

1 Department of Human Services

2

3 Adopted Permanent Rules Relating to Community Alternatives for
4 Disabled Individuals Under Age 65

5

6 Rules as Adopted

7 9505.3010 SCOPE AND EFFECT.

8 Subpart 1. Scope. Parts 9505.3010 to 9505.3140 establish
9 standards and procedures for the community alternatives for
10 disabled individuals program. The community alternatives for
11 disabled individuals program allows Medicaid to pay for approved
12 community-based services provided to eligible persons. The
13 community-based services allow persons who would otherwise
14 reside in a nursing home to remain at home or return to the
15 community. Those persons must meet the requirements of part
16 9505.3035.

17 Parts 9505.3010 to 9505.3140 must be read in conjunction
18 with section 1915(c) of the Social Security Act; Minnesota
19 Statutes, sections 256B.04, subdivision 2; 256B.05; 256B.091,
20 subdivisions 1 to 8; 256B.49; 256B.491; Code of Federal
21 Regulations, title 42, sections 440.180 and 441.300 to 441.310,
22 amended through October 1, 1987; and parts 9505.2390 to
23 9505.2500. Parts 9505.3010 to 9505.3140 must be read in
24 conjunction with the requirements of the waiver obtained by the
25 state from the United States Department of Health and Human
26 Services.

27 Subp. 2. Effect. Parts 9505.3010 to 9505.3140 are
28 effective only as long as the waiver from the United States
29 Department of Health and Human Services remains in effect in
30 Minnesota.

31 9505.3015 DEFINITIONS.

32 Subpart 1. Applicability. The definitions in this part
33 apply to parts 9505.3010 to 9505.3140.

34 Subp. 2. Adaptations. "Adaptations" means minor physical
35 modifications to the home, adaptive equipment, and minor

1 modifications to vehicles as specified in part 9505.3075.

2 Subp. 3. **Adult day care services.** "Adult day care
3 services" means services provided to recipients by adult day
4 care centers licensed under parts 9555.9600 to 9555.9730 and
5 adult day care family homes established under Minnesota
6 Statutes, sections 245A.01 to 245A.17.

7 Subp. 4. **Applicant.** "Applicant" means a person under age
8 65 or the representative of a person under age 65 who applies to
9 participate in the community alternatives for disabled
10 individuals program rather than enter a nursing home. Applicant
11 also means a person or the representative of a person who has
12 been admitted to a nursing home as a resident, but who has
13 requested an assessment under part 9505.3025 to participate in
14 the CADI program.

15 Subp. 5. **Assessment form.** "Assessment form" means the
16 form supplied by the commissioner that is used to record the
17 information required under parts 9505.2425, subpart 1 and
18 9505.3025.

19 Subp. 6. **Care plan or individual plan of care.** "Care
20 plan" or "individual plan of care" means the written plan of a
21 combination of services designed to meet the health and
22 community-living needs of an applicant according to part
23 9505.3030.

24 Subp. 7. **Case management services.** "Case management
25 services" means the services as specified in part 9505.3070 that
26 identify, assist in gaining access to, authorize, and coordinate
27 services for a recipient; monitor the delivery of services to
28 the recipient; adjust services to the needs of the recipient;
29 and advocate for the rights of the recipient to assure the
30 health and safety of the recipient.

31 Subp. 8. **Case manager.** "Case manager" means a social
32 worker employed by or under contract with the local agency, or a
33 registered nurse who is employed by the local public health
34 department or under contract with the local agency to provide
35 case management. Local agency in this subpart means the local
36 agency in the county of service.

1 Subp. 9. **Commissioner.** "Commissioner" means the
2 commissioner of the Minnesota Department of Human Services or
3 the commissioner's authorized representative.

4 Subp. 10. **Community alternatives for disabled individuals**
5 **or CADI.** "Community alternatives for disabled individuals" or
6 "CADI" means certain community-based services further described
7 in parts 9505.3070 to 9505.3110 provided under a waiver to
8 physically disabled individuals under the age of 65 who require
9 the level of care provided in a nursing home. CADI services
10 allow the persons to remain in their homes.

11 Subp. 11. **County of financial responsibility.** "County of
12 financial responsibility" has the meaning given it in Minnesota
13 Statutes, section 256G.02, subdivision 4.

14 Subp. 12. **County of service.** "County of service" means
15 the county in which the applicant or recipient resides.

16 Subp. 13. **Department.** "Department" means the Minnesota
17 Department of Human Services.

18 Subp. 14. **Directory of services.** "Directory of services"
19 means the list of home and community-based services specified in
20 part 9505.2395, subpart 17.

21 Subp. 15. **Extended home health services.** "Extended home
22 health services" means the home health services specified in
23 part 9505.3085.

24 Subp. 16. **Extended personal care services.** "Extended
25 personal care services" means the personal care services
26 specified in part 9505.3090.

27 Subp. 17. **Family.** "Family" means the persons who live
28 with or provide informal care to a disabled individual. Family
29 may include a spouse, children, friends, relatives, foster
30 family, or in-laws.

31 Subp. 18. **Family support services; counseling and**
32 **training.** "Family support services; counseling and training"
33 means the services specified in part 9505.3095.

34 Subp. 19. **Formal caregivers.** "Formal caregivers" means
35 persons or entities providing CADI services who are employed by
36 or under contract with a local agency, or other agency or

1 organization, public or private. Formal caregiver does not
2 include case manager.

3 Subp. 20. **Home.** "Home" means the recipient's place of
4 residence other than a nursing home. It includes a home owned
5 or rented by the recipient, or a member of the recipient's
6 family or foster family.

7 Subp. 21. **Home and community-based services.** "Home and
8 community-based services" refers to services that provide
9 adaptations and adult day care, case management, extended home
10 health, extended personal care, family support, homemaker,
11 independent living skills, respite care services, and medical
12 supplies and equipment to a recipient through CADI.

13 Subp. 22. **Homemaker services.** "Homemaker services" means
14 the services specified in part 9505.3100.

15 Subp. 23. **Independent living skills services.**
16 "Independent living skills services" means supervision,
17 training, or assistance to a recipient in self care,
18 communication skills, socialization, sensory or motor
19 development, reduction or elimination of inappropriate or
20 maladaptive behavior, community living, and mobility that is
21 provided by individuals or agencies qualified to provide
22 independent living skills services.

23 Subp. 24. **Informal caregivers.** "Informal caregivers"
24 means family, friends, neighbors, and others who provide
25 services to and assist recipients without reimbursement for the
26 services.

27 Subp. 25. **Lead agency.** "Lead agency" means the social
28 service or public health agency approved by the county board to
29 administer the CADI program.

30 Subp. 26. **Local agency.** "Local agency" means the county
31 or multicounty agency authorized under Minnesota Statutes,
32 section 256B.05, to administer the medical assistance program.

33 Subp. 27. **Medical assistance.** "Medical assistance" means
34 the program including the CADI program established under title
35 XIX of the Social Security Act and Minnesota Statutes, chapter
36 256B.

1 Subp. 28. **Mental illness.** "Mental illness" means, in the
2 case of an adult, an illness as defined in Minnesota Statutes,
3 section 245.462, subdivision 20, or, in the case of a child, an
4 emotional disturbance as defined in Minnesota Statutes, section
5 245.4871, subpart 15.

6 Subp. 29. **Nursing home.** "Nursing home" means a facility,
7 including a boarding care facility, licensed under Minnesota
8 Statutes, chapter 144A, that is certified to participate in the
9 medical assistance program.

10 Subp. 30. **Nursing home resident.** "Nursing home resident"
11 means a person who lives, and expects to continue to live, in a
12 nursing home for more than 30 days. For purposes of parts
13 9505.3010 to 9505.3140, nursing home resident does not include a
14 person who is in a nursing home for respite care.

15 Subp. 31. **Person with mental retardation or a related**
16 **condition.** "Person with mental retardation or a related
17 condition" means a person as defined in part 9525.0015, subpart
18 20.

