

**Bill Comparison Summary of
Senate File 4410 (second unofficial engrossment) / Senate File 4410
(third engrossment)**

**House Article 8: Community Supports and Behavioral Health Policy
Senate Article 8: Community Supports and Behavioral Health Policy**

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Comparison Summary of S.F. 4410 – House (S.F. 4410, second unofficial engrossment) / Senate (4410, third engrossment)

Section	HOUSE Article 8: Community Supports and Behavioral Health Policy		SENATE Article 8: Community Supports and Behavioral Health Policy
1	<p>Definitions. Amends § 62A.673, subd. 2. Modifies the definition of “health care provider” for purposes of the Minnesota Telehealth Act, by updating cross references and adding mental health clinical trainees.</p> <p>Makes this section effective July 1, 2022, or upon federal approval, whichever is later.</p>	Identical	<p>Section 1 (62A.673, subdivision 2) contains technical corrections to conform statute with the Mental Health Uniform Service Standards enacted in 2021 (CS-07).</p>
2	<p>Other professionals. Amends § 148F.11, subd. 1. Strikes cross-reference and makes clarifying change.</p> <p>Makes this section effective July 1, 2022, or upon federal approval, whichever is later.</p>	Identical	<p>Section 2 (148F.11, subdivision 1) contains technical corrections to conform statute with the Mental Health Uniform Service Standards enacted in 2021 (CS-07).</p>
3	<p>Case management service provider. Amends § 245.462, subd. 4. Specifies that a case manager may be a mental health practitioner; clarifies that a case manager who is not a mental health practitioner and who does not have a bachelor’s degree in a specified field must meet additional requirements listed in the subdivision.</p>	House only	
4	<p>Diagnostic assessment. Amends § 245.467, subd. 2. Makes clarifying changes.</p> <p>Makes this section effective July 1, 2022, or upon federal approval, whichever is later.</p>	Identical	<p>Section 3 (245.467, subdivision 2) contains technical corrections to conform statute with the Mental Health Uniform Service Standards enacted in 2021 (CS-07).</p>

Comparison Summary of S.F. 4410 – House (S.F. 4410, second unofficial engrossment) / Senate (4410, third engrossment)

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5	<p>Individual treatment plans. Amends § 245.467, subd. 3. Makes clarifying changes.</p> <p>Makes this section effective July 1, 2022, or upon federal approval, whichever is later.</p>	Identical	<p>Section 4 (245.467, subdivision 3) contains technical corrections to conform statute with the Mental Health Uniform Service Standards enacted in 2021 (CS-07).</p>
6	<p>Individual treatment plan. Amends § 245.4871, subd. 21. Adds paragraph (b), exempting licensed children’s residential facilities from existing individual treatment plan requirements and providing new requirements for those facilities.</p> <p>Makes this section effective July 1, 2022, or upon federal approval, whichever is later.</p>	Identical	<p>Section 5 (245.4871, subdivision 21) exempts licensed children’s residential facilities from individual treatment plan requirements and provides new requirements (CS-07).</p>
7	<p>Diagnostic assessment. Amends § 245.4876, subd. 2. Makes clarifying changes; adds diagnostic assessment requirements for licensed children’s residential facilities.</p> <p>Makes this section effective July 1, 2022, or upon federal approval, whichever is later.</p>	Identical	<p>Section 6 (245.4876, subdivision 2) conforms statute with the Mental Health Uniform Service Standards enacted in 2021 and adds diagnostic assessment requirements for licensed children’s residential facilities (CS-07).</p>
8	<p>Individual treatment plans. Amends § 245.4876, subd. 3. Makes clarifying changes; exempts licensed children’s residential facilities from existing individual</p>	Identical	<p>Section 7 (245.4876, subdivision 3) conforms statute with the Mental Health Uniform Service Standards enacted in 2021 and exempts licensed children’s residential facilities from individual treatment plan requirements and provides new requirements (CS-07).</p>

Comparison Summary of S.F. 4410 – House (S.F. 4410, second unofficial engrossment) / Senate (4410, third engrossment)

