This Document can be made available in alternative formats upon request

BD

State of Minnesota HOUSE OF REPRESENTATIVES First Division Engrossment H. F. No. 2116

NINETY-SECOND SESSION

03/11/2021	Authored by Frederick and Bliss The bill was read for the first time and referred to the Committee on Human Services Finance and Policy
	Division Action
03/12/2021 03/17/2021	Referred by Chair to the Behavioral Health Policy Division Returned to the Committee on Human Services Finance and Policy as Amended

1.1	A bill for an act
1.2 1.3	relating to human services; directing the commissioner of human services to make recommendations for substance use disorder treatment provider paperwork
1.4	reduction and systems improvement; appropriating money.
1.5	BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MINNESOTA:
1.6	Section 1. DIRECTION TO THE COMMISSIONER; SUBSTANCE USE DISORDER
1.7	TREATMENT PAPERWORK REDUCTION.
1.8	(a) The commissioner of human services, in consultation with counties, tribes, managed
1.9	care organizations, substance use disorder treatment professional associations, and other
1.10	relevant stakeholders, shall develop, assess, and recommend systems improvements to
1.11	minimize regulatory paperwork and improve systems for substance use disorder programs
1.12	licensed under Minnesota Statutes, chapter 245A, and regulated under Minnesota Statutes,
1.13	chapters 245F and 245G, and Minnesota Rules, chapters 2960 and 9530. The commissioner
1.14	of human services shall make available any resources needed from other divisions within
1.15	the department to implement systems improvements.
1.16	(b) The commissioner of health shall make available needed information and resources
1.17	from the Division of Health Policy.
1.18	(c) The Office of MN.IT Services shall provide advance consultation and implementation
1.19	of the changes needed in data systems.
1.20	(d) The commissioner of human services shall contract with a vendor that has experience
1.21	with developing statewide system changes for multiple states at the payer and provider
1.22	levels. If the commissioner, after exercising reasonable diligence, is unable to secure a
1.23	vendor with the requisite qualifications, then the commissioner may select the best qualified
Section 1.	1

BD

2.1	vendor available. When developing recommendations, the commissioner shall consider
2.2	input from all stakeholders. The commissioner's recommendations shall maximize benefits
2.3	for clients and utility for providers, regulatory agencies, and payers.
2.4	(e) The commissioner of human services and contracted vendor shall follow the
2.5	recommendations from the report issued in response to Laws 2019, First Special Session
2.6	chapter 9, article 6, section 76.
2.7	(f) By December 15, 2022, the commissioner of human services shall take steps to
2.8	implement paperwork reductions and systems improvements within the commissioner's
2.9	authority and submit to the chairs and ranking minority members of the legislative committees
2.10	with jurisdiction over health and human services a report that includes recommendations
2.11	for changes in statutes that would further enhance systems improvements to reduce
2.12	paperwork. The report shall include a summary of the approaches developed and assessed
2.13	by the commissioner of human services and stakeholders and the results of any assessments
2.14	conducted.
2.15	Sec. 2. APPROPRIATION.
2.16	\$200,000 in fiscal year 2022 and \$118,000 in fiscal year 2023 are appropriated from the
2.17	general fund to the commissioner of human services for a contract with the vendor described

2.18 in section 1, paragraph (d). This is a onetime appropriation.