

**SENATE
STATE OF MINNESOTA
NINETY-FIRST SESSION**

S.F. No. 1822

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OFFICIAL STATUS
Introduction and first reading
Referred to Human Services Reform Finance and Policy

1.1 A bill for an act
1.2 relating to human services; modifying disability waiver rate system; amending
1.3 Minnesota Statutes 2018, section 256B.4914, subdivision 2.

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

1.5 Section 1. Minnesota Statutes 2018, section 256B.4914, subdivision 2, is amended to read:

1.6 Subd. 2. **Definitions.** (a) For purposes of this section, the following terms have the
1.7 meanings given them, unless the context clearly indicates otherwise.

1.8 (b) "Commissioner" means the commissioner of human services.

1.9 (c) "Component value" means underlying factors that are part of the cost of providing
1.10 services that are built into the waiver rates methodology to calculate service rates.

1.11 (d) "Customized living tool" means a methodology for setting service rates that delineates
1.12 and documents the amount of each component service included in a recipient's customized
1.13 living service plan.

1.14 (e) "Disability waiver rates system" means a statewide system that establishes rates that
1.15 are based on uniform processes and captures the individualized nature of waiver services
1.16 and recipient needs.

1.17 (f) "Individual staffing" means the time spent as a one-to-one interaction specific to an
1.18 individual recipient by staff to provide direct support and assistance with activities of daily
1.19 living, instrumental activities of daily living, and training to participants, and is based on
1.20 the requirements in each individual's coordinated service and support plan under section
1.21 245D.02, subdivision 4b; any coordinated service and support plan addendum under section

2.1 245D.02, subdivision 4c; and an assessment tool. Provider observation of an individual's
2.2 needs must also be considered.

2.3 (g) "Lead agency" means a county, partnership of counties, or tribal agency charged
2.4 with administering waived services under sections 256B.092 and 256B.49.

2.5 (h) "Median" means the amount that divides distribution into two equal groups, one-half
2.6 above the median and one-half below the median.

2.7 (i) "Payment or rate" means reimbursement to an eligible provider for services provided
2.8 to a qualified individual based on an approved service authorization.

2.9 (j) "Rates management system" means a web-based software application that uses a
2.10 framework and component values, as determined by the commissioner, to establish service
2.11 rates.

2.12 (k) "Recipient" means a person receiving home and community-based services funded
2.13 under any of the disability waivers.

2.14 (l) "Shared staffing" means time spent by employees, not defined under paragraph (f),
2.15 providing or available to provide more than one individual with direct support and assistance
2.16 with activities of daily living as defined under section 256B.0659, subdivision 1, paragraph
2.17 (b); instrumental activities of daily living as defined under section 256B.0659, subdivision
2.18 1, paragraph (i); ancillary activities needed to support individual services; and training to
2.19 participants, and is based on the requirements in each individual's coordinated service and
2.20 support plan under section 245D.02, subdivision 4b; any coordinated service and support
2.21 plan addendum under section 245D.02, subdivision 4c; an assessment tool; and provider
2.22 observation of an individual's service need. Total shared staffing hours are divided
2.23 proportionally by the number of individuals who receive the shared service provisions.

2.24 (m) "Staffing ratio" means the number of recipients a service provider employee supports
2.25 during a unit of service based on a uniform assessment tool, provider observation, case
2.26 history, and the recipient's services of choice, and not based on the staffing ratios under
2.27 section 245D.31.

2.28 (n) "Unit of service" means the following:

2.29 (1) for residential support services under subdivision 6, a unit of service is a day. Any
2.30 portion of any calendar day, within allowable Medicaid rules, where an individual spends
2.31 time in a residential setting is billable as a day;

2.32 (2) for day services under subdivision 7:

- 3.1 (i) for day training and habilitation services, a unit of service is either:
- 3.2 (A) a day unit of service is defined as six or more hours of time spent providing direct
- 3.3 services and transportation; or
- 3.4 (B) a partial day unit of service is defined as fewer than six hours of time spent providing
- 3.5 direct services and transportation; and
- 3.6 (C) for new day service recipients after January 1, 2014, 15 minute units of service must
- 3.7 be used for fewer than six hours of time spent providing direct services and transportation;
- 3.8 (ii) for adult day and structured day services, a unit of service is a day or 15 minutes. A
- 3.9 day unit of service is six or more hours of time spent providing direct services;
- 3.10 (iii) for prevocational services, a unit of service is a day or ~~an hour~~ 15 minutes. A day
- 3.11 unit of service is six or more hours of time spent providing direct service;
- 3.12 (3) for unit-based services with programming under subdivision 8:
- 3.13 (i) for supported living services, a unit of service is a day or 15 minutes. When a day
- 3.14 rate is authorized, any portion of a calendar day where an individual receives services is
- 3.15 billable as a day; and
- 3.16 (ii) for all other services, a unit of service is 15 minutes; and
- 3.17 (4) for unit-based services without programming under subdivision 9, a unit of service
- 3.18 is 15 minutes.