Minnesota Department of Human Services
Operations
2015 Legislative Session Summary of Policy and Budget bills

Updated ~ June 16, 2015

AGENCYWIDE

Contested Case Electronic Filing

Laws of Minnesota 2015, Chapter 63

Effective January 1, 2016

- **Electronic Filing in Contested Case Hearings**
  - Allows a state agency and any other party to a contested case hearing to file documents with the Office of Administrative Hearings electronically. Also allows an agency to file rule related materials electronically. *Article 1,* Sections *1-8*

Omnibus HHS Budget Bill

Laws of Minnesota 2015, Chapter 71

Effective July 1, 2015, unless otherwise specified

- **Mental Health Data ($10,000 in FY16)**
  - Provides that mental health data (private data on individuals) may be disclosed to personnel of the welfare system working in the same program or providing services to the same individual or family to the extent necessary to coordinate services, provided that a health record may be disclosed only as allowed. It also requires county boards to have a procedure in place to allow personnel of the welfare system and health care providers who have access to mental health data to have access to the names and addresses of persons who are receiving mental health services through the county. Requires the commissioner to submit a **report** about possible savings to health care programs as a result of this data sharing. (§13.46, Subd. 7; 245.467, Subd. 6; and 245.4876, Subd. 7). *Article 2, Sections 1, 2, 4, 12, & 13 (Tracking line 148)*

- **Periodic Data Matching to evaluate continued eligibility (savings of $25.8M in FY16-17; and $138.3M in FY18-19)**
  - Requires DHS to obtain electronic information about Medical Assistance (MA) and MinnesotaCare (MnCare) recipients on the MNsure information system from federal and state data sources accessible to the MNsure information system and use that data to evaluate continued eligibility between regularly scheduled renewals. The data matches will begin on March 1, 2016. DHS is required to conduct a data match for all MA or MnCare recipients at least once during the recipient's 12-month period of eligibility. If the data matching indicates a recipient may no longer qualify for MA or MnCare, DHS will notify the recipient and allow the recipient no more than 30 days to confirm the information obtained through the match. An individual may appeal any termination of eligibility for benefits under this section. DHS must submit a **report** to the legislature by 9/1/2017, and each September 1st thereafter, that includes the number of cases affected by periodic data matching under this section, the number of recipients identified as possibly ineligible as a result of the data match, and the number of recipients whose eligibility was terminated as a result of a periodic data match. The report must also specify, for recipients whose eligibility was terminated, how many cases were closed due to failure to cooperate. (§256B.0561) *Article 11, Section 17; Article 14, lines 473.1-473.23 and lines 483.22-483.33 (Tracking line 677)*

Omnibus State Government Finance Bill

Laws of Minnesota 2015, Chapter 77

Effective July 1, 2015, unless otherwise specified

- **Return on Taxpayer Investment ($243,000 to MMB for FY16-17)**

- Provides funding to Minnesota Management and Budget to develop and implement a return on Taxpayer investment methodology using the Pew-MacArthur Results first Framework. MMB is required to engage DHS in this process. *Article 1, Section 13. (Tracking line 107, in State Government Finance Bill)*

COMMUNITY RELATIONS

Silver Alert bill

Laws of Minnesota 2015, Chapter 36

Effective August 1, 2015

- **Silver Alert Task Force**
  - Creates the Silver Alert Task Force and has one member of the Cultural and Ethnic Leadership Council, appointed by the commissioner, to the Task Force. *Article 1, Section 2.*

Omnibus Human Services Policy Bill

Laws of Minnesota 2015, Chapter 78

Effective August 1, 2015, unless otherwise specified

- **Cultural and Ethnic Communities Leadership Council Extension**
  - Codifies the Cultural and Ethnic Communities Leadership Council (Laws of Minnesota 2013, chapter 107, article 2), provides clarification about membership of the council, and extends the council to 2020. (§256.041)
  - Effective retroactively from March 15, 2015. *Article 4, Section 50.*

