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SENATE STATE OF MINNESOTA NINETY-SECOND SESSION

S.F. No. 3583

(SENATE AUTHORS: ABELER and Wiklund)					
DATE	D-PG	OFFICIAL STATUS			
02/28/2022	5160	Introduction and first reading			
		Referred to Human Services Licensing Policy			
03/16/2022		Comm report: To pass as amended and re-refer to Human Services Reform Finance and Policy			

1.1	A bill for an act
1.2 1.3	relating to human services; modifying various provisions relating to substance use disorder treatment; amending Minnesota Statutes 2020, sections 148F.11, by adding a subdivision; 245A.19; 245F.04, subdivision 1; 245G.01, by adding a subdivision; 245G.06, subdivision 3, by adding subdivisions; 245G.07, by adding subdivisions; 245G.12.
1.7	BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MINNESOTA:
1.8	Section 1. Minnesota Statutes 2020, section 148F.11, is amended by adding a subdivision
1.9	to read:
1.10	Subd. 2a. Former students. (a) A former student may practice alcohol and drug
1.11	counseling for 90 days from the former student's degree conferral date from an accredited
1.12	school or educational program or from the last date the former student received credit for
1.13	an alcohol and drug counseling course from an accredited school or educational program.
1.14	The former student's practice must be supervised by a supervisor.
1.15	(b) The former student's right to practice automatically expires after 90 days from the
1.16	former student's degree conferral date or date of last course credit, whichever occurs last.
1.17	Sec. 2. Minnesota Statutes 2020, section 245A.19, is amended to read:
1.18	245A.19 HIV TRAINING IN CHEMICAL DEPENDENCY <u>SUBSTANCE USE</u>
1.19	DISORDER TREATMENT PROGRAM.
1.20	(a) Applicants and license holders for ehemical dependency substance use disorder
1.21	residential and nonresidential programs must demonstrate compliance with HIV minimum
1.22	standards prior to before their application being is complete. The HIV minimum standards

2.1 contained in the HIV-1 Guidelines for chemical dependency <u>substance use disorder</u> treatment
 2.2 and care programs in Minnesota are not subject to rulemaking.

(b) Ninety days after April 29, 1992, The applicant or license holder shall orient all
chemical dependency substance use disorder treatment staff and clients to the HIV minimum
standards. Thereafter, orientation shall be provided to all staff and clients, within 72 hours
of employment or admission to the program. In-service training shall be provided to all staff
on at least an annual basis and the license holder shall maintain records of training and
attendance.

2.9 (c) The license holder shall maintain a list of referral sources for the purpose of making
2.10 necessary referrals of clients to HIV-related services. The list of referral services shall be
2.11 updated at least annually.

(d) Written policies and procedures, consistent with HIV minimum standards, shall be
developed and followed by the license holder. All policies and procedures concerning HIV
minimum standards shall be approved by the commissioner. The commissioner shall provide
training on HIV minimum standards to applicants must outline the content required in the
annual staff training under paragraph (b).

2.17 (e) The commissioner may permit variances from the requirements in this section. License
2.18 holders seeking variances must follow the procedures in section 245A.04, subdivision 9.

2.19 Sec. 3. Minnesota Statutes 2020, section 245F.04, subdivision 1, is amended to read:

Subdivision 1. General application and license requirements. An applicant for licensure 2.20 as a clinically managed withdrawal management program or medically monitored withdrawal 2.21 management program must meet the following requirements, except where otherwise noted. 2.22 All programs must comply with federal requirements and the general requirements in sections 2.23 626.557 and 626.5572 and chapters 245A, 245C, and 260E. A withdrawal management 2.24 program must be located in a hospital licensed under sections 144.50 to 144.581, or must 2.25 be a supervised living facility with a class A or B license from the Department of Health 2.26 under Minnesota Rules, parts 4665.0100 to 4665.9900. 2.27

2.30 Subd. 13b. Guest speaker. "Guest speaker" means an individual who works under the
 2.31 direct observation of the license holder to present to clients on topics in which they have
 2.32 expertise and that the license holder has determined to be beneficial to client's recovery.

