

Senator ..... moves to amend the delete-everything amendment (SCS5252A-4) to S.F. No. 5252 as follows:

Page 49, after line 26, insert:

"Section 1. Minnesota Statutes 2023 Supplement, section 256B.0625, subdivision 26, is amended to read:

Subd. 26. **Special education services.** (a) Medical assistance covers evaluations necessary in making a determination for eligibility for individualized education program and individualized family service plan services and for medical services identified in a recipient's individualized education program and individualized family service plan and covered under the medical assistance state plan. Covered services include occupational therapy, physical therapy, speech-language therapy, clinical psychological services, nursing services, school psychological services, school social work services, personal care assistants serving as management aides, assistive technology devices, transportation services, health assessments, and other services covered under the medical assistance state plan. Mental health services eligible for medical assistance reimbursement must be provided or coordinated through a children's mental health collaborative where a collaborative exists if the child is included in the collaborative operational target population. The provision or coordination of services does not require that the individualized education program be developed by the collaborative.

The services may be provided by a Minnesota school district that is enrolled as a medical assistance provider or its subcontractor, and only if the services meet all the requirements otherwise applicable if the service had been provided by a provider other than a school district, in the following areas: medical necessity; physician's, advanced practice registered nurse's, or physician assistant's orders; documentation; personnel qualifications; and prior authorization requirements. The nonfederal share of costs for services provided under this subdivision is the responsibility of the local school district as provided in section 125A.74. Services listed in a child's individualized education program are eligible for medical assistance reimbursement only if those services meet criteria for federal financial participation under the Medicaid program.

(b) Approval of health-related services for inclusion in the individualized education program does not require prior authorization for purposes of reimbursement under this chapter. The commissioner may require physician, advanced practice registered nurse, or physician assistant review and approval of the plan not more than once annually or upon any modification of the individualized education program that reflects a change in health-related services.

(c) Services of a speech-language pathologist provided under this section are covered notwithstanding Minnesota Rules, part 9505.0390, subpart 1, item L, if the person:

(1) holds a masters degree in speech-language pathology;

(2) is licensed by the Professional Educator Licensing and Standards Board as an educational speech-language pathologist; and

(3) either has a certificate of clinical competence from the American Speech and Hearing Association, has completed the equivalent educational requirements and work experience necessary for the certificate or has completed the academic program and is acquiring supervised work experience to qualify for the certificate.

(d) Medical assistance coverage for medically necessary services provided under other subdivisions in this section may not be denied solely on the basis that the same or similar services are covered under this subdivision.

(e) The commissioner shall develop and implement package rates, bundled rates, or per diem rates for special education services under which separately covered services are grouped together and billed as a unit in order to reduce administrative complexity.

(f) The commissioner shall develop a cost-based payment structure for payment of these services. Only costs reported through the designated Minnesota Department of Education data systems in distinct service categories qualify for inclusion in the cost-based payment structure. The commissioner shall reimburse claims submitted based on an interim rate, and shall settle at a final rate once the department has determined it. The commissioner shall notify the school district of the final rate. The school district has 60 days to appeal the final rate. To appeal the final rate, the school district shall file a written appeal request to the commissioner within 60 days of the date the final rate determination was mailed. The appeal request shall specify (1) the disputed items and (2) the name and address of the person to contact regarding the appeal.

(g) Effective July 1, 2000, medical assistance services provided under an individualized education program or an individual family service plan by local school districts shall not count against medical assistance authorization thresholds for that child.

(h) Nursing services as defined in section 148.171, subdivision 15, and provided as an individualized education program health-related service, are eligible for medical assistance payment if they are otherwise a covered service under the medical assistance program. Medical assistance covers the administration of prescription medications by a licensed nurse who is employed by or under contract with a school district when the administration of

medications is identified in the child's individualized education program. The simple administration of medications alone is not covered under medical assistance when administered by a provider other than a school district or when it is not identified in the child's individualized education program.

