

## CHAPTER 529—S.F.No. 1930

*An act relating to human services; interstate contracts for mental health services; mental health grants; rules concerning psychopathic personalities; treatment for alcohol, drug abuse, and chemical dependency; stepparent income standards under aid to families with dependent children; child support incentives; medical assistance for needy persons; state and county social service plans; organ and tissue transplants; family preservation; commissioner's reports; group residential housing payments and agreements; and paternity proceedings; amending Minnesota Statutes 1992, sections 245.696, subdivision 2; 254A.02, subdivision 11; 254B.04, subdivision 1; 254B.05, subdivision 1; 256.74, subdivision 1a; 256B.69, subdivision 4; 256E.04; 256E.09, subdivision 3; 256H.24; and 257.60; Minnesota Statutes 1993 Supplement, sections 245.50, subdivision 5; 246B.04; 256.979, subdivision 8; 256B.0629, subdivisions 3 and 4; 256F.11, subdivision 3; and 256I.04, subdivisions 1a and 2a; repealing Minnesota Statutes 1992, section 254A.16, subdivisions 3 and 4; Laws 1993, chapter 337, section 16.*

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

Section 1. Minnesota Statutes 1993 Supplement, section 245.50, subdivision 5, is amended to read:

Subd. 5. **SPECIAL CONTRACTS; WISCONSIN.** The commissioner of the Minnesota department of human services must enter into negotiations with appropriate personnel at the Wisconsin department of health and social services and must develop an agreement that conforms to the requirements of subdivision 4, to enable the placement in Minnesota of patients who are on emergency holds or who have been involuntarily committed as mentally ill or chemically dependent in Wisconsin and to enable the temporary placement in Wisconsin of patients who are on emergency holds in Minnesota under section 253B.05, provided that the Minnesota courts retain jurisdiction over Minnesota patients, and the state of Wisconsin affords to Minnesota patients the rights under Minnesota law. Persons committed by the Wisconsin courts and placed in Minnesota facilities shall continue to be in the legal custody of Wisconsin and Wisconsin's laws governing length of commitment, reexaminations, and extension of commitment shall continue to apply to these residents. In all other respects, Wisconsin residents placed in Minnesota facilities are subject to Minnesota laws. The agreement must specify that responsibility for payment for the cost of care of Wisconsin residents shall remain with the state of Wisconsin and the cost of care of Minnesota residents shall remain with the state of Minnesota. The commissioner shall be assisted by attorneys from the Minnesota attorney general's office in negotiating and finalizing this agreement. The agreement shall be completed so as to permit placement of Wisconsin residents in Minnesota facilities and Minnesota residents in Wisconsin facilities beginning July 1, 1994.

Sec. 2. Minnesota Statutes 1992, section 245.696, subdivision 2, is amended to read:

Subd. 2. **SPECIFIC DUTIES.** In addition to the powers and duties already conferred by law, the commissioner of human services shall:

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- (1) review and evaluate local programs and the performance of administrative and mental health personnel and make recommendations to county boards and program administrators;
- (2) provide consultative staff service to communities and advocacy groups to assist in ascertaining local needs and in planning and establishing community mental health programs;
- (3) employ qualified personnel to implement this chapter;
- (4) adopt rules for minimum standards in community mental health services as directed by the legislature;
- (5) cooperate with the commissioners of health and jobs and training to coordinate services and programs for people with mental illness;
- (6) evaluate the needs of people with mental illness as they relate to assistance payments, medical benefits, nursing home care, and other state and federally funded services;
- (7) provide data and other information, as requested, to the advisory council on mental health;
- (8) develop and maintain a data collection system to provide information on the prevalence of mental illness, the need for specific mental health services and other services needed by people with mental illness, funding sources for those services, and the extent to which state and local areas are meeting the need for services;
- (9) apply for grants and develop pilot programs to test and demonstrate new methods of assessing mental health needs and delivering mental health services;
- (10) study alternative reimbursement systems and make waiver requests that are deemed necessary by the commissioner;
- (11) provide technical assistance to county boards to improve fiscal management and accountability and quality of mental health services, and consult regularly with county boards, public and private mental health agencies, and client advocacy organizations for purposes of implementing this chapter;
- (12) promote coordination between the mental health system and other human service systems in the planning, funding, and delivery of services; entering into cooperative agreements with other state and local agencies for that purpose as deemed necessary by the commissioner;
- (13) conduct research regarding the relative effectiveness of mental health treatment methods as the commissioner deems appropriate, and for this purpose, enter treatment facilities, observe clients, and review records in a manner consistent with the Minnesota government data practices act, chapter 13; ~~and~~

