

# House File 33 Delete-Everything Amendment (A21-0249) – Short Summary

## Article 1 - DHS Health Care Programs

Section	Description
1	Expands use of the encounter alerting service
2	Requires the commissioner to report annually to the legislature on dental utilization
3, 14, 16	Establish an MA enhanced asthma benefit
4, 5, 6, 26	Extend MA postpartum coverage from current 60 days to 12 months postpartum
7	Expands adult dental services to include coverage for periodontal disease
8	Allows dispensing of a 90-day supply of certain generic drugs
9	Extends the expiration date for the DHS Formulary Committee to 6-30-23
10	Requires MA to cover weight loss drugs
11	Increases the MA dispensing fee to \$10.77 and requires separate cost of dispensing measures for specialty and non-specialty drugs
12	Requires DHS to hold a public hearing and consider certain factors, before removing a drug from the preferred drug list
13	Allows DHS to provide monthly transit passes to NEMT recipients
15	Specifies additional requirements for EPSDT services and allows DHS to contract for the provision of EPSDT services
17	Reduces copayments for brand-name multisource drugs on the preferred drug list
18	Requires managed care plans and dental benefits administrators to make fee schedules available to dental providers
19	Requires the commissioner to report annually to the legislature on managed care and county-based purchasing plan provide reimbursement rates
20	Clarifies use of Medicare payment methods for outpatient hospital rates
21, 22	Clarify language related to the integrated care for high-risk pregnant women program
23	Requires DHS to report on the effectiveness of maternal and child health policies and programs in addressing disparities in health outcomes
24	Allows persons subject to the family glitch to be eligible for MinnesotaCare
25	Adjusts MinnesotaCare premiums to reflect federal reductions in QHP premiums

Section	Description
27	Provides MA coverage for treatment, testing, and vaccination for COVID-19 as required under the American Rescue Plan
28	Requires the Dental Services Advisory Committee to present recommendations for a dental home demonstration project to the legislature
29	Exempts DME and other provider from being financially liable to the federal government for certain overpayments; requires the state to repay the federal government with state funds
30	Requires DHS to report recommendations for a new Formulary Committee to the legislature
31	Allows DHS to suspend collection of unpaid premiums and use of periodic data matching for up to six months following the end of the public health emergency
32	Requires the commissioner to review Medicaid dental delivery systems in states that have implemented a carve-out and dental provider hesitancy to participate in MA, and report to the legislature
33	Repealer: Repeals the health care access fund to general fund transfer on 7-1-25; also repeals EPSDT rules

## Article 2 – DHS Licensing and Background Studies

Section	Description
1	Requires the Board of MNsure to initiate background study under chapter 245C of navigators, in-person assisters, and certified application counselors
2	Clarifying changes to background studies initiated by the Professional Educator Licensing and Standards Board and the Board of School Administrators
3	Ombudsperson for family child care providers
4-5, 8, 24-27, 52, 54, 60-63, 69	Family foster care setting background study modifications
6	Modifies terminology to clarify detoxification and withdrawal management program licensure fees
7	Licensing for special family child care homes
9	Permits child care trainers to count up to two hours of instruction toward annual 16-hour training requirement
10	Adds courses that meet family child care provider’s training requirements
11	Authorizes DHS to contract with more than one authorized fingerprint collection vendor.
12-13, 15-17, 51, 53, 55-59	Modifying DHS background study chapter definitions and requirements

Section	Description
14, 19, 64	Public law background studies
17, 67	Requiring background studies for EIDBI providers
18	Alternative background studies
20-23, 28	DHS background study clarifying changes
24, 65	Conforming changes – expansion of authorized fingerprint collection vendors
29-50, 66	Background study fee provisions
68	Allowing certain chemical dependency licensed treatment facilities to request approval for alternative licensing inspections
70-72	COVID modification extension
73	Legislative task force; Human Services background study eligibility
74	Child care center regulation modernization project
75	Direction to commissioner: develop licensing guidelines for family foster settings
76	Direction to commissioner: updates to FAQ website for family child care providers
77	Direction to commissioner: include family child care representatives in groups implementing family child care task force recommendations
78	Direction to commissioner: develop proposal for family child care assistance network
79	Direction to commissioner: develop orientation training for new family child care license applicants
80	Family child care regulation modernization project
81	Family Child Care Training Advisory Committee
82	Direction to commissioner: alternative child care licensing models project
83	Federal fund and CCDBG allocations
84	Instructs revisor to renumber background study definitions alphabetically
85	Repealer

