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# State of Minnesota HOUSE OF REPRESENTATIVES

NINETY-FIRST SESSION

H. F. No. **1285**

02/18/2019 Authored by Moller, Zerwas, Mann, Morrison, Moran and others  
The bill was read for the first time and referred to the Committee on Health and Human Services Policy

- 1.1 A bill for an act
- 1.2 relating to human services; modifying consumer-directed community supports;
- 1.3 establishing a onetime grant program to promote consumer-directed community
- 1.4 supports; appropriating money; amending Laws 2017, First Special Session chapter
- 1.5 6, article 1, section 45.
- 1.6 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MINNESOTA:
- 1.7 Section 1. Laws 2017, First Special Session chapter 6, article 1, section 45, is amended
- 1.8 to read:
- 1.9 Sec. 45. **CONSUMER-DIRECTED COMMUNITY SUPPORTS BUDGET**
- 1.10 **METHODOLOGY EXCEPTION FOR PERSONS LEAVING INSTITUTIONS AND**
- 1.11 **CRISIS RESIDENTIAL SETTINGS.**
- 1.12 Subdivision 1. Exception for persons leaving institutions and crisis residential
- 1.13 settings. (a) By September 30, 2017, the commissioner shall establish an institutional and
- 1.14 crisis bed consumer-directed community supports budget exception process in the home
- 1.15 and community-based services waivers under Minnesota Statutes, sections 256B.092 and
- 1.16 256B.49. This budget exception process shall be available for any individual who:
- 1.17 (1) is not offered available and appropriate services within 60 days since approval for
- 1.18 discharge from the individual's current institutional setting; and
- 1.19 (2) requires services that are more expensive than appropriate services provided in a
- 1.20 noninstitutional setting using the consumer-directed community supports option.
- 1.21 (b) Institutional settings for purposes of this exception include intermediate care facilities
- 1.22 for persons with developmental disabilities; nursing facilities; acute care hospitals; Anoka

Metro Regional Treatment Center; Minnesota Security Hospital; and crisis beds. The budget exception shall be limited to no more than the amount of appropriate services provided in a noninstitutional setting as determined by the lead agency managing the individual's home and community-based services waiver. The lead agency shall notify the Department of Human Services of the budget exception.

**Subd. 2. Behavioral support services excluded.** (a) Behavioral support services are excluded from consumer-directed community supports budgets accessed from waiver funds outside of the consumer-directed community supports budget.

(b) No later than September 30, 2019, the commissioner of human services shall submit an amendment to the Centers for Medicare and Medicaid Services for the home and community-based services waivers authorized under Minnesota Statutes, sections 256B.092 and 256B.49, to exclude behavioral support services from consumer-directed community supports.

**Subd. 3. Shared services.** (a) Medical assistance payments for shared services under consumer-directed community supports are limited to this subdivision.

(b) For purposes of this subdivision, "shared services" means services provided in the same setting at the same time by the same worker for consumers who have entered into an agreement to share consumer-directed community support services.

(c) The consumer-directed community supports shared services agreement must include:

(1) the names of the recipients, case manager, and financial management services provider;

(2) the recipients' or recipients' representatives duties;

(3) the case manager's duties;

(4) the financial management services provider's duties;

(5) the schedule for shared services;

(6) the settings in which shared services are provided; and

(7) signatures of all parties involved in the shared services.

The recipient or recipient's representative may withdraw from participating in a shared services agreement at any time.

(d) Covered shared services include:

(1) behavioral redirection;

- 3.1 (2) caregiver relief;
- 3.2 (3) community inclusion;
- 3.3 (4) night monitoring;
- 3.4 (5) skill building related to the disability;
- 3.5 (6) supervision; and
- 3.6 (7) vocational activities.
- 3.7 (e) Noncovered shared services include:
- 3.8 (1) services for more than three recipients provided by one worker at one time;
- 3.9 (2) caring for multiple recipients in more than one setting at the same time;
- 3.10 (3) additional services based on selection of the shared services option;
- 3.11 (4) use of more than one provider for the shared services;
- 3.12 (5) services requiring one-to-one assistance;
- 3.13 (6) services provided by a spouse or paid parent of a minor; and
- 3.14 (7) child care services.
- 3.15 (f) The recipient or recipient's representative must elect to use the option of shared
- 3.16 services with the assistance of the case manager. The case manager must determine the
- 3.17 shared services option to be appropriate based on the ages of the recipients, compatibility,
- 3.18 and coordination of their assessed care needs. The recipient or the recipient's representative,
- 3.19 in conjunction with the case manager, shall:
- 3.20 (1) arrange the setting and grouping of shared services based on the individual needs
- 3.21 and preferences of the recipients;
- 3.22 (2) provide training specific to each recipient served; and
- 3.23 (3) follow all required documentation for time and services provided.
- 3.24 (g) The financial management services provider shall:
- 3.25 (1) allow the recipient or recipient's representative to select the option of shared or
- 3.26 one-to-one services; and
- 3.27 (2) follow all required documentation for time and services provided.
- 3.28 (h) The case manager shall:

4.1 (1) evaluate the ability of the provider to provide services for all of the recipients in a  
4.2 shared setting;

4.3 (2) visit the shared setting as services are being provided at least once every six months  
4.4 or whenever needed for response to a recipient's request;

4.5 (3) provide quarterly monitoring and evaluation of the effectiveness and appropriateness  
4.6 of the shared services;

4.7 (4) develop a contingency plan with each of the recipients that accounts for the absence  
4.8 of the recipient in a shared services setting due to illness or other circumstances;

4.9 (5) obtain permission from each of the recipients who are sharing services for the number  
4.10 of shared hours for services provided inside and outside the home residence; and

4.11 (6) document the training completed by the financial management services provider  
4.12 specific to the shared setting and recipients sharing services.