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(14) enter into contracts and promulgate rules the commissioner deems necessary to carry out the purposes of this chapter; and

(15) administer county mental health grants on a calendar year basis, unless that procedure hinders the achievement of the purposes of a particular grant.

Sec. 3. Minnesota Statutes 1993 Supplement, section 246B.04, is amended to read:

**246B.04 RULES; EVALUATION.**

The commissioner of human services shall adopt rules to govern the operation, maintenance, and licensure of the program established at the Minnesota Psychopathic Personality Treatment Center, or at any other facility operated by the commissioner, for persons committed as a psychopathic personality. The commissioner shall establish an evaluation process to measure outcomes and behavioral changes as a result of treatment compared with incarceration without treatment, to determine the value, if any, of treatment in protecting the public.

Sec. 4. Minnesota Statutes 1992, section 254A.02, subdivision 11, is amended to read:

Subd. 11. "American Indian" means a person ~~of one quarter or more Indian blood who is a member of an Indian tribe.~~ The commissioner shall use the definitions of "Indian" and "Indian tribe" and "Indian organization" provided in United States Code, title 25, section 450(b), as amended through December 31, 1992.

Sec. 5. Minnesota Statutes 1992, section 254B.04, subdivision 1, is amended to read:

Subdivision 1. **ELIGIBILITY.** (a) Persons eligible for benefits under Code of Federal Regulations, title 25, part 20, persons eligible for medical assistance benefits under sections 256B.055 ~~and~~, 256B.056, and 256B.057, subdivisions 1, 2, 5, and 6, or who meet the income standards of section 256B.056, subdivision 4, and persons eligible for general assistance medical care under section 256D.03, subdivision 3, are entitled to chemical dependency fund services. State money appropriated for this paragraph must be placed in a separate account established for this purpose.

(b) A person not entitled to services under paragraph (a), but with family income that is less than 60 percent of the state median income for a family of like size and composition, shall be eligible to receive chemical dependency fund services within the limit of funds available after persons entitled to services under paragraph (a) have been served. A county may spend money from its own sources to serve persons under this paragraph. State money appropriated for this paragraph must be placed in a separate account established for this purpose.

(c) Persons whose income is between 60 percent and 115 percent of the state median income shall be eligible for chemical dependency services on a sliding

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fee basis, within the limit of funds available, after persons entitled to services under paragraph (a) and persons eligible for services under paragraph (b) have been served. Persons eligible under this paragraph must contribute to the cost of services according to the sliding fee scale established under subdivision 3. A county may spend money from its own sources to provide services to persons under this paragraph. State money appropriated for this paragraph must be placed in a separate account established for this purpose.

(d) Notwithstanding the provisions of paragraphs (b) and (c), state funds appropriated to serve persons who are not entitled under the provisions of paragraph (a), shall be expended for chemical dependency treatment services for nonentitled but eligible persons who have children in their household, are pregnant, or are younger than 18 years old. These persons may have household incomes up to 60 percent of the state median income. Any funds in addition to the amounts necessary to serve the persons identified in this paragraph shall be expended according to the provisions of paragraphs (b) and (c).

