

4/17/25

Michaelene Colestock, Authorized Agent
ANEW LLC
4365 Oakmede Lane
White Bear Lake, MN 55110-7606

License Number: 1106031
Report: 202308587, 202308531

CORRECTION ORDER

Dear Michaelene:

On January 28, 29, 30, and 31, 2025, Department of Human Services (DHS) licensors conducted a licensing review and investigation at your facility (residential and non-residential), ANEW located at 445 Etna St Suite 55, Saint Paul, 55106-5747. This review was conducted to determine compliance with state and federal laws and rules governing the provision of Substance Use Disorder treatment under MN Statute, chapter 245G. As a result, DHS is issuing this order which requires you to take the correction action as described under each violation. Details of our findings are provided below. Our next steps and your options are also detailed.

LICENSING VIOLATIONS

DHS determined that your program failed to follow licensing rules and statutes, as described below.

Policies, Procedures, and Practices

1. **Violation:** The license holder did not meet requirements for receiving public funding reimbursement from the commissioner for services provided in the following ways:
 - a. The license holder did not offer required services to individuals with co-occurring mental health and substance use disorder as required in Minnesota Statutes, section 254B.05, subdivision 5, paragraph (c):
 - 1) Family education was not offered; and
 - 2) Co-occurring counseling staff did not receive eight hours of co-occurring disorder training annually; and
 - b. The license holder did not contain documentation that all services were provided in the amount and type that were billed for in the following:
 - 1) The license holder did not provide daily skilled treatment services per Minnesota Statutes, section 254B.05, subdivision 5, paragraph (b). Services were not provided on:
 - i. 11/2/24, 11/3/24, 12/14/24, 12/15/24, 1/18/25, 1/19/25 (client file numbered 1); and

- ii. 11/30/24, 12/1/24, 12/28/24, 12/29/24, 1/18/25, 1/19/25 (client file numbered 2); and
- 2) Treatment service documentation for 1/2/25 indicated 3 hours of group counseling were provided; however, the program billed 4 hours of treatment services (client file numbered 4); and

Statute Violated: Minnesota Statutes section 245A.167 and 245A.191.

Corrective Action Required: Immediately and on an ongoing basis, the license holder must ensure and document that services are provided in the amount and type for which they were billed. Additionally, the noncompliance identified above may result in nonpayment of claims submitted by the license holder for public program reimbursement; recovery of payments made for the service; disenrollment in the public payment program; or other administrative, civil, or criminal penalties as provided by law.

2. Violation: The license holder did not post or give to persons upon request the grievance procedure, and vulnerable adult maltreatment reporting policies as required.

Statute Violated: Minnesota statutes, sections 245A.65, subdivisions 1, paragraph (d), and 245G.15, subdivision 2.

Corrective Action Required: Immediately and on an ongoing basis, the license holder must ensure that the physical plant has all the required postings available.

3. Violation: The license holder did not ensure group counseling size met staff requirements. Group counseling attendance documentation for 1/30/25 indicated that 17 clients attended, exceeding the maximum requirement of 16 clients.

Statute Violated: Minnesota statutes, sections 245G.10, subdivision 4.

Corrective Action Required: Immediately and on an ongoing basis, the license holder must ensure staff requirements meet all applicable requirements.

4. Violation: The license holder grievance policy did not include the current telephone number and address of the Board of Behavioral Health and Therapy.

Statute Violated: Minnesota statutes, sections 245G.15, subdivision 2.

Corrective Action Required: Immediately and on an ongoing basis, the license holder must ensure that the grievance procedure meets all applicable requirements. Within 45 days of receipt of this order, submit a grievance procedure that meets requirements.

5. Violation: The license holder did not monitor the implementation of policies and procedures necessary to maintain compliance with licensing requirements. The policy and procedure manual did not contain the following:

- a. Definitions of maltreatment of vulnerable adults per 626.557, and internal primary and secondary person to report to the common entry point;
- b. Definitions of maltreatment of minors per 260E, and internal primary and secondary person to complete the internal review; and
- c. Current requirements for client assessments and treatment planning.

Statute Violated: Minnesota statutes, sections 245A.04 subdivision 14, paragraph (b).

