

CLIENT ASSISTANCE PROJECT

## MINNESOTA DISABILITY LAW CENTER

SUPERVISING ATTORNEY

Roderick J. Macpherson III

LEGAL ADVOCACY FOR PERSONS WITH  
DEVELOPMENTAL DISABILITIES

THE PROTECTION & ADVOCACY  
SYSTEM FOR MINNESOTA

MENTAL HEALTH LAW PROJECT

430 FIRST AVENUE NORTH, SUITE 300

PROTECTION AND ADVOCACY FOR  
INDIVIDUAL RIGHTS

MINNEAPOLIS, MN 55401-1780

(612) 332-1441

(TDD) 332-4668

Toll Free 1-800-292-4150

FAX (612) 334-5755

EXECUTIVE DIRECTOR

Jeremy Lane

LEGAL DIRECTOR

Pamela S. Hoopes

ADMINISTRATOR

Lisa Cohen

ATTORNEYS

Steven P. Elliot

Luther Granquist

Kathleen Hagen

Anne L. Henry

Kathy S. Kosnoff

Anne M. Robertson

Barnett I. Rosenfield

Patricia M. Siebert

ADVOCATES

Linda Bonney (Grand Rapids)

Kursten Dubbels (Fergus Falls)

Bonita Kallestad (Willmar)

Sandra M. Moore (Duluth)

Rochelle Roehrich (Minneapolis)

Sharon Sanders (Duluth)

Marilyn Spensley (Park Rapids)

### MEMORANDUM

TO: MDLC Staff

FROM: Anne L. Henry

RE: 1999 Health And Human Services Legislative Session Report

DATE: June 7, 1999

A. Health And Human Services Omnibus Bill, Chapter 245, Laws of Minnesota 1999.

1. Services for Persons with Developmental Disabilities on Waiting Lists, effective July 1, 1999. Statutory language attached.

CLIENT ASSISTANCE PROJECT

## MINNESOTA DISABILITY LAW CENTER

SUPERVISING ATTORNEY

Roderick J. Macpherson III

LEGAL ADVOCACY FOR PERSONS WITH  
DEVELOPMENTAL DISABILITIES

THE PROTECTION & ADVOCACY  
SYSTEM FOR MINNESOTA

ATTORNEYS

Steven P. Elliot

Luther Granquist

Kathleen Hagen

Anne L. Henry

Kathy S. Kosnoff

Anne M. Robertson

Barnett I. Rosenfield

Patricia M. Siebert

MENTAL HEALTH LAW PROJECT

430 FIRST AVENUE NORTH, SUITE 300

MINNEAPOLIS, MN 55401-1780

(612) 332-1441

(TDD) 332-4668

Toll Free 1-800-292-4150

FAX (612) 334-5755

PROTECTION AND ADVOCACY FOR  
INDIVIDUAL RIGHTS

EXECUTIVE DIRECTOR

Jeremy Lane

LEGAL DIRECTOR

Pamela S. Hoopes

ADMINISTRATOR

Lisa Cohen

ADVOCATES

Linda Bonney (Grand Rapids)

Kursten Dubbels (Fergus Falls)

Bonita Kallestad (Willmar)

Sandra M. Moore (Duluth)

Rochelle Roehrich (Minneapolis)

Sharon Sanders (Duluth)

Marilyn Spensley (Park Rapids)

An increase of 100 DD waiver slots per year for 4 years, \$3.5 million for Family Support Grant and \$2 million for Semi-Independent Living Services, plus numerous changes to the management of the DD waiver were adopted. *See* attached information.

2. MA Work Incentive for Working Adults with Disabilities, effective July 1, 1999. Statutory language attached.

The Medical Assistance Work Incentive Option was passed. *See* attached information.

3. MA Income Standard, effective July 1, 2000.

The Medical Assistance income standard was increased \$14 per month beginning July 1, 2000 for 12,000 elderly and disabled MA recipients who must spend down their monthly Social Security and other income to \$467.00.

4. The Senior Prescription Drug Program.

The Senior Drug Program was fully funded for those eligible under 65 years of age, but was NOT expanded to include persons with disabilities on Medicare under 65 years of age.

5. MA Rehabilitative Therapies, effective July 1, 1999. Statutory language attached.

The care management/prior authorization system for rehabilitative therapies covered by Medical Assistance was passed. The change will establish a lifetime amount of therapy which begins July 1, 1999. When the lifetime therapy sessions have been used, all additional therapy must be approved through prior authorization. A savings of \$916,000 for this biennium and \$1.1 million for each year thereafter was taken in the budget due to the imposition of prior authorization for rehabilitative therapy. DHS must work with therapists and advocates to develop a definition of specialized maintenance therapy by November 15, 1999.

6. MA Billing by Schools, effective July 1, 2000. Statutory language attached.

Significant changes were made which will a) simplify billing of MA services provided to eligible children as part of an IEP, b) carve out IEP health services from Prepaid MA and MinnesotaCare and c) require schools rather than the

DHS budget to pay the nonfederal matching funds to get federal Medicaid dollars.

