

1 Department of Human Services

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3 Adopted Permanent Rules Relating to Case Management Services for  
4 Children with Severe Emotional Disturbance and Adults with  
5 Serious and Persistent Mental Illness

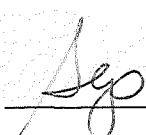
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7 Rules as Adopted

8 9520.0900 SCOPE AND AVAILABILITY.

9 Subpart 1. **Scope.** Parts 9520.0900 to 9520.0926 establish  
10 standards and procedures for providing case management services  
11 to children with severe emotional disturbance as authorized by  
12 Minnesota Statutes, sections 245.487 to 245.4888 and 256B.0625,  
13 subdivision 20, and to adults with serious and persistent mental  
14 illness as authorized by Minnesota Statutes, sections 245.461 to  
15 245.486. Parts 9520.0900 to 9520.0926 are intended to comply  
16 with, and must be read in conjunction with, Minnesota Statutes,  
17 sections 245.461 to 245.4888, 256E.09, and chapter 256G.

18 Subp. 2. **Availability; general.** The county board shall  
19 make case management services available to all children with  
20 severe emotional disturbance and their families who are  
21 residents of the county and who request or consent to the  
22 services under Minnesota Statutes, section 245.4881, and within  
23 the limits in Minnesota Statutes, sections 245.486 and 256E.081,  
24 and parts 9520.0900 to 9520.0926, and to all adults with serious  
25 and persistent mental illness who are residents of the county  
26 and who request or consent to services under Minnesota Statutes,  
27 section 245.4711. In making case management services available  
28 to children with severe emotional disturbance, a local agency  
29 shall use grants to counties for services to children with  
30 severe emotional disturbance, funds made available to counties  
31 for community social services under Minnesota Statutes, sections  
32 256E.06 and 256E.12, allocations from title XX of the Social  
33 Security Act under Minnesota Statutes, section 256E.07, and all  
34 other commonly available state and federal funding sources. In  
35 making case management services available to adults with serious



1 and persistent mental illness, the local agency shall use grants  
2 to counties for services to adults with serious and persistent  
3 mental illness under Minnesota Statutes, section 256E.12, funds  
4 made available to counties for community social services under  
5 Minnesota Statutes, sections 256E.06 and 256E.12, and  
6 allocations from title XX under Minnesota Statutes, section  
7 256E.07, and all other available state and federal funding  
8 sources.

9 Case management services to children with severe emotional  
10 disturbance must be billed as required under Minnesota Statutes,  
11 section 245.4881, subdivision 1, paragraph (b). Case management  
12 services to medical assistance eligible adults with serious and  
13 persistent mental illness must be billed as required under  
14 Minnesota Statutes, section 245.4711, subdivision 1, paragraph  
15 (b).

16 9520.0902 DEFINITIONS.

17 Subpart 1. **Scope.** The terms used in parts 9520.0900 to  
18 9520.0926 have the meanings given them in this part.

19 Subp. 2. **Adult.** "Adult" means a person at least 18 years  
20 of age.

21 Subp. 3. **Case manager.** "Case manager" means an individual  
22 who is employed by the local agency or an entity that is under  
23 contract to the local agency to provide case management services  
24 under parts 9520.0900 to 9520.0926 and who, if providing case  
25 management services to a child with a severe emotional  
26 disturbance, meets the qualifications specified in Minnesota  
27 Statutes, section 245.4871, subdivision 4, or who, if providing  
28 case management services to an adult with serious and persistent  
29 mental illness, meets the qualifications specified in Minnesota  
30 Statutes, section 245.462, subdivision 4.

31 Subp. 4. **Case management provider.** "Case management  
32 provider" means a local agency that provides case management  
33 services or an entity that is under contract with the local  
34 agency to provide case management services.

35 Subp. 5. **Case management services.** "Case management

1 services," for a child with severe emotional disturbance, has  
2 the meaning given in Minnesota Statutes, section 245.4871,  
3 subdivision 3. For an adult with serious and persistent mental  
4 illness, case management services has the meaning given in  
5 Minnesota Statutes, section 245.462, subdivision 3. Case  
6 management services are services designed to achieve the  
7 outcomes specified in parts 9520.0904 for children, and  
8 9520.0905 for adults.

9 Subp. 6. **Case management team.** "Case management team"  
10 means a group of persons that:

11 A. For a child, consists of the child, the child's  
12 parent or foster parent, or other significant adult with whom  
13 the child is living, the child's legal representative, if any,  
14 and the child's case manager. Other persons or service  
15 providers requested by the child's parent or legal  
16 representative and the child to participate in making decisions  
17 about the child's services or to advocate on behalf of the child  
18 may be members of the case management team.

19 B. For an adult, consists of the adult, the adult's  
20 case manager, and representatives of other agencies contracted  
21 by the county to provide case management services to the adult.

22 Subp. 7. **Child.** "Child" means a person under 18 years of  
23 age.

24 Subp. 8. **Child with severe emotional disturbance.** "Child  
25 with severe emotional disturbance" has the meaning given in  
26 Minnesota Statutes, section 245.4871, subdivision 6.

27 Subp. 9. **Client.** "Client" means a child or an adult who  
28 has been determined eligible for case management services  
29 according to part 9520.0910, subpart 1.

30 Subp. 10. **Clinical supervision.** "Clinical supervision"  
31 has the meaning given in Minnesota Statutes, section 245.4871,  
32 subdivision 7, for a child with a severe emotional disturbance  
33 and in Minnesota Statutes, section 245.462, subdivision 4a, for  
34 an adult with serious and persistent mental illness.

35 Subp. 11. **Commissioner.** "Commissioner" means the  
36 commissioner of human services or the commissioner's designee.

1       Subp. 12. **Community support services program.** "Community  
2 support services program" means the program of services  
3 specified in Minnesota Statutes, section 245.462, subdivision 6,  
4 and, in addition, day treatment services as specified in  
5 Minnesota Statutes, section 245.4712, subdivision 2.

6       Subp. 13. **County board.** "County board" means the county  
7 board of commissioners or a board established under Minnesota  
8 Statutes, sections 471.59, or 402.01 to 402.10.

9       Subp. 14. **County of financial responsibility.** "County of  
10 financial responsibility" has the meaning given in Minnesota  
11 Statutes, section 256G.02, subdivision 4.

12       Subp. 15. **Day treatment services or day treatment  
13 program.** "Day treatment services" or "day treatment program"  
14 has the meaning given in Minnesota Statutes, section 245.4871,  
15 subdivision 10, for a child with severe emotional disturbance  
16 and in Minnesota Statutes, section 245.462, subdivision 8, for  
17 an adult with serious and persistent mental illness.

18       Subp. 16. **Diagnostic assessment.** "Diagnostic assessment"  
19 has the meaning given in Minnesota Statutes, section 245.4871,  
20 subdivision 11, for a child and in Minnesota Statutes, section  
21 245.462, subdivision 9, for an adult.

22       Subp. 17. **Emergency services.** "Emergency services" has  
23 the meaning given in Minnesota Statutes, section 245.4871,  
24 subdivision 14, for a child with severe emotional disturbance  
25 and in Minnesota Statutes, section 245.462, subdivision 11, for  
26 an adult with serious and persistent mental illness.

27       Subp. 18. **Emotional disturbance.** "Emotional disturbance"  
28 has the meaning given in Minnesota Statutes, section 245.4871,  
29 subdivision 15, as applied to a child.

