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State of Minnesota

HOUSE OF REPRESENTATIVES

NINETY-FIRST SESSION

H. F. No. 814

02/07/2019 Authored by Edelson, Backer, Cantrell, Erickson and Davnie
The bill was read for the first time and referred to the Committee on Health and Human Services Policy

1.1 A bill for an act
1.2 relating to human services; modifying school-linked mental health grants; requiring
1.3 a report; appropriating money; amending Minnesota Statutes 2018, section
1.4 245.4889, subdivision 1; proposing coding for new law in Minnesota Statutes,
1.5 chapter 245.

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

1.7 Section 1. Minnesota Statutes 2018, section 245.4889, subdivision 1, is amended to read:

1.8 Subdivision 1. Establishment and authority. (a) The commissioner is authorized to
1.9 make grants from available appropriations to assist:

1.10 (1) counties;

1.11 (2) Indian tribes;

1.12 (3) children's collaboratives under section 124D.23 or 245.493; or

1.13 (4) mental health service providers.

1.14 (b) The following services are eligible for grants under this section:

1.15 (1) services to children with emotional disturbances as defined in section 245.4871,
1.16 subdivision 15, and their families;

1.17 (2) transition services under section 245.4875, subdivision 8, for young adults under
1.18 age 21 and their families;

1.19 (3) respite care services for children with severe emotional disturbances who are at risk
1.20 of out-of-home placement;

1.21 (4) children's mental health crisis services;

- 2.1 (5) mental health services for people from cultural and ethnic minorities;
- 2.2 (6) children's mental health screening and follow-up diagnostic assessment and treatment;
- 2.3 (7) services to promote and develop the capacity of providers to use evidence-based
2.4 practices in providing children's mental health services;
- 2.5 (8) school-linked mental health services, ~~including transportation for children receiving~~
2.6 ~~school-linked mental health services when school is not in session~~ under section 245.4901;
- 2.7 (9) building evidence-based mental health intervention capacity for children birth to age
2.8 five;
- 2.9 (10) suicide prevention and counseling services that use text messaging statewide;
- 2.10 (11) mental health first aid training;
- 2.11 (12) training for parents, collaborative partners, and mental health providers on the
2.12 impact of adverse childhood experiences and trauma and development of an interactive
2.13 website to share information and strategies to promote resilience and prevent trauma;
- 2.14 (13) transition age services to develop or expand mental health treatment and supports
2.15 for adolescents and young adults 26 years of age or younger;
- 2.16 (14) early childhood mental health consultation;
- 2.17 (15) evidence-based interventions for youth at risk of developing or experiencing a first
2.18 episode of psychosis, and a public awareness campaign on the signs and symptoms of
2.19 psychosis;
- 2.20 (16) psychiatric consultation for primary care practitioners; and
- 2.21 (17) providers to begin operations and meet program requirements when establishing a
2.22 new children's mental health program. These may be start-up grants.
- 2.23 (c) Services under paragraph (b) must be designed to help each child to function and
2.24 remain with the child's family in the community and delivered consistent with the child's
2.25 treatment plan. Transition services to eligible young adults under this paragraph must be
2.26 designed to foster independent living in the community.
- 2.27 (d) As a condition of receiving grant funds, a grantee shall obtain all available third-party
2.28 reimbursement sources, if applicable.

3.1 Sec. 2. **[245.4901] SCHOOL-LINKED MENTAL HEALTH GRANTS.**

3.2 **Subdivision 1. Establishment.** The commissioner of human services shall establish a
3.3 school-linked mental health grant program to provide early identification and intervention
3.4 for students with mental health needs and to build the capacity of schools to support students
3.5 with mental health needs in the classroom.

3.6 **Subd. 2. Eligible applicants.** An eligible applicant for school-linked mental health grants
3.7 is an entity that is:

3.8 (1) certified under Minnesota Rules, parts 9520.0750 to 9520.0870;

3.9 (2) a community mental health center under section 256B.0625, subdivision 5;

3.10 (3) an Indian health service facility or a facility owned and operated by a tribe or tribal
3.11 organization operating under United States Code, title 25, section 5321;

3.12 (4) a provider of children's therapeutic services and supports as defined in section
3.13 256B.0943; or

3.14 (5) enrolled in medical assistance as a mental health or substance use disorder provider
3.15 agency and employs at least two full-time equivalent mental health professionals as defined
3.16 in section 245.4871, subdivision 27, clauses (1) to (6), or two alcohol and drug counselors
3.17 licensed or exempt from licensure under chapter 148F who are qualified to provide clinical
3.18 services to children and families.