Sec. 6. Minnesota Statutes 1992, section 254B.05, subdivision 1, is amended to read:

Subdivision 1. **LICENSURE REQUIRED.** Programs licensed by the commissioner are eligible vendors. Hospitals may apply for and receive licenses to be eligible vendors, notwithstanding the provisions of section 245A.03. American Indian programs located on federally recognized tribal lands that provide chemical dependency primary treatment, extended care, transitional residence, or outpatient treatment services, and are licensed by tribal government are eligible vendors. Detoxification programs are not eligible vendors. Programs that are not licensed as a chemical dependency residential or nonresidential treatment program by the commissioner or by tribal government are not eligible vendors. To be eligible for payment under the Consolidated Chemical Dependency Treatment Fund, a vendor must participate in the Drug and Alcohol Abuse Normative Evaluation System or a comparable system approved by the commissioner.

Sec. 7. Minnesota Statutes 1992, section 256.74, subdivision 1a, is amended to read:

Subd. 1a. **STEPPARENT'S INCOME.** In determining income available, the county agency shall take into account the remaining income of the dependent child's stepparent who lives in the same household after disregarding:

(1) the first ~~\$75~~ \$90 of the stepparent's gross earned income;

(2) an amount for support of the stepparent and any other individuals whom the stepparent claims as dependents for determining federal personal income tax liability and who live in the same household but whose needs are not considered in determining eligibility for assistance under sections 256.72 to 256.87. The amount equals the standard of need for a family of the same composition as the stepparent and these other individuals;

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(3) amounts the stepparent actually paid to individuals not living in the same household but whom the stepparent claims as dependents for determining federal personal income tax liability; and

(4) alimony or child support, or both, paid by the stepparent for individuals not living in the same household.

Sec. 8. Minnesota Statutes 1993 Supplement, section 256.979, subdivision 8, is amended to read:

Subd. 8. **MEDICAL PROVIDER REIMBURSEMENT.** (a) A fee to the providers of medical services is created for the purpose of increasing the numbers of signed and notarized recognition of parentage forms completed in the medical setting.

(b) A fee of \$25 shall be paid to each medical provider for each properly completed recognition of parentage form sent to the department of vital statistics.

(c) The office of vital statistics shall ~~make the bonus payment of \$25 to each medical provider and~~ notify the department of human services quarterly of the numbers of completed forms received and the amounts paid.

(d) The department of human services shall remit quarterly to ~~the office of vital statistics the sums paid to~~ each medical provider a payment for the number of signed recognition of parentage forms completed by that medical provider and sent to the office of vital statistics.

(e) The commissioners of the department of human services and the department of health shall develop procedures for the implementation of this provision.

(f) Payments will be made to the medical provider within the limit of available appropriations.

Sec. 9. Minnesota Statutes 1993 Supplement, section 256B.0629, subdivision 3, is amended to read:

Subd. 3. **ANNUAL REPORT.** The advisory committee shall present an annual report to the commissioner and the chairs of the ~~health and housing~~ human services finance division of the house health and human services committee and the health care and family services finance division of the senate family services and health care committees by January 1 of each year on the findings and recommendations of the committee.

Sec. 10. Minnesota Statutes 1993 Supplement, section 256B.0629, subdivision 4, is amended to read:

Subd. 4. **RESPONSIBILITIES OF THE COMMISSIONER.** ~~(a)~~ The commissioner shall periodically:

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(1) ~~Recommend to the legislature~~ Determine criteria governing the eligibility of organ and tissue transplant procedures for reimbursement from medical assistance and general assistance medical care. Procedures approved by Medicare are automatically eligible for medical assistance and general assistance medical care reimbursement. Additional procedures are eligible for reimbursement only if they are recommended by ~~both the task force and~~, approved by the commissioner, and published in the State Register.

(2) ~~Recommend to the legislature~~ Determine criteria for certifying transplant centers within and outside of Minnesota where Minnesotans receiving medical assistance and general assistance medical care may obtain transplants. ~~Additional centers may be certified only upon approval of the legislature.~~ Only centers recommended by the task force and approved by the commissioner may be considered certified by the legislature commissioner.