4.13 (i) The commissioner shall: (1) authorize the use of the shared services option based on  
4.14 the criteria that: (i) the shared service is appropriate to meet all of the recipients' needs; and  
4.15 (ii) the health and safety of the recipients will be maintained; and (2) provide a rate system  
4.16 for shared services under the consumer-directed community supports option. For two persons  
4.17 sharing services, the rate paid to a provider must not exceed one and one-half times the rate  
4.18 paid for serving one person. For three persons sharing services, the rate paid to a provider  
4.19 must not exceed twice the rate paid for serving one person. These rates apply only when all  
4.20 of the criteria for the shared services under consumer-directed community supports have  
4.21 been met.

4.22 (j) Recipients sharing services must use the same financial management services provider.

4.23 (k) Nothing in this subdivision must be construed to reduce the total number of hours  
4.24 of service authorized for an individual recipient.

4.25 (l) No later than September 30, 2019, the commissioner of human services shall submit  
4.26 an amendment to the Centers for Medicare and Medicaid Services for the home and  
4.27 community-based services waivers authorized under Minnesota Statutes, sections 256B.092  
4.28 and 256B.49, to allow for a shared services option under consumer-directed community  
4.29 supports.

4.30 **EFFECTIVE DATE.** This section is effective October 1, 2019, or upon federal approval,  
4.31 whichever is later. The commissioner of human services shall notify the revisor of statutes  
4.32 when federal approval is obtained.

5.1       Sec. 2. **REGIONAL AND LOCAL CONSUMER-DIRECTED COMMUNITY**  
5.2 **SUPPORTS EDUCATION AND MARKETING GRANTS.**

5.3       (a) The commissioner of human services shall award onetime, competitive grants to  
5.4 eligible applicants for regional and local projects targeted to a designated community of the  
5.5 applicant's choosing, which may consist of a specific geographic area or population, to:  
5.6 increase awareness of consumer-directed community supports; increase the rate of utilization  
5.7 of consumer-directed community supports, specifically in counties with low enrollment in  
5.8 the program; promote the benefits of support planning services; or connect eligible persons  
5.9 with disabilities, their parents and family members, and lead agency staff to education and  
5.10 resources related to consumer-directed community supports.

5.11       (b) The project areas for the grant include local or community-based initiatives to: (1)  
5.12 promote the benefits of consumer-directed community supports; and (2) provide informational  
5.13 materials and other resources to persons with disabilities eligible for consumer-directed  
5.14 community supports, their parents and family members, and lead agency staff.

5.15       (c) Eligible applicants may include but are not limited to statewide nonprofit organizations  
5.16 with regional and local presence that provide advocacy services and supports for persons  
5.17 with disabilities and their parents and family members.

5.18       (d) Applicants must: (1) describe the proposed project, including the targeted community  
5.19 and how the project meets the requirements of this section; and (2) identify the proposed  
5.20 outcomes of the project and the evaluation process to measure these outcomes.

5.21       (e) In awarding the regional and local consumer-directed community supports education  
5.22 and marketing grants, the commissioner of human services must give priority to applicants  
5.23 who demonstrate that the proposed project:

5.24       (1) is supported by and appropriately targeted to the community the applicant serves;

5.25       (2) is designed to coordinate with other community activities related to initiatives aimed  
5.26 at promoting independence, inclusion, and self-direction in the lives of persons with  
5.27 disabilities;

5.28       (3) is conducted by an applicant able to demonstrate expertise in the project areas;

5.29       (4) utilizes and enhances existing activities and resources or involves innovative  
5.30 approaches to achieve success in the project areas; and

5.31       (5) strengthens community relationships and partnerships in order to achieve the project  
5.32 areas.

(f) The commissioner shall divide the state into specific geographic regions and allocate a percentage of the money available for the regional and local consumer-directed community supports education and marketing grants to projects aimed at each geographic region with an emphasis on counties with low rates of utilization of consumer-directed community supports.

(g) The commissioner shall award the grants by January 31, 2020.

(h) A grantee shall report to the commissioner of human services on the progress of the project at least once during the grant period and, within two months of the end of the grant period, shall submit a final report to the commissioner that includes the measurable outcomes.

(i) The commissioner of human services shall:

(1) develop the criteria and procedures to allocate the grants under this section, evaluate all applicants on a competitive basis, award the grants, and select qualified providers to offer technical assistance to grant applicants and grantees. The selected providers shall assist applicants and grantees with project design, evaluation methods, materials, and training; and

(2) submit by January 15, 2021, a progress report on the consumer-directed community supports education and marketing grants under this section to the chairs and ranking minority members of the legislative committees with jurisdiction over health finance and policy. The report shall include:

(i) information on the grantees;

(ii) a summary of all projects undertaken with the grants;

(iii) the measurable outcomes established by the grantees, an explanation of the evaluation process used to determine whether the outcomes were met, and the results of the evaluation; and

(iv) an accounting of how the grant funds were spent.

**Sec. 3. APPROPRIATION.**

\$..... in fiscal year 2020 is appropriated from the general fund to the commissioner of human services for the regional and local consumer-directed community supports education and marketing grants described in this act. This is a onetime appropriation.

7.1      Sec. 4. **REVISOR INSTRUCTION.**

7.2      The revisor of statutes, in consultation with the House Research Department, Office of  
7.3 Senate Counsel, Research and Fiscal Analysis, and Department of Human Services, shall  
7.4 prepare legislation for the 2020 legislative session to codify laws governing  
7.5 consumer-directed community supports in Minnesota Statutes, chapter 256B.