

Dear Chair Schomacker & Committee Members,

I strongly oppose Waiver Reimagine. This plan eliminates critical waiver options, restricts provider choice, and forces individuals with disabilities into more costly congregate institutional settings. Waiver Reimagine directly contradicts the ADA integration mandate and Minnesota's Olmstead Plan, which prioritize community-based services and individual choice. This policy is a step backward for disability rights and must be reconsidered.

My child depends on having choices within her waiver for the support and services that she needs to remain cared for safely in her own home instead of a facility. My child was approved for a CAC waiver in Hennepin county, but St. Louis county refuses to assess the same needs even with no improvement in medical conditions. This led to an already reduced budget to work with in hiring her a nurse or any support staff, as a single parent this is very difficult. Waiver reimagine further puts my family in a severe crisis by not meeting the needs to keep my child living in her home. The cost of providing her care within our home instead of a facility drastically reduces the state's costs and is of benefit to my child.

I urge you to intervene on behalf of Minnesotans with disabilities by supporting House File 2038 and Senate File 2215. These bills will establish a Waiver Reimagine Task Force and ensure that budgets are based on an individual's needs rather than their living situation. Protecting choice, independence, and equitable funding is essential to upholding disability rights.

Please take action to prevent the harm Waiver Reimagine will cause. Thank you for your time and your commitment to the disability community.

Respectfully,

Misty Dippolito
PO Box 17370 Box 3941
St. Paul, MN 55811
785-221-4691
misty.dippolito@gmail.com

Fierce Child and Elder Advocate
Independent Community Advocate

*"I am beautiful, I am smart, I can do it, don't oppress me,
educate me." ~ Grace Hurtado*

Dear Chair Schomacker & Committee Members,

My name is Keith Pierce, and I strongly oppose the Waiver Reimagine plans and Governor Walz's intention to cut waiver funding.

The CADI waiver has given me the tools to live more independently. Access to adaptive containers allows me to feed myself, specialized computer equipment connects me with my community online, and the healthcare services I receive are vital to my ability to live a productive and successful life. These supports bridge the gap, making it possible for me to contribute to society. Without them, my independence and future would be severely limited.

These proposed changes eliminate critical waiver options, restrict provider choice, and force individuals with disabilities into more costly congregate institutional settings. This directly contradicts the ADA integration mandate and Minnesota's Olmstead Plan, which prioritize community-based services and individual choice. These policies are a step backward for disability rights and must be reconsidered.

Sincerely,

Keith Pierce

651-208-7021

Dear Chair Schomacker & Committee Members,

I strongly oppose Waiver Reimagine Plans and Gov Walz intention to cut waiver funding.

These plans eliminate critical waiver options, restrict provider choice, and forces individuals with disabilities into more costly congregate institutional settings and directly contradicts the ADA integration mandate and Minnesota's Olmstead Plan, which prioritize community-based services and individual choice. These policies are a step backward for disability rights and must be reconsidered.

My son is now 18 years old but has been disabled because of mental health since he was about six years old. For many years I struggled with finding him the services that he needed and tried to hold down a full-time job while also taking care of his needs, it was an endless battle. One day a crisis team came to my home and one of the workers was a mom that had a child with the same needs mine had. She informed me of the waiver programs available and that started my journey to finally being able to successfully help my child like I was never able to before. Now nearly twelve years later I have a ten-year-old that also struggles with a mental health disability. Without proper and adequate waiver funding she would not get what she needs to be able to thrive in the community and in school like she is able to today. I never want myself or anyone else to ever feel like I felt nearly twelve years ago when everything in the world felt so hopeless and all I wanted to do was be able to help my disabled child. Even more so today I have two family members that are relying on waivers in their everyday life, I do not want that minimized or taken away from them or anyone.

I urge you to intervene on behalf of Minnesotans with disabilities by supporting House File 2038 and Senate File 2215. These bills will establish a Waiver Reimagine Task Force that will ensure budgets are based on an individual's needs rather than their living situation. Protecting choice, independence, and equitable funding is essential to upholding disability rights.

Please take action to prevent the harm Waiver Reimagine will cause. Thank you for your time and your commitment to the disability community.

Sincerely,
Allison Shearer
2405 Jaber Avenue NE
Saint Michael, MN 55376
(612) 991-9391
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Packet 1:

Submitted to the Minnesota House Human Services Finance and Policy Committee Hearing –
March 19, 2025

Subject: The Need for Financial Oversight in Waiver Reimagine – Request for the Passage of
HF 2038 & SF 2215

(Attached: Evidence Dossier on Waiver Reimagine and CDCS Unbundling)

Dear Chair Schomacker and Committee Members,

I submit this testimony today as a national expert in Medicaid waivers and disability policy, advocating for fiscal responsibility, transparency, and oversight in the implementation of Waiver Reimagine and CDCS Unbundling. My attached evidence dossier submitted to SF 2215 last week provides clear documentation of how DHS has engaged in financially reckless policy implementation, erased public records linking CDCS Unbundling and Mnchoices 2.0 revision to Waiver Reimagine, and circumvented legislative oversight to continue implementation under new branding.

DHS's actions have already resulted in increased Medicaid spending, financial burdens on counties, and a significant risk of federal penalties and lawsuits. Without intervention, these failures will escalate, creating unnecessary taxpayer liabilities that could have been prevented with appropriate fiscal oversight.

For these reasons, I urge the immediate passage of HF 2038 and SF 2215, which would provide the legislative oversight necessary to prevent further financial mismanagement and harm.

I. Why Passing HF 2038 & SF 2215 is the Only Financially Responsible Path Forward

While there has been discussion about whether additional oversight is necessary, HF 2038 and SF 2215 are the only real solutions to ensure fiscal responsibility and prevent further financial crises for the state of Minnesota.

1. HF 2038 & SF 2215 Establish True Legislative Oversight—WRAC Cannot

- The Waiver Reimagine Advisory Committee (WRAC) is not an oversight body—it is a DHS-controlled advisory group with no financial auditing authority.

- HF 2038 and SF 2215 would create a legislative task force with the authority to demand fiscal transparency, conduct audits, and prevent reckless spending.

2. These Bills Prevent Unchecked Medicaid Cost Growth

- **National data show that states implementing Medicaid waiver overhauls consistently exceed budget projections by at least 40%. ([San Francisco Chronicle](#), [Manhattan Institute](#))**

- HF 2038 & SF 2215 will require real cost-benefit analysis before allowing further implementation of Waiver Reimagine, preventing Minnesota from falling into the same fiscal pitfalls as other states.

3. These Bills Ensure Counties and Local Governments Are Not Left with the Bill

- MnCHOICES 2.0 and CDCS Unbundling have created an unfunded mandate, requiring counties to absorb additional administrative burdens without additional state funding.

- HF 2038 and SF 2215 would provide a framework to track and prevent further cost shifts to counties, ensuring that Minnesota does not push state expenses onto local governments.

4. They Will Help Avoid Future Federal Lawsuits and Penalties

- Minnesota has already been forced to repay \$113 million for past DHS Medicaid mismanagement—how much more can we afford to lose?

