

eight miles of the original facility, provided the original nursing home building will no longer be operated as a nursing home. As a condition of receiving a license or certification under this clause, the facility must make a written commitment to the commissioner of human services that it will not seek to receive an increase in its property-related payment rate as a result of the relocation.

Presented to the governor May 10, 1991

Signed by the governor May 14, 1991, 4:55 p.m.

CHAPTER 94—S.F.No. 226

An act relating to human services; consolidating and simplifying county mental health and community social services planning; authorizing the review and reduction of social service administrative requirements; establishing a process for limiting social services due to county fiscal limitations; amending Minnesota Statutes 1990, sections 245.465; 245.466, subdivision 5; 245.478, subdivisions 1, 2, and 6; 245.4874; 245.4875, subdivision 5; 245.4887, subdivisions 1, 2, and 6; 256.045, subdivision 3; 256E.04, subdivision 1; 256E.05, subdivisions 2, 3, 5, and by adding subdivisions; 256E.08, subdivision 1; 256E.09, subdivisions 1, 3, and 6; and 256E.12, by adding a subdivision; proposing coding for new law in Minnesota Statutes, chapter 256E; repealing Minnesota Statutes 1990, sections 245.462, subdivision 15; 245.4871, subdivision 23; 256B.092, subdivisions 1c and 1d; and 256E.09, subdivisions 4 and 5.

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

Section 1. Minnesota Statutes 1990, section 245.465, is amended to read:

245.465 DUTIES OF COUNTY BOARD.

The county board in each county shall use its share of mental health and community social ~~service~~ services act funds allocated by the commissioner according to a the biennial local mental health service proposal component of the county's community social services plan ~~as~~ approved by the commissioner. The county board must:

(1) develop and coordinate a system of affordable and locally available adult mental health services in accordance with sections 245.461 to 245.486;

(2) with the involvement of the local adult mental health advisory council or the adult mental health subcommittee of an existing advisory council, develop a biennial adult mental health component of the community social services plan required in section 256E.09 which considers the assessment of unmet needs in the county as reported by the local adult mental health advisory council under section 245.466, subdivision 5, clause (3). The county shall provide, upon request of the local adult mental health advisory council, readily available data to assist in the determination of unmet needs;

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(3) provide for case management services to adults with serious and persistent mental illness in accordance with sections 245.462, subdivisions 3 and 4; 245.4711; and 245.486;

(3) (4) provide for screening of adults specified in section 245.476 upon admission to a residential treatment facility or acute care hospital inpatient, or informal admission to a regional treatment center;

(4) (5) prudently administer grants and purchase-of-service contracts that the county board determines are necessary to fulfill its responsibilities under sections 245.461 to 245.486; and

(5) (6) assure that mental health professionals, mental health practitioners, and case managers employed by or under contract with the county to provide mental health services have experience and training in working with adults with mental illness.

Sec. 2. Minnesota Statutes 1990, section 245.466, subdivision 5, is amended to read:

Subd. 5. **LOCAL ADVISORY COUNCIL.** The county board, individually or in conjunction with other county boards, shall establish a local adult mental health advisory council or mental health subcommittee of an existing advisory council. The council's members must reflect a broad range of community interests. They must include at least one consumer, one family member of an adult with mental illness, one mental health professional, and one community support services program representative. The local adult mental health advisory council or mental health subcommittee of an existing advisory council shall meet at least quarterly to review, evaluate, and make recommendations regarding the local mental health system. Annually, the local adult mental health advisory council or mental health subcommittee of an existing advisory council shall:

(1) arrange for input from the regional treatment center's mental illness program unit regarding coordination of care between the regional treatment center and community-based services;

(2) identify for the county board the individuals, providers, agencies, and associations as specified in section 245.462, subdivision 10; ~~and~~

(3) provide to the county board a report of unmet mental health needs of adults residing in the county to be included in the county's biennial mental health component of the community social services plan required in section 256E.09, and participate in developing the mental health component of the plan; and

(4) coordinate its review, evaluation, and recommendations regarding the local mental health system with the state advisory council on mental health.

The county board shall consider the advice of its local mental health advisory council or mental health subcommittee of an existing advisory council in carrying out its authorities and responsibilities.

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Sec. 3. Minnesota Statutes 1990, section 245.478, subdivision 1, is amended to read:

Subdivision 1. TIME PERIOD SUBMITTAL OF ADULT MENTAL HEALTH COMPONENT. The first local mental health proposal period is from July 1, 1988, to December 31, 1989. The county board shall submit its first proposal to the commissioner by January 1, 1988. Subsequent proposals must be on the same two-year cycle as community social service plans. If a proposal complies with sections 245.461 to 245.486, it satisfies the requirement of the community social service plan for the mental illness target population as required by section 256E.09. The proposal must be made available upon request to all residents of the county at the same time it is submitted to the commissioner. Beginning in 1993, and every two years thereafter, the county board shall submit to the commissioner the adult mental health component of the community social services plan required under section 256E.09.

