

STATE OF MINNESOTA
DEPARTMENT OF HUMAN SERVICES

In the Matter of the Proposed Adoption
of Amendments to the Rules of the State
Department of Human Services Relating
to the Licensure of Chemical Dependency
Rehabilitation Programs, Minnesota Rules,
Parts 9530.4230; 9530.6300; and 9530.7030

**STATEMENT OF NEED
AND REASONABLENESS**

INTRODUCTION

Minnesota Rules, Parts 9530.4230, subpart 2; 9530.6300, item J; and 9530.7030, subpart 2, item G, require chemical dependency providers to follow-up on clients who have been discharged from the program. The amendments to the three rule parts will eliminate the requirement as of July 1, 1993 (clients discharged before January 1, 1993). Because the amendments have the same effect and are being made to address the same concern the need for and reasonableness of the amendments will be offered once.

SMALL BUSINESS CONSIDERATION IN RULEMAKING

The Department has considered the small business consideration requirements under Minnesota Statutes, section 14.115. The proposed amendments reduce requirements on small business by eliminating a provision that requires follow-up of clients served by the program. Follow-up will be performed by the Department through contract.

IMPACT ON AGRICULTURAL LANDS

The proposed amendments do not impact agricultural lands and, therefore, the statutory provisions under Minnesota Statutes, section 14.11, subdivision 2 does not apply.

FISCAL NOTE

A fiscal note has been prepared on the rule amendments. The Department is changing the way follow-up information is collected about individuals who have been discharged from chemical dependency treatment programs. Under the current rules, the treatment programs are required to collect the follow-up data. In the future the Department will contract with an outside firm that specializes in conducting client follow-up. The result will be more reliable information, collected in a more timely and consistent manner. The new method will also assure a sample which is statistically valid for making statewide treatment improvements.

The cost of follow-up interviews is now a cost of doing business for the treatment programs. The Department estimates that clients, third

party payors and the Consolidated Chemical Dependency Treatment Fund pay approximately \$110,000 a year for client follow-up, a cost that is now included in the charges for treatment. The Department anticipates spending approximately \$76,000 a year to contract with a firm that specializes in this type of data collection. Therefore, there will be a net savings of approximately \$34,000 per year.

RULE DEVELOPMENT PROCEDURES

On January 11, 1993, the Department published in the State Register a Notice of Solicitation of Outside Information or Opinion Governing the Licensure of Chemical Dependency Rehabilitation Programs (17 S.R. 1762). A rule advisory committee was not established to review the rule amendments because the amendments are minor. Although the rule amendments reduce data collection on chemical dependency providers, the necessary data will continue to be collected under contract with the Department. The Department does not believe the rule amendments are controversial.

BACKGROUND

The most common way providers meet the requirement to conduct client follow-up is by participating in the Drug and Alcohol Normative Evaluation System (DAANES). DAANES is a data collection system operated by the Department with approximately 88% of licensed chemical dependency providers participating.

Information in DAANES is collected on four data collection forms. The one affected by these amendments is the Client Follow-up Form. While programs have been required to conduct client follow-up, there has not been uniform compliance. In addition, programs that attempted to comply were only successful in contacting clients 50 percent of the time. As a result, the Department has follow-up information on approximately 37 percent of the treatment admissions recorded on DAANES.

Because of the lack of compliance and the lack of successful client contacts the information available to the Department is not representative of the client population as a whole. Its usefulness for setting standards or improving the treatment system is, therefore, extremely limited.

In January 1992 the Chemical Dependency Program Division of the Department of Human Services published the Chemical Dependency Treatment Accountability Plan, a report to the legislature. This document (Exhibit 1) provides a plan for improving the quality of outcome data available to the Department for program planning and improvement. A major feature of the plan is the centralization of client follow-up interviews to improve client participation rates, consistency of the interview structure, and control of the method of client sampling to ensure the data can be used to reflect clients in the entire system.

Since the publication of the report, DHS has contracted with a single firm that specializes in collecting client follow-up data and begun

testing this and other aspects of the Accountability Plan, relying on chemical dependency providers that have volunteered to participate. Because the centralized client follow-up has begun, it can replace the client follow-up conducted by the providers.

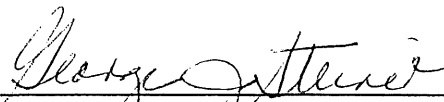
MINNESOTA RULES, PART 9530.4230, SUBPART 2; PART 9530.6300, ITEM J; AND PART 9530.7030, SUBPART 2, ITEM G.

It is necessary to amend these rules to eliminate the requirement for providers to conduct client follow-up because continuing the requirement leads to unnecessary duplication of effort by the providers and the Department and requires unnecessary work and expense on the part of the providers. It is reasonable to replace the requirement with a data collection method managed by the Department because the new method will result in more reliable information for program improvement. The amendment to part 9530.4230, subpart 2; part 9530.6300, item J; and part 9530.7030, subpart 2, item G is authorized under Minnesota Statutes, section 245A.09, subdivision 1, which permits the agency to adopt rules to govern the operation, maintenance, and licensure of programs subject to licensure under Minnesota Statutes, sections 245A.01 to 245A.16; Minnesota Statutes, section 254B.03, subdivision 5, which permits the agency to adopt rules to implement the Consolidated Chemical Dependency Treatment Fund, including determining vendor eligibility; and Minnesota Statutes, section 254A.03, subdivision 1, paragraph (d), which gives the Department the authority and responsibility to gather facts about the effectiveness of treatment.

EXPERT WITNESS:

If this rule should go to public hearing, the Department does not plan to have outside expert witnesses testify on its behalf.

DATE: 2-3-93



NATALIE HAAS STEFFEN
Commissioner

