1.2	(H2434DE1), as follows:
1.3	Page 13, delete section 16
1.4	Page 14, delete section 17
1.5	Page 81, after line 19, insert:
1.6	"Sec Minnesota Statutes 2024, section 256B.766, is amended to read:
1.7	256B.766 REIMBURSEMENT FOR BASIC CARE SERVICES.
1.8	Subdivision 1. Payment reductions for base care services effective July 1, 2009. (a)
1.9	Effective for services provided on or after July 1, 2009, total payments for basic care services,
1.10	shall be reduced by three percent, except that for the period July 1, 2009, through June 30,
1.11	2011, total payments shall be reduced by 4.5 percent for the medical assistance and general
1.12	assistance medical care programs, prior to third-party liability and spenddown calculation.
1.13	Subd. 2. Classification of therapies as basic care services. Effective July 1, 2010, The
1.14	commissioner shall classify physical therapy services, occupational therapy services, and
1.15	speech-language pathology and related services as basic care services. The reduction in this
1.16	paragraph subdivision 1 shall apply to physical therapy services, occupational therapy
1.17	services, and speech-language pathology and related services provided on or after July 1,
1.18	2010.
1.19	Subd. 3. Payment reductions to managed care plans effective October 1, 2009. (b)
1.20	Payments made to managed care plans and county-based purchasing plans shall be reduced
1.21	for services provided on or after October 1, 2009, to reflect the reduction <u>in subdivision 1</u>
1.22	effective July 1, 2009, and payments made to the plans shall be reduced effective October
1.23	1, 2010, to reflect the reduction in subdivision 1 effective July 1, 2010.

...... moves to amend H.F. No. 2434, the delete everything amendment

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Subd. 4. Temporary payment reductions effective September 1, 2011. (e) (a) Effective 2.1 for services provided on or after September 1, 2011, through June 30, 2013, total payments 2.2 for outpatient hospital facility fees shall be reduced by five percent from the rates in effect 2.3 on August 31, 2011. 2.4 (d) (b) Effective for services provided on or after September 1, 2011, through June 30, 2.5 2013, total payments for ambulatory surgery centers facility fees, medical supplies and 2.6 durable medical equipment not subject to a volume purchase contract, prosthetics and 2.7 orthotics, renal dialysis services, laboratory services, public health nursing services, physical 2.8 therapy services, occupational therapy services, speech therapy services, eyeglasses not 2.9 subject to a volume purchase contract, hearing aids not subject to a volume purchase contract, 2.10 and anesthesia services shall be reduced by three percent from the rates in effect on August 2.11 31, 2011. 2.12 Subd. 5. Payment increases effective September 1, 2014. (e) (a) Effective for services 2.13 provided on or after September 1, 2014, payments for ambulatory surgery centers facility 2.14 fees, hospice services, renal dialysis services, laboratory services, public health nursing 2.15 services, eyeglasses not subject to a volume purchase contract, and hearing aids not subject 2.16 to a volume purchase contract shall be increased by three percent and payments for outpatient 2.17 hospital facility fees shall be increased by three percent. 2.18 (b) Payments made to managed care plans and county-based purchasing plans shall not 2.19 be adjusted to reflect payments under this paragraph subdivision. 2.20 Subd. 6. Temporary payment reductions effective July 1, 2014. (f) Payments for 2.21 medical supplies and durable medical equipment not subject to a volume purchase contract, 2.22 and prosthetics and orthotics, provided on or after July 1, 2014, through June 30, 2015, shall 2.23 be decreased by .33 percent. 2.24 Subd. 7. Payment increases effective July 1, 2015. (a) Payments for medical supplies 2.25 and durable medical equipment not subject to a volume purchase contract, and prosthetics 2.26 and orthotics, provided on or after July 1, 2015, shall be increased by three percent from 2.27 2.28 the rates as determined under paragraphs (i) and (j) subdivisions 9 and 10. (g) (b) Effective for services provided on or after July 1, 2015, payments for outpatient 2.29 hospital facility fees, medical supplies and durable medical equipment not subject to a 2.30 volume purchase contract, prosthetics, and orthotics to a hospital meeting the criteria specified 2.31 in section 62Q.19, subdivision 1, paragraph (a), clause (4), shall be increased by 90 percent 2.32 from the rates in effect on June 30, 2015. 2.33

(c) Payments made to managed care plans and county-based purchasing plans shall not be adjusted to reflect payments under this paragraph (b).