### Article 3 – Health Department

Section	Description
1, 2, 3	E-health reduction initiative, eliminating certain reporting requirements and department duties related to e-health, continuing the e-Health Advisory Committee until June 30, 2031
4, 5	Modifying provisions governing standards for electronic prescribing
6, 7, 46, 47	Deleting language establishing the Center for Health Care Purchasing Improvement, retaining certain duties for the commissioner related to health care purchasing and health care performance measurement

Section	Description
8, 9, 42	Requiring health plan companies and third-party administrators to report encounter data and pricing data to the all-payer claims database on a monthly basis; requiring the commissioner of health to develop recommendations to increase access to APCD data
10	Expanding sources of data the commissioner may use to derive health risk limits for substances degrading groundwater
11, 46	Vivian Act: requiring the commissioner of health to make available information about congenital CMV (human herpesvirus cytomegalovirus); requiring the commissioner to establish an outreach program to provide education about and raise awareness of CMV; requiring review of congenital CMV for inclusion in the newborn screening program and increasing the per-specimen fee if included
12-19	Modifications to resident reimbursement case mix classification statute
20	Increasing the per-specimen fee for testing under the newborn screening program
21	Dignity in pregnancy and childbirth: requiring hospitals with obstetric care and birth centers to make available continuing education on anti-racism and implicit bias for staff who care for pregnant or postpartum patients; requiring the commissioner of health to take steps regarding midwife and doula availability, training, and workforce diversity
22-24	Alcohol and drug counselors added to the health professional education loan forgiveness program, effective July 1, 2025
25, 26, 27, 29, 40	Issuance of certified birth records and state identification cards to homeless youth and fee waiver
28	Authorizing the state registrar and agents to charge convenience fees and transaction fees for electronic transactions and transactions by telephone or Internet for the issuance of vital records
30	Adding or modifying exceptions to the hospital construction moratorium, to: (1) require beds within a hospital corporate system being transferred from a closed facility to another facility to first be used to replace beds that were used at the closed facility for mental health services or substance use disorder services before transferring beds for other purposes; (2) allow the addition of 45 licensed beds in an existing safety net, level I trauma center in Ramsey County (Regions Hospital), when certain conditions are met; and (3) allow the addition of up to 30 licensed beds in an existing psychiatric hospital in Hennepin County (PrairieCare), upon submission of a plan for public interest review
31	Requiring notice and a public hearing before closure of a hospital or hospital campus, relocation of services, or cessation in offering certain services
32-35, 41	Modifying requirements for lead risk assessments, including expanding settings where lead risk assessments must be conducted and blood lead levels at which lead risk assessments must be conducted; and allowing an assessing agency to order additional lead hazard reduction and remediation activities

Section	Description
36	Permits a hospital, upon request, to destroy medical records of a patient who is a minor when the patient reaches the age of majority or after seven years, unless the records must be maintained as part of the individual’s permanent medical record
37-39	Changes to provisions governing access to data for maternal mortality studies; clarifying the data classification of certain data held by the commissioner for these studies; and authorizing the commissioner to convene a Maternal Mortality Review Committee to conduct maternal death study reviews
43	Between July 1, 2021, and June 30, 2025, authorizing loan forgiveness for alcohol and drug counselors, medical residents, and mental health professionals who agree to provide at least 25% of their services to state public program enrollees or patients who receive sliding fee schedule discounts
44	Establishing the mental health cultural community continuing education grant program, to provide grants for continuing education necessary for certain social workers, marriage and family therapists, psychologists, and professional clinical counselors to become supervisors
45	Requiring the commissioner of health to distribute public health infrastructure funds to community health boards and tribal governments for projects to build public health capacity, pilot new models for providing public health services, or improve the state’s public health system
47	Repealer: Center for Health Care Purchasing Improvement, resident reimbursement case mix classifications, reports on malpractice claims