7. Personal Care Assistance Services, effective July 1, 1999 (except c)).  
Statutory language attached.

A number of changes were made to Personal Care Assistant services, including:

- a) allows supervision by a "qualified professional" (includes mental health professional);
- b) authorizes flexible use of personal care assistant (PCA) hours;
- c) establishes the fiscal agent option, upon federal approval (likely January 1, 2000) whereby the recipient or responsible party will:
  - i) hire, supervise, evaluate, and terminate PCAs,
  - ii) cooperate with a consulting professional to develop and revise a care plan and
  - iii) work with the fiscal agent to properly bill Medical Assistance for PCA and consulting professional services and obtain background checks, staff compensation, withholding and

- d) provides for shared private duty nursing which, like shared PCA care, will allow two recipients to share a private duty nurse at the same time in the same setting for one and one-half times the rate paid for caring for one recipient.

8. Managed Care Demonstration Project for Persons with Disabilities. Statutory language attached.

This project was given half the requested funding for risk sharing, capitation adjustments and external advocacy provided by the Ombudsman's Office.

9. Cost-of-living (COLA) increase for health care providers and staff.

Community health care providers and direct care staff were given a four percent COLA for the first year of the next biennium and a three percent COLA for the second year. In addition, increases were provided for doctors, dentists, hospitals, therapists and other health care providers. Tuition waivers for direct care staff at state colleges for \$100,000 each year was vetoed by the Governor.

10. Group residential housing changes (GRH), effective January 1, 2000.

The Legislature adopted a Department proposal to freeze group residential housing supplemental rates for counties with rates over \$100. The DHS proposal is projected to save \$1.5 million for the coming biennium and \$8.1

million for the 02/03 biennium. Group residential housing payments are provided mainly to persons needing out-of-home placement using the DD waiver. The Legislature did not cover future cost increases in housing, food and maintenance, but did include language for the commissioner to consider approving a COLA after January 1, 2002 "within the limits of appropriations."

11. ICF/MR Payment System.

A new payment system for ICF/MR's was adopted and will take effect October 1, 2000.

12. Day Training and Habilitation (DT&H) Services Rate Variance.

Changes to the DT&H variance provisions should result in more rate increases for higher need people. The legislation provides \$375,000 in additional funding for rate variances.

13. Search Program for persons with epilepsy.

The Search Program was not cut as had been recommended in the Governor's budget. The current base funding of \$230,000 per year is continued in the Omnibus Bill.

14. Deaf/Blind specialists and mental health services for persons who are deaf and hard of hearing.

The Legislature funded a \$120,000 for a deaf/blind mobility specialist to work with Deaf/Blind Services Minnesota to train teachers and rehabilitation counselors on a statewide basis. Also, \$100,000 each year is provided to a nonprofit agency serving deaf and hard of hearing adults with mental illness to operate a community support program that is "communicatively accessible."

15. Consolidated licensing rules standards.

Changes were made to the consolidated licensing standards which include requiring competency for medication administration and standards for handling client funds.

16. Lake Owasso.

The Legislature funded the rebuilding of up to 64 beds for an ICF/MR facility on the current Lake Owasso site for \$188,000 for the coming biennium and \$1.5 million for '02/'03 for increased rates. This funding and accompanying language were adopted despite the fact that the bill did not pass either body's policy committee and had no hearing in either body's appropriations committee.

During construction, Ramsey County is to explore all service options for current residents.

17. Region 10 Quality Assurance.

The Region 10 Quality Assurance project (southeastern Minnesota) was funded at \$210,000 each year of the biennium to continue working on an alternative Quality Assurance licensing system.

18. SOCS 24-Hour Control.

State Operated Services (SOCS) may continue to provide both residential and day services to the same individuals under a provision adopted without a hearing in either body.

19. Crisis Services for ICF/MR Residents. Statutory language attached.

Changes were made to the provisions governing crisis services for ICF/MR residents, including broadening the type of facility which can provide such services.

B. **Consumer Support Grants, Chapter 10.**

Consumer Support grants are now available for families even when the parents must pay a parental fee. Also, by June 1, 1999, DHS is required to request a federal waiver to include the federal share of MA dollars in a Consumer Support Grant.

C. **Day Training and Habilitation Task Force, Chapter 152.**

A task force including counties, service consumers and vendors is to develop recommendations on a new payment structure by January 15, 2000.



MDLC Staff

June 20, 2014

Page 9

D. Health Plan Company Uniform Complaint Process, Chapter 239, Minn. Stat. § 62.68  
*et. seq.*

Changes for private health plans have been enacted which establish uniform processes for utilization review and appeals, internal appeals and an external review process. Public program enrollees will continue to use the DHS appeal process, not the new external review process for private health plans. However, public program enrollees may use the expert medical opinion process which then could be used in the DHS appeal process.

ALH:nb