Sec. 4. Minnesota Statutes 1990, section 245.478, subdivision 2, is amended to read:

Subd. 2. PROPOSAL CONTENT OF ADULT MENTAL HEALTH COMPONENT. Content of the local adult mental health proposal must include: component of the community social services plan is governed by section 256E.09.

(1) the local adult mental health advisory council's or adult mental health subcommittee of an existing advisory council's report on unmet needs of adults and any other needs assessment used by the county board in preparing the local adult mental health proposal;

(2) a description of the local adult mental health advisory council's or the adult mental health subcommittee of an existing advisory council's involvement in preparing the local adult mental health proposal and methods used by the county board to ensure adequate and timely participation of citizens; mental health professionals; and providers in development of the local mental health proposal;

(3) information for the preceding year, including the actual number of clients who received each of the mental health services listed in sections 245.468 to 245.476, and actual expenditures for each mental health service and service waiting lists; and

(4) the following information describing how the county board intends to meet the requirements of sections 245.461 to 245.486 during the proposal period:

(i) specific objectives and outcome goals for each adult mental health service listed in sections 245.461 to 245.486;

(ii) a description of each service provider, including county agencies, contractors, and subcontractors, that is expected to either be the sole provider of

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one of the adult mental health services described in sections 245.461 to 245.486 or to provide over \$10,000 of adult mental health services per year, including a listing of the professional qualifications of the staff involved in service delivery for the county;

(iii) a description of how the adult mental health services in the county will be unified and coordinated;

(iv) the estimated number of clients who will receive each adult mental health service; and

(v) estimated expenditures for each adult mental health service and revenues for the entire proposal.

Sec. 5. Minnesota Statutes 1990, section 245.478, subdivision 6, is amended to read:

Subd. 6. PROPOSAL ADULT MENTAL HEALTH COMPONENT OF THE COMMUNITY SOCIAL SERVICES PLAN; APPROVAL. The commissioner shall review each local county's adult mental health proposal component of the community social services plan within 90 60 days and work with the county board to make any necessary modifications to comply with sections 245.461 to 245.486. After the commissioner has approved the proposal adult mental health component of the community social services plan, the county board is eligible to receive an allocation of mental health and community social service services act funds.

Sec. 6. Minnesota Statutes 1990, section 245.4874, is amended to read:

245.4874 DUTIES OF COUNTY BOARD.

The county board in each county shall use its share of mental health and community social service services act funds allocated by the commissioner according to a biennial local children's mental health service proposal component of the community social services plan required under section 245.4887, and approved by the commissioner. The county board must:

(1) develop a system of affordable and locally available children's mental health services according to sections 245.487 to 245.4887;

(2) establish a mechanism providing for interagency coordination as specified in section 245.4875, subdivision 6;

(3) develop a biennial children's mental health component of the community social services plan required under section 256E.09 which considers the assessment of unmet needs in the county as reported by the local children's mental health advisory council under section 245.4875, subdivision 5, paragraph (b), clause (3). The county shall provide, upon request of the local children's mental health advisory council, readily available data to assist in the determination of unmet needs;

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(4) assure that parents and providers in the county receive information about how to gain access to services provided according to sections 245.487 to 245.4887;

(3) (5) coordinate the delivery of children's mental health services with services provided by social services, education, corrections, health, and vocational agencies to improve the availability of mental health services to children and the cost effectiveness of their delivery;

(4) (6) assure that mental health services delivered according to sections 245.487 to 245.4887 are delivered expeditiously and are appropriate to the child's diagnostic assessment and individual treatment plan;

(5) (7) provide the community with information about predictors and symptoms of emotional disturbances and how to access children's mental health services according to sections 245.4877 and 245.4878;

(6) (8) provide for case management services to each child with severe emotional disturbance according to sections 245.486; 245.4871, subdivisions 3 and 4; and 245.4881, subdivisions 1, 3, and 5;

(7) (9) provide for screening of each child under section 245.4885 upon admission to a residential treatment facility, acute care hospital inpatient treatment, or informal admission to a regional treatment center;

(8) (10) prudently administer grants and purchase-of-service contracts that the county board determines are necessary to fulfill its responsibilities under sections 245.487 to 245.4887;

(9) (11) assure that mental health professionals, mental health practitioners, and case managers employed by or under contract to the county to provide mental health services are qualified under section 245.4871; and

(10) (12) assure that children's mental health services are coordinated with adult mental health services specified in sections 245.461 to 245.486 so that a continuum of mental health services is available to serve persons with mental illness, regardless of the person's age.