30       Subp. 19. **Family.** "Family" has the meaning given in  
31 Minnesota Statutes, section 245.4871, subdivision 16, or, for an  
32 Indian child, means a relationship recognized by the Minnesota  
33 Indian family preservation act, Minnesota Statutes, sections  
34 257.35 to 257.3579.

35       Subp. 20. **Family community support services.** "Family  
36 community support services" has the meaning given in Minnesota

1 Statutes, section 245.4871, subdivision 17.

2 Subp. 21. **Functional assessment.** "Functional assessment"  
3 has the meaning given in Minnesota Statutes, section 245.4871,  
4 subdivision 18, for a child and in Minnesota Statutes, section  
5 245.462, subdivision 11a, for an adult.

6 Subp. 22. **Individual community support plan.** "Individual  
7 community support plan" has the meaning given in Minnesota  
8 Statutes, section 245.462, subdivision 12.

9 Subp. 23. **Individual family community support plan.**  
10 "Individual family community support plan" has the meaning given  
11 in Minnesota Statutes, section 245.4871, subdivision 19.

12 Subp. 24. **Individual treatment plan.** "Individual  
13 treatment plan" has the meaning given in Minnesota Statutes,  
14 section 245.4871, subdivision 21, for a child with an emotional  
15 disturbance and in Minnesota Statutes, section 245.462,  
16 subdivision 14, for an adult with mental illness.

17 Subp. 25. **Inpatient hospital.** "Inpatient hospital" means  
18 an acute care institution as defined in Minnesota Statutes,  
19 section 144.696, subdivision 3, and licensed under Minnesota  
20 Statutes, sections 144.50 to 144.58.

21 Subp. 26. **Legal representative.** "Legal representative"  
22 means a guardian appointed by the court to decide on services  
23 for a child as specified in Minnesota Statutes, section 525.619,  
24 a guardian as specified in Minnesota Statutes, section 260.242,  
25 subdivision 2, a custodian as specified in Minnesota Statutes,  
26 section 260.015, subdivision 14, or an Indian custodian as  
27 defined in Minnesota Statutes, section 257.351, subdivision 8.

28 Subp. 27. **Local agency.** "Local agency" means the county  
29 agency under the authority of the county board that is  
30 responsible for arranging and providing mental health services  
31 required under Minnesota Statutes, sections 245.461 to 245.4888,  
32 as a component of community social services under Minnesota  
33 Statutes, chapter 256E.

34 Subp. 28. **Mental health practitioner.** "Mental health  
35 practitioner" has the meaning given in Minnesota Statutes,  
36 section 245.4871, subdivision 26, for mental health services to

1 a child and in Minnesota Statutes, section 245.462, subdivision  
2 17, for mental health services to an adult.

3 Subp. 29. **Mental health professional.** "Mental health  
4 professional" has the meaning given in Minnesota Statutes,  
5 section 245.4871, subdivision 27, and also, except for clinical  
6 supervision purposes, a person qualified as specified in part  
7 9505.0323, subpart 31, for mental health services to a child and  
8 in Minnesota Statutes, section 245.462, subdivision 18, for  
9 mental health services to an adult.

10 Subp. 30. **Mental health services.** "Mental health  
11 services" for a child means at least all of the treatment  
12 services and case management activities that are provided to  
13 children with emotional disturbances and specified in Minnesota  
14 Statutes, sections 245.487 to 245.4887 and for an adult with  
15 mental illness means the services provided to persons with  
16 mental illness as specified in Minnesota Statutes, section  
17 245.466, subdivision 2.

18 Subp. 31. **Mental illness.** "Mental illness" has the  
19 meaning given in Minnesota Statutes, section 245.462,  
20 subdivision 20.

21 Subp. 32. **Minority race or minority ethnic heritage.**  
22 "Minority race" or "minority ethnic heritage" has the meaning  
23 given in part 9560.0020, subpart 9a.

24 Subp. 33. **Outpatient services.** "Outpatient services" has  
25 the meaning given in Minnesota Statutes, section 245.4871,  
26 subdivision 29, for a child with emotional disturbance and in  
27 Minnesota Statutes, section 246.462, subdivision 21, for an  
28 adult with mental illness.

29 Subp. 34. **Parent.** "Parent" means the birth or adoptive  
30 mother or father of a child. This definition does not apply to  
31 a person whose parental rights in relation to the child have  
32 been terminated by a court.

33 Subp. 35. **Professional home-based family treatment.**  
34 "Professional home-based family treatment" has the meaning given  
35 in Minnesota Statutes, section 245.4871, subdivision 31.

36 Subp. 36. **Residential treatment.** "Residential treatment"

1 has the meaning given in Minnesota Statutes, section 245.4871,  
2 subdivision 32, for residential treatment of a child with  
3 emotional disturbance and in Minnesota Statutes, section  
4 245.462, subdivision 23, for an adult with serious and  
5 persistent mental illness.

6 Subp. 37. **Screening.** "Screening" refers to the screening  
7 required under Minnesota Statutes, section 245.4885, subdivision  
8 1.

9 Subp. 38. **Serious and persistent mental illness.** "Serious  
10 and persistent mental illness" has the meaning given in  
11 Minnesota Statutes, section 245.462, subdivision 20, paragraph  
12 (c), clauses (1) to (4).

13 Subp. 39. **Service provider.** "Service provider" has the  
14 meaning given in Minnesota Statutes, section 245.4871,  
15 subdivision 33, for a child with emotional disturbance and in  
16 Minnesota Statutes, section 245.462, subdivision 24, for mental  
17 health services for an adult with mental illness.

18 Subp. 40. **Special mental health consultant.** "Special  
19 mental health consultant" has the meaning given in Minnesota  
20 Statutes, section 245.4871, subdivision 33a.

21 Subp. 41. **Team coordinator.** "Team coordinator" means a  
22 person selected by the child's parent or legal representative  
23 or ~~as appropriate,~~ the child as provided in part 9520.0916,  
24 subpart 2.

25 Subp. 42. **Therapeutic support of foster care.**  
26 "Therapeutic support of foster care" has the meaning given in  
27 Minnesota Statutes, section 245.4871, subdivision 34.

28 Subp. 43. **Updating.** "Updating" has the meaning given in  
29 Minnesota Statutes, section 245.4876, subdivision 2, for mental  
30 health services to a child and in Minnesota Statutes, section  
31 245.467, subdivision 2, for mental health services to an adult.

32 9520.0903 COUNTY BOARD RESPONSIBILITIES.

33 Subpart 1. **Responsibilities for case management services.**  
34 A county board shall assure that:

35 A. case management services coordinate the delivery



1 of the child's mental health services on behalf of the child and  
2 the child's family across the local system of care and  
3 coordinate the delivery of the adult's mental health services;

4 B. case management services are delivered in a manner  
5 that integrates and coordinates mental health case management  
6 services with the services of other agencies serving the child  
7 and the child's family or the adult;

8 C. special mental health consultants are used as  
9 necessary in assessing the needs of a child of minority race or  
10 minority ethnic heritage;

11 D. case management services are not denied to  
12 children with severe emotional disturbance or to adults with  
13 serious and persistent mental illness unless the county board  
14 demonstrates compliance with Minnesota Statutes, section  
15 256E.081, subdivisions 2 and 3, and completes the documentation  
16 required under Minnesota Statutes, section 256E.081, subdivision  
17 4;

18 E. the caseload assigned to a case manager providing  
19 case management services to children with severe emotional  
20 disturbance or to adults with serious and persistent mental  
21 illness complies with the requirement of subpart 2; and

22 F. the meetings, actions, and procedures related to  
23 case management services to children with severe emotional  
24 disturbance and to adults with serious and persistent mental  
25 illness comply with the requirements of parts 9520.0900 to  
26 9520.0926.

