

Community residential services

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Legal authority	<p>Federally approved BI, CAC, CADI, and DD waiver plans, Minn. Stat. Chapter 245A, Minn. Stat. Chapter 245D, Minn. Stat. §252.28, Minn. Stat. §256B.092, Minn. Stat. §256B.49, Minn. Stat. Chapter 256N, Minn. Stat §260C.001, Minn. Stat. §260C.4411, Minn. Stat. §260C.451, Minn. Stat. §260D.01, Minn. R. 9555.5105 to 9555.6265, Minn. R. 2960.3000 to 2960.3340, Minn. Stat. §260C.157, Minn. Stat. §260C.70 – 260C.714</p>	
Applicability	<p>The information on this page applies to home and community-based services (HCBS) community residential services on the following waivers:</p> <ul style="list-style-type: none"> • Brain Injury (BI). • Community Access for Disability Inclusion (CADI). • Community Alternative Care (CAC). • Developmental Disabilities (DD). <p>Difference between community residential services and family residential services</p> <p>Community residential services are provided in a corporate foster care or community residential setting (CRS), using a shift-staff model. Family residential services are provided in a licensed family foster care setting where the license holder resides in the home. For more information, refer to CBSM – Family residential services.</p>	
Definitions	<p>Community residential services: Services that provide training and/or habilitation, ongoing residential care and supportive services to adults and/or children in a licensed setting. These services are individualized and based on the needs of the person, as identified in the support plan.</p> <p>Community residential setting (CRS): A licensed residential setting that serves adults and where the license holder does not reside. This setting typically uses a shift-staff model of support (i.e., paid staff work shifts on a 24-hour basis). In this type of setting, at least one person receives community residential services funded by an HCBS waiver program.</p> <p>Child corporate foster care: A licensed residential setting that serves children and where the license holder does not reside. This setting typically uses a shift-staff model of support (i.e., paid staff work shifts on a 24-hour basis). In this type of setting, at least one person receives community residential services funded by an HCBS waiver program.</p>	
Covered services	<p>Community residential services cover training and/or habilitation, ongoing residential care and supportive services that are individualized and based on the person’s needs. This may include increasing and maintaining the person’s physical, intellectual, emotional and social function in the following areas:</p> <ul style="list-style-type: none"> • Assistance with activities of daily living. • Communication skills. • Community participation and mobility. • Health care. • Household management. • Interpersonal skills. • Leisure and recreation. • Medication oversight to the extent permitted under state law (e.g., Minn. Stat. 245D.05). • Money management. 	

	<ul style="list-style-type: none"> • Positive behavior and mental health support. • Self-care. • Sensory and motor development. • Socialization. <p>There are additional covered services for children. For more information, refer to the community residential services for children section.</p>
<p>Non-covered services</p>	<p>Community residential services do not cover:</p> <ul style="list-style-type: none"> • Basic foster care rate and supplemental difficulty of care rate. • Cost of vehicle and facility maintenance (e.g., upkeep and improvement). • Duplication of services paid by other sources (e.g., respite for adults living in a CRS, chore services, homemaker or personal care assistance services). • Items of comfort or convenience. • Payment when the person is absent for a full day (for more information, refer to the absences from a residential setting section on MHCP Provider Manual – Billing for Waiver/AC program). • Payments made directly or indirectly to the person. • Room and board, including Housing Support (formerly Group Residential Housing [GRH]) for people age 18 or older. • Services provided directly or indirectly to members of the person’s immediate family.
<p>Remote support</p>	<p>Community residential services can be delivered through remote support. Services delivered through remote support must meet all the requirements listed on CBSM – Remote support.</p>
<p>Licensing moratorium for corporate settings</p>	<p>There is a licensing moratorium affecting new adult and child corporate foster care and CRS development. For more information, refer to CBSM – Moratorium on corporate foster care and CRS development.</p>
<p>Size and location</p>	<p>The total number of people who reside in a living setting cannot be more than four. This means four people not related to the principal care provider.</p> <p>Exceptions to size limit</p> <p>The size limitation does not apply to:</p> <ul style="list-style-type: none"> • Settings that have continuously provided waiver services before July 1, 2000 (for people on the BI and CADI waivers) or May 1, 2001 (for people on the CAC Waiver). <p>Note: In this situation, “provided” means this service was an approved service for a person in the setting on or before one of the above dates.</p> <ul style="list-style-type: none"> • People who are age 55 or older. <p>For the above situations, the setting can continue to provide services up to the approved license capacity.</p> <p>Emergency situations</p> <p>DHS may approve an exception to the size limit of four during emergency situations when the setting is needed to prevent a person’s placement in a hospital, regional treatment center or nursing facility.</p> <p>For purposes of this provision, emergency situations are defined as any of the following:</p> <ul style="list-style-type: none"> • Unexpected loss of an essential caregiver. • Sudden loss of housing due to a closure.