- **By ensuring services are compliant with federal parity laws, Olmstead mandates, and Medicaid regulations, HF 2038 and SF 2215 will help protect Minnesota from DOJ investigations, lawsuits, and potential loss of federal funding.**

✓ Key Takeaway: Failing to pass HF 2038 and SF 2215 is a financial gamble that Minnesota cannot afford. We ask Legislators to act now to pass these bills to protect the state's financial health and prevent long-term budget shortfalls.

II. Legislative Actions Needed to Prevent Fiscal Catastrophe

Given DHS's repeated financial mismanagement and lack of transparency, legislative oversight is imperative.

I urge the Finance Committee to take the following actions:

1. Pass HF 2038 and SF 2215 to establish an independent financial oversight task force.

- This task force must have independent auditors and financial experts—not DHS personnel—reviewing all projected and actual budget impacts.

2. Require DHS to immediately release all fiscal data, budget projections, and CMS communications related to MnCHOICES and CDCS budget reductions.

- DHS must demonstrate the financial impact of these policies with real data, not misleading projections.

3. Conduct a full cost-benefit analysis before proceeding with further implementation of Waiver Reimagine.

- The Finance Committee should assess the full financial and ethical risks of increased institutionalization before allowing DHS to continue restricting home-based services.

4. Implement a forensic audit of DHS's Medicaid spending and policy decisions.

- The Legislature should determine how much taxpayer money has already been misallocated due to DHS's lack of oversight and prevent further waste.

III. Conclusion – We Ask The Finance Committee to Act to Protect Minnesota's Budget

DHS has:

✓ Failed to provide accurate financial data

✓ Avoided legislative oversight on major budgetary and decisions

✓ Implemented policies that will drastically increase state and county Medicaid costs

We Ask Legislators to act now to prevent:

✗ Unnecessary institutional placements that cost taxpayers millions

✗ Unfunded county mandates that shift costs away from the state onto local governments

✗ Future federal penalties and lawsuits that could further drain state resources

Minnesota taxpayers deserve transparent, evidence-based policy—not financial recklessness.

I strongly urge the House Human Services Finance and Policy Committee to pass HF 2038 and SF 2215 to restore fiscal accountability and prevent further financial harm to both the state and vulnerable Minnesotans.

Sincerely,

Grace Howard

National Expert in Medicaid Waivers & Disability Policy

Howardg393@gmail.com

(Attached: Packet 2 Evidence Dossier on Waiver Reimagine and CDCS Unbundling)

Packet 2: Evidence Dossier Resubmission

March 11, 2025

Senator John Hoffman, Chair
Senator Jim Abeler, Minority Leader
Members of the Senate Human Services Committee
2111 Minnesota State Senate Building
Saint Paul, MN 55155

****RE: Evidence Supporting the Need for Legislative Oversight of Waiver Reimagine (SF 2215)****

Dear Chair Hoffman, Lead Abeler, and Members of the Senate Human Services Committee:

I am submitting this evidence dossier for the official record in support of Senate File 2215, which establishes a Legislative Task Force on Waiver Reimagine and provides critical oversight of fundamental changes to Minnesota's disability waiver system.

CDCS Unbundling Project Components of Waiver Reimagine – Evidence Dossier

1. Executive Summary

The Consumer Directed Community Supports (CDCS) unbundling project is a major policy change initiated by the Minnesota Department of Human Services (DHS). Initially, DHS linked this project directly to Waiver Reimagine, but later removed references to that connection.

This evidence dossier demonstrates:

- How CDCS unbundling was initially introduced as part of the Waiver Reimagine initiative.
- How DHS removed references linking CDCS unbundling to Waiver Reimagine in later documents.
- Evidence that DHS is engaging in obfuscation and non-committal language to prevent transparency.
- Wayback Machine DHS website archive comparisons proving that references to Waiver Reimagine were removed from DHS communications.

This document compiles direct statements, archived web evidence, and screenshots proving that DHS originally presented CDCS unbundling as a phase of Waiver Reimagine, only to later delete that information and claim no connection exists.

The pattern demonstrated in this evidence dossier is precisely why SF 2215 is necessary. Without the Legislative Task Force and required transparency, fundamental changes to disability services will continue to be implemented without proper oversight, harming thousands of Minnesotans with disabilities and putting the state at further legal risk for Olmstead violations.

I respectfully urge your support for SF 2215.

Sincerely,

Grace Howard
Howardg393@gmail.com

Enclosure: CDCS Unbundling Components of Waiver Reimagine Evidence Dossier

1. Executive Summary

The Consumer Directed Community Supports (CDCS) unbundling project is a major policy change initiated by the Minnesota Department of Human Services (DHS). Initially, DHS linked this project directly to Waiver Reimagine, but later removed references to that connection.

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2. Timeline of Key Events

Date	Event	Evidence Source
2019–2021	Waiver Reimagine Phase II planning begins. CDCS unbundling is proposed as part of system modernization.	Legislative directive (2019), DHS Waiver Reimagine overview.
Spring 2022	DHS formally introduces CDCS unbundling as part of Waiver Reimagine. The timeline states unbundling will be implemented in phases.	DHS Waiver Reimagine documents, archived CDCS updates.
June 2022 – 2023	CMS approval process for Minnesota’s Medicaid waiver changes.	DHS communications (early CDCS newsletters).
Nov 5, 2024	DHS publicly announces CDCS unbundling rollout starting Feb 1, 2025. At this time, the policy is still linked to Waiver Reimagine.	DHS bulletin and county communications.
Dec 10, 2024	DHS releases an e-list bulletin announcing the rolling implementation of CDCS unbundling, still mentioning its broader purpose.	DHS email archives, county newsletters.
Feb 1, 2025	CDCS unbundling implementation begins. Plans will be transitioned at each participant’s next assessment. At this stage,	New CDCS manual and policy documents, changes in DHS website.

DHS begins quietly removing references to Waiver Reimagine from public guidance.

March 2025

DHS deletes all references connecting CDCS unbundling to Waiver Reimagine. The CDCS manual no longer mentions that unbundling was part of the waiver transition.

Wayback Machine archive evidence proving the removal.

3. Key Evidence and Findings

A. Direct Statements from DHS Connecting CDCS Unbundling to Waiver Reimagine

DHS communications originally stated that unbundling was a planned step within Waiver Reimagine:

 Archived DHS E-list Announcement (Dec 10, 2024):

“As part of the continued modernization of waiver services under Waiver Reimagine, the department will implement the CDCS unbundling project to clarify categories and align services with federal expectations.”

 DHS Public Bulletin (Nov 5, 2024):

“The CDCS unbundling project is part of our long-term strategy to ensure service flexibility under the Waiver Reimagine initiative.”

These statements prove that DHS originally acknowledged the direct connection between CDCS unbundling and Waiver Reimagine.

B. DHS Removed References to This Connection in 2025

Later DHS communications delete references to Waiver Reimagine, instead framing unbundling as an independent project with no connection to previous waiver reforms.