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- <u>Subd. 8.</u> Exempt services. (h) This section does not apply to physician and professional services, inpatient hospital services, family planning services, mental health services, dental services, prescription drugs, medical transportation, federally qualified health centers, rural health centers, Indian health services, and Medicare cost-sharing.
- Subd. 9. Individually priced items. (i) (a) Effective for services provided on or after July 1, 2015, the following categories of medical supplies and durable medical equipment shall be individually priced items: customized and other specialized tracheostomy tubes and supplies, electric patient lifts, and durable medical equipment repair and service.
- (b) This paragraph subdivision does not apply to medical supplies and durable medical equipment subject to a volume purchase contract, products subject to the preferred diabetic testing supply program, and items provided to dually eligible recipients when Medicare is the primary payer for the item.
- (c) The commissioner shall not apply any medical assistance rate reductions to durable medical equipment as a result of Medicare competitive bidding.
- Subd. 10. Rate increases effective July 1, 2015. (j) (a) Effective for services provided on or after July 1, 2015, medical assistance payment rates for durable medical equipment, prosthetics, orthotics, or supplies shall be increased as follows:
- (1) payment rates for durable medical equipment, prosthetics, orthotics, or supplies that were subject to the Medicare competitive bid that took effect in January of 2009 shall be increased by 9.5 percent; and
- (2) payment rates for durable medical equipment, prosthetics, orthotics, or supplies on the medical assistance fee schedule, whether or not subject to the Medicare competitive bid that took effect in January of 2009, shall be increased by 2.94 percent, with this increase being applied after calculation of any increased payment rate under clause (1).
- This (b) Paragraph (a) does not apply to medical supplies and durable medical equipment subject to a volume purchase contract, products subject to the preferred diabetic testing supply program, items provided to dually eligible recipients when Medicare is the primary payer for the item, and individually priced items identified in paragraph (i) subdivision 9.
- 3.31 (c) Payments made to managed care plans and county-based purchasing plans shall not be adjusted to reflect the rate increases in this paragraph subdivision.

Subd. 11. Rates for ventilators. (k) (a) Effective for nonpressure support ventilators provided on or after January 1, 2016, the rate shall be the lower of the submitted charge or the Medicare fee schedule rate.

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- (b) Effective for pressure support ventilators provided on or after January 1, 2016, the rate shall be the lower of the submitted charge or 47 percent above the Medicare fee schedule rate.
- (c) For payments made in accordance with this paragraph subdivision, if, and to the extent that, the commissioner identifies that the state has received federal financial participation for ventilators in excess of the amount allowed effective January 1, 2018, under United States Code, title 42, section 1396b(i)(27), the state shall repay the excess amount to the Centers for Medicare and Medicaid Services with state funds and maintain the full payment rate under this paragraph subdivision.
- Subd. 12. Rates subject to the upper payment limit. (1) Payment rates for durable medical equipment, prosthetics, orthotics or supplies, that are subject to the upper payment limit in accordance with section 1903(i)(27) of the Social Security Act, shall be paid the Medicare rate. Rate increases provided in this chapter shall not be applied to the items listed in this paragraph subdivision.
- Subd. 13. Temporary rates for enteral nutrition and supplies. (m) (a) For dates of service on or after July 1, 2023, through June 30, 2025 2027, enteral nutrition and supplies must be paid according to this paragraph subdivision. If sufficient data exists for a product or supply, payment must be based upon the 50th percentile of the usual and customary charges per product code submitted to the commissioner, using only charges submitted per unit. Increases in rates resulting from the 50th percentile payment method must not exceed 150 percent of the previous fiscal year's rate per code and product combination. Data are sufficient if: (1) the commissioner has at least 100 paid claim lines by at least ten different providers for a given product or supply; or (2) in the absence of the data in clause (1), the commissioner has at least 20 claim lines by at least five different providers for a product or supply that does not meet the requirements of clause (1). If sufficient data are not available to calculate the 50th percentile for enteral products or supplies, the payment rate must be the payment rate in effect on June 30, 2023.
  - (b) This subdivision expires June 30, 2027.
- Subd. 14. Rates for enteral nutrition and supplies. (n) For dates of service on or after
   July 1, 2025 2027, enteral nutrition and supplies must be paid according to this paragraph
   subdivision and updated annually each January 1. If sufficient data exists for a product or