19 Subp. 32. **Personal care assistant.** "Personal care
20 assistant" means a person who provides extended personal care
21 services and meets the standards of part 9505.0335 or 9505.3090.

22 Subp. 33. **Physician.** "Physician" means a person who is
23 authorized to practice medicine under Minnesota Statutes,
24 chapter 147.

25 Subp. 34. **Preadmission screening or screening.**
26 "Preadmission screening" or "screening" means the activities
27 established under Minnesota Statutes, section 256B.091,
28 subdivisions 1 to 4, and specified in part 9505.3025.

29 Subp. 35. **Preadmission screening team or team.**
30 "Preadmission screening team" or "team" means the team defined
31 in part 9505.2395, subpart 39, that is required under part
32 9505.3025 to assess the health and social needs of an applicant
33 for CADI services.

34 Subp. 36. **Primary caregiver.** "Primary caregiver" has the
35 meaning given it in part 9505.2395, subpart 40. The primary
36 caregiver is designated by the recipient as his or her primary

1 caregiver. Primary caregiver additionally means an informal
2 caregiver of a recipient.

3 Subp. 37. **Public health nurse.** "Public health nurse"
4 means a registered nurse ~~certified-by-the-Minnesota-Department~~
5 ~~of-Health~~ who is qualified as a public health nurse
6 under ~~Minnesota-Statutes, section 145A.02, subdivision 18,~~ the
7 Minnesota nurse practice act and employed by a public health
8 nursing service as defined in subpart 38.

9 Subp. 38. **Public health nursing service.** "Public health
10 nursing service" means the nursing program provided by a board
11 of health under Minnesota Statutes, section 145.10, subdivision
12 1.

13 Subp. 39. **Reassessment.** "Reassessment" means the
14 reevaluation of a CADI recipient's health and community-living
15 needs under part 9505.3060.

16 Subp. 40. **Recipient.** "Recipient" means a person
17 determined to be eligible for CADI services according to part
18 9505.3035, who chooses to receive the CADI services identified
19 in the person's care plan, and whose services have been
20 initiated.

21 Subp. 41. **Registered nurse.** "Registered nurse" means a
22 person licensed under Minnesota Statutes, section 148.211.

23 Subp. 42. **Representative.** "Representative" means a person
24 appointed by the court as a guardian or conservator under
25 Minnesota Statutes, sections 252A.01 to 252A.21 or 525.539 to
26 525.6198; a spouse; a parent of a child under age 18 unless the
27 parent's parental rights have been terminated; a person
28 designated by a power of attorney or a durable power of
29 attorney; or a person authorized by the applicant or recipient
30 under part 9505.0015, subpart 8.

31 Subp. 43. **Resident class.** "Resident class" means the case
32 mix classification assigned to a person as required under parts
33 9549.0058, subpart 2, and 9549.0059.

34 Subp. 44. **Respite care services.** "Respite care services"
35 means short-term supervision, assistance, and care provided to a
36 recipient, due to the temporary absence or need for relief of

1 the primary caregiver.

2 Subp. 45. **Room and board costs.** "Room and board costs"

3 means costs of providing food and shelter to a recipient

4 including the identifiable direct costs of:

5 A. private and common living space;

6 B. normal and special diet food preparation and

7 service;

8 C. linen, bedding, laundering, and laundry supplies;

9 D. housekeeping including cleaning and lavatory

10 supplies;

11 E. maintenance and operation of buildings and

12 grounds, including fuel, electricity, water, supplies, and parts

13 and tools to repair and maintain equipment and facilities; and

14 F. salaries and other costs related to items A to E.

15 Subp. 46. **Skilled nursing service.** "Skilled nursing

16 service" means the term defined in Code of Federal Regulations,

17 title 42, section 405.1224.

18 Subp. 47. **Slot.** "Slot" means an opening available for

19 services to ~~the person~~ a recipient under the waiver.

20 Subp. 48. **Social worker.** "Social worker" means a person

21 who has met the minimum qualifications of a social worker under

22 the Minnesota Merit System or a county civil service system in

23 Minnesota.

24 Subp. 49. **State medical review team.** "State medical

25 review team" means a team consisting of physicians and social

26 workers who are under contract with or employed by the

27 department to review a medical and social history to determine

28 whether a person is disabled under the regulations of the Social

29 Security Administration.

30 Subp. 50. **Vehicle.** "Vehicle" means a vehicle owned by the

31 recipient or a member of the recipient's family or foster family

32 that is used to transport a recipient with sensory or mobility

33 defects.

34 Subp. 51. **Waiver.** "Waiver" means the document approved by

35 the United States Department of Health and Human Services which

36 allows the state to pay for home and community-based services

1 authorized under Code of Federal Regulations, title 42, part
2 441, subpart G. The term includes all amendments to the waiver
3 including any amendments made after the effective date of parts
4 9505.3010 to 9505.3140, as approved by the United States
5 Department of Health and Human Services.

6 Subp. 52. **Waiver year.** "Waiver year" means October 1 to
7 the following September 30.

8 Subp. 53. **Working day.** "Working day" has the meaning
9 given it in part 9505.2395, subpart 56.

10 9505.3020 PREADMISSION SCREENING OF CADI APPLICANTS.

11 Preadmission screening is required for all applicants for
12 home and community-based services under CADI. The screening
13 must incorporate the requirements of the 1987 Omnibus Budget
14 Reconciliation Act, Public Law Number 100-203, about appropriate
15 nursing home placement for persons with mental illness and for
16 persons with mental retardation or related conditions.

17 9505.3025 DUTIES OF PREADMISSION SCREENING TEAM.

18 Subpart 1. **General procedure for preadmission screening.**

19 The preadmission screening team of the county of service must
20 conduct the preadmission screening of a CADI applicant as
21 specified in parts 9505.2425, subparts 1; 2; 3, items A, B, C,
22 and D; 4; and 14; and 9505.3020. Additionally, the preadmission
23 screening team must:

24 A. inform the applicant about eligibility
25 requirements for CADI as specified in part 9505.3035 and the
26 services available through CADI;

27 B. give the person who is not a medical assistance
28 recipient a medical assistance application and help the person
29 complete the medical assistance application as required under
30 parts 9505.0010 to 9505.0150; and

31 C. in the case of an applicant applying on or after
32 October 1, 1989, who was not a nursing home resident on October
33 1, 1989, inform the applicant about the right of the applicant
34 and the applicant's spouse to retain assets up to the amount
35 specified in Minnesota Statutes, section 256B.059, and.

~~B.---in-the-case-of-an-applicant-applying-before
October-17-1989--inform-the-applicant-about-the-right-of-the
applicant-and-the-applicant's-spouse-to-retain-assets-that-were
exempt-from-consideration-before-October-17-1989.~~

Subp. 2. Local agency data sharing with lead agency. Upon the lead agency's request, the local agency must provide the lead agency with information the local agency has concerning the medical assistance eligibility or social service needs of an applicant.

Subp. 3. Team recommendations for CADI applicants. After completing the assessment form required under part 9505.2425, subpart 1, and the assessment interview required under part 9505.2425, subpart 2, the team must recommend one of the choices in items A to E.

A. The team must recommend admission to a nursing home when:

(1) the assessment indicates that the applicant needs the level of care provided by a nursing home and that the home and community-based services that the applicant would need in lieu of nursing home care are not currently available; or

(2) the assessment indicates that the anticipated cost to medical assistance of providing the needed home and community-based services and medical assistance home care services would exceed the limit specified in part 9505.3040.

B. The team must recommend continued stay in a nursing home when:

(1) the assessment indicates that the resident needs the level of care provided by a nursing home and that the home and community-based services that the resident would need in lieu of nursing home care are not currently available; or

(2) the assessment indicates that the anticipated cost to medical assistance of providing the needed home and community-based services and medical assistance home care services would exceed the limit specified in part 9505.3040.

C. The team must recommend health and social services including CADI services and, if needed, medical assistance home

1 care services when the assessment indicates that the applicant
2 needs the level of care provided by a nursing home; the services
3 needed by the applicant to be at home are available or can be
4 developed; and the anticipated cost of providing the services is
5 within the limit specified in part 9505.3040.