## Article 4 – Health-Related Licensing Boards

Section	Description
1-2	Make changes to the Minnesota Psychology Practice Act by requiring that at least two of the board members reside outside the metro area and at least two members be members of a community of color or an underrepresented community, and requiring that at least four of the required continuing education hours be on training to meet the needs of individuals from diverse socioeconomic and cultural backgrounds
3-7	Make changes to the doula registry by adding a doula certification organization to the list in statute, permitting the commissioner to designate and remove designations of doula certification organizations, requiring doulas to maintain their certification to remain on the registry, and allowing the commissioner to remove from the registry, doulas who do not maintain their certification
8-9	Make changes to the Board of Marriage and Family Therapy by requiring that at least two of the board members reside outside the metro area and at least two members be members of a community of color or underrepresented community, and requiring that at least four of the required continuing education hours be on training to allow therapists to serve clients from diverse socioeconomic and cultural backgrounds

Section	Description
10-11	Make changes to the Board of Behavioral Health and Therapy by requiring that at least three of the board members reside outside the metro area and at least three members be members of a community of color or underrepresented community, and requiring that at least four of the required continuing education hours be on training to allow counselors to serve clients from diverse socioeconomic and cultural backgrounds
12-14	Make changes to the Minnesota Board of Social Work Practice Act by adding a definition of cultural responsiveness, requiring that at least four hours of the required continuing education hours be on cultural responsiveness, and providing for implementation of the new continuing education requirement

## Article 5 – Prescription Drugs

Section	Description
1	Opiate epidemic response fund: clarification related to the deposit into the Opiate Epidemic Response Fund of settlement payments from consulting firms working for opioid manufacturers and wholesalers
2	Exempts opiates used for medication assisted therapy for substance use disorder from being calculated as opiate units when determining whether an opiate manufacturer is subject to the annual opiate registration fee
3, 5	Requires mail order or specialty pharmacies to comply with manufacturer temperature requirements when mailing a drug to a patient, and develop policies and procedures consistent with national standards. Section 22 requires the Board of Pharmacy to report to the legislature on requiring in each package a method of detecting improper storage or temperature violations
4	Specifies that any funds received by the state as a result of a settlement agreement related to violations of consumer fraud laws related to opioids shall be counted towards the \$250,000,000 amount that triggers the sunset of the opiate licensing fees and the opiate registration fee
6	Exempts injectable opiate products distributed to a hospital or hospital pharmacy from being counted as opiate units when determining whether an opiate manufacturer is required to pay the opiate registration fee due on June 20, 2021. Requires MMB to transfer into the opiate epidemic response fund an amount equal to the estimated revenue lost due to this exemption

## Article 6 – Telehealth

Section	Description
1	Establishes requirements for the coverage of services delivered through telehealth for private sector health plans. Changes include expanding the provider types that can provide telehealth, providing coverage for audio-only communication until July

