

DRAFT Medicaid State Plan Amendment MN 24-0002
This proposed amendment will change the implementation date for the moving expense benefit under Housing Supports and Services, from January 1 to April 1, 2024.
The effective date is the only change in the enclosed SPA pages for Attachment 3.1-I, and 4.19-B, Supplement 3.
Sincerely,

Cynthia M. MacDonald Assistant Commissioner and State Medicaid Director | Health Care Administration

Effective: April 1, 2024 App.: Supersedes: 23-0030

1. State plan HCBS. (Complete the following table for each service. Copy table as needed):

Service Specifications (Specify a service title for the HCBS listed in Attachment 4.19-B that the state plans to cover):

Service Title:

Housing Stabilization Service – Transition Services

Service Definition (Scope):

Housing Stabilization - Transition Services are community supports that help people plan for, find, and move to homes of their own in the community including:

- Supporting the person in applying for benefits to afford their housing
- Identifying services and benefits that will support the person with housing instability
- Assisting the person with the housing search and application process
- Assisting the person with tenant screening and housing assessments
- Helping a person understand and develop a budget
- Helping recipients understand and negotiate a lease
- Helping the recipient meet and build a relationship with a prospective landlord
- Providing up to \$3000 for certain costs associated with moving, as described below
- Identifying resources to cover moving expenses that are not otherwise covered under this service
- Helping the person arrange deposits
- Ensuring the new living arrangement is safe and ready for move-in
- Remote support when required to ensure their housing transition
- Helping a person organize their move

Remote support is real-time, two-way communication between the provider and the participant. The service meets intermittent or unscheduled needs for support for when a participant needs it to live and work in the most integrated setting, supplementing in person service delivery. Remote support is limited to check-ins (e.g. reminders, verbal cues, prompts) and consultations (e.g. counseling, problem solving) within the scope of housing stabilization services. Remote support may be utilized when it is chosen by the participant as a method of service delivery. To meet the real-time, two-way exchange definition, remote support includes the following methods: telephone, secure video conferencing, and secure written electronic messaging, excluding e-mail and facsimile. All transmitted electronic written messages must be retrievable for review. Providers must document the staff who delivered services, the date of service, the start and end time of service delivery, length of time of service delivery, method of contact, and place of service (i.e. office or community) when remote support service delivery occurs.

Housing Stabilization-Transition Services cannot duplicate other services or assistance available to the person.

Effective: April 1, 2024 App.: Supersedes: 23-0030

Moving Expenses

Moving Expenses are non-reoccurring and are limited to a maximum of \$3000 annually for individuals receiving Housing Stabilization-Transition services and are transitioning out of Medicaid funded institutions or other provider-operated living arrangements to a less restrictive living arrangement in a private residence where the person is directly responsible for his or her own living expenses.

For purposes of this service component, "home" means a setting that a participant owns, rents, or leases that is not operated, owned or leased by a provider of services or supports.

Moving Expenses include:

- Applications, security deposits, and the cost of securing documentation that is required to obtain a lease on an apartment or home
- Essential household furnishings required to occupy and use a community domicile, including furniture, window coverings, food preparation items, and bed/bath linens
- Set-up fees or deposits for utility or service access, including telephone, electricity, heating and water
- Services necessary for the individual's health and safety such as pest eradication and one-time cleaning prior to occupancy
- Necessary home accessibility adaptations

Moving Expenses are furnished only to the extent that they are reasonable and necessary as determined through the service plan development process. These expenses must be clearly identified in the service plan.

These items are not covered Moving Expenses:

- Rent and mortgage payments
- Food
- Clothing
- Recreational and diversionary items. Recreational items include streaming devices, computers, televisions, cable television access, etc.
- Items, expenses, or supports that duplicate any other service
- Costs of furnishing living arrangements that are owned or leased by a provider where the provision of these items and services are inherent to the service they are already providing

Providers must maintain all documentation of purchases and spending, including receipts, related to the person's Moving Expenses. Receipts must be uploaded to the Medicaid payer's claim system for review, approval, and to track costs separately from other components of Housing Stabilization - Transition Services.

Additional needs-based criteria for receiving the service, if applicable (specify):

Effective: April 1, 2024 App.: Supersedes: 23-0030

Specify limits (if any) on the amount, duration, or scope of this service. Per 42 CFR Section 440.240, services available to any categorically needy recipient cannot be less in amount, duration and scope than those services available to a medically needy recipient, and services must be equal for any individual within a group. States must also separately address standard state plan service questions related to sufficiency of services.

