

Waiver and Modification Summaries

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8. Allowing phone or video use for targeted case management visits (CV24)

Changes under existing authority to respond to COVID-19

In addition to the changes outlined above under the emergency authority, the commissioner made the changes below under the authority of existing laws.

1. Waiving work requirements for certain SNAP participants (CV18)
2. Suspending sanctions for some Minnesota Family Investment Program and Diversionary Work Program participants (CV06)
3. Expediting payments to nursing homes (CV01)

Waivers under peacetime emergency authority, Executive Order 20-12: pending federal approval

Some flexibility allowed under Governor Walz's Executive Order also needs federal approval. Recognizing the need for states to get these kinds of approvals quickly, the federal government has created a faster process for states to send in their requests.

Expediting payments to nursing homes (CV01)

The commissioner used existing authority under state law related to disasters and emergencies to provide immediate, expedited reimbursement to Minnesota's 365 skilled nursing facilities for costs related to COVID-19 incurred on or after March 13, 2020. This is primarily a change in timing of payments so facilities can cover costs they are incurring during the pandemic.

DHS will authorize expedited, emergency payments to nursing facilities for costs such as:

- Reimbursement for costs of additional staffing, paid sick leave, and overtime for staff due to COVID-19;
- Extraordinary costs of medical care for a resident infected with COVID-19, including reimbursement for personal protection equipment (PPE) for staff;
- Remedial services due to the pandemic;
- Personal care services due to the pandemic; and
- Waiver of timelines so facilities can have increased access to unused nursing facility beds, when authorized by the commissioner of the Minnesota Department of Health.

Authority provided in Minnesota Statutes [12A.10](#).

Waiving certain regulatory actions and requirements, and extending certain licenses that would otherwise expire for DHS-licensed programs (CV02)

The commissioner suspended or modified specific routine enforcements by DHS Licensing so that clients can continue receiving services during the COVID-19 pandemic:

- Suspended routine licensing and certification reviews
- Suspended payment of outstanding fines
- Suspended fix-it tickets, correction orders and fines
- Suspended licensing orders except for temporary immediate suspension orders necessary to ensure the health and safety of those receiving care and services

The Licensing Division will continue to respond to critical incidents involving high risk of harm to clients or allegations of abuse or neglect and will prioritize on-site visits as needed on a case-by-case basis.

Inspections for pre-licensure and change of premises will continue on a case-by-case basis.

The commissioner also took actions to increase flexibility for providers:

- Licenses for family child care, child and adult foster care, and community residential settings that would have expired in March, April or May are automatically extended for three additional months. Training, re-licensing and documentation requirements are extended.
- Timelines for training for existing staff and license holders that expire during the peacetime emergency are extended.

These waivers will be in effect until May 1, 2020.

Affects Minnesota Statutes, Chapters [245A](#) and [245H](#)

Suspending application requirements for economic assistance and housing programs (CV03)

The commissioner waived certain requirements for economic assistance and housing programs, affecting procedures for applications and interviews, verification, changes to existing applications and reporting. The affected programs include General Assistance, Housing Support, Minnesota Supplemental Aid, the Minnesota Family Investment Program and the Diversionary Work Program. The changes also reduce barriers for families applying for cash assistance, relieve eligibility workers of after-the-fact verifications, and ensure that participants do not have to repay cash assistance overpayments caused by state, local agency or system errors. These changes will reduce the number of face-to-face contacts in county and tribal offices while making it easier for Minnesotans in sudden financial crisis to receive assistance.

Affects Minnesota Statutes, Chapters [256D](#), [256I](#), [256J](#), and [256P](#)

Suspending some rules to allow continuation of economic assistance (CV04)

The commissioner temporarily waived requirements for reporting, documentation and signatures for Minnesota Family Investment Program (MFIP), Diversionary Work Program, General Assistance, Minnesota Supplemental Aid and housing support; and directed that no overpayments caused by agency or system errors should be charged to participants, because no reasonable person could be expected to recognize errors as emergency program policies are implemented. The commissioner also waived the requirement for counties and tribes to conduct program recertifications.