supply, payment must be based upon the 50th percentile of the usual and customary charges per product code submitted to the commissioner for the previous calendar year, using only charges submitted per unit. Increases in rates resulting from the 50th percentile payment method must not exceed 150 percent of the previous year's rate per code and product combination. Data are sufficient if: (1) the commissioner has at least 100 paid claim lines by at least ten different providers for a given product or supply; or (2) in the absence of the data in clause (1), the commissioner has at least 20 claim lines by at least five different providers for a product or supply that does not meet the requirements of clause (1). If sufficient data are not available to calculate the 50th percentile for enteral products or supply minus 20 percent. If the manufacturer's suggested retail price of that product or supply minus 20 percent. If the manufacturer's suggested retail price is not available, payment must be the actual acquisition cost of that product or supply plus 20 percent."

- Page 119, line 6, after "community" insert ", including but not limited to local mental health crisis services and the 988 Lifeline,"
- Page 121, line 28, after "program" insert "based on the National Alliance for Recovery

  Residences standards" and delete the second "based"
- Page 121, line 29, delete everything before "seeking"
- 5.18 Page 133, after line 8, insert:

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- "Sec. .... Minnesota Statutes 2024, section 256B.0761, subdivision 4, is amended to read:
- Subd. 4. **Services and duration.** (a) Services must be provided 90 days prior to an individual's release date or, if an individual's confinement is less than 90 days, during the time period between a medical assistance eligibility determination and the release to the community.
  - (b) Facilities must offer the following services using either community-based or corrections-based providers:
  - (1) case management activities to address physical and behavioral health needs, including a comprehensive assessment of individual needs, development of a person-centered care plan, referrals and other activities to address assessed needs, and monitoring and follow-up activities;
- 5.30 (2) drug coverage in accordance with section 256B.0625, subdivision 13, including up 5.31 to a 30-day supply of drugs upon release;

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6.1	(3) substance use disorder comprehensive assessments according to section 254B.05,
6.2	subdivision 5, paragraph (b), clause (2);
6.3	(4) treatment coordination services according to section 254B.05, subdivision 5, paragraph
6.4	(b), clause (3);
6.5	(5) peer recovery support services according to sections 245I.04, subdivisions 18 and
6.6	19, and 254B.05, subdivision 5, paragraph (b), clause (4);
6.7	(6) substance use disorder individual and group counseling provided according to sections
6.8	245G.07, subdivision 1, paragraph (a), clause (1), and 254B.05;
6.9	(7) mental health diagnostic assessments as required under section 245I.10;
6.10	(8) group and individual psychotherapy as required under section 256B.0671;
6.11	(9) peer specialist services as required under sections 245I.04 and 256B.0615;
6.12	(10) family planning and obstetrics and gynecology services; and
6.13	(11) physical health well-being and screenings and care for adults and youth-; and
6.14	(12) medications used for the treatment of opioid use disorder and nonmedication
6.15	treatment services for opioid use disorder under section 245G.22.
6.16	(c) Services outlined in this subdivision must only be authorized when an individual
6.17	demonstrates medical necessity or other eligibility as required under this chapter or applicable
6.18	state and federal laws."
6.19	Page 136, line 1, delete "and"
6.20	Page 136, line 2, after "organizations" insert "or associations"
6.21	Page 136, line 3, delete the period and insert "; and"
6.22	Page 136, after line 3, insert:
6.23	"(8) a representative from a state mental health advocacy or adult mental health provider
6.24	organization."
6.25	Page 138, after line 1, insert:
6.26	"Sec SUBSTANCE USE DISORDER TREATMENT BILLING UNITS.
6.27	The commissioner of human services must establish six new billing codes for
6.28	nonresidential substance use disorder individual and group counseling, psychoeducation,
6.29	and recovery support services. The commissioner must identify reimbursement rates for
6.30	the newly defined codes and update the substance use disorder fee schedule. The new billing