27 Subp. 2. Limit on size of case manager's caseload. A case  
28 manager's caseload must be of a size that enables the case  
29 manager to attend to the outcomes specified for case management  
30 services to a child as specified in part 9520.0904 or to the  
31 outcomes specified for case management services to an adult as  
32 specified in part 9520.0905. Except under the circumstances  
33 specified in this subpart, the average caseload of a case  
34 manager providing case management services shall not exceed the  
35 limits in item A or B.

36 A. From the effective date of parts 9520.0900 to



1 9520.0926 to December 31, 1993, the average caseload of a case  
2 manager providing case management services to children with  
3 severe emotional disturbance or providing case management  
4 services to adults with serious and persistent mental illness  
5 must not exceed the ratio of 40 clients to one full-time  
6 equivalent case manager.

7 B. Beginning January 1, 1994, the average caseload of  
8 a case manager providing case management services to children  
9 with severe emotional disturbance shall not exceed the ratio of  
10 15 clients to one full-time equivalent case manager and the  
11 average caseload of a case manager providing case management  
12 services to adults with serious and persistent mental illness  
13 shall not exceed the ratio of 30 clients to one full-time  
14 equivalent case manager.

15 A county that has an average case manager caseload in  
16 excess of the limit in item A or B on the effective date of  
17 parts 9520.0900 to 9520.0926 may continue to exceed the ratio  
18 required under item A or B but only to the extent that the  
19 increased revenue is insufficient to hire additional case  
20 managers needed to meet the ratio required under item A or B.

21 Subp. 3. Definitions. For purposes of subpart 2:

22 A. "increased revenue" means revenue received from a  
23 source other than county funds by the county and its contracted  
24 providers for case management services provided under parts  
25 9520.0900 to 9520.0926 during calendar year ~~1992~~ 1993 or the  
26 applicable calendar year thereafter which exceeds the revenue  
27 received from these sources for case management services  
28 provided under parts 9505.0476 to 9505.0490 during calendar year  
29 ~~1990~~ 1992;

30 B. "source other than county funds" means funds  
31 received through medical assistance, general assistance medical  
32 care for persons who would be eligible for medical assistance  
33 except that the person resides in an institution for mental  
34 diseases, state grants dedicated to case management services,  
35 and third-party payers; and

36 C. "county funds" means funds available to a county

1 through county levies, block grants under Minnesota Statutes,  
2 section 256E.06, federal block grants under Minnesota Statutes,  
3 section 256E.07, and state shared revenue funds; and

4 D. "additional case managers" means an increase in  
5 the case management staff in comparison to the staff employed in  
6 December 1992. If a county demonstrates case management staff  
7 were hired with county funds before December 1992 in  
8 anticipation of increased revenue as defined in item A, the  
9 commissioner shall consider those case management staff as  
10 additional case managers.

11 9520.0904 OUTCOMES OF CASE MANAGEMENT SERVICES TO CHILDREN WITH  
12 SEVERE EMOTIONAL DISTURBANCE.

13 The case manager assigned by the local agency to provide  
14 case management services to children with severe emotional  
15 disturbance shall work with the case management team using a  
16 process that is designed to assist the child with severe  
17 emotional disturbance in pursuing the outcome of improved or  
18 maintained mental health and functioning and to achieve the  
19 outcomes in items A to G:

20 A. child-centered, family-focused, community-based  
21 services. For purposes of this item:

22 (1) "child centered" means the child's services  
23 are based on and adapted to the individual strengths and needs  
24 of the child and the child's family;

25 (2) "family-focused" means the services are  
26 provided in a manner that maximizes the opportunity for the  
27 involvement of the child and the child's family in the planning  
28 and delivery of the child's case management and family community  
29 support services; and

30 (3) "community-based" means that, except in  
31 circumstances that require case management services in an  
32 institutional setting in accordance with Minnesota Statutes,  
33 sections 245.4882, subdivision 3, and 245.4883, subdivision 1,  
34 the case management services are to be provided in the least  
35 restrictive setting available or provided in the client's

1 residence or school or educational program operated by a local  
2 education agency, a relative's home, a recreational or leisure  
3 setting, or other community setting appropriate to the child;

4 B. appropriate services that are culturally  
5 sensitive;

6 C. information provided to the child's parent or  
7 legal representative ~~or, as appropriate,~~ and the child as  
8 described in part 9520.0907 about eligibility for and frequency  
9 of case management services, the benefits of case management  
10 services and family community support services, potential cost  
11 of the services to the child and the child's parent, and the  
12 services available to achieve the overall outcome of case  
13 management and the other outcomes specified in the child's  
14 individual family community support plan;

15 D. assistance to the child and the child's family in  
16 obtaining the mental health and other services that are needed  
17 to achieve the outcomes specified in the child's individual  
18 family community support plan;

19 E. coordinated services to the child in a manner that  
20 simplifies access to the services, brings together similar  
21 services in a manner that eliminates duplicate services, and  
22 assures continuity of needed services;

23 F. compliance with and, as described in part  
24 9520.0907, information to the child and the child's parent or  
25 legal representative about the Minnesota Government Data  
26 Practices Act under Minnesota Statutes, chapter 13, and  
27 information about the Patients and Residents of Health Care  
28 Facilities Bill of Rights, Minnesota Statutes, section 144.651,  
29 subdivisions 1, 3 to 16, 18, 20, and 30, and the fair hearing  
30 procedure under Minnesota Statutes, section 256.045; and

31 G. an individual family community support plan for  
32 the child according to Minnesota Statutes, sections 245.4871,  
33 subdivision 19, and 245.4881, subdivision 4, that specifies  
34 outcomes to be achieved based on the child's diagnostic and  
35 functional assessments and how progress toward achieving the  
36 outcomes will be monitored.

1 9520.0905 OUTCOMES OF CASE MANAGEMENT SERVICES TO ADULTS WITH  
2 SERIOUS AND PERSISTENT MENTAL ILLNESS.

3 The case manager assigned by the local agency to provide  
4 case management services to an adult with serious and persistent  
5 mental illness shall work together with the adult with serious  
6 and persistent mental illness using a process that is designed  
7 to assist the adult with serious and persistent mental illness  
8 in pursuing the outcome of improved or maintained mental health  
9 and functioning and to achieve the outcomes in items A to H:

10 A. client-centered, community-based services. For  
11 purposes of this item:

12 (1) "client-centered" means that the adult's  
13 services are based on and adapted to the individual's strengths,  
14 goals, and needs and that the plan of services is developed with  
15 the involvement of the client; and

16 (2) "community-based" means that, except in  
17 circumstances that require case management services in an  
18 institutional setting in accordance with Minnesota Statutes,  
19 sections 245.472, subdivision 3, and 245.474, subdivision 3, the  
20 case management services are to be provided in the least  
21 restrictive setting and promote integration of the adult into  
22 the adult's community;

23 B. the involvement of members of the adult's family  
24 or other persons significant to the adult as authorized by the  
25 adult;

26 C. appropriate services that are culturally  
27 sensitive;

28 D. information provided to the adult about  
29 eligibility for and frequency of case management services, the  
30 benefits of case management and community support  
31 services, potential cost of the services to the adult, and the  
32 full array of services available to achieve the overall outcome  
33 of case management and the other outcomes specified in the  
34 adult's individual community support plan;