Sec. 7. Minnesota Statutes 1990, section 245.4875, subdivision 5, is amended to read:

Subd. 5. **LOCAL CHILDREN'S ADVISORY COUNCIL.** (a) By October 1, 1989, the county board, individually or in conjunction with other county boards, shall establish a local children's mental health advisory council or children's mental health subcommittee of the existing local mental health advisory council or shall include persons on its existing mental health advisory council who are representatives of children's mental health interests. The following individuals must serve on the local children's mental health advisory council, the children's mental health subcommittee of an existing local mental health advisory council, or be included on an existing mental health advisory council: (1) at

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least one person who was in a mental health program as a child or adolescent; (2) at least one parent of a child or adolescent with severe emotional disturbance; (3) one children's mental health professional; (4) representatives of minority populations of significant size residing in the county; (5) a representative of the children's mental health local coordinating council; and (6) one family community support services program representative.

(b) The local children's mental health advisory council or children's mental health subcommittee of an existing advisory council shall seek input from parents, former consumers, providers, and others about the needs of children with emotional disturbance in the local area and services needed by families of these children, and shall meet monthly, unless otherwise determined by the council or subcommittee, but not less than quarterly, to review, evaluate, and make recommendations regarding the local children's mental health system. Annually, the local children's mental health advisory council or children's mental health subcommittee of the existing local mental health advisory council shall:

(1) arrange for input from the local system of care providers regarding coordination of care between the services; ~~and~~

(2) identify for the county board the individuals, providers, agencies, and associations as specified in section 245.4877, clause (2); and

(3) provide to the county board a report of unmet mental health needs of children residing in the county to be included in the county's biennial children's mental health component of the community social services plan required under section 256E.09, and participate in developing the mental health component of the plan.

(c) The county board shall consider the advice of its local children's mental health advisory council or children's mental health subcommittee of the existing local mental health advisory council in carrying out its authorities and responsibilities.

Sec. 8. Minnesota Statutes 1990, section 245.4887, subdivision 1, is amended to read:

Subdivision 1. **TIME PERIOD SUBMITTAL OF CHILDREN'S MENTAL HEALTH COMPONENT.** ~~The county board shall submit its first complete children's section of its local mental health proposal to the commissioner by November 15, 1989. Subsequent proposals must be on the same two-year cycle as community social service plans. If a proposal complies with sections 245.487 to 245.4887, it satisfies the requirement of the community social service plan for the emotionally disturbed target population as required by section 256E.09. The proposal must be made available upon request to all residents of the county at the same time it is submitted to the commissioner. Beginning in 1993, and every two years thereafter, the county board shall submit to the commissioner a children's mental health component of the community social services plan required under section 256E.09.~~

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Sec. 9. Minnesota Statutes 1990, section 245.4887, subdivision 2, is amended to read:

Subd. 2. **PROPOSAL CONTENT OF CHILDREN'S MENTAL HEALTH COMPONENT.** Content of the children's section of the local mental health proposal must include: component of the community social services plan is governed by section 256E.09.

(1) a report of the local children's mental health advisory council or children's mental health subcommittee of the existing local mental health advisory council on unmet needs of children and any other needs assessment used by the county board in preparing the local mental health proposal; including the report of the local coordinating council or local interagency task force specified in section 245.4875, subdivision 6;

(2) a description of the involvement of the local children's mental health advisory council or the children's mental health subcommittee of the existing local mental health advisory council in preparing the local mental health proposal and methods used by the county board to ensure adequate and timely participation of citizens; mental health professionals; and providers in development of the local mental health proposal;

(3) information for the preceding year, including the actual number of children who received each of the mental health services listed in sections 245.487 to 245.4887; and actual expenditures for each mental health service and service waiting lists; and

(4) the following information describing how the county board intends to meet the requirements of sections 245.487 to 245.4887 during the proposal period:

(i) specific objectives and outcome goals for each mental health service listed in sections 245.487 to 245.4887;

(ii) a description of each service provider, including county agencies; contractors; and subcontractors; that is expected to either be the sole provider of one of the mental health services described in sections 245.487 to 245.4887 or to provide over \$10,000 of mental health services per year, including a listing of the professional qualifications of the staff involved in service delivery for the county;

(iii) a description of how the mental health services in the county will be unified and coordinated; including the mechanism established by the county board providing for interagency coordination as specified in section 245.4875, subdivision 6;

(iv) the estimated number of children who will receive each mental health service; and

(v) estimated expenditures for each mental health service and revenues for the entire proposal.