In addition, because implementing the following MFIP policies requires face-to-face meetings and/or documentation from third parties, requirements for the following will be suspended during the public health emergency for:

- Enforcing work requirements
- Enforcing school attendance requirements for teen parents
- Imposing sanctions for not cooperating with child support
- Discontinuing assistance to any family reaching the 60-month lifetime limit or being due for a review of their extension status until the end of the emergency declaration.

Affects Minnesota Statutes, sections [256J.30, subs. 4 and 5](#); [256J.42](#); [256J.425](#); [256J.46](#); [256J.54, subd. 5](#); [256J.561](#); [256J.57](#); [256P.04, subd. 8s, 11, 12, and 15 \(4\)](#); [256P.07, subd. 4](#); and [256P.08](#).

Suspending referral requirement for Minnesota Family Investment Program (CV05)

The commissioner temporarily waived a requirement for MFIP participants experiencing family violence to meet with both an employment counselor and a family violence specialist if the family violence specialist cannot be reached. The commissioner also directed employment counselors to avoid requiring activities that participants indicate would be dangerous in their situation, such as face to face meetings. The Minnesota Family Investment Program requires employment plans for participants experiencing family violence to make safety the primary concern, and those plans normally must involve both an employment counselor and a family violence specialist.

Affects Minnesota Statutes, [section 256J.521, subdivision 3](#)

Suspending sanctions for some Minnesota Family Investment Program and Diversionary Work Program participants (CV06)

The commissioner temporarily ordered that participants in the Minnesota Family Investment Program and Diversionary Work Program will not be sanctioned or disqualified for failing to attend meetings, submit paperwork or comply with other specific requirements. This will be in effect for the duration of the public health emergency.

The commissioner used existing authority under state law, which recognizes emergencies as good cause for failing to meet certain program requirements.

Authority provided in Minnesota Statutes, [section 256J.57](#)

Allowing child care assistance payments for a second child care provider when a program temporarily closes or is unavailable – Amended (CV07)

The commissioner amended her previous decisions on March 20 and March 27, 2020 which temporarily modified certain requirements under the Child Care Assistance Program (CCAP). Under those decisions, the commissioner: (1) permitted CCAP to pay a second providers when a child's regular provider is temporarily closed and the child is attending a new program; (2) waived the normal 15-day notice period required when a family changes providers; and (3) allowed CCAP to pay for more than the usual maximum of 120 hours of care per child every two weeks. Pending federal waiver approval or available federal COVID funding, the commissioner amended these previous decisions to make them retroactive to March 13, 2020, or when the day care started, whichever is later, and end one month from the child's start date or June 30, 2020, whichever is earlier.

These changes support children, families and providers by continuing to prioritize care needs during the COVID-19 peacetime emergency, and reducing the negative financial impact on families and providers due to the COVID-19 pandemic.

Affects Minnesota Statutes, sections [119B.09, subd. 6](#); [119B.097](#); [119B.13, subd. 7](#); Minnesota Rule [3400.0040, subp. 4\(B\)](#); and [45 C.F.R. Part 98](#).

Paying CCAP to child care providers while children not attending care – Amended (CV08)

The commissioner previously approved a waiver on March 20, 2020, temporarily allowing for flexibility and expanded use of medical exemptions to pay child care providers under the Child Care Assistance Program (CCAP) for more days when children are absent. Under that March 20, 2020 waiver, the department will make CCAP payments to temporarily closed child care providers, for up to one month.

Now, in further response to the COVID-19 pandemic, the commissioner has approved additional flexibilities which temporarily allow CCAP providers to:

- Receive CCAP payments even if they have chosen not to charge, or reduce fees for, private pay families during closure, and

- Bill CCAP for closed days from the date the provider closed for up to one month, beginning as early as March 13, 2020, which is the date of the federal emergency declaration, and ending no later than June 30, 2020. The beginning date in the original waiver was March 20, 2020.

These changes support children, families and providers by prioritizing care needs during the COVID-19 peacetime emergency.