6 D. The team must recommend health and social services
7 including CADI services and, if needed, medical assistance home
8 care services when the assessment indicates that the applicant
9 who is a nursing home resident needs the level of care provided
10 by a nursing home; the home and community-based services needed
11 by the applicant are available or can be developed; and the
12 anticipated cost of providing the necessary services is within
13 the limit specified in part 9505.3040.

14 E. The team must recommend that the applicant live in
15 the community without home and community-based services if the
16 assessment indicates that the person is not an applicant to or
17 resident of a nursing home, does not require nursing home care,
18 or does not need home and community-based services.

19 Subp. 4. **Application for CADI services; request for case**
20 **manager.** If the team recommends the use of home and
21 community-based services and the applicant chooses to remain in
22 the community with the recommended services, the team must
23 request that the person complete and sign an application for
24 home and community-based services under CADI. To be eligible to
25 receive CADI services, the person must also be eligible for
26 medical assistance. If the person's eligibility for medical
27 assistance has not been determined, a financial worker ~~shall~~ may
28 accompany the team to the screening to take an application for
29 medical assistance. If the applicant signs the application for
30 home and community-based services under CADI, the preadmission
31 screening team must notify the lead agency and request the lead
32 agency to assign a case manager.

33 Subp. 5. **Notice of preadmission screening team**
34 **recommendation.** The preadmission screening team must give
35 notice of the team recommendation made under subpart 3 as
36 specified in part 9505.2425, subpart 8. Additionally, the team

1 must obtain the consent of the applicant or, if appropriate, the
2 applicant's representative for the purpose of notifying the
3 applicant's physician.

4 Subp. 6. **Information to county of financial**
5 **responsibility.** If the county of service is different from the
6 county of financial responsibility, the preadmission screening
7 team of the county of service must submit information about the
8 applicant to the county of financial responsibility within ten
9 working days after the preadmission screening is completed. The
10 information must include:

11 A. a copy of the preadmission screening document;

12 B. a copy of the signed application required in
13 subpart 4;

14 C. a copy of the preadmission screening assessment
15 form;

16 D. a copy of the care plan as specified in part
17 9505.3030 that includes services to be provided and the
18 estimated monthly cost of services; and

19 E. the person's medical assistance eligibility status.

20 Subp. 7. **County of financial responsibility action.** The
21 county of financial responsibility shall review the information
22 submitted by the preadmission screening team of the county of
23 service and keep a file on the CADI applicant. The county of
24 financial responsibility must sign off on the care plan and
25 approve the application no later than ten days after receiving
26 the information if the applicant meets the eligibility
27 requirements in part 9505.3035 and has been assigned a slot by
28 the department. Disputes about the county of financial
29 responsibility must be resolved according to Minnesota Statutes,
30 section 256G.09.

31 9505.3030 INDIVIDUAL CARE PLAN.

32 Subpart 1. **Care plan development.** The case manager must
33 develop a care plan on a form provided by the commissioner for
34 an applicant who has chosen to remain in or return to the
35 community and who is eligible for CADI services under parts

1 9505.3010 to 9505.3140. The case manager must develop the plan
2 in consultation with:

3 A. the applicant;

4 B. the applicant's representative, if any, and;

5 C. with the applicant's consent:

6 (1) the applicant's family;

7 (2) the primary caregiver if applicable;

8 (3) the applicant's physician; and

9 (4) any other individuals who are currently

10 involved in meeting the applicant's health or community-living
11 needs.

12 Subp. 2. **Care plan contents.** The care plan must include:

13 A. care objectives;

14 B. prescriptions for medications, restorative or
15 rehabilitative services, diet, special procedures, and other
16 health or community-living services recommended for the health
17 or safety of the applicant;

18 C. a description of the health care and social
19 services necessary to maintain the person in the community;

20 D. the frequency, scope, and duration of each of the
21 services;

22 E. the designation of who will deliver each of the
23 services described in the plan including both formal and
24 informal providers;

25 F. the schedule for review and evaluation of the care
26 plan;

27 G. an estimate of the total monthly cost of CADI and
28 medical assistance services identified and recommended by the
29 team as specified under part 9505.3025, subpart 3; and

30 H. the payment source for each service.

31 Subp. 3. **Directory of services.** In developing the
32 recipient's care plan, the case manager must use the directory
33 of services as specified in part 9505.2425, subpart 7.

34 Subp. 4. **Signatures on care plan.** The case manager shall
35 request the applicant to sign the care plan specified in subpart
36 2 as an indication of the applicant's acceptance of the care

1 ~~plan and authorization to send a copy of the care plan to the~~
2 ~~service providers that the plan specifies.~~ Additionally, the
3 case manager must sign the care plan and, if authorized as in
4 subpart 5, item D, request the recipient's physician to sign the
5 recipient's care plan.

6 Subp. 5. **Distribution of care plan.** The case manager must
7 give a copy of the applicant's or recipient's care plan to:

- 8 A. the county of service;
- 9 B. the county of financial responsibility;
- 10 C. the applicant or recipient; and
- 11 D. with the consent of the applicant or recipient, or
12 the representative of the applicant or recipient, to the
13 applicant's or recipient's physician and the provider or
14 providers of the CADI services specified in the applicant's or
15 recipient's care plan.

16 9505.3035 ELIGIBILITY FOR CADI SERVICES.

17 Subpart 1. **Eligibility criteria.** A person is eligible for
18 CADI services if the person meets the criteria in items A to L:

- 19 A. the person has been screened according to part
20 9505.3025;
- 21 B. the person is under age 65;
- 22 C. the person has been certified as disabled by the
23 Social Security Administration or the state medical review team;
- 24 D. the person is a medical assistance recipient or is
25 eligible for medical assistance under subpart 2 or parts
26 9505.0010 to 9505.0150;
- 27 E. the person would need the level of care provided
28 in a nursing home if home and community-based services are not
29 available;
- 30 F. the person is a nursing home applicant who chooses
31 to remain in the community and use home and community-based
32 services or is a nursing home resident who chooses to leave the
33 nursing home and use home and community-based services;
- 34 G. the health and safety of the person is assured by
35 providing home and community-based services;

1 H. the service needed by the person is not already
2 provided as a part of a residential placement agreement. A
3 residential services provider shall not provide CADI or medical
4 assistance services without prior authorization from the
5 commissioner. For purposes of this item, "residential placement
6 agreement" means an agreement to provide a supervised living
7 arrangement for the recipient, such as a foster care agreement
8 between the county board and the provider. The recipient's case
9 manager must document in the recipient's care plan all services
10 to be provided to the recipient as part of the residential
11 placement agreement. The term does not apply to residence in a
12 long-term care facility.

13 I. the person needs community services that cannot be
14 funded by sources other than CADI;

15 J. the cost of all CADI services and medical
16 assistance funded nursing, home health aide, and personal care
17 services including the supervision of personal care assistants;
18 authorized in the care plan is less than the limitation in part
19 9505.3040;

20 K. the applicant or recipient accepts case management
21 services; and

22 L. the person has a written plan of care approved by
23 the commissioner under part 9505.3055, subpart 1.

24 Subp. 2. **Determination of CADI applicant's medical**
25 **assistance eligibility.** A CADI applicant's medical assistance
26 eligibility must be determined under parts 9505.0010 to
27 9505.0150 except as specified in items A and B. For purposes of
28 this subpart, "spend-down" has the meaning given in part
29 9505.0015, subpart 44.

30 A. The local agency shall determine the applicant's
31 eligibility for medical assistance without considering parental
32 or spousal income and assets if the person meets the criteria in
33 subpart 1, items A to L.

34 B. If an applicant's income exceeds the limits for
35 medical assistance eligibility, the cost of CADI services and
36 other medical services needed by the applicant must be used to

1 meet the spend-down required under part 9505.0065, subpart 11.
2 The cost of a CADI service is considered to be incurred on the
3 first day of the month in which the service is provided. The
4 costs of other health services are applied to the spend-down
5 requirement as of the day on which the service is given. The
6 applicant is responsible for paying bills used to meet the
7 spend-down.

