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State of Minnesota

HOUSE OF REPRESENTATIVES

NINETIETH SESSION

H. F. No. 3134

02/26/2018 Authored by Backer, Baker, Hamilton, Zerwas, Olson and others
The bill was read for the first time and referred to the Committee on Health and Human Services Reform
03/19/2018 Adoption of Report: Amended and re-referred to the Committee on Health and Human Services Finance

1.1 A bill for an act
1.2 relating to human services; amending the effective date for children's residential
1.3 treatment payment provisions; extending children's mental health report and
1.4 recommendations deadline; amending Laws 2017, First Special Session chapter
1.5 6, article 8, sections 71; 72; 74.

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

1.7 Section 1. Laws 2017, First Special Session chapter 6, article 8, section 71, the effective
1.8 date, is amended to read:

1.9 EFFECTIVE DATE. This section is effective for services provided on July 1, 2017,
1.10 through April 30, 2019, and expires May 1, 2019 June 30, 2021, and expires July 1, 2021.

1.11 Sec. 2. Laws 2017, First Special Session chapter 6, article 8, section 72, the effective date,
1.12 is amended to read:

1.13 EFFECTIVE DATE. This section is effective for services provided on July 1, 2017,
1.14 through April 30, 2019, and expires May 1, 2019 June 30, 2021, and expires July 1, 2021.

1.15 Sec. 3. Laws 2017, First Special Session chapter 6, article 8, section 74, is amended to
1.16 read:

1.17 Sec. 74. CHILDREN'S MENTAL HEALTH REPORT AND
1.18 RECOMMENDATIONS.

1.19 The commissioner of human services shall conduct a comprehensive analysis of
1.20 Minnesota's continuum of intensive mental health services and shall develop
1.21 recommendations for a sustainable and community-driven continuum of care for children

2.1 with serious mental health needs, including children currently being served in residential  
2.2 treatment. The commissioner's analysis shall include, but not be limited to:

2.3 (1) data related to access, utilization, efficacy, and outcomes for Minnesota's current  
2.4 system of residential mental health treatment for a child with a severe emotional disturbance;

2.5 (2) potential expansion of the state's psychiatric residential treatment facility (PRTF)  
2.6 capacity, including increasing the number of PRTF beds and conversion of existing children's  
2.7 mental health residential treatment programs into PRTFs;

2.8 (3) the capacity need for PRTF and other group settings within the state if adequate  
2.9 community-based alternatives are accessible, equitable, and effective statewide;

2.10 (4) recommendations for expanding alternative community-based service models to  
2.11 meet the needs of a child with a serious mental health disorder who would otherwise require  
2.12 residential treatment and potential service models that could be utilized, including data  
2.13 related to access, utilization, efficacy, and outcomes;

2.14 (5) models of care used in other states; and

2.15 (6) analysis and specific recommendations for the design and implementation of new  
2.16 service models, including analysis to inform rate setting as necessary.

2.17 The analysis shall be supported and informed by extensive stakeholder engagement.  
2.18 Stakeholders include individuals who receive services, family members of individuals who  
2.19 receive services, providers, counties, health plans, advocates, and others. Stakeholder  
2.20 engagement shall include interviews with key stakeholders, intentional outreach to individuals  
2.21 who receive services and the individual's family members, and regional listening sessions.

2.22 The commissioner shall provide a report with specific recommendations and timelines  
2.23 for implementation to the legislative committees with jurisdiction over children's mental  
2.24 health policy and finance by ~~November 15, 2018~~ June 30, 2019.