35 E. assistance to the adult in obtaining the mental

1 health and other services that are needed to achieve the  
2 outcomes specified in the adult's individual community support  
3 plan;

4 F. coordinated services to the adult in a manner that  
5 simplifies access to the services, brings together similar  
6 services in a manner that eliminates duplicate services, and  
7 assures continuity of needed services;

8 G. compliance with and information to the adult about  
9 the Minnesota Government Data Practices Act under Minnesota  
10 Statutes, chapter 13, and information about the Patients and  
11 Residents of Health Care Facilities Bill of Rights under  
12 Minnesota Statutes, section 144.651, subdivisions 1, 3 to 16,  
13 18, 20, and 30, and the fair hearing procedure under Minnesota  
14 Statutes, section 256.045;

15 H. an individual community support plan for the adult  
16 according to Minnesota Statutes, section 245.4711, subdivision  
17 4, that specifies outcomes to be achieved based on the adult's  
18 diagnostic and functional assessments, the goals identified by  
19 the adult, the activities for accomplishing each goal, and how  
20 progress toward achieving the outcomes will be monitored.

21 9520.0906 LOCAL AGENCY RESPONSIBILITIES; NOTICE AFTER REQUEST OR  
22 REFERRAL FOR SERVICES.

23 Subpart 1. Notice following request or referral for  
24 services. As required under Minnesota Statutes, section  
25 245.4881, subdivision 2, in response to a request or a referral  
26 for case management services for a child or as required under  
27 Minnesota Statutes, section 245.4711, subdivision 1, in response  
28 to a request or a referral for case management services for an  
29 adult, the local agency must notify within five working days  
30 after receiving the request or referral, the child's parents or  
31 child's legal representative ~~or, as appropriate,~~ and the child  
32 or the adult of the individual's potential eligibility for case  
33 management services. The notice must be written in plain  
34 language and explain the individual's potential eligibility for  
35 case management services and, in the case of a child, for family

1 community support services or in the case of an adult, for  
 2 community support services. The contents of the notice shall  
 3 comply with Minnesota Statutes, section 245.4881, subdivision 2,  
 4 paragraph (b), in the case of a child with emotional disturbance  
 5 or with Minnesota Statutes, section 245.4711, subdivision 2,  
 6 paragraph (a), in the case of an adult with mental illness. A  
 7 notice responding to a request or referral for services to a  
 8 child also must state that the person to whom the notice is  
 9 addressed may request county assistance in contacting a special  
 10 mental health consultant to assist in assessing and providing  
 11 appropriate treatment to a child of a minority race or minority  
 12 ethnic heritage.

13 Subp. 2. Notice when there is no known address. If the  
 14 local agency does not receive the address of the adult or the  
 15 child and the child's parent or legal representative from the  
 16 person referring the adult or the child for case management  
 17 services, the local agency must attempt to locate the adult or  
 18 the child and give the adult or the child's parent or legal  
 19 representative or ~~as appropriate~~, the child the notice  
 20 specified in subpart 1.

21 Subp. 3. Follow-up notice of availability of case  
 22 management services. If the person notified under subpart 1 or  
 23 2 does not respond within 30 calendar days after the local  
 24 agency gives the required notice, the local agency must make a  
 25 reasonable attempt to contact the person to explain the  
 26 potential eligibility of the child or adult for case management  
 27 services.

28 9520.0907 ~~PERSON~~ PERSONS TO RECEIVE NOTICE INFORMATION AND  
 29 ~~AUTHORIZE~~ PLAN CHILD'S CASE MANAGEMENT SERVICES.

30 Subpart 1. Person to receive information and plan child's  
 31 services. Except ~~under the circumstances~~ as specified in this  
 32 ~~part~~ subparts 3 and 4, when case management services are  
 33 requested for a child or the child is referred for case  
 34 management services, the child's parent or legal representative,  
 35 if any, has the right to receive the notices and information

1 specified under parts 9520.0900 to 9520.0926 ~~and to make~~  
 2 ~~decisions-about~~ the decision whether to ~~obtain-a-diagnostic~~  
 3 ~~assessment,-authorize-a-release-of-information,-and~~ accept case  
 4 management services for the child and to be included in planning  
 5 the case management services available to the child under parts  
 6 9520.0900 to 9520.0926.

7 Subp. 2. Child's receipt of information and inclusion in  
 8 planning services. A child who is at least 12 years of age has  
 9 the right to and a child who is less than 12 years of age may  
 10 receive the notices and information specified under parts  
 11 9520.0900 to 9520.0926 and be included in planning the case  
 12 management services available to the child under parts 9520.0900  
 13 to 9520.0926 unless these actions are determined by a mental  
 14 health professional to be clinically inappropriate to the  
 15 child's mental health needs. If the mental health professional  
 16 determines that it is clinically inappropriate to the child's  
 17 mental health needs, the reasons for the determination must be  
 18 documented in the child's case record.

19 Subp. 3. Child only to receive information, plan, and  
 20 decide on child's case management services. If one of the  
 21 circumstances in item A or B applies, the child shall only has  
 22 the right to receive the required notices and, make  
 23 the decisions decision whether to accept case management and  
 24 other mental health services, and authorize-a-release-of  
 25 information be included in planning case management  
 26 services. If-the-circumstance-in-item-B-applies,-the-person-to  
 27 act-for-the-child-is-the-guardian-ad-litem-appointed-by-the  
 28 court.

29 A. The parent or legal representative is hindering or  
 30 impeding the child's access to mental health services ~~or~~ and the  
 31 child is at least 16 years of age.

32 B. The child:

33 (1) has been married or has borne a child as  
 34 specified in Minnesota Statutes, section 144.342;

35 (2) is living separate and apart from the child's  
 36 parents or legal guardian and is managing the child's own



1 financial affairs as specified in Minnesota Statutes, section  
2 144.341;

3 (3) is at least 16, but under 18 years old, and  
4 has consented to treatment as specified in Minnesota Statutes,  
5 section 253B.03, subdivision 6, paragraph (d); or

6 (4) is at least 16, but under 18 years old and  
7 ~~for-whom-a-county-board~~ has been authorized by a county board  
8 for independent living pursuant to a court order as specified in  
9 Minnesota Statutes, section 260.191, subdivision 1, paragraph  
10 (a), clause (4).

11 B- Subp. 4. Petition filed or court order issued. If a  
12 petition has been filed under Minnesota Statutes, chapter 260,  
13 or a court order has been issued under Minnesota Statutes,  
14 section 260.133 or 260.135 and a guardian ad litem ~~has-been~~  
15 appointed and if consent for case management services has not  
16 been otherwise obtained from the child's parent or legal  
17 representative or the child, the local agency may request a  
18 court order under Minnesota Statutes, chapter 260, to authorize  
19 case management services for the child.

20 9520.0908 CONTACT BETWEEN PERSON DESIGNATED BY THE COUNTY BOARD  
21 TO COORDINATE CASE MANAGEMENT SERVICES AND CHILD'S PARENT AND  
22 CHILD OR THE ADULT.