 Current DHS Manual (March 2025, Updated Page):

“CDCS unbundling is an effort to improve service clarity. This change was made to better categorize spending under Minnesota’s existing CDCS framework.”

The comparison below (Wayback Machine evidence) shows that references to Waiver Reimagine were removed.

Timeline Links for CDCS Unbundling Evidence Dossier

2019-2021: Waiver Reimagine Phase II Planning

- Legislative directive (2019): <https://www.revisor.mn.gov/laws/2019/1/Session+Law/Chapter/9/>
- DHS Waiver Reimagine overview:
<https://mn.gov/dhs/partners-and-providers/news-initiatives-reports-workgroups/long-term-services-and-supports/waiver-reimagine/>
- DHS-7841B-ENG (Jan 2021): <https://edocs.dhs.state.mn.us/lfserver/Public/DHS-7841B-ENG>
(This is the legislative report in your documents)

Spring 2022: DHS Formally Introduces CDCS Unbundling

- Archived DHS Waiver Reimagine page (Spring 2022):
https://web.archive.org/web/20220501000000*/https://mn.gov/dhs/partners-and-providers/news-initiatives-reports-workgroups/long-term-services-and-supports/waiver-reimagine/
- DHS Bulletin #22-56-01 (Check MN DHS Bulletins archive)

June 2022 - 2023: CMS Approval Process

- Minnesota 1915(c) Waiver Application:
<https://www.medicaid.gov/medicaid/section-1115-demo/demonstration-and-waiver-list/Waiver-Descript-Factsheet/MN>
- DHS Provider Update Communications: <https://mn.gov/dhs/partners-and-providers/news/>

Nov 5, 2024: DHS Public Announcement of CDCS Unbundling

- DHS Bulletin announcing implementation:

<https://mn.gov/dhs/partners-and-providers/policies-procedures/bulletins-and-action-requests/>
(Search for bulletin dated Nov 5, 2024)

- County communication:

<https://mn.gov/dhs/partners-and-providers/policies-procedures/adult-services/county-communications/>

Dec 10, 2024: DHS E-list Bulletin

- DHS E-list archive: <https://public.govdelivery.com/accounts/MNDHS/subscriber/new> (Search for communications dated Dec 10, 2024)

- Wayback Machine capture of DHS E-list:

https://web.archive.org/web/*/https://mn.gov/dhs/general-public/publications-forms-resources/e-mail-subscriptions/

Feb 1, 2025: CDCS Unbundling Implementation

- New CDCS Manual:

https://www.dhs.state.mn.us/main/idcplg?IdcService=GET_DYNAMIC_CONVERSION&RevisionSelectionMethod=LatestReleased&dDocName=id_002412

- Policy Implementation Guidance:

<https://mn.gov/dhs/partners-and-providers/policies-procedures/>

March 2025: DHS Deletes References

- Current DHS page (March 2025):

<https://mn.gov/dhs/partners-and-providers/news-initiatives-reports-workgroups/long-term-services-and-supports/cdcs-unbundling/>

- Wayback Machine comparison (showing deleted content):

<https://web.archive.org/web/diff/20240201000000/20250301000000/https://mn.gov/dhs/partners-and-providers/news-initiatives-reports-workgroups/long-term-services-and-supports/cdcs-unbundling/>

11:41



moving through the legislature. It is an effort to help with the workforce shortage. It proposes lifting the ceiling of 40 hours based on county approval etc.

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COMING SOON...

Unbundling of CDCS Services:

The CDCS service categories will be changing, in preparation for Waiver Reimagine. CDCS will change from having 4 categories, to having the following 8 categories: (We expect that a NEW CDCS plan will be created to reflect these changes)

- FMS services---Support Planning---Environmental Mods/Home Mods---Environmental Mods/Vehicle mods---Individual Directed Goods and Services---Personal Assistance---Treatment and Training---Community Integration and Support

Transition begins June 2022 or upon federal approval and DHS system updates (or 180 days following fed approval).

Must transition at renewal and all transitioned by December 2023. (Subject to change)

DHS will notify all participants of this change and guidance to lead agencies on how to make these changes.

Minimum wage increase: Effective July 1, 2022, minimum wage will increase again to \$15.25.

EVV Update: Electronic Visit Verification (EVV) language was signed into federal legislation in December 2016. The federal government will soon require FMS providers to use electronic visit verification systems to document that people are receiving the services that are billed to the state. This means that staff will need to use this system to track/document:

- Type of service performed
- Who received the service
- Date of service
- Location of service delivery
- Who provided the service
- When the service begins and ends.

DHS is talking about having FMS providers engaged in the system by June 30th. (Engaging does not mean starting).

The FMS agencies must be connected to the DHS system and using it in some way. Most FMS have their own system.

The FMS will notify families as soon as they have information on which employees are affected and how it will affect them. [DHS website](#).

Waiver Reimagine and CDCS:

In short, Under Waiver Reimagine, self-direction options will expand. **While CDCS in name will no longer exist, all people will have the option to self-direct all, some or none of their services.** People will not feel they have to choose between "traditional" and self-directed services. A person's budget will be based on their needs and not on how they choose to receive their services. Once a person is assigned to a support range (budget), then they will get to choose

UPDATED RESOURCES:

Ramsey County CDCS Policy Guidelines have been updated! Please click [HERE](#) to read through the updated document. Some of the more major changes include:

- **Community Participation:** If a CDCS participant wishes to attend a community class/activity that is ***not adaptive and available to the general public***, ***CDCS cannot cover the cost of the class/activity***. The class itself is not “related to the participant’s disability” and therefore would not be covered. The benefits of this type of class/activity, would be the same for anyone, regardless of ability.

Includes, but not limited to:

- Community education classes available to general public
- Sports, dance classes, martial arts, etc. that are NOT adaptive
- Swim lessons that are not adaptive

CDCS can cover services to support a person to attend a non-adaptive class/activity by transporting them to the class; accompanying them to the class; remaining with them during the class to assist them in participating that may be needed due to their disability.

- **Monitoring technology equipment:** Please see the policy guidelines for information needed in the CSP as well as consent forms that might be needed, when the following are requested in a CDCS plan:
 - Audio listening devices
 - Cameras and video equipment (e.g., baby video monitors)
 - Mobile, on-person equipment (e.g., body sensors, GPS)
 - Sensors not on the person (e.g., motion sensors, door and window alarms).
(This includes GPS devices, door/window alarms, baby monitors, etc.)
- **Customary amounts:** CDCS policy states that we need to make sure services and items are cost effective. You will find that we updated the guidelines to increase some of the “customary amounts” for certain services, after researching what common services/supports cost. Please remember, that these are not “hard limits” but rather guidelines to ensure cost effectiveness. Requests over this amount must be justified in the plan.

COMING SOON...**Unbundling of CDCS Services:**

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- FMS services---Support Planning---Environmental Mods/Home Mods---Environmental Mods/Vehicle mods---Individual Directed Goods and Services---Personal Assistance---Treatment and Training---Community Integration and Support

Notes of the CDCS Lead Agency FMS Support Planner Mee...



