

1.1 Senator moves to amend S.F. No. 477 as follows:

1.2 Page 1, after line 13, insert:

1.3 "Section 1. Minnesota Statutes 2024, section 144.651, subdivision 2, is amended to read:

1.4 Subd. 2. **Definitions.** For the purposes of this section, "patient" means a person who is
1.5 admitted to an acute care inpatient facility for a continuous period longer than 24 hours, for
1.6 the purpose of diagnosis or treatment bearing on the physical or mental health of that person.
1.7 For purposes of subdivisions 4 to 9, 12, 13, 15, 16, and 18 to 20, "patient" also means a
1.8 person who receives health care services at an outpatient surgical center or at a birth center
1.9 licensed under section 144.615. "Patient" also means a minor who is admitted to a residential
1.10 program as defined in section 253C.01. For purposes of subdivisions 1, 3 to 16, 18, 20 and
1.11 30, "patient" also means any person who is receiving mental health treatment on an outpatient
1.12 basis or in a community support program or other community-based program. "Resident"
1.13 means a person who is admitted to a nonacute care facility including extended care facilities,
1.14 nursing homes, and boarding care homes for care required because of prolonged mental or
1.15 physical illness or disability, recovery from injury or disease, or advancing age. For purposes
1.16 of all subdivisions except subdivisions 28 and 29, "resident" also means a person who is
1.17 admitted to a facility licensed as a board and lodging facility under Minnesota Rules, parts
1.18 4625.0100 to 4625.2355, a boarding care home under sections 144.50 to 144.56, or a
1.19 supervised living facility under Minnesota Rules, parts 4665.0100 to 4665.9900, and which
1.20 operates a rehabilitation program licensed under chapter 245G or 245I, or Minnesota Rules,
1.21 parts 9530.6510 to 9530.6590. For purposes of all subdivisions except subdivisions 20, 28,
1.22 29, 32, and 33, "resident" also means a person who is admitted to a facility licensed to
1.23 provide intensive residential treatment services or residential crisis stabilization under section
1.24 245I.23."

1.25 Page 2, line 1, strike "and" and insert "or"

1.26 Page 2, line 6, after "degree" insert "or with a bachelor's degree that is not in one of the
1.27 behavioral sciences or related fields"

1.28 Page 2, line 7, strike "(3)" and insert "(5)"

1.29 Page 2, line 13, strike "or"

1.30 Page 2, line 16, strike the period and insert a semicolon

1.31 Page 2, after line 16, insert:

"(4) prior to direct service delivery, complete at least 80 hours of specific training on the characteristics and needs of adults with serious and persistent mental illness that is consistent with national practices standards; or

(5) prior to direct service delivery, demonstrate competency in practice and knowledge of the characteristics and needs of adults with serious and persistent mental illness, consistent with national practices standards."

Page 3, line 24, strike "at least" and delete "20" and strike "hours of" and insert "annual"

Page 3, line 25, strike "annually; and" and insert "according to the following schedule, based on years of service as a case management associate:"

Page 3, after line 25, insert:

"(i) at least 40 hours in the first year;

(ii) at least 30 hours in the second year;

(iii) at least 20 hours in the third year; and

(iv) at least 20 hours in the fourth year; and"

Page 4, after line 13, insert:

"Sec. 3. Minnesota Statutes 2024, section 245.4871, subdivision 4, is amended to read:

Subd. 4. **Case management service provider.** (a) "Case management service provider" means a case manager or case manager associate employed by the county or other entity authorized by the county board to provide case management services specified in subdivision 3 for the child with severe emotional disturbance and the child's family.

(b) A case manager must:

(1) have experience and training in working with children;

(2) have at least a bachelor's degree in one of the behavioral sciences or a related field including, but not limited to, social work, psychology, or nursing from an accredited college or university or meet the requirements of paragraph (d);

(3) have experience and training in identifying and assessing a wide range of children's needs;

(4) be knowledgeable about local community resources and how to use those resources for the benefit of children and their families; and

3.1 (5) meet the supervision and continuing education requirements of paragraphs (e), (f),
3.2 and (g), as applicable.

3.3 (c) A case manager may be a member of any professional discipline that is part of the
3.4 local system of care for children established by the county board.

3.5 (d) A case manager without a bachelor's degree or with a bachelor's degree that is not
3.6 in one of the behavioral sciences or related fields must meet one of the requirements in
3.7 clauses (1) to ~~(3)~~ (5):

3.8 (1) have three or four years of experience as a case manager associate;

3.9 (2) be a registered nurse without a bachelor's degree who has a combination of specialized
3.10 training in psychiatry and work experience consisting of community interaction and
3.11 involvement or community discharge planning in a mental health setting totaling three years;
3.12 ~~or~~

3.13 (3) be a person who qualified as a case manager under the 1998 Department of Human
3.14 Services waiver provision and meets the continuing education, supervision, and mentoring
3.15 requirements in this section;

3.16 (4) prior to direct service delivery, complete at least 80 hours of specific training on the
3.17 characteristics and needs of children with severe emotional disturbance, consistent with
3.18 national practices standards; or

3.19 (5) prior to direct service delivery, demonstrate competency in practice and knowledge
3.20 of the characteristics and needs of children with severe emotional disturbance, consistent
3.21 with national practices standards.

3.22 (e) A case manager with at least 2,000 hours of supervised experience in the delivery
3.23 of mental health services to children must receive regular ongoing supervision and clinical
3.24 supervision totaling 38 hours per year, of which at least one hour per month must be clinical
3.25 supervision regarding individual service delivery with a case management supervisor. The
3.26 other 26 hours of supervision may be provided by a case manager with two years of
3.27 experience. Group supervision may not constitute more than one-half of the required
3.28 supervision hours.