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	<p>treatment plan requirements and specifies requirements for those facilities.</p> <p>Makes this section effective July 1, 2022, or upon federal approval, whichever is later.</p>		
9	<p>Certified community behavioral health clinics. Amends § 245.735, subd. 3. Makes technical changes.</p> <p>Makes this section effective July 1, 2022, or upon federal approval, whichever is later.</p>	Identical	<p>Section 8 (245.735, subdivision 3) contains technical corrections to conform statute with the Mental Health Uniform Service Standards enacted in 2021 (CS-07).</p>
10	<p>Licensing moratorium. Amends § 245A.03, subd. 7. Modifies the corporate foster care moratorium by removing an obsolete exception to the moratorium.</p> <p>Provides an immediate effective date.</p>	Identical	<p>Section 9 (245A.03, subdivision 7) repeals an obsolete corporate foster care licensing moratorium exception.</p>
		Senate only	<p>Section 10 (245A.11, subdivision 2, paragraph (b)) requires a licensed residential program in an intermediate care facility for persons with developmental disabilities with a capacity of up to eight individuals in a single-family home to be considered a permitted single-family residential use of property for the purposes of zoning and other land use regulations, unless the town, municipal, or county zoning regulations provide otherwise.</p>

Comparison Summary of S.F. 4410 – House (S.F. 4410, second unofficial engrossment) / Senate (4410, third engrossment)

Section	HOUSE Article 8: Community Supports and Behavioral Health Policy		SENATE Article 8: Community Supports and Behavioral Health Policy
		Senate only	Section 11 (245A.11, subdivision 2a) expands from five to six the maximum number of beds permitted in adult foster care settings and community residential settings under existing temporary variances to capacity limits in those settings. This section also expands from five to six the maximum number of permanent beds permitted in adult foster care settings and community residential settings when the addition of the beds satisfies specified conditions. Under current law the standard capacity limit is four, with temporary variances for a fifth bed and under special circumstances the permanent addition of a fifth bed.
		Senate only	Section 12 [245A.11, subdivision 2c] permits the commissioner to increase from six to eight the licensed capacity of a residential program in an intermediate care facility for persons with developmental disabilities provided the local zoning authority permits such an expansion.
		Senate only	Section 13 (245A.19) requires the commissioner to outline the content in HIV training materials in chemical dependency treatment programs rather than providing training on HIV minimum standards.
11	Integrated community supports; setting capacity report. Amends § 245D.12. Adds to the information that must be provided in an integrated community support setting capacity report by including information on the total number of people who could reside in the living units in certain multifamily housing buildings and receive integrated community supports.	Identical	Section 15 (245D.12, paragraph (b), clause (4)) requires providers of integrated community supports (ICS) to report the provider’s setting capacity.

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	Provides an immediate effective date.		
		Senate only	Section 16 (245F.04, subdivision 1) allows a supervised living facility with a class A license to be licensed as a withdrawal management program.
		Senate only	Section 17 [245G.01, subdivision 13b] adds the definition of guest speaker for chemical dependency licensed treatment facilities.
		Senate only	Section 18 (245G.12) modifies the description of treatment services in a provider’s written policy and procedure manual to include the ability of a guest speaker to provide services.
12	Level of care assessment. Amends § 245I.02, subd. 19. Allows a level of care assessment to be completed using another decision support tool authorized by the commissioner.	Identical	Section 19 (245I.02, subdivision 19) allows a level of care assessment to be completed using another tool authorized by the commissioner of human services (CS-07).
13	Staff person. Amends § 245I.02, subd. 36. Modifies definition of “staff person” to include a person who does not provide direct contact services to clients, but does have physical access to clients.	Identical	Section 20 (245I.02, subdivision 36) conforms statute with the Mental Health Uniform Service Standards enacted in 2021 (CS-07).

Comparison Summary of S.F. 4410 – House (S.F. 4410, second unofficial engrossment) / Senate (4410, third engrossment)

Section	HOUSE Article 8: Community Supports and Behavioral Health Policy		SENATE Article 8: Community Supports and Behavioral Health Policy
14	<p>Volunteers. Amends § 2451.03, subd. 9. Clarifies that a license holder must only have policies and procedures for using volunteers if the license holder uses volunteers.</p> <p>Makes this section effective July 1, 2022, or upon federal approval, whichever is later.</p>	Identical	<p>Section 21 (2451.03, subdivision 9) contains technical corrections to conform statute with the Mental Health Uniform Service Standards enacted in 2021 (CS-07).</p>
15	<p>Mental health practitioner qualifications. Amends § 2451.04, subd. 4. Adds language allowing social work, psychology, or counseling clinical trainees to qualify as mental health practitioners.</p> <p>Makes this section effective July 1, 2022, or upon federal approval, whichever is later.</p>	Identical	<p>Section 22 (2451.04, subdivision 4) contains technical corrections to conform statute with the Mental Health Uniform Service Standards enacted in 2021 (CS-07).</p>
16	<p>Initial training. Amends § 2451.05, subd. 3. Makes technical change.</p> <p>Makes this section effective July 1, 2022, or upon federal approval, whichever is later.</p>	Identical	<p>Section 23 (2451.05, subdivision 3) contains technical corrections to conform statute with the Mental Health Uniform Service Standards enacted in 2021 (CS-07).</p>
17	<p>Progress notes. Amends § 2451.08, subd. 4. Removes requirement for printed name of the staff person to be included in a progress note.</p> <p>Makes this section effective July 1, 2022, or upon federal approval, whichever is later.</p>	Identical	<p>Section 24 (2451.08, subdivision 4) removes the printed name of a staff person requirement (CS-07).</p>