Section	Description
	1, 2023, expanding parity requirements, setting requirements related to telehealth equipment, and requiring coverage of telemonitoring services
2	Makes conforming changes to the telehealth section in the physician licensure statute
3	Permits the required examination for a prescription for a medication assisted therapy for SUD drug to be conducted through telehealth
4-6	Make changes in chapter 245G to permit an assessment for SUD to be delivered via telehealth
7	Clarifies that chemical use assessments may be conducted through telehealth
8	Clarifies that chemical dependency services may be provided through telehealth
9	Makes a conforming change related to the definition of interactive video, when used for relocation targeted case management
10	Removes a requirement that a psychiatric provider, as a part of an ACT team, obtain approval from the commissioner when providing services by telemedicine
11	Modifies the medical assistance coverage requirements for services delivered through telehealth (includes health care services, mental health services, chemical dependency services and SUD services). Major changes include removing the three visit per enrollee per week limit, expanding the provider types eligible to provide telehealth, and making MA coverage consistent in most areas with private sector coverage. Audio-only coverage is still prohibited in the language of this statute, but is covered under MA through an expansion of the DHS waivers in a later section
12	Extends MA coverage to telemonitoring services
13	Modifies medication therapy management services to include services delivered through telehealth
14	Clarifies that mental health case management services may be provided either in person or through interactive video
15	Specifies the conditions under which face to face contact requirements for targeted case management services may be met through interactive video
16	Clarifies that mental health services may be provided through telehealth
17-19	Allows long-term care consultation reassessments to be provided through interactive video or telephone if specified requirements are met
20	Specifies the requirements for payment for targeted case management for adults when contact is through interactive video
21	Specifies the requirements for payment for child welfare targeted case management services when contact is through interactive video
22	Changes the terminology to refer to telehealth in a section of law dealing with children’s therapeutic services
23	Specifies that travel time is only an allowable billing for early intensive developmental and behavioral intervention (EIDBI) benefits for persons with autism

Section	Description
	spectrum disorder when providing in-person services and makes conforming changes in terminology
24	Permits remote assessments for community-based service waivers for persons with disabilities
25	Permits remote assessments to be used for determining eligibility for services under the elderly waiver
26	Extends the modifications and waivers that involve expanding access to services using telehealth that were ordered by the commissioner of human services in response to the governor’s peacetime emergency order until June 30, 2023. This has the effect of allowing audio-only telehealth services to continue under MA and MinnesotaCare through that date
27	Requires the commissioners of health and human services to each study the impact of telehealth payment methodologies and delivery expansion on the coverage and provision of services delivered through telehealth. Requires the commissioners to present preliminary reports to the legislature by January 15, 2023 (which must include recommendations on whether audio-only communication should continue to be allowed) and final reports by January 15, 2024
28	Revisor instruction related to substituting the term “telehealth” for “telemedicine”
29	Repealer. Repeals current law governing private sector telemedicine services, and provisions related to case management and licensed providers

## Article 7 – Economic Supports

Section	Description
1, 20-22, and 24	Self-employment income modification for cash assistance program eligibility
2-6 and 30	Governor proposal: Align SNAP employment and training requirements with federal policy
7	Governor proposal: Community Action Agencies formula change
8-12, 14-19, 22, 23, 25, 26, and 30	Governor proposal: Clarifying public assistance statutes
26	Governor proposal: DEED unemployment insurance exemption for high school students
13	Governor proposal: MFIP cost of living adjustment
27	Governor proposal: Returning from COVID emergency measures
28	Long-term homeless supportive services report
29	2022 report to legislature on runaway and homeless youth
30	Repealer



## Article 8 – Child Care Assistance

Section	Description
1, 2	Basic sliding fee program: temporary funding priorities and permanent modifications to allocation formula
3	Modifications to recovering CCAP overpayments
4, 12	Provisional authorization of payment to providers
5	CCAP reimbursement rate calculation
6	Legal nonlicensed family child care provider rates
7	Paragraph (c): Limits CCAP retroactivity to up to three/six months Paragraph (d): Applies payment requirements to certified child care providers Paragraph (g): Provider forfeiture of overpayment
8	Absent day overpayment modification
9	Child care improvement grants for business training program and grants to child care providers
10	CCAP overpayments that result from agency error
11	Federal fund and CCDBG allocations

## Article 9 – Child Protection

Section	Description
1-4	Modifies requirements for Northstar Care for Children kinship and adoption assistance payment agreements and offsets
5	Requires a court to appoint counsel for eligible parents, guardians, and custodians in child protection proceedings where a child may be removed from the care of the child's parent, guardian, or custodian
6	Direction to commissioner: requires the commissioner of human services to consult with counties and court administration on collecting data on court-appointed counsel in child protection proceedings, and to submit a report with findings and a plan for regular reporting of this data