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Sec. 10. Minnesota Statutes 1990, section 245.4887, subdivision 6, is amended to read:

Subd. 6. PROPOSAL CHILDREN'S MENTAL HEALTH COMPONENT OF THE COMMUNITY SOCIAL SERVICES PLAN; APPROVAL. The commissioner shall review each county's children's ~~section of the local mental health proposal component of the community social services plan~~ within 90 ~~60~~ days and work with the county board to make any necessary modifications to comply with sections 245.487 to 245.4887. After the commissioner has approved the ~~proposal~~ children's mental health component of the community social services plan, the county board is eligible to receive an allocation of mental health and community social ~~service~~ services act funds.

Sec. 11. Minnesota Statutes 1990, section 256.045, subdivision 3, is amended to read:

Subd. 3. **STATE AGENCY HEARINGS.** Any person applying for, receiving or having received public assistance or a program of social services granted by the state agency or a county agency under sections 252.32, 256.031 to 256.036, and 256.72 to 256.879, chapters 256B, 256D, 256E, 261, or the federal Food Stamp Act whose application for assistance is denied, not acted upon with reasonable promptness, or whose assistance is suspended, reduced, terminated, or claimed to have been incorrectly paid, or any patient or relative aggrieved by an order of the commissioner under section 252.27, or a party aggrieved by a ruling of a prepaid health plan, may contest that action or decision before the state agency by submitting a written request for a hearing to the state agency within 30 days after receiving written notice of the action or decision, or within 90 days of such written notice if the applicant, recipient, patient, or relative shows good cause why the request was not submitted within the 30-day time limit.

Except for a prepaid health plan, a vendor of medical care as defined in section 256B.02, subdivision 7, or a vendor under contract with a county agency to provide social services under section 256E.08, subdivision 4, is not a party and may not request a hearing under this section.

An applicant or recipient is not entitled to receive social services beyond the services included in the amended community social services plan developed under section 256E.081, subdivision 3, if the county agency has met the requirements in section 256E.081.

Sec. 12. Minnesota Statutes 1990, section 256E.04, subdivision 1, is amended to read:

Subdivision 1. The commissioner shall prepare a biennial social services plan and present the plan to the governor and the legislature. The commissioner shall update the plan biennially. The plan shall include:

(a) A statement of methods used to ensure intergovernmental coordination of state and local planning and delivery of community social services;

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(b) A coordination statement setting forth the relationship of the state social services plan to any other federal, state or locally financed human services programs, including but not limited to, programs for the aged, children, the developmentally disabled, the chemically dependent, and programs related to corrections, education, vocational rehabilitation, mental health, housing, health, and employment; ~~and~~

(c) A summary and analysis of all county biennial community social services plans;

(d) Identification of social services program requirements which counties have identified as unnecessarily administratively burdensome;

(e) Identification of social services program requirements for which inadequate state and local funding is available; and

(f) Identification of unmet needs reported by the county agencies.

The commissioner shall consult with the heads of human service related state departments and agencies in preparing the coordination statement required by this subdivision.

Sec. 13. Minnesota Statutes 1990, section 256E.05, is amended by adding a subdivision to read:

Subd. 1a. REVIEW OF ADMINISTRATIVE REQUIREMENTS. The commissioner may review social services administrative rule requirements and adopt amendments under chapter 14 to reduce administrative costs and complexity by eliminating unnecessary or excessive paperwork, simplifying or consolidating program requirements, or emphasizing outcomes rather than procedures. In determining the reasonableness of the requirements, the commissioner shall consider the needs the service was developed to address and the adequacy of the state and local funding available to provide the service.

Sec. 14. Minnesota Statutes 1990, section 256E.05, subdivision 2, is amended to read:

Subd. 2. **PLAN APPROVAL.** Within ~~45~~ 60 days after submission of the community social services plan by the counties pursuant to section 256E.09, subdivision 4 ~~1~~, the commissioner shall certify whether the plan fulfills the purposes and requirements of section 256E.09, state and federal law and the rules of the state agency. On certifying that the plan does not do so, the commissioner shall state the reasons therefore, and the county shall have 30 days to submit a plan amended to comply with the requirements of the commissioner. If the county fails to resubmit a plan amended as required by the commissioner, the commissioner shall notify the county of the intention to reduce the next quarterly payment by an amount equal to one-third of one percent of the county's annual entitlement for each 30 day period during which the county fails to amend the plan as required by the commissioner. The county board has the

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right to appeal the commissioner's decision pursuant to section 256E.06, subdivision 10.