codes must correspond to a 15-minute unit and become effective for services provided on 7.1 or after July 1, 2026, or upon federal approval, whichever is later." 7.2 Page 192, after line 14, insert: 7.3 "Sec. 4. Minnesota Statutes 2024, section 256I.05, subdivision 1d, is amended to read: 7.4 Subd. 1d. Certain facilities for mental illness or substance use disorder; 7.5 supplementary rates. Notwithstanding the provisions of subdivisions 1a and 1c, A county 7.6 agency may negotiate a supplementary service rate in addition to the board and lodging rate 7.7 under subdivision 1, not to exceed the maximum rate allowed under subdivision 1a, for 7.8 facilities licensed and registered by the Minnesota Department of Health under section 7.9 157.17 prior to December 31, 1996, if the facility meets the following criteria: 7.10 (1) at least 75 percent of the residents have a primary diagnosis of mental illness, 7.11 substance use disorder, or both, and have related special needs; 7.12 7.13 (2) the facility provides 24-hour, on-site, year-round supportive services by qualified staff capable of intervention in a crisis of persons with late-state inebriety or mental illness 7 14 who are vulnerable to abuse or neglect; 7.15 (3) the services at the facility include, but are not limited to: 7.16 (i) secure central storage of medication; 7.17 (ii) reminders and monitoring of medication for self-administration; 7.18 (iii) support for developing an individual medical and social service plan, updating the 7.19 plan, and monitoring compliance with the plan; and 7.20 (iv) assistance with setting up meetings, appointments, and transportation to access 7.21 medical, chemical health, and mental health service providers; 7.22 (4) each resident has a documented need for at least one of the services provided; 7.23 (5) each resident has been offered an opportunity to apply for admission to a licensed 7.24 residential treatment program for mental illness, substance use disorder, or both, have refused 7.25 that offer, and the offer and their refusal has been documented to writing; and 7.26 (6) the residents are not eligible for home and community-based services waivers because 7.27 of their unique need for community support.

Until June 30, 2002, the supplementary service rate of qualifying facilities under this

subdivision may be increased by up to 15 percent of the supplementary service rate in effect

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on January 1, 2001, for the facility. Qualifying facilities with no supplementary service rate may negotiate a supplementary service rate not to exceed \$300 per month.

- Sec. 5. Minnesota Statutes 2024, section 256I.05, subdivision 1e, is amended to read:
- Subd. 1e. **Supplementary rate for certain facilities.** (a) Notwithstanding the provisions of subdivisions 1a and 1e, beginning July 1, 2005, A county agency shall negotiate a supplementary service rate in addition to the rate specified in subdivision 1, not to exceed \$700 per month, including any legislatively authorized inflationary adjustments the maximum rate allowed under subdivision 1a, for a housing support provider that:
- (1) is located in Hennepin County and has had a housing support contract with the county since June 1996;
- (2) operates in three separate locations a 75-bed facility, a 50-bed facility, and a 26-bed facility; and
- (3) serves a clientele with substance use disorder, providing 24 hours per day supervision and limiting a resident's maximum length of stay to 13 months out of a consecutive 24-month period.
- (b) Notwithstanding subdivisions 1a and 1e, A county agency shall negotiate a supplementary rate in addition to the rate specified in subdivision 1, not to exceed \$700 per month, including any legislatively authorized inflationary adjustments, of the maximum rate allowed under subdivision 1a, for a housing support provider that:
- (1) is located in St. Louis County and has had a housing support contract with the county since 2006;
- (2) operates a 62-bed facility; and

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- (3) serves an adult male clientele with substance use disorder, providing 24 hours per day supervision and limiting a resident's maximum length of stay to 13 months out of a consecutive 24-month period.
- (c) Notwithstanding subdivisions 1a and 1c, beginning July 1, 2013, A county agency shall negotiate a supplementary rate in addition to the rate specified in subdivision 1, not to exceed \$700 per month, including any legislatively authorized inflationary adjustments the maximum rate allowed under subdivision 1a, for the provider described under paragraphs (a) and (b), not to exceed an additional 115 beds.

Sec. 6. Minnesota Statutes 2024, section 256I.05, subdivision 1f, is amended to read:

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Subd. 1f. Supplementary service rate increases on or after July 1, 2001. Until June 30, 2002, the supplementary service rate for recipients of assistance under section 256I.04 who reside in A county agency shall negotiate a supplementary service rate in addition to the rate specified in subdivision 1, not to exceed the maximum rate under subdivision 1a, for a residence that is licensed by the commissioner of health as a boarding care home but is not certified for purposes of the medical assistance program may be increased by up to 32 percent of the supplementary service rate in effect for that facility on January 1, 2001. The new rate shall not exceed the nonfederal share of the statewide weighted average monthly medical assistance nursing facility payment rate for case mix A in effect on January 1, 2001.

