



S.F. No. 2628 – County cost modification of care provisions

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Section 1 amends **246.54, subdivision 1a - Anoka-Metro Regional Treatment Center**, by striking obsolete language in old paragraph (c), and making permanent the current temporary county cost of care provisions for care provided to individuals at Anoka-Metro Regional Treatment Center who do not meet the level of care criteria for AMRTC.

Section 2 amends **246.54, subdivision 1b - Community behavioral health hospitals**, by simplifying the language in paragraph (a), striking obsolete language in old paragraph (b), and making permanent the current temporary county cost of care provisions for care provided to individuals at community behavioral health hospitals who do not meet the level of care criteria for a CBHH.

Section 3 adds **246C.07, subdivision 9 – Public notice of admission metrics**, which requires the direct care and treatment executive board to publish a publicly available online dashboard with summary data regarding admissions to programs operated by Direct Care and Treatment.

Section 4 amends **253B.10, subdivision 1 - Administrative requirements**, which is the statutory section governing what happens after an individual is civilly committed.

The amendment to **paragraph (b), clause (7)**, is technical to facilitate the relocation of the so-called “48-hour rule” to a newly created statutory section.

The amendment to **old paragraph (e)** deletes language related to a temporary modification of the 48-hour rule that under current law is set to expire prior to the proposed effective date of this bill.

The amendment to **old paragraph (f) / new paragraph (e)** modifies the content, distribution, and frequency of notices the executive medical director of direct care and treatment is currently required to provide regarding an individual’s priority admission status.

Section 5 adds **253B.1005 – ADMISSION TIMELINES**, to which the existing “48-hour rule” is moved and codified as **subdivision 1 – Admission required within 48 hours**.

Subdivision 2 - Admission required within ten days, provides for replacement of the 48-hour rule for admission to a state-operated treatment program with a 10-day rule after certain benchmarks for expanded capacity at DCT facilities are met.

Section 6 adds **253B.101 – COST OF DELAYED ADMISSION**, which requires the direct care and treatment executive board to reimburse other state agencies or municipalities for the cost of confining civilly committed individuals beyond the first 30-days of confinement following civil commitment if the individual is awaiting admission to a state-operated treatment program.

Section 7 extends the **Priority Admissions Review Panel** as currently constituted, defines the duties of panel during the extended timeframe, and requires the commissioner of management and budget to provide technical assistance and fiscal analysis to assist the panel in carrying out its assigned duties.

Sections 8 to 10 are blank appropriations to expand capacity at certain direct care and treatment facilities.



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