FINANCIAL OPERATIONS

Omnibus HHS Budget Bill

Laws of Minnesota 2015, Chapter 71

Operations Provisions

Effective July 1, 2015, unless otherwise specified

- **Parental Fees reduction (cost is $844K in FY16-17; and $844K in FY18-19)**
  - Reduces the parental fee contribution by 10-percent. (§252.27, Subd. 2a) *Article 7, Section 24. (Tracking line 567)*

HUMAN RESOURCES

State Employee Labor Agreements and Compensation Plans Bill

Laws of Minnesota 2015, Chapter 47

Effective the day following final enactment (May 20, 2015)

- **Labor agreements and compensation plans.**
  - Ratifies labor agreements and compensation plans governing executive branch employees. The labor agreements that are ratified in this section cover employees represented by: MN State University Administrative and Service Faculty; MN State College Faculty; MN Nurses Association; Inter Faculty Organizations; MnSCU Personnel Plan for Administrators; and the MN Law Enforcement Association. *Signed by the Governor 5/19/2015.*

Omnibus Pension Bill

Laws of Minnesota 2015, Chapter 68

- **Corrections Employee Retirement Program Eligibility**
  - Modifies Corrections Employee Retirement Program (CERP) eligibility criteria for DHS employees who were formerly at the Cambridge Specialty Health System prior to the facility's closure. The bill changes one of the eligibility criteria to require that the employee maintain employment in the "direct care and treatment of patients" instead of working in the Direct Care and Treatment administration at

DHS. This change aligns CERP eligibility for former Cambridge employees with the patient contact requirements for general CERP eligibility. This change is effective retroactively to August 1, 2014. *Article 12, Section 1.*

Omnibus HHS Budget Bill
Laws of Minnesota 2015, Chapter 71
Effective July 1, 2015, unless otherwise specified

- **Insurance contributions (Appropriation of $17K for FY16-17; $85K for FY18-19)**
  - Requires the state to pay the employer contribution for health and dental benefits under the Minnesota State Retirement System's Correctional Employee Retirement Plan (CERP) or General Plan for employees assaulted by a client or patient at the MN sex offender program or a state-operated forensic services program, who are permanently physically disabled as a direct result of the assault. Effective the day following final enactment and applies to a person assaulted by an inmate, client, or patient on or after that date. Language is also in Laws of Minnesota 2015, Chapter 65, Article 5, section 1. (§43A.241) *Article 4, Section 1 (Tracking line 943)*

INTERNAL AUDITS

Omnibus HHS Budget Bill
Laws of Minnesota 2015, Chapter 71
Operations Provisions
Effective July 1, 2015, unless otherwise specified

- **Managed Care Organizations (MCO) quality assurance audits (Appropriated $684K for FY16-17; and $652K for FY18-19)**
  - Allows DHS to conduct ad hoc audits of MCO administrative and medical expenses. Specifies expense categories and audit procedures. DHS shall **report** to the legislature by February 1, 2016, and each February 1 thereafter, the number of ad hoc audits conducted in the past calendar year and results of these audits. (§256B.69, Subd. 9d) *Article 11, Section 36 (Tracking line 947)*

Omnibus State Government Finance Bill
Laws of Minnesota 2015, Chapter 77
Effective July 1, 2015, unless otherwise specified

- **County Financial Audits**
  - Allows private certified public accounting agencies to conduct financial audits of counties. The new language allows for the State Auditor and a CPA firm to accept the records and audit of DHS instead of auditing county human services funds. *Article 2, Section 3.*

MANAGEMENT SERVICES

Omnibus Transportation Finance Bill
Laws of Minnesota 2015, Chapter 75
Effective July 1, 2015, unless otherwise specified

- **Capitol Complex Security ($3.14M to Public Safety for FY16-17)**
  - Increases the base appropriation to the Department of Public Safety by $1.57M annually to fund a uniform contract for Capitol Complex security. *Article 1, Section 5. (Tracking line 254, in Transportation Finance Bill)*

OFFICE FOR EQUITY, PERFORMANCE, & DEVELOPMENT

Omnibus State Government Finance Bill
Laws of Minnesota 2015, Chapter 77
Effective July 1, 2015, unless otherwise specified