^{2.28} Sec. 4. Minnesota Statutes 2020, section 245G.01, is amended by adding a subdivision to2.29 read:

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3.1	Tribally licen	used programs have a	autonomy to ide	entify the qualifications	of their guest
3.2	speakers.				
3.3		nesota Statutes 2020), section 245G.	06, is amended by addin	g a subdivision to
3.4	read:				
3.5	<u>Subd. 2a.</u>	Documentation of	treatment serv	ices. The license holder	must ensure that
3.6	the staff mem	ber who provides th	ne treatment serv	vice documents in the cl	ient record the
3.7	date, type, an	d amount of each tro	eatment service	provided to a client with	hin seven days of
3.8	providing the	e treatment service.			
3.9	EFFECT	TIVE DATE. This se	ection is effectiv	re August 1, 2022.	
3.10	Sec. 6. Min	nesota Statutes 2020), section 245G.	06, is amended by addin	g a subdivision to
3.11	read:				-
3.12	Subd. 2b.	Client record docu	imentation req	uirements. (a) The licer	nse holder must
3.13				nt that occurs at the pro	
3.14	hours of the e	event. A significant e	event is an event	that impacts the client's	relationship with
3.15	other clients,	staff, the client's far	nily, or the clier	nt's treatment plan.	
3.16	(b) A resi	dential treatment pro	ogram must doc	ument in the client reco	rd the following
3.17	items within	24 hours that each o	ccurs:		
3.18	<u>(1) medic</u>	al and other appoint	ments the client	attended if known by th	ne provider;
3.19	(2) concer	rns related to medica	ations that are no	ot documented in the me	edication
3.20	administratio	n record; and			
3.21	(3) concer	rns related to attenda	ance for treatme	nt services, including th	e reason for any
3.22	client absence	e from a treatment s	ervice.		
3.23	Sec. 7. Min	nesota Statutes 2020), section 245G.	06, subdivision 3, is am	ended to read:
3.24	Subd. 3. I	Documentation of t	reatment servic	es; Treatment plan rev	v iew. (a) A review
3.25	of all treatme	ent services must be	documented we	ekly and include a revie	w of:
3.26	(1) care c	oordination activitie	s;		
3.27	(2) medie	al and other appoint	ments the elient	attended;	
3.28	(3) issues	related to medicatior	is that are not do	cumented in the medicat	ion administration
3.29	record; and				

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(4) issues related to attendance for treatment services, including the reason for any client 4.1 absence from a treatment service. 4.2 (b) A note must be entered immediately following any significant event. A significant 4.3 event is an event that impacts the client's relationship with other clients, staff, the client's 4.4 family, or the client's treatment plan. 4.5 (c) (a) A treatment plan review must be entered in a client's file weekly at least every 4.6 28 calendar days or after each treatment service, whichever is less frequent, by the staff 4.7 member providing the service an alcohol and drug counselor. The review must indicate the 4.8 span of time covered by the review and each of the six dimensions listed in section 245G.05, 4.9 subdivision 2, paragraph (c). The review must: 4.10 (1) indicate the date, type, and amount of each treatment service provided and the client's 4.11 response to each service; 4.12 (2) (1) address each goal in the treatment plan and whether the methods to address the 4.13 goals are effective; 4.14 (3) (2) include monitoring of any physical and mental health problems; 4.15 (4) (3) document the participation of others; 4.16 (5) (4) document staff recommendations for changes in the methods identified in the 4.17 treatment plan and whether the client agrees with the change; and 4.18 (6) (5) include a review and evaluation of the individual abuse prevention plan according 4.19 to section 245A.65. 4.20 (d) (b) Each entry in a client's record must be accurate, legible, signed, and dated. A late 4.21 entry must be clearly labeled "late entry." A correction to an entry must be made in a way 4.22 in which the original entry can still be read. 4.23 4.24 **EFFECTIVE DATE.** This section is effective August 1, 2022. Sec. 8. Minnesota Statutes 2020, section 245G.07, is amended by adding a subdivision to 4.25 read: 4.26 Subd. 1a. Transition follow-up counseling. (a) A client that was discharged from a 4.27 treatment center may, pursuant to the client's request, receive individual transition follow-up 4.28 counseling services from the treatment center from which the client was discharged for up 4.29 to one year following the client's discharge. The transition follow-up counseling must be 4.30 designed to address the client's needs related to substance use, develop strategies to avoid 4.31

