

1.1 moves to amend H.F. No. 4360 as follows:

1.2 Delete everything after the enacting clause and insert:

1.3 "Section 1. Minnesota Statutes 2022, section 256B.076, is amended by adding a subdivision
1.4 to read:

1.5 Subd. 4. Case management provided under contract. If a county agency provides
1.6 case management under contracts with other individuals or agencies, the county agency
1.7 must initiate a competitive proposal process for the procurement of contracted case
1.8 management services at least every two years. The competitive proposal process must
1.9 include evaluation criteria to ensure that the county maintains a culturally specific program
1.10 for case management services, as defined in section 256B.076, subdivision 3, adequate to
1.11 meet the needs of the population of the county.

1.12 EFFECTIVE DATE. This section is effective August 1, 2024, and applies to contracts
1.13 entered into or renewed on or after that date.

1.14 Sec. 2. Minnesota Statutes 2023 Supplement, section 256B.092, subdivision 1a, is amended
1.15 to read:

1.16 Subd. 1a. **Case management services.** (a) Each recipient of a home and community-based
1.17 waiver shall be provided case management services by qualified vendors as described in
1.18 the federally approved waiver application.

1.19 (b) Case management service activities provided to or arranged for a person include:

1.20 (1) development of the person-centered support plan under subdivision 1b;

1.21 (2) informing the individual or the individual's legal guardian or conservator, or parent
1.22 if the person is a minor, of service options, including all service options available under the
1.23 waiver plan;

- 2.1 (3) consulting with relevant medical experts or service providers;
- 2.2 (4) assisting the person in the identification of potential providers of chosen services,
- 2.3 including:
- 2.4 (i) providers of services provided in a non-disability-specific setting;
- 2.5 (ii) employment service providers;
- 2.6 (iii) providers of services provided in settings that are not controlled by a provider; and
- 2.7 (iv) providers of financial management services;
- 2.8 (5) assisting the person to access services and assisting in appeals under section 256.045;
- 2.9 (6) coordination of services, if coordination is not provided by another service provider;
- 2.10 (7) evaluation and monitoring of the services identified in the support plan, which must
- 2.11 incorporate at least one annual face-to-face visit by the case manager with each person; and
- 2.12 (8) reviewing support plans and providing the lead agency with recommendations for
- 2.13 service authorization based upon the individual's needs identified in the support plan.
- 2.14 (c) Case management service activities that are provided to the person with a
- 2.15 developmental disability shall be provided directly by county agencies or under contract.
- 2.16 If a county agency contracts for case management services, the county agency must provide
- 2.17 each recipient of home and community-based services who is receiving contracted case
- 2.18 management services with the contact information the recipient may use to file a grievance
- 2.19 with the county agency about the quality of the contracted services the recipient is receiving
- 2.20 from a county-contracted case manager. If a county agency provides case management
- 2.21 under contracts with other individuals or agencies, the county agency must initiate a
- 2.22 competitive proposal process for the procurement of contracted case management services
- 2.23 at least every two years. The competitive proposal process must include evaluation criteria
- 2.24 to ensure that the county maintains a culturally specific program for case management
- 2.25 services, as defined in section 256B.076, subdivision 3, adequate to meet the needs of the
- 2.26 population of the county.
- 2.27 (d) Case management services must be provided by a public or private agency that is
- 2.28 enrolled as a medical assistance provider determined by the commissioner to meet all of
- 2.29 the requirements in the approved federal waiver plans. Case management services must not
- 2.30 be provided to a recipient by a private agency that has a financial interest in the provision
- 2.31 of any other services included in the recipient's support plan. For purposes of this section,

3.1 "private agency" means any agency that is not identified as a lead agency under section
3.2 256B.0911, subdivision 10.

3.3 ~~(d)~~ (e) Case managers are responsible for service provisions listed in paragraphs (a) and
3.4 (b). Case managers shall collaborate with consumers, families, legal representatives, and
3.5 relevant medical experts and service providers in the development and annual review of the
3.6 person-centered support plan and habilitation plan.

3.7 ~~(e)~~ (f) For persons who need a positive support transition plan as required in chapter
3.8 245D, the case manager shall participate in the development and ongoing evaluation of the
3.9 plan with the expanded support team. At least quarterly, the case manager, in consultation
3.10 with the expanded support team, shall evaluate the effectiveness of the plan based on progress
3.11 evaluation data submitted by the licensed provider to the case manager. The evaluation must
3.12 identify whether the plan has been developed and implemented in a manner to achieve the
3.13 following within the required timelines:

3.14 (1) phasing out the use of prohibited procedures;

3.15 (2) acquisition of skills needed to eliminate the prohibited procedures within the plan's
3.16 timeline; and

3.17 (3) accomplishment of identified outcomes.

3.18 If adequate progress is not being made, the case manager shall consult with the person's
3.19 expanded support team to identify needed modifications and whether additional professional
3.20 support is required to provide consultation.

3.21 ~~(f)~~ (g) The Department of Human Services shall offer ongoing education in case
3.22 management to case managers. Case managers shall receive no less than 20 hours of case
3.23 management education and disability-related training each year. The education and training
3.24 must include person-centered planning, informed choice, cultural competency, employment
3.25 planning, community living planning, self-direction options, and use of technology supports.
3.26 By August 1, 2024, all case managers must complete an employment support training course
3.27 identified by the commissioner of human services. For case managers hired after August
3.28 1, 2024, this training must be completed within the first six months of providing case
3.29 management services. For the purposes of this section, "person-centered planning" or
3.30 "person-centered" has the meaning given in section 256B.0911, subdivision 10. Case
3.31 managers must document completion of training in a system identified by the commissioner.

