

**Subject** Department of Human Services Policy and Technical Bill

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## **Article 1: Aging, Disability, and Behavioral Health Services**

This article contains policy and technical changes related to various aging, disability, and behavioral health services. This article also expands eligibility for the home and community-based services (HCBS) workforce development grant and excludes the grant from being counted as income or an asset for purposes of determining eligibility for a variety of economic assistance and health care programs.

### **Section Description - Article 1: Aging, Disability, and Behavioral Health Services**

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- 1 Case management services.**  
Amends § 245.462, subd. 3. Updates terminology from “assessment summary” to “community support plan.”
- 2 Individual community support plan.**  
Amends § 245.462, subd. 12. Updates terminology from “assessment summary” to “community support plan.”
- 3 Duties of case manager.**  
Amends § 245.4711, subd. 3. Updates terminology from “assessment summary” to “community support plan.”
- 4 Individual community support plan.**  
Amends § 245.4711, subd. 4. Updates terminology from “assessment summary” to “community support plan.”
- 5 Appeals.**  
Amends § 245.77. Updates terminology from “assessment summary” to “community support plan.”
- 6 Failure to maintain expenditures.**  
Amends § 245.4835, subd. 2. Updates terminology from “assessment summary” to “community support plan.”

**Section Description - Article 1: Aging, Disability, and Behavioral Health Services**

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- 7      **Case management services.**  
Amends § 245.4871, subd. 3. Updates terminology from “assessment summary” to “community support plan.”
- 8      **Individual family community support plan.**  
Amends § 245.4871, subd. 19. Updates terminology from “assessment summary” to “community support plan.”
- 9      **Individual case coordination.**  
Amends § 245.4873, subd. 4. Updates terminology from “family assessment summary” to “individual family community support plan.”
- 10     **Duties of case manager.**  
Amends § 245.4881, subd. 3. Updates terminology from “assessment summary” to “community support plan.”
- 11     **Individual family community support plan.**  
Amends § 245.4881, subd. 4. Updates terminology from “assessment summary” to “community support plan.”
- 12     **Admission criteria.**  
Amends § 245.4885, subd. 1. Updates terminology from “assessment summary” to “community support plan.”
- 13     **Appeals.**  
Amends § 245.4887. Updates terminology from “assessment summary” to “community support plan.”
- 14     **Licensing moratorium.**  
Amends § 245A.03, subd. 7. Modifies an exception to the corporate foster care moratorium.  
  
Provides an immediate effective date.
- 15     **Delegation of authority to agencies.**  
Amends § 245A.16, subd. 1. Includes community residential settings in a statute limiting the commissioner’s delegation of certain licensing authority to county agencies.  
  
Provides an immediate effective date.

**Section Description - Article 1: Aging, Disability, and Behavioral Health Services**

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- 16     **Applicability.**  
Amends § 245D.03, subd. 1. Modifies the lists of basic support services and intensive support services under the chapter of statutes governing home and community-based services standards.
- 17     **Nonmedication treatment services; documentation.**  
Amends § 245G.22, subd. 15. Modifies opioid treatment program nonmedication treatment services so that the required treatment plan review occurs at least once every three months instead of monthly.
- 18     **Policies and procedures.**  
Amends § 245G.22, subd. 17. Modifies opioid treatment counselor supervision of clients by increasing the maximum number of clients per counselor from 50 to 60, from July 1, 2023, to June 30, 2024. Makes this section effective July 1, 2023.
- 19     **Operation of regional treatment centers.**  
Amends § 246.0135. Removes language governing admission and discharge procedures for persons with developmental disabilities who move from one regional treatment center to another regional treatment center.
- 20     **Membership terms, compensation, removal and expiration.**  
Amends § 254A.035, subd. 2. Removes expiration date for the American Indian Advisory Council.
- 21     **Room and board provider requirements.**  
Amends § 254B.05, subd. 1a. Modifies behavioral health fund room and board vendor requirements by requiring awake staff on site whenever a client is present, rather than 24 hours per day; adds requirement for a vendor that is not licensed as a residential treatment program to have a policy for staff coverage when a client needs to be present at the room and board site unexpectedly.
- 22     **Rate requirements.**  
Amends § 254B.05, subd. 5. Requires treatment programs that provide on-site child care to be licensed under chapters 245A and 245G to receive enhanced reimbursement rates; removes language related to specific licensing requirements.
- 23     **DHS systemic critical incident review team.**  
Amends § 256.01, by adding subd. 12b. Paragraphs (a) and (b) allow the commissioner to establish a systemic critical incident review team to review critical incidents related to vulnerable adults in facilities or services for which the Department of Human Services is the lead investigative agency; specify duties of the review team and requirements for the critical incident review process, including data

