

# Bill Summary Comparison of Health and Human Services

House File 2128-4  
Article 17: Mental Health  
Uniform Service Standards

Senate File UEH2128-1  
Article 16: Mental Health  
Uniform Service Standards

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HOUSE

SENATE

Section	Article 17: Mental Health Uniform Service Standards		Article 16: Mental Health Uniform Service Standards
1	<p><b>Purpose and citation.</b> Proposes coding for § 245I.01. Provides a citation for the act; states the purpose of creating a unified, comprehensive, and accountable system of mental health care; states public policy.</p>	<p><b>Page R1: Same</b></p>	<p><b>Sections 1-19</b> modify mental health statutes in order to achieve a uniform service standards framework, including a unified licensing framework for mental health services, common standards that apply to all mental health care programs, the start of a transition of residential crisis stabilization (RCS) and intensive residential treatment services (IRTS) to the new common standards beginning July 1, 2022, a consolidated list of mental health services covered by medical assistance, and requirements for the commissioner of human services to consult with stakeholders to continue to develop recommendations for a single comprehensive mental health licensing structure.</p>
2	<p><b>Applicability.</b> Proposes coding for § 245I.011.</p> <p><b>Subd. 1. License requirements.</b> Specifies other sections of statute and rules with which licensees must comply.</p> <p><b>Subd. 2. Variances.</b> Allows the commissioner to grant variances in certain circumstances, if the license holder, applicant, or certification holder meets listed conditions. Allows the commissioner to grant a permanent variance under certain circumstances; specifies that a variance decision is final and not subject to appeal.</p> <p><b>Subd. 3. Certification required.</b> Allows for mental health clinic certification; codifies standards for certification of mental health clinics.</p> <p><b>Subd. 4. License required.</b> Requires licensure for intensive residential treatment services (IRTS) or residential crisis stabilization.</p>	<p><b>Page R2: Similar.</b> Technical difference at House 648.18 / Senate 587.10 and House 649.4 / Senate 587.28.</p> <p>Staff recommends <b>House.</b></p>	<p><b>Section 2</b></p>

HOUSE

SENATE

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	<p><b>Subd. 5. Programs certified under chapter 256B.</b> Specifies that programs that are currently certified must comply with all license holder responsibilities.</p> <p>Makes this section effective upon federal approval or July 1, 2022, whichever is later.</p>		
<p><b>3</b></p>	<p><b>Definitions.</b> Proposes coding for § 245I.02. Defines the following terms for purposes of chapter 245I:</p> <ul style="list-style-type: none"> <li>▪ Approval</li> <li>▪ Behavioral sciences or related fields</li> <li>▪ Business day</li> <li>▪ Case manager</li> <li>▪ Certified rehabilitation specialist</li> <li>▪ Child</li> <li>▪ Client</li> <li>▪ Clinical trainee</li> <li>▪ Commissioner</li> <li>▪ Co-occurring substance use disorder treatment</li> <li>▪ Crisis plan</li> <li>▪ Critical incident</li> <li>▪ Diagnostic assessment</li> <li>▪ Direct contact</li> <li>▪ Family and other natural supports</li> <li>▪ Functional assessment</li> <li>▪ Individual abuse prevention plan</li> <li>▪ Level of care assessment</li> </ul>	<p><b>Page R3: Same</b></p>	<p><b>Section 3</b></p>

HOUSE

SENATE

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	<ul style="list-style-type: none"> <li>▪ License</li> <li>▪ License holder</li> <li>▪ Licensed prescriber</li> <li>▪ Mental health behavioral aide</li> <li>▪ Mental health certified family peer specialist</li> <li>▪ Mental health practitioner</li> <li>▪ Mental health professional</li> <li>▪ Mental health rehabilitation worker</li> <li>▪ Mental illness</li> <li>▪ Organization</li> <li>▪ Personnel file</li> <li>▪ Registered nurse</li> <li>▪ Rehabilitative mental health services</li> <li>▪ Residential program</li> <li>▪ Signature</li> <li>▪ Staff person</li> <li>▪ Strengths</li> <li>▪ Trauma</li> <li>▪ Treatment plan</li> <li>▪ Treatment supervision</li> <li>▪ Volunteer</li> </ul>		
4	<p><b>Required policies and procedures.</b> Proposes coding for § 245I.03. Outlines standards for license holders to establish, enforce, and maintain policies and procedures to comply with the requirements of this chapter and additional relevant statutes and rules. Outlines additional requirements for policies and procedures; requires policies and procedures to</p>	<p><b>Page R6: Similar.</b> Technical difference at House line 655.27 / Senate line 594.21.  Staff recommends <b>House.</b></p>	<p><b>Section 4</b></p>

HOUSE

SENATE

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	address: health and safety; client rights; behavioral emergencies; health services and medications; reporting maltreatment; critical incidents; personnel; volunteers; and data privacy.		
5	<p><b>Provider qualifications and scope of practice.</b> Proposes coding for § 245I.04. Modifies, centralizes, and clarifies mental health provider qualifications and scopes of practice; distinguishes between clinical trainees and mental health practitioners.</p>	<p><b>Page R9: Similar.</b> Technical difference at House line 656.6 / Senate line 595.2.  Staff recommends <b>Senate.</b></p>	<b>Section 5</b>
6	<p><b>Training required.</b> Proposes coding for § 245I.05. Aligns training standards for mental health staff; requires a license holder to develop a training plan and document training provided to staff. Specifies what must be included in initial training and ongoing training; requires additional training for medication administration.</p>	<b>Page R14: Same</b>	<b>Section 6</b>
7	<p><b>Treatment supervision.</b> Proposes coding for § 245I.06. Requires a license holder to ensure that a mental health professional or certified rehabilitation specialist provides treatment supervision to staff who are not mental health professionals or certified rehabilitation specialists. Outlines treatment supervision requirements and responsibilities; requires treatment supervision planning. Allows for greater flexibility in supervision. Requires direct observation of mental health behavioral aides or rehabilitation workers.</p>	<b>Page R17: Same</b>	<b>Section 7</b>
8	<p><b>Personnel files.</b> Proposes coding for § 245I.07. Aligns standards for maintaining personnel files; lists what a personnel file must include; requires</p>	<b>Page R19: Same</b>	<b>Section 8</b>

