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Overview

This bill provides for state-only MA funding for services provided to children with severe emotional disturbance in a residential facility that is an institution for mental diseases (IMD). An IMD is defined in federal law as any “hospital, nursing facility, or other institution of more than 16 beds, that is primarily engaged in providing diagnosis, treatment, or care of persons with mental diseases” Federal law prohibits payment of a Medicaid federal match for most services provided to persons under age 65 in an IMD. This bill also requires the commissioner of human services to develop recommendations for a continuum of care for children with serious mental health needs, and report to the legislature by November 15, 2018.

Section

- 1 **Covered services.** Amends § 256B.0945, subd. 2. Provides that MA covers mental health services provided to children with severe emotional disturbance in a residential facility determined by CMS to be an institution for mental diseases, except for room and board, using state-only MA funding.
- 2 **Payment rates.** Amends § 256B.0945, subd. 4. Provides that payments to counties, for services provided to children with severe emotional disturbance by a residential facility that is determined to be an institution for mental diseases, shall be equivalent to the federal share of the payment that would have been made were the facility not an institution for mental diseases. Requires the portion of payment representing what would be the nonfederal share to be paid by the county. Specifies other payment criteria and makes conforming changes.

Section

- 3** **Children’s mental health report and recommendations.** Requires the commissioner of human services to conduct a comprehensive analysis of Minnesota’s continuum of intensive mental health services and develop recommendations for a sustainable and community-driven continuum of care for children with serious mental health needs, including children served in residential treatment. Lists criteria for the analysis. Requires the analysis to be supported and informed by extensive stakeholder engagement. Requires the commissioner to present the report with specific recommendations and implementation timelines to the legislative committees with jurisdiction over children’s mental health policy and finance by November 15, 2018.