Overview

This bill makes changes to human services statutes related to state-operated services funding and transitioning state-operated services to enterprise activities, mental health case management services, day treatment services complying with MA requirements for clinical supervision, health plan company funding for services provided pursuant to the Civil Commitment Act, reimbursement for room and board from the chemical dependency fund, and per diems paid to consumers and family members on human services advisory task forces. The bill also codifies a section of session law authorizing initiatives related to adult mental health services.

1 Specific purchases. Amends § 16C.10, subd. 5. In a subdivision listing the items that are exempt from the solicitation process the state must use to procure goods and services, allows goods and services used at any community-based facility operated by the commissioner of human services, not just a community-based residential facility, to be purchased without participating in the solicitation process.

2 Case management service provider. (Amends § 245.462, subd. 4) Paragraph (a) amends the definition of case manager in the Adult Mental Health Act to define a "case management service provider" as a case manager (already defined in this law) or a case manager associate, which is a new provider classification that is created in paragraph (f) of this section. Also clarifies that a case manager who has a bachelor's degree in social work, psychology or nursing meets the current law requirement for a bachelor's degree. Strikes other requirements that are related to supervised experience and training, because these provisions are relocated and further modified in paragraphs (b) to (e). Paragraph (b) specifies the supervision requirements that apply to a case manager. Paragraph (c) specifies the continuing education and training requirements for a case manager who has a bachelor's degree, but who is not licensed, registered or certified.
Paragraph (d) contains the training requirements for a case manager with a bachelors degree who lacks the required hours of supervised experience; this provision is relocated from paragraph (a). Paragraph (e) requires a case manager who does not hold a bachelors degree to meet one of three specified types of qualifications.

Paragraph (f) creates the new "case manager associate" classification. A case manager associate must:

work under the direction of a case manager or case manager supervisor;
be 21 years of age;
have a high school diploma; and
either meet one of four specified criteria relating to education and experience, or if the person is a mental health practitioner, meet a fifth criteria.

This paragraph also specifies how a case manager associate can qualify as a case manager. It also specifies other requirements for preservice training, continuing education and mentoring that a case manager associate must meet.

Paragraph (g) requires a case management supervisor to meet the criteria for mental health professionals that is defined in another provision of the Adult Mental Health Act.

This section also strikes provisions relating to waivers for case managers who lack a bachelor's degree but have supervised work experience, because this provision has been replaced by the "case manager associate" classification created in paragraph (f).

3 Mental health practitioner. (Amends § 245.462, subd. 17) Adds another way in which a person may qualify as a mental health practitioner under the Adult Mental Health Act. Clause (3) permits a person who is fluent in the non-English language of the ethnic group to which over 50% of the person's clients belong, and who meets the specified training and supervision requirements, may qualify as a mental health practitioner.

4 Availability of case management services. (Amends § 245.4711, subd. 1) Amends the Adult Mental Health Act to make case management services provided by a case manager associate eligible for MA reimbursement. Permits costs associated with mentoring, supervision and continuing education to be included in the MA reimbursement rate methodology used for these services.

5 Day treatment services provided. Amends § 245.4712, subd. 2. A new paragraph (b) allows an adult day treatment program to comply with MA requirements for clinical supervision by:

complying with the definition of clinical supervision for mental health services in DHS rule;
using a mental health practitioner who maintains a consulting relationship with a mental health professional who accepts full professional responsibility and meets requirements for on-site observation of the mental health practitioner; or
meeting the minimum quality assurance standards for mental health centers or mental health clinics by having and implementing policies and procedures related to peer review, internal utilization review, staff supervision, continuing education for staff, procedures for discipline, and data protections.

Specifies how day treatment programs can demonstrate compliance with clinical supervision requirements.

6 Case management service provider. (Amends § 245.4871, subd. 4) This section amends the definition of case manager in the Children's Mental Health Act make similar changes to the ones that were made in section 2 to the Adult Mental Health Act. The section modifies the definition of case manager, and the supervision, education and experience requirements that apply, and it
also creates the new provider classification of case manager associate.

7 **Mental health practitioner.** (Amends § 245.4871, subd. 26) Adds another way in which a person may qualify as a mental health practitioner under the Children's Mental Health Act. Item (ii) of clause (1) permits a person who is fluent in the non-English language of the ethnic group to which over 50% of the person's clients belong, and who meets the specified training and supervision requirements, may qualify as a mental health practitioner.