## Article 10 – Child Protection Policy

Section	Description
1	Requires an employee or supervisor of a private or public youth recreation program to report abuse of a child by another program employee or supervisor within the past three years
2	Requires local welfare agencies to offer training to mandatory reporters of child abuse or maltreatment
3	Establishes a legislative task force on child protection

## Article 11 – Behavioral Health

Section	Description
1	Expands definition of “mental health practitioner” to include a student completing a practicum or internship
2-4	Family First Implementation – updates to existing provisions
5	Adds requirements for discharge planning content and timelines for children in residential treatment
6	Children’s mental health grants – supervision of clinical trainees; traditional healing practices
7	Modifications to school-linked behavioral health grant program
8	Establishing the Culturally Informed and Culturally Responsive Mental Health Task Force
9	“Culturally specific program” definition modified to include “culturally responsive” programs for purposes of chapter 254B rates
10	Adds “disability responsive program” definition for purposes of chapter 254B rates
11	Removes higher rates for certain SUD treatment services and providers. Adds culturally responsive and disability responsive programs. Modifies telehealth requirements
12	Provides 5% rate increase for SUD treatment services provided by culturally specific or culturally responsive programs, or disability responsive programs
13	Establishes SUD community of practice
14	OERAC grant report process and date changes; administrative percentage increased
15	OERAC grant funds distributed on calendar year basis
16	Mental health crisis stabilization services statewide per diem MA rate
17	Modifies payment requirements for mental health case management provided by vendors
18-23	SUD 1115 demonstration project modifications
24	Outlining policy for MA coverage of targeted case management services; statewide rate methodology for vendor services
25	Modifying payment provisions for targeted case management services provided by vendors to reference new section
26	Modifying payment provisions for case management services provided by vendors to reference new section
27, 28	ITFC service modifications
29-31	Intensive nonresidential rehabilitative services age eligibility, service standards, training requirement modifications
32	Directing the commissioner to evaluate and make recommendations on opioid treatment program rate structure

Section	Description
33	Report on adult mental health initiatives reform
34	Children’s mental health residential treatment work group
35	Clarifies authorized uses of First Episode of Psychosis Grant Program funds
36	Direction to commissioner: reorganize mental health grants statute
37	Direction to commissioner: sober housing program recommendations
38	Direction to commissioner: SUD paperwork reduction project
39	Direction to commissioner; Tribal overpayment protocols
40	Requires the commissioner to develop an implementation and transition plan for culturally and linguistically appropriate services national standards
41	Anoka County SUD pathfinder companion pilot project
42	Allocation of community mental health services block grant to fund commissioner’s proposals in federal SAMHSA spending plan
43, 44	Allocation of American Rescue Plan funding for school-linked behavioral health grants
45	Allocation of federal funding for a grant to Anoka County for a substance use disorder treatment pathfinder companion pilot project
46	Allocation of federal funding for grants to be awarded according to OERAC recommendations
47	Allocation of federal funding to fund items proposed by the commissioner in the SAMHSA spending plan
48	Sets initial terms for members of the OERAC
49	(a) Repeals mental health case management sections (b) Repeals “responsible social services agency” definition in Children’s Mental Health Act

## Article 12 – Direct Care and Treatment

Section	Description
1	County share for child and adolescent behavioral health hospital
2	Requires the commissioner to assess the extent to which state-operated direct care and treatment services function as safety net services and report to the legislature

## Article 13 – Disability Services and Continuing Care for Older Adults

Section	Description
1	Modifies nursing facility resident assessments for purposes of establishing case mix classifications for MA reimbursement