- Loss of services or housing due to a natural disaster.
- Necessity to place siblings together.

A setting may receive this exception if up to five people live in the setting and are unrelated to the principal care provider. If approved, this exception cannot exceed two years.

There are other situations in which the license holder can request an exception to the size limit of four. For more information, refer to [CBSM – Changes to the size of setting by waiver service](#).

Submitting an exception request

To submit an exception request, the lead agency must contact its assigned [regional resource specialist \(RRS\)](#).

Setting connected to an institution

The lead agency cannot authorize community residential services for people on BI, CAC, CADI and DD waivers who reside in a living setting adjoined to or on the same property as one of the following:

- Hospital.
- Nursing facility.
- Intermediate care facility for persons with developmental disabilities (ICF/DD).
- Institution for mental disease (IMD).

Collocated settings

When a single provider leases or owns more than one service setting located on the same or adjoining property, the lead agency can only authorize services in one of the settings. A service setting includes a setting used to deliver any of the following services:

- Adult and child foster care.
- Adult day services, including adult day bath and family adult day services.
- Community residential services.
- Customized living or 24-hour customized living.
- Day support services.
- Family residential services.
- Integrated community supports.
- Prevocational services.

Collocated setting exceptions

Setting status: The provider maintains ownership/control of the setting, and the 2017/2018 HCBS attestation/validation process determined HCBS setting compliance. In this situation:

- The provider may continue to deliver services in collocated settings if waiver services have been continuously provided by the same provider that maintained ownership/control of the setting.
- The provider can confirm if 2017/2018 attestations were completed for collocated settings by using the [DSD Contact Form](#) to submit the provider's name, setting address and provider identification number.

Setting status: There was a sale or transfer of ownership to a new provider, and the 2017/2018 HCBS attestation/validation process determined HCBS setting compliance. In this situation:

- The new provider/owner must complete an HCBS site-specific review to ensure the people living in these settings are not isolated from the community. The provider must use the [DSD Contact Form](#) to complete the site-specific review process.

	<ul style="list-style-type: none"> The provider can confirm if 2017/2018 attestations were completed for previously owned colocated settings by using the DSD Contact Form to submit the provider's name, setting address and provider identification number.
Provider standards and qualifications	<p>When a person lives in a licensed residential setting, all federal, state and/or licensing agency rules and regulations must be followed.</p> <p>Community residential services are enrollment-required services. For more information, refer to CBSM – Waiver/AC service provider overview.</p> <p>A community residential services provider must have a service license under Minn. Stat. Chapter 245D as an intensive support services provider.</p> <p>The requirements for the setting license are different for adults and children. For more information, refer to:</p> <ul style="list-style-type: none"> Community residential services for adults section. Community residential services for children section. <p>Reporting</p> <p>A provider licensed under 245D must report all uses of controlled procedures, emergency use of manual restraint and prohibited procedures according to Minn. Stat. §245D.06, subd. 5 to DHS via the Behavioral Intervention Report Form, DHS-5148.</p> <p>Background studies</p> <p>To provide community residential services, providers must have a background study. For more information, refer to CBSM – Waiver/AC service provider overview – Required DHS background studies for direct-contact services.</p>
Authorization, rates and billing	<p>Community residential services are framework services. The lead agency uses the Rate Management System (RMS) to determine rates. For more information, refer to CBSM – RMS and Long-Term Services and Supports (LTSS) Service Rate Limits, DHS-3945 (PDF).</p>
Find a community residential services provider	<p>To find a list of licensed community residential services providers in Minnesota, see DHS licensing information lookup.</p> <p>To find licensed service providers, see MinnesotaHelp.info.</p>
Additional service information	<p>Refer to the following sections:</p> <ul style="list-style-type: none"> Community residential services for adults section. Community residential services for children section. <p>DD Waiver only</p> <p>Community residential services meet the habilitation requirement for the DD Waiver. For more information about this requirement, refer to CBSM – Habilitation.</p>
Additional resources	<p>CBSM – Changes to the size of setting by waiver service</p> <p>CBSM – Host county notification</p> <p>CBSM – Moratorium on corporate foster care and CRS development</p> <p>CBSM – Remote support</p> <p>DHS – HCBS settings transition plan</p> <p>DHS – Licensed foster care</p> <p>RMS User Manual – Quick reference guide on MAPCY and waiver services in foster care settings</p>
Additional information about community residential services for adults	
Own home	<p>For information about how to determine if a setting requires a license or qualifies as a person's own home, refer to CBSM – Requirements for a person own home.</p>