Comparison Summary of S.F. 4410 – House (S.F. 4410, second unofficial engrossment) / Senate (4410, third engrossment)

Section	HOUSE Article 8: Community Supports and Behavioral Health Policy		SENATE Article 8: Community Supports and Behavioral Health Policy
18	<p>Record retention. Amends § 2451.09, subd. 2. Requires a license holder to retain records for a minimum of five years when the license holder closes a program, rather than when the license holder ceases to provide services to a client.</p> <p>Makes this section effective July 1, 2022, or upon federal approval, whichever is later.</p>	Identical	<p>Section 25 (2451.09, subdivision 2) changes the record retention requirements to when a license holder closes a program instead of when the license holder ceases to provide services to a client (CS-07).</p>
19	<p>Generally. Amends § 2451.10, subd. 2. Modifies cross-reference.</p> <p>Makes this section effective July 1, 2022, or upon federal approval, whichever is later.</p>	Identical	<p>Section 26 (2451.10, subdivision 2) contains technical corrections to conform statute with the Mental Health Uniform Service Standards enacted in 2021 (CS-07).</p>
20	<p>Standard diagnostic assessment; required elements. Amends § 2451.10, subd. 6. Makes technical change.</p> <p>Makes this section effective July 1, 2022, or upon federal approval, whichever is later.</p>	Identical	<p>Section 27 (2451.10, subdivision 6) contains technical corrections to conform statute with the Mental Health Uniform Service Standards enacted in 2021 (CS-07).</p>
21	<p>Treatment supervision specified. Amends § 2451.20, subd. 5. Makes clarifying change to require documentation of a case review.</p>	Identical	<p>Section 28 (2451.20, subdivision 5) contains technical corrections to conform statute with the Mental Health Uniform Service Standards enacted in 2021 (CS-07).</p>
22	<p>Additional policy and procedure requirements. Amends § 2451.23, subd. 22. Modifies cross-references.</p>	Identical	<p>Section 29 (2451.23, subdivision 22) contains technical corrections to conform statute with the Mental Health Uniform Service Standards enacted in 2021 (CS-07).</p>

Comparison Summary of S.F. 4410 – House (S.F. 4410, second unofficial engrossment) / Senate (4410, third engrossment)

Section	HOUSE Article 8: Community Supports and Behavioral Health Policy		SENATE Article 8: Community Supports and Behavioral Health Policy
	Makes this section effective July 1, 2022, or upon federal approval, whichever is later.		
		Senate only	Section 30 [254B.01, subdivision 6a] adds the definition of Minnesota Certification Board into the statute governing substance use disorder treatment.
		Senate only	Section 31 (254B.05, subdivision 1) updates the requirements for a recovery community organization to be certified to include meeting the recovery community organization definition in 254B.01, subdivision 8 and meeting an additional certification requirement.
23	Rate requirements. Amends § 254B.05, subd. 5. Modifies cross-references. Makes this section effective July 1, 2022, or upon federal approval, whichever is later.	House only	
24	Definitions. Amends § 256B.0622, subd. 2. Makes clarifying changes to assertive community treatment crisis assessment and intervention definition. Makes this section effective July 1, 2022, or upon federal approval, whichever is later.	Identical	Section 34 (256B.0622, subdivision 2) contains technical corrections to conform statute with the Mental Health Uniform Service Standards enacted in 2021 (CS-07).