Section	Description
2 and 3	Authorizes ongoing nursing home moratorium exception funding of \$4 million per biennium
4	Defines “family adult foster care home”
5, 29, 60, 66	Governor’s proposal: Creating a time-limited exception to the corporate foster care and community residential settings licensing moratorium for unlicensed customized living settings to become licensed settings
6, 13, 14, 50, 54, 67	Reduces from 12 to 10 the required hours of service a person needs to qualify for an enhanced PCA service rate or an enhanced CFSS service rate
7	Expands the purposes for existing self-advocacy grants
8	Establishes a new grant program to encourage self-advocacy groups of persons with intellectual and developmental disabilities to develop and organize projects that increase community inclusion
9	Establishes a new parent-to-parent peer support grant program
10	Modifies customized living quality improvement grants
11	Provides an annual inflation adjustment to the medical assistance service rates for home health agency services
12	Provides an annual inflation adjustment to the medical assistance service rates for home care nursing services
15, 18, 30-41, 76	Reframes and restates the home and community-based services (HCBS) policy statements enacted in 2020, and includes new language concerning standards for an informed decision-making process. The bill also repeals all the language enacted in 2020
16-17, 19, 26-28, 73, 75	Governor proposal: Waiver reimagine, phase II, requiring the commissioner to seek federal approval to reconfigure the MA home and community-based waivers to implement a two-waiver program structure and implement an individual resource allocation methodology, and transferring management of waiver funds from the counties to the commissioner
20-23	Reconfigures the existing regional quality councils to allow them to perform new and remaining functions in the absence of the state quality council
24-25	Allows the commissioner to request contact information of clients and associated key representatives for purposes of conducting consumer surveys for HCBS; requires the commissioner to develop and administer a resident experience survey for AL facility residents and a family survey for families of AL facility residents
22, 23, 27, 36, 43	Governor proposal: Customized living program integrity
42	Modifies DWRS inflationary adjustment timeline and adds requirements for uses of the 2022 inflationary adjustment revenue
44-47	Provides for a 5% rate increase for ICF/DDs and modifies the rates and procedures related to variable rates and services during the day

Section	Description
48, 49, 55	Establishes a PCA/CFSS rate framework
49, 51-53	Allows CFSS support workers to be reimbursed for driving clients under MA
56	Increases by \$50 the monthly room and board rate for housing supports provided to residents of certain supportive housing establishments where an individual has an approved habitability inspection and an individual lease agreement
57 and 58	Modifies housing support absent days
59	Modifies elderly waiver monthly case mix budget cap exceptions
61-64	Establishes a rate floor for elderly waiver customized living services provided in assisted living facilities with a census of at least 80% elderly waiver participants
65, 71	Establishes requirements for providers of customized living services in exempt settings, requires a report, and repeals obsolete language
68	Directs the commissioner to develop an MA service allowing direct care to be provided to individuals while in an acute care setting
69	Requires the commissioner to conduct a study to determine the feasibility of adding supportive parenting services as a covered MA service
70	Resumes temporary funding for the provision of PCA services by parents of a minor and by spouses
74	Provides a five percent rate increase for certain home care services
72 and 77	Governor proposal: Ratifying the self-directed workforce contract and providing rate increases
78	Revisor instructions requiring modification of a statutory headnote related to the regional quality councils
79	Repealer

## Article 14 – Miscellaneous

Section	Description
1	Creating the Office of Ombudsperson for American Indian Families
2, 8-14	Establishing the American Indian Community-Specific Board, to appoint and assist the ombudsperson for American Indian families; modifying ombudsperson for families sections related to the creation of the new Office of Ombudsperson for American Indian Families
3	REETAIN grants program
4	Parent Aware evaluation
5-6, 24	TEACH grants program
7	Cultural and Ethnic Communities Leadership Council clarifying and policy changes
15	Grants to expand child care access for children with disabilities

Section	Description
16	Direction to commissioner; shared services grants for family child care providers
17	Direction to commissioner; foster family recruitment and licensing technology evaluation
18	Task force for high-quality early care and education for all families
19	Recommendations for implementing a family supports and improvement program
20	Report on foster care enrollment in early childhood programs
21	Child care stabilization grants
22	Direction to the Children’s Cabinet; early childhood governance report
23	Federal fund and CCDBG allocations

