

May 1, 2023

Re: SF 2934-3 / UES2934-2

To: Members of the Human Services Conference Committee



Chair Noor, Chair Hoffman, and Conference Committee Members,

Thank you for the work you have done this session to bring attention to the many complex issues impacting Minnesotans with disabilities statewide. We see many provisions included in the omnibus bills that will be directly beneficial to people with disabilities. We are grateful for the opportunity to provide input as you work on a conference committee report. Below are provisions of support that we would like to bring to your attention:

Provisions of support in both House and Senate omnibuses:

- **Changes to the Personal Care Assistance (PCA) program to allow PCAs to drive** (House Article 1, Sections 15-16, 18-19; Senate Article 1, Sections 12-15): This small change will have a major impact on the lives of people with disabilities who access PCA services, as it will enhance and expand access to their communities.
- **Meaningful changes to rates for the Disability Waiver Rate System (DWRS)** (House Article 1, Sections 27, 29, 31-32, 36 ; Senate Article 1, Sections 26-27, 29-35), **PCA/Community First Services and Supports (CFSS)** (House Article 1, Section 37; Senate Article 1, Section 47), **home health aid and home care nursing** (House Article 1, Section 58; Senate Article 1, Section 46): We need to address the direct care workforce shortage from all angles, which includes rate increases, so that we can better retain the dedicated professionals who work in this field. Many DWRS services, PCA/CFSS, and home care services are critical to supporting people to live in their own homes. However, the direct care staffing shortage has made this increasingly difficult for Minnesotans with disabilities. Many face a difficult choice of living in their own homes, in their communities, or moving to more restrictive, expensive settings to get their basic needs met. Much of this is due to the critical direct care shortage. Investments in rate increases that boost wages are one important part of the solution to make sure people have true informed choice in where they live. We support the Senate position on DWRS rate investment and home health aid and home care nursing rates. We support the House position for PCA rate investment.
- **Home and Community-Based Services (HCBS) Workforce Incentive Grants Program** (House Article 1, Section 42; Senate Article 1, Section 9): One factor contributing to the workforce shortage is the lack of benefits for people working in these critical roles. People in direct support positions deserve to be valued for their important work, and incentives for the direct care workforce are another important part of the solution.
- **Budget increase for Consumer-Directed Community Supports (CDCS)** (House Article 1, Section 47; Senate Article 1, Section 53): Since its inception, funding for people accessing the CDCS option has been historically lower than people accessing traditional waiver options. This institutional bias in our Medicaid system has made it more challenging for people accessing

CDCS to purchase the goods and services they want and need. Budget increases will help them to pay their direct care workers higher wages, remain in their homes with the self-directed supports they choose, and purchase other goods and services that contribute to their quality of life.

- **Direct Care Service Corps Pilot Project** (House Article 8, Section 2; Senate Article 1, Section 54): This provision provides a creative solution to help raise awareness about and bring more young professionals into this critical workforce.
- **Development of Life-Sharing Services** (House Article 1, Sections 7, 26, 28-30, 33-34, 62; Senate Article 1, Section 64): This is an innovative and transformative way to ensure people with disabilities can be in their communities, building natural supports. We support the Senate language to strengthen the reimbursement model in consultation with providers, people with disabilities, advocacy organizations, and lead agencies.

Provisions of support in the Senate omnibus:

- **Reform to Medical Assistance for Employed Persons with Disabilities (MA-EPD)** (Article 3, Sections 2-4): We support this long overdue reform that will help remove barriers to employment for people with disabilities. This is a smart and transformative change that will help more people with disabilities find and keep employment.
- **Elimination of parental fees for MA** (Article 3, Sections 1 and 12): We believe the state policy of imposing fees on parents of children with disabilities acts as an added tax on many families who are already struggling with the challenging decision of getting their children services and supports that can help them thrive, or paying for ever-increasing family expenses like mortgage, car payment, and even groceries. We support the elimination of parental fees for MA.
- **Increase in the MA income standard** (Article 2, Section 14): Increasing the income standard will help end the cycle of poverty so many people with disabilities face while accessing MA.
- **Lifting the 40-hour cap for parents of minors and spouses** (Article 1, Sections 21, 45-46): To help promote natural supports, create more robust networks of support in people's lives, and address the disability services workforce crisis, we must maximize the caregivers who are in people's lives – including parents and spouses. This allowance was a major benefit to people with disabilities and their family members during the height of COVID, and we urge the state to make this a permanent policy of the state, especially as COVID flexibilities phase out.
- **Expansion of shared services** (Article 1, Sections 62-63): This is a workforce shortage solution that is cost-effective and uses less staff to support more people, while upholding the informed choice and autonomy of people with disabilities. We are hopeful that the conference committee will work to adopt the full proposal and updated language included in HF 716 / SF 654.
- **More access to Supported Decision Making** (Article 1; Sections 10 and 60): Several years ago, Minnesota made historic changes to our guardianship law, which promoted the self-direction

and civil rights of people who are subject to guardianship. With this proposal included in the Senate omnibus, we can work to ensure that more people have access to Supported Decision Making, through critical investments in nonprofits and lead agencies who can help people explore this option in their lives.

- **Provider capacity grants for rural and underserved communities** (Article 1, Section 7): We support investments in areas that have been historically underfunded or disproportionately impacted by challenges in this sector, to ensure all Minnesotans with disabilities have access to the supports and services they want and need.
- **Establishment of a new MA reimbursement calculation for enteral nutrition and supplies** (Article 3, Section 13): We support ensuring more access to critical care supplies, and these changes would benefit many Minnesotans with disabilities who get their nutrients and medication through enteral access devices.
- **Increases to Non-Emergency Medical Transportation (NEMT) rates and ambulance services** (Article 3; Sections 5-6): Transportation barriers are one of the most common issues we hear from our stakeholders. NEMT services are especially essential in greater Minnesota, and we support investment in the base and fuel rate increases.

A top priority in the House omnibus:

- The historic proposal to **phase out the use of subminimum wage in Minnesota** (Article 1, Sections 1, 10-12, 24-25, 53-55): Ending this antiquated practice will benefit all of Minnesota, but especially people with disabilities. Not only is it a civil rights violation that has gone on for too long, but it has kept people with disabilities segregated and created inequities in the workforce for all people with disabilities—not just those who are paid subminimum wages. With a bipartisan federal bill on the horizon, we urge conferees to include the House proposal in the conference committee report so that we can be prepared as a state. We are uniquely positioned this session to implement a comprehensive, thoughtful transition that the rest of the country can look to as an example on how to do it right. The time is now.

We look forward to continued collaboration as you work to pass bills that have a positive impact on the lives of your constituents with disabilities and Minnesotans with disabilities across the state. Thank you for the work you have done so far this session.

Sincerely,

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