

office address thereof of the company and be accompanied by a fee of \$5 as an advance for fees and the recorder shall receive 15 cents for each instrument abstracted and at the end of the year may deduct from such advance fees or any further sums that may have been deposited, his fees earned hereunder and return the surplus, if any, to the party having made such deposit. The fee shall be determined by resolution of the county board upon the recommendation of the county recorder based upon the estimated cost of providing the service.

Sec. 2. Minnesota Statutes 1980, Section 386.43, is amended to read:

386.43 CONTENTS OF AND SUPPLEMENTAL ABSTRACTS.

Each county recorder shall on or before the 15th day of June each year mail to ~~each and every applicant having paid such~~ who pays the fee for such the year, an abstract of all requested existing mortgages and liens upon grain or crops raised or to be raised during ~~such the~~ year, showing the name of the person against whom the lien is claimed, arranged alphabetically, the name of the person holding or claiming ~~such the~~ the lien, a ~~description of the land upon which the grain was raised, upon which the lien is claimed,~~ the kind of grain, if specified, and the amount of the lien claimed. ~~Such~~ The abstract shall further contain a list of all mortgages and liens filed against crops or grain grown in ~~such the~~ crop year which have been satisfied. At least once a week during the balance of the calendar year, the county recorder shall mail to each of ~~such applicants applicant~~ a similar abstract covering the liens, mortgages, and releases ~~thereon on them~~ filed in his office, since the date of furnishing ~~such the~~ prior abstract.

Sec. 3. **EFFECTIVE DATE.**

Sections 1 and 2 are effective the day following final enactment.

Approved March 18, 1982

CHAPTER 455 — S.F.No. 1910

An act relating to public welfare; requiring preadmission screening for patients entering nursing homes from hospitals; allowing hospital discharge planners to attend certain preadmission screening assessments; allowing recipient choice between long term care and alternative care; modifying cost limits for alternative care; amending Minnesota Statutes 1980, Section 256B.091, Subdivisions 2, 4, and 6; and Minnesota Statutes 1981 Supplement, Section 256B.091, Subdivision 8.

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

Section 1. Minnesota Statutes 1980, Section 256B.091, Subdivision 2, is amended to read:

Changes or additions are indicated by underline, deletions by ~~strikeout~~.

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 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. If the individual is being discharged from an acute care facility, a discharge planner from that facility may be present, at the facility's request, during the screening team's assessment of the individual and may participate in discussions but not in making the screening team's recommendations under subdivision 3, clause (e). If the assessment procedure or screening team recommendation results in a delay of the individual's discharge from the acute care facility, the facility shall not be denied reimbursement or incur any other financial or regulatory penalty caused by the individual's extended length of stay. 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.

Sec. 2. Minnesota Statutes 1980, Section 256B.091, Subdivision 4, is amended to read:

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~~ transferred from other nursing homes or patients who, having entered acute care facilities from nursing homes, are returning to nursing home care. Any other interested person may be assessed by a screening team upon payment of a fee based upon a sliding fee scale.

Sec. 3. Minnesota Statutes 1980, Section 256B.091, Subdivision 6, is amended to read:

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

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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; or (4) any medical assistance recipient when, after full discussion of all appropriate alternatives including those that are expected to be less costly than nursing home care, the individual or the individual's legal representative insists on nursing home placement. The screening team shall provide documentation that the most cost effective alternatives available were offered to this individual or the individual's legal representative.

Sec. 4. Minnesota Statutes 1981 Supplement, Section 256B.091, Subdivision 8, is amended to read:

Subd. 8. **ALTERNATIVE CARE GRANTS.** The commissioner shall provide grants to counties participating in the program to pay costs of providing alternative care to individuals screened under subdivision 4. Payment is available under this subdivision only for individuals (1) for whom the screening team would recommend nursing home admission if alternative care were not available; (2) who are receiving medical assistance or who would be eligible for medical assistance within 90 days of admission to a nursing home; and (3) who need services that are not available at that time in the county through other public assistance.

Grants may be used for payment of costs of providing services such as, but not limited to, foster care for elderly persons, day care whether or not offered through a nursing home, nutritional counseling, or medical social services, which services are provided by a licensed health care provider, a home health service eligible for reimbursement under Titles XVIII and XIX of the federal Social Security Act, or by persons employed by or contracted with by the county board or the local welfare agency. The county agency shall ensure that a plan of care is established for each individual in accordance with subdivision 3, clause (e)(2). The plan shall include any services prescribed by the individual's attending physician as necessary and follow up services as necessary. The county agency shall provide documentation to the commissioner verifying that the individual's alternative care is not available at that time through any other public assistance or service program and shall provide documentation in each individual's plan of care that the most cost effective alternatives available have been offered to the individual. Grants to counties under this subdivision are subject to audit by the commissioner for fiscal and utilization control.

The commissioner shall apply for a waiver for federal financial participation to expand the availability of services under this subdivision. The commission-

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er shall provide grants to counties from the non-federal share, unless the commissioner obtains a federal waiver for medical assistance payments, of medical assistance appropriations. The state expenditures for this section shall not exceed \$1,800,000 for the biennium ending June 30, 1983. A county agency may use grant money to supplement but not supplant services available through other public assistance or service programs and shall not use grant money to establish new programs for which public money is available through sources other than grants provided under this subdivision. Total payment of the costs of providing care under this subdivision shall not exceed 75 percent of the per diem payment for which each individual served would have been eligible if the individual had been admitted to a nursing home. A county agency shall not use grant money to provide care under this subdivision to an individual if the anticipated cost of providing this care would exceed the average payment, as determined by the commissioner, for the level of nursing home care that the recipient would receive if placed in a nursing home. The non-federal share may be used to pay up to 90 percent of the start-up and service delivery costs of providing care under this subdivision. Each county agency that receives a grant shall pay 10 percent of the costs.

The commissioner shall promulgate temporary rules in accordance with section 15.0412, subdivision 5, to establish required documentation and reporting of care delivered.

Sec. 5. [256B.091] [Subd. 9.] RULES.

The commissioner of public welfare shall promulgate temporary rules and permanent rules to implement the provisions of sections 3 and 4 and permanent rules to implement the provisions of sections 1 and 2.

Sec. 6. EFFECTIVE DATE.

Sections 1 to 5 are effective the day following final enactment.

Approved March 18, 1982

CHAPTER 456 — S.F.No. 1256

An act relating to state government; directing the commissioner of administration to obtain state office space in certain types of historically significant buildings when practical; amending Minnesota Statutes 1980, Section 16.243.

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

Section 1. Minnesota Statutes 1980, Section 16.243, is amended to read:

Changes or additions are indicated by underline, deletions by ~~strikeout~~.