(Choose each that applies):

Categorically needy (specify limits):

Housing Stabilization – Transition Services are limited to 150 hours per transition. Additional hours beyond this threshold may be authorized by the Department.

Moving Expenses may be provided in a setting which does not comport with the settings requirements if the person will be moving into a setting which does comport with the settings requirements at move in. For persons residing in an institutional setting or another provider operated living arrangement prior to community transition and 1915(i) enrollment, services may be furnished no more than 180 consecutive days prior to discharge and providers may not bill for Moving Expenses until the recipient has transitioned to a community-based setting and is determined eligible for Housing Stabilization – Transition Services.

Housing Stabilization – Transition Services may be provided in a non-compliant setting if the person will be moving into a setting that is HCBS compliant at move in.

For persons residing in an institutional setting or another provider operated living arrangement prior to community transition and 1915(i) enrollment services may be furnished no more than 180 taynsecutive days prior to discharge and providers may not bill for services until the recipient has transitioned to a community-based setting. Under this circumstance, this service will only be provided to individuals transitioning to a less restrictive setting, and for individuals transitioning from provider-operated settings, the service is only provided to those transitioning to a private residence where the individual will be directly responsible for his or her own living expense.

Housing Stabilization -Transition Services are not covered when a recipient is concurrently receiving Housing Stabilization - Sustaining Services.

Moving Expenses Limitations:

- Moving expense providers and/or their family members cannot sell goods and services to recipients that are reimbursed through moving expense
- Moving expenses cannot be used to purchase goods and services from a recipient's family member

Limitations applicable to remote support service delivery of Housing Stabilization – Transition Services:

Remote support cannot be used for more than one-half of direct service provided annually. Remote support cannot have the effect of isolating a person or reducing their access to the community. If remote support has such an effect, it is not allowed. A person has a right to refuse, stop, or suspend the use of remote support any time.

- A person requiring a higher level of remote support annually may be granted an exception through a provider request for prior authorization for up to 75% of the direct service provision.
- Prior authorization for higher remote support is not required during the period of a federal or state public health emergency or disaster declaration affecting the person or the person's geographic area.
- A person on Housing Stabilization Transition Services may use remote support in a flexible manner that meet his/her/their needs within the total yearly authorized units.

Effective: April 1, 2024 App.: Supersedes: 23-0030

In order for providers to provide more than half of the direct service hours annually remotely, DHS must provide prior authorization. Providers request authorization through an Additional Remote Support Exception Request form. Reasons an exception may be granted include:

- a person engages more readily with the provider via remote means due to their disabling condition
- The person is transient and difficult to physically locate but remains in contact remotely
- The person works during regular business hours so remote support enables the person to remain employed and receive needed supports to find or keep housing.
- The person and provider are physically distant from one another and the person consents to additional remote support
 Providers need to outline remote support delivery methods agreed upon with the person.

The housing support plan must also document:

- why those methods were chosen and detail why remote support better meets the person's needs
- how remote support will support the person to live and work in the most integrated community settings
- the needs that must be met through in-person support
- a plan for providing in-person and remote supports based on the person's needs to ensure their health and safety.

The direct staff or caregiver responsible for responding to a person's health, safety, and other support needs through remote support must:

- Respect and maintain the person's privacy at all times, including when the person is in settings typically used by the general public;
- Respect and maintain the person's privacy at all times, including when scheduled or intermittent/as-needed support includes responding to a person's health, safety, and other support needs for personal cares;
- Ensure the use of enabling technology complies with relevant requirements under the Health Insurance Portability and Accountability Act (HIPAA).

It is the provider's responsibility to develop record keeping systems which identify when a service was provided remotely, and track the number of remote hours utilized.

Providers may not:

- Bill direct support delivered remotely when the exchange between the service participant and the provider is social in nature;
- Bill direct support delivered remotely when real-time, two-way communication does not occur (e.g. leaving a voicemail; unanswered electronic messaging);
- Bill for the use of Global Positioning System (GPS), Personal Emergency Response System (PERS) and video surveillance to provide remote check-ins or consultative supports.

