

Subject Department of Human Services Housing; Chemical and Mental Health Policy Bill

Authors Edelson

Analyst Danyell Punelli
Sarah Sunderman

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Article 1: Housing

This article makes various changes to the Housing Support Program.

The Housing Support Program (formerly known as group residential housing or GRH) is a state program that provides payments on behalf of eligible persons to pay for room and board and related housing services.

Section	Description
1	Supplementary services. Amends § 256I.03, subd. 8. Modifies the definition of “supplementary services” under the housing support program to include tenancy supports, supportive services, employment supports, and health supervision services.
2	Supportive housing. Amends § 256I.03, subd. 15. Modifies the definition of “supportive housing” under the housing support program to mean housing that is not time limited and provides or coordinates services necessary for a resident to maintain housing stability.
3	Individual eligibility requirements. Amends § 256I.04, subd. 1. Modifies eligibility requirements for the housing support program by prohibiting individuals who receive ongoing rental subsidies from being eligible for housing supports, unless the individual is eligible due to receipt of licensed residential crisis stabilization services and MA.
4	License required; staffing qualifications. Amends § 256I.04, subd. 2a. Modifies requirements under the housing support program related to supportive housing establishments.
5	Housing support agreements. Amends § 256I.04, subd. 2b. Modifies the list of items providers are required to verify as part of the agreement to include verification that the provider complies with the

Section	Description
	prohibition on limiting or restricting the number of hours an applicant or recipient is employed.
6	Required supplementary services. Amends § 256I.04, by adding subd. 2h. Requires providers of supplementary services to: (1) ensure that a recipient has assistance with services identified in the recipient’s professional statement of need; and (2) maintain case notes with the date and description of services provided to each recipient.
7	Employment. Amends § 256I.04, by adding subd. 5. Prohibits providers from limiting or restricting the number of hours an applicant or recipient is employed.
8	Rate increases. Amends § 256I.05, subd. 1c. Removes language requiring prior approval of absences and instead requires advance reporting of absences.
9	Repealer. Repeals Minn. Stat. § 256I.05, subd. 3 (limits on rates).

Article 2: Chemical and Mental Health

This article adds definitions to 245G, the chapter governing licensure of chemical dependency treatment programs, and makes clarifying changes and updates throughout that chapter and related sections. This article also makes clarifying changes to sections governing psychiatric residential treatment facilities.

Section	Description
1	Client. Amends § 245G.01, subd. 8. Clarifies that “client” also includes “patient,” as defined in section 144.651, subdivision 2.
2	Day of service initiation. Amends § 245G.01 by adding subd. 10a. Defines “day of service initiation.”

Section	Description
3	<p>Person-centered. Amends § 245G.01 by adding subd. 20a. Defines “person-centered.”</p>
4	<p>Staff or staff member. Amends § 245G.01 by adding subd. 20b. Defines “staff” and “staff member.”</p>
5	<p>Student intern. Amends § 245G.01, subd. 21. Clarifies definition of “student intern.”</p>
6	<p>Treatment week. Amends § 245G.01 by adding subd. 28. Adds definition of “treatment week.”</p>
7	<p>Volunteer. Amends § 245G.01 by adding subd. 29. Adds definition of “volunteer.”</p>
8	<p>Service initiation. Amends § 245G.04.</p> <p>Subd. 1. Initial services plan. Clarifies requirements for a person-centered, client-specific initial services plan, to be completed within 24 hours of the day of service initiation.</p> <p>Subd. 2. Vulnerable adult status. Clarifies requirement for determining whether a client is a vulnerable adult.</p>
9	<p>Comprehensive assessment and assessment summary. Amends § 245G.05.</p> <p>Subd. 1. Comprehensive assessment. Clarifies terminology and timing, process, and content requirements for comprehensive assessments. Includes medical concerns or diagnoses.</p> <p>Subd. 2. Assessment summary. Clarifies timing and process for assessment summaries.</p>