3.32 **EFFECTIVE DATE.** This section is effective August 1, 2024, and applies to contracts
3.33 entered into or renewed on or after that date.

4.1 Sec. 3. Minnesota Statutes 2023 Supplement, section 256B.49, subdivision 13, is amended
4.2 to read:

4.3 Subd. 13. **Case management.** (a) Each recipient of a home and community-based waiver
4.4 shall be provided case management services by qualified vendors as described in the federally
4.5 approved waiver application. The case management service activities provided must include:

4.6 (1) finalizing the person-centered written support plan within the timelines established
4.7 by the commissioner and section 256B.0911, subdivision 29;

4.8 (2) informing the recipient or the recipient's legal guardian or conservator of service
4.9 options, including all service options available under the waiver plans;

4.10 (3) assisting the recipient in the identification of potential service providers of chosen
4.11 services, including:

4.12 (i) available options for case management service and providers;

4.13 (ii) providers of services provided in a non-disability-specific setting;

4.14 (iii) employment service providers;

4.15 (iv) providers of services provided in settings that are not community residential settings;

4.16 and

4.17 (v) providers of financial management services;

4.18 (4) assisting the recipient to access services and assisting with appeals under section
4.19 256.045; and

4.20 (5) coordinating, evaluating, and monitoring of the services identified in the service
4.21 plan.

4.22 (b) The case manager may delegate certain aspects of the case management service
4.23 activities to another individual provided there is oversight by the case manager. The case
4.24 manager may not delegate those aspects which require professional judgment including:

4.25 (1) finalizing the person-centered support plan;

4.26 (2) ongoing assessment and monitoring of the person's needs and adequacy of the
4.27 approved person-centered support plan; and

4.28 (3) adjustments to the person-centered support plan.

4.29 (c) Case management services must be provided by a public or private agency that is
4.30 enrolled as a medical assistance provider determined by the commissioner to meet all of
4.31 the requirements in the approved federal waiver plans. If a county agency provides case

5.1 management under contracts with other individuals or agencies, the county agency must
5.2 initiate a competitive proposal process for the procurement of contracted case management
5.3 services at least every two years. The competitive proposal process must include evaluation
5.4 criteria to ensure that the county maintains a culturally specific program for case management
5.5 services, as defined in section 256B.076, subdivision 3, adequate to meet the needs of the
5.6 population of the county.

5.7 (d) Case management services must not be provided to a recipient by a private agency
5.8 that has any financial interest in the provision of any other services included in the recipient's
5.9 support plan. For purposes of this section, "private agency" means any agency that is not
5.10 identified as a lead agency under section 256B.0911, subdivision 10.

5.11 ~~(d)~~ (e) For persons who need a positive support transition plan as required in chapter
5.12 245D, the case manager shall participate in the development and ongoing evaluation of the
5.13 plan with the expanded support team. At least quarterly, the case manager, in consultation
5.14 with the expanded support team, shall evaluate the effectiveness of the plan based on progress
5.15 evaluation data submitted by the licensed provider to the case manager. The evaluation must
5.16 identify whether the plan has been developed and implemented in a manner to achieve the
5.17 following within the required timelines:

5.18 (1) phasing out the use of prohibited procedures;

5.19 (2) acquisition of skills needed to eliminate the prohibited procedures within the plan's
5.20 timeline; and

5.21 (3) accomplishment of identified outcomes.

5.22 If adequate progress is not being made, the case manager shall consult with the person's
5.23 expanded support team to identify needed modifications and whether additional professional
5.24 support is required to provide consultation.

5.25 ~~(e)~~ (f) The Department of Human Services shall offer ongoing education in case
5.26 management to case managers. Case managers shall receive no less than 20 hours of case
5.27 management education and disability-related training each year. The education and training
5.28 must include person-centered planning, informed choice, cultural competency, employment
5.29 planning, community living planning, self-direction options, and use of technology supports.
5.30 By August 1, 2024, all case managers must complete an employment support training course
5.31 identified by the commissioner of human services. For case managers hired after August
5.32 1, 2024, this training must be completed within the first six months of providing case
5.33 management services. For the purposes of this section, "person-centered planning" or

6.1 "person-centered" has the meaning given in section 256B.0911, subdivision 10. Case
6.2 managers shall document completion of training in a system identified by the commissioner.

6.3 **EFFECTIVE DATE.** This section is effective August 1, 2024, and applies to contracts
6.4 entered into or renewed on or after that date.

6.5 Sec. 4. Minnesota Statutes 2022, section 256S.07, subdivision 1, is amended to read:

6.6 Subdivision 1. **Elderly waiver case management provided by counties and tribes.** (a)
6.7 For participants not enrolled in a managed care organization, the county of residence or
6.8 tribe must provide or arrange to provide elderly waiver case management activities under
6.9 section 256S.09, subdivisions 2 and 3.

6.10 (b) If a county agency provides case management under contracts with other individuals
6.11 or agencies, the county agency must initiate a competitive proposal process for the
6.12 procurement of contracted case management services at least every two years. The
6.13 competitive proposal process must include evaluation criteria to ensure that the county
6.14 maintains a culturally specific program for case management services, as defined in section
6.15 256B.076, subdivision 3, adequate to meet the needs of the population of the county.

6.16 **EFFECTIVE DATE.** This section is effective August 1, 2024, and applies to contracts
6.17 entered into or renewed on or after that date."

6.18 Amend the title accordingly