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State of Minnesota  
**HOUSE OF REPRESENTATIVES**

**EIGHTY-SIXTH  
SESSION**

**HOUSE FILE No. 657**

February 9, 2009

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

1.1 A bill for an act  
1.2 relating to human services; modifying 24-hour customized living services;  
1.3 amending Minnesota Statutes 2008, section 256B.0915, subdivision 3h.

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

1.5 Section 1. Minnesota Statutes 2008, section 256B.0915, subdivision 3h, is amended to  
1.6 read:

1.7 Subd. 3h. **Service rate limits; 24-hour customized living services.** (a) The  
1.8 payment rates for 24-hour customized living services is a monthly rate negotiated and  
1.9 authorized by the lead agency within the parameters established by the commissioner  
1.10 of human services. The payment agreement must delineate the services that have been  
1.11 customized for each recipient and specify the amount of each service to be provided. The  
1.12 lead agency shall ensure that there is a documented need for all services authorized.  
1.13 The lead agency shall not authorize 24-hour customized living services unless there is  
1.14 a documented need for 24-hour supervision. For purposes of this section, "24-hour  
1.15 supervision" means that the recipient requires assistance due to needs related to one or  
1.16 more of the following:

- 1.17 (1) intermittent assistance with toileting or transferring;
- 1.18 (2) cognitive or behavioral issues;
- 1.19 (3) a medical condition that requires clinical monitoring; or
- 1.20 (4) other conditions or needs as defined by the commissioner of human services.

1.21 The lead agency shall ensure that the frequency and mode of supervision of the recipient  
1.22 and the qualifications of staff providing supervision are described and meet the needs  
1.23 of the recipient. Customized living services must not include rent or raw food costs.  
1.24 The negotiated payment rate for 24-hour customized living services must be based on

2.1 services to be provided. Negotiated rates must not exceed payment rates for comparable  
2.2 elderly waiver or medical assistance services and must reflect economies of scale. The  
2.3 individually negotiated 24-hour customized living payments, in combination with the  
2.4 payment for other elderly waiver services, including case management, must not exceed  
2.5 the recipient's community budget cap specified in subdivision 3a.

2.6 (b) Twenty-four-hour customized living services are delivered by a provider licensed  
2.7 by the commissioner of health as a class A or class F home care provider and provided in a  
2.8 building that is registered as a housing with services establishment under chapter 144D.  
2.9 Those home care providers with a capacity to serve 12 or fewer clients may provide  
2.10 nighttime supervision to clients using personnel who have other duties and are located in  
2.11 an adjoining building if:

2.12 (1) the personnel providing supervision have been trained and determined to be  
2.13 competent in accordance with all applicable home care licensing requirements;

2.14 (2) the provider has assessed the clients needing 24-hour supervision and determined  
2.15 that their needs can be safely met;

2.16 (3) the provider has a communication system that permits staff providing supervision  
2.17 to be summoned by the clients; and

2.18 (4) staff providing supervision to clients are able to respond within a time frame that  
2.19 meets the clients' needs and in no event exceeds ten minutes.