Section	Description
10	<p>General. Amends § 245G.06, subd. 1.</p> <p>Clarifies requirements for individual treatment plans. Requires plans to be person-centered, involve family if the client chooses to do so, and requires opioid treatment programs to complete a treatment plan within 21 days of service initiation.</p>
11	<p>Plan contents. Amends § 245G.06, subd. 2.</p> <p>Modifies individual treatment plan content to include information related to peer support services.</p>
12	<p>Service discharge summary. Amends § 245G.06, subd. 4.</p> <p>Requires verification that the client received a copy of the client’s service discharge summary. Modifies required content for service discharge summaries.</p>
13	<p>Treatment service. Amends § 245G.07.</p> <p>Subd. 1. Treatment service.. Clarifies documentation and staff requirements for residential and nonresidential treatment programs.</p> <p>Subd. 2. Additional treatment service. Adds peer recovery support services to list of additional treatment service.</p> <p>Subd. 3. Counselors. Removes limitation on therapeutic recreation; requires commissioner to maintain a current list of professionals qualified to provide treatment services.</p> <p>Subd. 4. Location of service provision. Allows a license holder to provide additional treatment services off-site, under specified circumstances.</p>
14	<p>Standing order protocol. Amends § 245G.08, subd. 3.</p> <p>Clarifies provisions governing naloxone training.</p>
15	<p>Staff requirement. Amends § 245G.10, subd. 4.</p>

Section	Description
	Strikes language limiting counselor supervision, which is moved to section 256G.22.
16	Treatment coordination provider qualifications. Amends § 245G.11, subd. 7. Clarifies that treatment coordination providers must meet the qualifications for an alcohol and drug counselor, or meet other standards listed in the subdivision.
17	Recovery peer qualifications. Amends § 245G.11, subd. 8. Clarifies recovery peer qualifications by specifying acceptable credentialing organizations.
18	Provider policies and procedures. Amends § 245G.12. Requires a license holder to identify a “treatment week” as part of the license holder’s policies and procedures.
19	Personnel policy requirements. Amends § 245G.13, subd. 1. Updates terminology.
20	Explanation. Amends § 245G.15, subd. 1. Clarifying language change related to service initiation.
21	Grievance procedure. Amends § 245G.15, subd. 2. Clarifying language change related to service initiation.
22	Staff ratios. Amends § 245G.18, subd. 3. Removes requirement for counselors to devote at least 25 percent of work hours to indirect services.
23	Program requirements. Amends § 245G.18, subd. 5.

Section	Description
	Updates terminology.
24	Additional requirements. Amends § 245G.22, subd. 1. Modifies standards for opioid treatment programs; requires registration with the federal Drug Enforcement Administration, accreditation, certification, and licensure by the Board of Pharmacy.
25	Definitions. Amends § 245G.22, subd. 2. Clarifies “medical director” definition for opioid treatment; adds “practitioner” definition.
26	Medication orders. Amends § 245G.22, subd. 3. Updates terminology based on definition changes in subdivision 2.
27	High dose requirements. Amends § 245G.22, subd. 4. Updates terminology based on definition changes in subdivision 2.
28	Criteria for unsupervised use. Amends § 245G.22, subd. 6. Updates terminology based on definition changes in subdivision 2. Removes requirement for the medical director to make certain treatment program decisions on dispensing medication for unsupervised use.
29	Restrictions for unsupervised use of methadone hydrochloride. Amends § 245G.22, subd. 7. Clarifies medical director’s role in assessing and determining the criteria for a client to receive methadone doses for unsupervised use.

Section	Description
30	<p>Nonmedication treatment services; documentation.</p> <p>Amends § 245G.22, subd. 15.</p> <p>Modifies treatment plan review timing and documentation requirements.</p>
31	<p>Prescription monitoring program.</p> <p>Amends § 245G.22, subd. 16.</p> <p>Updates terminology and documentation requirements for the prescription monitoring program.</p>
32	<p>Policies and procedures.</p> <p>Amends § 245G.22, subd. 17.</p> <p>Updates requirements related to medication doses for unsupervised use; requires that the medical director is informed of outcomes resulting in possible diversion of doses; prohibits a counselor in an opioid treatment program from supervising more than 50 clients.</p>
33	<p>Placing authorities.</p> <p>Amends § 245G.22, subd. 19.</p> <p>Updates terminology.</p>
34	<p>Eligibility to receive peer recovery support and treatment service coordination.</p> <p>Amends § 254B.04 by adding subd. 2c.</p> <p>Clarifies peer recovery support and treatment service coordination eligibility to align with the federally-approved state plan.</p>
35	<p>Licensure required.</p> <p>Amends § 254B.05, subd. 1.</p> <p>Updates cross-reference.</p>

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36	<p>Rate requirements.</p> <p>Amends § 254B.05, subd. 5.</p> <p>Removes obsolete effective dates and cross-references.</p>
37	<p>Eligibility.</p> <p>Amends § 256B.0941, subd. 1.</p> <p>Specifies that a state medical review agent determination of medical necessity is not required for psychiatric residential treatment facility services.</p>
38	<p>Per diem rate.</p> <p>Amends § 256B.0941, subd. 3.</p> <p>Allows a psychiatric residential treatment facility or the licensed professional providing services to bill for arranged services.</p>



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