

CHAPTER 245

DEPARTMENT OF HUMAN SERVICES

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245.072 MENTAL RETARDATION DIVISION.

A mental retardation division is created in the department of human services which shall coordinate those laws administered and enforced by the commissioner of human services relating to mental retardation and related conditions, as defined in section 252.27, subdivision 1, which the commissioner may assign to the division. The mental retardation division shall be under the supervision of a director whose responsibility it shall be to maximize the availability of federal or private moneys for programs to assist persons with mental retardation or related conditions. The commissioner shall appoint the director who shall serve in the classified service of the state civil service. The commissioner may employ additional personnel with such qualifications and in such numbers as are reasonable and are necessary to carry out the provisions of this section.

History: 1985 c 21 s 3

245.50 INTERSTATE CONTRACTS FOR MENTAL HEALTH SERVICES.

Subdivision 1. **Definitions.** For purposes of this section, the following terms have the meanings given them.

- (a) "Bordering state" means Iowa, North Dakota, South Dakota, or Wisconsin.
- (b) "Agency or facility" means a public or private hospital, mental health center, or other person or organization authorized by a state to provide mental health services.

Subd. 2. **Authority.** Unless prohibited by another law and subject to the exceptions listed in subdivision 3, a county board may contract with an agency or facility in a bordering state for mental health services for residents of Minnesota, and a Minnesota mental health agency or facility may contract to provide services to residents of bordering states. A person who receives services in another state under this section is subject to the laws of the state in which services are provided. A person who will receive services in another state under this section must be informed of the consequences of receiving services in another state, including the implications of the differences in state laws.

Subd. 3. **Exceptions.** A contract may not be entered into under this section for services to persons who:

- (1) are serving a sentence after conviction of a criminal offense;
- (2) are on probation or parole;
- (3) are the subject of a presentence investigation;
- (4) have been committed involuntarily; or
- (5) will be receiving treatment for chemical dependency.

Subd. 4. **Contracts.** Contracts entered into under this section must, at a minimum:

- (1) describe the services to be provided;
 - (2) establish responsibility for the costs of services;
 - (3) establish responsibility for the costs of transporting individuals receiving services under this section;
 - (4) specify the duration of the contract;
 - (5) specify the means of terminating the contract;
 - (6) specify the terms and conditions for refusal to admit or retain an individual;
- and

(7) identify the goals to be accomplished by the placement of an individual under this section.

History: 1985 c 253 s 1

245.52 COMMISSIONER OF HUMAN SERVICES AS COMPACT ADMINISTRATOR.

The commissioner of human services is hereby designated as "compact administrator." He shall have the powers and duties specified in the compact, and he may, in the name of the state of Minnesota, subject to the approval of the attorney general as to form and legality, enter into such agreements authorized by the compact as he deems appropriate to effecting the purpose of the compact. He shall, within the limits of the appropriations for the care of persons with mental illness or mental retardation, authorize such payments as are necessary to discharge any financial obligations imposed upon this state by the compact or any agreement entered into under the compact.

If the patient has no established residence in a Minnesota county, the commissioner shall designate the county of financial responsibility for the purposes of carrying out the provisions of the Interstate Compact on Mental Health as it pertains to patients being transferred to Minnesota. The commissioner shall designate the county which is the residence of the person in Minnesota who initiates the earliest written request for the patient's transfer.

History: 1985 c 21 s 4

245.70 MENTAL HEALTH; FEDERAL AID.

Subdivision 1. **Mentally ill.** The commissioner of human services is designated the state agency to establish and administer a statewide plan for the care, treatment, diagnosis, or rehabilitation, of the mentally ill which are or may be required as a condition for eligibility for benefits under any federal law and in particular under the Federal Alcohol, Drug Abuse and Mental Health Block Grant Law, United States Code, title 42, sections 300X to 300X-9. The commissioner of human services is authorized and directed to receive, administer, and expend any funds that may be available under any federal law or from any other source, public or private, for such purposes.

[For text of subd 2, see M.S.1984]

History: 1985 c 252 s 1

245.71 CONDITIONS TO FEDERAL AID FOR MENTALLY ILL.

Subdivision 1. The commissioner of human services may comply with all conditions and requirements necessary to receive federal aid or block grants with respect to the establishment, construction, maintenance, equipment or operation, for all the people of this state, of adequate facilities and services as specified in section 245.70.

Subd. 2. The commissioner may establish a state mental health services planning council to advise on matters relating to coordination of mental health services among state agencies, the unmet needs for services, including services for minorities or other underserved groups, and the allocation and adequacy of mental health services within the state. The commissioner may establish special committees within the planning council authority to address the needs of special population groups. Members of a state advisory planning council must be broadly representative of other state agencies involved with mental health, service providers, advocates, consumers, local elected officials, age groups, underserved and minority groups, and geographic areas of the state.