**Section Description - Article 1: Aging, Disability, and Behavioral Health Services**

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collection, systemic mapping of the critical incident, and analysis of the case for systemic influences; require the critical incident review team to aggregate data collected for purposes of data analysis by regional teams; and require regional teams to make recommendations to decrease the number and severity of critical incidents or improve the quality of the home and community-based system.

Paragraphs (c) and (d) specify case selection committee requirements, data classification, and data and disclosure prohibitions.

Paragraph (e) requires the commissioner to prepare an annual public report containing specified information related to cases reviewed and recommendations made to the commissioner regarding systemic changes that could decrease the number and severity of critical incidents or improve the quality of home and community-based services.

Provides an immediate effective date.

**24 MnCHOICES reassessments; option for alternative and self-directed waiver services.**

Amends § 256B.0911, subd. 23. Updates a cross-reference related to community living settings to conform to the repealer.

Makes this section effective upon federal approval. Requires the commissioner of human services to notify the revisor of statutes when federal approval is obtained.

**25 Admission of persons to and discharge of persons from regional treatment centers.**

Amends § 256B.092, subd. 10. Removes language related to convening a screening team meeting when discharge is proposed, individual service plan modifications, discharge planning, and notifications. Requires assessments and support planning to be completed according to long-term care consultation services requirements.

**26 State traumatic brain injury program.**

Amends § 256B.093, subd. 1. Removes the expiration date for the traumatic brain injury advisory committee.

**27 Contact and demographic information for consumer surveys for home and community-based services.**

Amends § 256B.439, subd. 3c. Allows the commissioner to request aggregate, de-identified demographic information of clients served by a provider. Lists the demographic information the commissioner may request including age and gender identity.

**Section Description - Article 1: Aging, Disability, and Behavioral Health Services**

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- 28      **Resident experience survey and family survey for assisted living facilities.**  
Amends § 256B.439, subd. 3d. Requires licensed assisted living facilities to participate in resident experience surveys and family surveys when requested by the commissioner.
- 29      **Demographic information for HCBS report card.**  
Amends § 256B.439, by adding subd. 3e. Lists data the commissioner may request from HCBS providers. Defines “summary data.” Requires providers that provide summary data to the commissioner to provide notice to clients that the client’s demographic data was included in summary data provided to the commissioner.
- 30      **Home and community-based settings for people with disabilities.**  
Amends § 256B.492. Defines “community living setting,” “controlling individual,” and “license holder.” Clarifies the meaning of “direct financial interest” and “indirect financial interest.”  
  
Moves language related to community living setting requirements, cosigned leases, transition plans, transfer of leases, and lease transfer extensions from section 256B.49, subd. 23 (which is being repealed at the end of this bill) to this section.  
  
Makes this section effective upon federal approval. Requires the commissioner of human services to notify the revisor of statutes when federal approval is obtained.
- 31      **Closure process.**  
Amends § 256B.493, subd. 2a. Removes language requiring a contract to be established between the commissioner, the counties of financial responsibility, and the participating license holder for each adult foster care planned closure approved by the commissioner.
- 32      **Review and approval process.**  
Amends § 256B.493, subd. 4. Removes language requiring a contract to be established between the commissioner, the counties of financial responsibility, and the participating license holder for each adult foster care planned closure approved by the commissioner.  
  
Provides an immediate effective date.
- 33      **Customized living monthly service rate limits.**  
Amends § 256S.202, subd. 1. Modifies the elderly waiver customized living monthly service rate limit by removing the subtraction of the maintenance needs allowance.