Corrective Action Required: Immediately and on an ongoing basis, the license holder must ensure that the program's written policies and procedures meet all applicable requirements. Within 45 days of receipt of this order, submit the revised policies identified above that meet all applicable requirements.

6. Violation: The treatment services description did not meet requirements as follows:
 - a. Did not identify group counseling groups; and
 - b. Did not indicate which groups and topics a guest speaker can provide.

Statute Violated: Minnesota statutes, section 245g.12, paragraph (10).

Corrective Action Required: Immediately and on an ongoing basis, the license holder must ensure that treatment service descriptions meet all applicable requirements. Within 45 days of receipt of this order, submit a treatment service description that demonstrates compliance.

Personnel Files

7. Violation: Seven of seven personnel files reviewed for requirements governing background studies did not meet requirements. There was no documentation of:
 - a. Sufficient information, driver's license number or state identification number or acceptable form of identification as determined by the commissioner to ensure an accurate study (personnel files numbered 1 through 7); and
 - b. Date of first direct contact (personnel files numbered 4 and 5).

Statute Violated: Minnesota statutes, sections 245C.05, subdivision 1, and 245C.20, subdivision 1

Corrective Action Required: Immediately and on an ongoing basis, the license holder must ensure that background studies meet all applicable requirements.

8. Violation: Two of seven personnel files reviewed for requirements governing staff qualifications did not meet requirements in the following ways:
 - a. Recovery peer did not receive ongoing supervision by an alcohol and drug counselor (personnel file numbered 4); and
 - b. The supervising licensed alcohol and drug counselor for an individual with a temporary permit did not document the amount of supervision provided (personnel file numbered 6).

Statute Violated: Minnesota statutes, section 245G.11, subdivisions 8 and 11.

Corrective Action Required: Immediately and on an ongoing basis, the license holder must ensure that staff qualifications meet all applicable requirements.

9. Violation: Three of seven personnel files reviewed for requirements governing staff orientation did not meet requirements in the following ways:
- a. There was no documentation within 24 working hours of the following:
 - 1) Policies and procedures (personnel file numbered 5);
 - 2) Client confidentiality (personnel file numbered 4);
 - 3) Client needs (personnel files numbered 3, 4, and 5);
 - b. There was no documentation of orientation to the following:
 - 1) Internal policies and procedures related to the prevention and reporting of maltreatment of individuals receiving services (personnel files numbered 3);
 - 2) Maltreatment of minors (personnel files numbered 4 and 5); and
 - 3) Program abuse prevention plan (personnel files numbered 3, 4, and 5).

Statute Violated: Minnesota statutes, sections 245A.65, subdivision 3, 245G.13, subdivisions 1, paragraph (7), and 2, paragraph (e).

Corrective Action Required: Immediately and on an ongoing basis, the license holder must ensure that staff orientation meets all applicable requirements.

10. Violation: Seven of seven personnel files reviewed for requirements governing annual and additional trainings did not meet requirements. There was no documentation of the following:
- a. For calendar year 2024 (personnel files numbered 1, 2, 3, and 6):
 - 1) Mandated reporting;
 - 2) Release of information;
 - 3) Program abuse prevention plan;
 - 4) Internal prevention and reporting of maltreatment;
 - 5) Reporting of maltreatment of minors; and
 - 6) Reporting of prenatal exposure to controlled substances; and
 - b. Emergency overdose treatment (personnel files numbered 1 through 7).

Statute Violated: Minnesota statutes, sections, 245G.08, subdivision 3, and 245G.13, subdivision 2, paragraph (c).

Corrective Action Required: Immediately and on an ongoing basis, the license holder must ensure that annual personnel trainings meet all applicable requirements. Within 45 days of receipt of this order, submit documentation that the staff above received the required trainings.

11. Violation: Three of seven personnel files reviewed for requirements governing personnel file contents did not meet requirements. There was no documentation of the following:
 - a. Completed application for employment signed by personnel (personnel files numbered 5 and 6); and
 - b. A written job performance evaluation for calendar year 2023 (personnel file numbered 1).

Statute Violated: Minnesota statutes, section 245G.13, subdivisions 1, and 3.