Comparison Summary of S.F. 4410 – House (S.F. 4410, second unofficial engrossment) / Senate (4410, third engrossment)

Section	HOUSE Article 8: Community Supports and Behavioral Health Policy		SENATE Article 8: Community Supports and Behavioral Health Policy
25	<p>Telehealth services. Amends § 256B.0625, subd. 3b. Modifies cross-references and makes clarifying changes. Modifies paragraph (d) to specify that telehealth visits via telephone may satisfy face-to-face reimbursement requirements when services are provided under certain payment methods, from July 1, 2021, to July 1, 2023, or until the federal COVID-19 public health emergency ends, whichever is earlier.</p> <p>Makes this section effective July 1, 2022, or upon federal approval, whichever is later, except that the amendments to paragraph (d) are effective retroactively from July 1, 2021.</p>	<p>Technical differences. House includes additional language in paragraph (d) for telehealth visits via telephone; Senate does not. House also includes retroactive effective date applying to changes to paragraph (d).</p> <p>NOTE: THIS SECTION MUST BE RECONCILED WITH OTHER PARTS OF THE BILL THAT AMEND THIS SAME STATUTORY SECTION</p>	<p>Section 35 (256B.0625, subdivision 3b, paragraph (d)) permits telehealth visits provided through accessible video-based platforms to satisfy the face-to-face requirements for reimbursement as a covered medical assistance service under the payment methodologies that apply to federally qualified health centers, rural health clinics, Indian health services, 638 tribal clinics, and certified community behavioral health clinics.</p>
26	<p>Personal care assistance choice option; qualifications; duties. Amends § 256B.0659, subd. 19. Removes obsolete language and makes technical changes.</p>	<p>Identical</p>	<p>Section 36 (256B.0659, subdivision 19) makes a conforming technical change to language governing reassessments for personal care assistance services.</p>
27	<p>Dialectical behavioral therapy. Amends § 256B.0671, subd. 6. Removes age eligibility requirement for dialectical behavioral therapy covered by medical assistance in intensive mental health outpatient treatment.</p> <p>Makes this section effective July 1, 2022, or upon federal approval, whichever is later.</p>	<p>Identical</p>	<p>Section 37 (256B.0671, subdivision 6) removes age eligibility requirement for dialectical behavioral therapy (CS-07).</p>
		<p>Senate only</p>	<p>Section 38 (256B.0757, subdivision 1) clarifies language by adding “behavioral” in front of “health home.”</p>

Comparison Summary of S.F. 4410 – House (S.F. 4410, second unofficial engrossment) / Senate (4410, third engrossment)

Section	HOUSE Article 8: Community Supports and Behavioral Health Policy		SENATE Article 8: Community Supports and Behavioral Health Policy
		Senate only	Section 39 (256B.0757, subdivision 2) clarifies language by adding “behavioral” in front of “health home.”
		Senate only	Section 40 (256B.0757, subdivision 3) clarifies language by adding “behavioral” in front of “health home.”
		Senate only	Section 41 (256B.0757, subdivision 4) clarifies language by adding “behavioral” in front of “health home.”
		Senate only	Section 42 (256B.0757, subdivision 8) clarifies language by adding “behavioral” in front of “health home.”
28	<p>Assessment and support planning. Amends § 256B.0911, subd. 3a. Makes technical changes and removes certain limitations on remote long-term care consultation services reassessments.</p>	<p>Different.</p> <p>Paragraph (d): Senate only</p> <p>Paragraph (f): Senate only</p> <p>Paragraph (r): technical differences Staff recommends Senate and strike “in order” on Senate 223.8.</p>	<p>Section 43 (256B.0911, subdivision 3a, paragraph (d)) extends to providers of customized living services under the brain injury (BI) waiver and the community access for disability inclusion (CADI) waiver an existing option permitting the provider with the service recipient’s permission to submit a nursing assessment to the certified assessor prior to an assessment.</p> <p>Paragraph (f) extends an existing provision to providers of customized living services under the brain injury (BI) waiver and the community access for disability inclusion (CADI) waiver that requires final written community support plan and customized living tool be provided to any provider that submitted a nursing assessment to an assessor under paragraph (d).</p>

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Section	HOUSE Article 8: Community Supports and Behavioral Health Policy		SENATE Article 8: Community Supports and Behavioral Health Policy
			Paragraph (r) simplifies the requirements for a remote reassessment for waiver services, alternative care services, and essential community supports.
		Senate only	Section 44 (256B.0911, subdivision 3f) modifies the required tasks during a MnCHOICES reassessment to include an opportunity to provide a confidential performance assessment of the person’s case manager.
29	Required covered service components. Amends § 256B.0946, subd. 1. Modifies cross-reference. Makes this section effective July 1, 2022, or upon federal approval, whichever is later.	Identical	Article 4, Section 50 (256B.0946, subdivision 1) contains technical corrections to conform statute with the Mental Health Uniform Service Standards enacted in 2021 (CS-07).
30	Definitions. Amends § 256B.0947, subd. 2. Removes paragraph from “transition services” definition for purposes of intensive rehabilitative mental health services.	Identical	Section 45 (256B.0947, subdivision 2) modifies definition of “transition services” (CS-07).
31	Service standards. Amends § 256B.0947, subd. 6. Modifies required updates for level of care assessments and function assessments from every 90 days to every six months; removes language requiring individual treatment plan review at least every 90 days. Makes this section effective July 1, 2022, or upon federal approval, whichever is later.	Identical	Section 46 (256B.0947, subdivision 6) modifies level of care assessment updates from 90 days to six months (CS-07).