3.29 (f) A case manager without 2,000 hours of supervised experience in the delivery of
3.30 mental health services to children with emotional disturbance must:

3.31 (1) begin 40 hours of training approved by the commissioner of human services in case
3.32 management skills and in the characteristics and needs of children with severe emotional
3.33 disturbance before beginning to provide case management services; and

(2) receive clinical supervision regarding individual service delivery from a mental health professional at least one hour each week until the requirement of 2,000 hours of experience is met.

(g) A case manager who is not licensed, registered, or certified by a health-related licensing board must receive 30 hours of continuing education and training in severe emotional disturbance and mental health services every two years.

(h) Clinical supervision must be documented in the child's record. When the case manager is not a mental health professional, the county board must provide or contract for needed clinical supervision.

(i) The county board must ensure that the case manager has the freedom to access and coordinate the services within the local system of care that are needed by the child.

(j) A case manager associate (CMA) must:

(1) work under the direction of a case manager or case management supervisor;

(2) be at least 21 years of age;

(3) have at least a high school diploma or its equivalent; and

(4) meet one of the following criteria:

(i) have an associate of arts degree in one of the behavioral sciences or human services;

(ii) be a registered nurse without a bachelor's degree;

(iii) have three years of life experience as a primary caregiver to a child with serious emotional disturbance as defined in subdivision 6 within the previous ten years;

(iv) have 6,000 hours work experience as a nondegreed state hospital technician; or

(v) have 6,000 hours of supervised work experience in the delivery of mental health services to children with emotional disturbances; hours worked as a mental health behavioral aide I or II under section 256B.0943, subdivision 7, may count toward the 6,000 hours of supervised work experience.

Individuals meeting one of the criteria in items (i) to (iv) may qualify as a case manager after four years of supervised work experience as a case manager associate. Individuals meeting the criteria in item (v) may qualify as a case manager after three years of supervised experience as a case manager associate.

(k) Case manager associates must meet the following supervision, mentoring, and continuing education requirements;

5.1 (1) have 40 hours of preservice training described under paragraph (f), clause (1);

5.2 (2) receive at least 40 hours of continuing education in severe emotional disturbance
5.3 and mental health service annually; and

5.4 (3) receive at least five hours of mentoring per week from a case management mentor.

5.5 A "case management mentor" means a qualified, practicing case manager or case management
5.6 supervisor who teaches or advises and provides intensive training and clinical supervision
5.7 to one or more case manager associates. Mentoring may occur while providing direct services
5.8 to consumers in the office or in the field and may be provided to individuals or groups of
5.9 case manager associates. At least two mentoring hours per week must be individual and
5.10 face-to-face.

5.11 (l) A case management supervisor must meet the criteria for a mental health professional
5.12 as specified in subdivision 27.

5.13 (m) An immigrant who does not have the qualifications specified in this subdivision
5.14 may provide case management services to child immigrants with severe emotional
5.15 disturbance of the same ethnic group as the immigrant if the person:

5.16 (1) is currently enrolled in and is actively pursuing credits toward the completion of a
5.17 bachelor's degree in one of the behavioral sciences or related fields at an accredited college
5.18 or university;

5.19 (2) completes 40 hours of training as specified in this subdivision; and

5.20 (3) receives clinical supervision at least once a week until the requirements of obtaining
5.21 a bachelor's degree and 2,000 hours of supervised experience are met."

5.22 Page 4, delete lines 28 to 30

5.23 Page 5, delete lines 1 to 10

5.24 Page 6, delete section 5

5.25 Page 8, after line 15, insert:

5.26 "Sec. 7. Minnesota Statutes 2024, section 256B.0622, subdivision 3a, is amended to read:

5.27 Subd. 3a. **Provider certification and contract requirements for assertive community**
5.28 **treatment.** (a) The assertive community treatment provider must have each ACT team be
5.29 certified by the state following the certification process and procedures developed by the
5.30 commissioner. The certification process determines whether the ACT team meets the
5.31 standards for assertive community treatment under this section, the standards in chapter

6.1 245I as required in section 245I.011, subdivision 5, and minimum program fidelity standards
6.2 as measured by a nationally recognized fidelity tool approved by the commissioner.
6.3 Recertification must occur at least every three years.

6.4 (b) An ACT team certified under this subdivision must meet the following standards:

6.5 (1) have capacity to recruit, hire, manage, and train required ACT team members;

6.6 (2) have adequate administrative ability to ensure availability of services;

6.7 (3) ensure flexibility in service delivery to respond to the changing and intermittent care
6.8 needs of a client as identified by the client and the individual treatment plan;

6.9 (4) keep all necessary records required by law;

6.10 (5) be an enrolled Medicaid provider; ~~and~~

6.11 (6) establish and maintain a quality assurance plan to determine specific service outcomes
6.12 and the client's satisfaction with services-; and

6.13 (7) ensure that overall treatment supervision to the ACT team is provided by a qualified
6.14 member of the ACT team, and is available during and after regular business hours and on
6.15 weekends and holidays.

6.16 (c) The commissioner may intervene at any time and decertify an ACT team with cause.
6.17 The commissioner shall establish a process for decertification of an ACT team and shall
6.18 require corrective action, medical assistance repayment, or decertification of an ACT team
6.19 that no longer meets the requirements in this section or that fails to meet the clinical quality
6.20 standards or administrative standards provided by the commissioner in the application and
6.21 certification process. The decertification is subject to appeal to the state."

6.22 Page 8, line 20, strike everything after "professional"

6.23 Page 8, line 21, strike the old language and after the stricken semicolon insert "clinical
6.24 trainee, or mental health practitioner;"

6.25 Page 12, delete section 8

6.26 Renumber the sections in sequence and correct the internal references

6.27 Amend the title accordingly