**Section Description - Article 1: Aging, Disability, and Behavioral Health Services**

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**34 Facility of transfer.**

Amends § 524.5-104. Allows a guardian to appoint or name a person to exercise signature authority over an ABLE account; lists who may be selected for such authority.

**35 Powers and duties of guardian.**

Amends § 524.5-313. Allows a guardian to appoint or name a person to exercise signature authority over an ABLE account; lists who may be selected for such authority.

**36 HCBS Workforce Development Grant.**

Amends Laws 2021, First Special Session ch. 7, art. 17, § 20.

**Subd. 1. Appropriation.** Expands eligibility for the HCBS workforce development grant by increasing maximum income eligibility from 200 percent to 300 percent of the federal poverty guidelines.

**Subd. 2. Public assistance eligibility.** Excludes workforce development grant money from being counted as income, assets, or personal property for purposes of determining eligibility or recertifying eligibility for various income assistance programs.

**Subd. 3. Medical assistance eligibility.** Excludes workforce development grant money from being counted as income or assets for purposes of determining eligibility for MA.

**37 Direction to commissioner; BI and CADI waiver customized living services providers located in Hennepin and Itasca Counties.**

Requires the commissioner of human services to determine the BI or CADI waiver customized living and 24-hour customized living size limitation exception applies to two settings located in the city of Minneapolis that had a capacity to serve six clients as of July 1, 2022, and one setting located in the city of Grand Rapids that had a capacity to serve eight clients as of July 1, 2022.

**38 Repealer.**

Repeals Minn. Stat. §§ 254B.13, subds. 1, 2, 2a, 4, 5, 6, 7, and 8 (pilot projects; chemical health care); 254B.16 (pilot projects; treatment for pregnant and postpartum women with substance use disorder); 256.041, subd. 10 (expiration of Cultural and Ethnic Communities Leadership Council); 256B.49, subd. 23 (community living settings); and 260.835, subd. 2 (American Indian Child Welfare Advisory Council expiration).

**Section Description - Article 1: Aging, Disability, and Behavioral Health Services**

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Provides an immediate effective date.

**Article 2: Substance Use Disorder Direct Access**

This article makes changes to cross-references and terminology resulting from the recent change from local agencies (typically counties) conducting “Rule 25” assessments and placements for substance use disorder (SUD) services through the behavioral health fund, to the direct access model currently in place for comprehensive assessments and services. The bill modifies several provisions related to SUD treatment provider licensing and service provision, adds several definitions to chapter 254B, and moves provisions governing behavioral health fund client eligibility, SUD assessment criteria dimensions and risk descriptions, and payment for services, from rule to statute.

**Section Description - Article 2: Substance Use Disorder Direct Access**

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- 1 Benefits.**  
Amends § 62N.25, subd. 5. Updates cross-reference.
- 2 Chemical dependency.**  
Amends § 62Q.1055. Updates cross-reference and terminology.
- 3 Alcoholism, mental health, and chemical dependency services.**  
Amends § 62Q.47. Updates cross references and terminology.
- 4 Assessment report.**  
Amends § 169A.70, subd. 3. Updates cross-reference.
- 5 Assessor standards; rules; assessment time limits.**  
Amends § 169A.70, subd. 4. Updates cross-reference; strikes language regarding county assessors and assessor financial conflict.
- 6 Change of ownership process.**  
Amends § 245A.043, subd. 3. Corrects cross-reference.
- 7 Comprehensive assessment.**  
Amends § 245F.06, subd. 2. Removes assessment summary language in withdrawal management licensing chapter.

**Section Description - Article 2: Substance Use Disorder Direct Access**

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**8 Protective factors.**

Amends § 245G.01 by adding subd. 20c. Adds definition of “protective factors” in SUD treatment licensing chapter.

**9 Skilled treatment services.**

Amends § 245G.01 by adding subd. 20d. Adds definition of “skilled treatment services” in SUD treatment licensing chapter.

**10 Exemption from license requirement.**

Amends § 245G.02, subd. 2. Adds cross-reference to new subdivision. Makes section effective January 1, 2024.