23 Before a determination of the case management service  
24 eligibility of a child or an adult for whom case management  
25 services have been requested, the person designated by the  
26 county board to coordinate case management services shall  
27 attempt to contact the child's parent or legal representative  
28 and the child or the adult no later than 15 working days after  
29 the local agency receives the referral or request under part  
30 9520.0906. In the contact, the person designated by the county  
31 board to coordinate case management services must explain that  
32 access to case management services depends on a determination  
33 that the child has a severe emotional disturbance or the adult  
34 has serious and persistent mental illness and must assist the  
35 child's parent or legal representative ~~or, if appropriate,~~ and

1 the child as described in part 9520.0907 or the adult to make an  
 2 informed choice of whether to obtain the diagnostic assessment  
 3 or the review and updating of a diagnostic assessment required  
 4 under part 9520.0909 in order to make the determination of the  
 5 child's eligibility. In helping the child's parent or legal  
 6 representative ~~or, if appropriate,~~ and the child or the adult  
 7 make an informed choice on whether to obtain a diagnostic  
 8 assessment, the person designated by the county board to  
 9 coordinate case management services must explain that the local  
 10 agency will, if requested, assist in obtaining a diagnostic  
 11 assessment.

12 9520.0909 DETERMINATION OF SERIOUS AND PERSISTENT MENTAL ILLNESS  
 13 OR SEVERE EMOTIONAL DISTURBANCE; ASSISTANCE IN ARRANGING  
 14 DIAGNOSTIC ASSESSMENT.

15 Subpart 1. **General requirement.** Except as specified in  
 16 subpart 2, a diagnostic assessment is required to determine  
 17 whether a child or an adult is eligible for case management  
 18 services under parts 9520.0900 to 9520.0926. If the child's or  
 19 adult's diagnostic assessment was completed no earlier than 180  
 20 days before the referral or request for case management services  
 21 for the child or adult, only updating is necessary unless the  
 22 child's or adult's mental health status has changed markedly  
 23 since the child's or adult's most recent diagnostic assessment.  
 24 If the child or adult has not had a diagnostic assessment within  
 25 180 days before the request or referral for case management  
 26 services for the child or adult or if the child's or adult's  
 27 mental health status has changed markedly, the child or the  
 28 adult must obtain a new diagnostic assessment.

29 Subp. 2. **Eligibility if child or adult does not have a**  
 30 **current diagnostic assessment.** Notwithstanding the requirement  
 31 of subpart 1, a child or an adult is eligible for case  
 32 management services if all of the following criteria are met:

33 A. the person requests or is referred for and accepts  
 34 case management services;

35 B. a diagnostic assessment is refused at the time of

1 the person's referral or request for case management services by:

2 (1) the parent or legal representative of a  
3 child;

4 (2) a child who meets a criterion specified in  
5 part 9520.0907, item A, and whose refusal is for reasons related  
6 to the child's emotional disturbance; or

7 (3) an adult for reasons related to the adult's  
8 mental illness;

9 C. the case manager determines that:

10 (1) the person is a child with severe emotional  
11 disturbance according to Minnesota Statutes, section 245.4871,  
12 subdivision 6, clause (1), (2), or (4); or

13 (2) the person is an adult with serious and  
14 persistent mental illness according to Minnesota Statutes,  
15 section 245.462, subdivision 20, paragraph (c), clause (1), (2),  
16 or (4); and

17 D. the person obtains a new or updated diagnostic  
18 assessment within four months of the day the person first  
19 receives case management services.

20 Subp. 3. Assistance in obtaining diagnostic assessment.

21 If the child's parent or legal representative ~~or, as~~  
22 ~~appropriate,~~ the child as described in part 9520.0907, or the  
23 adult consents to the child's or ~~or~~ adult's assessment for  
24 eligibility for case management services ~~and authorizes a~~  
25 ~~release of information,~~ the local agency must offer, within ten  
26 working days of the consent, to assist the child and the child's  
27 parent or legal representative or the adult in obtaining an  
28 appointment with a mental health professional chosen by the  
29 child's parent or legal representative ~~or, as appropriate,~~ the  
30 child or the adult to conduct a diagnostic assessment. The  
31 local agency must request, in the child's parent or legal  
32 representative or, as appropriate, the case of a child,  
33 authorization as required under Minnesota Statutes, section  
34 245.4876, subdivision 5, paragraph (6), or must request the  
35 authorization of the adult to authorize for the mental health  
36 professional conducting the diagnostic assessment to release the

1 results of the diagnostic assessment to the local agency.

2 Subp. 4. Diagnostic assessment of child of a minority race  
3 or minority ethnic heritage. If a mental health professional  
4 conducts a diagnostic assessment of a child of a minority race  
5 or minority ethnic heritage, the mental health professional also  
6 must be skilled in and knowledgeable about the child's minority  
7 racial and minority ethnic heritage. If the mental health  
8 professional is not skilled and knowledgeable in conducting the  
9 diagnostic assessment of a child of a minority race or minority  
10 ethnic heritage, the mental health professional conducting the  
11 diagnostic assessment must consult a special mental health  
12 consultant to assure that the diagnostic assessment is relevant,  
13 culturally-specific, and sensitive to the child's cultural and  
14 ethnic needs.

15 9520.0910 DETERMINATION OF ELIGIBILITY FOR CASE MANAGEMENT  
16 SERVICES.

17 Subpart 1. Local agency determination. Upon receipt of  
18 the report of the mental health professional conducting or  
19 updating a diagnostic assessment required under part 9520.0908,  
20 the local agency must promptly determine whether the child meets  
21 a criterion in part 9520.0902, subpart 8, or whether the adult  
22 meets a criterion in part 9520.0902, subpart 38.

23 Subp. 2. Notice of determination. The local agency shall  
24 notify, in writing, the child's parent or legal representative  
25 ~~or, as appropriate, and~~ and the child or the adult of the  
26 determination about the child's or the adult's eligibility for  
27 case management services unless case management services have  
28 already been initiated for the child or adult.

29 Subp. 3. Eligible client referred to provider. If the  
30 client is determined to be eligible for case management services  
31 and if ~~the child's parent or legal representative or, as~~  
32 ~~appropriate, the child or if the adult consents to~~ consent for  
33 the services is obtained, the local agency shall refer the  
34 client to a case management provider for case management  
35 services.

1 Subp. 4. Referral of adult with mental illness or child  
2 with emotional disturbance. If the local agency determines the  
3 child to have an emotional disturbance but not to have a severe  
4 emotional disturbance or determines the adult to have a mental  
5 illness but not to have a serious and persistent mental illness,  
6 the local agency shall offer to refer the client to a mental  
7 health provider or other appropriate service provider and to  
8 assist the client to make an appointment with a provider chosen  
9 by the ~~the~~ child's parent or legal representative or ~~as~~  
10 ~~appropriate,~~ the child or by the adult.

11 Subp. 5. Refusal. ~~A-child's~~ The parent or legal  
12 representative of a child or ~~as-appropriate,~~ the child or an  
13 adult who is determined eligible for case management services  
14 may refuse the case management services. However, the refusal  
15 does not affect the client's eligibility to receive case  
16 management services or other mental health services for which  
17 the client is eligible.

18 9520.0912 CASE MANAGER QUALIFICATIONS AND REQUIRED SUPERVISION.

19 Subpart 1. Qualification of case manager; services to a  
20 child. Except as provided in subpart 3, a case manager  
21 providing case management services to a child with severe  
22 emotional disturbance must have a bachelor's degree in one of  
23 the behavioral sciences or related fields from an accredited  
24 college or university and have at least 2,000 hours of  
25 supervised experience in the delivery of mental health services  
26 to children with emotional disturbance, be skilled in  
27 identifying and appraising the child's needs, be skilled in  
28 setting and monitoring appropriate service outcomes, and be  
29 knowledgeable about local community resources and how to use the  
30 resources for the benefit of the child and the child's family.  
31 A person who is from any professional discipline that is part of  
32 the local system of care serving children or who is employed by  
33 or under contract to the local agency is eligible to serve as a  
34 case manager for children with severe emotional disturbance if  
35 the person meets the qualifications of this part.