## Article 15 – Appropriations

Section	Description
1	Health and human services appropriations, explaining terms used and sources of appropriations
2	Appropriations to the commissioner of human services
3	Appropriations to the commissioner of health
4	Appropriations to the health-related licensing boards
5	Appropriations to the Emergency Medical Services Regulatory Board
6	Appropriations to the Council on Disability
7	Appropriations to the ombudsman for mental health and developmental disabilities
8	Appropriations to the ombudspersons for families
9	Appropriations to the ombudsperson for American Indian families
10	Appropriations to the Legislative Coordinating Commission
11	Appropriation to the Supreme Court
12	Appropriations to the commissioner of management and budget
13	Modification to fiscal year 2021 appropriations to the commissioner of health for health operations
14	Grants for Project Echo
15	Reduces a fiscal year 2021 appropriation from the health care access fund for an incentive program and cancels that amount to the health care access fund
16	Reduces an appropriation from the general fund for nonnarcotic pain management and wellness and cancels that amount to the general fund
17	Reduces an appropriation from the general fund for a resident experience survey and family survey and cancels that amount to the general fund

Section	Description
18	Direction to commissioner of management and budget to refinance certain general fund appropriations and transfers with funds from the coronavirus relief fund and cancels that amount to the general fund
19	Direction to commissioner of management and budget to reduce the budget reserve by \$100,000,000
20	MFIP supplemental payment
21	Fiscal year 2021 appropriation to commissioner of human services to implement changes to MinnesotaCare premiums
22	Fiscal year 2021 appropriation to commissioner of human services to settle overpayments for medication-assisted treatment services
23	Fiscal year 2021 appropriation to commissioner of human services to reimburse counties for institutions for mental disease payments
24	Authorizes certain transfers of appropriation balances, positions, salary money, and nonsalary administrative money
25	Indirect costs not to fund programs
26	Redistribution authority: authorizes the commissioner of human services to modify the initial state spending plan required for American Rescue Plan Act funds by redistributing funds among purposes in this act, as necessary to obtain federal approval
27	Provides that appropriations included in the initial state spending plan for American Rescue Plan Act funds are contingent on federal approval
28	Appropriations enacted more than once must be given effect only once
29	Provides uncodified language in this article expires June 30, 2023, unless another effective date is specified
30	Effective date

## Article 16 – Home and Community-Based Services; Special Time-Limited Funding Provisions

Section	Description
1 and 6	Establishes the transition to community initiative and includes funding for the initiative
2 and 8	Extends the Governor’s Council on an Age-Friendly Minnesota and includes funding for age-friendly community grants and technical assistance grants
3	Includes grant funding for technology for HCBS recipients
4	Includes funding for development of an individual HCBS portal for recipients
5	Includes funding for housing transition costs and community living infrastructure
7	Includes funding for lead agency process mapping

Section	Description
9	Includes funding for continuity of care for students with behavioral health and disability support needs
10	Includes funding for provider capacity grants for rural and underserved communities
11	Includes funding to expand adult mobile crisis services
12	Includes funding to create children’s mental health transition and support teams to facilitate transition back into the community of children from certain inpatient and residential treatment facilities
13	Includes funding to conduct an analysis of the utilization and efficacy of current residential and psychiatric residential treatment facility treatment options for children under MA
14 and 15	Establishes a task force on eliminating subminimum wages for people with disabilities and includes funding to establish a reinvention grant program to promote opportunities for people with disabilities to earn competitive wages
16	Includes funding for research on access to long-term care services and financing
17	Includes funding for HCBS system reform analysis, own your own future study, and respite services for older adults grants
18	Includes funding for an analysis of the current rate-setting methodology for all outpatient services in MA and MinnesotaCare, including rates for behavioral health, substance use disorder treatment, and residential substance use disorder treatment
19	Includes funding for Centers for Independent Living HCBS access grants
20	Includes funding for HCBS workforce development grants
21	Requires the commissioner of human services to consult with stakeholders before submitting Minnesota’s initial state spending plan for enhanced HCBS funding
22	Effective date