- **Accommodation Reimbursement Account Created ($400,000 to Admin for FY16-17)**
  - Provides $400,000 to the Department of Administration for reimbursing state agencies for expenses incurred in making reasonable accommodations for state employees. This is intended for new job applicants; employees for services needed on a periodic or ongoing basis; or onetime employee expenses that total more than $1,000 in a fiscal year. *Article 2, Section 8. (Tracking line 83, in State Government Finance Bill)*

Omnibus Human Services Policy Bill
Laws of Minnesota 2015, Chapter 78
Effective August 1, 2015, unless otherwise specified

- **Performance Management System Terminology Change**
  - Clarifies the intent of the term "standard" by changing it to "threshold" throughout the Human Services Performance Management System (§402A.12, 402A.16, subd 2 and 4, 402A.18). *Article 4, Sections 54-57.*

OFFICE OF INDIAN POLICY
- See OIG Background Studies

OFFICE OF INSPECTOR GENERAL (OIG) – Background Studies Division

Revisor's Bill
Laws of Minnesota 2015, Chapter 21
Effective August 1, 2015

- **Background Study clarifications**
  - Removes duplicative language related to background studies for the PCA program and the CFSS program. A cross reference is updated. (§245C.03, subd 2; §245C.04, subd 1) *Article 1, Sections 48-49.*

Omnibus HHS Budget Bill
Laws of Minnesota 2015, Chapter 71
Operations Provisions
Effective July 1, 2015, unless otherwise specified

- **Background Studies on Group Residential Housing Providers (budget neutral)**
  - Requires DHS to conduct background studies for license holders and managerial officials operating a Group Residential Housing establishment. Employees and volunteers that have direct contact with clients are also required to have a background study. The providers must pay a $20 fee per study to DHS for the cost of conducting the background study. (§245C.03, Subd. 10; 245C.10, Subd. 11; 256I.04, Subd. 2c; and 256I.04, Subd. 2e) Effective July 1, 2016. *Article 1, Sections 3, 6, 28, & 30. (Tracking line 479)*

- **Background Studies on child protection workers or social services staff having responsibility for child protective duties (budget neutral)**
  - County employees hired on or after July 1, 2015, who have child protection responsibilities or current county employees who are assigned new child protection duties on or after July 1, 2015, are required to undergo a background study. The county may complete these background studies by either using the DHS NETStudy 2.0 system or an alternative process defined by the county. For those child protection background study requests that come from the county to DHS, DHS is required to conduct the background studies. For the background studies completed by DHS under this subdivision, DHS shall not make a disqualification decision, but shall provide the background study information received to the county that initiated the study. The provision also requires DHS to recover the cost of the background studies initiated by a county through a fee of $20 per study. (§245C.03, Subd. 11;

245C.04, Subd. 10; 245C.10, Subd. 12; and 626.559, Subd. 1b) *Article 1, Sections 4, 5, 7 & 100. (No tracking)*

- **Background Studies on non-Minnesota residents in certain employment settings (budget neutral)**
  - Requires DHS to conduct background studies on non-Minnesota residents who provide direct-care services in nursing homes, home care agencies, or boarding care homes, to (1) check for substantiated findings of maltreatment in the individual's state of residence when that information is available, and (2) check the national Crime Information Center database. (§144.057, Subd. 1; 245C.08, Subd. 1) *Article 7, Sections 2 & 8. (Tracking line 723)*

- **Background Study; Tribal Organizations (budget neutral)**
  - Allows tribes to contract with DHS to do federal-level background studies on individuals who want to work in tribally licensed nursing facilities. (§245C.12) *Article 7, Section 9 (Tracking line 723)*

- **Background Studies on Non-emergency Medical Transportation (NEMT) providers (budget neutral)**
  - Requires DHS to conduct background studies on NEMT providers which includes any persons with a direct or indirect ownership interest of five-percent or higher in the transportation service provider; each controlling individual; managerial officials; each driver employed by the transportation service provider to assist a passenger during transport; and all employees of the transportation service agency who provide administrative support. The provision also requires special transportation providers to pay a fee of $20 to DHS for each background study conducted. (§174.30, Subd. 10; 245C.03, Subd. 11; and 245C.10, Subd. 12).
  - Effective January 1, 2016. *Article 11, Sections 7-9 (tracking line 723)*

Omnibus Human Services Policy Bill

Laws of Minnesota 2015, Chapter 78

Signed by the Governor on 5/22/2015.