8 9505.3040 LIMIT ON COSTS OF RECIPIENT'S CADI SERVICES.

9 Subpart 1. **Costs to be applied toward the cost limit of a**
10 **recipient's CADI services.** Except as provided in subpart 2, the
11 costs of the following items must be applied toward the cost
12 limit of a recipient's CADI services in subpart 3. The costs
13 must be applied as specified in part 9505.3035, subpart 2:

14 A. costs of all CADI funded services, including case
15 management, medical supplies and equipment, and adaptations; and

16 B. costs of home care services reimbursed by medical
17 assistance.

18 Subp. 2. **Service costs to be excluded.** If reimbursed by
19 medical assistance, the costs of the following items must be
20 excluded from the costs included under subpart 1 to the extent
21 that costs of these items are reimbursed by medical assistance:

22 A. prescription drugs;

23 B. medical transportation;

24 C. audiology, speech-language-pathology, respiratory,
25 occupational, and physical therapy; and

26 D. medical supplies and equipment.

27 Subp. 3. **Monthly limit on costs of recipient's CADI**
28 **services.** Except as provided in subpart 4, the monthly cost of
29 CADI services to a recipient shall not exceed the statewide
30 monthly average nursing home rate effective July 1 of the fiscal
31 year in which the cost is incurred less the statewide average
32 monthly income of nursing home residents who are less than age
33 65 and are medical assistance recipients in the month of March
34 of the previous Minnesota fiscal year. In calculating the
35 monthly limit for a recipient, the statewide monthly average

1 nursing home rate shall be the rate of the resident class to
 2 which the recipient would be assigned under parts 9549.0050 to
 3 9549.0059.

4 Subp. 4. **Exception to monthly limit on costs of**
 5 **recipient's CADI services.** If medical supplies and equipment or
 6 adaptations are or will be purchased for the recipient, the
 7 costs that are not reimbursable by medical assistance must be
 8 prorated on a monthly basis throughout the waiver year in which
 9 they are purchased. If the monthly cost of a recipient's other
 10 CADI services exceeds the limit in subpart 3, the annual cost of
 11 the CADI services shall be determined. In this event, the
 12 annual cost of CADI services to a recipient shall not exceed 12
 13 times the monthly limit calculated under subpart 3.

14 Subp. 5. **Monthly limits on costs of CADI services of**
 15 **applicant who is a nursing home resident.** The monthly cost of
 16 CADI services for a person who is a nursing home resident at the
 17 time of requesting a determination of eligibility for CADI shall
 18 not exceed the monthly payment for the resident class assigned
 19 under parts 9549.0050 to 9549.0059 for that resident in the
 20 nursing home where the resident currently resides.

21 9505.3045 REQUEST FOR PROVISIONAL CADI SLOT ASSIGNMENT.

22 When the case manager has completed a care plan as
 23 specified in part 9505.3030 and has determined that the
 24 applicant or recipient meets the requirements of part 9505.3035,
 25 the case manager must contact the commissioner by phone and
 26 request the provisional assignment of a CADI slot pending the
 27 commissioner's determination under part 9505.3055. The request
 28 must include the following information:

- 29 A. the applicant's name;
- 30 B. the applicant's birth date;
- 31 C. the applicant's medical assistance ID number;
- 32 D. the applicant's resident class as specified in
 33 part 9505.3040, subpart 3;
- 34 E. the approximate date that services will begin; and
- 35 F. the estimated average monthly cost of home and

1 community-based services funded by medical assistance and CADI.

2 9505.3050 WRITTEN REQUEST FOR CADI SLOT ASSIGNMENT.

3 No later than 15 days after receiving a provisional CADI
4 slot assignment under part 9505.3045, the lead agency must send
5 to the commissioner a copy of the information specified in part
6 9505.3025, subpart 6, items A and D. If the required
7 information is not submitted within the 15-day period, the
8 department shall withdraw the provisional CADI slot assignment
9 if there are other applicants eligible under part 9505.3035 who
10 are waiting for a slot to be assigned. The department shall
11 notify the lead agency if a provisional CADI slot assignment is
12 ended.

13 9505.3055 COMMISSIONER'S DETERMINATION.

14 Subpart 1. **Review and notice of decision.** The
15 commissioner shall review the information and documents
16 submitted by the lead agency under part 9505.3050 to determine
17 whether the applicant is eligible for and approved to receive
18 home and community-based services that are specified in the
19 applicant's care plan and that are available under and paid for
20 through CADI.

21 Subp. 2. **Criteria for commissioner's approval and**
22 **assignment of CADI slot.** The commissioner shall approve a
23 request for CADI services and assign a CADI slot in the order in
24 which the application required under subpart 1 is received if
25 the applicant meets the eligibility criteria in part 9505.3035
26 and a CADI slot is available.

27 Subp. 3. **Disapproval of request for CADI services.** The
28 commissioner shall disapprove a request for CADI services if the
29 applicant does not meet the eligibility criteria in part
30 9505.3035, a CADI slot is not available, or the information and
31 documents submitted by the lead agency under part 9505.3050 are
32 incomplete. If the information and documents submitted by the
33 lead agency under part 9505.3050 are incomplete, the
34 commissioner shall notify the lead agency of the action
35 necessary to complete the application.

1 9505.3060 REASSESSMENT OF CADI RECIPIENT.

2 Subpart 1. **Reassessment required.** The case manager must
3 conduct a face-to-face reassessment of the health care needs of
4 a CADI recipient at least once every six months after home and
5 community-based services have begun. In addition to the
6 six-month assessments, the case manager must reassess the health
7 care needs of a CADI recipient when:

8 A. the case manager determines that changes in the
9 health or community-living needs of the CADI recipient or
10 changes in informal support arrangements necessary to remain at
11 home require revisions in the recipient's care plan; or

12 B. a person who is eligible for CADI services has
13 entered a nursing home for other than respite care or has
14 entered a hospital for a temporary stay and is ready to return
15 to the community.

16 Subp. 2. **Reassessment procedure.** The case manager must
17 reassess the recipient as required under subpart 1 using the
18 procedures specified for a preadmission screening in part
19 9505.3025.

20 Subp. 3. **Record of reassessment.** The case manager must
21 place a record of the recipient's reassessment in the
22 recipient's records at the lead agency. The record shall
23 include the reason or reasons for the reassessment, the names of
24 the persons consulted during the reassessment and their
25 relationship to the recipient, revisions of the care plan and
26 the reason or reasons for each revision or a statement that
27 revisions were not needed. The revised care plan or statement
28 must be signed by the recipient's physician.

29 Subp. 4. **Distribution of revised care plan.** The case
30 manager must give a copy of the recipient's revised care plan to
31 the entities specified in part 9505.3030, subpart 5.

32 9505.3065 REIMBURSEMENT FOR CADI SERVICES.

33 The services in items A to J, as specified in parts
34 9505.3070 to 9505.3110, shall be reimbursed on a fee-for-service
35 basis under CADI, if the services are provided according to a

1 recipient's care plan, if the services are necessary to avoid
2 the recipient's institutionalization, and if the rates for the
3 services comply with the rates established in part 9505.3135:

- 4 A. case management services;
- 5 B. homemaker services;
- 6 C. respite care services;
- 7 D. adult day care services;
- 8 E. extended home health services;
- 9 F. extended personal care services;
- 10 G. adaptations;
- 11 H. independent living skills services;
- 12 I. family support services; and
- 13 J. other services if authorized under the waiver.

14 9505.3068 COSTS NOT ELIGIBLE FOR REIMBURSEMENT UNDER CADI.