Comparison Summary of S.F. 4410 – House (S.F. 4410, second unofficial engrossment) / Senate (4410, third engrossment)

Section	HOUSE Article 8: Community Supports and Behavioral Health Policy		SENATE Article 8: Community Supports and Behavioral Health Policy
32	<p>Definitions. Amends § 256B.0949, subd. 2. Adds a definition for “advanced certification” under the early intensive developmental and behavioral interventions (EIDBI) program.</p>	<p>Technical differences Senate puts the definition in alphabetical order Staff recommends Senate.</p>	<p>Section 47 (256B.0949, subdivision 2) adds a definition for “advanced certification” to the statutes governing early intensive developmental and behavioral intervention (EIDBI). The addition of this definition further specifies the requirements for Level 1 providers.</p>
		Senate only	<p>Section 48 (256B.0949, subdivision 8) clarifies that the commissioner of human services must continue to engage stakeholders before modifying or recommending legislative changes to the early intensive developmental and behavioral intervention (EIDBI) benefit.</p>
33	<p>Covered services. Amends § 256B.0949, subd. 13. Requires EIDBI providers with advanced certification overseeing implementation to document required qualifications for the treatment model used in a manner determined by the commissioner. Clarifies the meaning of intervention with a higher provider ratio. Makes qualified supervision professional attendance at a coordinated care conference optional. Removes the limitation that telehealth services must be provided by a licensed health care provider.</p>	Identical	<p>Section 49 (256B.0949, subdivision 13, paragraph (c)) requires all EIDBI providers, including those with advanced certification in one of the approved treatment modalities, to document the required qualifications to meet fidelity to the specific model.</p> <p>Paragraph (g) adds interventions with a provider to client ratio of 2 to 1 or greater as a reimbursable service under the EIDBI medical assistance benefit.</p> <p>Paragraph (j) removes the requirement that a coordinated care conference be conducted by a qualified supervising professional in order to be a reimbursable service under the EIDBI medical assistance benefit.</p> <p>Paragraph (l) makes changes to conform with the requirements of telehealth as a covered service under medical assistance.</p>

Comparison Summary of S.F. 4410 – House (S.F. 4410, second unofficial engrossment) / Senate (4410, third engrossment)

Section	HOUSE Article 8: Community Supports and Behavioral Health Policy		SENATE Article 8: Community Supports and Behavioral Health Policy
		Senate only	Section 50 (256B.49, subdivision 23) for community living settings extends from one to four the maximum number of permitted time-limited cosigned lease arrangement between a service provider, a service recipient, and a service recipient’s landlord. Under current law, a cosigned lease arrangement may last two years and be followed by one time-limited extension.
		Senate only	Section 51 (256B.49, subdivision 28) expands an existing moratorium on new licenses for customized living settings to include an exception for a new license for existing providers who move the service setting to a new address.
		Senate only	Section 52 (256G.02, subdivision 6) makes clarifying changes to the definition of “excluded time” for the purposes of determining the county of financial responsibility for the provision of integrated community supports and day support services.
34	Implementation. Amends § 256K.26, subd. 2. Includes Tribes in the development of application requirements for long-term homeless supportive services.	Identical	Section 53 (256K.26, subdivision 2) clarifies the role of Tribes in the administration and implementation of the long-term homelessness supportive grant program.
35	Outcomes. Amends § 256K.26, subd. 6. Clarifies that Tribes may provide long-term homeless supportive services. Updates terminology.	Identical	Section 54 (256K.26, subdivision 6) clarifies the role of Tribes in the administration and implementation of the long-term homelessness supportive grant program.