Affects Minnesota Statutes, sections [119B.13, subds. 4 and 7](#); Minnesota Rule [3400.0120, subp. 1a\(C\)](#); [45 C.F.R. Part 98](#).

Suspending certain requirements for child care assistance program redetermination due dates (CV09)

The commissioner has extended redetermination due dates for families' eligibility for the Child Care Assistance Program by three months on cases with redeterminations due on or before June 30, 2020. This will allow families to continue to receive care until their new redetermination date and allow time to gather verifications.

Affects Minnesota Statutes, section [119B.025, subd. 3](#); and Minnesota Rule [3400.0040](#).

Extending Child Care Assistance Program provider registration renewal dates (CV10)

The commissioner ordered that registration renewal due dates be extended by three months for Child Care Assistance Program providers with renewals due between March 20, 2020 and June 30, 2020. Without this action, families served by the Child Care Assistance Program would need to send their children to a different registered Child Care Assistance Program provider if their current provider's registration were to lapse. The commissioner took this action to ensure continuity of care for children served by the Child Care Assistance Program during the COVID-19 peacetime emergency. This modification is retroactive to March 20, 2020, and will remain in effect through June 30, 2020.

Affects Minnesota Statutes, [section 119B.011](#), subd. 19a.

Allowing foster care caseworker visits by video (CV11)

The commissioner waived state requirements for foster care caseworkers to permit video conferencing or any similar technology to serve as the monthly visit between a child and their foster care caseworker, which aligns with federal guidance issued March 18, 2020. State and federal law have prohibited video conferencing and normally require that monthly caseworker visits be held face-to-face.

Affects Minnesota Statutes, section [260C.212, subdivision 4a](#).

Suspending new actions for child support remedies (CV12)

The commissioner suspended new actions for child support remedies during the public health emergency. Parents who fall into arrears on child support may have driver's licenses and occupational licenses suspended and may be reported to credit bureaus. Due to pandemic closures, these parents currently have no access to the courts to challenge such actions.

Affects Minnesota Statutes, sections [518A.65](#), [518A.66](#), and [518A.685](#).

Waiving recertification process for HIV/AIDS services and drug assistance program (CV14)

The commissioner has temporarily suspended the six-month and annual recertification processes for Minnesota's HIV/AIDS program, Program HH, for the duration of the COVID-19 pandemic. Enrollees will not be removed from services unless providers or the recipients themselves report ineligibility, such as income or residency requirements. Program HH includes the AIDS Drug Assistance Program as well as insurance, dental, mental health, nutrition, and medication therapy management programs.

Affects Minnesota Statutes, section [256.9365](#).

Allowing phone or internet visits for waiver programs (CV15)

The commissioner waived certain requirements for face-to-face visits for seniors and people with disabilities receiving long-term services and supports. For people receiving home and community-based services under Medical Assistance, this means that assessments for needs can be done by phone or online connection, and that case managers can conduct phone or online visits. The affected programs are Alternative Care (AC), Brain Injury (BI) waiver, Community Alternative Care (CAC) waiver, Community Access for Disability Inclusion (CADI) waiver, Developmental Disabilities (DD) waiver, Elderly Waiver (EW), Essential Community Supports (ECS), and Federal OBRA Level II Evaluations. Personal Care Assistance (PCA) programs include assessments but do not require case management. This change also applies to people served under Rule 185 case management who choose not to waive the annual reassessment. These actions will protect people receiving services and case managers during the pandemic.

Affected statutes and rules:

- Minnesota Statutes, sections [256B.0911](#), [256B.0922](#), [256B.0659](#), [256B.49](#), [256B.092](#), [256B.0913](#),
- Minnesota Statutes, [Chapter 256S](#)
- Minnesota Rules, [part 9525](#)

Expanding access to telemedicine services for Children's Health Insurance Program, Medical Assistance and MinnesotaCare enrollees (CV16)

The commissioner eased certain limits on receiving care and services through telephone and video visits that can instead be provided safely and effectively without a face-to-face visit by:

- Expanding the definition of telemedicine to include telephone calls so providers who have a telemedicine agreement in place with DHS can serve patients through telephone visits;
- Allowing a provider's first visit with a patient to be conducted on the phone;
- Allowing Children's Health Insurance Program (CHIP), Medical Assistance or MinnesotaCare enrollees to have more than three telemedicine visits in a week; and
- Requiring managed care plans to follow these policies.

