



OVERVIEW OF 245D LICENSING AND ENROLLMENT

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Employment Services and Enrollment

Employment
Development
Services

Employment
Exploration
Services

Employment
Support
Services

Home and Community-Based Services - 245D Licensed
Intensive Support Services

Minnesota Health Care Programs (MHCP) Enrollment

HCBS – 245D License



Apply for license

Application Process

1. Complete the [245D pre-application worksheet](#).
2. Prepare the policies and procedures identified in the pre-application worksheet by using these sample templates:
 - [Drug and Alcohol Prohibition Policy](#)
 - [Emergency use of Manual Restraint Allowed Policy](#)
 - [Emergency use of Manual Restraint Not Allowed Policy](#)
 - [Grievance Policy](#)
 - [Temporary Service Suspension Policy](#)
 - [Service Termination Policy](#)

<https://mn.gov/dhs/partners-and-providers/licensing/hcbs-245d/>

HCBS 245D Application

- [Pre-Application Worksheet](#)
- Organizational Chart
- Policies and Procedures that comply with 245D
- Controlling Individuals, Authorized Agent, Compliance Officer, Designated Manager and Designated Coordinator
- Schedule pre-application interview
- \$500 Application Fee
- DHS 90 working days to act on the completed application
- Complete HCBS Waiver and AC [Provider Training 101](#)
- Complete background studies through NetStudy 2.0

Regulations

- Minnesota Statutes

- [245A](#)
- [245C](#)
- [245D](#)

- Minnesota Rules

- [9544](#)

- Additional Regulations

- [245A.66](#) and [260E](#) - Maltreatment of Minors Act
- [245A.65](#), [626.557](#) and [626.5572](#) - Vulnerable Adult Act
- [Chapter 13](#) - MN Data Practices Act
- [256B.4912](#) HCBS Provider Requirements and Payment
- [256B.04](#) Compliance Officer
- [HIPAA](#)

Designated Coordinator

1

- Baccalaureate degree in human services
- 1 year full-time work experience providing direct care

2

- Associate degree
- 2 years full-time work experience providing direct care

3

- Diploma accredited postsecondary institution
- 3 years full-time work experience providing direct care

4

- 50 hours of education/training
- 4 years FTE direct care under supervision of a DC

& competent to perform required duties

Designated Manager

Designated Coordinator Qualifications

&

3 years supervisory experience in a program providing direct support services to persons with disabilities or persons age 65 and older

Staff Training Requirements

- Job Description and Functions
- Responding to/Reporting Incidents
- Safety Practices
- Policies & Procedures
- MN Data Privacy/HIPAA
- Service Recipient Rights
- Maltreatment of Minors and Vulnerable Adult Acts
- Person-Centered Planning and Delivery
- First Aid (and CPR if required by CSSP Addendum)
- CSSP/CSSP Addendum and other person-specific documents
- Medication Administration (if setting up or administering)

Staff Training Requirements 2

- EUMR and Prohibited Procedures
 - 8 hour Positive Supports Rule Core training *(4 hours annually)*
 - Anti-Fraud
 - OSHA/Bloodborne Pathogens
 - Minimizing the Risk of Sexual Violence
 - Other training topics required by the person's CSSP
 - Specialized Medical Equipment *(if used)*
- [Employment Specialist Competencies](#)
- Industry-recognized credential
 - Demonstrate competency

Additional Management Training

- 4-hour Function Specific Positive Supports Rule
 - Managers and supervisors
- 2-hour Function Specific Positive Supports Rule
 - Owners, license holders, and executive level employees



245D Service Coordination & Documentation



- Intake Meeting
 - 45/60 Day Meeting
 - Annual Meeting
-
- Coordinated Service and Support Plan (CSSP) Addendum
 - Individual Abuse Prevention Plan (IAPP)
 - Outcome(s)
 - Progress Reports

MHCP Enrollment

Find in Table of Contents:

Table of Contents

[Member Evidence of Coverage \(EOC\)](#)

[MN-ITS User Manual](#)

[Minnesota Provider Screening and Enrollment Manual \(MPSE\)](#)

[Latest revisions to this Manual](#)

[Provider Basics](#)

[COVID-19](#)

[Acupuncture Services](#)

[Ambulatory Surgical Services](#)

[Anesthesia Services](#)

[Behavioral Health Home Services](#)

[Certified Community Behavioral Health Clinic \(CCBHC\)](#)

[Child and Teen Checkups](#)

[Chiropractic Services](#)

[Clinic Services](#)

[Community Emergency Medical Technician \(CEMT\) Services](#)

[Community Health Worker](#)

[Community Paramedic Services](#)

[CW-TCM](#)

Home and Community-Based Services (HCBS) Programs Provider Enrollment

Revised: [February 1, 2021](#)

Minnesota Health Care Programs (MHCP) requires providers to enroll for the services they provide to MHCP members for each location that is providing services and receiving reimbursement.

The steps and instructions in this section apply to services for any of the following programs:

- Alternative Care (AC)
- Elderly Waiver (EW)
- Essential Community Supports (ECS)
- Home and community-based waivers, which include Brain Injury (BI), Community Alternative Care (CAC), Community Access for Disability Inclusion (CADI), Developmental Disabilities (DD)

To enroll for additional Moving Home Minnesota (MHM) services, see [Moving Home Minnesota Provider Enrollment](#).

Newly enrolling day support service providers must obtain a needs determination authorization letter from the Department of Human Services - Disability Services Division (DHS-DSD) **prior** to completing the following enrollment steps. This needs determination letter approves the county or tribe lead agencies and the day support services provider's needs determination application request. For more information, contact your [local county agency or tribe \(DHS-0005\)](#) (PDF). **The needs determination authorization letter is not applicable for providers who were already enrolled in Adult Day Care, Day Training and Habilitation, or Structured Day prior to Jan. 1, 2021.**

How to Enroll

Providers can enroll with MHCP or make enrollment requests for HCBS service(s) in one of the following two ways:

MHCP Enrollment 2

- [Enrollment Forms](#)
- General Liability Insurance Certificate
- Enrollment fee of \$599
- Enroll through [Minnesota Provider Screening and Enrollment \(MPSE\)](#) or fax required documents.

