STATE: MINNESOTA ATTACHMENT 3.1-A

Effective: July 1, 2023 Page 25a

TN: 23-04

Approved: April 30, 2024

Supersedes: 18-03(16-02 12-10, 11-04, 09-15, 09-18, 06-03, 04-10, 03-

10, 01-14)

6.d.a. Other practitioners' services, (continued)

overseeing the implementation of the individual treatment plans by community health workers.

In-reach care coordination services:

Services by mental health professionals include supervision of an inreach care coordinator who documents and assesses a recipient's
emergency room use, develops and implements short-term plans to reduce
the recipient's too-frequent (three or more times in the previous four
consecutive months) or non-urgent emergency room use, and when
appropriate, develops and implements a plan to transition the
recipient to a more permanent care coordination or case management
relationship so that the recipient's continuum of care needs can
continue to be met outside of the emergency room. Recipients may
receive up to 80 hours of in-reach care coordination in a sixty-day
period twice per calendar year.

Officer-involved, community-based care coordination:

Officer-involved, community-based care coordination diverts recipients from the criminal justice system by addressing the recipient's mental health, chemical health, social, economic, and housing needs, by connecting recipients with available covered services. The service is provided to individuals who have been involved with law enforcement, but not incarcerated, and who have screened positive for benefitting from treatment for a mental illness or substance use disorder.

Recipients may receive services for up to 60 days following initiation of services. Services are provided by the following individuals who are either employed by a county or contract with a county or are an employee of or under contract with an Indian health service facility or facility owned and operated by a Tribe or a Tribal organization operating under Public Law 93-638 as a 638 facility to provide postarrest officer-involved community-based care coordination and is qualified under one of the following criteria:

- A licensed mental health professional, as defined above;
- A mental health practitioner, as defined in item 13.d., working under the clinical supervision of a mental health professional; or
- A certified peer specialist, as defined in item 13.d, working under the clinical supervision of a mental health professional.

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10, 01-14)

6.d.a. Other practitioners' services, (continued)

- <u>an individual qualified as a licensed alcohol and drug counselor</u> as defined in item 13d.; or
- A recovery peer as defined in item 13d. working under the supervision of an individual qualified as a licensed alcohol and drug counselor.

STATE: MINNESOTA ATTACHMENT 3.1-B

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6.d.a. Other practitioners' services, (continued)

overseeing the implementation of the individual treatment plans by community health workers.

In-reach care coordination services:

Services by mental health professionals include supervision of an in-reach care coordinator who documents and assesses a recipient's emergency room use, develops and implements short-term plans to reduce the recipient's too-frequent (three or more times in the previous four consecutive months) or non-urgent emergency room use, and when appropriate, develops and implements a plan to transition the recipient to a more permanent care coordination or case management relationship so that the recipient's continuum of care needs can continue to be met outside of the emergency room. Recipients may receive up to 80 hours of in-reach care coordination in a sixty-day period twice per calendar year.

Officer-involved, community-based care coordination:

Officer-involved, community-based care coordination diverts recipients from the criminal justice system by addressing the recipient's mental health, chemical health, social, economic, and housing needs, by connecting recipients with available covered services. The service is provided to individuals who have been involved with law enforcement, but not incarcerated, and who have screened positive for benefitting from treatment for a mental illness or substance use disorder. Recipients may receive services for up to 60 days following initiation of services. Services are provided by the following individuals who are either employed by a county or contract with a county or are an employee of or under contract with an Indian health service facility or facility owned and operated by a tribe or a tribal organization operating under Public Law 93-638 as a 638 facility to provide post-arrest officer-involved community-based care coordination and is qualified under one of the following criteria:

- A licensed mental health professional, as defined above;
- A mental health practitioner, as defined in item 13.d., working under the clinical supervision of a mental health professional; or
- A certified peer specialist, as defined in item 13.d, working under the clinical supervision of a mental health professional.
- An individual qualified as a licensed alcohol and drug counselor as defined in item 13d.; or
- A recovery peer as defined in item 13d. Working under the supervision of an individual qualified as a licensed alcohol and drug counselor.