Sec. 15. Minnesota Statutes 1990, section 256E.05, subdivision 3, is amended to read:

Subd. 3. **ADDITIONAL DUTIES.** The commissioner shall also:

(a) Provide necessary forms and instructions to the counties for plan format and information;

(b) To the extent possible, coordinate other categorical social ~~service~~ services grant applications and plans required of counties so that the applications and plans are included in and are consistent with the timetable and other requirements for the community social services plan in subdivision 2 and section 256E.09;

(c) Provide to the chair of each county board, in addition to notice required pursuant to sections 14.05 to 14.36, timely advance notice and a written summary of the fiscal impact of any proposed new rule or changes in existing rule which will have the effect of increasing county costs for community social services;

(d) Provide training, technical assistance, and other support services to county boards to assist in needs assessment, planning, implementing, and monitoring social services programs in the counties;

(e) Design and implement a method of monitoring and evaluating social services, including site visits that utilize quality control audits to assure county compliance with applicable standards, guidelines, and the county and state social services plans;

(f) Design and implement a system that uses corrective action procedures as established in subdivision 5 and a schedule of fines to ensure county compliance with statutes, rules, federal laws, and federal regulations governing community social services. In determining the amount of the fine, the commissioner may consider the number of community social services clients or applicants affected by the county's failure to comply with the law or rule, the severity of the non-compliance, ~~and the duration of the noncompliance as determined by the commissioner,~~ the resources allocated for the provision of the service in the community social services plan approved under section 256E.09, and the amount the county is levying for social services and income maintenance programs under section 275.50, subdivision 5. Fines levied against a county under this subdivision must not exceed ten percent of the county's community social services allocation for the year in which the fines are levied;

(g) Design and implement an incentive program for the benefit of counties that perform at a level that consistently meets or exceeds the minimum standards in law and rule. Fines collected under paragraph (e) may be placed in an

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incentive fund and used for the benefit of counties that meet and exceed the minimum standards;

(h) Specify requirements for reports, including fiscal reports, according to section 256.01, subdivision 2, paragraph (17), to account for aids distributed under section 256E.06, funds from Title XX of the Social Security Act distributed under Minnesota Statutes, section 256E.07, claims under Title IV-E of the Social Security Act, mental health funding, and other social ~~service~~ services expenditures and activities; and

(i) Request waivers from federal programs as necessary to implement sections 256E.01 to 256E.12.

Sec. 16. Minnesota Statutes 1990, section 256E.05, is amended by adding a subdivision to read:

Subd. 3a. DEMONSTRATION PROJECT. (a) The commissioner may establish demonstration projects to test alternatives to existing state requirements.

(b) At least one demonstration project may be developed to demonstrate alternative methods of social services planning. For the purposes of this demonstration project, the commissioner:

(1) shall allow participating counties to combine all social services plans into one comprehensive plan unless a separate plan is necessary to comply with federal regulations or maintain federal financial participation;

(2) may waive social service program maintenance of effort requirements not required to comply with federal regulations or maintain federal financial participation, at the request of a county or counties participating in the planning process;

(3) may exempt counties participating in the planning demonstration from fiscal sanctions for noncompliance with social services requirements in state statute, provided the county proposal includes a schedule of fines for noncompliance approved by the commissioner;

(4) may establish a county match requirement for social services. If the county has spent or obligated all of its state and federal social services funds and the required matching funds, the county must be considered to be making reasonable efforts to comply with all state social services requirements as required in section 256E.081, subdivision 2, and is not required to provide social services beyond the services included in the county's amended community social services plan; and

(5) shall require participating counties to describe the system to be used to evaluate performance under the combined county plan.

(c) At least one demonstration project may be developed to test alternative

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methods of delivering services to persons with developmental disabilities or persons with mental illness.

(d) Up to six demonstration projects may be established to test alternatives to existing requirements that maintain or enhance services but reduce administrative burdens, eliminate unnecessary or excessive paperwork, simplify or consolidate requirements, or otherwise reduce administrative costs and complexity of social services programs.

(e) The commissioner shall consult with county staff, service providers, and service recipients or their advocates in the selection of the proposals for the demonstration projects.

(f) In selecting the demonstration projects, the commissioner may give preference to proposals submitted by two or more counties.

(g) During the duration of the demonstration projects, the commissioner may waive administrative rule requirements in the demonstration counties if the proposal demonstrates that the needs the requirements were developed to address can be met using an alternative approach. The commissioner shall not waive rule requirements which affect an individual's eligibility for services or right to due process.

(h) If the county fails to meet the conditions in the demonstration project proposal as approved by the commissioner, the commissioner may rescind the waiver of the rule requirements.

(i) The demonstration projects must be completed by July 1, 1995.