These measures help enrollees and providers follow social distancing best practices.

DHS is also considering how best to provide flexibility for greater use of communications technology in specific settings and for certain types of treatment, including group therapy and residential treatment settings.

Affected statutes and rules: [Minnesota Statute 256B](#)

Preserving health care coverage for Medical Assistance and MinnesotaCare - Amended (CV17)

The commissioner continued enrollment in public health care programs to ensure that no one enrolled in Medical Assistance, including Medical Assistance for Employed Persons with Disabilities, or MinnesotaCare loses coverage during the pandemic, unless an enrollee requests that their coverage ends or moves out of Minnesota. This includes coverage for enrollees who are unable to pay their premiums. The department is not sending notices on the need to renew coverage or closure notices to Minnesotans on Medical Assistance and MinnesotaCare.

These changes are effective March 18, 2020, and will remain in effect through the last day of the month in which the national public health emergency ends.

Affects Minnesota Statutes, sections [256B.056, subd. 7a](#); [256L.05, subd.3a](#); [256L.06, subd.3](#); [256L.07, subd. 1](#); [256L.15](#); and Minnesota Rule [part 9505.0115, subpart 2](#); [part 9506.0040](#).

Waiving work requirements for certain SNAP participants (CV18)

The commissioner waived work requirements for able-bodied adults without children who receive Supplemental Nutrition Assistance Program benefits.

The commissioner used existing authority under federal law to make this change during the public health emergency. Able-bodied adults without children are normally required to meet work requirements unless they give good cause, defined as circumstances beyond their control, such as illness, household emergency or unavailable transportation. States determine what qualifies as good cause, and the department considers the COVID-19 pandemic to be an emergency facing all Minnesota households.

Authority provided in [7 C.F.R. § 273.7 \(i\)](#)

Allowing 90-day supply of prescription maintenance medications (CV19)

The commissioner increased the prescription drug limits on maintenance medications from 34 days to 90 days for all Medical Assistance and MinnesotaCare enrollees for [certain therapeutic drug classes](#). DHS will work with managed care organizations to further extend the benefits of these flexibilities.

Affects Minnesota Statutes, [section 256B.0625, subdivision 13](#).

Eliminating cost-sharing for COVID-19 diagnosis, treatment (CV20)

The commissioner eliminated any cost-sharing, including co-pays and deductibles, for the diagnosis, testing and treatment of COVID-19 for all Medical Assistance and MinnesotaCare enrollees. This applies to enrollees in both fee for service and managed care. This helps ensure that financial concerns don't prevent someone from seeking testing, treatment or appropriate care, increasing public health risks. This change was effective as of March 19, 2020, but may apply to testing and treatment that occurred prior to that date. Further details about retroactive coverage will be announced later. The change will end when the national public health emergency is declared over.

Affects Minnesota Statutes, sections [256B.0631](#); [256L.03](#), subd. 5.

Allowing telemedicine alternative for School-Linked Mental Health services and Intermediate School District Mental Health services for children and their families (CV21)

The commissioner temporarily waived certain requirements for School-Linked Mental Health and Intermediate School District Mental Health Innovation programs to allow for services via telemedicine. This action:

- Authorizes reimbursing school mental health providers for expanded telemedicine services through grant funds;
- Increases flexibility to no longer require the first visit be in person;
- Waives the three-day-per-week limit on telemedicine; and
- Allows telephone and other non-secured electronic communications platforms, such as Skype.

Affects Minnesota Statutes, sections [245.4901](#); [256B.0625](#), subd. 46; and [256L.03](#), subd. 1.

