01/25/22 **REVISOR** DTT/NG 22-05468 as introduced

SENATE STATE OF MINNESOTA NINETY-SECOND SESSION

S.F. No. 2968

(SENATE AUTHORS: UTKE)

D-PG 4954 **DATE** 02/10/2022

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OFFICIAL STATUS

Introduction and first reading Referred to Human Services Licensing Policy

relating to human services; modifying alternate overnight supervision in community 1 2 residential settings; modifying home and community-based services employee 1.3 scholarships; providing an ICF/DD operating rate increase; establishing direct 1.4 support professionals child care relief grants; establishing direct support 1.5 professionals and frontline supervisor employee retention payments; appropriating 1.6 money; amending Minnesota Statutes 2020, sections 245A.11, subdivisions 7, 7a; 1.7 256B.0918; 256B.5012, by adding a subdivision. 1.8

A bill for an act

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MINNESOTA:

Section 1. Minnesota Statutes 2020, section 245A.11, subdivision 7, is amended to read: 1.10

Subd. 7. Adult foster care; variance for alternate overnight supervision. (a) The commissioner may grant a variance under section 245A.04, subdivision 9, to rule parts requiring a caregiver to be present in an adult foster care home during normal sleeping hours to allow for alternative methods of overnight supervision. The commissioner may grant the variance if the local county licensing agency recommends the variance and the county recommendation includes documentation verifying that:

- (1) the county has approved the license holder's plan for alternative methods of providing overnight supervision and determined the plan protects the residents' health, safety, and rights;
- (2) the license holder has obtained written and signed informed consent from each resident or each resident's legal representative documenting the resident's or legal representative's agreement with the alternative method of overnight supervision; and
- (3) the alternative method of providing overnight supervision, which may include the use of technology, is specified for each resident in the resident's: (i) individualized plan of

Section 1. 1

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care; (ii) individual service plan under section 256B.092, subdivision 1b, if required; or (iii) individual resident placement agreement under Minnesota Rules, part 9555.5105, subpart 19, if required.

- (b) To be eligible for a variance under paragraph (a), the adult foster care license holder must not have had a conditional license issued under section 245A.06, or any other licensing sanction issued under section 245A.07 during the prior 24 months based on failure to provide adequate supervision, health care services, or resident safety in the adult foster care home.
- (c) A license holder requesting a variance under this subdivision to utilize technology as a component of a plan for alternative overnight supervision may request the commissioner's review in the absence of a county recommendation. Upon receipt of such a request from a license holder, the commissioner shall review the variance request with the county.
- (d) A variance granted by the commissioner according to this subdivision before January 1, 2014, to a license holder for an adult foster care home must transfer with the license when the license converts to a community residential setting license under chapter 245D. The terms and conditions of the variance remain in effect as approved at the time the variance was granted. The variance requirements under this subdivision for alternate overnight supervision do not apply to community residential settings licensed under chapter 245D.
 - Sec. 2. Minnesota Statutes 2020, section 245A.11, subdivision 7a, is amended to read:
- Subd. 7a. Alternate overnight supervision technology; adult foster care and community residential setting licenses. (a) The commissioner may grant an applicant or license holder an adult foster care or community residential setting license for a residence that does not have a caregiver in the residence during normal sleeping hours as required under Minnesota Rules, part 9555.5105, subpart 37, item B, or section 245D.02, subdivision 33b, but uses monitoring technology to alert the license holder when an incident occurs that may jeopardize the health, safety, or rights of a foster care recipient. The applicant or license holder must comply with all other requirements under Minnesota Rules, parts 9555.5105 to 9555.6265, or applicable requirements under chapter 245D, and the requirements under this subdivision. The license printed by the commissioner must state in bold and large font:
 - (1) that the facility is under electronic monitoring; and
- (2) the telephone number of the county's common entry point for making reports of suspected maltreatment of vulnerable adults under section 626.557, subdivision 9.
- (b) Applications for a license under this section must be submitted directly to the Department of Human Services licensing division. The licensing division must immediately

notify the county licensing agency. The licensing division must collaborate with the county licensing agency in the review of the application and the licensing of the program.