**11 Comprehensive assessment.**

Amends § 245G.05, subd. 1. Increases the time for a comprehensive assessment from three days to five days after service initiation; specifies that the number of days excludes the day of service initiation. Removes language regarding comprehensive assessment requirements, to move to new subdivision. Requires that an alcohol and drug counselor sign and date the comprehensive assessment review and update.

Makes section effective January 1, 2024.

**12 Comprehensive assessment requirements.**

Amends § 245G.05 by adding subd. 3. Modifies comprehensive assessment requirements. Requires comprehensive assessments to meet specified requirements of diagnostic assessments, and to include:

- 1) a diagnosis of SUD or finding that the client does not meet criteria for SUD;
- 2) a determination regarding co-occurring mental health disorders;
- 3) a risk rating and summary to support the risk rating; and
- 4) a recommendation for the ASAM level of care.

Also requires a program to provide listed educational material to the client within 24 hours, if the client is assessed for opioid use disorder.

Makes section effective January 1, 2024.

**13 General.**

Amends § 245G.06, subd. 1. Modifies time frames by which an SUD treatment provider must develop an individual treatment plan for a client.

Makes section effective January 1, 2024.



**Section Description - Article 2: Substance Use Disorder Direct Access**

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- 14 Individual treatment plan contents and process.**  
Amends § 245G.06 by adding subd. 1a. Specifies individual treatment plan requirements and what individual treatment plans must identify for each client.  
  
Makes section effective January 1, 2024.
- 15 Treatment plan review.**  
Amends § 245G.06, subd. 3. Modifies treatment plan review requirements. Removes weekly entry requirement and reference to six dimensions for assessments. Adds requirement to include toxicology results, if available; clarifies others whose participation must be documented; requires documentation of referrals made since the previous treatment plan review.  
  
Makes section effective January 1, 2024.
- 16 Frequency of treatment plan review.**  
Amends § 245G.06 by adding subd. 3a. Establishes treatment plan review frequency requirements for clients in residential treatment programs, once every 14 days. Requires treatment plan reviews for clients' nonresidential treatment at varying frequencies depending on client need and level of care.  
  
Makes section effective January 1, 2024.
- 17 Service discharge summary.**  
Amends § 245G.06, subd. 4. Updates cross-references. Makes section effective January 1, 2024.
- 18 Contents.**  
Amends § 245G.09, subd. 3. Modifies requirements for client record contents by removing assessment summary and updating cross-references. Makes section effective January 1, 2024.
- 19 Definitions.**  
Amends § 245G.22, subd. 2. Strikes definition of "placing authority."
- 20 Standard diagnostic assessment; required elements.**  
Amends § 245I.10, subd. 6. Permits an alcohol and drug counselor to gather and document listed information when completing a comprehensive assessment. Adds information about withdrawal and other health symptoms; adds substance use and SUD assessment items.

**Section Description - Article 2: Substance Use Disorder Direct Access**

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- 21 Rules for substance use disorder care.**  
Amends § 254A.03, subd. 3. Strikes language relating to substance use disorder assessment criteria in rules; updates cross-references and terminology; strikes expiration date for paragraph allowing direct access for comprehensive assessments. Specifies that an individual may choose to obtain a comprehensive assessment from any enrolled, licensed provider; specifies that an individual must comply with provider network requirements if enrolled in a prepaid health plan.
- 22 Persons arrested outside of home county.**  
Amends § 254A.19, subd. 1. Deletes cross-reference; strikes language about county assessments; inserts language requiring the county in which a person is detained to give access to a qualified assessor.
- 23 Comprehensive assessments.**  
Amends § 254A.19, subd. 3. Strikes language regarding assessor financial conflicts of interest.
- 24 Civil commitments.**  
Amends § 254A.19, subd. 4. Updates terminology; strikes references to rules.
- 25 Assessments for detoxification programs.**  
Amends § 254A.19 by adding subd. 6. Specifies that for detoxification programs, a “chemical use assessment” is a comprehensive assessment and assessment summary; specifies assessor qualifications.
- 26 Assessments for children’s residential facilities.**  
Amends § 254A.19 by adding subd. 7. Specifies that for children’s residential facilities, a “chemical use assessment” is a comprehensive assessment and assessment summary; specifies assessor qualifications.
- 27 American Society of Addiction Medicine criteria or ASAM criteria.**  
Amends § 254B.01 by adding subd. 2a. Adds definition of “American Society of Addiction Medicine criteria or ASAM criteria” in SUD treatment chapter.
- 28 Behavioral health fund.**  
Amends § 254B.01 by adding subd. 2a. Defines “behavioral health fund.”
- 29 Client.**  
Amends § 254B.01 by adding subd. 2b. Defines “client.”