Effective August 1, 2015, unless otherwise specified

- **"Access to Persons Served by a program" Definition Modified**
  - This changes the definition of "access to persons served" so that a background study disqualification extends to a person who may access any personal, financial, or health information on individuals served by the program. (§245C.02, subd 2) *Article 4, Section 33.*

- **Annual Study Requirement for Background Studies**
  - Exempts supplemental nursing service agencies, personnel agencies, and education programs; it also removes the need for supplemental nursing services agency staff, unlicensed waiver program staff, and training/education program participants to initiate new background studies on an annual basis. These changes apply to studies initiated by these agencies through NETStudy 2.0. (§245C. 04, subd. 4, 5, and 6). Effective the day following enactment. *Article 4, Sections 34-36*

- **Background Study Clarifications**
  - Technical & clarifying changes are made to the background study program initiated during the 2014 session.
  - Section 37 is effective the day following enactment (§245C. 05, subd. §245C. 20, subd. 2 and 2a). *Article 4, Sections 37, 40, 41.*

- **Transferability of Background Studies**
  - Clarifies that a background study is transferable across entities owned and controlled by the same entity. These changes apply to studies initiated by these agencies through NETStudy 2.0. (§245C.07) Effective the day following enactment. *Article 4, Section 38.*

- **DHS Background Studies Exempt from Chap. 181**

- Exempts background studies conducted under 245C from the restrictions regarding employees and prospective employees from paying for their own background study. (§245C.10, subd 1a). Effective the day following enactment. *Article 4, Section 39.*

OFFICE OF INSPECTOR GENERAL (OIG) -- Financial Fraud and Abuse Investigation Division

Omnibus HHS Budget Bill

Laws of Minnesota 2015, Chapter 71

Operations Provisions

Effective July 1, 2015, unless otherwise specified

- **Child Care Assistance Program Failure to comply with attendance record requirements (savings of $206K for FY16-17; and $100K for FY18-19)**
  - This provision enforces the Child Care Assistance Program (CCAP) requirements that a child care provider must maintain accurate attendance records. It allows DHS to periodically audit child care providers to determine compliance. It also requires DHS and the counties to recoup or recover overpayments that were paid to a current or former provider. (§119B.125, Subd. 7) *Article 1, Section 1 (Tracking line111)*

- **Recovering MFIP overpayments**
  - Requires counties to initiate efforts to recover overpayments paid to a former MFIP participant or caregiver; and if the participant or caregiver has been disqualified or convicted of fraud; recovery must be sought regardless of the amount of the overpayment. (§256P.08, Subd. 5) Effective August 1, 2016. *Article 5, Sec. 33*

- **Non-emergency Medical Transportation (NEMT) provisions (info here is policy)**
  - NEMT providers must take clients to the health care provider using the most direct route, and must not exceed 30 miles for a trip to a primary care provider or 60 miles for a trip to a specialty care provider, unless the client receives authorization from the local agency. NEMT providers may not bill for separate base rates for the continuation of a trip beyond the original destination; and they must maintain trip logs, which include pickup and drop-off times, signed by the medical provider or client attesting to mileage traveled to obtain covered medical services. [§256B.0625, Subd. 17(f)] Effective July 1, 2016. *Article 11, Section 21*

- **MN Restricted Recipient Program (MRRP) expansion (savings of $519K in FY16-17; and $1.062M in FY18-19)**
  - Provides funding for three staff people to work with the MRRP program in order to continue the current reduction in the cost of medical care for certain recipients in the MN Health Care Programs. *(Tracking only, line 748)*

- **Recovery Act Contract (RAC) – strengthening effectiveness (savings of $70K in FY16-17; and $86K in FY18-19)**
  - Provides funding for two staff people to assist in the recoveries of improper Medicaid payments paid to certain providers. (Tracking only, line 711)

Omnibus Human Services Policy Bill

Laws of Minnesota 2015, Chapter 78

Signed by the Governor on 5/22/2015.

