10, or the standard specified in subdivision
195.5 3, paragraph (a) or (b), whichever is greater. A recipient of a federal or state housing subsidy,
195.6 that limits shelter costs to a percentage of gross income, shall not be considered in need of
195.7 housing assistance for purposes of this paragraph.

405.11 (3) "Housing assistance" means that the assistance unit incurs monthly shelter costs that
405.12 exceed 40 percent of the assistance unit's gross income before the application of this special
405.13 needs standard. "Gross income" for the purposes of this section is the applicant's or recipient's
405.14 income as defined in section 256D.35, subdivision 10, or the standard specified in subdivision
405.15 3, paragraph (a) or (b), whichever is greater. A recipient of a federal or state housing subsidy,
405.16 that limits shelter costs to a percentage of gross income, shall not be considered in need of
405.17 housing assistance for purposes of this paragraph.