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State of Minnesota

HOUSE OF REPRESENTATIVES н. г. №. 2101 NINETIETH SESSION

03/06/2017

Authored by Liebling, Hamilton, Moran and Maye Quade The bill was read for the first time and referred to the Committee on Health and Human Services Reform

1.1	A bill for an act
1.2 1.3 1.4 1.5 1.6 1.7	relating to human services; expanding eligibility for child care assistance; modifying requirements for treatment prior to diagnostic assessments; expanding multigenerational mental health services; appropriating money; amending Minnesota Statutes 2016, sections 119B.05, subdivision 1; 245.467, by adding a subdivision; 245.4876, by adding a subdivision; 245.4889, subdivision 1; 256B.0625, subdivision 51.
1.8	BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MINNESOTA:
1.9	Section 1. Minnesota Statutes 2016, section 119B.05, subdivision 1, is amended to read:
1.10	Subdivision 1. Eligible participants. Families eligible for child care assistance under
1.11	the MFIP child care program are:
1.12 1.13	(1) MFIP participants who are employed or in job search and meet the requirements of section 119B.10;
1.14	(2) persons who are members of transition year families under section 119B.011,
1.15	subdivision 20, and meet the requirements of section 119B.10;
1.16	(3) families who are participating in employment orientation or job search, or other
1.17	employment or training activities that are included in an approved employability development
1.18	plan under section 256J.95;
1.19	(4) MFIP families who are participating in work job search, job support, employment,
1.20	or training activities as required in their employment plan, or in appeals, hearings,
1.21	assessments, or orientations according to chapter 256J;
1.22	(5) MFIP families who are participating in social services activities under chapter 256J
1.23	as required in their employment plan approved according to chapter 256J;

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2.1	(6) families who are participating in services or activities that are included in an approved
2.2	family stabilization plan under section 256J.575;
2.3	(7) families who are participating in programs as required in tribal contracts under section
2.3 2.4	119B.02, subdivision 2, or 256.01, subdivision 2;
2.4	
2.5	(8) families who are participating in the transition year extension under section 119B.011,
2.6	subdivision 20a; and
2.7	(9) student parents as defined under section 119B.011, subdivision 19b-; and
2.8	(10) MFIP child-only cases under section 256J.88, for up to 20 hours of child care per
2.9	week for children age six and younger, as recommended by the treating mental health
2.10	professional, in which the child's primary caregiver has a diagnosis of a mental illness and
2.11	is in need of intensive treatment or the child is in need of a consistent caregiver.
2.12	Sec. 2. Minnesota Statutes 2016, section 245.467, is amended by adding a subdivision to
2.13	read:
2.14	Subd. 2a. Treatment before diagnostic assessment. Notwithstanding the requirements
2.15	in subdivision 2 specifying time frames within which diagnostic assessments must be
2.16	completed, the commissioner, in consultation with stakeholders, shall identify mechanisms
2.17	to allow providers to provide a limited number of therapy sessions before conducting a
2.18	diagnostic assessment for adults from specific cultural communities, including refugees and
2.19	homeless youth, if more time is needed to develop a therapeutic relationship.
2.20	Sec. 3. Minnesota Statutes 2016, section 245.4876, is amended by adding a subdivision
2.21	to read:
2.22	Subd. 2a. Treatment before diagnostic assessment. Notwithstanding the requirements
2.23	in subdivision 2 specifying time frames within which diagnostic assessments must be
2.24	completed, the commissioner, in consultation with stakeholders, shall identify mechanisms
2.25	to allow providers to provide a limited number of therapy sessions before conducting a
2.26	diagnostic assessment for children at risk of developing a mental illness due to trauma, and
2.27	for children from specific cultural communities, including refugees and homeless youth, if
2.28	more time is needed to develop a therapeutic relationship.
2.29	Sec. 4. Minnesota Statutes 2016, section 245.4889, subdivision 1, is amended to read:

2.30 Subdivision 1. Establishment and authority. (a) The commissioner is authorized to
2.31 make grants from available appropriations to assist:

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3.1	(1) counties;
3.2	(2) Indian tribes;
3.3	(3) children's collaboratives under section 124D.23 or 245.493; or
3.4	(4) mental health service providers.
3.5	(b) The following services are eligible for grants under this section:
3.6	(1) services to children with emotional disturbances as defined in section 245.4871,
3.7	subdivision 15, and their families;
3.8	(2) transition services under section 245.4875, subdivision 8, for young adults under
3.9	age 21 and their families;
3.10	(3) respite care services for children with severe emotional disturbances who are at risk
3.11	of out-of-home placement;
3.12	(4) children's mental health crisis services;
3.13	(5) mental health services for people from cultural and ethnic minorities;
3.14	(6) children's mental health screening and follow-up diagnostic assessment and treatment;
3.15	(7) services to promote and develop the capacity of providers to use evidence-based
3.16	practices in providing children's mental health services;
3.17	(8) school-linked mental health services;
3.18	(9) building evidence-based mental health intervention capacity for children birth to age
3.19	five;
3.20	(10) suicide prevention and counseling services that use text messaging statewide;
3.21	(11) mental health first aid training;
3.22	(12) training for parents, collaborative partners, and mental health providers on the
3.23	impact of adverse childhood experiences and trauma and development of an interactive
3.24	Web site to share information and strategies to promote resilience and prevent trauma;
3.25	(13) transition age services to develop or expand mental health treatment and supports
3.26	for adolescents and young adults 26 years of age or younger;
3.27	(14) early childhood mental health consultation;
3.28	(15) evidence-based interventions for youth at risk of developing or experiencing a first
3.29	episode of psychosis, and a public awareness campaign on the signs and symptoms of
3.30	psychosis; and

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Sec. 4.

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4.1	(16) psychiatric consultation for primary care practitioners-; and						
4.2	(17) promoting and developing the c	(17) promoting and developing the capacity of providers to implement multigenerational					
4.3	mental health treatment and services.						
4.4	(c) Services under paragraph (b) must be designed to help each child to function and						
4.5	remain with the child's family in the co	remain with the child's family in the community and delivered consistent with the child's					
4.6	treatment plan. Transition services to eligible young adults under paragraph (b) must be						
4.7	designed to foster independent living in the community.						
4.8	Sec. 5. Minnesota Statutes 2016, sect	ion 256B.0625, subd	ivision 51, is amended	l to read:			
4.9	Subd. 51. Intensive mental health outpatient treatment. Medical assistance covers						
4.10	intensive mental health outpatient treatment for dialectical behavioral therapy for adults,						
4.11	including pregnant women and postpartum women with moderate to severe mental						
4.12	illness. When dialectical behavioral therapy is provided to a postpartum woman, the therapy						
4.13	may include the woman's baby. The commissioner shall establish:						
4.14	(1) certification procedures to ensure that providers of these services are qualified; and						
4.15	(2) treatment protocols including req	(2) treatment protocols including required service components and criteria for admission,					
4.16	continued treatment, and discharge.						
4.17	EFFECTIVE DATE. This section is effective contingent on federal approval. The						
4.18	commissioner of human services shall notify the revisor of statutes when federal approval						
4.19	is obtained.						
4.20	Sec. 6. APPROPRIATION.						
4.21	(a) \$ in fiscal year 2018 and \$	in fiscal year 201	9 are appropriated fro	om the			
4.22	general fund to the commissioner of human services for child care assistance under Minnesota						
4.23	Statutes, section 119B.05, subdivision	1, clause (10).					
4.24	(b) \$500,000 in fiscal year 2018 and	\$500,000 in fiscal y	ear 2019 are appropria	ated from			
4.25	the general fund to the commissioner o	f human services for	children's mental heal	th grants			
4.26	under Minnesota Statutes, section 245.	4889, subdivision 1,	paragraph (b), to pror	note and			
4.27	develop the capacity of mental health pr	oviders to deliver evi	dence-based multigen	erational			
4.28	mental health treatments, designed to increase supportive and responsive caregiving for						
4.29	children with mental illness by parents	or caregivers with m	ental illness, and to co	onduct an			
4.30	independent evaluation of the effectiveness of these interventions. This is an ongoing						
4.31	appropriation.						

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5.2 general fund to the commissioner of human services to expand early childhood mental health

5.3 <u>consultation grants under Minnesota Statutes, section 245.4889, subdivision 1, paragraph</u>

5.4 (b). Early childhood mental health consultation includes training provided by a professional

5.5 <u>competent in early childhood mental health; regular on-site consultation for staff serving</u>

5.6 <u>high-risk and low-income families; and referrals to clinical services for parents and children</u>

5.7 with mental health conditions. This appropriation shall be awarded proportionately among

5.8 <u>current grantees based on the number of regions a grantee serves.</u>