1           Subp. 2. **Qualification of case manager; services to an**  
2 **adult.** Except as provided in subpart 3, a case manager  
3 providing case management services to an adult with serious and  
4 persistent mental illness must have a bachelor's degree in one  
5 of the behavioral sciences or related fields from an accredited  
6 college or university and have at least 2,000 hours of  
7 supervised experience in the delivery of services to adults with  
8 mental illness, must be skilled in the process of identifying  
9 and assessing a wide range of client needs, must be skilled in  
10 setting and monitoring appropriate service outcomes, and must be  
11 knowledgeable about local community resources and how to use  
12 those resources for the benefit of the adult with serious and  
13 persistent mental illness.

14           Subp. 3. **Case manager; supervision.** Clinical supervision  
15 of a case manager shall be provided as specified in items A to C.  
16 Additionally, if the mental health professional is providing  
17 clinical supervision of a case manager who provides case  
18 management services to children, the mental health professional  
19 must be qualified as specified in Minnesota Statutes, section  
20 245.4871, subdivision 27, and must be skilled and knowledgeable  
21 about children with emotional disturbance. The mental health  
22 professional providing the clinical supervision must document  
23 the clinical supervision in the client's record.

24           A. Clinical supervision is not required for a case  
25 manager who is qualified as a mental health professional.

26           B. Case managers who are not qualified as mental  
27 health professionals under Minnesota Statutes, section 245.4871,  
28 subdivision 27, for services to children with emotional  
29 disturbance or under Minnesota Statutes, section 245.462,  
30 subdivision 18, for services to adults with mental illness, and  
31 who have at least 2,000 hours of supervised experience in the  
32 delivery of mental health services, as appropriate, to children  
33 or adults must meet in person with a mental health professional  
34 at least once each month to obtain clinical supervision.

35           C. Case managers who have a bachelor's degree in one  
36 of the behavioral sciences or a related field from an accredited

1 college or university but who do not have 2,000 hours of  
2 supervised experience in the delivery of mental health services  
3 as appropriate to children with emotional disturbance or adults  
4 with serious and persistent mental illness, must receive  
5 clinical supervision regarding individual service delivery from  
6 a mental health professional at least once each week until the  
7 requirement of 2,000 hours of experience is met.

8       **Subp. 4. Case manager; required training.** A case manager  
9 with a bachelor's degree, who does not have 2,000 hours of  
10 supervised experience in the delivery of services to children  
11 with severe emotional disturbance or to adults with serious and  
12 persistent mental illness must complete 40 hours of training  
13 approved by the department in case management skills as  
14 specified in items A and B.

15           A. If the case manager is providing case management  
16 services to children with severe emotional disturbance, the  
17 training must address the characteristics and needs of children  
18 with severe emotional disturbance.

19           B. If the case manager is providing case management  
20 services to adults with serious and persistent mental illness,  
21 the training must address the characteristics and needs of  
22 adults with serious and persistent mental illness.

23       **Subp. 5. Continued training.** A case manager with 2,000  
24 hours of supervised experience required under subpart 1 or 2  
25 must complete at least 30 hours of training in a two-year  
26 period. The training must be approved by the case management  
27 provider and shall be related to the needs, characteristics, and  
28 services available to the clients in the caseload assigned to  
29 the case manager.

30 9520.0914 CASE MANAGER'S RESPONSIBILITIES.

31       **Subpart 1. General responsibility.** It is the  
32 responsibility of the case manager to provide the case  
33 management services that assist a child with severe emotional  
34 disturbance and the child's family needed in achieving the  
35 outcomes specified in part 9520.0904 or that assist an adult



1 with serious and persistent mental illness in achieving the  
2 outcomes specified in part 9520.0905.

3 Subp. 2. **Other responsibilities.** The case manager must  
4 also carry out the responsibilities specified in item A or B for  
5 the purpose of implementing the design to achieve the outcomes  
6 specified in part 9520.0904 or 9520.0905.

7 A. A child's case manager must:

8 (1) complete a written functional assessment and  
9 develop the child's individual family community support plan  
10 based on the child's diagnostic assessment and functional  
11 assessment within 30 days after the first meeting with the child  
12 who is eligible for case management services;

13 (2) review and update the child's individual  
14 family community support plan according to the child's needs at  
15 least every 90 days after the development of the first plan and  
16 at the same time review the child's functional assessment as  
17 specified in part 9520.0918, subpart 2;

18 (3) monitor the child's progress toward achieving  
19 the outcomes specified in the child's individual family  
20 community support plan, report progress toward these outcomes to  
21 the parent, child, and other members of the case management team  
22 every 90 days after the plan is developed, and revise the  
23 outcomes as appropriate based on the child's progress toward the  
24 outcomes;

25 (4) coordinate family community support services  
26 needed by the child and the child's family with other services  
27 that the child and the child's family are receiving;

28 (5) arrange for a standardized assessment by a  
29 physician chosen by the child's parent, legal representative, or  
30 the child as described in part 9520.0907 of the side effects  
31 related to the administration of the child's psychotropic  
32 medication;

33 (6) attempt to meet with the child at least once  
34 every 30 days;

35 ~~(6)~~ (7) be available to meet with the child's  
36 parent or legal representative upon the request of the parent or

1 representative;

2                   +7+ (8) note in the child's record the services  
3 needed by the child and the child's family that are not  
4 available and the unmet needs of the child and the child's  
5 family;

6                   +8+ (9) actively participate in discharge  
7 planning for the child and, to the extent possible, coordinate  
8 the services necessary to assure a smooth transition to the  
9 child's home or foster home, school, and community-based  
10 services if the child is in a residential treatment facility,  
11 regional treatment center, correctional facility or other  
12 residential placement, or inpatient hospital for mental health  
13 services;

14                   +9+ (10) at least six months before the child's  
15 18th birthday, assist the child and, as appropriate, the child's  
16 parent or legal representative in assessing the child's need for  
17 continued mental health and case management services as  
18 specified in part 9520.0920, subpart 2, item D; and

19                   +10+ (11) advise the child's parent or legal  
20 representative or, ~~as appropriate,~~ the child of the right to  
21 appeal as specified in Minnesota Statutes, section 245.4887, if  
22 the mental health services needed by the child are denied,  
23 suspended, reduced, terminated, not acted upon with reasonable  
24 promptness, or are claimed to have been incorrectly provided.

