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State of Minnesota  
**HOUSE OF REPRESENTATIVES**

EIGHTY-FIFTH  
SESSION

**HOUSE FILE No. 908**

February 12, 2007

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The bill was read for the first time and referred to the Committee on Health and Human Services

March 7, 2007

Committee Recommendation and Adoption of Report:

To Pass as Amended and re-referred to the Committee on Governmental Operations, Reform, Technology and Elections

March 26, 2007

Committee Recommendation and Adoption of Report:

To Pass as Amended and re-referred to the Committee on Finance

1.1 A bill for an act  
1.2 relating to human services; extending a quality assurance system and commission  
1.3 until 2014; establishing a statewide quality assurance and improvement system;  
1.4 requiring reports; appropriating money; amending Minnesota Statutes 2006,  
1.5 sections 256B.095; 256B.0951, subdivision 1; proposing coding for new law  
1.6 in Minnesota Statutes, chapter 256B.

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

1.8 Section 1. Minnesota Statutes 2006, section 256B.095, is amended to read:

1.9 **256B.095 QUALITY ASSURANCE SYSTEM ESTABLISHED.**

1.10 (a) Effective July 1, 1998, a quality assurance system for persons with developmental  
1.11 disabilities, which includes an alternative quality assurance licensing system for programs,  
1.12 is established in Dodge, Fillmore, Freeborn, Goodhue, Houston, Mower, Olmsted, Rice,  
1.13 Steele, Wabasha, and Winona Counties for the purpose of improving the quality of  
1.14 services provided to persons with developmental disabilities. A county, at its option, may  
1.15 choose to have all programs for persons with developmental disabilities located within  
1.16 the county licensed under chapter 245A using standards determined under the alternative  
1.17 quality assurance licensing system or may continue regulation of these programs under  
1.18 the licensing system operated by the commissioner. The project expires on June 30,  
1.19 ~~2009~~ 2014.

1.20 (b) Effective July 1, 2003, a county not listed in paragraph (a) may apply to  
1.21 participate in the quality assurance system established under paragraph (a). The  
1.22 commission established under section 256B.0951 may, at its option, allow additional  
1.23 counties to participate in the system.

1.24 (c) Effective July 1, 2003, any county or group of counties not listed in paragraph (a)  
1.25 may establish a quality assurance system under this section. A new system established

2.1 under this section shall have the same rights and duties as the system established  
2.2 under paragraph (a). A new system shall be governed by a commission under section  
2.3 256B.0951. The commissioner shall appoint the initial commission members based  
2.4 on recommendations from advocates, families, service providers, and counties in the  
2.5 geographic area included in the new system. Counties that choose to participate in a  
2.6 new system shall have the duties assigned under section 256B.0952. The new system  
2.7 shall establish a quality assurance process under section 256B.0953. The provisions of  
2.8 section 256B.0954 shall apply to a new system established under this paragraph. The  
2.9 commissioner shall delegate authority to a new system established under this paragraph  
2.10 according to section 256B.0955.

2.11 (d) Effective July 1, 2007, the quality assurance system may be expanded to include  
2.12 programs for persons with disabilities and older adults.

2.13 Sec. 2. Minnesota Statutes 2006, section 256B.0951, subdivision 1, is amended to read:

2.14 Subdivision 1. **Membership.** The Quality Assurance Commission is established.  
2.15 The commission consists of at least 14 but not more than 21 members as follows: at  
2.16 least three but not more than five members representing advocacy organizations; at  
2.17 least three but not more than five members representing consumers, families, and their  
2.18 legal representatives; at least three but not more than five members representing service  
2.19 providers; at least three but not more than five members representing counties; and the  
2.20 commissioner of human services or the commissioner's designee. The first commission  
2.21 shall establish membership guidelines for the transition and recruitment of membership for  
2.22 the commission's ongoing existence. Members of the commission who do not receive a  
2.23 salary or wages from an employer for time spent on commission duties may receive a per  
2.24 diem payment when performing commission duties and functions. All members may be  
2.25 reimbursed for expenses related to commission activities. Notwithstanding the provisions  
2.26 of section 15.059, subdivision 5, the commission expires on June 30, ~~2009~~ 2014.

