

# House Research Act Summary

**CHAPTER:** 167

**SESSION:** 2009 Regular Session

**TOPIC:** DHS Mental Health Policy

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## Overview

This department bill makes technical amendments related to adult mental health services, including rate setting requirements. It modifies components of children's therapeutic services and supports, and changes supervision requirements for various mental health practitioners.

### Section

- 1 Other professionals.** Amends § 148C.11, subd. 1. Continues an exclusion from licensure for alcohol and drug counselors who provide integrated dual-diagnosis treatment in specified adult mental health rehabilitative programs.
- 2 Required expenditures.** Amends §245.4835, subd. 1. Modifies county mental health maintenance of effort provisions to simplify administration and improve budgeting predictability. Allows the commissioner to adjust a county's minimum required expenditures and the county base. (Laws 2009, chapter 88, article 2, section 21, suspends new or increased MOE spending requirements that may be placed on a political subdivision until July 1, 2011, unless required by federal law.)
- 3 Failure to maintain expenditures.** Amends §245.4835, subd. 2. Adds a list of factors to be considered by the commissioner when approving a county's corrective action plan.
- 4 Mental health practitioner.** Amends §245.4871, subd. 26. Adds that work as a mental health behavioral aide may be included in the 6,000 hours of experience required to become a mental health practitioner.
- 5 Admission criteria.** Amends § 245.4885, subd. 1. Eliminates the requirement for a county

board to make a level of care determination for children admitted to an acute care hospital for treatment of severe emotional disturbance.

- 6 Special contracts; bordering states.** Amends § 245.50, subd. 5. Permits an examiner in a bordering state to initiate an emergency hold on a Minnesota resident who is in a hospital in the bordering state if the resident meets the criteria for an emergency hold.
- 7 Scope.** Amends § 256B.0615, subd. 1. Adds medical assistance coverage for certified peer specialists who provide services to individuals who are eligible for adult crisis response services.
- 8 Eligibility.** Amends § 256B.0615, subd. 3. Allows peer support services to be offered to consumers of crisis stabilization services.
- 9 Medical assistance payment for intensive rehabilitative mental health services.** Amends § 256B.0622, subd. 8. Adds that if a single entity provides both intensive residential treatment and assertive community treatment, then one rate is established for residential services and another for the assertive community treatment. Requires that the proposed costs comply with federal requirements.
- Provides that the proposed costs are effective for services provided on or after January 1, 2010, until December 31, 2011. The new costs cannot change contracts for services provided prior to the effective date.
- 10 Adjustments based on actual costs and units.** Amends § 256B.0622, by adding subd. 8a. Codifies the payment settle up process for intensive rehabilitative mental health services to comply with federal requirements.
- Provides that the proposed costs are effective for services provided on or after January 1, 2010, until December 31, 2011. The new costs cannot change contracts for services provided prior to the effective date.
- 11 Qualifications of provider staff.** Amends § 256B.0623, subd. 5. Clarifies the qualifications of a mental health rehabilitation worker for purposes of medical assistance reimbursement for adult rehabilitative mental health services.
- 12 Adult crisis stabilization staff qualifications.** Amends § 256B.0624, subd. 8. Adds certified peer specialists as providers for adult crisis stabilization services. Requires the peer specialist to work under the clinical supervision of a mental health professional.
- 13 Community health worker.** Amends § 256B.0625, subd. 49. Adds that a mental health professional can provide the supervised work experience needed for a community health worker. Adds mental health professionals to the list of professionals who can supervise a community health worker.
- 14 Definitions.** Amends § 256B.0943, subd. 1. Amends children’s therapeutic services and supports definitions. Adds the definition of “mental health behavioral aide services.” Redefines “skills training.”
- 15 Covered service components of children’s therapeutic services and supports.** Amends § 256B.0943, subd. 2. Requires a provider to be certified as a provider entity under subdivision 4. Clarifies covered services.

- 16 Provider entity certification.** Amends § 256B.0943, subd. 4. Clarifies that the state is responsible for certifying provider entities.
- 17 Provider entity administrative infrastructure requirements.** Amends § 256B.0943, subd. 5. Clarifies the written policies and procedures which are to address administrative infrastructure requirements.
- 18 Provider entity clinical infrastructure requirements.** Amends § 256B.0943, subd. 6. Adds that a child's individual treatment plan must identify goals and objectives of treatment, including strategies to achieve identified goals, must be developed after the child's diagnostic assessment and before the provision of services, and must be signed by the clinical supervisor.
- Adds a provision that medical assistance will reimburse for children's therapeutic services and supports delivered by a mental health behavioral aide who has a consulting relationship with a mental health professional. Requires the mental health professional to provide at least one hour of observation during the first 12 hours of service provision by the aide.
- 19 Qualifications of individual and team providers.** Amends § 256B.0943, subd. 7. Requires a mental health behavioral aide to work under the clinical supervision of a mental health professional.
- 20 Service delivery criteria.** Amends § 256B.0943, subd. 9. Changes the requirement for day treatment program hours. Current law requires these programs to be available at least one day a week for a three hour time block; the new law requires them to be available three hours per day, five days a week, and 12 months of the year.
- Changes the requirement for therapeutic preschool hours. Current law requires the programs to be available at least one day per week for a minimum two hour time block. The new law changes this to two hours per day, five days a week, and 12 months of the year.
- Strikes language in the sections on day treatment programs and therapeutic preschools that permits recreational therapy, socialization therapy, or independent living skills therapy as a reimbursable service and substitutes individual or group skills training. Permits providing fewer than the required hours when a child is transitioning into or out of the program.
- Provides that mental health behavioral aide services must be medically necessary, identified in the child's individual treatment plan and individual behavior plan, and designed to improve the functioning of the child. Lists appropriate services.
- 21 Mobile crisis intervention staff qualifications.** Amends § 256B.0944, subd. 5. Changes a statutory cross-reference.