

**Subject** Children's intensive behavioral health services

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**Date** March 29, 2022

## Overview

This bill, as amended, expands the medical assistance benefit for intensive treatment in foster care services to be available for children who reside with their families, not in foster care. It also requires the commissioner of human services to request additional federal funding to support collaborative intensive bridging services, requires the commissioner to report to the legislature on a plan to establish the integrated therapeutic services model as a Medicaid benefit, and appropriates money from the general fund for grants related to collaborative intensive bridging services and high-fidelity wraparound services.

## Summary

Section	Description
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1	<b>Children's intensive behavioral health services.</b>
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Amends § 256B.0946. Expands and renames intensive treatment in foster care services as children's intensive behavioral health services.

**Subd. 1. Required service components.** Allows intensive behavioral health treatment services to be provided under this section to children with mental illness residing with family.

**Subd. 1a. Definitions.** Strikes definition of "foster family setting" for purposes of this section.

**Subd. 2. Determination of client eligibility.** Strikes language limiting services to children and youth in foster care; modifies information that must be included in the level of care assessment and functional assessment, based on the eligibility expansion.

**Subd. 3. Eligible mental health services providers.** Modifies terminology.

**Subd. 4. Service delivery payment requirements.** Modifies terminology; simplifies service delivery and billing requirements, requiring at least six hours of

Section	Description
	<p>treatment per week. Modifies encounter rate from a daily to weekly per-client encounter rate and increases hours required for specified services.</p> <p><b>Subd. 5. Service authorization.</b> No changes to subdivision.</p> <p><b>Subd. 6. Excluded services.</b> Modifies terminology; removes children’s mental health day treatment services from list of excluded services.</p> <p><b>Subd. 7. Medical assistance payment and rate setting.</b> Modifies terminology and modifies encounter rate from a daily to weekly per-client encounter rate. Adds paragraph (b), requiring a 25 percent rate increase for providers to increase staff wages.</p>
2	<p><b>Direction to commissioner; collaborative intensive bridging services.</b> By June 30, 2026, requires the commissioner to request additional federal funding to support collaborative intensive bridging services. Specifies requirements for making the request.</p>
3	<p><b>Direction to commissioner; integrated therapeutic services model.</b> By February 1, 2023, requires the commissioner to report to the legislature on a plan to establish the integrated therapeutic services model as a Medicaid benefit. Requires the commissioner to consult with school districts and service providers to develop the plan. Lists required components of the legislative report.</p>
4	<p><b>Appropriations; collaborative intensive bridging services.</b> Appropriates money in fiscal year 2023 from the general fund to the commissioner for grants to sustain existing mental health infrastructure, related to collaborative intensive bridging services. Specifies base appropriations through fiscal year 2026.</p>
5	<p><b>Appropriations; high-fidelity wraparound services.</b> Appropriates money in fiscal year 2023 from the general fund to the commissioner for grants to sustain existing mental health infrastructure, related to certified high-fidelity wraparound services sites. Allows funds to be used for limited expansion of such sites. Specifies base appropriations through fiscal year 2025.</p>



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