15 The costs of the following services shall not be reimbursed
16 under the CADI program:

17 A. community services that can be reimbursed through
18 other funding sources including Medicare and third party payers
19 as defined in part 9505.0015, subpart 46;

20 B. room and board costs except for respite care
21 provided away from the recipient's residence;

22 C. services of providers who are not under contract
23 with the county;

24 D. respite care services that exceed the 720-hour
25 limit in part 9505.3110;

26 E. adaptations that cost more than allowed by the
27 waiver per recipient;

28 F. services not authorized by the case manager;

29 G. supplementary or replacement services covered by a
30 Medicare or medical assistance funded hospice program, except
31 services for a condition not related to the terminal illness; or

32 H. payment for CADI services provided to a nursing
33 home resident before the date of discharge from the nursing home.

34 9505.3070 CASE MANAGEMENT SERVICES.

35 Subpart 1. Case management services required. Case

1 management services are required under CADI. The lead agency
2 must assure that a case manager is designated to provide case
3 management services to each recipient.

4 Subp. 2. **Case manager qualifications.** Case management
5 services must be provided by a registered nurse as defined in
6 part 9505.3015, subpart 41, or a social worker as defined in
7 part 9505.3015, subpart 48.

8 A person who provides case management services must be
9 employed by or under contract with the lead agency. The lead
10 agency shall monitor and enforce compliance with the terms of
11 the contract.

12 Subp. 3. **Responsibilities of case manager.** The case
13 manager must:

14 A. assure that the team uses the criteria of the
15 Preadmission Screening Assessment document in screening
16 applicants;

17 B. develop the care plan with the screening team, the
18 applicant, and the applicant's family members and other
19 appropriate persons;

20 C. obtain the necessary documentation of service
21 need, including the attending physician's signature;

22 D. authorize the provision of services specified in
23 the recipient's approved case plan;

24 E. monitor service providers and the provision of
25 services to ensure that only the authorized care is being
26 provided and that the recipient's health and safety at least is
27 being maintained;

28 F. with the consent of the applicant or recipient or
29 the representative of the applicant or recipient, initiate and
30 maintain contact with family members and other informal
31 caregivers to ensure that planned care, both formal and
32 informal, is being provided;

33 G. assist the recipient in gaining access to needed
34 medical, social, educational, and other services;

35 H. reassess a CADI recipient as required under part
36 9505.3060;

1 I. complete a notice of action form (DHS-2828) if the
2 recommendations of the preadmission screening team following a
3 reassessment under part 9505.3060 are to reduce, suspend, or
4 terminate the recipient's CADI services. The original notice of
5 action must be sent to the recipient no later than ten days
6 before the proposed action;

7 J. monitor the recipient's health and safety;

8 K. contact the local agency to verify that the person
9 is eligible for medical assistance; and

10 L. provide ongoing coordination of the care plan so
11 the cost does not exceed cost limits of part 9505.3040.

12 Subp. 4. **Reporting suspected abuse or neglect of a**
13 **vulnerable adult or suspected maltreatment of a child.** A case
14 manager who has reason to believe a recipient who is an adult is
15 or has been subject to abuse or neglect as defined in Minnesota
16 Statutes, section 626.557, subdivision 2, must immediately
17 comply with the reporting and other actions required under
18 Minnesota Statutes, section 626.557. A case manager who has
19 reason to believe a recipient, who is a child, is or has been
20 subject to maltreatment as defined in Minnesota Statutes,
21 section 626.556, must immediately comply with the reporting and
22 other actions required under Minnesota Statutes, section
23 626.556. The case manager must determine how to assure the
24 recipient's health and safety during the investigation, and may
25 take one or more of the actions specified in subpart 5. The
26 case manager must request a report from the protection agency in
27 order to take the action required in subpart 5 unless the
28 recipient's health and safety is imminently threatened.

29 Subp. 5. **Case manager decisions.** When the case manager
30 receives the findings of the investigation conducted under
31 Minnesota Statutes, section 626.556 or 626.557, the case manager
32 shall amend the care plan as needed to assure the recipient's
33 health and safety. Based on the findings, the case manager
34 shall determine whether:

35 A. to arrange for the services of another CADI
36 provider;

1 B. to work out alternative housing and services for
2 the recipient; or

3 C. to suspend or terminate the CADI services.

4 Notwithstanding any rule to the contrary, if the case manager
5 decides to suspend or terminate the recipient's CADI services,
6 the suspension or termination shall take effect upon the date of
7 the notice of the suspension or termination to the recipient.

8 9505.3075 ADAPTATIONS.

9 An adaptation is available to a recipient under CADI only
10 if the adaptation is necessary to enable a recipient with
11 mobility problems, sensory deficits, or behavior problems to be
12 maintained at home. Adaptations include minor physical
13 adaptations to the home, adaptive equipment, and minor
14 adaptations to vehicles provided to enable disabled persons to
15 live in the community. Examples of adaptations to the home are
16 widened doors, handrails, lifting devices, and ramps. Examples
17 of adaptations to a vehicle are lifting devices, wheel chair
18 securing devices, and adapted seats. For purposes of this part,
19 "minor physical adaptation" means an adaptation that costs less
20 than the limit specified in the waiver. Adaptations can be
21 provided under the CADI waiver for a recipient if:

22 A. the adaptation is not available from any other
23 funding source and has a cost within the limitations specified
24 in parts 9505.3010 to 9505.3140; and

25 B. the case manager has received prior authorization
26 from the commissioner. To obtain authorization, the case
27 manager must document that the adaptation is necessary for the
28 recipient to avoid nursing home admission and the cost of the
29 adaptation is within the limit specified in the waiver.

30 9505.3080 ADULT DAY CARE SERVICES.

31 Adult day care services are available under CADI. Adult
32 day care services are to be offered only when the services are
33 necessary to avoid the recipient's admission to a nursing home.
34 Adult day care services provided through CADI must meet the
35 criteria in items A and B.

1 A. The services must be furnished on a regularly
2 scheduled basis and cannot exceed 12 hours in a 24-hour period.

3 B. If the adult day care service provides
4 transportation, then the cost of transportation to and from the
5 site of the adult day care service is eligible for payment under
6 CADI if it is included in the day care rate.

7 9505.3085 EXTENDED HOME HEALTH SERVICES.

8 Extended home health services are available under CADI if
9 the services meet the requirements in items A to C.

10 A. The service is a home health service as specified
11 in part 9505.0295 except that the limits in subpart 3 of part
12 9505.0295 on the number of visits and hours eligible for medical
13 assistance reimbursement do not apply.

14 B. The service is provided according to the amount,
15 duration, and scope specified in the recipient's care plan.

16 C. The service is provided by a provider who meets
17 the requirements of part 9505.0290, subpart 2.

18 9505.3090 EXTENDED PERSONAL CARE SERVICES.

19 Subpart 1. **Availability under CADI.** Extended personal
20 care services are available under CADI if the extended personal
21 care services meet the requirements in part 9505.0335 except as
22 provided in subparts 2 and 3 and except that the directions for
23 the recipient's care may be provided by a primary caregiver or
24 family member if the recipient is not able to direct his or her
25 own care.

26 Subp. 2. **Qualification as personal care assistant.** A
27 person who does not qualify as a personal care assistant under
28 part 9505.0335 can be a personal care assistant for a recipient
29 if the person meets the training requirements under part
30 9505.0335, subpart 3, and is employed by or under contract with
31 the lead agency.

32 Subp. 3. **Relative as personal care assistant.** A
33 recipient's relative, other than a responsible relative as
34 defined in part 9505.0015, subpart 43, may be employed as a
35 personal care assistant if the relative meets the requirements

1 in subpart 2, is under contract with the lead agency, and meets
2 one of the financial hardship criteria in items A to D:

3 A. the relative resigns from a full-time job to care
4 for the recipient;

5 B. the relative goes from a full-time to a part-time
6 job with less compensation;

7 C. the relative takes a leave of absence without pay
8 to provide personal care for the recipient; or

9 D. the relative, because of local labor conditions,
10 is the only person available to provide care for the recipient.

11 Subp. 4. **Commissioner's approval of extended personal care**
12 **services.** The lead agency must obtain the department's approval
13 to provide extended personal care services to a recipient.

14 9505.3095 FAMILY SUPPORT SERVICES.

