## 256B.0922 ESSENTIAL COMMUNITY SUPPORTS.

Subdivision 1. **Essential community supports.** (a) The purpose of the essential community supports program is to provide targeted services to persons age 65 and older who need essential community support, but whose needs do not meet the level of care required for nursing facility placement under section 144.0724, subdivision 11.

- (b) Essential community supports are available not to exceed \$400 per person per month. Essential community supports may be used as authorized within an authorization period not to exceed 12 months. Services must be available to a person who:
  - (1) is age 65 or older;
  - (2) is not eligible for medical assistance;
- (3) has received a community assessment under section 256B.0911, subdivisions 17 to 21, 23, 24, or 27, and does not require the level of care provided in a nursing facility;
- (4) meets the financial eligibility criteria for the alternative care program under section 256B.0913, subdivision 4;
  - (5) has an assessment summary; and
- (6) has been determined by a community assessment under section 256B.0911, subdivisions 17 to 21, 23, 24, or 27, to be a person who would require provision of at least one of the following services, as defined in the approved elderly waiver plan, in order to maintain their community residence:
  - (i) adult day services;
  - (ii) caregiver support;
  - (iii) homemaker support;
  - (iv) chores;
  - (v) a personal emergency response device or system;
  - (vi) home-delivered meals; or
  - (vii) community living assistance as defined by the commissioner.
- (c) The person receiving any of the essential community supports in this subdivision must also receive service coordination, not to exceed \$600 in a 12-month authorization period, as part of their assessment summary.
- (d) A person who has been determined to be eligible for essential community supports must be reassessed at least annually and continue to meet the criteria in paragraph (b) to remain eligible for essential community supports.
- (e) The commissioner is authorized to use federal matching funds for essential community supports as necessary and to meet demand for essential community supports as outlined in subdivision 2, and that amount of federal funds is appropriated to the commissioner for this purpose.
- Subd. 2. **Essential community supports for people in transition.** (a) Essential community supports under subdivision 1 are also available to an individual who:

- (1) is receiving nursing facility services or home and community-based long-term services and supports under chapter 256S or section 256B.49 on the effective date of implementation of the revised nursing facility level of care under section 144.0724, subdivision 11;
  - (2) meets one of the following criteria:
- (i) due to the implementation of the revised nursing facility level of care, loses eligibility for continuing medical assistance payment of nursing facility services at the first reassessment under section 144.0724, subdivision 11, paragraph (b), that occurs on or after the effective date of the revised nursing facility level of care criteria under section 144.0724, subdivision 11; or
- (ii) due to the implementation of the revised nursing facility level of care, loses eligibility for continuing medical assistance payment of home and community-based long-term services and supports under chapter 256S or section 256B.49 at the first reassessment required under those sections that occurs on or after the effective date of implementation of the revised nursing facility level of care under section 144.0724, subdivision 11;
  - (3) is not eligible for personal care attendant services; and
- (4) has an assessed need for one or more of the supportive services offered under essential community supports under subdivision 1, paragraph (b), clause (6).

Individuals eligible under this paragraph includes individuals who continue to be eligible for medical assistance state plan benefits and those who are not or are no longer financially eligible for medical assistance.

(b) Additional onetime case management is available for participants under paragraph (a), not to exceed \$600 per person to be used within one authorization period not to exceed 12 months. This service is provided in addition to the essential community supports benefit described under subdivision 1, paragraph (b).

**History:** 2013 c 108 art 7 s 13; 2014 c 291 art 8 s 8; 2019 c 54 art 2 s 32; 2022 c 98 art 17 s 14,26