Corrective Action Required: Immediately and on an ongoing basis the license holder must ensure personnel file contents meet all applicable requirements.

Client Files

Client files reviewed are identified in the following manner:

- Client files numbered 1, 2, 5, 6, and 7 (residential)
- Client files numbered 3 and 4 (non-residential)

12. Violation: One of four client files reviewed for requirements governing treatment service documentation (client file numbered 4) did not meet requirements. Treatment service documentation for September 21, 2024, was not completed within seven days of providing the treatment service.

Statute Violated: Minnesota statutes, section 245G.06, subdivision 2a.

Corrective Action Required: Immediately and on an ongoing basis, the license holder must ensure documentation of treatment services meet all applicable requirements.

13. Violation: Five of seven client files reviewed for requirements governing client rights protection and client orientation (client files numbered 1 through 5) did not meet requirements. The documentation of the following was not reviewed with nor provided to the clients on the day of service initiation:
 - a. Client bill of rights;
 - b. Staff reviewed the rights with the client;
 - c. Program abuse prevention plan;
 - d. Grievance procedure;
 - e. Maltreatment of vulnerable adults;
 - f. Opioid use disorder educational information; and
 - g. Consent to the disclosure of suspected maltreatment from the client.

Statute Violated: Minnesota statutes, sections 245G.09, subdivision 3, paragraph (1), 245A.19, paragraph (b), 245A.65, subdivision 1, paragraph (c), 245G.05, subdivision 3, paragraph (b), and 245G.15, subdivisions 1 and 2.

Corrective Action Required: Immediately and on an ongoing basis, the license holder must ensure client rights protection meets all applicable requirements.

14. Violation: Six of seven client files reviewed for requirements governing initial service plans (ISP) and vulnerable adult determination did not meet requirements in the following ways:
- a. The ISP was not person centered and client specific (client files numbered 1 through 5 and 7; and
 - b. The vulnerable adult determination did not indicate whether or not the client was a vulnerable adult per 626.5572, subdivision 21 (client files numbered 3 and 4).

Statute Violated: Minnesota statutes, sections 245A.54, subdivision 1a, 245G.04, subdivisions 1, 2, paragraph (a), and 245G.09, subdivision 3, paragraph (2).

Corrective Action Required: Immediately and on an ongoing basis, the license holder must ensure initial service plans and vulnerable adult assessment meet all applicable requirements. Within 45 days of receipt of this order, submit two initial service plans and vulnerable adult assessment that meets requirements.

15. Violation: Four of four files reviewed for requirements governing individual abuse prevention plans (IAPP) did not meet requirements in the following ways:
- a. IAPP did not include an assessment of the person's susceptibility to abuse by other individuals, including other vulnerable adults and self-abuse (client files numbered 1, 2, 5, and 7);
 - b. IAPP did not include an assessment of the person's risk of abusing other vulnerable adults (client files numbered 1, 2, 5, and 7);
 - c. IAPP did not include statements of the specific measures to be taken to minimize the risk of abuse to the vulnerable adult and other vulnerable adults when the individual assessment indicates the need for measures in addition to the specific measures identified in the program abuse prevention plan (client files numbered 1, 2, and 7);
 - d. IAPP did not include specific actions the program will take to minimize the risk of abuse within the scope of the licensed services (client files numbered 1, 2, 5, and 7); and
 - e. IAPP did not include measures to be taken to minimize the risk that the vulnerable adult might reasonably be expected to pose to visitors to the facility and persons outside the facility, if unsupervised (client files numbered 1 and 2).

Statute Violated: Minnesota statutes, sections 245A.65, subdivision 2, paragraph (b).

Corrective Action Required: Immediately and on an ongoing basis, the license holder must ensure IAPP meet all applicable requirements. Within 45 days of receipt of this order, submit two IAPP documents that meet requirements.