(i) ~~School social work~~ Services provided by a school social worker as described in paragraph (l) must be provided by a mental health professional as defined in section 245I.04, subdivision 2; a clinical trainee as defined in section 245I.04, subdivision 6, under the supervision of a mental health professional; or a mental health practitioner as defined in section 245I.04, subdivision 4, under the supervision of a mental health professional, ~~are to be eligible for medical assistance payment. A mental health practitioner performing school social work services under this section must provide services within the mental health practitioner's licensure scope of practice, if applicable, and within the mental health practitioner scope of practice under section 245I.04, subdivision 5 reimbursement. Services described in paragraph (l) must be provided within the provider's scope of practice as defined in section 245I.04, subdivisions 3, 5, and 7.~~

(j) Notwithstanding section 245I.10, subdivision 2, a special education evaluation, and assessment for and within an individual family service plan or individualized education program, or individual family service plan may be used to determine medical necessity and eligibility for school social work services under paragraph (i) instead of a diagnostic assessment for services described under paragraph (l). The special education evaluation and assessments for and within the individualized education program, or individual family service plan, that meet the requirements in section 245I.10, subdivision 4 and subdivision 5 or 6 and that is completed by a licensed mental health professional or clinical trainee supervised by a licensed mental health professional can be used for determining medical necessity. In addition, for services that do not require a diagnosis using an assessment as defined in section 245I.10, subdivision 4 and subdivision 5 or 6, the special education evaluation and assessments for and within the individualized education program, or individual family service plan, that provide an International Classification of Diseases diagnostic code and are completed by a licensed mental health professional or clinical trainee supervised by a licensed mental health professional can be used for determining medical necessity.

(k) A school social worker or school providing ~~mental health~~ services under paragraph ~~(i)~~ (l) is not required to be certified to provide children's therapeutic services and supports under section 256B.0943.

(l) Covered ~~mental health~~ services provided by a school social worker under this paragraph ~~(i)~~ include ~~but are not limited to:~~

- 4.1 ~~(1) administering and reporting standardized measures;~~
- 4.2 ~~(2) care coordination;~~
- 4.3 ~~(3) children's mental health crisis assistance, planning, and response services;~~
- 4.4 (1) the explanation of finding as described in section 256B.0671, subdivision 4;
- 4.5 (2) psychotherapy for crisis as described in section 256B.0671, subdivision 14;
- 4.6 ~~(4)~~ (3) children's mental health clinical care consultation, as described in section
- 4.7 256B.0671, subdivision 7;
- 4.8 ~~(5)~~ (4) dialectical behavioral therapy for adolescents, as described in section 256B.0671,
- 4.9 subdivision 6;
- 4.10 ~~(6) direction of mental health behavioral aides;~~
- 4.11 ~~(7)~~ (5) family psychoeducation, as described in section 256B.0671, subdivision 5; and
- 4.12 ~~(8)~~ (6) individual, family, and group psychotherapy, as described in section 256B.0671,
- 4.13 subdivision 11.
- 4.14 ~~(9) mental health behavioral aide services;~~
- 4.15 ~~(10) skills training; and~~
- 4.16 ~~(11) treatment plan development and review.~~

4.17 **EFFECTIVE DATE.** This section is effective July 1, 2024, or upon federal approval,

4.18 whichever is later.

4.19 Sec. 2. Minnesota Statutes 2023 Supplement, section 256B.0671, is amended by adding

4.20 a subdivision to read:

4.21 Subd. 14. **Psychotherapy for crisis.** (a) Medical assistance covers psychotherapy for

4.22 crisis when a recipient is in need of an immediate response due to an increase of mental

4.23 illness symptoms that put them at risk of one of the following:

- 4.24 (1) experiencing a life threatening mental health crisis;
- 4.25 (2) needing a higher level of care;
- 4.26 (3) worsening symptoms without mental health intervention;
- 4.27 (4) harm to self, others, or property damage; or
- 4.28 (5) or significant disruption of functioning in at least one life area.

- 5.1 (b) "Psychotherapy for crisis" means a treatment of client to reduce their mental health  
5.2 crisis through immediate assessment and psychotherapeutic interventions. It must include:
- 5.3 (1) emergency assessment of the crisis situation;  
5.4 (2) mental status exam;  
5.5 (3) psychotherapeutic interventions to reduce the crisis; and  
5.6 (4) development of a post-crisis plan that addresses the recipients coping skills and  
5.7 community resources.
- 5.8 **EFFECTIVE DATE.** This section is effective the day following final enactment."
- 5.9 Renumber the sections in sequence and correct the internal references
- 5.10 Amend the title accordingly