3.19 **Subd. 3. Allowable grant activities and related expenses.** (a) Allowable grant activities
3.20 and related expenses may include but are not limited to:

3.21 (1) identifying and diagnosing mental health conditions of students;

3.22 (2) delivering mental health treatment and services to students and their families,
3.23 including via telemedicine consistent with section 256B.0625, subdivision 3b;

3.24 (3) supporting families in meeting their child's needs, including navigating health care,
3.25 social service, and juvenile justice systems;

3.26 (4) providing transportation for students receiving school-linked mental health services
3.27 when school is not in session;

3.28 (5) building the capacity of schools to meet the needs of students with mental health
3.29 concerns, including school staff development activities for licensed and nonlicensed staff;
3.30 and

4.1 (6) purchasing equipment, connection charges, on-site coordination, set-up fees, and
4.2 site fees in order to deliver school-linked mental health services via telemedicine.

4.3 (b) Grantees shall obtain all available third-party reimbursement sources as a condition
4.4 of receiving a grant. For purposes of this grant program, a third-party reimbursement source
4.5 excludes a public school as defined in section 120A.20, subdivision 1. Grantees shall serve
4.6 students regardless of health coverage status or ability to pay.

4.7 Subd. 4. **Data collection and outcome measurement.** Grantees shall provide data to
4.8 the commissioner for the purpose of evaluating the effectiveness of the school-linked mental
4.9 health grant program.

4.10 Subd. 5. **Specialized grants.** (a) Specialized grants must be made available to eligible
4.11 applicants under subdivision 2 serving a public school program that provides instruction to
4.12 students in a setting of federal instructional level 4 or higher and is operated by:

4.13 (1) a school district or charter school;

4.14 (2) an intermediate school district organized under section 136D.01;

4.15 (3) a service cooperative organized under section 123A.21, subdivision 1, paragraph
4.16 (a), clause (2); or

4.17 (4) a special education cooperative or other cooperative unit under section 123A.24,
4.18 subdivision 2.

4.19 (b) In addition to allowable grant expenses under subdivision 3, grant funds awarded
4.20 under this subdivision may be used to develop innovative therapeutic teaching models.

4.21 (c) The commissioner must prioritize grants for applicants that have more than 25 percent
4.22 of average daily membership served in a setting of federal instructional level 4.

4.23 Sec. 3. **DIRECTION TO COMMISSIONER; IMPROVING SCHOOL-LINKED**
4.24 **MENTAL HEALTH GRANT PROGRAM.**

4.25 (a) The commissioner of human services, in collaboration with the commissioner of
4.26 education, representatives from the education community, mental health providers, and
4.27 advocates, shall assess the school-linked mental health grant program under Minnesota
4.28 Statutes, section 245.4901, and develop recommendations for improvements. The assessment
4.29 must include but is not limited to the following:

4.30 (1) promoting stability among current grantees and school partners;

5.1 (2) assessing the minimum number of full-time equivalents needed per school site to
5.2 effectively carry out the program;

5.3 (3) developing a funding formula that promotes sustainability and consistency across
5.4 grant cycles;

5.5 (4) reviewing current data collection and evaluation; and

5.6 (5) analyzing the impact on outcomes when a school has a school-linked mental health
5.7 program, a multi-tier system of supports, and sufficient school support personnel to meet
5.8 the needs of students.

5.9 (b) The commissioner shall provide a report of the findings of the assessment and
5.10 recommendations, including any necessary statutory changes, to the legislative committees
5.11 with jurisdiction over mental health and education by January 15, 2020.

5.12 **Sec. 4. APPROPRIATIONS.**

5.13 (a) \$..... in fiscal year 2020 and \$..... in fiscal year 2021 are appropriated from the
5.14 general fund to the commissioner of human services for school-linked mental health grants
5.15 under Minnesota Statutes, section 245.4901, subdivisions 1 to 4. This appropriation is added
5.16 to the base.

5.17 (b) \$..... in fiscal year 2020 and \$..... in fiscal year 2021 are appropriated from the
5.18 general fund to the commissioner of education for transfer to the commissioner of human
5.19 services for school-linked mental health grants under Minnesota Statutes, section 245.4901,
5.20 subdivision 5. This appropriation is added to the base and is available until expended.