

H.F. 1281

As introduced

Subject Behavioral health home services

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Overview

Medical assistance has covered behavioral health home services in Minnesota since July 2016, under the health home model provision of the Affordable Care Act. Behavioral health homes offer services for primary care, mental health, substance use disorder treatment, long-term services and support, and social services, for persons with serious mental illness or emotional disturbance. This bill modifies provisions governing health home services under MA and establishes provider and service requirements specific to behavioral health homes.

Summary

Section Description 1 Provision of coverage. Amends § 256B.0757, subd. 1.

Modifies cross-reference.

2 Eligible individual.

Amends § 256B.0757, subd. 2.

Modifies provisions governing health home services. Permits commissioner to develop health home models that comply with federal law. Allows for coverage of health home services for persons eligible for medical assistance who have a mental illness or emotional disturbance.

3 **Designated provider.**

Amends § 256B.0757, subd. 4.

Removes paragraph directing the commissioner to develop and implement certification standards for behavioral health homes.

4 Payments.

Amends § 256B.0757, subd. 5.

Section Description

Requires the commissioner to develop a single, statewide reimbursement rate for behavioral health homes.

5 **Discharge criteria.**

Amends § 256B.0757 by adding subd. 9.

Paragraph (a) specifies that an individual may be discharged from a behavioral health home if:

- The provider cannot locate, contact, and engage the individual for over three months, after persistent efforts; or
- the individual is unwilling to participate in behavioral health home services.

Paragraph (b) requires the provider to offer a face-to-face meeting with the individual, the individual's identified supports, and the provider to discuss available options, prior to discharge.

6 Behavioral health home services provider requirements.

Amends § 256B.0757 by adding subd. 10.

Requires a behavioral health home services provider to:

- 1) Be an enrolled Minnesota Health Care Programs provider;
- 2) Provide MA-covered primary care or behavioral health service;
- 3) Use electronic health records;
- 4) Use an electronic patient registry;
- 5) Demonstrate capacity to administer approved screenings for substance use disorder or alcohol and tobacco use;
- 6) Demonstrate capacity to make appropriate referrals;
- 7) Have policies and procedures to track and evaluate referrals;
- 8) Conduct a brief needs assessment when services begin;
- 9) Conduct a health wellness assessment with 60 days of intake;
- 10) Conduct a health action plan within 90 days of intake, and at least once every six months;
- 11) Agree to cooperate with state monitoring and evaluation of services; and
- 12) Use an approved form to obtain written consent for behavioral health home services.

7 Provider training and practice transformation requirements.

Amends § 256B.0757 by adding subd. 11.

Paragraph (a) requires providers to ensure that staff delivering behavioral health home services complete adequate training; specifies what training must include.

Section Description

Paragraph (b) requires providers to ensure that staff are capable of delivering culturally responsive services.

Paragraph (c) requires providers to participate in the department's practice transformation activities to support continued skill and competency development.

8 Staff qualifications.

Amends § 256B.0757 by adding subd. 12.

Paragraph (a) requires providers to maintain staff with required and appropriate professional qualifications.

Paragraph (b) requires an integration specialist to be a licensed registered nurse if behavioral health home services are offered in a mental health setting.

Paragraph (c) requires an integration specialist to be a mental health professional if behavioral health home services are offered in a primary care setting.

Paragraph (d) requires the systems navigator to be a mental health practitioner or community health worker, as defined in statute, if behavioral health home services are provided in a mental health or primary care setting.

Paragraph (e) specifies requirements for the qualified health home specialist position.

9 Service delivery standards.

Amends § 256B.0757 by adding subd. 13.

Paragraph (a) lists service delivery standards a behavioral health home provider must meet.

Paragraph (b) requires the provider to create a plan with the individual and the individual's supports, to support the individual after discharge from a hospital, residential treatment program, or other setting. Specifies protocols that must be included in the plan.

Paragraph (c) specifies requirements for notification and communication if the individual is enrolled in a managed care plan.

Paragraph (d) requires a provider to provide 60 days' notice to individuals, the department, and managed care plans, before terminating behavioral health home services; requires a provider to refer individuals receiving services to a new provider.

10 Provider variances.

Amends § 256B.0757 by adding subd. 14.

Section Description

Paragraph (a) allows the commissioner to grant variances to specific behavioral health home requirements.

Paragraph (b) allows the commissioner to grant a variance if (1) failure to grant the variance would result in hardship or injustice to the applicant; (2) the variance would be consistent with the public interest; and (3) the variance would not reduce the level of service.

Paragraph (c) allows the commissioner to grant a variance for innovative services.

Paragraph (d) specifies that the commissioner's decision to grant or deny a variance is not appealable.



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