Effective: April 1, 2024 App.: Supersedes: 23-0030, 22-0017; 18-0008;

21-0004

X Medically needy (specify limits):

Housing Stabilization-Transition services are limited to 150 hours per transition. Additional hours beyond this threshold may be authorized by the Department.

Moving Expenses may be provided in a setting which does not comport with the settings requirements if the person will be moving into a setting which does comport with the settings requirements at move in. For persons residing in an institutional setting or another provider operated living arrangement prior to community transition and 1915(i) enrollment, services may be furnished no more than 180 consecutive days prior to discharge and providers may not bill for Moving Expenses until the recipient has transitioned to a community-based setting and is determined eligible for Housing Stabilization – Transition Services.

Housing Stabilization – Transition Services may be provided in a non-compliant setting if the person will be moving into a setting that is HCBS compliant at move in. For persons residing in an institutional setting or another provider operated living arrangement prior to community transition and 1915(i) enrollment services may be furnished no more than 180 consecutive days prior to discharge and providers may not bill for services until the recipient has transitioned to a community-based setting.

Housing Stabilization - Transition Services are not covered when a recipient is concurrently receiving Housing Stabilization - Sustaining Services.

Moving Expenses Limitations:

- Moving expense providers and/or their family members cannot sell goods and services to recipients that are reimbursed through moving expense
- Moving expenses cannot be used to purchase goods and services from a recipient's family member

Limitations applicable to remote support service delivery of Housing Stabilization – Transition Services:

- Remote support cannot be used for more than one-half of direct service provided annually. Remote support cannot have the effect of isolating a person or reducing their access to the community. If remote support has such an effect, it is not allowed. A person has a right to refuse, stop, or suspend the use of remote support any time.
- A person requiring a higher level of remote support annually may be granted an exception through a provider request for prior authorization for up to 75% of the direct service provision.
- Prior authorization for higher remote support is not required during the period of a federal or state public health emergency or disaster declaration affecting the person or the person's geographic area.
- A person on Housing Stabilization Transition Services may use remote support in a flexible manner that meets his/her/their needs within the total yearly authorized units.

Effective: April 1, 2024 App.: Supersedes: 23-0030, 22-0017; 18-0008;

In order for providers to provide more than half of the direct service hours annually remotely, DHS must provide prior authorization. Providers request authorization through an Additional Remote Support Exception Request form. Reasons an exception may be granted include:

- a person engages more readily with the provider via remote means due to their disabling condition
- The person is transient and difficult to physically locate but remains in contact remotely
- The person works during regular business hours so remote support enables the person to remain employed and receive needed supports to find or keep housing.
- The person and provider are physically distant from one another and the person consents to additional remote support

Providers need to outline remote support delivery methods agreed upon with the person. The housing support plan must also document:

- why those methods were chosen and detail why remote support better meets the person's needs
- how remote support will support the person to live and work in the most integrated community settings
- the needs that must be met through in-person support
- a plan for providing in-person and remote supports based on the person's needs to ensure their health and safety.

The direct staff or caregiver responsible for responding to a person's health, safety, and other support needs through remote support must:

- Respect and maintain the person's privacy at all times, including when the person is in settings typically used by the general public;
- Respect and maintain the person's privacy at all times, including when scheduled or intermittent/as-needed support includes responding to a person's health, safety, and other support needs for personal cares;
- Ensure the use of enabling technology complies with relevant requirements under the Health Insurance Portability and Accountability Act (HIPAA).

It is the provider's responsibility to develop record keeping systems which identify when a service was provided remotely, and track the number of remote hours utilized.

Providers may not:

- Bill direct support delivered remotely when the exchange between the service participant and the provider is social in nature;
- Bill direct support delivered remotely when real-time, two-way communication does not occur (e.g. leaving a voicemail; unanswered electronic messaging);
- Bill for the use of Global Positioning System (GPS), Personal Emergency Response System (PERS) and video surveillance to provide remote check-ins or consultative supports.

§1915(i) State Plan HCBS

State: Minnesota TN: 24-0002

Effective: April 1, 2024

State Plan Attachment 3.1-i 'App.: Supersedes: 23-0030,22-0017; 18-0008;

> Additionally, providers of housing stabilization services

must pass a criminal background study.