2.27 Sec. 3. **[256B.096] QUALITY MANAGEMENT; ASSURANCE; AND**  
2.28 **IMPROVEMENT SYSTEM FOR MINNESOTANS RECEIVING DISABILITY**  
2.29 **SERVICES.**

2.30 Subdivision 1. **Scope.** In order to improve the quality of services provided to  
2.31 Minnesotans with disabilities and to meet the requirements of the federally approved home  
2.32 and community-based waivers under section 1915c of the Social Security Act, a statewide  
2.33 quality assurance and improvement system for Minnesotans receiving disability services  
2.34 shall be developed. The disability services included are the home and community-based

3.1 services waiver programs for persons with developmental disabilities under section  
3.2 256B.092, subdivision 4, and persons with disabilities under section 256B.49.

3.3 Subd. 2. **Stakeholder advisory group.** The commissioner shall consult with a  
3.4 stakeholder advisory group on the development and implementation of the state quality  
3.5 management, assurance, and improvement system, including representatives from:  
3.6 disability service recipients, disability service providers, disability advocacy groups,  
3.7 county human service agencies, and state agency staff from the Departments of Human  
3.8 Services and Health and ombudsman for mental health and developmental disabilities on  
3.9 the development of a statewide quality assurance and improvement system.

3.10 Subd. 3. **Annual survey of service recipients.** The commissioner, in consultation  
3.11 with the stakeholder advisory group, shall develop and conduct an annual independent  
3.12 random statewide survey of between five and ten percent of service recipients to determine  
3.13 the effectiveness and quality of disability services. The survey shall be consistent with  
3.14 the system performance expectations of the Centers for Medicare and Medicaid Services  
3.15 quality management requirements and framework. The survey shall analyze whether  
3.16 desired outcomes have been achieved for persons with different demographic, diagnostic,  
3.17 health, and functional needs and receiving different types of services, in different settings,  
3.18 with different costs. The survey shall be field tested during 2008 and implemented by  
3.19 February 1, 2009. Annual statewide and regional reports of the results shall be published  
3.20 for use by regions, counties, and providers to plan and measure the impact of quality  
3.21 improvement activities.

3.22 Subd. 4. **Improvements for incident reporting, investigation, analysis, and**  
3.23 **follow-up.** In consultation with the stakeholder group, the commissioner shall identify  
3.24 the information, data sources, and technology needed to improve the system of incident  
3.25 reporting, including:

3.26 (1) reports made under the Maltreatment of Minors and Vulnerable Adults Acts; and  
3.27 (2) investigation, analysis, and follow-up for disability services.

3.28 The commissioner must ensure that the federal home and community-based waiver  
3.29 requirements are met and that incidents that may have jeopardized safety; health; or  
3.30 violated service-related assurances, civil and human rights, and other protections designed  
3.31 to prevent abuse, neglect, and exploitation are reviewed, investigated, and acted upon  
3.32 in a timely manner.

3.33 Subd. 5. **Biennial report.** The commissioner shall provide a biennial report to the  
3.34 chairs of the legislative committees with jurisdiction over health and human services  
3.35 policy and funding beginning January 15, 2009, on the development and activities of the  
3.36 quality management, assurance, and improvement system designed to meet the federal

4.1 requirements under the home and community-based services waiver programs for persons  
4.2 with disabilities. By January 15, 2008, the commissioner shall provide a preliminary  
4.3 report on the priorities for meeting the federal requirements, progress on the annual  
4.4 survey, recommendations for improvements in the incident reporting system, and a plan  
4.5 for incorporating the quality assurance efforts under section 256B.095 and other regional  
4.6 efforts into the statewide system.

4.7       Sec. 4. **APPROPRIATIONS.**

4.8       \$..... is appropriated from the general fund to the commissioner of human services  
4.9 for the biennium beginning July 1, 2007, for the purposes of section 3. Federal Medicaid  
4.10 matching funds obtained for this purpose shall be dedicated to the commissioner for this  
4.11 purpose.