Postponing provider screening and re-enrollment (CV22)

The commissioner allowed health care providers currently authorized to serve public health care program enrollees to continue doing so without requiring them to re-enroll with DHS. The commissioner postponed the requirement to re-enroll health care providers every five years and personal care attendants every three years to avoid unnecessarily terminating enrolled providers over paperwork, enabling them to continue providing necessary services to enrollees during the COVID-19 peacetime emergency. DHS will make adjustments to accommodate the same activities within managed care.

To ease administrative burdens, the commissioner also postponed setting up new managed care-only providers in the Medicaid Management Information System for the purpose of getting encounter claims data. DHS will make adjustments to accommodate the same activities within managed care.

Affects federal laws [42 C.F.R. 455, Subpart E](#); and [42 U.S.C. § 1396b\(m\)\(2\)\(A\)\(xi\)](#)

Minnesota Statutes, section [256B.04](#), subds. 21, and 22 and [256B.69](#), subds. 9, 9c, and 9d.

Modifying certain background study requirements (CV23)

The commissioner temporarily modified certain statutory background study requirements for workers who serve vulnerable Minnesotans. Completing studies has become difficult due to closures of public

fingerprinting sites and lack of response to requests for records from other states. These changes will assist health and human service providers to quickly respond to their changing workforce needs and continue to serve clients. Modifications are effective beginning April 6, 2020.

Changes include:

- Waived the requirements for fingerprint-based background studies for all categories.
- Instituted a “Minnesota only” background study using the individual’s name and date of birth for maltreatment and criminal history.
- Limited required background checks to Minnesota registries and databases by waiving required checks of out-of-state registries and databases.
- Instituted a flat, \$20 fee for all Minnesota Department of Human Services statutory background study applications, which is the lowest in the range of background studies fees assessed.
- Waived the mandatory direct contact supervision requirements to allow case-by-case decisions to permit certain individuals to work without supervision while their background studies are being processed. Transportation and personal care assistance (PCA) will continue to be subject to supervision requirements.

These modifications permit the completion of a temporary emergency background study while still applying the same standards that would disqualify someone from passing a background study, including previous disqualification decisions.

The temporary change offers all providers across the state the flexibility that they need to address workforce changes, and affords optimal access to qualified and available direct care workers while still protecting the safety of clients. Providers will be best positioned to maintain the health and safety of clients they serve.

The modified background studies will end after the Governor of Minnesota declares that the peacetime state of emergency is over. After that time, all study subjects who had received a modified background study will need to submit a new background study with fingerprints to ensure full compliance with state and federal background check requirements.

Affects Minnesota Statutes, [Chapter 245C](#).

Allowing phone or video use for targeted case management visits (CV24)

The commissioner waived requirements temporarily for face-to-face visits for Minnesotans on Medical Assistance who receive certain targeted case management services. This means case managers can conduct targeted case management visits by phone or video with adults receiving services or their legal guardians and with children receiving services and their parents or legal guardians. The affected programs include:

- Child welfare targeted case management
- Children’s mental health targeted case management
- Adult mental health targeted case management
- Vulnerable adult or adult with developmental disabilities (VA/DD) targeted case management
- Relocation service coordination targeted case management

This change is effective March 19, 2020, and runs through the end of public health emergency.

Affects Minnesota statutes, sections [256B.0625, subd. 20](#); [256B.0621, subd. 5\(b\)\(7\)\(i\)](#); [256B.094, subd. 6](#); and [256B.0925, subd. 4](#).

Modifying certain license requirements for family child care (CV25)

The commissioner temporarily modified certain requirements for licensed family child care providers, whose services have been designated as essential during the peacetime emergency due to the COVID-19 pandemic. These modifications are necessary to provide additional flexibility to providers, mitigate the spread of the virus and protect the health and safety of children and child care providers.

The modifications relate to guidance from the Minnesota Department of Health and the Centers for Disease Control, age distribution, record-keeping, and outdoor space requirements. These changes are effective April 9, 2020, and will continue until the end of the peacetime emergency.

Affects Minnesota Statutes, sections [Chapter 245A](#) and Minnesota Rules, [Chapter 9502](#).

