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State of Minnesota
HOUSE OF REPRESENTATIVES
NINETIETH SESSION

H. F. No. 1571

02/22/2017 Authored by Dean, M., and Albright
The bill was read for the first time and referred to the Committee on Health and Human Services Finance

1.1 A bill for an act
1.2 relating to health; making statutory changes for the study on long-term care services
1.3 and supports; appropriating money for gap analysis in long-term care services;
1.4 amending Minnesota Statutes 2016, section 144A.351; Laws 2013, chapter 108,
1.5 article 15, section 2, subdivision 2.

1.6 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MINNESOTA:

1.7 Section 1. Minnesota Statutes 2016, section 144A.351, is amended to read:

1.8 **144A.351 BALANCING LONG-TERM CARE SERVICES AND SUPPORTS:**
1.9 **REPORT ~~AND STUDY~~ REQUIRED.**

1.10 Subdivision 1. **Report requirements.** The commissioners of health and human services,
1.11 with the cooperation of counties and in consultation with stakeholders, including persons
1.12 who need or are using long-term care services and supports, lead agencies, regional entities,
1.13 senior, disability, and mental health organization representatives, service providers, and
1.14 community members shall prepare a report to the legislature by August 15, 2013, and
1.15 biennially thereafter, regarding the status of the full range of long-term care services and
1.16 supports for the elderly and children and adults with disabilities and mental illnesses in
1.17 Minnesota. Any amounts appropriated for this report are available in either year of the
1.18 biennium. The report shall address:

1.19 (1) demographics and need for long-term care services and supports in Minnesota;

1.20 (2) summary of county and regional reports on long-term care gaps, surpluses, imbalances,
1.21 and corrective action plans;

1.22 (3) status of long-term care services and related mental health services, housing options,
1.23 and supports by county and region including:

- 2.1 (i) changes in availability of the range of long-term care services and housing options;
- 2.2 (ii) access problems, including access to the least restrictive and most integrated services
- 2.3 and settings, regarding long-term care services; and
- 2.4 (iii) comparative measures of long-term care services availability, including serving
- 2.5 people in their home areas near family, and changes over time; and
- 2.6 (4) recommendations regarding goals for the future of long-term care services and
- 2.7 supports, policy and fiscal changes, and resource development and transition needs.

2.8 ~~Subd. 2. **Critical access study.** The commissioner of human services shall conduct a~~
 2.9 ~~onetime study to assess local capacity and availability of home and community-based~~
 2.10 ~~services for older adults, people with disabilities, and people with mental illnesses. The~~
 2.11 ~~study must assess critical access at the community level and identify potential strategies to~~
 2.12 ~~build home and community-based service capacity in critical access areas. The report shall~~
 2.13 ~~be submitted to the legislature no later than August 15, 2015.~~

2.14 Sec. 2. Laws 2013, chapter 108, article 15, section 2, subdivision 2, is amended to read:

2.15 **Subd. 2. Central Office**

2.16 The amounts that may be spent from this
 2.17 appropriation for each purpose are as follows:

2.18 (a) Operations	2,909,000	8,957,000
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2.19 **Base Adjustment.** The general fund base is
 2.20 decreased by \$8,916,000 in fiscal year 2016
 2.21 and \$8,916,000 in fiscal year 2017.

2.22 (b) Children and Families	109,000	206,000
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2.23 (c) Continuing Care	2,849,000	3,574,000
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2.24 **Base Adjustment.** The general fund base is
 2.25 decreased by \$2,000 in fiscal year 2016 and
 2.26 by \$27,000 in fiscal year 2017.

2.27 (d) Group Residential Housing	(1,166,000)	(8,602,000)
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2.28 (e) Medical Assistance	(3,950,000)	(6,420,000)
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2.29 (f) Alternative Care	(7,386,000)	(6,851,000)
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2.30 (g) Child and Community Service Grants	3,000,000	3,000,000
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2.31 (h) Aging and Adult Services Grants	5,365,000	5,936,000
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3.1 ~~**Gaps Analysis.** In fiscal year 2014, and in~~
 3.2 ~~each even-numbered year thereafter, \$435,000~~
 3.3 ~~is appropriated to conduct an analysis of gaps~~
 3.4 ~~in long-term care services under Minnesota~~
 3.5 ~~Statutes, section 144A.351. This is a biennial~~
 3.6 ~~appropriation. The base is increased by~~
 3.7 ~~\$435,000 in fiscal year 2016. Notwithstanding~~
 3.8 ~~any contrary provisions in this article, this~~
 3.9 ~~provision does not expire.~~

3.10 **Base Adjustment.** The general fund base is
 3.11 increased by \$498,000 in fiscal year 2016, and
 3.12 decreased by \$124,000 in fiscal year 2017.

3.13	(i) Disabilities Grants	414,000	414,000
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3.14 Sec. 3. **GAP ANALYSIS; APPROPRIATION.**

3.15 \$217,500 in fiscal year 2018 and \$217,500 in fiscal year 2019 are appropriated from the
 3.16 general fund to the commissioner of health for analysis of gaps in long-term care services
 3.17 under Minnesota Statutes, section 144A.351.