

CHAPTER 9510
DEPARTMENT OF HUMAN SERVICES
RATES FOR HEALTH CARE FACILITIES

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9510.1020 DEFINITIONS.

[For text of subpart 1, see M.R.]

Subp. 2. **Case manager.** "Case manager" has the meaning given it in part 9525.0015, subpart 5.

[For text of subps 3 to 14, see M.R.]

Subp. 15. **Regional treatment center.** "Regional treatment center" means an ICF/MR or nursing home owned and operated by the state of Minnesota.

Subp. 16. **Training and habilitation services.** "Training and habilitation services" means health and social services provided under Minnesota Statutes, sections 252.40 to 252.47. For purposes of parts 9510.1020 to 9510.1140, "training and habilitation services" do not include training and habilitation services provided as a waived service as defined in Minnesota Statutes, section 256B.501, subdivision 1, and parts 9525.1800 to 9525.1930.

Statutory Authority: *MS s 252.46; 256B.501*

History: *14 SR 2354*

9510.1030 APPLICABILITY AND PURPOSE.

Subpart 1. **Applicability.** Parts 9510.1020 to 9510.1140 establish procedures for counties and providers to follow to seek authorization for a special needs rate exception for very dependent persons with special needs and establish procedures for determining the special needs rate exception payments for training and habilitation services and for intermediate care facilities for the mentally retarded. Parts 9510.1020 to 9510.1140 do not apply to persons with mental retardation or related conditions who reside in a regional treatment center.

Subp. 2. **Purpose.** The purpose of the special needs rate exception is to provide to a specific client those staff interventions or equipment whose costs are not included in the per diem rate of the intermediate care facility for the mentally retarded or the per diem rate of the training and habilitation service. The special needs rate exception payment is intended to fund short-term special needs for a specific client in order to prevent the placement or retention of the client in a regional treatment center. The special needs rate exception is only to be allowed after all other funding sources or alternatives have been exhausted.

Statutory Authority: *MS s 252.46; 256B.501*

History: *14 SR 2354*

9510.1040 APPLICATION TO BE COMPLETED BY PROVIDER.

[For text of subpart 1, see M.R.]

Subp. 2. **Information about client's needs and methods used to address needs.** The provider shall:

[For text of item A, see M.R.]

B. describe the client's special need or needs which put the client at risk of regional treatment center placement or continued regional treatment center placement;

[For text of items C to I, see M.R.]

Subp. 3. Information about provider. The provider shall submit:

[For text of item A, see M.R.]

B. an explanation of the efforts used to meet the client's needs within the provider's current per diem rate, including:

- (1) modifications made to the individual program plan;
- (2) reallocation of current program personnel;
- (3) training and in-service provided to program personnel for the year immediately preceding the date of the provider's application to the county; and
- (4) other available resources used.

Subp. 4. Supporting documentation. The provider shall submit with the application the following:

A. A copy of the individual program plan including the measurable behavioral outcomes which are anticipated to be achieved by the client as a result of the proposed staff intervention or the equipment.

B. Documentation of the provider's historical costs on which the current per diem rate is based. An ICF/MR provider shall submit a copy of the most recent rate determination letter. A training and habilitation service program shall submit a copy of its current budget, year-to-date expenses, and current assets.

C. Work papers showing the method used to determine the cost of the staff intervention and equipment identified in subpart 2, item E, including the hourly wage of staff who will implement the intervention, the unit cost of consultation or training services, and the unit cost of equipment requested.

D. Documentation that any equipment requested in the application is not available from the Department of Vocational Rehabilitation or covered under parts 9505.0170 to 9505.0475.

E. Documentation that any consultant services requested in the application are not services covered under parts 9505.0170 to 9505.0475.

F. The name and address of any vendor or contractor to be reimbursed by the special needs rate exception and the name of the person or persons who will actually provide the equipment or services if known.

G. A plan to decrease the client's reliance on the proposed staff intervention.

Statutory Authority: *MS s 252.46; 256B.501*

History: *14 SR 2354*

9510.1050 COUNTY REVIEW OF PROVIDER'S APPLICATION.

[For text of subpart 1, see M.R.]