Modifying certain requirements for licensed child care centers and certified child care centers (CV26)

The commissioner temporarily modified certain requirements for licensed child care centers and certified child care centers, whose services have been designated as essential during the peacetime emergency due to the COVID-19 pandemic. These modifications are necessary to provide additional flexibility to providers, mitigate the spread of the virus, and protect the health and safety of children and child care providers.

The modifications relate to guidance from the Minnesota Department of Health and the Centers for Disease Control, requirements for staffing, age category grouping, staff training, record-keeping, the use of public parks, and overnight care. These changes are effective April 9, 2020, and will remain in effect until the end of the peacetime emergency.

Affected Statutes and Rules: Minnesota Statutes, [Chapters 245A](#) and [245H](#), and Minnesota Rules, [Chapter 9503](#).

Allowing exemption for temporary absence policy in Housing Support (CV27)

The commissioner waived certain requirements for Housing Support recipients who would be vulnerable to service interruptions due to COVID-19.

Under current law, there is a limit to the number of days Housing Support recipients can be absent from their residence. By continuing Housing Support payments for people in quarantine or hospitalized due to the COVID-19 pandemic, these individuals will not lose their housing.

This extension of payments is authorized for up to three months, effective April 2020.

Affects Minnesota Statutes, section [256I.05](#), subd. 1c (d).

Waiving in-person requirement to allow fair hearings to take place by telephone or video (CV29)

The commissioner temporarily waived the requirement to hold certain fair hearings in person. Hearings will still proceed by telephone and videoconference. This temporary change aligns with guidance to limit in-person contact as much as possible. Those affected by the temporary waiver may request that an in-person hearing be scheduled for a later date. This became effective upon the commissioner's signature on April 3, 2020, and will remain in effect until the end of the peacetime emergency.

Affects Minnesota Statutes, sections [256.045](#), subdivision 4(a), and [256.0451](#), subdivision 10.

Expanding telemedicine in health care, mental health, and substance use disorder settings (CV30)

The commissioner temporarily expanded access to telemedicine for Minnesotans enrolled in Medical Assistance and MinnesotaCare who receive health care, mental health treatment, or substance use disorder treatment. Specifically, the commissioner expanded the providers who are permitted to provide services through telephone and video visits to include the following providers and their tribal provider equivalents:

- Providers who are considered "licensed health care providers" under section 256B.0625, subdivision 3b, paragraph (e), and providers who licensed medical providers supervise;
- Mental health certified peer specialists and mental health certified family peer specialists where they are currently authorized to provide services;
- Mental health rehabilitation workers in Adult Rehabilitative Mental Health Services (ARMHS);
- Mental health behavioral aides in Children's Therapeutic Support services (CTSS); and
- Alcohol and drug counselors, alcohol and drug counselor-tmps, recovery peers, and student interns in licensed SUD programs.

The commissioner also temporarily expanded telemedicine (including telephone and video visits) to Rule 25 assessments, comprehensive assessments, and group therapy.

These measures help enrollees and providers follow social distancing best practices. DHS is received federal approval for these changes.

This change is effective March 19, 2020, and runs through the end of public health emergency.

Affects Minnesota Statutes sections [256B.0625, subd. 3b\(e\)](#); [256B.0625, subd. 46](#); [254B.05, subd. 5,\(f\)](#); and Minnesota Rules, part [9530.6615, subp. 3, item A](#)

Allowing waiver of county cost when COVID-19 delays discharges from DHS-operated psychiatric hospitals (CV31)

The commissioner will temporarily allow counties to request not to be held financially responsible for increased charges incurred for patients who no longer require inpatient care when discharge from DHS-operated psychiatric hospitals is delayed because of the COVID-19 pandemic.

State law requires counties to pay the full cost of care for patients admitted to the Anoka-Metro Regional Treatment Center or one of the six Community Behavioral Health Hospitals once they no longer require inpatient care.

Community-based programs that normally accept patients discharged from DHS-operated psychiatric facilities may no longer admit new patients because of COVID-19 concerns, which could result in delayed discharges from DHS facilities and increased costs for counties.