**Section Description - Article 2: Substance Use Disorder Direct Access**

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- 30     **Co-payment.**  
Amends § 254B.01 by adding subd. 2c. Defines “co-payment.”
- 31     **Department.**  
Amends § 254B.01 by adding subd. 4c. Defines “department.”
- 32     **Drug and Alcohol Abuse Normative Evaluation System or DAANES.**  
Amends § 254B.01 by adding subd. 4d. Defines “Drug and Alcohol Abuse Normative Evaluation System” or “DAANES.”
- 33     **Local agency.**  
Amends § 254B.01, subd. 5. Updates definition of “local agency” by removing placement authority and inserting behavioral health fund eligibility determination.
- 34     **Minor child.**  
Amends § 254B.01 by adding subd. 6a. Defines “minor child.”
- 35     **Policyholder.**  
Amends § 254B.01 by adding subd. 6b. Defines “policyholder.”
- 36     **Responsible relative.**  
Amends § 254B.01 by adding subd. 9. Defines “responsible relative.”
- 37     **Skilled treatment services.**  
Amends § 254B.01 by adding subd. 10. Defines “skilled treatment services.”
- 38     **Third-party payment source.**  
Amends § 254B.01 by adding subd. 10. Defines “third-party payment source.”
- 39     **Vendor.**  
Amends § 254B.01 by adding subd. 11. Defines “vendor.”
- 40     **Local agency duties.**  
Amends § 254B.03, subd. 1. Removes language relating to local agency placement authority and inserts language requiring the local agency to determine behavioral health fund financial eligibility. Removes additional language relating to local agency assessments and cross-references to rules.
- 41     **Behavioral health fund payment.**  
Amends § 254B.03, subd. 2. Removes language regarding county provision of substance use disorder services from the county’s own resources.

**Section Description - Article 2: Substance Use Disorder Direct Access**

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- 42      **Rules; appeal.**  
Amends § 254B.03, subd. 5. Removes language related to county SUD service placement and referrals.
- 43      **Scope and applicability.**  
Amends § 254B.04, subd. 1. Removes eligibility language; inserts language outlining the scope of the section governing the behavioral health fund.
- 44      **Client eligibility.**  
Amends § 254B.04 by adding subd. 1a. Inserts eligibility criteria for behavioral health fund services (stricken from subdivision 1 above). Adds further details on eligibility criteria that are currently in Minnesota Rules, part 9530.7015.
- 45      **Eligibility for room and board services for persons in outpatient substance use disorder treatment.**  
Amends § 254B.04, subd. 2a. Removes language related to county assessment and placement in residential treatment; inserts language specific to room and board services; adds assessment dimension related to readiness to change.
- 46      **Assessment criteria and risk descriptions.**  
Amends § 254B.04 by adding subd. 4. Codifies required SUD assessment criteria dimensions and risk descriptions currently in Minnesota Rules, part 9530.6622.
- 47      **Local agency responsibility to provide services.**  
Amends § 254B.04 by adding subd. 5. Allows a local agency to employ individuals for administrative activities and to facilitate access to SUD treatment services.
- 48      **Local agency to determine client financial eligibility.**  
Amends § 254B.04 by adding subd. 6. Adds language currently in Minnesota Rules, part 9530.7020. Requires the local agency to determine a client's financial eligibility for the behavioral health fund; requires the agency to pay for eligible clients; specifies how the agency must determine client eligibility; and specifies third-party payment requirements.
- 49      **Client fees.**  
Amends § 254B.04 by adding subd. 7. Adds language currently in Minnesota Rules, part 9530.7022. Specifies that a client whose income is within current household size and income guidelines will not pay a fee.