- Sec. 7. Minnesota Statutes 2024, section 256I.05, subdivision 1g, is amended to read:
- Subd. 1g. **Supplementary service rate for certain facilities.** An agency may negotiate a supplementary service rate, not to exceed the maximum rate allowed under subdivision 1.

  1a, for recipients of assistance under section 256I.04, subdivision 1, paragraph (a) or (b), who have experienced long-term homelessness and who live in a supportive housing establishment under section 256I.04, subdivision 2a, paragraph (b), clause (2).
- 9.18 Sec. 8. Minnesota Statutes 2024, section 256I.05, subdivision 1h, is amended to read:
  - Subd. 1h. Supplementary rate for certain facilities serving males with substance use disorder. Notwithstanding subdivisions 1a and 1c, beginning July 1, 2007, A county agency shall negotiate a supplementary service rate in addition to the rate specified in subdivision 1, not to exceed \$737.87 per month, including any legislatively authorized inflationary adjustments the maximum rate allowed under subdivision 1a, for a housing support provider that:
  - (1) is located in Ramsey County and has had a housing support contract with the county since 1982 and has been licensed as a board and lodge facility with special services since 1979; and
- 9.28 (2) serves males with and recovering from substance use disorder, providing
  9.29 24-hour-a-day supervision.
- 9.30 Sec. 9. Minnesota Statutes 2024, section 256I.05, subdivision 1i, is amended to read:
- 9.31 Subd. 1i. **Supplementary rate for certain facilities; Hennepin County.** Notwithstanding the provisions of subdivisions 1a and 1e, A county agency shall negotiate a supplementary

service rate in addition to the rate specified in subdivision 1, not to exceed \$700 per month, including any legislatively authorized inflationary adjustments, up to the available appropriation the maximum rate allowed under subdivision 1a, for a facility located in Hennepin County with a capacity of up to 48 beds that has been licensed since 1978 as a board and lodging facility and that until August 1, 2007, operated as a licensed substance use disorder treatment program.

Sec. 10. Minnesota Statutes 2024, section 256I.05, subdivision 1j, is amended to read:

## Subd. 1j. Supplementary rate for certain facilities; Crow Wing

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County. Notwithstanding the provisions of subdivisions 1a and 1c, beginning July 1, 2007, A county agency shall negotiate a supplementary service rate in addition to the rate specified in subdivision 1, not to exceed \$700 per month, including any legislatively authorized inflationary adjustments the maximum rate allowed under subdivision 1a, for a new 65-bed facility in Crow Wing County that will serve serves persons with substance use disorder operated by a housing support provider that currently operates a 304-bed facility in Minneapolis and a 44-bed facility in Duluth which opened in January of 2006.

Sec. 11. Minnesota Statutes 2024, section 256I.05, subdivision 1k, is amended to read:

Subd. 1k. Supplementary rate for certain facilities; Stearns, Sherburne, or Benton County. Notwithstanding the provisions of this section, beginning July 1, 2009, A county agency shall negotiate a supplementary service rate in addition to the rate specified in subdivision 1, not to exceed \$700 per month, including any legislatively authorized inflationary adjustments the maximum rate allowed under subdivision 1a, for a housing support provider located in Stearns, Sherburne, or Benton County that operates a 40-bed facility, that received financing through the Minnesota Housing Finance Agency Ending Long-Term Homelessness Initiative and serves clientele with substance use disorder, providing 24-hour-a-day supervision.

Sec. 12. Minnesota Statutes 2024, section 256I.05, subdivision 11, is amended to read:

Subd. 11. **Supplementary rate for certain facilities; St. Louis County.** Notwithstanding the provisions of this section, beginning July 1, 2007, A county agency shall negotiate a supplementary service rate in addition to the rate specified in subdivision 1, not to exceed \$700 per month, including any legislatively authorized inflationary adjustments the maximum rate allowed under subdivision 1a, for a housing support provider located in St. Louis County that operates a 30-bed facility, that received financing through the Minnesota Housing

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Finance Agency Ending Long-Term Homelessness Initiative and serves clientele with substance use disorder, providing 24-hour-a-day supervision.