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Provider Type (Specify): Certification Other Standar 21-0004 License (Specify) (Specify): (Specify): Individuals providing housing Agency: agencies that meet the stabilization services must housing stabilization service standards have: • Knowledge of local housing resources. Individual: Individuals that meet • Completed housing the housing stabilization service stabilization services standards training approved by the Commissioner. • Completed mandated reporter training which includes training on vulnerable adult law.

Verification of Provider Qualifications (For each provider type listed above. Copy rows as needed):

Provider Type (Specify):	Entity Responsible for Verification (Specify):	Frequency of Verification (Specify):	
Agency: Agencies that meet the Housing Stabilization service standards	Minnesota Department of Human Services	Every five years	
Individual: Individuals that meet the housing stabilization service standards	Minnesota Department of Human Services	Every five years	
Service Delivery Method. (Check each that applies):			
☐ Participant-directed	X	Provider managed	

Effective: April 1, 2024 App.: Supersedes: 23-0030, 22-0017; 18-0008; 21-0004

Service Specifications (Specify a service title for the HCBS listed in Attachment 4.19-B that the state plans to cover):

Service Title: Housing Stabilization Service - Sustaining

Service Definition (Scope):

Community supports that help a person to maintain living in their own home in the community including:

- Developing, updating and modifying the housing support and crisis plan on are gular basis
- Prevention and early identification of behaviors that may jeopardize continued housing
- Education and training on roles, rights, and responsibilities of the tenant and property manager
- Coaching to develop and maintain key relationships with property managers and neighbors
- Advocacy with community resources to prevent eviction when housing is at risk
- Assistance with the housing recertification processes
- Continuing training on being a good tenant, lease compliance, and household management
- Supporting the person to apply for benefits to retain housing
- Supporting the person to understand and maintain income and benefits to retain housing
- Supporting the building of natural housing supports and resources in the community
- Remote support when required to help the person retain their housing

Remote support is real-time, two-way communication between the provider and the participant. The service meets intermittent or unscheduled needs for support for when a participant needs it to live and work in the most integrated setting, supplementing in person service delivery. Remote support is limited to check-ins (e.g. reminders, verbal cues, prompts) and consultations (e.g. counseling, problem solving) within the scope of housing stabilization services. Remote support may be utilized when it is chosen by the participant as a method of service delivery. To meet the real-time, two-way exchange definition, remote support includes the following methods: telephone, secure video conferencing, and secure written electronic messaging, excluding e-mail and facsimile. All transmitted electronic written messages must be retrievable for review. Providers must document the staff who delivered services, the date of service, the start and end time of service delivery, length of time of service delivery, method of contact, and place of service (i.e. office or community) when remote support service delivery occurs. Sustaining services **do not** include:

- Deposits
- Food
- Furnishings
- Rent
- Utilities
- Room and board
- Moving expenses

Sustaining services cannot duplicate other services or assistance available to the person.

Effective: April, 2024 App.: Supersedes: 223-0030, 2-0017; 18-0008; 21-0004

Additional needs-based criteria for receiving the service, if applicable (specify):

Specify limits (if any) on the amount, duration, or scope of this service. Per 42 CFR Section 440.240, services available to any categorically needy recipient cannot be less in amount, duration and scope than those services available to a medically needy recipient, and services must be equal for any individual within a group. States must also separately address standard state plan service questions related to sufficiency of services.

(Choose each that applies):

X Categorically needy (specify limits):

Housing Stabilization-Sustaining services are limited to 150 hours annually. Additional hours beyond this threshold may be authorized by the Department.

Limitations applicable to remote support service delivery of housing stabilization services:

- Remote support cannot be used for more than one-half of direct service provided annually. Remote support cannot have the effect of isolating a person or reducing their access to the community. If remote support has such an effect, it is not allowed. A person has a right to refuse, stop, or suspend the use of remote support at any time.
- A person requiring a higher level of remote support annually may be granted an exception through a provider request for prior authorization for up to 75% of the direct service provision.
- Prior authorization for higher remote support is not required during the period of a
 federal or state public health emergency or disaster declaration affecting the person
 or the person's geographic area.
- A person on Sustaining services may use remote support in a flexible manner that meets his/her/their needs within the total yearly authorized units.