Sec. 11. Minnesota Statutes 1992, section 256B.69, subdivision 4, is amended to read:

Subd. 4. **LIMITATION OF CHOICE.** The commissioner shall develop criteria to determine when limitation of choice may be implemented in the experimental counties. The criteria shall ensure that all eligible individuals in the county have continuing access to the full range of medical assistance services as specified in subdivision 6. The commissioner shall exempt the following persons from participation in the project, in addition to those who do not meet the criteria for limitation of choice: (1) persons eligible for medical assistance according to section 256B.055, subdivision 1, ~~or~~ and children under age 21 who are in foster placement; (2) persons eligible for medical assistance due to blindness or disability as determined by the social security administration or the state medical review team, unless they are 65 years of age or older; (3) recipients who currently have private coverage through a health maintenance organization; and (4) recipients who are eligible for medical assistance by spending down excess income for medical expenses other than the nursing facility per diem expense. Before limitation of choice is implemented, eligible individuals shall be notified and after notification, shall be allowed to choose only among demonstration providers. After initially choosing a provider, the recipient is allowed to change that choice only at specified times as allowed by the commissioner. If a demonstration provider ends participation in the project for any reason, a recipient enrolled with that provider must select a new provider but may change providers without cause once more within the first 60 days after enrollment with the second provider.

Sec. 12. Minnesota Statutes 1992, section 256E.04, is amended to read:

**256E.04 BIENNIAL STATE PLAN.**

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:

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

(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;

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

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

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

~~(f)~~ (e) 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.

Subd. 2. Copies of the proposed state plan shall be made reasonably available to the public allowing sufficient time for public review and comment. Copies of the updated state social services plan shall be submitted to the governor and the legislature prior to the beginning of each biennium on July 1, after approval of county social service plans and any amendments to those plans, and shall be made available to the public.

Sec. 13. Minnesota Statutes 1992, section 256E.09, subdivision 3, is amended to read:

Subd. 3. **PLAN CONTENT.** The biennial community social services plan shall include:

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

(2) county outcome goals and specific objectives intended outcomes and outcome indicators 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;

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(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. 14. Minnesota Statutes 1993 Supplement, section 256F.11, subdivision 3, is amended to read:

Subd. 3. **EVALUATIONS.** Beginning January 1, 1995, the commissioner of human services shall submit an annual report to the legislature evaluating the program. The report must include information concerning program costs, the number of program participants, the program's impact on family stability, the incidence of abuse and neglect, and all other relevant information determined by the commissioner.

Sec. 15. Minnesota Statutes 1992, section 256H.24, is amended to read:

#### 256H.24 DUTIES OF COMMISSIONER.

In addition to the powers and duties already conferred by law, the commissioner of human services shall:

(1) by September 1, ~~1990~~ 1998, and by September 1 of each ~~subsequent even-numbered year every five years thereafter~~, survey and report on all components of the child care system, including, but not limited to, availability of licensed child care slots, the number of children in various kinds of child care settings, staff wages, rate of staff turnover, qualifications of child care workers, cost of child care by type of service and ages of children, and child care availability through school systems;

(2) by September 1, ~~1990~~ 1998, and September 1 of each ~~subsequent even-numbered year every five years thereafter~~, survey and report on the extent to which existing child care services fulfill the need for child care, giving particular attention to the need for part-time care and for care of infants, sick children, children with special needs, low-income children, toddlers, and school-age children;

(3) administer the child care fund, including the sliding fee program authorized under sections 256H.01 to 256H.19;

(4) monitor the child care resource and referral programs established under section 256H.20; and

(5) encourage child care providers to participate in a nationally recognized accreditation system for early childhood programs. The commissioner shall reimburse licensed child care providers for one-half of the direct cost of accreditation fees, upon successful completion of accreditation.