Done

AGENDA for CDCS Joint FMS, LA, SP Monthly Meeting

Date: October 7, 2024 @ 10:00 a.m.

Purpose/ Ground Rules: The focus of this group is to review, discuss, and problem solve broader CDCS related policies. A goal of the group is to be more consistent across the state but understands individual agencies still have the right to develop their own practices. This group is not for specific case consultation. Feel free to write questions in the chat feature. If you would like to speak, raise your hand, and please identify yourself, role, and where you are from when you are speaking. Be respectful.

Unbundling – Standing Item DHS, at the direction of the Centers for Medicare and Medicaid Services-CMS(federal agency) has been working on a “CDCS Unbundling Project.” It has already been approved by CMS but not launched yet. This project will split up 2 of the current CDCS categories (Environmental Modifications and Provisions and Self Direction Supports) AND add 2 new categories (Individual Directed Goods and Services & Community Integration and support for a total of 8 Categories). According to DHS, the expenses that have been allowed or not allowed should not significantly change, but rather which category to put them in is changing.

CDCS Policy Pages are being updated and a new CDCS Plan is currently in the final stages of development. DHS will let us know when this transition will begin through an E-list announcement. The announcement will include published policy pages, new forms, online learning modules, and more specific timelines. The policy pages will also include more clarification and definitions in their respective sections. The only timeline DHS has given us is “soon.” **Could be tomorrow!**

- The powerpoint presentation, Q&A, and presentation is now available. [DSD Training Handouts Archive \(state.mn.us\)](#) (Miscellaneous)
- DHS will attend one of our upcoming meetings after the unbundling announcement is published.
- UPDATE? How are the FMS agencies doing adding all the IT codes and changing systems. Update from FMS group re:

March 19, 2025

My name is Kelly Friesen, and I am the mother of a 26-year-old, Michael, who lives with Autism. I've had the privilege of serving on the Waiver Reimagine Advisory Committee or WRAC since its formation in 2022. When Michael was diagnosed, he had limited speech & level 3 Autism behaviors. With the help of the DD Waiver, we have been able to provide him with services and therapies, and I am thrilled to say he is now working full-time with support & he is no longer using SSI. I am extremely grateful for the MN waiver system!

If Michael experiences another Mental Health crisis, he may temporarily need corporate or congregate support. I am concerned about the complexity of transitioning between waivers that are based on location and not upon needs. I have heard there is a 10 month back log with MN Choice 2.0. How long will it take for Michael to get help? When he stabilizes, will he be forced to stay in a corporate setting, at higher cost because of the MN Choice backlog? I have asked these questions of DHS in WRAC meetings, and I still do not know the answers, yet Waiver Reimagine continues to move forward. There are over 100 "work arounds" with MN Choice 2.0 because of all of its flaws, and yet the tool continues to be used. This is a concern we have raised in WRAC and we are told it is unrelated and "out of scope" for discussion.

What about individuals who need 24-hour care and are saving taxpayers money by living in their community homes? What happens when their budget is cut so low, that their services are no longer sustainable? We are told there will be budget exceptions. WRAC members have asked, *why* are we relying on exceptions? One person may have up to 4 different budgets, all based upon the location in which they live!

WRAC members were told that Waiver Reimagine was on "pause" at the end of 2024, therefore the December, 2024 WRAC meeting was cancelled. Then in February 2025, CDCS unbundling was released from DHS, despite not having met as a committee to discuss it. I personally have asked DHS to explain what the future of CDCS would look like in our past meetings and I was promised it would be on the agenda. It was put on the agenda and then taken off in 2023, without any explanation of why it was removed, yet Waiver Reimagine and CDCS unbundling has moved forward.

The **HSRI reports** from 2018 concluded that living in the community costs less than it does in a corporate or congregate care setting. Somehow the data was interpreted to mean that people living in the community should get less money, instead of, we should be doing everything we can to keep people in the Community to save money! Critical feedback may be heard on WRAC, but it is not implemented. My fear is that WRAC is a formality to suggest there was stakeholder involvement. The only thing I can say that has been implemented by DHS from WRAC, is the naming of the 2 different Waivers. We have asked DHS to show us what has been implemented into Waiver Reimagine from WRAC feedback and there is silence.

We owe it to the over 70,000 Minnesotans who rely on waived services to get it right the first time. When I testified at the Human Services Committee meeting on March 18th, 2024,

March 19, 2025

we were all told that DHS would collaborate with WRAC to come up with meaningful solutions to the issues we had all brought forward. I am here to tell you, there has been no collaboration, and WRAC input has not been put into shaping Waiver Reimagine.

I am asking that we fix the foundation flaw of making the Waiver budgets based upon location, and instead, we should base the budget upon a person's assessed needs. Please consider passing SF 2215 and HF 2038 so we can "course correct" Waiver Reimagine before it is too late.

Respectfully,

Kelly J. Friesen RN, PHN

March 17, 2025

Subject: Opposition to Waiver Reimagine, Support HF 2038 & SF 2215

Dear Chair Schomacker & Committee Members,

I am in my 3rd year as a member of the Waiver Reimagine Advisory Committee (WRAC). I represent parents of adult children with complex care needs. My daughter, 27, has used waived services for 20 years. She lives at home with me and my husband and uses the Consumer Directed Community Supports (CSCS) option within the waiver system.

I am not in favor of Waiver Reimagine continuing without proper oversight.

The Department of Human Services (DHS) lack of accountability and continued lack of collaboration with WRAC was highlighted in front of the Senate HHS committee last March 2024. An additional year has passed and nothing has changed.

DHS will be updating the House regarding Waiver Reimagine.

Our committee has not been included in any way on shaping what you are going to hear this week. We do not participate in setting agendas, identifying a roadmap with deadlines/milestones and we have never seen the legislative working document.

DHS continues to move forward with waivers being funded based on where you live vs. a persons actual established need. If Waiver Reimagine were to be implemented today, my daughter would see a 68% decrease in her annual budget because it is NOT based on her needs.

At our February 2025 meeting, Peter Butler, DHS Budget Director gave a summary on Changes in Costs Over Time.

Slide 14 states:
<i>"Residential services (group homes) costs 3-4 times more than non-residential services (living with family or on your own)."</i>

WRAC is set to force waiver users to use more costly and restrictive options (group homes) because they cannot sustain a 68% budget cut. The result is an enormous taxpayer expense when better, more affordable options are already being used today. As a WRAC member, I find it irresponsible and inappropriate to move forward with these changes. Waiver Reimagine will unfold with violations to the Minnesota Olmstead Plan and the ADA.

I urge you to intervene on behalf of Minnesotans with disabilities by supporting House File 2038 and Senate File 2215. These bills will establish a Waiver Reimagine Task Force and ensure that budgets are based on an individual's needs rather than their living situation. Protecting choice, independence, and equitable funding is essential to upholding disability rights.

Thank you for your time and your commitment to the disability community.