- Sec. 13. Minnesota Statutes 2024, section 256I.05, subdivision 1m, is amended to read:
- Subd. 1m. Supplemental Supplementary rate for certain facilities; Hennepin and 11.4 Ramsey Counties. Notwithstanding the provisions of this section, beginning July 1, 2007, 11.5 A county agency shall negotiate a supplemental supplementary service rate in addition to 11.6 11.7 the rate specified in subdivision 1, not to exceed the maximum rate in subdivision 1a or the existing monthly rate, whichever is higher, including any legislatively authorized inflationary 11.8 adjustments, for a housing support provider that operates two ten-bed facilities, one located 11.9 in Hennepin County and one located in Ramsey County, which provide community support 11.10 and serve the mental health needs of individuals who have chronically lived unsheltered, 11.11
- 11.13 Sec. 14. Minnesota Statutes 2024, section 256I.05, subdivision 1n, is amended to read:

providing 24-hour-per-day supervision.

- Subd. 1n. Supplemental Supplementary rate; Mahnomen County. Notwithstanding 11.14 the provisions of this section, for the rate period July 1, 2010, to June 30, 2011, A county 11.15 agency shall negotiate a supplemental supplementary service rate in addition to the rate 11.16 specified in subdivision 1, not to exceed \$753 per month or the existing rate, including any 11.17 legislative authorized inflationary adjustments the maximum rate allowed under subdivision 11.18 1a, for a housing support provider located in Mahnomen County that operates a 28-bed 11.19 facility providing 24-hour care to individuals who are homeless, disabled, mentally ill, 11.20 chronically homeless, or have substance use disorder. 11.21
- Sec. 15. Minnesota Statutes 2024, section 256I.05, subdivision 1p, is amended to read:
- Subd. 1p. **Supplementary rate; St. Louis County.** Notwithstanding the provisions of subdivisions 1a and 1c, beginning July 1, 2017, A county agency shall negotiate a supplementary service rate in addition to the rate specified in subdivision 1, not to exceed \$700 per month, including any legislatively authorized inflationary adjustments the maximum rate allowed under subdivision 1a, for a housing support provider that:
- (1) is located in St. Louis County and has had a housing support contract with the county since July 2016;
- (2) operates a 35-bed facility;

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(3) serves women who have substance use disorder, mental illness, or both;

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(4) provides 24-hour per day supervision;

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- (5) provides on-site support with skilled professionals, including a licensed practical nurse, registered nurses, peer specialists, and resident counselors; and
- (6) provides independent living skills training and assistance with family reunification.
- Sec. 16. Minnesota Statutes 2024, section 256I.05, subdivision 1q, is amended to read:
  - Subd. 1q. Supplemental Supplementary rate; Olmsted County. Notwithstanding the provisions of subdivisions 1a and 1c, beginning July 1, 2017, A county agency shall negotiate a supplementary service rate in addition to the rate specified in subdivision 1, not to exceed \$750 per month, including any legislatively authorized inflationary adjustments the maximum rate allowed under subdivision 1a, for a housing support provider located in Olmsted County that operates long-term residential facilities with a total of 104 beds that serve men and women with substance use disorder and provide 24-hour-a-day supervision and other support services.
- Sec. 17. Minnesota Statutes 2024, section 256I.05, subdivision 1r, is amended to read:
- Subd. 1r. Supplemental Supplementary rate; Anoka County. Notwithstanding the provisions in this section, A county agency shall negotiate a supplemental supplementary service rate for 42 beds in addition to the rate specified in subdivision 1, not to exceed the maximum rate allowed under subdivision 1a, including any legislatively authorized inflationary adjustments, for a housing support provider that is located in Anoka County and provides emergency housing on the former Anoka Regional Treatment Center campus.
  - Sec. 18. Minnesota Statutes 2024, section 256I.05, subdivision 1s, is amended to read:
  - Subd. 1s. Supplemental Supplementary rate; Douglas County. Notwithstanding the provisions of subdivisions 1a and 1e, beginning July 1, 2023, A county agency shall negotiate a supplementary service rate in addition to the rate specified in subdivision 1, not to exceed \$750 per month, including any legislatively authorized inflationary adjustments the maximum rate allowed under subdivision 1a, for a housing support provider located in Douglas County that operates a long-term residential facility with a total of 74 beds that serve chemically dependent men and provide 24-hour-a-day supervision and other support services.
    - Sec. 19. Minnesota Statutes 2024, section 256I.05, subdivision 1t, is amended to read:
- Subd. 1t. Supplemental Supplementary rate; Crow Wing County. Notwithstanding the provisions of subdivisions 1a and 1c, beginning July 1, 2023, A county agency shall

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negotiate a supplementary service rate in addition to the rate specified in subdivision 1, not to exceed \$750 per month, including any legislatively authorized inflationary adjustments the maximum rate allowed under subdivision 1a, for a housing support provider located in Crow Wing County that operates a long-term residential facility with a total of 90 beds that serves chemically dependent men and women and provides 24-hour-a-day supervision and other support services.