In order for providers to provide more than half of the direct service hours annually remotely, DHS must provide authorization. Providers request authorization through an Additional Remote Support Exception Request form. Reasons an exception may be granted include:

- a person engages more readily with the provider via remote means due to their disabling condition
- The person is transient and difficult to physically locate but remains in contact remotely
- The person works during regular business hours so remote support enables the person to remain employed and receive needed supports to find or keep housing.
- The person and provider are physically distant from one another and the person consents to additional remote support

Providers need to outline remote support delivery methods agreed upon with the person. The housing support plan must also document:

- why those methods were chosen and detail why remote support better meets the person's needs
- how remote support will support the person to live and work in the most integrated community settings

State: Minnesota §1915(i) State Plan HCBS TN: 24-0002

State Plan Attachment 3.1-i

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App.: Supersedes: 23-0030, 2-0017; 18-0008; 21-0004

• the needs that must be met through in-person support Effective: January 1, 2024

• a plan for providing in-person and remote supports based on the person's needs to ensure their health and safety.

The direct staff or caregiver responsible for responding to a person's health, safety, and other support needs through remote support must:

- Respect and maintain the person's privacy at all times, including when the person is in settings typically used by the general public;
- Respect and maintain the person's privacy at all times, including when scheduled or intermittent/as-needed support includes responding to a person's health, safety, and other support needs for personal cares
- Ensure the use of enabling technology complies with relevant requirements under the Health Insurance Portability and Accountability Act (HIPAA).

It is the provider's responsibility to develop record keeping systems which identify when a service was provided remotely, and track the number of remote hours utilized.

Providers may not:

- Bill direct support delivered remotely when the exchange between the service participant and the provider is social in nature;
- Bill direct support delivered remotely when real-time, two-way communication does not occur (e.g. leaving a voicemail; unanswered electronic messaging);
- Bill for the use of Global Positioning System (GPS), Personal Emergency Response System (PERS) and video surveillance to provide remote check-ins or consultative supports.

X Medically needy (specify limits):

Effective: April, 2024 App.: Supersedes: 23-0030, 22-0017; 18-0008;

21-0004

Housing Stabilization-Sustaining services are limited to 150 hours annually. Additional hours beyond this threshold may be authorized by the Department.

Limitations applicable to remote support service delivery of housing stabilization service:

- Remote support cannot be used for more than one-half of direct service provided annually. Remote support cannot have the effect of isolating a person or reducing their access to the community. If remote support has such an effect, it is not allowed. A person has a right to refuse, stop, or suspend the use of remote support at any time.
- A person requiring a higher level of remote support annually may be granted an exception through a provider request for prior authorization for up to 75% of the direct service provision.
- Prior authorization for higher remote support is not required during the period of a federal or state public health emergency or disaster declaration affecting the person or the person's geographic area.
- A person on sustaining services may use remote support in a flexible manner that meets his/her/their needs within the total yearly authorized units.

In order for providers to provide more than half of the direct service hours annually remotely, DHS must provide authorization. Providers request authorization through an Additional Remote Support Exception Request form. Reasons an exception may be granted include:

- a person engages more readily with the provider via remote means due to their disabling condition
- The person is transient and difficult to physically locate but remains in contact remotely
- The person works during regular business hours so remote support enables the person to remain employed and receive needed supports to find or keep housing.
- The person and provider are physically distant from one another and the person consents to additional remote support.

Providers need to outline remote support delivery methods agreed upon with the person. The housing support plan must also document:

- why those methods were chosen and detail why remote support better meets the person's needs,
- how remote support will support the person to live and work in the most integrated community settings,
- the needs that must be met through in-person support
- a plan for providing in-person and remote supports based on the person's needs to ensure their health and safety.

The direct staff or caregiver responsible for responding to a person's health, safety, and other support needs through remote support must:

• Respect and maintain the person's privacy at all times, including when the person is in settings typically used by the general public;

Effective: April 1, 2024 App.: Supersedes: 23-0030, 22-0017; 18-0008;

• Respect and maintain the person's privacy at all times, including when scheduled or intermittent/as-needed support includes responding to a person's health, safety, and other support needs for personal cares

• Ensure the use of enabling technology complies with relevant requirements under the Health Insurance Portability and Accountability Act (HIPAA).

It is the provider's responsibility to develop record keeping systems which identify when a service was provided remotely, and track the number of remote hours utilized.

• Providers may not:

- o Bill direct support delivered remotely when the exchange between the service participant and the provider is social in nature;
- o Bill direct support delivered remotely when real-time, two-way communication does not occur (e.g. leaving a voicemail; unanswered electronic messaging);
- Bill for the use of Global Positioning System (GPS), Personal Emergency Response System (PERS) and video surveillance to provide remote
- o check-ins or consultative supports.