15 Subpart 1. **Availability as CADI service.** Family support
16 services that are the training and counseling services in items
17 A and B are available under CADI. The services may be provided
18 to the recipient as well as to persons with whom the recipient
19 lives or who routinely are the recipient's informal caregivers.

20 A. Training must be designed to increase the
21 recipient's or family member's ability to care for the recipient
22 at home and must be necessary to avoid the recipient's admission
23 to a nursing home. Training includes instruction about the use
24 of equipment and treatment regimens that are specified in the
25 recipient's care plan.

26 B. Counseling includes helping the recipient or
27 members of the recipient's family with crises, coping
28 strategies, and stress reduction as required for family
29 functioning to maintain the recipient in the community.

30 Subp. 2. **Standards to be a CADI provider of training**
31 **services.** A provider of training services under CADI must meet
32 the applicable qualification specified in items A to H.

33 A. A physician must be licensed to practice in
34 Minnesota.

35 B. A registered nurse must be licensed and have one

1 year of experience as a professional nurse.

2 C. A physical therapist must have a current Minnesota
3 certificate of registration.

4 D. An occupational therapist must be currently
5 certified by the American Occupational Therapy Association as an
6 occupational therapist.

7 E. A respiratory therapist must meet the criteria
8 established for a respiratory therapist in part 9505.0295,
9 subpart 2, item E.

10 F. A medical equipment supplier must be authorized by
11 the case manager to provide training in use of equipment and
12 must be a provider under part 9505.0195.

13 G. A speech-language pathologist must be certified by
14 the American Speech-Language-Hearing Association.

15 H. A nutritionist must have a bachelor's degree and
16 be registered by the Commission on Dietetic Registration.

17 Subp. 3. **Standards for providers of family support**
18 **counseling services.** A provider of family support counseling
19 services must be one of the following:

20 A. a Medicaid enrolled psychiatrist or individual who
21 works under the supervision of a Medicaid enrolled psychiatrist;

22 B. a Medicaid enrolled psychologist or individual who
23 works under the supervision of a Medicaid enrolled psychologist;

24 C. a mental health clinic that is an enrolled
25 Medicaid provider;

26 D. a social worker licensed under Minnesota Statutes,
27 sections 148B.18 to 148B.28; and

28 E. an independent practitioner who provides
29 counseling services and who has been determined by the lead
30 agency to:

31 (1) have a general knowledge of disabilities and
32 chronic illnesses that may affect individual or family
33 functioning;

34 (2) have skills in mental health assessment,
35 including client interviewing and screening;

36 (3) have skills in mental health management

1 including treatment planning, general knowledge of social
 2 services, record keeping, reporting requirements,
 3 confidentiality rules, and any federal or state regulations
 4 which apply to mental health services;

5 (4) have skills in individual and group
 6 counseling, including crisis intervention; and

7 (5) provide proof that:

8 (a) The individual possesses at least a
 9 bachelor's degree with a major in social work, nursing,
 10 sociology, human services, or psychology and has successfully
 11 completed 960 hours of experience as a counselor supervised by a
 12 licensed psychiatrist or psychologist. The experience can be
 13 either as a student, volunteer, or employee.

14 (b) The individual has successfully
 15 completed a minimum of:

16 i. 40 hours of classroom training in a
 17 health related field;

18 ii. 40 hours of classroom training in
 19 mental health assessment including interviewing skills;

20 iii. 40 hours of classroom training in
 21 mental health management including treatment planning, social
 22 services, record keeping, reporting requirements, and
 23 confidentiality;

24 iv. 40 hours of classroom training in
 25 individual and group counseling techniques; and

26 v. successful completion of 960 hours
 27 of experience as a counselor supervised by a licensed
 28 psychiatrist or licensed psychologist as either a student,
 29 volunteer, or employee; or

30 (c) The individual possesses training in
 31 unit (b), subunits (i) to (iii), and has successfully completed
 32 two years of supervised experience as a counselor or therapist.

33 9505.3100 HOME MAKER SERVICES.

34 Subpart 1. Availability as CADI service. Homemaker
 35 services are available under CADI. Homemaker services must be

1 designed to enable a recipient to remain at home and avoid
 2 admission to a nursing home and must be provided if authorized
 3 by the case manager.

4 **Subp. 2. Tasks of homemaker.** Homemaker services include:

5 A. house cleaning;

6 B. laundering and ironing;

7 C. meal planning and preparation;

8 D. dishwashing;

9 E. household management;

10 F. providing companionship, emotional support, and
 11 social stimulation;

12 G. observing and evaluating home safety practices and
 13 improving these practices where appropriate;

14 H. monitoring the safety and well being of the
 15 recipient; and

16 I. performing essential errands and shopping.

17 **Subp. 3. Qualified homemakers.** The lead agency shall
 18 assure that each recipient receiving homemaker services is
 19 served by a homemaker qualified under part 9565.1200, subpart 2.

20 **Subp. 4. Contracting for homemaker services and**
 21 **supervision.** The lead agency may directly provide or contract
 22 for homemaker services for a recipient as indicated in the
 23 recipient's care plan. If the lead agency provides homemaker
 24 services directly, the lead agency must also provide supervision
 25 of the homemaker's activities. If the lead agency contracts
 26 with a provider for homemaker services, the provider must meet
 27 the requirements of Minnesota Statutes, sections 144A.43 to
 28 144A.46.

29 **9505.3105 INDEPENDENT LIVING SKILLS SERVICES.**

30 **Subpart 1. Availability as CADI services.** Independent
 31 living skills services are available under CADI. Independent
 32 living skills services may be provided in the disabled person's
 33 home or at a site approved by the case manager. Independent
 34 living skills services must be directed at the development and
 35 maintenance of community living skills and community integration.

1 Subp. 2. Standards for providers of independent living
2 skills services. Providers of independent living skills
3 services may include the following:

4 A. home health agencies enrolled as Medicaid
5 providers;

6 B. rehabilitation agencies enrolled as Medicaid
7 providers;

8 C. a person who is employed by an independent living
9 center and who is determined by the lead agency to meet the
10 requirements in subitems (1) to (5)†. For purposes of this
11 item, "independent living center" means a center that meets the
12 requirements of parts 3300.3100 to 3300.3270.

13 (1) has general knowledge of disabilities and
14 chronic illnesses which affect an individual's ability to live
15 independently in the community;

16 (2) has the ability to do a needs assessment of
17 the skills a disabled individual must develop in order to live
18 independently in the community;

19 (3) has knowledge of independent living skills
20 management including service planning, general knowledge of
21 social services, record keeping, reporting requirements, and
22 confidentiality;

23 (4) has the ability to provide assistance,
24 supervision, and training in the area of independent living; and

25 (5) provides proof that the person:

26 (a) has a bachelor's degree with a major in
27 nursing, physical therapy, occupational therapy, or
28 speech-language pathology, psychology, or sociology, and has
29 successfully completed 480 hours of experience working with
30 disabled or chronically ill individuals as a student, volunteer,
31 or employee, under the supervision or direction of a licensed
32 physician;

33 (b) has successfully completed an accredited
34 educational program for registered nurses or licensed practical
35 nurses;

36 (c) has completed a nursing assistant

1 training program or its equivalent for which competency as a
 2 nursing assistant is determined by the State Board of Vocational
 3 Technical Education;

4 (d) has completed a homemaker or home health
 5 aide preservice training program using a curriculum recommended
 6 by the Minnesota Department of Health and ~~the-supervising~~
 7 ~~nurse whose supervisor~~ has determined that the individual has
 8 the skills required to provide the independent living skills
 9 services as stated in the care plan; or

10 (e) has received a minimum of:

11 i. five hours of classroom training in
 12 recognizing the symptoms and effects of certain disabilities and
 13 health conditions;

14 ii. 20 hours of classroom instruction
 15 in providing supervision of, training to, and assistance with
 16 independent living skills services; and

17 iii. a determination by the
 18 ~~supervising-registered-nurse~~ person's supervisor that the
 19 individual has the skills required to provide the independent
 20 living skills services stated in the care plan. ~~For-purposes-of~~
 21 ~~this-item, "independent-living-center" means a center that meets~~
 22 ~~the-requirements-of-parts-3300.3100-to-3300.3270-~~

23 9505.3107 MEDICAL SUPPLIES AND EQUIPMENT.