- (c) Before a license is issued by the commissioner, and for the duration of the license, the applicant or license holder must establish, maintain, and document the implementation of written policies and procedures addressing the requirements in paragraphs (d) through (f).
 - (d) The applicant or license holder must have policies and procedures that:
- (1) establish characteristics of target populations that will be admitted into the home, and characteristics of populations that will not be accepted into the home;
- (2) explain the discharge process when a resident served by the program requires overnight supervision or other services that cannot be provided by the license holder due to the limited hours that the license holder is on site;
- (3) describe the types of events to which the program will respond with a physical presence when those events occur in the home during time when staff are not on site, and how the license holder's response plan meets the requirements in paragraph (e), clause (1) or (2);
- (4) establish a process for documenting a review of the implementation and effectiveness of the response protocol for the response required under paragraph (e), clause (1) or (2). The documentation must include:
- (i) a description of the triggering incident;

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- 3.21 (ii) the date and time of the triggering incident;
- 3.22 (iii) the time of the response or responses under paragraph (e), clause (1) or (2);
- 3.23 (iv) whether the response met the resident's needs;
- 3.24 (v) whether the existing policies and response protocols were followed; and
- 3.25 (vi) whether the existing policies and protocols are adequate or need modification.

When no physical presence response is completed for a three-month period, the license holder's written policies and procedures must require a physical presence response drill to be conducted for which the effectiveness of the response protocol under paragraph (e), clause (1) or (2), will be reviewed and documented as required under this clause; and

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(5) establish that emergency and nonemergency phone numbers are posted in a prominent location in a common area of the home where they can be easily observed by a person responding to an incident who is not otherwise affiliated with the home.

- (e) The license holder must document and include in the license application which response alternative under clause (1) or (2) is in place for responding to situations that present a serious risk to the health, safety, or rights of residents served by the program:
- (1) response alternative (1) requires only the technology to provide an electronic notification or alert to the license holder that an event is underway that requires a response. Under this alternative, no more than ten minutes will pass before the license holder will be physically present on site to respond to the situation; or
- (2) response alternative (2) requires the electronic notification and alert system under alternative (1), but more than ten minutes may pass before the license holder is present on site to respond to the situation. Under alternative (2), all of the following conditions are met:
- (i) the license holder has a written description of the interactive technological applications that will assist the license holder in communicating with and assessing the needs related to the care, health, and safety of the foster care recipients. This interactive technology must permit the license holder to remotely assess the well being of the resident served by the program without requiring the initiation of the foster care recipient. Requiring the foster care recipient to initiate a telephone call does not meet this requirement;
- (ii) the license holder documents how the remote license holder is qualified and capable of meeting the needs of the foster care recipients and assessing foster care recipients' needs under item (i) during the absence of the license holder on site;
- (iii) the license holder maintains written procedures to dispatch emergency response personnel to the site in the event of an identified emergency; and
- (iv) each resident's individualized plan of care, coordinated service and support plan under sections 256B.0913, subdivision 8; 256B.092, subdivision 1b; 256B.49, subdivision 15; and 256S.10, if required, or individual resident placement agreement under Minnesota Rules, part 9555.5105, subpart 19, if required, identifies the maximum response time, which may be greater than ten minutes, for the license holder to be on site for that resident.
- (f) Each resident's placement agreement, individual service agreement, and plan must clearly state that the adult foster care or community residential setting license category is a program without the presence of a caregiver in the residence during normal sleeping hours;

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the protocols in place for responding to situations that present a serious risk to the health, safety, or rights of residents served by the program under paragraph (e), clause (1) or (2); and a signed informed consent from each resident served by the program or the person's legal representative documenting the person's or legal representative's agreement with placement in the program. If electronic monitoring technology is used in the home, the informed consent form must also explain the following:

- (1) how any electronic monitoring is incorporated into the alternative supervision system;
- (2) the backup system for any electronic monitoring in times of electrical outages or other equipment malfunctions;
 - (3) how the caregivers or direct support staff are trained on the use of the technology;
 - (4) the event types and license holder response times established under paragraph (e);
- (5) how the license holder protects each resident's privacy related to electronic monitoring and related to any electronically recorded data generated by the monitoring system. A resident served by the program may not be removed from a program under this subdivision for failure to consent to electronic monitoring. The consent form must explain where and how the electronically recorded data is stored, with whom it will be shared, and how long it is retained; and
 - (6) the risks and benefits of the alternative overnight supervision system.
- The written explanations under clauses (1) to (6) may be accomplished through cross-references to other policies and procedures as long as they are explained to the person giving consent, and the person giving consent is offered a copy.
- (g) Nothing in this section requires the applicant or license holder to develop or maintain separate or duplicative policies, procedures, documentation, consent forms, or individual plans that may be required for other licensing standards, if the requirements of this section are incorporated into those documents.
- (h) The commissioner may grant variances to the requirements of this section according to section 245A.04, subdivision 9.
- (i) For the purposes of paragraphs (d) through (h), "license holder" has the meaning under section 245A.02, subdivision 9, and additionally includes all staff, volunteers, and contractors affiliated with the license holder.

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(j) For the purposes of paragraph (e), the terms "assess" and "assessing" mean to remotely determine what action the license holder needs to take to protect the well-being of the foster care recipient.

- (k) The commissioner shall evaluate license applications using the requirements in paragraphs (d) to (f). The commissioner shall provide detailed application forms, including a checklist of criteria needed for approval.
- (l) To be eligible for a license under paragraph (a), the adult foster care or community residential setting license holder must not have had a conditional license issued under section 245A.06 or any licensing sanction under section 245A.07 during the prior 24 months based on failure to provide adequate supervision, health care services, or resident safety in the adult foster care home or community residential setting.
- (m) The commissioner shall review an application for an alternative overnight supervision license within 60 days of receipt of the application. When the commissioner receives an application that is incomplete because the applicant failed to submit required documents or that is substantially deficient because the documents submitted do not meet licensing requirements, the commissioner shall provide the applicant written notice that the application is incomplete or substantially deficient. In the written notice to the applicant, the commissioner shall identify documents that are missing or deficient and give the applicant 45 days to resubmit a second application that is substantially complete. An applicant's failure to submit a substantially complete application after receiving notice from the commissioner is a basis for license denial under section 245A.05. The commissioner shall complete subsequent review within 30 days.
- (n) Once the application is considered complete under paragraph (m), the commissioner will approve or deny an application for an alternative overnight supervision license within 60 days.
 - (o) For the purposes of this subdivision, "supervision" means:
- (1) oversight by a caregiver or direct support staff as specified in the individual resident's place agreement or coordinated service and support plan and awareness of the resident's needs and activities; and
- (2) the presence of a caregiver or direct support staff in a residence during normal sleeping hours, unless a determination has been made and documented in the individual's coordinated service and support plan that the individual does not require the presence of a caregiver or direct support staff during normal sleeping hours.

Sec. 3. Minnesota Statutes 2020, section 256B.0918, is amended to read:

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256B.0918 <u>HOME AND COMMUNITY-BASED SERVICES</u> <u>EMPLOYEE</u> SCHOLARSHIP COSTS GRANT PROGRAM.

Subdivision 1. **Program criteria** Establishment. Beginning on or after October 1, 2005

2021, within the limits of appropriations specifically available for this purpose, the commissioner shall provide funding to qualified provider applicants for employee scholarships for education in nursing and, other health care fields, or further training in an employee's current position. Employee scholarships must be for a course of study that is expected to lead to career advancement with the provider or in the field of long-term care, including home care or care of persons with disabilities, or nursing. At a minimum, the employee scholarship program must cover employee costs related to a course of study that is expected to lead to career or position advancement with the provider or in the field of long-term care, including home care, care of persons with disabilities, or nursing. Providers that secure this funding must use it to award scholarships to employees who work an average of at least 20 hours per week for the provider. Executive management staff without direct care duties, registered nurses, and therapists are not eligible to receive scholarships under this section.