**Section Description - Article 2: Substance Use Disorder Direct Access**

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- 50 Vendor must participate in DAANES system.**  
Amends § 254B.04 by adding subd. 8. Adds language requiring behavioral health fund vendors to participate in DAANES, a requirement currently in Minnesota Rules, part 9530.7030.
- 51 American Society of Addiction Medicine standards of care.**  
Proposes coding for § 254B.19. Requires eligible vendors to implement the standards set by the ASAM for the respective level of care, for each client assigned an ASAM level of care. Lists additional requirements for ASAM levels 0.5, 1.0, 2.1, 2.5, 3.1, 3.3, 3.5, 3.2, and 3.7.  
  
Requires a license holder to document formal patient referral arrangement agreements for specified ASAM levels of care not provided by the license holder.  
  
Requires documentation of evidence-based practice utilization; lists required elements.  
  
Requires eligible vendors providing services under ASAM levels of care to have a program outreach plan; lists plan requirements.  
  
Makes section effective January 1, 2024.
- 52 Vendor payment for drug dependent persons.**  
Amends § 256D.09, subd. 2a. Updates a cross-reference related to qualified assessors.
- 53 Substance use disorder.**  
Amends § 256L.03, subd. 2. Updates cross-references and terminology related to qualified assessors and direct access.
- 54 Substance use disorder assessments.**  
Amends § 256L.12, subd. 8. Updates cross-references and terminology.
- 55 Investigation.**  
Amends § 260B.157, subd. 1. Updates cross-references and terminology related to qualified assessors and direct access.
- 56 Juvenile treatment screening team.**  
Amends § 260B.157, subd. 3. Updates cross-reference.
- 57 Juvenile treatment screening team.**  
Amends § 260C.157, subd. 3. Updates cross-reference.

**Section Description - Article 2: Substance Use Disorder Direct Access**

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- 58      **General duties.**  
Amends § 260E.20, subd. 1. Updates terminology and cross-reference.
- 59      **Establishment of team.**  
Amends § 299A.299, subd. 1. Updates cross-reference.
- 60      **Revisor instruction.**  
Instructs the revisor to renumber the subdivisions in section 254B.01 and correct any cross-references.
- 61      **Repealer.**  
Repeals §§ 169A.70, subd. 6 (alcohol safety programs; chemical use assessments; method of assessment); 245G.05, subd. 2 (SUD assessment summary); 245G.06, subd. 2 (individual treatment plan contents); 245G.22, subd. 19 (opioid treatment programs; placing authorities); 254A.02, subd. 8a (placing authority definition); 254A.16, subd. 6 (responsibilities of the commissioner; monitoring of placing authorities); 254A.19, subds. 1a, 2, 5 (chemical use assessments; emergency room patients; probation officer as contact; assessment via telehealth); 254B.04, subds. 2b, 2c (eligibility for behavioral health fund services); and 254B.041, subd. 2 (substance use disorder rules; vendor collections; rule amendment).  
  
Repeals Minnesota Rules, parts 9530.7000, subparts 1, 2, 5, 6, 7, 8, 9, 10, 11, 13, 14, 15, 17a, 19, 20, and 21; 9530.7005; 9530.7010; 9530.7012; 9530.7015, subparts 1, 2a, 4, 5, and 6; 9530.7020, subparts 1, 1a, and 2; 9530.7021; 9530.7022, subpart 1; 9530.7025; and 9530.7030, subpart 1.

### **Article 3: Peer Recovery and Recovery Community Organization Requirements**

This article modifies recovery peer qualifications and scope of practice, and establishes requirements for recovery community organizations to be eligible vendors of peer support services.

**Section Description - Article 3: Peer Recovery and Recovery Community Organization Requirements**

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- 1      **Additional treatment service.**  
Amends § 245G.07, subd. 2. Modifies cross-reference to new peer recovery qualifications. Makes this section effective upon federal approval.

**Section Description - Article 3: Peer Recovery and Recovery Community Organization Requirements**

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**2 Recovery peer qualifications.**

Amends § 245G.11, subd. 8. Replaces language with cross-references to recovery peer qualifications and scope of practice established in chapter 245I. Makes this section effective upon federal approval.