Sincerely,
Lisa Evert

WRAC member

902 Orchard Heights Court, Faribault, MN 55021, 507-330-3315, Lisaever68@gmail.com

Testimony

>> My name is Rebecca St. Martin. I am a Medicaid Waiver beneficiary accessing through CDCS, the state's choice option for home and community based care -- the only option that has any promise of not just maintaining my health and safety, but providing a life worth living.

I have been essentially a prisoner in my own home, unable to experience quality of life, true self-direction or to get meaningful medical care since 2019. That's SEVEN YEARS of my life.

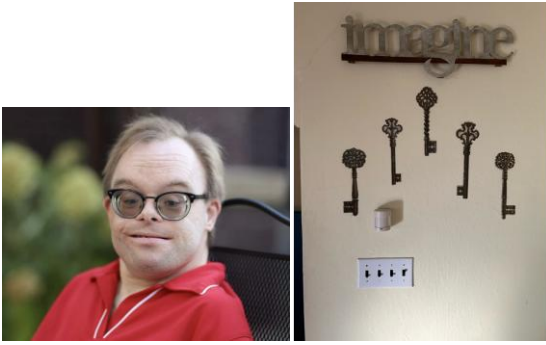
I'd like to go to the doctor. I'd like to work. I'd like to leave my house for ANYTHING AT ALL.

I've been in and out of crisis. My health is deteriorating. I've been abused and neglected in the hospital and do not wish to return. Over the last 7 years, I have witnessed friends, acquaintances and complete strangers suffer and die. One starved to death in her home. I'm here to talk about how DHS is failing me and others I know under the guise of Waiver Reimagine. I had to spend 3 years to become a specialist on the first MnChoice assessment and waiver budget methodology to find out why my budget would no longer support me. I discovered MANY horrid discrepancies I'd like to share with you. But there is no time for that in public comment. Please contact me directly. DHS is now operating on a new, 2nd budget methodology called MnChoices 2.0 with a budget methodology DHS refuses to release for public inspection. I have repeatedly requested this data since the 2019 Legislative Reports came out, using the Government Data Practices Act. DHS continues to withhold the information, saying "they don't have it."

Meanwhile, they created it, are operating on it and I and others are devastated in its wake. I'm here to demand more transparency from DHS and more seriousness placed on the waiver community's ongoing, dire unmet needs. I run a Facebook group of nearly 4000 people from across Minnesota who need state disability services which is demonstrating just how inadequately DHS is training and auditing assessors and case managers, designing the assessment, running appeals -- and also calculating equitable individual budgets for people on waivers. My peers and I have been unable to afford nursing service on CDCS budgets or the Specialized Services that we have always needed in the amounts that would make a difference to our lives. The state approved minimum wage increases for state home care workers to \$19/hr. This committee increased the CFSS/PCA budget needs (thank you), but did nothing to increase the budgets of those on waivers to cover that expense. We are unable to afford specialists or train specialized PCAs at this minimum wage or remain free from expensive and often violent, state licensed care services and settings. These human resource costs have never been an obvious factor in the state's budget methodology for waiver recipients on CDCS -- and this is a mistake. DHS has refused to explain the reason why they use the nebulous numbers they do to calculate our budgets. I have NO more confidence in DHS and the leadership of the Disability Services Division. I strongly oppose Gov Walz's plan to cut waiver funding and ask you to reform our income tax system to FUND -- NOT CUT -- waiver services or any disability services programming so that we can restore programs as they were pre-pandemic. I need this committee to recognize the retired baby boomer population who now needing home care. I need this committee to recognize that newly released prisoners are now accessing home and community mental and behavioral health services needed to prevent recidivism at a MUCH lower cost than the prison system, so I ask you to reallocate prison funds to waivers. I need this committee to acknowledge we are being pushed to our limits. We are struggling, suffering and dying out here. Our Civil Rights are being violated to epic proportions. And we are being utterly devalued and dehumanized by this state's failure to include us and fund us properly -- as a state investment. People with disabilities have gifts and wealth to give back to our communities. The State of Minnesota is WASTING us. The richest 1% of Minnesota families own almost one third of the state's wealth. That is a very gross disparity. I ask you to close the gap in waiver funding through an exponential income tax instead of traditional flat rate taxes including investment income. Please to

understand that extremely expensive hospital, nursing home and residential stays are what lie ahead for this growing waiver population not to mention unnecessary oppression and death -- if the State of Minnesota does not act in our favor.

In haste and thank you,
Rebecca St. Martin



Chair Schomacker, Chair Noor, and
Members of the Human Services Committee

In the past few years, our family has had many conversations about the future for David, our 38-year-old family member with multiple disabilities. He is one of three adult children, but he has always needed significantly more support and family resources than his siblings. As parents, we want to ensure that David has the supports he needs and his siblings can be guardians for their brother without totally disrupting their own lives and families. With current waiver reimagine plans, that won't happen because, instead of receiving more support dollars when I can't provide the majority of David's care, projected waiver budget guidelines indicate he will receive significantly less because he lives at home. David's dad has terminal cancer; as we redid our wills and David's guardianship documents, David's sister, a nurse, is so scared of a future as David's guardian, made the heartbreaking request to be removed from any legal responsibility for David. David's brother, who lives out of state, is terrified of doing everything alone when I can no longer continue because of aging, illness, or death.

In David's early 20's, we bought a duplex so he could have his own home while we lived upstairs and could be actively involved in his transition, provide unpaid caregiving, and ensure that he had the necessary services to transition to independent living with supports. Our son has a CAC waiver (hospital level of care) and uses Consumer Directed Community Supports with a budget that is, at maximum, ¼ of the cost of the 24-hour care he would require in a traditional residential facility. To provide his care and life coordination, I quit my job over a decade ago; I've been unable to leave David and cancelled multiple trips to Oregon to visit grandchildren; I could not/cannot provide any in-person supports to my own aging parents, and my health is compromised from years of caregiving. We had always believed if we provided everything we could while we were healthy and able, we could rely on formal residential services in my son's duplex when we were not able. But now, since the current proposed waiver reimagine budgets are based on where one lives, what provider would serve David at home when they could get 2 or 3 or 4 more times the funding in a facility they owned? Take a look at the attached picture of the keys with the word "imagine"—that was the first thing we put on the walls of his house; our dream of David having his own home with the supports that he needs in place.

Our generation is the first to experiment with more person-centered living situations for individuals with disabilities. Our situations are hard-fought struggles with a service system not designed to support individuals, no matter how much we say we value person-centeredness. Each person/family has figured out how to cobble together the supports needed through personal sacrifice, individual research, and a focus on the strengths and human dignity of the disabled adult. The fact that the waiver system is changing to focus budgets based on where a person lives, and those in their own or family-owned homes receive fewer support dollars, means that no matter how much we sacrificed to create an independent living situation in the community and how many decades we provide unpaid supports, David will lose his home. And we are the privileged: white, middle class, highly educated, English-speaking, American born with private insurance that pays most of the medical expenses. If we fail, other families can't or won't even try; they'll focus their efforts on supporting transitions to more expensive, provider-owned residences instead.