8 **Availability of case management services.** (Amends § 245.4881, subd. 1) Amends the Children's Mental Health Act to make case management services provided by a case manager associate eligible for MA reimbursement. Permits costs associated with mentoring, supervision and continuing education to be included in the MA reimbursement rate methodology used for these services.

9 **Transition of regional treatment centers and other state-operated services.** Adds § 246.0136. Starting with the 2000-2001 biennium, directs the commissioner of human services to establish enterprise activities (defined as services delivered by state employees and fully funded by public or private health insurance revenue or other revenue sources available to clients) within state-operated services. Specifies that state-operated services will specialize in providing services to vulnerable populations and to people for whom state-operated services are the provider selected by the third-party payer. Establishes the process by which the commissioner will determine which programs can be transitioned to enterprise activities, and requires decreasing state appropriations for programs that are transitioned. Establishes criteria to consider and procedures for implementation. Requires the commissioner to submit annual reports to the legislature on enterprise activities for six years.

10 **Collections dedicated.** Amends § 246.18, subd. 6. Directs services or programs operated as enterprise activities to keep the revenues earned in interest-bearing accounts. When the commissioner decides to transition a program from direct appropriations to enterprise activities, at the end of the fiscal year before the transition transfers, to the general fund, funds up to the amount of the appropriation from the interest-bearing account (all funds in the account over the appropriation amount can be used for cash flow).

11 **Health plan company; definition.** Adds subd. 5 to § 253B.045. Defines "health plan company" for a section on payment for services provided to people who are subject to temporary confinement under the Civil Commitment Act.

12 **Coverage.** Adds subd. 6 to § 253B.045. Requires a health plan company to cover, according to the terms of the policy, all services provided to an enrollee that are medically necessary and that are ordered by a court under the Civil Commitment Act.

13 **Prepetition screening.** Amends § 253B.07, subd. 1. In a subdivision that requires a preliminary investigation to occur before a petition for commitment can be filed, requires the screening team that conducts the preliminary investigation to seek input from the proposed patient's health plan company about what services the proposed patient needs and about the least restrictive alternatives appropriate for the proposed patient.

14 **Aftercare and case management.** Adds subd. 5 to § 253B.185. In a section specifying procedures for committing people with sexual psychopathic personalities and sexually dangerous persons, specifies that the state, in collaboration with counties, is responsible for arranging and paying for aftercare and case management for people discharged after July 1, 1999.

15 **Room and board rate.** Adds subd. 7 to § 254.01. Defines "room and board rate" for the chapter on chemical dependency treatment.

16 **Reserve account.** Amends § 254B.02, subd. 3. Specifies that any funds in the reserve account
for chemical dependency services that are in excess of the amount needed to meet statutory obligations cancel to the general fund.

17 **Chemical dependency fund payment.** Amends § 254B.03, subd. 2. Strikes language requiring hospitals to apply to be licensed as vendors to become eligible for payments from the chemical dependency (CD) fund. Instead, requires all community hospitals licensed by the commissioner of health, and other certified vendors, to be reimbursed from the CD fund for room and board costs for clients who meet the criteria for placement in a residential CD treatment program and who are receiving CD treatment services from a licensed program.

18 **Eligibility.** § 254B.04, subd. 1, which specifies eligibility for services from the CD fund, is reproduced here. There are no changes made to this subdivision.

19 **Licensure required.** Amends § 254B.05, subd. 1. Lists requirements that vendors of room and board services must meet to obtain reimbursement for room and board services from the CD fund.

20 **Advisory task forces.** Amends § 256.01, subd. 6. Allows the commissioner to pay a $35 per diem to consumers and family members who participate in legislatively-authorized human services task forces and who are not serving as paid representatives of any agency or organization.

21 **Initiatives to provide alternatives to delivery of adult mental health services.** Codifies a section of session law in statute as § 245.4661. In a section authorizing the commissioner of human services to approve pilot projects on alternate methods of delivering adult mental health services or on enhancing coordination of these services, replaces the term "pilot project" with "adult mental health initiative." Strikes language directing the commissioner to biennially review the projects and recommend changes to the legislature.