Subd. 2. **Participating providers.** The commissioner shall publish a request for proposals in the State Register by August 15, 2005, specifying provider eligibility requirements, provider selection criteria, program specifics, funding mechanism criteria for a qualifying employee scholarship program, documentation required for program participation, maximum award amount, and methods of evaluation. The commissioner may publish additional requests for proposals in subsequent years each year in which funding is available for this purpose. Providers who provide services funded through the following programs are eligible to apply to participate in the scholarship program: home and community-based waivered services for persons with developmental disabilities under section 256B.501; home and community-based waivered services for the elderly under chapter 256S; waivered services under community access for disability inclusion under section 256B.49; community alternative care waivered services under section 256B.49; brain injury waivered services under section 256B.49; nursing services and home health services under section 256B.0625, subdivision 6a; personal care services and nursing supervision of personal care services under section 256B.0625, subdivision 19a; home care nursing services under section 256B.0625, subdivision 7; day training and habilitation services for adults with developmental disabilities under sections 252.41 to 252.46; and intermediate care facilities for persons with developmental disabilities under section 256B.5012.

Sec. 3. 7

8.1	Subd. 2a. Eligibility. Providers who provide services funded through the following
8.2	programs are eligible qualifying providers under this section:
8.3	(1) home and community-based waiver services for persons with developmental
8.4	disabilities under section 256B.092;
8.5	(2) community access for disability inclusion waiver services under section 256B.49;
8.6	(3) community alternative care waiver services under section 256B.49;
8.7	(4) brain injury waiver services under section 256B.49; and
8.8 8.9	(5) intermediate care facilities for persons with developmental disabilities under section 256B.5012.
8.10	Subd. 2b. Application requirements. Eligible qualifying providers seeking a grant
8.11	under this section shall submit an application to the commissioner. Each application must
8.12	contain a description of the employee scholarship program being proposed by the applicant,
8.13	including:
8.14	(1) criteria by which grant money will be distributed among employees;
8.15	(2) the need for the provider to enhance the education of the provider's workforce;
8.16	(3) the process for determining which employees will be eligible for scholarships;
8.17	(4) the expected degrees or credentials eligible for scholarships;
8.18 8.19	(5) the amount of funding that the applicant is seeking for the employee scholarship program;
8.20	(6) a proposed budget detailing how grant money will be spent;
8.21	(7) any other sources of funding for the applicant's proposed employee scholarship
8.22	program; and
8.23	(8) plans for retaining eligible employees after the completion of their education.
8.24	Subd. 3. Provider selection eriteria process. To be considered for scholarship funding,
8.25	the provider shall submit a completed application within the time frame specified by the
8.26	commissioner. In awarding funding, The commissioner shall consider the following:
8.27	determine a maximum award for grants and make grant selections based on the information
8.28	provided in the grant application and
8.29	(1) the size of the provider as measured in annual billing to the medical assistance
8.30	program. To be eligible, a provider must receive at least \$300,000 annually in medical
8.31	assistance payments;

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(2) the percentage of employees meeting the scholarship program recipient requirements;

(3) staff retention rates for paraprofessionals; and

(4) other criteria determined by the commissioner. Notwithstanding any law or rule to the contrary, money awarded to grantees in a grant agreement do not lapse until the grant agreement expires.

Subd. 4. Funding specifies Provision of grants. Within the limits of appropriations specifically available for this purpose, for the rate period beginning on or after October 1, 2005, to September 30, 2007, the commissioner shall provide to each provider listed in subdivision 2 and awarded funds under subdivision 3 a medical assistance rate increase to fund scholarships up to three-tenths percent of the medical assistance reimbursement rate. The commissioner shall require providers to repay any portion of funds awarded under subdivision 3 that is not used to fund scholarships. If applications exceed available funding, funding shall be targeted to providers that employ a higher percentage of paraprofessional staff or have lower rates of turnover of paraprofessional staff. During the subsequent years of the program, the rate adjustment may be recalculated, at the discretion of the commissioner. In making a recalculation the commissioner may consider the provider's success at granting scholarships based on the amount spent during the previous year and the availability of appropriations to continue the program. The commissioner shall make grants available to qualified providers of home and community-based services under subdivision 2a. Grant money must be used by qualified providers to recruit and train staff through the establishment of an employee scholarship fund.