Our ask is this: when it comes before your committee, please support HF 2038, the bill to halt the current DHS proposal to establish a waiver reimagine legislative task force. Don't allow DHS to call David and his peers "outliers" whose supports will be figured out later or in a secret "exceptions" process. Don't let our creativity and sacrifice mean nothing. Use our experiences to improve the system without yanking our family members' safety nets. Most of us would be more than willing to be a case study for the Waiver Reimagine Work Group, working with DHS to cross-walk the services we receive now to create what needs to exist under Waiver Reimagine. We would welcome visits to the residences we have created and discussions about how we did it and what we need in order to continue. We are here; our adult children are getting the supports they need in the best individualized settings; and we are saving the system hundreds of thousands of dollars each person, each year.

Sincerely, Jean Bender 1150 Fairmount Avenue, St. Paul jean.bender@comcast.net

Dear Chair Schomacker & Committee Members,

I strongly oppose Waiver Reimagine Plans and Gov Walz intention to cut waiver funding.

These plans eliminate critical waiver options, restrict provider choice, and forces individuals with disabilities into more costly congregate institutional settings and directly contradicts the ADA integration mandate and Minnesota's Olmstead Plan, which prioritize community-based services and individual choice. These policies are a step backward for disability rights and must be reconsidered.

Having access to this waiver has shaped my son's life for the better. In 2023 I was able to leave my ex-husband after 12 years of abuse. After years of being denied access by his father because he knew I would leave, I was able to call and had support for my son within weeks. With this waiver I know that as he grows and his needs change, he will thrive and that is my entire life's goal. This waiver is his safety and security in so many ways.

I urge you to intervene on behalf of Minnesotans with disabilities by supporting House File 2038 and Senate File 2215. These bills will establish a Waiver Reimagine Task Force that will ensure budgets are based on an individual's needs rather than their living situation. Protecting choice, independence, and equitable funding is essential to upholding disability rights.

Please take action to prevent the harm Waiver Reimagine will cause. Thank you for your time and your commitment to the disability community.

Sincerely,

Rebecca Terrill

117 116th Ave NE Blaine, Mn 55434

763-340-4236

rebeccaterrill92@outlook.com

Dear Chairman Schoemaker and Committee Members

Thank you for the opportunity to comment on Waiver Reimagine. The DHS has spent millions of dollars (ask how many) on contracts to an out of state company, HSRI, to create WR. It is a recycled version it has sold to several other states, claiming to be less complicated (it isn't), cheaper (it isn't), more equitable (not), and Olmstead compliant (actually opposite!) and will have better outcomes (it won't). Throughout this process the Waiver Reimagine Advisory Council has brought up the problems in this system but their input is ignored. I believe the investment DHS continues to pour into a flawed model has caused embarrassment and a "too big to fail" mentality in agency leadership, bringing a loss of objectivity in their judgement.

Of many flaws, the largest in WR is the assumption that the support an individual needs can be determined by the ownership of the shelter they live in. Under WR if their shelter is owned/controlled by a service provider then they are automatically budgeted for more support and if their shelter is building they inhabit is owned/controlled by that individual or a family member, then they are automatically budgeted for less support. This is arbitrary and unrelated to the individuals diagnosis and medical need for support services. The provision of support services must be based on medical needs of the individual.

The pressure that emerges under this system is that providers will refuse to staff an individual unless they reside in one of the providers group homes. And if the individual remains in their own home, they will be unable to get enough staff hours to meet their needs, so they will be forced into an institutional setting, which of course is more expensive and a greater burden on taxpayers.

The solution to this mess is to base the amount of support budgeted to an individual on that individuals medical need. Please look to the plan outlined in HF2038 and reform WR.

Sincerely,
Alice Hulbert
952-215-4434
bjb84@icloud.com



About Jenna

Born 1982, and now 41 years old. She was born 6 weeks early and injured by the medical team at birth. She had a brain bleed that caused uncontrolled seizures, cerebral palsy, and dystonia. Jenna uses a power chair and has limited mobility, low vision and high anxiety and depression issues. She is challenged with DD but is functioning cognitively and can communicate.

Jenna waited 11 years for a DD waiver to meet her needs. When she was 23, there was no group home that worked for her, so we applied and got a 245D license. We planned to convert our family home for Jenna to live with 3 friends and we would move to a townhome. This fell through when the county pulled our license due to us being family.

We then purchased a home with two separate living units and installed an elevator at our expense to accommodate Jenna. We extensively remodeled the kitchen and bathroom and installed an overhead lift, plus put in a walkway from upper level down to her front door. We got no waiver funding for most of the modifications. This was done in 2005, so she has had her own apartment adapted for her unique needs for 20 years. At this time, her elderly grandmother shares the 3-bedroom apartment with her.

Jenna needs 24/7 services and support to have her life and own apartment. Her life includes a job at Home Depot 8 hours a week, a lift van that she purchased with our help, church, Special Olympics, day program, a service dog, and many friends. She is living her best life in spite of so many challenges. Our plan for her future is to have three of her friends move into the double home and share supports and overnight staffing. Currently two of her friends are in group homes settings and are extremely unhappy and very limited in their life. *JENNA NEVER WANTS TO LIVE IN A CORPORATE GROUP HOME!*

Waiver 'Unimaginable' as proposed will destroy all our plans and the lives of Jenna and her friends. Funding should NOT depend on where you live, but what services you need!

Greg and Cindy & Jenna Johnson
2351 Whitefield Drive, Woodbury
612-382-3939

March 18, 2025

I am writing in support of HF2038 & SF 2215, the bill modifying requirements of Waiver Reimagine. The original plan would eliminate critical waiver options, restrict provider choice, and force individuals with disabilities into more costly congregate institutional settings. This directly contradicts the ADA integration mandate and Minnesota's Olmstead Plan, which prioritize community-based services and individual choice. This would be a step backward for disability rights.

I am a mom of a medical complex daughter. She had a stroke in utero. She has Hydrocephalus, epilepsy, cerebral palsy, developmental and cognitive delays. She has many vision challenges, celiac disease. She functions at a 6 year old level. She is 18. She is very vulnerable can't care for herself. She has high anxiety. We need these waiver services for her.

I urge you to intervene on behalf of Minnesotans with disabilities by supporting House File 2038 and Senate File 2215. These bills will establish a Waiver Reimagine Task Force and ensure that budgets are based on an individual's needs rather than their living situation. Protecting choice, independence, and equitable funding is essential to upholding disability rights.

Please take action to prevent the harm Waiver Reimagine will cause. Thank you for your time and your commitment to the disability community.

Sincerely,
Laura Schippel
7313 Deer Pass Drive
Centerville, MN 55038
651-271-9295
Lmschippel@hotmail.com

Dear Chair Schomacker & Committee Members,

I strongly oppose the Waiver Reimagine Plans and Governor Walz's proposal to cut waiver funding.

