

SENATE

STATE OF MINNESOTA

EIGHTY-EIGHTH LEGISLATURE

S.F. No. 469

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02/14/2013	233	Introduction and first reading Referred to Health, Human Services and Housing
02/28/2013	424a	Comm report: To pass as amended and re-refer to Finance
03/04/2013		Author added Marty

A bill for an act  
relating to human services; creating a chemical health navigation program;  
proposing coding for new law in Minnesota Statutes, chapter 254B.  
BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MINNESOTA:

Section 1. **[254B.14] CHEMICAL HEALTH NAVIGATION PROGRAM.**

Subdivision 1. **Establishment; purpose.** (a) There is established a state-county chemical health navigation program. The Department of Human Services and interested counties shall work in partnership to augment the current chemical health service delivery system to promote better outcomes for eligible individuals and greater accountability and productivity in the delivery of state and county funded chemical dependency services.

(b) The navigation program shall allow flexibility for eligible individuals to timely access needed services as well as to align systems and services to offer the most appropriate level of chemical health services to eligible individuals.

(c) Chemical health navigation programs must maintain eligibility requirements for the consolidated chemical dependency treatment fund, continue to meet the requirements of Minnesota Rules, parts 9530.6405 to 9530.6505 and 9530.6600 to 9530.6655, and must not put current and future federal funding of chemical health services at risk.

Subd. 2. **Program implementation.** (a) Each county's participation in the chemical health navigation program is voluntary.

(b) The commissioner and each county participating in the chemical health navigation program shall enter into an agreement governing the operation of the county's navigation program. Each county shall implement its program within 60 days of the final agreement with the commissioner.

2.1 Subd. 3. **Notice of program discontinuation.** Each county's participation in the  
2.2 chemical health navigation program may be discontinued for any reason by the county or  
2.3 the commissioner after 30 days' written notice to the other party. Any unspent funds held  
2.4 for the exiting county's pro rata share in the special revenue fund under the authority in  
2.5 subdivision 5, paragraph (d), shall be transferred to the consolidated chemical dependency  
2.6 treatment fund following discontinuation of the program.

2.7 Subd. 4. **Eligibility for navigator program.** To be considered for participation in  
2.8 a navigator program, an individual must:

- 2.9 (1) be a resident of a county with an approved navigator program;
- 2.10 (2) be eligible for chemical dependency fund services;
- 2.11 (3) be a voluntary participant in the navigator program;
- 2.12 (4) have at least one severity rating of two or above in dimensions four, five, or six  
2.13 in a comprehensive assessment under Minnesota Rules, part 9530.6422; and
- 2.14 (5) have had at least two treatment episodes in the past two years, not limited  
2.15 to episodes reimbursed by the consolidated chemical dependency treatment funds. An  
2.16 admission to an emergency room, a detoxification program, or a hospital may be substituted  
2.17 for a treatment episode if it resulted from the individual's substance use disorder.

2.18 Subd. 5. **Duties of commissioner.** (a) Notwithstanding any other provisions in this  
2.19 chapter, the commissioner may authorize chemical health navigator programs to use  
2.20 chemical dependency treatment funds to pay for nontreatment services:

- 2.21 (1) in addition to those authorized under section 254B.03, subdivision 2, paragraph  
2.22 (a); and
- 2.23 (2) by vendors in addition to those authorized under section 254B.05 when not  
2.24 providing chemical dependency treatment services.

2.25 (b) Participating counties may contract with providers to provide nontreatment  
2.26 services pursuant to section 256B.69, subdivision 6, paragraph (c).

2.27 (c) For the purposes of this section, "nontreatment services" include community-based  
2.28 navigator services, peer support, family engagement and support, housing support and rent  
2.29 subsidy for up to 90 days, supported employment, and independent living skills.

2.30 (d) State expenditures for chemical dependency services and nontreatment  
2.31 services provided through the navigator programs must not be greater than the chemical  
2.32 dependency treatment fund expected share of forecasted expenditures in the absence of  
2.33 the navigator programs. The commissioner may restructure the schedule of payments  
2.34 between the state and participating counties under the local agency share and division of  
2.35 cost provisions under section 254B.03, subdivisions 3 and 4, as necessary to facilitate  
2.36 the operation of the navigation programs.

(e) To the extent that state fiscal year expenditures within a county's navigator program are less than the expected share of forecasted expenditures in the absence of the navigator program, the commissioner shall deposit the unexpended funds in a separate account within the consolidated chemical dependency treatment fund, and make these funds available for expenditure by the county for the following year. To the extent that treatment and nontreatment services expenditures within a county's navigator program exceed the amount expected in the absence of the navigator program, the county shall be responsible for the portion of costs for nontreatment services expended in excess of the otherwise expected share of forecasted expenditures.

(f) The commissioner may waive administrative rule requirements that are incompatible with the implementation of navigator programs, except that any chemical dependency treatment funded under this section must continue to be provided by a licensed treatment provider.

(g) The commissioner shall not approve or enter into any agreement related to navigator programs authorized under this section that puts current or future federal funding at risk.

(h) The commissioner shall provide participating counties with transactional data, reports, provider data, and other data generated by county activity to assess and measure outcomes. This information must be transmitted to participating counties at least once every six months.

**Subd. 6. Duties of county board.** The county board, or other county entity that is approved to administer a navigator program, shall:

(1) administer the program in a manner consistent with this section;

(2) ensure that no one is denied chemical dependency treatment services for which they would otherwise be eligible under section 254A.03, subdivision 3; and

(3) provide the commissioner with timely and pertinent information as negotiated in the agreement governing operation of the county's navigator program.

**Subd. 7. Managed care.** (a) An individual who is eligible for the navigator program under subdivision 4 is excluded from mandatory enrollment in managed care.

(b) The commissioner shall seek any federal waivers and approvals necessary to allow managed care organizations to use capitated funds received from the commissioner to access nontreatment services defined in subdivision 5.

**Subd. 8. Report.** The commissioner, in partnership with participating counties, shall provide an annual report on the achievement of navigator program outcomes to the legislative committees with jurisdiction over chemical health. The report shall address qualitative and quantitative outcomes.

4.1

**EFFECTIVE DATE.** This section is effective the day following final enactment.