State: **Minnesota** TN: 24-0002

Effective: April 1, 2024

§1915(i) State Plan HCBS

State Plan Attachment 3.1-i

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App.: November 1, 2023 Supersedes: 23-0030, 22-0017; 18-0008;

21-0004

			21-0004
Provider Qualifications (For each type of	f provider. C	Copy rows as nee	eded):
Provider Type (Specify):	License (Specify):	Certification (Specify):	Other Standard (Specify):
Agency: agencies that meet the housing stabilization service standards			Agency providers of housing stabilization services must assure all staff providing the service have: • Knowledge of local housing resources. • Completed housing stabilization service training approved by the Commissioner. • Completed mandated reporter training which includes training on Vulnerable Adult law. Additionally providers of Housing stabilization services must apply the standards in Minnesota Statutes, chapter 245C concerning criminal background studies.
Individual: Individuals that meet the housing stabilization service standards			Individuals providing housing stabilization services must have: • Knowledge of local housing resources. • Completed housing stabilization services training approved by the Commissioner. • Completed mandated reporter training which includes training on vulnerable adult law. Additionally, providers of housing stabilization services must pass a criminal background study.

State Plan Attachment 3.1-i

State: **Minnesota** TN:

§1915(i) State plan HCBS

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24-0002

Effective: April 1, 2024 App.:

Supersedes: 23-0030, 22-0017; 18-0008;

Verification of Provider Qualifications (For each provider type listed above. Copy rows as needed).				
	Provider Type (Specify):	Entity Responsible for Verification (Specify):	Frequency of Verification (Specify):	
7 25 30 7 7 25 30 20 20 20 20 20 20 20 20 20 20 20 20 20		Every five years		
Individual: Individuals that meet the housing stabilization service standards		Minnesota Department of Human Services	Every five years	
Service Delivery Method. (Check each that applies):				
	Participant-directed	X	Provider managed	

Service Specifications (Specify a service title for the HCBS listed in Attachment 4.19-B that the state plans to cover):

Service Title:

Housing Consultation Services

Service Definition (Scope):

Housing Consultation: planning services that are person-centered and assist a person with the creation of the person-centered plan. Recipients may also receive referrals to other needed services and supports based on the person-centered plan. The consultant monitors and updates the plan annually or more frequently if the person requests a plan change or experiences a change in circumstance. This service shall be separate and distinct from all other services and shall not duplicate other services or assistance available to the participant. Housing consultation services may only be billed after approval of the plan by the Department. Systems edits will be in place to prevent the payment of targeted case management services in the same month in which housing consultations services are billed.

Additional needs-based criteria for receiving the service, if applicable (specify):

Effective: April 1, 2024 App.: Supersedes: 23-0030, 22-0017; 18-0008; 21-0004

Specify limits (if any) on the amount, duration, or scope of this service. Per 42 CFR Section 440.240, services available to any categorically needy recipient cannot be less in amount, duration and scope than those services available to a medically needy recipient, and services must be equal for any individual within a group. States must also separately address standard state plan service questions related to sufficiency of services.

(Choose each that applies):

X Categorically needy (specify limits):

Housing consultation services are available one time, annually. Additional sessions may be authorized by the Department if the recipient becomes homeless or experiences a significant change in a condition that impacts their housing, or when a person requests an update or change to their plan. To avoid conflict of interest, an individual cannot receive housing consultation services and housing stabilization services from the same provider.

Recipient must be living in, or planning to transition to a new home in a community-based setting. These services may be provided in a non-compliant setting if the person will be moving into a setting that is HCBS compliant at move in. For persons residing in an institutional setting, providers may not bill for services until the recipient has transitioned to a community-based setting.

Remote support- Housing Consultation

- Remote support: A real-time, two-way communication between the provider and the person. For housing consultation, remote support can only be performed through telephone or secure video conferencing.
- Providers must document that the plan was completed remotely and why it was a remote planning session. The case notes must also identify the staff who delivered services, the date of service, the method of contact and place of service (i.e. office or community).