(j) The legislative auditor shall evaluate the results of the demonstration projects.

(k) If the results of the demonstration projects indicate that the needs the administrative rule requirements were developed to address can be met by means that are less costly and less prescriptive, and that give counties greater flexibility when providing social services, the commissioner may amend or repeal the appropriate social services rule requirement under chapter 14. If the requirement is specified in statute, the commissioner shall recommend legislative changes in the biennial state plan under section 256E.04, subdivision 1.

Sec. 17. Minnesota Statutes 1990, section 256E.05, subdivision 5, is amended to read:

Subd. 5. **CORRECTIVE ACTION PROCEDURE.** The commissioner must comply with the following procedures when imposing fines under subdivision 3, paragraph (e), or reducing county funds under subdivision 4.

(a) The commissioner shall notify the county, by certified mail, of the statute, rule, federal law, or federal regulation with which the county has not complied.

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(b) The commissioner shall give the county 30 days to demonstrate to the commissioner that the county is in compliance with the statute, rule, federal law, or federal regulation cited in the notice or to develop a corrective action plan to address the problem. Upon request from the county, the commissioner shall provide technical assistance to the county in developing a corrective action plan. The county shall have 30 days from the date the technical assistance is provided to develop the corrective action plan.

(c) The commissioner shall take no further action if the county demonstrates compliance.

(d) The commissioner shall review and approve or disapprove the corrective action plan within 30 days after the commissioner receives the corrective action plan.

(e) If the commissioner approves the corrective action plan submitted by the county, the county has 90 days after the date of approval to implement the corrective action plan.

(f) If the county fails to demonstrate compliance or fails to implement the corrective action plan approved by the commissioner, the commissioner may fine the county according to subdivision 3, paragraph (e), or may reduce the county's share of state or federal funds according to subdivision 4.

(g) The commissioner may not impose a fine or reduce funds under this subdivision if the county demonstrates that:

(1) the county is unable to comply with a social services administrative rule due to fiscal limitations and the county has met the requirements in section 256E.081; or

(2) the commissioner failed to provide appropriate forms, guidelines, and technical assistance to enable the county to comply with the requirements.

(h) The county may appeal the fine or the reduction in funds under section 256E.06, subdivision 10.

Sec. 18. Minnesota Statutes 1990, section 256E.08, subdivision 1, is amended to read:

Subdivision 1. **RESPONSIBILITIES.** The county board of each county shall be responsible for administration, planning and funding of community social services. Each county board shall singly or in combination with other county boards as provided in section 256E.09 prepare a social services plan and shall update the plan biennially. Upon final approval of the plan by the county board or boards, the plan shall be submitted to the commissioner. The county board shall distribute money, available pursuant to sections 256E.06 and 256E.07 for community social services.

The authority and responsibilities of county boards for social services for

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groups of persons identified in section 256E.03, subdivision 2, shall include contracting for or directly providing:

(1) information about the symptoms and characteristics of specific problems of the identified groups to increase understanding and acceptance by the general public, to help alleviate fears of seeking help, and to enable access to appropriate assistance;

(2) an assessment of the needs of each person applying for assistance which estimates the nature and extent of the problem to be addressed and identifies the means available to meet the person's needs. These diagnostic and evaluation activities shall evaluate the functioning of each person with regard to an illness or disability, screen for placement, and determine the need for services;

(3) protection aimed at alleviating urgent needs of each person by determining urgent need, shielding persons in hazardous conditions when they are unable to care for themselves, and providing urgently needed assistance;

(4) supportive and rehabilitative activities that assist each person to function at the highest level of independence possible for the person, preferably without removing the person from home. These activities include coordinating with local public rehabilitation agencies, local education agencies, and other agencies, both increasing to increase the client's level of functioning and maintaining to maintain current levels of functioning;

(5) a means of facilitating access of physically handicapped or impaired persons to activities appropriate to their needs; and

(6) administrative activities to coordinate and facilitate the effective use of formal and informal helping systems to best address client needs and goals. This includes assisting the client in making informed decisions about opportunities and services, assuring timely access to needed assistance, providing opportunities and encouragement for self-help activities, and coordinating all services to meet the client's needs and goals. County case management shall be responsible for determining appropriate care and activities.

A county board may delegate to a county welfare board established under chapter 393 authority to provide or approve contracts for the purchase of the kinds of community social services that were provided or contracted for by the county welfare boards before the enactment of Laws 1979, chapter 324. The county board must determine how citizens will participate in the planning process, give final approval to the community social services plan, and distribute community social services money.

Sec. 19. [256E.081] FISCAL LIMITATIONS.