HOUSE

SENATE

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	<p>personnel files to be readily accessible for the commissioner’s review.</p>		
<p><b>9</b></p>	<p><b>Documentation standards.</b> Proposes coding for § 245I.08. Aligns standards for documenting treatment supervisor approval, services provided, and medication administered.</p>	<p><b>Page R19: Same</b></p>	<p><b>Section 9</b></p>
<p><b>10</b></p>	<p><b>Client files.</b> Proposes coding for § 245I.09. Aligns standards for maintaining and retaining client files; specifies what client files must include.</p>	<p><b>Page R21: Same</b></p>	<p><b>Section 10</b></p>
<p><b>11</b></p>	<p><b>Assessment and treatment planning.</b> Proposes coding for § 245I.10.</p> <p><b>Subd. 1. Definitions.</b> Defines “diagnostic formulation” and “responsivity factors.”</p> <p><b>Subd. 2. Generally.</b> Outlines new requirements for diagnostic and crisis assessments and services that may be provided prior to those assessments. Allows specified services based on a client’s needs identified in a hospital’s medical history and presentation examination.</p> <p><b>Subd. 3. Continuity of services.</b> Specifies that a diagnostic assessment conducted before the effective date of this section is valid for one year after it was completed. Specifies that an individual treatment plan is valid until the treatment plan’s expiration date. Provides a July 1, 2023, expiration date for this subdivision.</p>	<p><b>Page R22: Same</b></p>	<p><b>Section 11</b></p>

HOUSE

SENATE

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	<p><b>Subd. 4. Diagnostic assessment.</b> Specifies required findings for a diagnostic assessment.</p> <p><b>Subd. 5. Brief diagnostic assessment; required elements.</b> Outlines requirements for a brief diagnostic assessment.</p> <p><b>Subd. 6. Standard diagnostic assessment; required elements.</b> Outlines requirements for a standard diagnostic assessment.</p> <p><b>Subd. 7. Individual treatment plan.</b> Requires a license holder to follow each client’s written individual treatment plan when providing services; lists exceptions.</p> <p><b>Subd. 8. Individual treatment plan; required elements.</b> Outlines requirements for an individual treatment plan.</p> <p><b>Subd. 9. Functional assessment; required elements.</b> Outlines requirements for a functional assessment.</p>		
12	<p><b>Health services and medications.</b> Proposes coding for § 245I.11. Establishes standards for health services, ordering, storing, and accounting for medications, and administering medications, for residential programs, license holders that store or administer client medications, or license holders that observe clients self-administer medication.</p>	Page R29: Same	Section 12
13	<p><b>Client rights and protections.</b> Proposes coding for § 245I.12. Outlines requirements for client rights and protections, aligning with the Health Care Bill of Rights and other relevant statutory provisions.</p>	Page R31: Same	Section 13

HOUSE

SENATE

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14	<p><b>Critical incidents.</b> Proposes coding for § 245I.13. Requires residential program license holders to report all critical incidents to the commissioner within 10 days of learning of the incident. Requires records to be kept in a central location, readily accessible to the commissioner for review.</p>	Page R33: Same	Section 14
15	<p><b>Mental health clinic.</b> Proposes coding for § 245I.20. Updates and increases flexibility for mental health clinic certification standards; moves standards from rule to statutes. Modifies staffing requirements, provides satellite location flexibility, and eliminates certain prescriptive requirements and replaces with requirement to implement a quality assurance and improvement plan.</p>	Page R33: Same	Section 15
16	<p><b>Intensive residential treatment services and residential crisis stabilization.</b> Proposes coding for § 245I.23. Outlines and aligns licensing standards for IRTS and residential crisis stabilization programs. Updates include allowing additional time for certain initial documentation and assessment requirements, reducing required assessment frequency, and modifying discharge standards.</p>	Page R40: Same	Section 16
17	<p><b>Covered mental health services.</b> Proposes coding for § 256B.0671. Standardizes terminology, using definitions established in chapter 245I. Provides for continued medical assistance coverage of mental health services defined in section 256B.0625 or rule 9505.0372, including: adult day treatment services; family psychoeducation services; dialectical behavior therapy; mental health clinical care consultation; neuropsychological assessment; neuropsychological testing;</p>	Page R61: Same	Section 17



HOUSE

SENATE

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	psychological testing; psychotherapy; partial hospitalization; and diagnostic assessments.		
<b>18</b>	<p><b>Direction to commissioner; single comprehensive license structure.</b></p> <p>Requires the commissioner, in consultation with stakeholders, to make recommendations to develop a single comprehensive licensing structure for mental health services programs. Lists required priorities for the recommendations developed under this section.</p>	<b>Page R62: Same</b>	<b>Section 18</b>
<b>19</b>	<p><b>Effective date.</b></p> <p>Makes this article effective July 1, 2022, or upon federal approval, whichever is later.</p>	<p><b>Page R62: Similar.</b> Technical differences.</p> <p>Staff recommends <b>House</b>.</p>	<b>Section 19</b>