These plans eliminate essential waiver options, restrict provider choices, and compel individuals with disabilities into more costly institutional settings. This directly contradicts the ADA integration mandate and Minnesota's Olmstead Plan, both of which emphasize community-based services and individual autonomy. Implementing these policies represents a significant setback for disability rights and should be reconsidered.

I am a mother of four, three of whom have disabilities. My 23-year-old son has autism, language delays, a below-average IQ, and a severe mental health diagnosis characterized by paranoia and delusional thinking. Due to misinformation from a county human services representative, he did not access grants or waivers until he was already a teenager.

Early intervention and supports are proven to significantly improve outcomes for children with developmental disabilities and mental health conditions, including improved social skills, reduced severity of symptoms, and increased community integration. Studies indicate that without early supports, individuals with disabilities in Minnesota experience higher rates of institutionalization, isolation, and reduced quality of life.

I believe that the delayed intervention contributed to my son spending a month in the hospital, followed by residential treatment. The severity of his mental health condition prevented him from returning home, and he now lives in a high-needs group home after frequent relocations and episodes of suicidal ideation.

He was once compassionate and community-oriented, dreaming of helping vulnerable populations and rescuing small animals, he now feels rejected by society and struggles deeply with internal anguish due to his mental health. His support team is wonderful, but they can't undo what has happened. He's truly a shell of his former self, and unfortunately exhibits unsafe behaviors around his younger siblings. He didn't do anything to deserve this.

Conversely, my younger two children, ages 12 and 15, benefit significantly from timely support through their grant. They actively participate in adaptive baseball, scouts, church, 4H, the Promise Neighborhood, and other community engagements. This funding enables me to assist them in their daily care, therapies, routines and actively support their social involvement and personal growth. They display remarkable resilience and dedication, and with continued community-based support, I believe they will positively impact society. However, their potential is at risk if forced into restrictive environments like group homes or institutional care.

Data consistently shows that home-based and community supports are not only more humane but substantially more cost-effective. Institutional and residential care settings are significantly more expensive and frequently detrimental to individual growth, independence, and community integration.

I urge you to intervene on behalf of Minnesotans with disabilities by supporting House File 2038 and Senate File 2215. These bills propose establishing a Waiver Reimagine Task Force to ensure that budgets are driven by individual needs rather than predetermined living arrangements. Protecting choice, independence, and equitable funding is critical to maintaining the dignity and rights of individuals with disabilities.

Please act decisively to prevent the harm that Waiver Reimagine will cause. Thank you for your attention and your commitment to Minnesota's disability community.

Sincerely,

NaLeah Mehr
206 Suncrest Court
Avon, MN 56310
320-455-2449
naleah@gmail.com

I am writing in support of HF2038 & SF 2215, the bill modifying requirements of Waiver Reimagine. The original plan would eliminate critical waiver options, restrict provider choice, and force individuals with disabilities into more costly congregate institutional settings. This directly contradicts the ADA integration mandate and Minnesota's Olmstead Plan, which prioritize community-based services and individual choice. This would be a step backward for disability rights.

My mother depends on waivers and support to keep living in her home environment. I also have friends who rely on these waivers to keep their families together. This is how you make America great, not taking away choices of people who are reliant on others.

I urge you to intervene on behalf of Minnesotans with disabilities by supporting House File 2038 and Senate File 2215. These bills will establish a Waiver Reimagine Task Force and ensure that budgets are based on an individual's needs rather than their living situation. Protecting choice, independence, and equitable funding is essential to upholding disability rights.

Please take action to prevent the harm Waiver Reimagine will cause. Thank you for your time and your commitment to the disability community.

Sincerely,

Jen Willemsen

13127 Jenkins Drive, Becker MN

763-639-9270

nightgazer3000@yahoo.com

[Yahoo Mail: Search, Organize, Conquer](#)

Dear Chair Schomacker & Committee Members,

I strongly oppose Waiver Reimagine. This plan eliminates critical waiver options, restricts provider choice, and forces individuals with disabilities into more costly congregate institutional settings. Waiver Reimagine directly contradicts the ADA integration mandate and Minnesota's Olmstead Plan, which prioritize community-based services and individual choice. This policy is a step backward for disability rights and must be reconsidered.

The waiver has helped us to pay for a job coach and transportation for our daughter to have a job out in the community. We also use some of our money for some respite care. We currently want her to live here with us, but it would be more difficult with the waiver.

I urge you to intervene on behalf of Minnesotans with disabilities by supporting House File 2038 and Senate File 2215. These bills will establish a Waiver Reimagine Task Force and ensure that budgets are based on an individual's needs rather than their living situation. Protecting choice, independence, and equitable funding is essential to upholding disability rights.

Please take action to prevent the harm Waiver Reimagine will cause. Thank you for your time and your commitment to the disability community.

Sincerely,
Janice Kramer
12835 Ozark Trail No.
Stillwater, MN
651-439-7037
ozkramer@q.com

To whom it may concern,

I am writing in support of HF2038 & SF 2215, the bill modifying requirements of Waiver Reimagine. The original plan would eliminate critical waiver options, restrict provider choice, and force individuals with disabilities into more costly congregate institutional settings. This directly contradicts the ADA integration mandate and Minnesota's Olmstead Plan, which prioritize community-based services and individual choice. This would be a step backward for disability rights.

Our beautiful daughter Allison is 15 years old and utilizes a waiver to live her best life at home. She loves spending time with her two golden retriever dogs, her sister and her mom and dad. The waiver has made a positive impact on her life. We are hopeful that the budget methodology will be based on individual needs and not by where a person lives.

I urge you to intervene on behalf of Minnesotans with disabilities by supporting House File 2038 and Senate File 2215. These bills will establish a Waiver Reimagine Task Force and ensure that budgets are based on an individual's needs rather than their living situation.

Protecting choice, independence, and equitable funding is essential to upholding disability rights.

Please take action to prevent the harm Waiver Reimagine will cause. Thank you for your time and your commitment to the disability community.

Sincerely,

Elizabeth Marsh

1949 Ridge Cir

Mora, MN 55051

Subject: Oppose Waiver Reimagine – Support HF 2038 & SF 2215

Dear Chair Schomacker & Committee Members,

I am a member of the Waiver Reimagine (WR) committee. I am also a person with a severe disability who uses a waiver to live in my community. I am speaking as a person with a disability and a member of the public committee when I say I strongly oppose the changes WR is putting forth. This plan eliminates critical waiver options, restricts provider choice, and forces individuals with disabilities into more costly congregate institutional settings. Waiver Reimagine directly contradicts the ADA integration mandate and Minnesota's Olmstead Plan, which prioritize community-based services and individual choice. This policy is a step backward for disability rights and must be reconsidered.

In addition to a severe physical disability that requires I have assistance for all activities of daily living such as bathing, eating, getting dressed, etc., I also have a number of significant health issues that require constant supervision and intervention. I live at home with my mother who, because of the home care crisis, provides all my care since we have not been able to find someone who can meet my needs. The current budgeting ranges proposed by DHS are **totally inadequate** for maintaining someone with high needs in their home. At the highest rate, my budget would be \$162,225 if I were in a corporate facility but only \$76,580 to live in my own home with my mother. To live at home under the proposed conditions would result in a decrease in funding of over \$100,000 from my current budget.

