General Licensing Changes
“Access to Persons Served by a program” Definition Modified
This changes the definition of “access to persons served” so that a background study disqualification extends to a person who may access any personal, financial, or health information on individuals served by the program. (§245C.02, subd 2) Laws of Minnesota 2015, Chapter 78, Article 4, Section 33.

Updating Licensing Terminology
This changes terminology from “natural” to “birth” child in definition of “Individual who is related;” (§245A. 02, Subd. 13) Laws of Minnesota 2015, Chapter 78, Article 4, Section 6

Annual Study Requirement for Background Studies
People working through supplemental nursing service agencies, personnel agencies, educational programs and unlicensed home and community-based waiver providers are no longer required to undergo annual background studies once they are using the new NETStudy 2.0 system to initiate background studies. (§245C. 04, subd. 4, 5, and 6). Laws of Minnesota 2015, Chapter 78, Article 4, Sections 34-36

Background Study Clarifications
NETStudy 2.0 accepts a background study’s driver’s license from any state for identification purposes; it previously accepted only a Minnesota driver’s license. Clarifies requirements related to transferability of background studies across entities that are owned and controlled by the same entity. The sensitive information person must be employed by the agency. Clarifies recordkeeping requirements for license holders who rely on background studies initiated by others to include those initiated by supplemental nursing services agencies and to exclude those initiated by educational programs. Specifies conditions under which license holders using NETStudy 2.0 can satisfy the documentation requirements for ensuring required background studies have been completed through a written agreement with the educational program. (§245C. 05, subd. 1, §245C.07, §245C. 20, subd. 2 and 2a). Laws of Minnesota 2015, Chapter 78, Article 4, Sections 37, 38, 40, 41.

Sanctioned Provider Exclusion
This prohibits a provider or person who has been excluded from becoming a provider in a different DHS program. The prohibition will be for the length of time of the original exclusion. (§245.095) Laws of Minnesota 2015, Chapter 78, Article 4, Section 5.

Client Record Transfer upon Closure
Modifies that written plans for the transfer of clients and records upon closure of a program are not required for license holders who reside on the premises, or for child care programs. (§245A. 04, subd 15a) Laws of Minnesota 2015, Chapter 78, Article 4, Section 10
Burden of Proof for Issuing Temporary Immediate Suspensions
Clarifies the burden of proof for the commissioner issuing a temporary immediate suspension for programs operating under a revoked licensed. Clarifies that for programs operating under a revoked license the commissioner need only demonstrate by a preponderance of evidence that, since the time of the license revocation, the license holder violated rules or law that may adversely affect the health or safety of program clients. (§245A. 07, subd. 2 and subd. 2a) Laws of Minnesota 2015, Chapter 78, Article 4, Sections 11 and 12

Receivership Appointment
Expands voluntary and involuntary receivership requirements to non-residential programs and programs certified by the commissioner. Currently, these sections only apply to residential licensed programs. (§245A. 12, subd 1, §245A. 13, subd 1) Laws of Minnesota 2015, Chapter 78, Article 4, Sections 14 and 15

Settlement Agreement
Allows a license holder or DHS to initiate a discussion about a possible settlement agreement related to an adverse licensing action. If a settlement discussion is initiated by the license holder, the commissioner must respond within 14 days. Provides that if the parties enter into a settlement agreement, then the appeal is withdrawn and the agreement constitutes a full agreement between the parties. Requires the agreement to identify the actions the license holder has taken or will take to remedy the violation. (§245A.081) Laws of Minnesota 2015, Chapter 71, Article 7, Section 4

Medical Monitoring Training Requirements for Licensed Foster Care and Respite Care
Clarifies that training requirements for medical monitoring equipment apply to the care of individuals who rely on medical monitoring equipment to sustain life or to monitor a medical condition that could become life-threatening without proper use of the medical equipment. (245A.155) Laws of Minnesota 2015, Chapter 71, Article 7, Sections 5 & 6.

Licensing Modifications to Program Abuse Prevention Plans
Allows a delegated representative of a license holder’s governing body to complete the annual review and revisions to the program abuse prevention plan. (245A.65) Laws of Minnesota 2015, Chapter 71, Article 7, Section 7.