The commissioner's action allows for administrative review and possible waiver of a portion of a county's increased financial responsibility when a delay in discharge is directly related to the coronavirus pandemic and is beyond county control.

The action is retroactive to discharge delays occurring on or after the governor's declaration of the Peacetime State of Emergency, Executive Order 20-01, on March 13, 2020, and remains in effect until the end of the peacetime state of emergency.

Affects Minnesota Statutes, section [246.54](#), subd. 1a, 1b, and 3

Modifying timelines and face-to-face requirements for certain child protection responses to alleged maltreatment (CV33)

The commissioner temporarily modified timelines and face-to-face requirements for certain child protection responses to alleged child maltreatment by allowing additional time and alternative means of contact by county or tribal workers under limited circumstances, and where child safety can still be assured. These temporary measures will allow for maximum flexibility to respond to the most urgent needs, and to attend to the safety and health of families and the child welfare workforce during the current peacetime emergency. This is effective April 7, 2020, and will remain in effect until the end of the peacetime emergency.

Affects Minnesota Statutes, [section 626.556, subd. 10\(j\)](#).

Modifying requirements for foster children's physical exams (CV35)

The commissioner modified the requirement under state law that the responsible social services agency must ensure an annual physical examination of a foster child and an exam within 30 days of the child's initial placement. To ensure a foster child's physical health during the peacetime emergency, the responsible social services agency must: (1) continue to seek the child's medical records from appropriate sources to determine if the child has had a physical examination within the 12 months preceding placement with the social services agency; (2) continue to take appropriate actions to ensure that the child's immediate health care needs are addressed; and (3) consider telemedicine as a temporary substitute for the face-to-face physical examination.

This modification recognizes that many clinics and health care facilities have suspended or limited the availability of routine health care.

This modification is effective immediately, and expires at the end of the peacetime emergency.

Affects Minnesota Statutes, section [260C.219\(d\)](#).

Modifying time period to complete foster care placement plan and signature requirements (CV36)

The commissioner temporarily modified state law regarding the due date for out-of-home placement plans for children in foster care. The modification will extend the due date from 30 days to 60 days after a child is placed in foster care. The commissioner also modified signature requirements. Extending the deadline to coincide with the federal deadline and modifying signature requirements will ensure out-of-home placement plans continue to include appropriate and necessary services for families, while recognizing that certain services may be delayed and in-person communications may be unavailable during the current peacetime emergency.

These modifications do not alter a court's authority to require an out-of-home placement plan be filed within the regular 30-day timeframe, or the court's authority to require an out-of-home placement plan be signed.

This is effective immediately and will remain in effect until the end of the peacetime emergency.

Affects Minnesota Statutes, [260C.212, subd. 1](#).

Extending recertification dates for the Supplemental Nutrition Assistance Program and Minnesota Food Assistance Program (CV37)

The commissioner temporarily waived minimum certification periods for Supplemental Nutrition Assistance Program and Minnesota Food Assistance Program recipients. Typically, SNAP and MFAP recipients must verify their situations every six months to receive benefits. This waiver maintains uninterrupted benefits for Minnesotans relying on SNAP or MFAP during the peacetime emergency even if they cannot submit otherwise required documentation, and will allow county and tribal eligibility staff to respond to new applications.

This waiver is retroactive to March 1, 2020. It will expire on June 30, 2020.

Affects Minnesota Statute sections [256D.0516](#) and [256D.053](#), and Federal Regulations [7 CFR 273.10\(f\)\(3\)\(i\)](#), [7 CFR 273.10\(f\)\(5\)](#), [7 CFR 273.12\(a\)\(5\)\(iii\)](#), and [7 CFR 273.14](#).

Allowing flexibility in housing licensing requirements (CV38)

The commissioner waived certain licensing requirements for Housing Support settings to provide needed flexibility in response to the COVID-19 pandemic. The change allows people to move to another setting, approved by the department, in order to isolate and keep people safe.