25                   B. The case manager of an adult with serious and  
26 persistent mental illness must:

27                   (1) complete a written functional assessment and  
28 develop, together with the adult, an individual community  
29 support plan based on the client's diagnostic assessment and  
30 needs within 30 days after the first meeting with an adult who  
31 is eligible for case management services;

32                   (2) review and update the adult's individual  
33 community support plan according to the adult's needs at least  
34 every 90 calendar days after the development of the first plan  
35 and at the same time review the adult's functional assessment as  
36 specified in part 9520.0919, subpart 2;

1 (3) monitor the adult's progress toward achieving  
2 the outcomes specified in the adult's individual community  
3 support plan and report progress toward these outcomes to the  
4 adult and other members, if any, of the case management team at  
5 the time of the review required under subitem (2);

6 (4) involve the adult with serious and persistent  
7 mental illness, the adult's family, physician, mental health  
8 providers, other service providers, and other interested persons  
9 in developing and implementing the adult's individual community  
10 support plan to the extent possible and with the adult's  
11 consent;

12 (5) arrange for a standardized assessment by a  
13 physician of the adult's choice of side effects related to the  
14 administration of the adult's psychotropic medication;

15 (6) attempt to meet with the adult at least once  
16 every ~~90~~ 30 calendar days or at least once within a longer  
17 interval of between 30 and 90 calendar days as specified in the  
18 adult's community support plan;

19 ~~(6)~~ (7) be available to meet with the adult at  
20 the request of the adult more frequently ~~at-the-request-of-the~~  
21 ~~adult-or-as~~ than specified in ~~the-adult's-individual-community~~  
22 ~~support-plan~~ subitem (6);

23 ~~(7)~~ (8) actively participate in discharge  
24 planning for the adult and, to the extent possible, coordinate  
25 services necessary to assist the adult's smooth transition to  
26 the community if the adult is in a residential treatment  
27 facility, regional treatment center, correctional facility or  
28 any other residential placement, or an inpatient acute  
29 psychiatric case unit; and

30 ~~(8)~~ (9) inform the adult of the right to appeal  
31 as specified in Minnesota Statutes, section ~~245.4887~~ 245.477, if  
32 the mental health services needed by the adult are denied,  
33 suspended, reduced, terminated, or not acted upon with  
34 reasonable promptness, or are claimed to have been incorrectly  
35 provided.

1 9520.0916 CASE MANAGEMENT TEAM FOR CHILDREN WITH SEVERE  
2 EMOTIONAL DISTURBANCE.

3 Subpart 1. **Team convened.** The case manager of a child's  
4 case management services may convene the case management team on  
5 the manager's own initiative or upon the request of the child's  
6 parent or legal representative ~~or, as appropriate,~~ the child, or  
7 at the request of any other member of the team. The case  
8 manager, the child's parent or legal representative unless  
9 clinically inappropriate, and the other members of the case  
10 management team, if any, shall meet face-to-face with the  
11 child ~~and, as appropriate, the child's parents~~ at least once  
12 quarterly or more frequently if needed to monitor the child's  
13 progress in achieving the outcomes specified in the child's  
14 individual family community support plan.

15 Subp. 2. **Team coordinator.** When the case management team  
16 is convened, the child's parent or legal representative ~~or, as~~  
17 ~~appropriate,~~ the child may request that a representative of an  
18 agency other than the local agency serve as the team  
19 coordinator. If the agency represented on the team by the  
20 person chosen as team coordinator agrees, the team coordinator  
21 shall convene the case management team and, to the extent  
22 possible, coordinate the services provided to the child and the  
23 child's family among the local system of care serving the child  
24 and the child's family. In this event, the case manager must  
25 work with the team coordinator and must coordinate the child's  
26 mental health services with the team coordinator.

27 Subp. 3. **Duties of case management team.** When a case  
28 management team is convened under this part, the team must  
29 clarify and address the roles and responsibilities of the  
30 individual team members. The team shall assist the child's case  
31 manager to carry out the responsibilities of the case manager  
32 specified in part 9520.0914, subparts 1 and 2, item A.  
33 Recommendations of the case management team about mental health  
34 services for the child shall be ~~consistent with the services~~  
35 ~~specified in the county's approved children's mental health plan~~  
36 ~~as specified in~~ noted in the child's record according to

1 Minnesota Statutes, section ~~245-4888~~ 245.4881, subdivision 3,  
2 paragraph (b).

3 9520.0917 CASE MANAGEMENT TEAM FOR ADULTS WITH SERIOUS AND  
4 PERSISTENT MENTAL ILLNESS.

5 The case management ~~services~~ functions of a case manager  
6 for an adult with serious and persistent mental illness may be  
7 provided by a team that includes the adult, the adult's case  
8 manager, and other persons who meet at least the qualifications  
9 established in part 9520.0912, subpart 2. At the request of the  
10 adult with serious and persistent mental illness, the case  
11 management team shall involve other persons as specified in  
12 Minnesota Statutes, section 245.4711, subdivision 4, in all  
13 phases of development and implementation of the adult's  
14 individual community support plan. Members of the team other  
15 than the adult and the adult's case manager may be from any  
16 agency providing services to the adult with serious and  
17 persistent mental illness and, in addition, shall be employed by  
18 or under contract to the local agency to provide case management  
19 services. One member of the team shall be designated as the  
20 team leader subject to approval by the local agency. If a  
21 county board has authorized the use of case management teams, an  
22 adult with serious and persistent mental illness may request a  
23 single case manager or a case management team. If the adult  
24 chooses to receive case management services from a case  
25 management team, the team shall be responsible for carrying out  
26 the responsibilities of the case manager under parts 9520.0900  
27 to 9520.0926, except that the team leader shall be responsible  
28 for coordinating the team's activities.

29 9520.0918 DEVELOPMENT OF CHILD'S INDIVIDUAL FAMILY COMMUNITY  
30 SUPPORT PLAN.

31 Subpart 1. **Required plan.** The development of the child's  
32 individual family community support plan must comply with  
33 Minnesota Statutes, section 245.4881, subdivision 4. Any other  
34 service plan developed by an agency providing services to the  
35 child may substitute for the child's individual family community

1 support plan if the other service plan meets the requirements  
2 for an individual family community support plan. The plan must  
3 incorporate the child's individual treatment plans, if any. The  
4 individual family community support plan must focus on the  
5 desired changes in the level of functioning of the child. The  
6 plan must specify the desired outcomes of services and how the  
7 services will be assessed and monitored on an ongoing basis.

8 Subp. 2. **Review and revision.** The case manager with the  
9 assistance of the case management team, if any, shall review  
10 and, if necessary, revise a child's functional assessment, the  
11 child's individual family community support plan specified under  
12 subpart 1, and the child's and family's service needs based on  
13 evidence of the child's progress toward desired service  
14 outcomes. The review and, if necessary, the revision shall  
15 occur at least once every 90 calendar days after the development  
16 of the child's first individual family community support plan.  
17 Whenever possible, the outcome of the review and revision of the  
18 child's services must simplify access to the child's services  
19 and bring together similar services in a manner that eliminates  
20 the duplication or omission of services identified in the  
21 child's individual family community support plan.

22 9520.0919 DEVELOPMENT OF ADULT'S INDIVIDUAL COMMUNITY SUPPORT  
23 PLAN.

24 Subpart 1. **Required plan.** The development of the adult's  
25 individual community support plan must comply with Minnesota  
26 Statutes, section 245.4711, subdivision 4. Any other service  
27 plan developed by an agency providing services to the adult may  
28 substitute for the adult's individual community support plan if  
29 the other service plan meets the requirements for an individual  
30 community support plan. The plan must incorporate the adult's  
31 individual treatment plans, if any. The individual community  
32 support plan must focus on the desired changes in the level of  
33 the adult's functioning. The plan must specify the desired  
34 outcomes of the services and how the services will be assessed  
35 and monitored on an ongoing basis.

1           Subp. 2. **Review and revision.** With the assistance of the  
2 case management team, if any, the case manager shall review and,  
3 if necessary, revise the adult's functional assessment, the  
4 adult's individual community support plan specified in subpart  
5 1, and the adult's service needs based on evidence of the  
6 adult's progress toward the desired service outcomes. The  
7 review and, if necessary, the revision shall occur at least once  
8 every 90 calendar days after the development of the adult's  
9 first individual community support plan. Whenever possible, the  
10 outcome of the review and revision of the adult's services must  
11 identify, and assure the coordination of, services needed to  
12 obtain the desired service outcomes.