Child Care Programs
Child Care Record-Keeping Requirement
Allows the commissioner to deny or rescind an authorization or establish an overpayment for child care providers who do not keep attendance records from participation in the child care assistance program. Child care providers will be required to keep their attendance records on the site where the service is provided. (§119B.125, Subd. 6 & 7) Laws of Minnesota 2015, Chapter 78, Article 4, Sections 2 & 3.
Less-than-half-time Attendance Pattern Reporting
Requires child care providers to report to the county when children on the Child Care Assistance Program (CCAP) are not in attendance at the child care center for at least half the attendance time. (§119B.125, Subd. 8) Laws of Minnesota 2015, Chapter 78, Article 4, Section 4.

Child Care Recruiting with Conditions
Prohibits a child care provider, center owner, director, manager, license holder, or other controlling individual or agent from recruiting employees on the condition that the employee has children that are either on the CCAP or eligible for the program. Those found to be engaging in this practice may be sanctioned with a disqualification or charged with a criminal offense. (§245E.01, Subd. 8 & 13a; §245E.02, Subd. 1, 3a, & 4; §609.816). Laws of Minnesota 2015, Chapter 78, Article 4, Sections 42-46, & 59.

Child Care Assistance Program Failure to Comply with Attendance Record Requirements
This provision enforces the Child Care Assistance Program (CCAP) requirements that a child care provider must maintain accurate attendance records. It allows DHS to periodically audit child care providers to determine compliance. It also requires DHS and the counties to recoup or recover overpayments that were paid to a current or former provider. (§119B.125, Subd. 7) Laws of Minnesota 2015, Chapter 71, Article 1, Section 1

Exclusion from Licensure
Excludes certain school-age child care programs serving children in kindergarten through grade 12 from DHS licensure. To be exempt from licensure as a child care center, the program must be nonprofit; it must provide structured, supervised youth development activities; and it must operate before and after school, or during summer or seasonal breaks. These programs are not eligible for Child Care Provider Assistance (CCAP) funds. (§245A.03, Subd. 2, 2c & 4a) Laws of Minnesota 2015, Chapter 37.

Child Care Center
Child Care Center Training Requirements Clarified
Clarifies that at least one staff person in a child care center who has satisfactorily completed training in First Aid and CPR be present during the hours of operation, including on field trips and when transporting children in care. This change will ensure there is at least one person trained in First Aid and CPR when children are in care, in circumstances where all teachers and assistant teachers are within their first 90 days of work and not yet trained.

Technical change to the video training requirement for child care center license holders relating to the dangers associated with shaking infants and young children. (§245A.40, subd 3 and 4; §245A.40, subd 5) Laws of Minnesota 2015, Chapter 78, Article 4, Sections 29-31.
Family Child Care

Family Child Care Attendance Record Requirement
Clarifies that a family child care provider must maintain attendance records for each child for which the license holder is reimbursed for the care of that child by a government program. With this change, family child care providers will no longer need to keep these attendance records when they only receive food program reimbursement (§245A. 14, subd 14) Laws of Minnesota 2015, Chapter 78, Article 10, Section 16.

Family Child Care Training Requirements Clarified
Allows a family child care provider who applies for a new license either due to relocation to a new county or after voluntarily closing their license during the previous 12 months to do so without needing to complete initial training requirements. These providers are required to satisfy annual, ongoing training requirements. (§245A.50, subd 1) Laws of Minnesota 2015, Chapter 78, Article 4, Section 32.

Clarification of Cardiopulmonary Resuscitation Training for Family Child Care
Removes duplicative language regarding “CPR techniques for infants and children,” and corrects terminology related to “staff person” and “caregiver.” (§245A.50, subd 4 & §245D.061, Subd. 1) Laws of Minnesota 2015, Chapter 21, Article 1, Section 47

Updating Licensing Terminology
Updates the technical name for Salmonella in relation to use of bleach alternatives in family child care. (§245A.148) Laws of Minnesota 2015, Chapter 78, Article 4, Section 18

Chemical Dependency Treatment Programs
Withdrawal Management
Establishes service standards for a withdrawal management benefit under Medical Assistance (MA). Withdrawal management services are a medical model of detoxification services. DHS will be required to develop a payment methodology and to seek federal approval for the new service. Subsequent legislative action and funding will be required before this becomes an available MA benefit. (245F) Laws of Minnesota 2015, Chapter 78, Article 3, sections 1-21

Child Safety in Substance Abuse Treatment Programs
This change requires substance abuse treatment programs to assess parents’ capacity to provide for the health and safety of the child, provide education to the parent regarding child safe sleep and bathing practices, and develop a procedure for when the provider will allow one client to supervise another client’s child. (§245A. 1443) Laws of Minnesota 2015, Chapter 78, Article 4, Section 17.
Naloxone Information Provided
Requires all programs serving persons with substance abuse issues to provide educational information related to recognizing and responding to opioid overdoses and administering naloxone. (§245A. 1915) Laws of Minnesota 2015, Chapter 78, Article 4, Section 21.

