SENATE
COUNSEL, RESEARCH, & FISCAL ANALYSIS

BILL SUMMARY

S.F. No. 4388 – Establishing early childhood mental health consultation grants and modifying protection-related rights and day treatment requirements

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Section 1 (amends Minn. Stat. § 245.4889, subd. 1) adds a cross reference to early childhood mental health consultation grants within the section governing children's mental health grants.

Section 2 (adds Minn. Stat. § 245.4908) establishes early childhood mental health consultation grants.

> **Subdivision 1** establishes the early childhood mental health consultation grant program to support the delivery of specialized mental health care to children five years of age or younger.
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> **Subdivision 2** provides that eligible applicants are mental health clinics, community mental health centers, an Indian health service facility or facility owned and operated by a Tribe or Tribal organization, or a provider of children's therapeutic services and supports.
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> **Subdivision 3** requires that grants funds must be used to provide early childhood mental health consultation and provides what activities can be included. Requires grantees to obtain all available third-party reimbursement as a condition of receiving a grant.
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> **Subdivision 4** requires certain data collection and outcome measurements.
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> > **Paragraph (a)** requires the commissioner of human services to consult with grantees to develop ongoing outcome measures.

Paragraph (b) requires grantees to provide data to the commissioner to evaluate the effectiveness of the grant program and prohibits the commissioner from requesting data more than twice per year.

Paragraph (c) specifies the data grantees must provide to the commissioner.

Paragraph (d) allows qualitative data to be collected and provided to the commissioner.

Paragraph (e) requires the commissioner, beginning July 1, 2027, to provide an annual report to the legislature on the number of grantees that received funds, the number of individuals served, data from the evaluation conducted, and information on the use of state and federal funds for the services provided.

Section 3 (amends Minn. Stat. § 245D.04, subd. 3) provides an exception to when a service recipient's rights can be restricted.

Section 4 (adds Minn. Stat. § 245D.04, subd. 4) defines "developmentally appropriate" and "reasonable and prudent parenting" for the purposes of the subdivision and provides that a person under 18 years of age has a right to participate in developmentally appropriate activities and receive reasonable and prudent parenting. Allows a restriction of certain rights when necessary to ensure the health, safety, and well-being of the person or pursuant to reasonable and prudent parenting standards.

Section 5 (amends Minn. Stat. § 256B.0943, subd. 1) modifies the definition of "day treatment program" to be a program consisting of two or more individuals, rather than three.

Section 6 (amends Minn. Stat. § 256B.0943, subd. 9) removes the allowance for a day treatment program to provide fewer than the minimally required hours for a child during a billing period where the child is transitioning into or out of the program. Clarifies that a provider entity only needs to deliver one of the service components to be eligible for a medical assistance payment. Makes a conforming change reflecting the modification in section 5, which provides that a day treatment program is a program working with at least two clients, rather than three.

Section 7 (amends Minn. Stat. § 256B.0947, subd. 5) modifies who an individual treatment team must serve and instead allows a treatment team to limit services to a specific age group of youth based on the training and expertise of the team. Modifies intensive nonresidential rehabilitative mental health services core treatment team member requirements to allow the inclusion of a board-certified psychiatrist, rather than a board-certified child and adolescent psychiatrist, and allows a registered nurse to be a member of the core team.