X Medically needy (specify limits):

Effective: April 1, 2024 App.: Supersedes: 23-0030, 22-0017; 18-0008;

21-0004

Housing consultation services are available one time, annually. Additional sessions may be authorized by the Department if the recipient becomes homeless or experiences a significant change in a condition that impacts their housing, or when a person requests an update or change to their plan. To avoid conflict of interest, an individual cannot receive housing consultation services and housing stabilization services from the same provider.

Recipient must be living in, or planning to transition to a new home in a community-based setting. These services may be provided in a non-compliant setting if the person will be moving into a setting that is HCBS compliant at move in. For persons residing in an institutional setting, providers may not bill for services until the recipient has transitioned to a community-based setting.

Remote support- Housing Consultation

- Remote support: A real-time, two-way communication between the provider and the person. For housing consultation, remote support can only be performed through telephone or secure video conferencing.
- Providers must document that the plan was completed remotely and why it was a remote planning session. The case notes must also identify the staff who delivered services, the date of service, the method of contact and place of service (i.e. office or community).

Provider Qualifications (For each type of provider. Copy rows as needed): Provider Type License Certification Other Standard (Specify): (Specify): (Specify): (Specify): Agency providers of Housing Agency: Consultation services must assure staff Agencies that providing the service have: meet the housing • Knowledge of local housing resources consultation and must not have a direct or indirect service standards financial interest in the property or housing the participant selects. • Completed training approved by the Commissioner. Additionally, providers of Housing Consultation services must apply the standards in Minnesota Statutes, chapter 245C concerning criminal background studies. Individual providers of housing Individual: consultation services must assure they Individuals that have: meet the housing

State: Minnesota State Plan Attachment 3.1–i: §1915(i) State Plan HCBS TN: 24--0002 Page 28g Supersedes: 23-0030, 22-0017; 18-0008; Effective: April 1, App.: 2024 • Knowledge of local housing resources consultation and must not have a direct or indirect service standards financial interest in the property or housing the participant selects. • Completed training approved by the

Verification of Provider Qualifications (For each provider type listed above. Copy rows as needed):

Commissioner.

Provider managed

Additionally providers of Housing Consultation services must pass a

criminal background study.

Provider Type (Specify):	Entity Responsible for Verification (Specify):	Frequency of Verification (Specify):	
Agency: Agencies that meet the housing consultation service standards	Minnesota Department of Human Services	Every five years	
Individual: Individuals that meet the housing consultation service standards	Minnesota Department of Human Services	Every five years	
Service Delivery Method. (Check each that applies):			

X

Participant-directed

State: **Minnesota** TN: 24-0002

§1915(i) State Plan HCBS

Supplement 3 to State Plan Attachment 4.19-B: Page 1

Effective: April 1, 2024 App.:

Supersedes: 23-0030, 22-0017; 18-0008

Methods and Standards for Establishing Payment Rates

1. Services Provided Under Section 1915(i) of the Social Security Act. For each optional service, describe the methods and standards used to set the associated payment rate. (Check each that applies, and describe methods and standards to set rates):

	HCI	BS Case Management		

	HCI	3S Homemaker		
_	Hel			
	HCI	3S Home Health Aide		
	ПС	och 10		
	HCI	3S Personal Care		
	ПСІ	DC A 4.14 Dec. Health		
	пСі	BS Adult Day Health		
	ЦСІ	3S Habilitation		
	псі	55 Habilitation		
	нсі	3S Respite Care		
	псі	55 Kespite Cate		
For	Individ	duals with Chronic Mental Illness, the following services:		
101		HCBS Day Treatment or Other Partial Hospitalization Services		
		The Bob Buy Treatment of State Further Hospitalization Services		
		HCBS Psychosocial Rehabilitation		
		HCBS Clinic Services (whether or not furnished in a facility for CMI)		
X	Oth	er Services (specify below)		
	-	public, private and tribal (defined as an IHS or 638 facility) providers are reimbursed escribed below:		
	subi 202	ective July 1, 2020, housing stabilization – transition services are paid the lower of the mitted charge, or \$17.17 per 15-minute unit. Effective August 1, 2023 April 1, 4, moving expenses are reimbursed at market rates. Market rates are purchased at usual retail price charged to the community.		
	Effective July 1, 2020, housing stabilization services - sustaining are paid the lower of the submitted charge, or \$17.17 per 15-minute unit.			
		ective July 1, 2020, consultation services are paid the lower of the submitted charge, or 4.22 per session.		