- Sec. 20. Minnesota Statutes 2024, section 256I.05, subdivision 1u, is amended to read:
- Subd. 1u. Supplemental Supplementary rate; Douglas County. Notwithstanding the provisions in this section, beginning July 1, 2023, A county agency shall negotiate a supplemental supplementary service rate for up to 20 beds in addition to the rate specified in subdivision 1, not to exceed the maximum rate allowed under subdivision 1a, including any legislatively authorized inflationary adjustments, for a housing support provider located in Douglas County that operates two facilities and provides room and board and supplementary services to adult males recovering from substance use disorder, mental illness, or housing instability.
- Sec. 21. Minnesota Statutes 2024, section 256I.05, subdivision 2, is amended to read:
- Subd. 2. Monthly rates; exemptions. This subdivision applies to A county agency shall 13.17 negotiate a supplementary service rate in addition to the rate specified in subdivision 1, not 13.18 to exceed the maximum rate under subdivision 1a, for a residence that on August 1, 1984, 13.19 was licensed by the commissioner of health only as a boarding care home, certified by the 13.20 commissioner of health as an intermediate care facility, and licensed by the commissioner 13.21 of human services under Minnesota Rules, parts 9520.0500 to 9520.0670. Notwithstanding 13.22 the provisions of subdivision 1c, the rate paid to a facility reimbursed under this subdivision 13.23 shall be determined under chapter 256R, if the facility is accepted by the commissioner for 13.24 13.25 participation in the alternative payment demonstration project. The rate paid to this facility shall also include adjustments to the room and board rate according to subdivision 1." 13.26
- Page 194, delete section 8

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- Page 208, after line 4, insert:
- "Sec. .... Laws 2023, chapter 61, article 9, section 2, subdivision 14, as amended by Laws
- 13.30 2024, chapter 125, article 8, section 13, is amended to read:
- 13.31 Subd. 14. Grant Programs; Aging and Adult
- 13.32 **Services Grants** 164,626,000 34,795,000

14.1	(a) Vulnerable Adult Act Redesign Phase
14.2	<b>Two.</b> \$17,129,000 in fiscal year 2024 is for
14.3	adult protection grants to counties and Tribes
14.4	under Minnesota Statutes, section 256M.42.
14.5	Notwithstanding Minnesota Statutes, section
14.6	16A.28, this appropriation is available until
14.7	June 30, 2027. The base for this appropriation
14.8	is \$866,000 in fiscal year 2026 and \$867,000
14.9	in fiscal year 2027.
14.10	(b) Caregiver Respite Services Grants.
14.11	\$1,800,000 in fiscal year 2025 is for caregiver
14.12	respite services grants under Minnesota
14.13	Statutes, section 256.9756. This is a onetime
14.14	appropriation. Notwithstanding Minnesota
14.15	Statutes, section 16A.28, subdivision 3, this
14.16	appropriation is available until June 30, 2027.
14.17	(c) Live Well at Home Grants. \$4,575,000
14.18	in fiscal year 2024 is for live well at home
14.19	grants under Minnesota Statutes, section
14.20	256.9754, subdivision 3f. This is a onetime
14.21	appropriation and is available until June 30,
14.22	2025.
14.23	(d) Senior Nutrition Program. \$10,552,000
14.24	in fiscal year 2024 is for the senior nutrition
14.25	program. Notwithstanding Minnesota Statutes,
14.26	section 16A.28, this appropriation is available
14.27	until June 30, 2027. This is a onetime
14.28	appropriation.
14.29	(e) Age-Friendly Community Grants.
14.30	\$3,000,000 in fiscal year 2024 is for the
14.31	continuation of age-friendly community grants
14.32	under Laws 2021, First Special Session
14.33	chapter 7, article 17, section 8, subdivision 1.
14.34	Notwithstanding Minnesota Statutes, section