16. Violation: Six of seven client files reviewed for requirements governing comprehensive assessments did not meet requirements. There was no documentation of the following:
- a. Comprehensive assessment (CA) completed by the fifth day on which a treatment service is provided (client files numbered 1 and 2);

- b. Person-centered reason for delay and the planned completion date (client files numbered 1, 2, and 3);
- c. A review and update of the CA was not completed, signed, and dated within 5 days (client file numbered 3);
- d. CA did not include the following information:
 - 1) Client's current living situation including housing status and household members (client file numbered 7);
 - 2) Status of the client's basic needs (client files numbered 1, 5, and 7);
 - 3) Client's periods of abstinence (client file numbered 7);
 - 4) Important developmental incidents in the client's life (client files numbered 1, 5, and 7);
 - 5) Client's history of brain injuries (client file numbered 5);
 - 6) Client's family health history (client files numbered 1, 5, and 7);
 - 7) Recommendation for ASAM level of care (client file numbered 1 and 5); and
 - 8) Current opioid education material (client file numbered 5).

Statute Violated: Minnesota Statutes, sections 245G.05, subdivisions 1 and 3, and 245I.10, subdivision 6, paragraphs (b) and (c).

Corrective Action Required: Immediately and on an ongoing basis, the license holder must ensure comprehensive assessments meet all applicable requirements. Within 45 days of receipt of this order, submit a comprehensive assessment that meets requirements.

17. **Violation:** Six of six client files reviewed for requirements governing individual treatment plans (ITP) did not meet requirements. There was no documentation of the following:
- a. ITP did not include how the family or others will be involved in the client's treatment nor reasons family and other natural supports weren't involved (client files numbered 1 through 4);
 - b. Culturally appropriate planning process that allows the client's family and other natural supports to observe and participate in the client's individual treatment services, assessments, and treatment planning (client files numbered 1, 2, 3, and 4);
 - c. A schedule for accomplishing the client's treatment goals and objectives (client files numbered 1, 2, and 5);
 - d. ASAM level of care identified in section 254B.19, subdivision 1 (client files numbered 1, 2, 3, 4, 5, and 7); and
 - e. Participants involved in the client's treatment planning (client files numbered 1, 2, 3, 4, 5, and 7).

Statute Violated: Minnesota statutes, sections 245G.06, subdivisions 1, 1a, and 245G.09, subdivision 3, paragraph (5).

Corrective Action Required: Immediately and on an ongoing basis, the license holder must ensure individual treatment plans meet all applicable requirements. Within 45 days of receipt of this order, submit an individual treatment plan that meets requirements.

18. Violation: Four of seven client files reviewed for requirements governing client record documentation did not meet requirements in the following ways:
- a. Client record dated 9/21/24 was not signed within seven days of providing the treatment service (client file numbered 4);
 - b. Client record did not contain documentation of medical and other appointments the client attended on 1/14/25 and 1/15/25 (client file numbered 1);
 - c. Client record did not contain documentation of concerns related to attendance for treatment services, including the reason for any client absence from the treatment service for the following :
 - 1) 11/2/24, 11/3/24, 12/14/24, 12/15/24, 1/18/25, and 1/19/25 (client file numbered 1); and
 - 2) 11/30/24, 12/1/24, 12/28/24, 12/29/24, 1/18/25, and 1/19/25 (client file numbered 2); and
 - d. Client record dated 12/9/24 did not include staff signature (client file numbered 5).

Statute Violated: Minnesota statutes, section 245G.06, subdivisions 2a and 2b.

Corrective Action Required: Immediately and on an ongoing basis, the license holder must ensure client record documentation meet all applicable requirements. Within 45 days of receipt of this order, submit documentation that demonstrates compliance.

19. Violation: Six of seven client files reviewed for requirements governing treatment plan reviews did not meet requirements. There was no documentation of the following:
- a. The span of time covered by the review for treatment plan reviews dated:
 - 1) 9/11/24 (client file numbered 3);
 - 2) 9/26/24 (client file numbered 4);
 - 3) 11/27/24, 12/11/24, 12/23/24, 1/9/25, and 1/24/25 (client file numbered 5); and
 - 4) 12/16/25 and 12/30/25 (client file numbered 7); and
 - b. Updates of any physical and mental health problems for treatment plan review dated 12/16/24 (client file numbered 7);
 - c. Participation of others involved in the individual's treatment planning, including when services are offered to the client's family or significant others for treatment plan reviews dated:
 - 1) 11/8/24 (client file numbered 1);
 - 2) 9/11/24 (client file numbered 3);
 - 3) 9/26/24 (client file numbered 4);
 - 4) 11/27/24, 12/11/24, 12/23/24, 1/9/25, and 1/24/25 (client file numbered 5); and
 - 5) 12/16/25 and 12/30/25 (client file numbered 7); and
 - d. Changes to the treatment plan determined to be necessary and whether the client agrees with the change for treatment plan reviews dated:
 - 1) 12/13/24 (client file numbered 1); and
 - 2) 12/21/24 (client file numbered 4).

