

CHAPTER 575—S.F.No. 702

An act relating to health; establishing local nursing home pre-admission screening teams; prescribing duties of the teams and the commissioner of public welfare; appropriating money; amending Minnesota Statutes 1978, Chapter 256B, by adding a section.

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

Section 1. Minnesota Statutes 1978, Chapter 256B, is amended by adding a section to read:

[256B.091] NURSING HOME PRE-ADMISSION SCREENING PROGRAM. Subdivision 1. PURPOSE. It is the purpose of this section to prevent inappropriate nursing home placement by establishing a program of pre-admission screening teams for all medical assistance recipients and any individual who would become eligible for medical assistance within 90 days of admission to a licensed nursing home participating in the program. Further, it is the purpose of this section and the program to gain further information about how to contain costs associated with inappropriate nursing home admissions. The commissioners of public welfare and health shall seek to maximize use of available federal and state funds and establish the broadest program possible within the appropriation available. The commissioner of public welfare shall promulgate temporary rules in order to implement this section by September 1, 1980.

Subd. 2. SCREENING TEAMS; ESTABLISHMENT. Each county agency designated by the commissioner of public welfare to participate in the program shall contract with the local board of health organized under Minnesota Statutes, Section 145.911 to 145.922 or other public or non-profit agency to establish a screening team to assess, prior to admission to a nursing home licensed under section 144A.02, the health and social needs of medical assistance recipients and individuals who would become eligible for medical assistance within 90 days of nursing home admission. Each local screening team shall be composed of a public health nurse from the local public health nursing service and a social worker from the local community welfare agency. Each screening team shall have a physician available for consultation and shall utilize individuals' attending physicians' physical assessment forms, if any, in assessing needs. The individual's physician shall be included on the screening team if the physician chooses to participate. Other personnel as deemed appropriate by the county agency may be included on the team. No member of a screening team shall have a direct or indirect financial or self-serving interest in a nursing home or non-institutional referral such that it would not be possible for the member to consider each case objectively.

Subd. 3. SCREENING TEAM; DUTIES. Local screening teams shall seek cooperation from other public and private agencies in the community which offer services to the disabled and elderly. The responsibilities of the agency responsible for screening shall include:

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(a) Provision of information and education to the general public regarding availability of the screening program;

(b) Acceptance of referrals from individuals, families, human service professionals and nursing home personnel of the community agencies;

(c) Assessment of health and social needs of referred individuals and identification of services needed to maintain these persons in the least restrictive environments;

(d) Identification of available noninstitutional services to meet the needs of individuals referred;

(e) Recommendations for individuals screened regarding:

(1) Nursing home admission; and

(2) Maintenance in the community with specific service plans and referrals and designation of a lead agency to implement each individual's plan of care;

(f) Provision of follow up services as needed; and

(g) Preparation of reports which may be required by the commissioner of public welfare.

Subd. 4. SCREENING OF PERSONS. Prior to nursing home admission, screening teams shall assess the needs of all persons receiving medical assistance and of all persons who would be eligible for medical assistance within 90 days of admission to a nursing home, except patients from acute care facilities or transfers from other nursing homes. Any other interested person may be assessed by a screening team upon payment of a fee based upon a sliding fee scale.

Subd. 5. APPEALS. Appeals from the screening team's determination shall be made pursuant to the procedures set forth in Minnesota Statutes, Section 256.045, Subdivisions 2 and 3. An appeal shall be automatic if the individual's physician does not agree with the recommendation of the screening team.

Subd. 6. TEAM REIMBURSEMENT. The commissioner of public welfare shall amend the Minnesota medical assistance plan to include reimbursement for the local screening teams. Reimbursement shall not be provided for any recipient placed in a nursing home in opposition to the screening team's recommendation after January 1, 1981; provided, however, the commissioner shall not deny reimbursement for (1) an individual admitted to a nursing home who is assessed to need long-term supportive services if long-term supportive services other than nursing home care are not available in that community; or (2) any eligible individual placed in the nursing home pending an appeal of the preadmission screening team's decision; or (3) any eligible individual placed in the nursing home by a physician in an emergency situation and where the screening team has not made a decision within five working days of its initial contact.

Subd. 7. REPORT. The commissioner of public welfare, in consultation with the commissioner of health, shall evaluate the screening program established

pursuant to this section and provide a report to the legislature by April 1, 1981, which shall include a description of:

- (a) The cost effectiveness of the program;
- (b) The unmet needs in the community;
- (c) Similar screening activities in the counties;
- (d) Methods to improve the program.

Sec. 2. **APPROPRIATION.** For the biennium ending June 30, 1981, there is appropriated from the general fund to the department of public welfare the sum of \$48,000 for the purposes of section 1 and the approved complement shall be increased by one until June 30, 1981.

Sec. 3. **EFFECTIVE DATE.** This act shall be effective the day following its enactment.

Approved April 15, 1980

CHAPTER 576—S.F.No. 682

An act relating to game and fish; authorizing the use of handguns in taking small game; amending Minnesota Statutes 1978, Section 100.29, Subdivisions 2, 3 and 9.

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

Section 1. Minnesota Statutes 1978, Section 100.29, Subdivision 2, is amended to read:

Subd. 2. It shall be unlawful to take protected wild animals with a gun larger in bore than a 10 gauge ~~or not fired from the shoulder, except that a person suffering from a physical disability rendering him incapable of using a shoulder fired gun but capable of using a handgun and possessing a doctor's statement to this effect may take protected wild animals with a handgun.~~ Handguns of any caliber may be used for taking small game in a manner prescribed by the commissioner.

Sec. 2. Minnesota Statutes 1978, Section 100.29, Subdivision 3, is amended to read:

Subd. 3. It shall be unlawful to have in possession out of doors, except upon target ranges operated under a permit from the commissioner, unless unloaded and contained in a gun case, or unloaded and broken down:

(1) Any rifle or handgun, except a 22 caliber rim-fire rifle or handgun carried for the sole purpose of taking small game when lawful and using 22 caliber short, long, or long rifle bullets, or any shotgun with slugs, in any territory wherein there is an open season for taking deer with firearms, for a period of ten days preceding and five days succeeding such season;

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