15.1	16A.28, this is a onetime appropriation and is		
15.2	available until June 30, 2027.		
15.3	(f) Age-Friendly Technical Assistance		
15.4	<b>Grants.</b> \$1,725,000 in fiscal year 2024 is for		
15.5	the continuation of age-friendly technical		
15.6	assistance grants under Laws 2021, First		
15.7	Special Session chapter 7, article 17, section		
15.8	8, subdivision 2. Notwithstanding Minnesota		
15.9	Statutes, section 16A.28, this is a onetime		
15.10	appropriation and is available until June 30,		
15.11	2027.		
15.12	(g) Long-Term Services and Supports Loan		
15.13	<b>Program.</b> \$93,200,000 in fiscal year 2024 is		
15.14	for the long-term services and supports loan		
15.15	program under Minnesota Statutes, section		
15.16	256R.55, and is available as provided therein.		
15.17	(h) Base Level Adjustment. The general fund		
15.18	base is \$33,861,000 in fiscal year 2026 and		
15.19	\$33,862,000 in fiscal year 2027.		
15.20	<b>EFFECTIVE DATE.</b> This section is effective	the day following final enac	tment.
15.21	Sec Laws 2023, chapter 61, article 9, section	2, subdivision 14, as amend	ed by Laws
15.22	2024, chapter 127, article 53, section 13, is amende	ed to read:	•
15.23 15.24	Subd. 14. Grant Programs; Aging and Adult Services Grants	164,626,000	34,795,000
15.25	(a) Vulnerable Adult Act Redesign Phase		
15.26	<b>Two.</b> \$17,129,000 in fiscal year 2024 is for		
15.27	adult protection grants to counties and Tribes		
15.28	under Minnesota Statutes, section 256M.42.		
15.29	Notwithstanding Minnesota Statutes, section		
15.30	16A.28, this appropriation is available until		
15.31	June 30, 2027. The base for this appropriation		
15.32	is \$866,000 in fiscal year 2026 and \$867,000		
15.33	in fiscal year 2027.		

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16.1	(b) Caregiver Respite Services Grants.
16.2	\$1,800,000 in fiscal year 2025 is for caregiver
16.3	respite services grants under Minnesota
16.4	Statutes, section 256.9756. This is a onetime
16.5	appropriation. Notwithstanding Minnesota
16.6	Statutes, section 16A.28, subdivision 3, this
16.7	appropriation is available until June 30, 2027.
16.8	(c) Live Well at Home Grants. \$4,575,000
16.9	in fiscal year 2024 is for live well at home
16.10	grants under Minnesota Statutes, section
16.11	256.9754, subdivision 3f. This is a onetime
16.12	appropriation and is available until June 30,
16.13	2025.
16.14	(d) Senior Nutrition Program. \$10,552,000
16.15	in fiscal year 2024 is for the senior nutrition
16.16	program. Notwithstanding Minnesota Statutes,
16.17	section 16A.28, this appropriation is available
16.18	until June 30, 2027. This is a onetime
16.19	appropriation.
16.20	(e) Age-Friendly Community Grants.
16.21	\$3,000,000 in fiscal year 2024 is for the
16.22	continuation of age-friendly community grants
16.23	under Laws 2021, First Special Session
16.24	chapter 7, article 17, section 8, subdivision 1.
16.25	Notwithstanding Minnesota Statutes, section
16.26	16A.28, this is a onetime appropriation and is
16.27	available until June 30, 2027.
16.28	(f) Age-Friendly Technical Assistance
16.29	<b>Grants.</b> \$1,725,000 in fiscal year 2024 is for
16.30	the continuation of age-friendly technical
16.31	assistance grants under Laws 2021, First
16.32	Special Session chapter 7, article 17, section
16.33	8, subdivision 2. Notwithstanding Minnesota
16.34	Statutes, section 16A.28, this is a onetime

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- appropriation and is available until June 30,
- 17.2 2027.
- 17.3 (g) Long-Term Services and Supports Loan
- 17.4 **Program.** \$93,200,000 in fiscal year 2024 is
- for the long-term services and supports loan
- 17.6 program under Minnesota Statutes, section
- 17.7 256R.55, and is available as provided therein.
- 17.8 **(h) Base Level Adjustment.** The general fund
- 17.9 base is \$33,861,000 in fiscal year 2026 and
- 17.10 \$33,862,000 in fiscal year 2027.
- 17.11 **EFFECTIVE DATE.** This section is effective the day following final enactment."
- 17.12 Renumber the sections in sequence and correct internal references