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Overview

This children's mental health bill creates mental health family peer specialists, medical service coordination for children, family psychoeducation services, and mental health clinical care coordination. Upon federal approval, these will be covered medical assistance services. The bill also requires the commissioner to perform an annual survey of mental health providers to determine their satisfaction with contractors that manage medical assistance and use this information when renewing contracts.

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1 Third-party payer. Amends §256B.02, subd. 12. Excludes school districts from the definition of "third-party payer" when the cost is for clinical mental health care.

2 Mental health certified family peer specialist. Creates §256B.0616.

Subd. 1. Scope. Imposes the requirement for medical assistance coverage, subject to federal approval, of mental health certified family peer specialists for individuals who have an emotional disturbance or severe emotional disturbance. Requires services to be provided by a certified family peer specialist. Prohibits reimbursement when a certified specialist provides services to a family member.

Subd. 2. Establishment. Instructs the commissioner to establish a certified family peer specialist program. Lists the services provided by a certified family peer specialist.

Subd. 3. Eligibility. Lists the settings in which family peer specialists may be

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located.

Subd. 4. Peer specialist program providers. Requires the commissioner to develop a certification program that providers must complete in order to bill for services. Requires peer specialist programs to operate within an existing mental health community provider or center.

Subd. 5. Certified family peer specialist training and certification. Instructs the commissioner to develop a training and certification process and continuing education workshops for family peer specialists. Lists the criteria that must be met for an individual to qualify as a peer specialist.

- 3 **School-based mental health services.** Amends §256B.0625 by adding subd. 35c. Provides that medical assistance covers mental health services provided in a school by a licensed professional counselor who is under the supervision of a licensed mental health professional.
- 4 **Medical service coordination.** Amends §256B.0625, subd. 56. Adds medical service coordination as a covered service when performed by an eligible provider through a hospital emergency department, inpatient psychiatric unit, residential treatment center, community mental health center, children's therapeutic services and support provider, or juvenile justice facility and the service recipient is a child or young adult up to age 26 with a serious emotional disturbance. Lists the types and continuum of community-based services a worker will access.
- 5 **Family psychoeducation services.** Amends §256B.0625, by adding subd. 61. Requires medical assistance coverage, subject to federal approval, for family psychoeducation services. Requires that services be provided to or on behalf of a child up to age 21 with a diagnosed mental health condition under specified conditions. Provides the definition of "family psychoeducation services."
- 6 **Mental health clinical care consultation.** Amends §256B.0625 by adding subd. 62. Requires medical assistance coverage, subject to federal approval, for clinical care consultation for a person up to age 21 who is diagnosed with a complex mental health condition or co-occurring conditions. Lists the conditions under which consultation is a covered service. Defines "clinical care coordination."
- 7 **Definitions.** Amends §256B.0943, subd. 1. Adds paragraph (q), the definition of "care coordination." Adds paragraph (r) to provide that an assessment includes use of assessment tools and a functional assessment.
- 8 **Covered service components of children's therapeutic services and supports.** Amends §256B.0943, subd. 2. Adds as covered service components of CTSS, care coordination, assessment, clinical care consultation, family psychoeducation, and certified peer specialist services.
- 9 **Pilot provider input survey.** Paragraph (a) requires the commissioner of human services to initiate a pilot provider survey of providers of pediatric services and children's mental health services to evaluate the performance of medical assistance management contractors.

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Paragraph (b) lists the components of the survey and requires the commissioner to consider the survey results when renewing medical assistance management contracts.

Paragraph (c) requires the commissioner to report the results of the survey to the chairs of the Health and Human Services policy and finance committees and make recommendations on whether the survey should be continued as a component of the medical assistance quality improvement system.