Effective August 1, 2015, unless otherwise specified

- **Commissioner Suspension of Payments**
  - Grants DHS the authority to authorize the provider chosen by an applicant or a participant before the county can authorize payment for care provided by that provider. (§119B.125, Subd. 1; §245E.06, Subd. 2 & 3) *Article 4, Sections 1, 47-48.*

- **Child Care Record-Keeping Requirement**
  - Allows the commissioner to deny or rescind an authorization or establish an overpayment for child care providers who do not keep attendance records, from participation in the child care assistance program. Child care providers will be required to keep their attendance records on the site where the service is provided. (§119B.125, Subd. 6 & 7) *Article 4, Sections 2 & 3.*

- **Less-than-half-time Attendance Pattern Reporting**
  - Requires child care providers to report to the county when children on the Child Care Assistance Program (CCAP) are not in attendance at the child care center for at least half the attendance time. (§119B.125, Subd. 8) *Article 4, Section 4.*

- **Sanctioned Provider Exclusion**
  - This prohibits a provider or person who has been excluded, from becoming a provider in a different DHS program. The prohibition will be for the length of time of the original exclusion. (§245.095) *Article 4, Section 5.*

- **Child Care Recruiting with Conditions**
  - Prohibits a child care provider, center owner, director, manager, license holder, or other controlling individual or agent from recruiting employees on the condition that the employee has children that are either on the CCAP or eligible for the program. Those found to be engaging in this practice may be sanctioned with a disqualification or charged with a criminal offense. (§245E.01, Subd. 8 & 13a; §245E.02, Subd. 1, 3a, & 4; §609.816). Section 59 is effective August 1 and applies to crimes committed on or after that date. *Article 4, Sections 42-46, & 59.*

- **Subpoena Requirements**
  - Prohibits entities that are served an administrative subpoena from the Office of Inspector General (OIG) from notifying the subject of the subpoena (with the intent of letting the subject know about the subpoena). (§256.01). *Article 4, Sections 49.*

- **Emergency Assistance Program Fraud**
  - Clarifies that DHS emergency assistance benefits [Emergency Assistance (EA) and Emergency General Assistance (EGA)] fall under the same statute as the cash assistance benefits. (§256.98, subd. 1) *Article 4, Section 51.*

- **Nonemergency Medical Transportation Documentation Requirements**
  - Strengthens the documentation requirements for NEMT rides. These requirements include, among others, the name of recipient, dates and times of rides, and starting and ending addresses for trips. (§256.0625, subd. 17b). *Article 4, Section 52.*

- **Personal Care Assistance Services Service Verification**
  - Requires agencies responsible for billing for PCA services to verify the delivery of services through random, unscheduled telephone calls at the location where PCA services are being provided and during the time when services are being provided. For each service recipient, the agency must conduct at least one service verification every 90 days. (§256B.0705). *Article 4, Section 53.*

- **Correct license plate statute to cover county contractors**
  - This provision adds county contracted fraud prevention investigators to the list of those who may use unmarked vehicles. (§471.346). *Article 4, Section 58.*

- **Trafficking prohibition and criminal penalties for EBT cards**
  - Adds "trafficking" to the list of violations related to the fraudulent use of financial transaction cards. (§609.821)

- Section 60 is effective August 1 and applies to crimes committed on or after that date. *Article 4, Section 60.*

- **County incentive share of CCAP provider recoveries**
  - Reinstates the county incentive for overpayment recoveries from child care provider investigations conducted by the agency's Office of Inspector General (OIG). (Repeals 245E.07, Subd. 3), *Article 4, Section 62.*

OFFICE OF INSPECTOR GENERAL (OIG) -- Licensing Division

Revisor's Bill

Laws of Minnesota 2015, Chapter 21

Effective August 1, 2015

- **Clarification of cardiopulmonary resuscitation training for family child care**
  - Removes duplicative language and corrects terminology related to "staff person" and "caregiver." Technical amendment on emergency use of manual restraint standards. (§245A.50, subd 4 & §245D.061, Subd. 1) *Article 1, Sections 47 and 50.*

Certain School-age Child Care Programs Excluded from Human Services Licensure Bill