Subp. 2. Client eligibility. A client shall be eligible for a special needs rate exception if the client meets the criteria in items A to D:

[For text of items A and B, see M.R.]

C. the client is a person with mental retardation or a related condition according to the definition in part 9525.0015, subpart 20, and has at least one of the following characteristics:

[For text of subitems (1) to (3), see M.R.]

D. the client is at risk of placement in a regional treatment center within 60 days or of remaining in a regional treatment center, unless additional resources are provided through parts 9510.1020 to 9510.1140 due to:

[For text of subitems (1) and (2), see M.R.]

Subp. 3. General provider eligibility. A provider shall be eligible for a special needs rate exception if the provider meets the following criteria:

A. The existing program or services offered by the provider cannot be modified to meet the client's needs within the provider's approved per diem rates.

[For text of items B and C, see M.R.]

Subp. 4. Availability of other resources. The provider shall be eligible for a special needs rate exception only if the county determines that:

A. There are no other existing resources or services covered under parts 9505.0170 to 9505.0475 available to meet the client's needs.

[For text of item B, see M.R.]

[For text of subp 5, see M.R.]

Statutory Authority: *MS s 252:46; 256B.501*

History: *14 SR 2354*

9510.1070 COUNTY'S APPLICATION TO COMMISSIONER.

If the county approves the provider's application, the county shall apply to the commissioner for a special needs rate exception within ten working days of the date of receipt by the county from the provider of a complete application and supporting documentation. To apply for a special needs rate exception, the county shall submit to the commissioner a copy of the provider's approved application and supporting documentation and the following documents:

A. documentation of the steps taken by the county to determine client and provider eligibility in accordance with parts 9510.1020 to 9510.1140, including documentation of the conditions which put the client at risk of regional treatment center placement or continued regional treatment center placement;

B. a copy of the client's current individual service plan which explains the need to place or retain the eligible client in a regional treatment center if the requested services cannot be provided and the sections of the individual habilitation plan which include the methodology and measurable outcomes of the proposed intervention;

C. a copy of the client's most recent medical evaluation signed by a physician;

D. a copy of the client's regional treatment center discharge plan, if the special needs rate exception is requested to facilitate the client's discharge from a regional treatment center;

E. a copy of the county's plan to coordinate and monitor the implementation of the proposed staff intervention described in the application submitted according to part 9510.1040;

F. a letter from the county of financial responsibility stating approval of the changes in the individual service plan if the county submitting the application is not the county of financial responsibility; or if the county of financial responsibility does not approve the changes, a letter stating the reasons the county of financial responsibility does not approve the changes and describing the actions, if any, to be taken by the county of financial responsibility; and

G. if the special needs rate exception is not requested for both the day training and habilitation service and the ICF/MR, a written explanation must be provided by the county.

Statutory Authority: *MS s 252.46; 256B.501*

History: *14 SR 2354*

9510.1090 ESTABLISHING SPECIAL NEEDS RATE EXCEPTION PAYMENT.

[For text of subpart 1, see M.R.]

Subp. 2. Allowable costs. Unless otherwise reimbursable by the Department of Vocational Rehabilitation or by direct payments under parts 9505.0170 to 9505.0475, the following costs, if approved by the commissioner in accordance with parts 9510.1020 to 9510.1140 and 9553.0010 to 9553.0080, are allowable for purposes of establishing the special needs rate exception payment:

[For text of items A to C, see M.R.]

[For text of subp 3, see M.R.]

Subp. 4. Limitation. The combined per diem costs of training and habilitation services, ICF/MR services, and the special needs rate exception payment and any other special needs rate exception payments in effect for the same client, shall not exceed the medical assistance per diem cost of providing services to persons with mental retardation or related conditions in regional treatment centers. For the purpose of determining this limitation, items A to F apply.

[For text of items A to D, see M.R.]

E. The regional treatment center medical assistance per diem rate must be the rate in effect on the date the provider's completed application is submitted to the county.

[For text of item F, see M.R.]