24 Subpart 1. **Availability as a CADI service.** Medical
 25 supplies and equipment are available as one of the extended home
 26 health services under CADI. The lead agency may buy or rent
 27 care-related medical supplies and equipment for a recipient if
 28 the medical supplies and equipment are specified in the
 29 recipient's approved care plan and are beyond the amount, scope,
 30 and duration available as covered services under parts 9505.0170
 31 to 9505.0475; and the case manager has received prior
 32 authorization from the commissioner to use CADI funds.

33 Subp. 2. **Criteria to obtain commissioner's prior**
 34 **authorization.** To obtain prior authorization, the case manager
 35 must document that the medical supply or equipment is necessary

1 to enable the recipient to remain in the community and is beyond
2 the amount, scope, and duration available as a covered service
3 under parts 9505.0170 to 9505.0475; and the cost of the medical
4 supply or equipment is within the limitation specified in the
5 waiver. "Prior authorization" means the commissioner's approval
6 given to a lead agency before the lead agency purchases or rents
7 the item.

8 9505.3110 RESPITE CARE SERVICES.

9 Subpart 1. **Availability as CADI service.** Respite care
10 services are available under CADI. Respite care is limited to
11 720 hours per person per waiver year.

12 Subp. 2. **Provider standards.** Respite care may be provided
13 in either an out-of-home setting or in the recipient's own home.

14 A. Out-of-home respite care must be provided in a
15 facility approved by the county such as a hospital, nursing
16 home, foster home, or community residential facility. When
17 respite care is provided in a non-Medicaid certified facility,
18 that facility must meet applicable state licensure standards.

19 B. In-home respite care providers must be individuals
20 who meet the state qualifications required of registered or
21 licensed practical nurses, home health aides, or personal care
22 assistants who have been specifically trained to provide care to
23 the recipient. Respite care workers must have had first-aid
24 training and cardiopulmonary resuscitation training. A respite
25 care worker who is a home health aide or personal care assistant
26 must be under the supervision of a registered nurse. The
27 registered nurse must assure that the respite care worker is
28 able to read and follow instructions, able to write clear
29 messages, and has a level of skill required by the recipient's
30 needs.

31 9505.3115 STANDARDS FOR PROVIDER REIMBURSEMENT.

32 Lead agencies must assure that providers of all CADI
33 services are qualified under parts 9505.0170 to 9505.0475 and
34 9505.3010 to 9505.3140 to provide the necessary service. In
35 addition, a provider shall receive reimbursement for CADI

1 services only if the provider meets the criteria in items A to D.

2 A. The provider must have current Minnesota
3 certification or licensure for the specific CADI service if
4 Minnesota Statutes or Minnesota Rules require certification or
5 licensure.

6 B. The provider must assure that the provider and all
7 employees or subcontractors meet the standards established in
8 the waiver that apply to the services provided or in Minnesota
9 Statutes, chapters 144A, 146, and 148; parts 9505.0170 to
10 9505.0475; and Code of Federal Regulations, title 42, sections
11 440.180 and 440.300 to 440.310.

12 C. The provider must be employed by or have
13 contracted with the lead agency to provide CADI services.

14 D. The provider must be reimbursed only for services
15 authorized by the case manager as part of the recipient's care
16 plan.

17 9505.3120 LEAD AGENCY SELECTION OF CADI PROVIDERS.

18 Subpart 1. **Solicitation of providers.** The lead agency
19 must solicit providers for all CADI services. The solicitation
20 may be by written notice, a request for proposal, or as part of
21 the annual public meeting required by Minnesota Statutes,
22 section 256B.091, subpart 8, and part 9505.2460, subpart 1. If
23 the lead agency chooses to use a written notice, the lead agency
24 must place the notice in the newspaper that is the official
25 newspaper designated by the county board of commissioners of the
26 local agency under Minnesota Statutes, section 279.08. The
27 notice must state the type of services for which a need is
28 anticipated, the criteria in subpart 2 for selection as a CADI
29 provider, the date by which the lead agency will complete its
30 selection of CADI providers, and the name, telephone number, and
31 address of the lead agency's contact person who can provide
32 information about the criteria for selection and contract terms.

33 Subp. 2. **Selection factors.** The lead agency must contract
34 with all providers that meet the standards to provide CADI
35 services under parts 9505.3010 to 9505.3140. The lead agency

1 must consider items A to G:

2 A. the need for the particular service offered by the
3 provider;

4 B. the ability of the provider to meet the service
5 needs of CADI recipients in the county;

6 C. the geographic area to be served by the provider;

7 D. the quality assurance methods to be used by the
8 provider including compliance with required licensure,
9 certifications, or standards and supervision of employees as
10 required by parts 9505.3090 to 9505.3120;

11 E. the provider's agreement to provide the CADI
12 service at a fee that is at or less than the county's maximum
13 reimbursement rate for the service;

14 F. services previously or currently delivered by the
15 provider; and

16 G. the provider's previous compliance with contract
17 provisions and the provider's future ability to comply with
18 contract provisions including billing requirements, and terms
19 related to contract cancellation and indemnification.

20 Subp. 3. **Written record of reason for not selecting a**
21 **provider.** A lead agency must keep a written record of the
22 reason a provider who requests a contract to provide CADI
23 services was not selected and must notify the provider of the
24 reason.

25 9505.3125 CONTRACTS FOR CADI SERVICES.

26 Subpart 1. **Contract required.** To receive reimbursement
27 for CADI services, the provider must be employed by or have a
28 contract with the lead agency.

29 Subp. 2. **Compliance with applicable laws and regulations**
30 **required.** The lead agency must have a medical assistance
31 provider agreement according to part 9505.0195. The lead agency
32 and any provider of services under parts 9505.3010 to 9505.3140
33 that is employed by or under contract to the lead agency must
34 comply with Code of Federal Regulations, title 42; Minnesota
35 Statutes, chapter 256B; and all applicable department rules

1 relating to medical assistance providers.

2 Subp. 3. Information required in contract. The contract
3 must contain:

4 A. the estimated number of CADI recipients to be
5 served by the provider;

6 B. an agreement to comply with parts 9505.3010 to
7 9505.3140;

8 C. an agreement to comply with the Minnesota
9 Government Data Practices Act;

10 D. the beginning and ending dates for the term of the
11 contract;

12 E. an agreement to comply with the care plan as set
13 forth by the case manager;

14 F. the amount that the lead agency shall pay the
15 provider for the services;

16 G. the conditions under which the lead agency shall
17 terminate the provider's contract;

18 H. documentation of an individual abuse prevention
19 plan that complies with parts 9555.8000 to 9555.8500 in the case
20 of adults or with parts 9560.0210 to 9560.0234 in the case of
21 children;

22 I. a description of the reports the provider must
23 give the lead agency;

24 J. a description of the records the provider must
25 keep; and

26 K. other provisions the county board determines are
27 needed to ensure the county's ability to comply with part
28 9525.1900.

29 Subp. 4. Subcontracts. If the provider subcontracts with
30 another contractor the provider must:

31 A. have written permission from the lead agency to
32 subcontract;

33 B. ensure that the subcontractor meets all the
34 requirements of subparts 2 and 3 in the same manner as those
35 requirements apply to all providers; and

36 C. ensure that the subcontractor performs fully the

1 terms of the subcontract.

2 Subp. 5. **Noncompliance.** If the provider or subcontractor
3 fails to comply with the contract, the lead agency must notify
4 the local agency and request the county board to take
5 appropriate action. Upon receiving the request, the county
6 board shall seek any available legal remedy. The county board
7 shall notify the commissioner in writing within 30 days of
8 receiving information that provides the county board with
9 reasonable grounds to believe that a contract required under
10 this part has been breached in a material manner or that a
11 provider or subcontractor has taken any action or failed to take
12 any action that constitutes anticipatory breach of the
13 contract. The county board may allow the provider or
14 subcontractor a reasonable amount of time to cure the breach or
15 anticipatory breach. The county board shall notify the
16 commissioner in writing within ten working days if the provider
17 or subcontractor takes any action or fails to take any action in
18 response to the opportunity to cure. In the notice, the county
19 board shall inform the commissioner of the action the county
20 board intends to take.