Comparison Summary of S.F. 4410 – House (S.F. 4410, second unofficial engrossment) / Senate (4410, third engrossment)

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36	<p>Eligible services. Amends § 256K.26, subd. 7. Clarifies that Tribes may provide long-term homeless supportive services.</p>	Identical	<p>Section 55 (256K.26, subdivision 7) clarifies the role of Tribes in the administration and implementation of the long-term homelessness supportive grant program.</p>
37	<p>Qualified professional. Amends § 256P.01, subd. 6a. Makes a conforming cross-reference change.</p> <p>Makes this section effective July 1, 2022, or upon federal approval, whichever is later. Requires the commissioner of human services to notify the revisor of statutes when federal approval is obtained.</p>	Identical	<p>Section 56 (256P.01, subdivision 6a) contains technical corrections to conform statute with the Mental Health Uniform Service Standards enacted in 2021 (CS-07).</p>
38	<p>Account creation. Amends § 256Q.06, by adding subd. 6. If an eligible individual is unable to establish his or her own Achieving a Better Life Experience (ABLE) account, allows an ABLE account to be established on behalf of the eligible individual by the eligible individual’s agent under power of attorney or, if none, by the eligible individual’s conservator or legal guardian, spouse, parent, sibling, or grandparent or a representative payee appointed for the eligible individual by the SSA, in that order. This change aligns Minnesota’s ABLE statute with final federal IRS rules.</p> <p>Provides an immediate effective date.</p>	Identical	<p>Section 57 [256Q.06, subdivision 6] modifies the Minnesota Achieving a Better Life Experience (ABLE) Act to align with federal rules by clarifying that if an eligible individual is unable to establish an ABLE account, other specified individuals may establish an account of the individual’s behalf.</p>

Comparison Summary of S.F. 4410 – House (S.F. 4410, second unofficial engrossment) / Senate (4410, third engrossment)

Section	HOUSE Article 8: Community Supports and Behavioral Health Policy		SENATE Article 8: Community Supports and Behavioral Health Policy
39	<p>Waivers and modifications; federal funding extension. Amends Laws 2020, First Special Session ch. 7, § 1, subd. 1, as amended by Laws 2021, First Special Session ch. 7, art. 2, § 71. Makes a technical change.</p>	Identical	<p>Section 58 (Laws 2020, First Special Session chapter 7, section 1, subdivision 1, as amended by Laws 2021, First Special Session chapter 7, article 2, section 71) removes the requirement that the specified waivers and modifications to Department of Human Services programs issued by the commissioner of human services pursuant to the governor’s Executive Orders and subsequently extended by the legislature following the termination of the peacetime emergency are limited to those waivers and modifications required to comply with federal law.</p>
		Senate only	<p>Section 59 (Laws 2021, First Special Session chapter 7, article 11, section 38) removes the date for paperwork reduction by the commissioner and modifies it to be within two years of the commissioner contracting with a qualified vendor.</p>
		Senate only	<p>Section 60 (DIRECTION TO COMMISSIONER OF HUMAN SERVICES; INFORMED CHOICE UPON CLOSURE) requires the commissioner to ensure that department staff, lead agency staff, and providers meet their obligations under Minnesota law and the Olmstead Plan while responding to the ongoing staffing shortages currently occurring in the long-term care sector.</p>
		Senate only	<p>Section 61 (DIRECTION TO THE COMMISSIONER OF HUMAN SERVICES; HOME AND COMMUNITY-BASED SERVICES RULE STATEWIDE TRANSITION PLAN) requires the commissioner to submit an amendment to the state’s HCBS transition plan to allow a provider relocating existing customized living services</p>

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Section	HOUSE Article 8: Community Supports and Behavioral Health Policy		SENATE Article 8: Community Supports and Behavioral Health Policy
			provided under the BI or CADI waiver to be treated as a Tier 1 customized living setting.
40	<p>Revisor instruction. Instructs the revisor to change the term “chemical dependency” to “substance use disorder” throughout chapters 245G, 253B, 254A, and 254B and make any related grammatical changes.</p>	<p>Similar. House includes changes to rules; Senate does not. Senate includes July 1, 2022, effective date; House does not. Technical differences</p>	<p>Section 62 (REVISOR INSTRUCTION) requires the revisor of statutes to replace in statute "chemical dependency" with the term "substance use disorder".</p>
41	<p>Repealer. Repeals sections 254A.04 (Alcohol and Other Drug Abuse Advisory Council, expired June 30, 2018) and 254B.14 (chemical dependency continuum of care pilot projects).</p>	<p>Identical</p>	<p>Section 63 (REPEALER) repeals the Alcohol and Other Drug Abuse Advisory Council and the Chemical Dependency Continuum of Care Pilot Project.</p>