Statute Violated: Minnesota statutes, section 245G.06, subdivision 3.

Corrective Action Required: Immediately and on an ongoing basis, the license holder must ensure treatment plan reviews meet all applicable requirements. Within 45 days of receipt of this order, submit a treatment plan review that demonstrates compliance.

20. Violation: Three of six client files reviewed for requirements governing medication administration did not meet requirements. There was no documentation of client's use of medication including staff signatures with date and time:
- a. Quetiapine on 1/14/25 (client file numbered 2);
 - b. Polyethylene glycol on 11/16/24 (client file numbered 5);
 - c. Buspar on 1/8/25 (client file numbered 7); and
 - d. Melatonin 3mg PRN was not on MAR when prescribed on 11/19/24 (client file numbered 7).

Statute Violated: Minnesota Statutes, section 245G.08, subdivision 5, paragraph (c).

Corrective Action Required: Immediately and on an ongoing basis, the license holder must ensure that medication administration meets all applicable requirements.

21. Violation: Six of seven client files reviewed for requirements governing record keeping requirements did not meet requirements. There was no documentation of staff signature with date for the following:
- a. Simple group notes dated:
 - 1) 11/5/24 (client file numbered 1);
 - 2) 4/30/24 and 9/10/24 (client file numbered 3); and
 - 3) 6/4/24 (client file numbered 4); and
 - b. GAIN-SS (client files numbered 5 and 7).

Statute Violated: Minnesota Statutes, section 245G.09, subdivision 1, paragraph (a).

Corrective Action Required: Immediately and on an ongoing basis, the license holder must ensure that record keeping meets all applicable requirements.

Written Response Required

If you fail to correct the violation(s) specified in the Correction Order within the prescribed time lines the Commissioner may issue an Order of Conditional License or may impose a fine and order other licensing sanctions pursuant to Minnesota Statutes, sections 245A.06 and 245A.07.

Submissions required as part of the corrective action ordered must be sent to your licensor by email at david.her@state.mn.us or by mail:

Commissioner, Department of Human Services
ATTN: David Her
Licensing Division
PO Box 64242
St. Paul, MN 55164-0242

YOUR RIGHT TO REQUEST RECONSIDERATION

You have the right to request reconsideration of this order and the cited violations. Your request must:

- Be in writing
- List each violation you are challenging and identify what is inaccurate or incomplete about the information in the order
- Supply information that is accurate or more complete
- Be made before the deadlines provided below

If you are mailing your request, it must be received by DHS within 20 calendar days from when you received this order. If you do not meet this deadline, you lose your right to request reconsideration. The timeline to appeal began when you received this order. Please send it to:

Office of Inspector General
Legal Counsel's Office
Attn: Licensing Legal Unit
PO Box 64953
St. Paul, MN 55164-0953

If your request is being personally delivered, it must be received by DHS within 20 calendar days from when you received this order. Please bring it to:

Commissioner, Department of Human Services
Office of Inspector General, Legal Counsel's Office - Licensing
444 Lafayette Road North
St. Paul, MN 55155

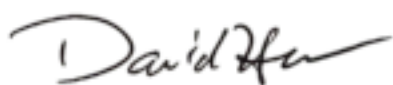
Legal authority

This action is taken under Minnesota Statutes, section 245A.06, subdivision 1. The timeline to request reconsideration of the order is provided in Minnesota Statutes, section 245A.06, subdivision 2.

Questions

If you have any further questions regarding this matter, you may contact me at 651-431-7229 or at david.her@state.mn.us.

Sincerely,



David Her, Licensor
Licensing Division
Office of Inspector General