Setting requirements	Community residential services can only be provided to adults in settings licensed as an adult corporate foster care setting under Minn. R. 9555.5105 to 9555.6265 or CRS under Minn. Stat. §245D.02, subd. 4a .
Room and board funding	Waiver resources cannot pay for room and board. The Housing Support (formerly GRH) allocation pays for room and board for eligible adults. The lead agency financial worker determines both the amount of the adult's resources used for room and board and the Housing Support room and board payments, as applicable. For more information, refer to DHS – Housing Support .

Additional information about community residential services for children

Additional covered services	<p>In addition to the services listed in the covered services section, community residential services covers the provision of protection, supervision, household services, living-skills assistance and training/assistance with safeguarding cash resources for children.</p> <p>The lead agency may authorize community residential services when the scope of services assessed and identified in the child's support plan exceeds both:</p> <ul style="list-style-type: none"> • The scope of services provided in the out-of-home placement plan. • The payment rate the lead agency is required to cover.
Setting requirements	<p>Children younger than age 18 who receive community residential services must live in a setting that is:</p> <ul style="list-style-type: none"> • Licensed as a foster care setting (child corporate foster care home) or a supervised living facility. • Licensed as an adult corporate foster care home or CRS with an approved variance to care for a child for no more than six months. • Dually licensed as a child and adult corporate foster care home or CRS.
Secondary information	<p>Juvenile treatment screening team</p> <p>When considering foster care placement for a child, the responsible social service agency must use a juvenile treatment screening team to determine if placement is necessary. For more information about this process, refer to Juvenile Treatment Screening Team Practice Guide, DHS-8120A (PDF).</p> <p>Court order or voluntary placement agreement</p> <p>Counties/tribal nations are responsible for placement, care and supervision of a child in a foster care setting through a court order or voluntary placement agreement.</p> <p>Minnesota Assessment of Parenting for Children and Youth (MAPCY)</p> <p>Child placements into foster care settings that occurred before Sept. 30, 2021, continue to be covered by the MAPCY supplemental rate, which is calculated automatically in SSIS. This rate will remain in effect until the child leaves that placement.</p> <p>Child placements into foster care settings on or after Sept. 30, 2021, will not be covered by the MAPCY supplemental rate. Foster care maintenance payments will only use the basic rate for placements on or after this date.</p> <p>Corporate shift staff foster care</p> <p>When completing the MAPCY for corporate shift staff foster care, shift staff members are considered caregivers providing the daily parenting for the child.</p> <p>Qualified Residential Treatment Programs (QRTPs)</p> <p>When a child is placed in a foster care setting (corporate child foster care) and the setting is also a QRTP, the placing agency and setting must follow</p>

	<p>all placement requirements under Minn. Stat. §260C.70 – 260C.714.</p> <p>When a child turns 18</p> <p>If a child is in a foster care setting on their 18th birthday, they might be eligible for foster care maintenance payments until they are age 21 (also referred to as “extended foster care”). Foster care maintenance payments are determined using the same rates and processes as children younger than age 18. When a person is eligible for extended foster care, the lead agency may authorize child community residential services or family residential services until the person is no longer determined eligible for extended foster care. For more information, refer to DHS – Extended foster care to age 21.</p> <p>If a child in a foster care setting turns 18 and is not eligible for extended foster care, the waiver service changes from child community residential services to adult community residential services.</p>
Funding	<p>When a child lives in a licensed foster care setting, regardless of the reason or legal authority, the lead agency must use the child foster care maintenance payment (including Title IV-E funds) before accessing waiver services. For more information, refer to CBSM – Funding for children in foster care settings.</p>