[For text of subp 5, see M.R.]

Statutory Authority: *MS s 252.46; 256B.501*

History: *14 SR 2354*

9510.1100 VARIANCE REQUEST.

[For text of subpart 1, see M.R.]

Subp. 2. Eligible provider. A licensed provider of training and habilitation services may apply for a variance if the provider is not an ICF/MR and provides or plans to provide training and habilitation services to a client who resides in an ICF/MR which has a per diem rate equal to or greater than 85 percent of the medical assistance per diem cost of providing services to persons with mental retardation or related conditions in the regional treatment centers.

[For text of subps 3 and 4, see M.R.]

Statutory Authority: *MS s 252.46; 256B.501*

History: *14 SR 2354*

9510.1110 EMERGENCY PROCEDURE.

Subpart 1. Definition. For the purposes of this part, an emergency is either:

A. a postoperative condition resulting from unplanned surgery or unan-

anticipated complications resulting from planned surgery which would result in continued placement in a hospital or skilled nursing facility, loss of placement in a community ICF/MR, and admission to a regional treatment center within 60 days; or

B. the sudden onset of self-injurious or aggressive client behavior which results in an immediate danger to self or others; which would result in immediate admission to the regional treatment center in the absence of intervention.

Subp. 2. Emergency approval. In an emergency, the county may approve the addition of staff, consultation, or staff training necessary to intervene in the emergency without obtaining prior approval of a special needs rate exception from the commissioner if the county determines that all other client and provider eligibility is met. Only costs meeting the definitions under part 9510.1090, subpart 2, items A and B, shall be allowed under this part. No funds spent will be reimbursed, even in an emergency, without the county's approval. In an emergency, the county shall:

A. notify the commissioner by telephone no later than the next working day and in writing within three working days of the client's situation, and state in the notice a description of the behaviors or medical condition requiring emergency intervention and the actions taken by the provider to control the behaviors, and expenditures authorized by the case manager; and

B. complete and submit, according to parts 9510.1020 to 9510.1140, an application for a special needs rate exception for the emergency period and for any additional period, within 30 days of the date the county notified the commissioner of the emergency.

Subp. 3. Reimbursement for emergency services. A special needs rate exception for the costs identified in part 9510.1090, subpart 2, item A or B, approved in accordance with subpart 2 shall be reimbursable for a period not to exceed 30 days from the date the county notifies the commissioner of the emergency. No payment shall be authorized by the commissioner for services provided during an emergency until an application is submitted to the commissioner by the county delineating actual costs of the intervention. The total amount authorized for payment by the commissioner is subject to the per diem limitations under part 9510.1090, subpart 4.

Statutory Authority: *MS s 252.46; 256B.501*

History: *14 SR 2354*

9510.1130 RECORDS, REPORTS, AUDITS, AND REPAYMENT.

Subpart 1. Records. The provider shall maintain complete program and fiscal records and supporting documentation identifying the services and costs provided under the special needs rate exception. The costs must be maintained in well-organized files and identified in accounts separate from other facility or program costs. Costs authorized and approved under these parts do not become part of a provider's historic cost base for the purpose of setting rates under parts 9553.0010 to 9553.0080 or Minnesota Statutes, section 252.46. The provider's records shall be kept for five years and be subject to the maintenance schedule, audit availability requirements, and other provisions of parts 9505.1750 to 9505.2150.

Subp. 2. Reports. The county shall submit items A and B to the commissioner.

[For text of item A, see M.R.]

B. A final report submitted within 90 days of termination of a special needs rate exception which documents the following:

[For text of subitems (1) and (2), see M.R.]

(3) the amount of expenditures incurred by the provider for costs allowable under part 9510.1090, subpart 2; and

[For text of subitem (4), see M.R.]

Subp. 3. **Audits.** The commissioner may conduct program and fiscal audits of any provider receiving a special needs rate exception to identify any overpayments made to the provider and ensure compliance with parts 9510.1020 to 9510.1140.

[For text of subp 4, see M.R.]

Statutory Authority: *MS s 252.46; 256B.501*

History: *14 SR 2354*