

1.1 Senator moves to amend the SCS4410A27 amendment to S.F. No. 4410
1.2 as follows:

1.3 Page 6, after line 2, insert:

1.4 "Sec. 12. Minnesota Statutes 2021 Supplement, section 256P.02, subdivision 1a, is amended
1.5 to read:

1.6 Subd. 1a. **Exemption.** Participants who qualify for child care assistance programs under
1.7 chapter 119B are exempt from this section, except that the personal property identified in
1.8 subdivision 2 is counted toward the asset limit of the child care assistance program under
1.9 chapter 119B. Vehicles under subdivision 3 and accounts under subdivision 4 are not counted
1.10 toward the asset limit of the child care assistance program under chapter 119B.

1.11 Sec. 13. Minnesota Statutes 2021 Supplement, section 256P.02, subdivision 2, is amended
1.12 to read:

1.13 Subd. 2. **Personal property limitations.** The equity value of an assistance unit's personal
1.14 property listed in clauses (1) to (5) must not exceed \$10,000 for applicants and participants.
1.15 For purposes of this subdivision, personal property is limited to:

1.16 (1) cash;

1.17 (2) bank accounts not excluded under subdivision 4;

1.18 (3) liquid stocks and bonds that can be readily accessed without a financial penalty;

1.19 (4) vehicles not excluded under subdivision 3; and

1.20 (5) the full value of business accounts used to pay expenses not related to the business."

1.21 Page 59, delete section 44

1.22 Page 67, line 13, delete "a supervisor" and insert "an alcohol and drug counselor as
1.23 defined under section 245G.11, subdivision 5, an alcohol and drug counselor supervisor as
1.24 defined under section 245G.11, subdivision 4, or a treatment director as defined under
1.25 section 245G.11, subdivision 3"

1.26 Page 70, delete section 18

1.27 Page 71, delete section 19

1.28 Page 74, line 17, reinstate the period and delete the new language

1.29 Page 74, delete lines 18 to 21

- 2.1 Page 79, delete section 24
- 2.2 Page 86, line 17, delete "to"
- 2.3 Page 98, delete section 44
- 2.4 Page 127, line 27, after "staff" insert ", including at least one full-time equivalent staff
- 2.5 member,"
- 2.6 Page 129, line 2, delete "programs" and insert "program"
- 2.7 Page 129, line 3, before "A" insert "The guest speaker must present less than half of any
- 2.8 treatment group."
- 2.9 Page 142, line 20, delete "required by" and insert "under"
- 2.10 Page 151, line 3, delete "by this act" and insert "for the creation of the Department of
- 2.11 Behavioral Health"
- 2.12 Page 151, delete section 104 and insert:
- 2.13 "Sec. 100. REPEALER.
- 2.14 (a) Minnesota Statutes 2020, sections 169A.70, subdivision 6; 245G.22, subdivision 19;
- 2.15 254A.02, subdivision 8a; 254A.16, subdivision 6; 254A.19, subdivisions 1a and 2; 254B.04,
- 2.16 subdivisions 2b and 2c; and 254B.041, subdivision 2, are repealed.
- 2.17 (b) Minnesota Statutes 2021 Supplement, section 254A.19, subdivision 5, is repealed."
- 2.18 Page 165, line 14, delete everything after "(d)"
- 2.19 Page 165, line 15, delete everything before "The proceedings"
- 2.20 Page 165, line 16, after "are" insert "confidential data on individuals or"
- 2.21 Page 165, line 17, delete "subdivision 13, and are" insert "subdivisions 3 and 13. Data
- 2.22 that document a person's opinions formed as a result of the review are"
- 2.23 Page 165, line 25, delete everything after "about"
- 2.24 Page 165, line 26, delete "team or"
- 2.25 Page 165, after line 26, insert:
- 2.26 "(e) By October 1 of each year, the commissioner shall prepare an annual public report
- 2.27 containing the following information:
- 2.28 (1) the number of cases reviewed under each critical incident category identified in
- 2.29 paragraph (b) and a geographical description of where cases under each category originated;

3.1 (2) an aggregate summary of the systemic themes from the critical incidents examined
3.2 by the critical incident review team during the previous year;

3.3 (3) a synopsis of the conclusions, incident analyses, or exploratory activities taken in
3.4 regard to the critical incidents examined by the critical incident review team; and

3.5 (4) recommendations made to the commissioner regarding systemic changes that could
3.6 decrease the number and severity of critical incidents in the future or improve the quality
3.7 of the home and community-based service system."

3.8 Page 165, delete section 8

3.9 Page 169, delete section 10

3.10 Page 184, after line 10, insert:

3.11 "Sec. 15. Minnesota Statutes 2020, section 256B.0949, subdivision 8, is amended to read:

3.12 Subd. 8. **Refining the benefit with stakeholders.** Before making revisions to the EIDBI
3.13 benefit or proposing statutory changes to this section, the commissioner must ~~refine the~~
3.14 ~~details of the benefit in consultation~~ consult with stakeholders and consider recommendations
3.15 from the Department of Human Services Early Intensive Developmental and Behavioral
3.16 Intervention Advisory Council, the early intensive developmental and behavioral intervention
3.17 learning collaborative, and the Departments of Health, Education, Employment and Economic
3.18 Development, and Human Services. ~~The details must~~ Revisions and proposed statutory
3.19 changes subject to this subdivision include, but are not limited to, the following components:

3.20 (1) a definition of the qualifications, standards, and roles of the treatment team, including
3.21 recommendations after stakeholder consultation on whether board-certified behavior analysts
3.22 and other professionals certified in other treatment approaches recognized by the department
3.23 or trained in ASD or a related condition and child development should be added as
3.24 professionals qualified to provide EIDBI clinical supervision or other functions under
3.25 medical assistance;

3.26 (2) refinement of uniform parameters for CMDE and ongoing ITP progress monitoring
3.27 standards;

3.28 (3) the design of an effective and consistent process for assessing the person's and the
3.29 person's legal representative's and the person's caregiver's preferences and options to
3.30 participate in the person's early intervention treatment and efficacy of methods to involve
3.31 and educate the person's legal representative and caregiver in the treatment of the person;

4.1 (4) formulation of a collaborative process in which professionals have opportunities to
4.2 collectively inform provider standards and qualifications; standards for CMDE; medical
4.3 necessity determination; efficacy of treatment apparatus, including modality, intensity,
4.4 frequency, and duration; and ITP progress monitoring processes to support quality
4.5 improvement of EIDBI services;

4.6 (5) coordination of this benefit and its interaction with other services provided by the
4.7 Departments of Human Services, Health, Employment and Economic Development, and
4.8 Education;

4.9 (6) evaluation, on an ongoing basis, of EIDBI services outcomes and efficacy of treatment
4.10 modalities provided to people under this benefit; and

4.11 (7) as provided under subdivision 17, determination of the availability of qualified EIDBI
4.12 providers with necessary expertise and training in ASD or a related condition throughout
4.13 the state to assess whether there are sufficient professionals to provide timely access and
4.14 prevent delay in the CMDE and treatment of a person with ASD or a related condition."

4.15 Renumber the sections in sequence and correct the internal references

4.16 Amend the title accordingly