Laws of Minnesota 2015, Chapter 37

Effective July 1, 2015

- **Exclusion from licensure**
  - Excludes certain school-age child care programs serving children in kindergarten through grade 12 from DHS licensure. To be exempt from licensure as a child care center, the program must be nonprofit; it must provide structured, supervised youth development activities; and it must operate before and after school, or during summer or seasonal breaks. These programs are not eligible for Child Care Provider Assistance (CCAP) funds. (§245A.03, Subd. 2, 2c & 4a)

Omnibus HHS Budget Bill

Laws of Minnesota 2015, Chapter 71

Operations Provisions

Effective July 1, 2015, unless otherwise specified

- **Correction orders and conditional license for programs licensed as HCBS**
  - Requires DHS to limit correction orders and conditional licenses to the service site or sites at which the licensing violations occurred unless DHS articulates a basis for applying the adverse action to other sites. It also provides that if a license holder has been issued more than one license, the conditions imposed under any conditional license must be limited to the license for the program at which the licensing violations occurred if other programs, for which there are separate licenses, are being operated in substantial compliance with law and rules. (§245A.06, Subd. 1a) *Article 7, Section 3*

- **Settlement Agreement**
  - Allows a license holder or DHS to initiate a discussion about a possible settlement agreement related to an adverse licensing action. If a settlement discussion is initiated by the license holder, the Commissioner must respond within 14 days. Provides that if the parties enter into a settlement agreement, then the appeal is withdrawn and the agreement constitutes a full agreement between the parties. Requires the agreement to identify the actions the license holder has taken or will take to remedy the violation. (§245A.081) *Article 7, Section 4*

- **Medical monitoring training requirements for licensed foster care and respite care**
  - Clarifies that training requirements for medical monitoring equipment apply to the care of individuals who rely on medical monitoring equipment to sustain life or to monitor a medical condition that could

become life-threatening without proper use of the medical equipment. (245A.155) *Article 7, Sections 5 & 6.*

- **Program abuse prevention plans licensing modifications**
  - Allows a delegated representative of a license holder's governing body to complete the annual review and revisions to the program abuse prevention plan. (245A.65) *Article 7, Section 7.*

- **HCBS licensing changes**
  - Defines "working day," removes annual reauthorization of medication administration requirement, clarifies reporting requirements for changes in health needs and incidents, removes in-person CPR instruction requirements, modifies when restraint may be used as an intervention procedure during medical exams or medical treatment, clarifies timelines during service initiation, modifies service plan review and evaluation, allows staff competency determinations to be made by others, modifies first aid training requirements, and modifies staff ratio requirements in a Day Services Facility. (245D.02, 245D.05, 245D.06, 245D.07, 245D.071, 245D.09, 245D.22, & 245D.31) *Article 7, Sections 10-23*

Omnibus Human Services Policy Bill

Laws of Minnesota 2015, Chapter 78

Signed by the Governor on 5/22/2015.

Effective August 1, 2015, unless otherwise specified

- **Withdrawal Management (No fiscal impact)**

  Establishes service standards for a withdrawal management benefit under Medical Assistance (MA). Withdrawal management services are a medical model of detoxification services. DHS will be required to develop a payment methodology and to seek federal approval for the new service. Subsequent legislative action and funding will be required before this becomes an available MA benefit. (245F) *Article 3, sections 1-21*

- **Updating Licensing Terminology**
  - Change terminology from "natural" to "birth" child in definition of "Individual who is related;"
  - Defines the terms "Weekly," "Monthly," and "Quarterly" only for chemical dependency treatment programs;
  - Adds "community residential setting" as a program type that is not subject to location of residential program restrictions;
  - Updates the technical name for Salmonella in relation to use of bleach alternatives in family child care.