13 9520.0920 CASE MANAGER'S RECORDS RELATED TO SERVICES AND OUTCOME  
14 MONITORING.

15           Subpart 1. **Required records; children.** A case manager  
16 providing case management services to children with severe  
17 emotional disturbance must keep the records required in  
18 Minnesota Statutes, section 245.4881, subdivision 3, paragraph  
19 (b).

20           Subp. 2. **Monitoring and recording outcomes.** The case  
21 manager shall monitor and record the attainment of service  
22 outcomes to determine whether:

23           A. the client's level of functioning is being  
24 maintained or has changed;

25           B. the services are being coordinated in a manner  
26 designed to assure continuity of services needed by the child  
27 and to support the outcomes identified in the child's individual  
28 family community support plan; or

29           C. in the case of an adult, services are being  
30 coordinated in a manner to assure continuity of services needed  
31 by the adult and to support the outcomes identified in the  
32 adult's individual community support plan;

33           D. the child who is age 17 and who may be eligible  
34 for case management services to persons with serious and  
35 persistent mental illness receives information necessary to make



1 the transition to case management services for persons with  
2 serious and persistent mental illness; and

3 E. the child and the child's parent or legal  
4 representative or the adult receive information about applicable  
5 provisions of the Patients and Residents of Health Care  
6 Facilities Bill of Rights, appeals of denials, terminations,  
7 reductions or suspension of services, the release of information  
8 under the Government Data Practices Act about services, and  
9 authorization of services.

10 9520.0922 CASE MANAGER'S PROVISION OF OTHER MENTAL HEALTH  
11 SERVICES.

12 As requested by the child's parent or legal representative  
13 ~~or, if appropriate,~~ by the child as described in part 9520.0907  
14 or by an adult, a case manager may provide other mental health  
15 services if the case manager meets at least the minimum  
16 qualifications required to provide the mental health services  
17 specified in Minnesota Statutes, sections 245.462 to 245.4888,  
18 and if the case manager is under contract to or employed by the  
19 county to provide other mental health services. In the event a  
20 case manager provides other mental health services under this  
21 part, the other mental health services provided by the case  
22 manager shall not be considered as among the functions of the  
23 case manager and the case manager's time spent on case  
24 management functions shall be prorated in calculating the number  
25 of full-time equivalent positions needed to comply with part  
26 9520.0903, subparts 2 and 3.

27 9520.0923 COORDINATION OF CASE MANAGEMENT SERVICES WITH OTHER  
28 PROGRAMS.

29 If a person is eligible for and receiving case management  
30 services from more than one case management system, the case  
31 managers of these systems must coordinate, and not duplicate,  
32 case management services.

33 9520.0924 TERMINATION OF CASE MANAGEMENT SERVICES.

34 Case management services to a child with severe emotional

1 disturbance or an adult with serious and persistent mental  
2 illness shall terminate when one of the events listed in items A  
3 to D E occurs.

4           A. A mental health professional who has provided  
5 mental health services to the client furnishes a written opinion  
6 that the client no longer ~~needs-case-management-services~~ meets  
7 the eligibility criteria in Minnesota Statutes, section  
8 245.4871, subdivision 6, for a child or 245.462, subdivision 20,  
9 for an adult. Upon receipt of the mental health professional's  
10 written opinion that the client no longer needs case management  
11 services, the client's case manager must inform the client of  
12 the client's ability to appeal the decision according to part  
13 9520.0926.

14           B. The adult and the case manager mutually decide  
15 that the adult, or in the case of a child, the case manager and  
16 the child's parent or legal representative or, ~~as appropriate,~~  
17 the child as described in part 9520.0907 and the case manager  
18 mutually decide that the client no longer needs case management  
19 services.

20           C. The adult or, in the case of a child, the child's  
21 parent or legal representative or, ~~as appropriate,~~ the child as  
22 described in part 9520.0907 refuses further case management  
23 services.

24           D. Except for a child in a residential treatment  
25 facility, regional treatment center, or acute care hospital for  
26 the treatment of a severe emotional disturbance in a county  
27 outside the county of financial responsibility, no face-to-face  
28 contact has occurred between the case manager and the child for  
29 90 consecutive days because the child has failed to keep an  
30 appointment or refused to meet with the case manager.

31           E. Except for an adult in a residential treatment  
32 facility, regional treatment center, or acute care hospital for  
33 the treatment of a serious and persistent mental illness in a  
34 county outside the county of financial responsibility, no  
35 face-to-face contact has occurred between the case manager and  
36 the adult for 180 consecutive days because the adult has failed

1 to keep an appointment or refused to meet with the case manager.

2 9520.0926 APPEALS.

3 Subpart 1. **Right to appeal.** A client who applies for or  
 4 receives case management services has the right to a fair  
 5 hearing under Minnesota Statutes, section 256.045, if the county  
 6 terminates, denies, or suspends case management services, or  
 7 does not act within five days upon a request or referral for  
 8 case management services. ~~A county of financial responsibility~~  
 9 ~~has an absolute defense to an appeal under this part if it~~  
 10 ~~proves by a preponderance of the evidence that it has no more~~  
 11 ~~resources available with which to avoid a denial, reduction,~~  
 12 ~~suspension, or termination of case management services and that~~  
 13 ~~it has met the requirements of~~ Fiscal limitations described in  
 14 Minnesota Statutes, section sections 245.486 and 256E.081, shall  
 15 constitute a basis for the county of financial responsibility to  
 16 refuse to provide or fund the services at issue in the appeal.

17 Subp. 2. **Notice of adverse action.** The local agency shall  
 18 mail a written notice to the adult or to the child's parent or  
 19 legal representative ~~or, as appropriate,~~ and the child at least  
 20 ten calendar days before denying, reducing, suspending, or  
 21 terminating the client's case management services. The written  
 22 notice shall clearly state:

23 A. what action the local agency proposes to take;

24 B. the reasons for the action;

25 C. the legal authority for the proposed action;

26 D. that the adult or in the case of a child, the  
 27 child and the child's parent or legal representative have the  
 28 right to appeal the action within 30 days after the receipt of  
 29 the notice or within 90 days if the person has good cause for  
 30 delaying. At the request of the adult or in the case of a  
 31 child, the child and the child's parent or legal representative,  
 32 the child or adult shall continue to receive case management  
 33 services pending the resolution of the appeal; and

34 E. where and how to file an appeal.

35 Subp. 3. **General information about appeal rights.** At the

1 time of the request for case management services and at the  
2 annual review of the adult's individual community support plan  
3 or the child's individual family community support plan, the  
4 case manager shall give the adult or, in the case of a child,  
5 the child's parent or legal representative ~~or, if appropriate,~~  
6 and the child a written notice of the right to appeal under this  
7 part.

8 Subp. 4. **Commissioner's record of appeals.** The  
9 commissioner shall monitor the nature and frequency of appeals  
10 under this part.

11 REPEALER. Minnesota Rules, parts 9505.0476, 9505.0477,  
12 9505.0478, 9505.0479, 9505.0480, 9505.0481, 9505.0482,  
13 9505.0483, 9505.0484, 9505.0485, 9505.0486, 9505.0487,  
14 9505.0488, 9505.0489, 9505.0490, and 9505.0491, subparts 1 to 6,  
15 9, and 10, are repealed upon the effective date of parts  
16 9520.0900 to ~~9505.0926~~ 9520.0926.