**3 Recovery peer qualifications.**

Amends § 245I.04, subd. 18. Requires recovery peers to:

- 1) have a minimum of one year in recovery from SUD; and
- 2) hold a current credential from the Minnesota Certification Board, the Upper Midwest Indian Council on Addictive Disorders, or the National Association for Alcoholism and Drug Abuse Counselors.

Requires a recovery peer with a credential from a Tribal Nation to hold a credential listed in clause (2).

**4 Recovery peer scope of practice.**

Amends § 245I.04 by adding subd. 19. Requires recovery peers to:

- 1) provide individualized peer support;
- 2) promote a client's recovery goals, self-sufficiency, self-advocacy, and development of natural supports; and
- 3) support a client's maintenance of skills.

**5 Recovery community organization.**

Amends § 254B.01, subd. 8. Adds that a recovery community organization must be a nonprofit; updates terminology.

**6 Licensure required.**

Amends § 254B.05, subd. 1. Lists qualifications for recovery community organizations to be eligible vendors; requires recovery community organization eligible vendors to meet membership or accreditation requirements of the Association of Recovery Community Organizations, the Council on Accreditation of Peer Recovery Support Services, or a Minnesota statewide recovery community organization identified by the commissioner.

Requires a vendor of peer support services approved by the commissioner to meet listed qualification requirements by June 30, 2024, in order to maintain eligibility. Specifies that an entity that does not meet the requirements by June 30, 2024, is subject to monetary recovery for services provided after that date.

**Section Description - Article 3: Peer Recovery and Recovery Community Organization Requirements**

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Allows a recovery community organization to appeal for reconsideration as an eligible vendor if denied.

**7 State agency hearings.**

Amends § 256.045, subd. 3. Adds aggrieved recovery community organization seeking behavioral health fund vendor eligibility to list of entities for whom a state agency hearing is available; specifies scope of judicial review.

**8 Scope.**

Amends § 256B.0615, subd. 1. Makes technical change.

**9 Certified peer specialist certification.**

Amends § 256B.0615, subd. 5. Replaces certification requirements with reference to qualification standards in chapter 245I.

## **Article 4: Miscellaneous**

This article contains miscellaneous changes to add entities to the list of opioid settlement settling defendants, and clarify the definition of “court examiner” and the effective dates of previous laws.

**Section Description - Article 4: Miscellaneous**

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**1 Definitions.**

Amends § 3.757, subd. 1. Adds the following entities to the definition of “settling defendant” for opioid settlements:

- Teva Pharmaceuticals
- Allergan plc
- CVS Health Corporation
- Walgreens Boots Alliance, Inc.
- Walmart, Inc.

**2 Special contracts; bordering states.**

Amends § 245.50, subd. 5. Adds a cross-reference to the definition of a “court examiner” under section 253B.02, subdivision 4d, to clarify the requirements for an individual licensed in a bordering state to act as a court examiner, if a Minnesota resident subject to a civil commitment is admitted to a facility in a bordering state.



**Section Description - Article 4: Miscellaneous**

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**3 Effective date.**

Amends Laws 2021, First Special Session ch. 7, art. 2, § 17, the effective date. Removes language related to federal approval in an effective date for a section related to background studies because federal approval was not required.

**4 Effective date.**

Amends Laws 2021, First Special Session ch. 7, art. 6, § 12, the effective date. Removes language related to federal approval in an effective date for a section related to MA telemonitoring services because federal approval was not required.

**5 Effective date.**

Amends Laws 2021, First Special Session ch. 7, art. 11, § 18, the effective date. Removes language related to federal approval in an effective date for a section related to MA substance use disorder treatment provider participation because federal approval was not required.

**6 Effective date.**

Amends Laws 2021, First Special Session ch. 7, art. 13, § 43, the effective date. Removes language related to federal approval in an effective date for a section related to DWRS payments for residential support services because federal approval was not required.

**7 Effective date.**

Amends Laws 2022, ch. 98, art. 4, § 37, the effective date. Removes language related to federal approval in an effective date for a section related to children's intensive behavioral health services required covered service components because federal approval was not required.



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