Housing Support recipients currently live in a variety of group and individual settings. Some of the existing living arrangements may not meet social distancing guidelines, or quarantine/isolation guidelines needed to

keep people safe and healthy. In addition, it may not be possible for licensors and inspectors to complete inspections during this time. This change is effective April 20, 2020, and expires at the end of the end of the peacetime emergency.

Affects Minnesota Statutes, section [256I.04 subd.2a and 2b](#).

Providing emergency changes to Supplemental Nutrition Assistance Program (SNAP) and Minnesota Food Assistance Program (MFAP) benefits (CV39)

All Minnesotans who receive federal SNAP benefits will receive the maximum allowable benefit for their household size for at least 2 months. Minnesotans receiving their food benefits through the Minnesota Food Assistance Program will also receive maximum benefits. The Department of Employment and Economic Development reports a record number of people have applied for unemployment benefits since the peacetime emergency was declared. DHS anticipates that many of the same people will apply for SNAP. The Minnesota Department of Human Services will begin issuing the emergency supplements to qualifying households on April 28, 2020 and will continue throughout May on a staggered basis. The emergency supplements will go to households that didn't receive the maximum amount of nutrition assistance in March and April of 2020. Approval to issue these emergency supplements will remain in place until such a time as the Secretary for Health and Human Services rescinds the public health emergency declaration that was issued on January 27, 2020, under section 319 of the Public Health Service Act or the peacetime emergency declared by Governor Walz in Executive Order 20-01 and extended in Executive Order 20-35 expires.

This change in SNAP benefits was authorized by the Families First Coronavirus Response Act ([Public Law 116-127](#)) and the United States Department of Agriculture – Food and Nutrition Service. Applicable state law for MFAP is at Minnesota Statutes, section [256D.053](#).

Waiving signature requirements for certain medical equipment, transportation (CV40)

The commissioner waived the need for providers to get signatures when providing durable medical equipment (DME) and nonemergency medical transportation (NEMT) to Medical Assistance and MinnesotaCare enrollees.

This change supports the need for social distancing during the pandemic.

This waiver is effective April 20, 2020, and expires at the end of the COVID-19 peacetime emergency.

Affects Minnesota Statutes, section [256B.0625](#), subd. 17b, paragraph (b)(v).

Streamlining the waiver process for the Supplemental Nutrition Assistance Program (CV42)

The commissioner has authorized the Minnesota Supplemental Nutrition Assistance Program (SNAP) director to implement federal SNAP rule and law changes; to accept federal SNAP waivers provided by the U.S. Department of Agriculture to all states; to apply for federal SNAP waivers; and to implement federal SNAP waivers approved by the U.S. Department of Agriculture.

This authority ensures that Minnesotans are able to receive SNAP benefits in a safe and timely manner and that Minnesota is able to apply for, accept and implement waivers that will provide administrative relief and timely guidance to county and tribal human services agencies.

This authority is effective April 23, 2020, and has no end date.

This is done with respect to the federal authority governing the SNAP program in [7 U.S. Code Chapter 51](#) and [7 CFR Subchapter C](#).

Allowing remote delivery of adult day services (CV44)

The commissioner authorized licensed adult day service providers, directed to close on March 29, 2020, to provide certain similar services remotely and/or in-person to one individual at a time. This change means:

- Adult day services can be delivered remotely, via 2-way interactive video or audio communication.
- Providers may deliver in-person services to people in their own homes or residences.
- Providers may deliver in-person services to one person at a time in their licensed setting, such as to receive a bath

Providers can deliver the following services in alternative ways:

- Wellness checks and health-related services, including medication set-up and administration overseen by a nurse;
- Socialization/companionship;
- Activities;
- Meals, delivered to participants' homes;
- Assistance with Activities of Daily Living (ADLs), including bathing; and
- Individual support to family caregivers.

This change will be effective upon federal approval and implementation of changes to DHS licensing rules. It will end when the peacetime emergency is over.

Affects Minnesota Statutes, section [245A](#) and Minnesota Rules sections [9555.9600](#) to [9555.9730](#).