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harmful subst	ance use after disch	arge, and help	the client obtain the	services necessary to
establish or m	aintain a lifestyle fr	ree from the h	armful effects of subs	stance use disorder.
(b) A prov	vider that provides the	ransition follo	w-up counseling serv	vices under paragraph
a) may bill fo	or the services descr	ribed in subdi	vision 1, paragraph (a	a), at the same rate as
or individual	counseling session	<u>s.</u>		
(c) In any	given month, a clie	nt must not ex	ceed four sessions of	f treatment services
under subdivi	sion 1, paragraph (a	ı <u>).</u>		
(d) A prov	ider must document	in the client's	file the services provi	ided under this section.
The treatment	provider is not requ	uired to condu	act a new comprehens	sive assessment and is
not required to	open or reopen a tre	eatment plan o	r document a review o	of all treatment services
n a treatment	plan review as requ	uired by section	on 245G.06, subdivisi	ion 3.
(e) Prepaio	d medical assistance	e plans under	section 256B.69 must	t allow members to
access this be	nefit at their discret	ion.		
EFFECTI	IVE DATE. This se	ection is effect	tive January 1, 2023.	
Sec. 9. Minr	nesota Statutes 2020	, section 2450	6.07, is amended by a	adding a subdivision to
read:				
Subd. 2a.	Transition support	t services. (a)	The commissioner m	nust offer transition
upport servic	es for six months to	o a person wh	<u>o:</u>	
<u>(1) has con</u>	mpleted a treatment	program acco	ording to section 245	G.14, subdivision 3,
hat required	15 or more hours of	treatment ser	vices per week; and	
(2) receive	es medical assistanc	e under chapt	er 256B or services f	rom the behavioral
nealth fund ur	nder chapter 254.			
(b) The tra	ansition support serv	vices must inc	lude:	
<u>(1) a \$500</u>	monthly voucher for	or recovery sa	fe housing;	
(2) \$500 p	er month for food s	upport unless	the person is eligible	e for more, whichever
is greater;			¥	
(3) child c	are up to 20 hours p	er week unles	s the person is eligibl	le for more, whichever
is greater; and			v	
(4) transpo	ortation services to e	ensure attenda	nce at group meeting	gs and ability to look
for work and	meet needs of daily	living. Trans	portation services mu	st include:
(i) for pers	sons well-served by	public transit	, a monthly public tra	ansit pass; or

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6.1	(ii) for p	ersons who are not wel	ll-served by p	ublic transit or who have	e access to personal
6.2	transportatio	on, a \$120 gas card eac	ch month.		
6.3	<u>(c)</u> The	commissioner must ma	aximize existi	ng federal and state fun	ding sources the
6.4	person is eli	igible for to implement	t this subdivis	ion and may not count	these benefits as
6.5	income for	the purposes of qualify	ving for public	assistance programs.	
6.6	(d) Thes	e transition services ar	e provided to	eligible recipients for t	he full duration of
6.7	six months	regardless of public as	sistance eligit	ility during the six mor	nth period of time.
6.8	(e) Recip	pients who do not have a	any transporta	tion needs for a medical	ly necessary service
6.9	in a given m	onth or who have recei	ved a transit p	ass for that month throu	gh another program
6.10	administere	d by a county or Tribe	are not eligib	le for a transit pass that	month.
6.11	(f) This	coordination of transit	ion services is	available to a person r	o more than one
6.12	time each y	ear.			
6.13	Sec. 10. N	Ainnesota Statutes 2020	0, section 245	G.12, is amended to rea	ad:
6.14		2 PROVIDER POLIC			
6.15	A licens	e holder must develop	a written poli	cies and procedures ma	unual, indexed
6.16	according to	o section 245A.04, sub	division 14, p	aragraph (c), that provi	des staff members
6.17	immediate access to all policies and procedures and provides a client and other authorized				
6.18	parties access to all policies and procedures. The manual must contain the following				
6.19	materials:				
6.20	(1) asses	ssment and treatment p	lanning polic	es, including screening	; for mental health
6.21	concerns and treatment objectives related to the client's identified mental health concerns				
6.22	in the client	's treatment plan;			
6.23	(2) polic	ies and procedures reg	arding HIV a	ccording to section 245	A.19;
6.24	(3) the li	icense holder's method	s and resource	es to provide information	on on tuberculosis
6.25	and tubercu	losis screening to each	client and to	report a known tubercu	losis infection
6.26	according to	o section 144.4804;			
6.27	(4) perso	onnel policies accordin	g to section 2	45G.13;	
6.28	(5) polic	ies and procedures that	t protect a cli	ent's rights according to	section 245G.15;
6.29	(6) a me	dical services plan acc	ording to sect	ion 245G.08;	
6.30	(7) emer	rgency procedures acco	ording to secti	on 245G.16;	
6.31	(8) polic	ies and procedures for	maintaining c	lient records according	to section 245G.09;

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- (9) procedures for reporting the maltreatment of minors according to chapter 260E, and
 vulnerable adults according to sections 245A.65, 626.557, and 626.5572;
- 7.3 (10) a description of treatment services that: (i) includes the amount and type of services
- 7.4 provided; (ii) identifies which services meet the definition of group counseling under section
- 7.5 245G.01, subdivision 13a; and (iii) identifies which groups and topics a guest speaker could
- 7.6 provide services under the direct observation of a licensed alcohol and drug counselor; and
- 7.7 (iv) defines the program's treatment week;
- 7.8 (11) the methods used to achieve desired client outcomes;
- 7.9 (12) the hours of operation; and
- 7.10 (13) the target population served.