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State of Minnesota
HOUSE OF REPRESENTATIVES

EIGHTY-FIFTH
SESSION

HOUSE FILE No. 3016

February 14, 2008

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

1.1 A bill for an act
1.2 relating to human services; allowing medical assistance payment for services
1.3 provided by more than one home care or hospice agency; amending Minnesota
1.4 Statutes 2006, section 256B.0625, by adding a subdivision.

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

1.6 Section 1. Minnesota Statutes 2006, section 256B.0625, is amended by adding a
1.7 subdivision to read:

1.8 Subd. 53. Services by multiple agencies. (a) Medical assistance payments may be
1.9 provided to more than one home care or hospice agency, if the services provided by the
1.10 agencies are not duplicative and one of the agencies is an agency with expertise in pediatric
1.11 palliative care and is providing pediatric palliative care services. The commissioner shall
1.12 not consider pediatric palliative care services to be duplicative with services provided by
1.13 another agency solely because the agency providing pediatric palliative care services
1.14 delivers these services using the same provider types used by another agency to deliver
1.15 services that are not pediatric palliative care.

1.16 (b) For purposes of this subdivision, the following definitions apply:

1.17 (1) "agency with expertise in pediatric palliative care" means an agency that: (i)
1.18 provides two or more pediatric palliative care services across two or more disciplines,
1.19 through a hospice and palliative care certified physician, hospice and palliative care
1.20 certified registered nurse, or licensed social worker with experience in pediatric palliative
1.21 care; and (ii) employs two or more staff who have received formal academic and practical
1.22 training in providing pediatric palliative care;

1.23 (2) "pediatric palliative care services" means: (i) pain and symptom management
1.24 services provided to a child with a terminal illness by a hospice and palliative care

2.1 certified physician, hospice and palliative care certified registered nurse, or licensed social
2.2 worker with experience in pediatric palliative care; and (ii) services designed to address
2.3 the psychosocial needs of children with a terminal condition including, but not limited to,
2.4 palliative care coordination provided in collaboration with a medical home, psychosocial
2.5 support services, child life services, bereavement services, and support services provided
2.6 by a chaplain; and

2.7 (3) "terminal condition" means an illness or a medical condition likely to result in
2.8 death before the age of 21 as determined by a physician.