Subd. 5. **Reporting requirements.** Participating providers shall <u>submit an invoice for reimbursement and a</u> report to the commissioner on a schedule determined by the commissioner and on a form supplied by the commissioner for a scholarship rate for rate periods beginning October 1, 2007. The report shall include the amount spent during the reporting period on eligible scholarships, and, for each scholarship recipient, the name of the recipient, the current position of the recipient, the amount awarded, the educational institution attended, the nature of the educational program, <u>and</u> the expected or actual program completion date, and a determination of the amount spent as a percentage of the provider's reimbursement. The commissioner shall require providers to repay all of the funds awarded under subdivision 3 if the report required in this subdivision is not filled according to the schedule determined by the commissioner. During the grant period, the commissioner may require and collect from grant recipients other information necessary to evaluate the program.

Sec. 3. 9

10.30 (1) for the entire duration of the grant period, be employed by an employer who provides

services funded through one of the following programs:

Subd. 4. Eligibility. Eligible direct support professionals must:

(b) The commissioner shall develop an expedited application process that includes a

form allowing applicants to meet the requirements of this section in as timely a manner as

possible. The commissioner shall allow the use of electronic submission of application

Sec. 5. 10

forms and accept electronic signatures.

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(1) apply to the commissioner for retention payments on forms and according to timelines

Sec. 6.

established by the commissioner; and

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12.1	(2) provide the commissioner with documentation of the employment status of qualifying
12.2	direct support professionals and frontline supervisors employed by the qualifying provider
12.3	in order for those employees to receive a retention payment.
12.4	(b) The commissioner shall develop an expedited application process that includes a
12.5	form allowing applicants to meet the requirements of this section in as timely a manner as
12.6	possible. The commissioner shall allow the use of electronic submission of application
12.7	forms and accept electronic signatures.
12.8	Subd. 4. Eligibility. Eligible direct support professionals and frontline supervisors must:
12.9	(1) until December 31, 2022, be employed by a qualifying provider who provides services
12.10	funded through one of the following programs:
12.11	(i) home and community-based waiver services for persons with developmental
12.12	disabilities under Minnesota Statutes, section 256B.092;
12.13	(ii) community access for disability inclusion waiver services under Minnesota Statutes,
12.14	section 256B.49;
12.15	(iii) community alternative care waiver services under Minnesota Statutes, section
12.16	<u>256B.49;</u>
12.17	(iv) brain injury waiver services under Minnesota Statutes, section 256B.49; or
12.18	(v) intermediate care facilities for persons with developmental disabilities under
12.19	Minnesota Statutes, section 256B.5012; and
12.20	(2) provide direct support services to clients or frontline supervision of direct support
12.21	professionals.
12.22	Subd. 5. Retention payments. The commissioner shall distribute retention payments
12.23	equal to \$1,500 to eligible direct support professionals and frontline supervisors who meet
12.24	the requirements of this section.
12.25	Sec. 7. APPROPRIATION; HOME AND COMMUNITY-BASED SERVICES
12.25	EMPLOYEE COLOLADOUR CDANT PROCESM

12 12.26 EMPLOYEE SCHOLARSHIP GRANT PROGRAM.

\$10,000,000 in fiscal year 2023 is appropriated from the federal American Rescue Plan 12.27 state fiscal recovery funds to the commissioner of human services for the home and 12.28 community-based services employee scholarship grant program under Minnesota Statutes, 12.29 section 256B.0918. This is a onetime appropriation. 12.30

Sec. 7. 12

13.2	RELIEF GRANTS.
13.3	\$40,000,000 in fiscal year 2023 is appropriated from the federal American Rescue Plan
13.4	state fiscal recovery funds to the commissioner of human services for direct support
13.5	professional child care relief grants. This is a onetime appropriation.
13.6	Sec. 9. APPROPRIATION; DIRECT SUPPORT PROFESSIONAL AND
13.7	FRONTLINE SUPERVISOR EMPLOYEE RETENTION PAYMENTS.
13.713.8	FRONTLINE SUPERVISOR EMPLOYEE RETENTION PAYMENTS. \$50,000,000 in fiscal year 2023 is appropriated from the federal American Rescue Plan
13.8	\$50,000,000 in fiscal year 2023 is appropriated from the federal American Rescue Plan

Sec. 8. APPROPRIATION; DIRECT SUPPORT PROFESSIONAL CHILD CARE

22-05468

as introduced

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Sec. 9. 13