Sec. 16. Minnesota Statutes 1993 Supplement, section 256I.04, subdivision 1a, is amended to read:

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Subd. 1a. **COUNTY APPROVAL.** A county agency may not approve a group residential housing payment for an individual in any setting with a rate in excess of the MSA equivalent rate for more than 30 days in a calendar year unless the county agency has developed or approved a plan for the individual which specifies that:

(1) the individual has an illness or incapacity which prevents the person from living independently in the community; and

(2) the individual's illness or incapacity requires the services which are available in the group residence.

The plan must be signed or countersigned by any of the following employees of the county of financial responsibility: the director of human services or a designee of the director; a social worker; or a case aide.

Sec. 17. Minnesota Statutes 1993 Supplement, section 256I.04, subdivision 2a, is amended to read:

Subd. 2a. **LICENSE REQUIRED.** A county agency may not enter into an agreement with an establishment to provide group residential housing unless:

(1) the establishment is licensed by the department of health as a hotel and restaurant; a board and lodging establishment; a residential care home; a boarding care home before March 1, 1985; or a supervised living facility, and the service provider for residents of the facility is licensed under chapter 245A. However, an establishment licensed by the department of health to provide lodging need not also be licensed to provide board if meals are being supplied to residents under a contract with a food vendor who is licensed by the department of health; or

(2) the residence is licensed by the commissioner of human services under Minnesota Rules, parts 9555.5050 to 9555.6265, or certified by a county human services agency prior to July 1, 1992, using the standards under Minnesota Rules, parts 9555.5050 to 9555.6265.

The requirements under clauses (1) and (2) do not apply to establishments exempt from state licensure because they are located on Indian reservations and subject to tribal health and safety requirements.

Sec. 18. Minnesota Statutes 1992, section 257.60, is amended to read:

#### 257.60 **PARTIES.**

The child may be made a party to the action. If the child is a minor and is made a party, a general guardian or a guardian ad litem shall be appointed by the court to represent the child. The child's mother or father may not represent the child as guardian or otherwise. The biological mother, each man presumed to be the father under section 257.55, and each man alleged to be the biological father, shall be made parties or, if not subject to the jurisdiction of the court,

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shall be given notice of the action in a manner prescribed by the court and shall be given an opportunity to be heard. The public agency responsible for support enforcement is joined as a party in each case in which rights are assigned under section 256.74, subdivision 5. A person who may bring an action under section 257.57 may be made a party to the action. The court may align the parties. The child shall be made a party whenever:

(1) the child is a minor and the case involves a compromise under section 257.64, subdivision 1, or a lump sum payment under section 257.66, subdivision 4, in which case the commissioner of human services shall also be made a party subject to department of human services rules relating to paternity suit settlements; or

(2) the child is a minor and the action is to declare the nonexistence of the father and child relationship; or

(3) an action to declare the existence of the father and child relationship is brought by a man presumed to be the father under section 257.55, or a man who alleges to be the father, and the mother of the child denies the existence of the father and child relationship.

**Sec. 19. REPEALER.**

Minnesota Statutes 1992, section 254A.16, subdivisions 3 and 4, are repealed. Laws 1993, chapter 337, section 16, is repealed.

**Sec. 20. EFFECTIVE DATE.**

Sections 1 to 6 and 8 to 19 are effective July 1, 1994. Section 7 is retroactively effective from October 1, 1993.

Presented to the governor April 26, 1994

Signed by the governor April 28, 1994, 2:32 p.m.

**CHAPTER 530—H.F.No. 2675**

*An act relating to state lands; authorizing the sale of certain tax-forfeited lands that border public water in Aitkin county.*

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

**Section 1. SALE OF TAX-FORFEITED LAND; AITKIN COUNTY.**

(a) Notwithstanding Minnesota Statutes, sections 92.45 and 282.018, subdivision 1, Aitkin county may sell the tax-forfeited land bordering public water that is described in paragraph (c), under the remaining provisions of Minnesota Statutes, chapter 282.

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