21 9505.3130 AGENCY REPORTS AND RECORDS.

22 Subpart 1. **County plans.** The lead agency must submit an
23 annual county plan for CADI services on forms provided by the
24 commissioner. The lead agency must submit the county plan to
25 the commissioner by August 1 of each year for the lead agency to
26 receive reimbursement for CADI services during the next waiver
27 year. The lead agency must submit revisions of the county plan
28 to the commissioner for approval before implementing the
29 revisions. The submitted plan or a revision of a plan must be
30 signed by the person authorized by the county board. The county
31 plan must include items A to J:

32 A. name and address of the lead agency;

33 B. name, address, and telephone number of the
34 administrative contact within the lead agency;

35 C. a description of how the agency will make sure

1 that the actual cost of services per individual per waiver year
2 will not exceed the limits specified in part 9505.3040;

3 D. criteria and method used to notify and select
4 providers;

5 E. proof that all services covered by the waiver will
6 be available in the community;

7 F. a description of how the agency will make sure
8 that CADI clients are applicants for admission to, or residents
9 of, nursing homes;

10 G. a description of how the agency will make sure
11 that clients are given a choice of institutional or community
12 care according to part 9505.3025, subpart 3;

13 H. a description of how the agency will make sure
14 that the safety and health of clients served by the waiver will
15 be protected;

16 I. a description of how the agency will comply with
17 the Minnesota Government Data Practices Act; and

18 J. a description of how the local agency will comply
19 with subpart 4 in regard to provider records.

20 **Subp. 2. Resubmission of conditional approvals or**
21 **rejections.** If a county plan is conditionally approved or
22 rejected, the revised plan must be submitted within 30 days or
23 reimbursement for CADI services will be suspended until the plan
24 is fully approved. However, the county must continue to pay for
25 CADI services using county funds until a county plan has been
26 approved.

27 **Subp. 3. Provider agreements.** A county participating in
28 the CADI program must designate a lead agency and must submit an
29 enrollment form and a signed provider agreement that enrolls the
30 lead agency as a CADI provider eligible to receive medical
31 assistance payment for CADI services. The enrollment and signed
32 provider agreements must be on forms provided by the
33 commissioner.

34 **Subp. 4. CADI provider records.** The lead agency and a
35 CADI provider under contract with the lead agency must maintain
36 complete program and fiscal records and supporting documentation

1 identifying the CADI recipients served, the services provided,
2 and the costs incurred. The records must be identified and
3 maintained separately from other provider records. The lead
4 agency's and the providers' records are subject to the
5 maintenance schedule, audit availability requirements, and other
6 provisions in parts 9505.1750 to 9505.2150.

7 9505.3135 RATES FOR CADI SERVICES.

8 Subpart 1. **Notices to lead agencies.** By June 1 of each
9 year, the commissioner shall notify a lead agency of the
10 statewide maximum rate allowed for reimbursement of a CADI
11 service under subpart 2.

12 Subp. 2. **Maximum CADI service rate.** The commissioner
13 shall annually set the maximum rate available to a county to
14 reimburse a provider for a CADI service other than a case
15 management service. The rates for CADI services other than a
16 case management service shall be adjusted for each waiver year
17 based on medical assistance rates for equivalent services. For
18 services that do not have a medical assistance payment rate
19 under part 9505.0445, for years beginning on July 1 following
20 the effective date of parts 9505.3010 to 9505.3140, the
21 commissioner shall authorize an adjustment in the CADI rate
22 (available to a county as reimbursement to a CADI provider) up
23 to the percentage change forecast in the first quarter of the
24 calendar year by the Home Health Agency Market Basket of
25 Operating Costs, Health Care Costs. The Home Health Agency
26 Market Basket of Operating Costs, Health Care Costs is published
27 by Data Resources, Inc. McGraw-Hill and is subject to quarterly
28 updating. The Home Health Agency Market Basket of Operating
29 Costs, Health Care Costs, is incorporated by reference and is
30 available for inspection at the department, Division of Reports
31 and Statistics, Third Floor, 444 Lafayette Road, St. Paul,
32 Minnesota 55101 and through the Minitex interlibrary loan system.

33 Subp. 3. **County CADI service rate.** A county may set rates
34 for CADI services not to exceed the rates established in subpart
35 1. County rates are subject to audit by the commissioner.

1 Administrative costs are part of the case management rate and
2 are to be included in the case management rate and not added to
3 the county rate for other services.

4 Subp. 4. **Supervision costs.** The cost of supervision for
5 all services except extended personal care must be included in
6 the rate unless payment for the supervision is included in the
7 rate for skilled nursing services. Supervision of personal care
8 services shall be paid according to the rate specified in part
9 9505.0445, item K, for private duty nursing performed as a
10 supervisory visit by a private duty nurse.

11 Subp. 5. **Recovery of costs.** The county of service must
12 monitor use and costs of CADI services. According to part
13 9505.0195, subpart 6, the county of service must pay the
14 commissioner the amount by which the costs exceed the limits
15 specified in part 9505.3040.

16 9505.3138 CRITERION FOR DELAY IN SENDING REQUIRED NOTICES.

17 If information that the commissioner needs to prepare and
18 send the notices required under parts 9505.3010 to 9505.3140 is
19 not provided in time for the commissioner to meet the time
20 specified in parts 9505.3010 to 9505.3140, the required notices
21 shall be sent as soon as possible after the commissioner
22 receives the needed information.

23 9505.3139 BILLING FOR CADI SERVICES.

24 A provider of CADI services must submit a claim to the lead
25 agency through the CADI recipient's case manager for payment for
26 a CADI service specified in a CADI recipient's care plan. A
27 claim under this part must not exceed the amount specified in
28 the contract between the CADI provider and the lead agency that
29 is required under part 9505.3125. The CADI provider must submit
30 the claim for payment according to the billing procedures in
31 part 9505.0450, however, the claim shall not be submitted
32 directly to the department.

33 9505.3140 APPEALS.

34 Subpart 1. **Notice of right to appeal.** A person assessed

1 or reassessed under part 9505.3060 has the right to appeal
2 action described in subpart 2. The case manager must provide
3 the person or the person's representative with written
4 information about the right to appeal. The information must
5 state the grounds for an appealable action and must state that
6 CADI services will not be reduced, suspended, or terminated if
7 the appeal is filed before the date specified in the information
8 unless the person requests in writing not to receive CADI
9 services while the appeal is pending.

10 Subp. 2. **Appealable actions.** A person being assessed or
11 reassessed under part 9505.3060, may appeal if the following
12 actions are taken by the agency:

- 13 A. CADI services are denied;
14 B. eligibility for CADI services is not determined
15 with reasonable promptness; and
16 C. CADI services are reduced, suspended, or
17 terminated.

18 Subp. 3. **Actions that are not appealable.** A denial,
19 reduction, suspension, or termination of CADI services is not an
20 appealable action if the following conditions apply:

- 21 A. the person is a nursing home resident but the cost
22 of home care would exceed the cost of nursing home care;
23 B. the person is an applicant for admission to a
24 nursing home but the costs of the CADI services exceed the limit
25 in part 9505.3040;
26 C. there are no slots available for CADI services; or
27 D. the waiver is terminated.

28 Subp. 4. **Submission of appeals.** The person being assessed
29 or reassessed who wants to appeal must submit the appeal in
30 writing to the lead agency of the county of service or to the
31 department within 30 days after receiving written notice of the
32 appealable action, or within 90 days of the written notice if a
33 good cause for delay can be shown.

34 Subp. 5. **Hearing of appeal.** An appeal of issues meeting
35 the criteria under subparts 1, 2, and 4 shall be heard and
36 decided according to Minnesota Statutes, section 256.045.