Subdivision 1. SERVICE LIMITATION. If the county has met the requirements in subdivisions 2, 3, and 4, the county shall not be required to provide social services beyond the services required in federal law or state statute or included in the county's amended community social services plan.

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Subd. 2. DEMONSTRATION OF REASONABLE EFFORT. The county shall make reasonable efforts to comply with all state social services requirements. For the purposes of this section, a county is making reasonable efforts if the county meets the following requirements:

(1) the total amount of money budgeted by the county for social services is equal to or greater than the total amount spent by the county for social services in the prior year, adjusted by any change in state or federal funding used by the county to fund social services in the prior year. When calculating the adjustment for changes in state or federal funding, the amount of the change in any funding source which can be used by the county for purposes other than social services shall be limited to an amount which has been adjusted by a formula based upon the proportionate share which social services is of the total county levy certified to the county auditor under section 275.07, subdivision 1, before the application of any aids;

(2) the county has spent, obligated, or projects expenditures in excess of the amount budgeted by the county for at least one social service program or service;

(3) the total social services expenditures for the county are projected to meet or exceed the total amount of money available for social services from all sources of social services funding; and

(4) the county has made efforts to comply with social services requirements within the limits of available funding, including efforts to identify and apply for commonly available state and federal funding for social services programs or services.

Subd. 3. IDENTIFICATION OF SERVICES TO BE PROVIDED. If a county has made reasonable efforts, as defined in subdivision 2, to comply with all social services administrative rule requirements and is unable to meet all requirements, the county must provide services according to an amended community social services plan developed by the county and approved by the commissioner under section 256E.09, subdivision 6. The plan must identify for the remainder of the calendar year the social services administrative rule requirements the county shall comply with within its fiscal limitations and identify the social services administrative rule requirements the county will not comply with due to fiscal limitations. The plan must specify how the county intends to provide services required by federal law or state statute, including but not limited to:

(1) providing services needed to protect children and vulnerable adults from maltreatment, abuse, and neglect;

(2) providing emergency and crisis services needed to protect clients from physical, emotional, or psychological harm;

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(3) assessing and documenting the needs of persons applying for services;

(4) providing case management services to developmentally disabled clients, adults with serious and persistent mental illness, and children with severe emotional disturbances;

(5) providing day training and habilitation services for persons with developmental disabilities and family community support services for children with severe emotional disturbances;

(6) providing subacute detoxification services;

(7) providing public guardianship services; and

(8) fulfilling licensing responsibilities delegated to the county by the commissioner under section 245A.16.

Subd. 4. DENIAL, REDUCTION, OR TERMINATION OF SERVICES.

(a) Before a county denies, reduces, or terminates services to an individual due to fiscal limitations, the county must meet the requirements in subdivisions 2 and 3, and document in the person's individual service plan:

(1) the person's service needs;

(2) the alternatives considered for meeting the person's service needs; and

(3) the actions that will be taken to prevent abuse or neglect as defined in sections 626.556, subdivision 2, paragraphs (a), (c), (d), and (k); and 626.557, subdivision 2, paragraphs (d) and (e).

(b) The county must notify the individual and the individual's guardian in writing of the reason for the denial, reduction, or termination of services and of the individual's right to an appeal under section 256.045;

(c) the county must inform the individual and the individual's guardian in writing that the county will, upon request, meet to discuss alternatives and amend the individual service plan before services are terminated or reduced.

Sec. 20. Minnesota Statutes 1990, section 256E.09, subdivision 1, is amended to read:

Subdivision 1. **PLAN PROPOSAL.** Beginning in 1989, and every two years after that, the county board shall submit to the commissioner a proposed community social services plan for the next two calendar years. The county board shall publish and make available upon request to all county residents a the proposed biennial community social services plan ~~for the next two calendar years.~~

Sec. 21. Minnesota Statutes 1990, section 256E.09, subdivision 3, is amended to read:

Subd. 3. **PLAN CONTENT.** The biennial community social services plan published by the county shall include:

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(a) A statement of the goals of community social service programs in the county;

(b) Methods used pursuant to subdivision 2 to encourage participation of citizens and providers in the development of the plan and the allocation of money;

(c) Methods used to identify persons in need of service and the social problems to be addressed by the community social service programs; including efforts the county proposes to make in providing for early intervention, prevention and education aimed at minimizing or eliminating the need for services for groups of persons identified in section 256E.03, subdivision 2;

(d) A statement describing how the county will fulfill its responsibilities identified in section 256E.03, subdivision 1, to the groups of persons described in section 256E.03, subdivision 2, and a description of each community social service proposed and identification of the agency or person proposed to provide the service;