History: 1985 c 252 s 2

245.711 COMPREHENSIVE PROGRAMS; COORDINATION OF LOCAL PROGRAMS.

[For text of subd 1, see M.S.1984]

Subd. 2. **Grants by counties.** The county boards may make grants for comprehensive programs for prevention, care, and treatment of mentally ill individuals. Grants utilizing money under section 245.713 may be made for the cost of these comprehensive programs and services whether provided directly by county boards, by individuals pursuant to contract, or by other public and private not for profit agencies and organizations. When only state and county money is involved, county boards may make comprehensive program grants to profit or not for profit agencies and organizations. Nothing in this section shall prevent the commissioner from entering into contracts with, and making grants to, other state agencies for the purpose of providing specific services and programs. With approval of the county board, the commissioner may make grants or contracts for research or demonstration projects specific to needs within that county.

History: 1985 c 252 s 3

245.713 FORMULA.

[For text of subd 1, see M.S.1984]

Subd. 2. **Total funds available; reductions.** The amount of funds available for allocation to counties for use by qualified community mental health centers shall be the total amount of funds granted to the state by the federal government under United States Code, title 42, sections 300X to 300X-9 each federal fiscal year for mental health services reduced by the sum of the following:

(a) Any amount set aside by the commissioner of human services for Indian tribal organizations within the state, which funds shall not duplicate any direct federal funding of Indian tribal organizations and which funds shall not exceed 12 percent of the total block grant allocation to the state for mental health services; and, money from this source may be used for special committees to advise the commissioner on mental health programs and services for American Indians and other minorities or underserved groups; and,

(b) Any amount calculated into the base of the block grant that is made available by the commissioner for qualified community mental health centers that were receiving grants for operations or other continuing grant obligations defined in United States Code, title 42, sections 300X to 300X-9 immediately prior to its enactment.

(c) An amount not to exceed ten percent of the total allocation for mental health services to be retained by the commissioner for administration.

(d) Any amount permitted under federal law which the commissioner approves for demonstration or research projects for severely disturbed children and adolescents, the underserved, special populations or multiply disabled mentally ill persons. The groups to be served, the extent and nature of services to be provided, the amount and duration of any grant awards are to be based on criteria set forth in the Alcohol, Drug Abuse and Mental Health Block Grant Law, United States Code, title 42, sections 300X to 300X-9, and on state policies and procedures determined necessary by the commissioner. Grant recipients must comply with applicable state and federal requirements and demonstrate fiscal and program management capabilities that will result in provision of quality, cost-effective services.

(e) The amount required under federal law, for federally mandated expenditures.

[For text of subds 3 and 4, see M.S.1984]

History: 1985 c 252 s 4

245.821 NOTICE OF ESTABLISHMENT OF FACILITIES FOR TREATMENT, HOUSING OR COUNSELING OF HANDICAPPED PERSONS.

Subdivision 1. Notwithstanding any law to the contrary, no private or public facility for the treatment, housing, or counseling of more than five persons with mental illness, physical disabilities, mental retardation or related conditions, as defined in section 252.27, subdivision 1, chemical dependency, or another form of dependency, nor any correctional facility for more than five persons, shall be established without 30 days written notice to the affected municipality or other political subdivision.

[For text of subd 2, see M.S.1984]

History: 1985 c 21 s 5

245.825 USE OF AVERSIVE OR DEPRIVATION PROCEDURES IN FACILITIES SERVING PERSONS WITH MENTAL RETARDATION OR RELATED CONDITIONS.

Subdivision 1. **Rules governing use of aversive and deprivation procedures.** The commissioner of human services shall by October, 1983 promulgate rules governing the use of aversive and deprivation procedures in all licensed facilities serving persons with mental retardation or related conditions, as defined in section 252.27, subdivision 1. No provision of these rules shall encourage or require the use of aversive and deprivation procedures. The rules shall prohibit: (a) the application of certain aversive or deprivation procedures in facilities except as authorized and monitored by the designated regional review committees; and (b) the use of aversive or deprivation procedures that restrict the consumers' normal access to nutritious diet, drinking water, adequate ventilation, necessary medical care, ordinary hygiene facilities, normal sleeping conditions, and necessary clothing. The rule shall further specify that consumers may not be denied ordinary access to legal counsel and next

of kin. In addition, the rule may specify other prohibited practices and the specific conditions under which permitted practices are to be carried out.

[For text of subd 2, see M.S.1984]

History: 1985 c 21 s 6

245.84 AUTHORIZATION TO MAKE GRANTS.

[For text of subd 1, see M.S.1984]

Subd. 2. [Repealed, 1Sp1985 c 14 art 9 s 78 subd 1]

[For text of subds 3 to 5, see M.S.1984]

245.87 ALLOCATIONS.

At least ten percent of the total program allocation under section 245.84, subdivision 1 shall be designated for interim financing. The commissioner is further instructed that the allocation in each area be based on a need and population basis.

History: 1Sp1985 c 14 art 9 s 11