Methadone Licensing Changes
Requires physicians with authority to administer or dispense methadone in clinics to be enrolled with DHS as a provider. Stipulates a process for unsigned medication orders and a timeline for signing them. Requires the prescribing physician to meet with the recipient every time the dose is increased above 150 mg. of methadone or 24 mg. of buprenorphine daily. Allows a physician with a prescribing authority to make assessment of a client’s ability to have take-home or unsupervised doses. Requires the comprehensive assessment to be completed within 21 days of service initiation. Requires that providers develop policies related to the Prescription Monitoring Program. Requires opioid treatment programs to report to law enforcement when an individual in the program diverts a controlled substance on the program’s premises. Allows for the commissioner to grant a variance to the licensing requirements for opioid treatment programs. (§245A. 192, subd 3; §245A. 192, subd. 15) Laws of Minnesota 2015, Chapter 78, Article 4, Section 22 – 28.

Updating Licensing Terminology
Defines the terms “Weekly,” “Monthly,” and “Quarterly” only for chemical dependency treatment programs; (§245A. 02, Subd. 20, 21, & 22; §245A. 11, subd 4; §245A.148) Laws of Minnesota 2015, Chapter 78, Article 4, Sections 7-9

Child Foster Care
Mental Health Training Requirement Modified
Clarifies that all child foster care license holders, caregivers and staff are required to complete initial and annual mental health training. (§245A. 175) Laws of Minnesota 2015, Chapter 78, Article 4, Section 20.

Home and Community-Based Services
County Licensing Variance Authority
Deletes the requirement that community residential setting variances may be issued only by the commissioner, allowing counties to grant variances for the community residential setting requirements.
Removes delegated authority to county or private agencies to grant variances to requirements relating to chemical use problems of a license holder or household member of the license holder. Counties and privates agencies will need to submit a recommendation to DHS for these variances. (§245A. 16, subd. 1) Laws of Minnesota 2015, Chapter 78, Article 4, Section 19.
Updating Licensing Terminology
Adds “community residential setting” as a program type that is not subject to location of residential program restrictions; (§245A. 11, subd 4) Laws of Minnesota 2015, Chapter 78, Article 4, Section 13

HCBS Policy Changes and Repealer
Modifies service suspension policy requirements and adds a new subdivision for service termination policy requirements. Includes limitations on when license holders may implement their service suspension and service termination policies. Provides appeal rights for service recipients with service termination notice. Technical amendment repeals duplication in emergency use of manual restraint standards. (§245D.10, subd 3 and 3a; §245D.61, subd 3) Laws of Minnesota 2015, Chapter 78, Article 6, Sections 4, 5, and 32.

Correction Orders and Conditional License for Programs Licensed as HCBS
Requires DHS to limit correction orders and conditional licenses to the service site or sites at which the licensing violations occurred unless DHS articulates a basis for applying the adverse action to other sites. It also provides that if a license holder has been issued more than one license, the conditions imposed under any conditional license must be limited to the license for the program at which the licensing violations occurred if other programs, for which there are separate licenses, are being operated in substantial compliance with law and rules. (§245A.06, Subd. 1a) Laws of Minnesota 2015, Chapter 71, Article 7, Section 3

HCBS Licensing Changes
Defines “working day,” removes annual reauthorization of medication administration requirement, clarifies reporting requirements for changes in health needs and incidents, removes in-person CPR instruction requirements, modifies when restraint may be used as an intervention procedure during medical exams or medical treatment, clarifies timelines during service initiation, modifies service plan review and evaluation, allows staff competency determinations to be made by others, modifies first aid training requirements, and modifies staff ratio requirements in a Day Services Facility. (245D.02, 245D.05, 245D.06, 245D.07, 245D.071, 245D.09, 245D.22, & 245D.31) Laws of Minnesota 2015, Chapter 71, Article 7, Sections 10-23