(e) A statement describing how the county proposes to make the following services available for persons identified by the county as in need of services: daytime developmental achievement services for children; day training and habilitation services for adults; extended employment program services for persons with disabilities; supported employment services as defined in section 252.41, subdivision 8; community-based employment programs as defined in section 268A.01, subdivision 11; subacute detoxification services; and residential services and nonresidential social support services as appropriate for the groups identified in section 256E.03, subdivision 2;

(f) A statement specifying how the county will collaboratively plan the development of supported employment services and community-based employment services with local representatives of public rehabilitation agencies and local education agencies; including, if necessary, how existing day or employment services could be modified to provide supported employment services and community-based employment services;

(g) A statement describing how the county is fulfilling its responsibility to establish a comprehensive and coordinated system of early intervention services as required under section 120.17, subdivisions 11a, 12, and 14;

(h) The amount of money proposed to be allocated to each service;

(i) An inventory of public and private resources including associations of volunteers which are available to the county for social services;

(j) Evidence that serious consideration was given to the purchase of services from private and public agencies; and

(k) Methods whereby community social service programs will be monitored and evaluated by the county.

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(1) a description of the planning process, including methods used to assess needs and obtain citizen input;

(2) county outcome goals and specific objectives for each program area;

(3) a description of resources allocated within the county to support each program and service;

(4) a description of the services to be provided;

(5) an analysis of the adequacy of resources available to support the community social services plan including estimates of unmet needs;

(6) a description of how the service system will be coordinated within each program area; and

(7) a statement signed by the county board or its designee that the county is in compliance with specified Minnesota Statutes.

Sec. 22. Minnesota Statutes 1990, section 256E.09, subdivision 6, is amended to read:

Subd. 6. **PLAN AMENDMENT.** After providing opportunity for public comment, the county may amend its plan. After approval of the amendment by the county board, the county shall submit to the commissioner its amendment to the commissioner and a statement signed by the county board or its designee that the county is in compliance with specified Minnesota Statutes. When certifying the amendment according to section 256E.05, subdivision 2, the commissioner shall certify whether the amendment fulfills the purpose and requirements of law and the rules of the state agency consider: (1) the effect of the proposed amendment on efforts to prevent inappropriate or facilitate appropriate residential placements; and

(2) the resources allocated for the provision of services in the community social services plan approved under section 256E.09, and the amount the county is levying for social services and income maintenance programs under section 275.50, subdivision 5.

Sec. 23. Minnesota Statutes 1990, section 256E.12, is amended by adding a subdivision to read:

Subd. 4. For calendar year 1992 and all subsequent years, the commissioner shall allocate the money appropriated under this section on a calendar year basis. The commissioner may continue to allocate part of the money on a state fiscal year basis for special projects.

Sec. 24. **INSTRUCTION TO REVISOR.**

In the 1991 supplement to Minnesota Statutes, the revisor of statutes shall substitute references to "local mental health service proposals," "local adult

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mental health proposal,” or “local children’s mental health proposal,” or similar terms or phrases which appear in Minnesota Statutes, chapter 245, with “adult mental health component of the community social services plan” or “children’s mental health component of the community social services plan,” or similar terms, as appropriate. The revisor shall consult with staff from the department of human services in determining the appropriate substitutions.

Sec. 25. REPEALER.

Minnesota Statutes 1990, sections 245.462, subdivision 15; 245.4871, subdivision 23; 256B.092, subdivisions 1c and 1d; and 256E.09, subdivisions 4 and 5, are repealed.

Sec. 26. EFFECTIVE DATE.

Sections 4, 9, and 21 are effective January 1, 1993.

Presented to the governor May 10, 1991

Signed by the governor May 14, 1991, 4:45 p.m.

CHAPTER 95—S.F.No. 231

An act relating to insurance; accident and health; defining full-time students for purposes of dependent coverage; proposing coding for new law in Minnesota Statutes, chapter 62A.

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

Section 1. [62A.301] COVERAGE FOR FULL-TIME STUDENTS.

If an insurer provides individual or group accident and health coverage for dependents after what otherwise would be the limiting age based on full-time student status the insurer must include in its definition of full-time student, any student who by reason of illness, injury, or physical or mental disability as documented by a physician is unable to carry what the educational institution considers a full-time course load so long as the student’s course load is at least 60 percent of what otherwise is considered by the institution to be a full-time course load.

For purposes of this section, “insurer” means an insurer providing accident and health insurance regulated under this chapter, a nonprofit health service plan corporation regulated under chapter 62C, a health maintenance organization regulated under chapter 62D, or a fraternal benefit society regulated under chapter 64B.

Sec. 2. EFFECTIVE DATE.

New language is indicated by underline, deletions by ~~strikeout~~.