  (§245A. 02, Subd. 13, 20, 21, & 22; §245A. 11, subd 4; §245A.148) *Article 4, Sections 6-9 13, 18*

- **Client Record Transfer upon Closure**
  - Modifies that written closure plans for the transfer of clients and records are not required for license holders who reside on the premises. (§245A. 04, subd 15a) *Article 4, Section 10*

- **Burden of Proof for Issuing Temporary Immediate Suspensions**
  - Clarifies the burden of proof for the commissioner issuing a temporary immediate suspension for programs operating under a revoked licensed. Clarifies that for programs operating under a revoked license, the commissioner need only demonstrate by a preponderance of evidence that, since the time of the license revocation, the license holder violated rules or law that may adversely affect the health or safety of program clients. (§245A. 07, subd. 2 and subd. 2a) Article 4, Sections 11 and 12

- **Receivership Appointment**

- Expands voluntary and involuntary receivership requirements to non-residential programs and programs certified by the commissioner. Currently, these sections only apply to residential licensed programs. (§245A. 12, subd 1, §245A. 13, subd 1) *Article 4, Sections 14 and 15*

- **Family Child Care Attendance Record Requirement**
  - Clarifies that a family child care provider must maintain attendance records for each child for which the license holder is reimbursed for the care of that child by a government program. (§245A. 14, subd 14) *Article 10, Section 16.*

- **Child Safety in Substance Abuse Treatment Programs**
  - This change requires substance abuse treatment programs to assess parents' capacity to provide for the health and safety of the child, provide education to the parent regarding child safe sleep practices and bathing practices, and develop a procedure for when they will allow one client to supervise another client's child. (§245A. 1443) *Article 4, Section 17.*

- **County Licensing Variance Authority**
  - Deletes requirement that community residential setting variances may be issued only by the commissioner, allowing counties to grant these variances.
  - Removes delegated authority to county or private agencies to grant variances to requirements relating to chemical use problems of a license holder or household member of the license holder.
  - (§245A. 16, subd. 1) *Article 4, Section 19.*

- **Mental Health Training Requirement Modified**
  - Requires all child foster care license holders, caregivers and staff are required to complete initial and annual mental health training. (§245A. 175) *Article 4, Section 20.*

- **Naloxone information provided**
  - Requires all programs serving persons with substance abuse issues to provide educational information related to recognizing and responding to opioid overdoses and administering naloxone. (§245A. 1915) *Article 4, Section 21.*

- **Methadone Licensing Changes**
  - Requires physicians with authority to administer or dispense methadone in clinics to be enrolled with DHS as a provider. Stipulates a process for unsigned medication orders and a timeline for signing them. Requires the prescribing physician to meet with the recipient every time the dose is increased above 150 mg of methadone or 24 mg of buprenorphine daily. Allows a physician with a prescribing authority to make assessment of a client's ability to have take-home or unsupervised doses. Requires the comprehensive assessment to be completed within 21 days of service initiation. Requires that providers develop policies related to the Prescription Monitoring Program. Requires opioid treatment programs to report to law enforcement when an individual in the program diverts a controlled substance on the program's premises. Allows for the commissioner to grant a variance to the licensing requirements for opioid treatment programs. (§245A. 192, subd 3; §245A. 192, subd. 15) *Article 4, Section 22 – 28.*

- **Child Care Center Training Requirements Clarified**
  - Clarifies that at least one staff person in a child care center who has satisfactorily completed training in First Aid and CPR be present during the hours of operation, including on field trips and when transporting children in care.

  - Technical change to the video training requirement for child care center license holders relating to the dangers associated with shaking infants and young children. (§245A.40, subd 3 and 4; §245A.40, subd 5) *Article 4, Sections 29-31.*

- **Family Child Care Training Requirements Clarified**
  - Provides that a child care provider who relocates the program or whose license is voluntarily cancelled or lapsed for less than 12 months does not need to satisfy the training requirements for initial licensure. (§245A.50, subd 1) *Article 4, Section 32.*

- **"Access to Persons Served by a program" Definition Modified**
  - This changes the definition of "access to persons served" so that a background study disqualification extends to a person who may access any personal, financial, or health information on individuals served by the program. (§245C.02, subd 2) *Article 4, Section 33.*

- **HCBS Policy Changes and Repealer**
  - Modifies service suspension policy requirements and adds a new subdivision for service termination policy requirements. Includes limitations on when a license holder may implement their service suspension and service termination policies. Provides appeal rights for service recipients with service termination notice. Technical amendment repeals duplication in emergency use of manual restraint standards. (§245D.10, subd 3 and 3a; §245D.61, subd 3) *Article 6, Sections 4, 5, and 32.*