I also have a PhD in the History of Science, Technology, and Medicine from the University of Minnesota. I have given presentations on disability to physicians, historians, public health professionals, and disabled public employees, among others. I have several publications, including a chapter in an upcoming book, *Do Less Harm*, coming out of Johns Hopkins Press. I am engaged in my community, have friends, and lead a good life. The idea that I would get better care in a facility is horrendously mistaken. **And yet the state would be paying substantially more for substandard care, in a place I don't want to be, and a place where it would be extremely difficult to continue doing the things I love to do.**

While committee members have made numerous suggestions about how to improve waiver services, those suggestions do not appear to have influenced how DHS is proceeding with waiver changes.

I urge you to intervene on behalf of Minnesotans with disabilities by supporting House File 2038 and Senate File 2215. These bills will establish a Waiver Reimagine Task Force and ensure that budgets are based on an individual's needs rather than their living situation. Protecting choice, independence, and equitable funding is essential to upholding disability rights. This bill will also provide the much needed oversight that WRAC cannot provide.

Please take action to prevent the harm DHS's version of Waiver Reimagine will cause. Thank you for your time and your commitment to the disability community.

Sincerely,

Katrina N. Jirik PhD

1174 Grand Ave #102

651-222-6247 (you will have to talk with my mom as I am unable to use the phone)

Tuesday, March 18, 2025

Subject: Oppose Waiver Reimagine – Support HF 2038 & SF 2215

Dear Chair Schomacker & Committee Members,

I strongly oppose Waiver Reimagine. This plan eliminates critical waiver options, restricts provider choice, and forces individuals with disabilities into more costly congregate institutional settings. Waiver Reimagine directly contradicts the ADA integration mandate and Minnesota's Olmstead Plan, which prioritize community-based services and individual choice. This policy is a step backward for disability rights and must be reconsidered.

As older parents of a 29 yr old, we have worked tirelessly all of our working lives to save enough money to purchase a small townhome for our daughter with developmental disabilities. The plan was that she could live out her life in this townhome when we are no longer able to care for her. She has been living in the townhome now for 2.5 years and we feel she is living her best life. NOW with Waiver Reimagine, it would seem you are going to pull the rug right out from under her! With the proposed budgets in the Waiver Reimagine she will not have the care she needs and honestly without that care, her life will be at danger! And just as in previous generations, being trapped in an institution, you will be trapping our daughter and others in their homes!

I urge you to intervene on behalf of Minnesotans with disabilities by supporting House File 2038 and Senate File 2215. These bills will establish a Waiver Reimagine Task Force and ensure that budgets are based on an individual's needs rather than their living situation. Protecting choice, independence, and equitable funding is essential to upholding disability rights.

Please take action to prevent the grave harm Waiver Reimagine will cause. Thank you for your time and your commitment to the disability community.

Sincerely,

Susan and Dennis Kane

4372 Little Bluestem Trail North, Lake Elmo, MN 55042

651-208-1225

sdkane4@gmail.com

March 18, 2025

Megan Rossbach (megan.rossbach@house.mn.gov)

Subject: **Oppose Waiver Reimagine – Support HF 2038 & SF 2215**

Dear Chair Schomacker & Committee Members,

I disagree with and oppose Waiver Reimagine. This plan eliminates critical waiver options, restricts provider choice, and forces individuals with disabilities into more costly congregate institutional settings. Waiver Reimagine directly contradicts the ADA integration mandate and Minnesota's Olmstead Plan, which prioritize community-based services and individual choice. This policy is a step backward for disability rights and must be reconsidered.

My son who has significant disabilities depends on waiver options to meet his specific needs. Institutionalization is not an option due to his vulnerability and conditions that would not work in a group setting. The Olmstead Plan has been beneficial to his daily needs and support, while Waiver Reimagine would leave little no options for my son.

I urge you to intervene on behalf of Minnesotans with disabilities by supporting House File 2038 and Senate File 2215. These bills will establish a Waiver Reimagine Task Force and ensure that budgets are based on an individual's needs rather than their living situation. Protecting choice, independence, and equitable funding is essential to upholding disability rights.

Please do whatever is necessary to prevent the harm Waiver Reimagine will cause. Thank you for your time and your commitment to the disability community.

Sincerely,

Rod Musson
1303 4th Street S
Stillwater, MN 55082

Phone: 559-341-3041
Email: Musson1@sbcglobal.net

March 18, 2025

Representative Joe Schomacker
2nd Floor Centennial Office Building
St. Paul, MN 55155

Re: Oppose Waiver Reimagine – Support HF 2038 & SF 2215

Dear Chair Schomacker & Committee Members,

I'm strongly opposed to Waiver Reimagine. This plan takes away important waiver options, limits provider choices, and pushes people with disabilities into expensive institutional settings. It goes against the ADA's integration mandate and Minnesota's Olmstead Plan, which support community-based services and personal choice. This policy threatens disability rights and needs to be reconsidered.

As a parent of a 13-year-old daughter who has Down syndrome, I worry about her future housing options. Institutional settings may provide basic care, but they often limit people's choices and experiences. Instead of connecting people to their communities, these settings can isolate them, preventing them from enjoying hobbies, forming friendships, or making their own decisions.

If these settings truly offered fulfilling lives, we would see more people, including those who develop disabilities later in life, choosing to live in them. But that's not the case. Most people want to stay in their own communities, surrounded by the people and activities they care about.

I urge you to support House File 2038 and Senate File 2215. These bills will create a Waiver Reimagine Task Force and ensure people's budgets are based on their individual needs, not where they live. Protecting choice, independence, and fair funding is essential to maintaining disability rights.

Please act now to prevent the harm Waiver Reimagine will cause. Thank you for your time and your support of Minnesotans with disabilities.

Sincerely,



Karen Keenan
7420 Pinehurst Road
Pine Springs, MN 55115
651.472.1274
Karenkeen.mn@gmail.com

3/18/2025

Subject: Oppose Waiver Reimagine – Support HF 2038 & SF 2215

Dear Chair, Schomacker & Committee Members,

Chad, my twenty-seven-year-old son, needs 24-hour care due to his numerous challenges. Now, reimagine this 27-year-old as a six-year-old six-foot man that needs help with toileting, communicating, moving, eating, and above all ensuring he is not abused. I had to give up my career as a teacher, in order to care for and protect him. The costs of caring for him on a daily basis are astounding and we barely make ends meet. Most months we do not, even with the current waiver.

I am in strong opposition of Waiver Reimagine. This plan eliminates critical waiver options, restricts provider choice, and forces individuals with disabilities into more costly congregate institutional settings. Waiver Reimagine directly contradicts the ADA integration mandate and Minnesota's Olmstead Plan, which prioritize community-based services and individual choice. This policy is a step backward for disability rights and must be reconsidered.

I urge you to intervene on behalf of Minnesotans with challenges by supporting House File 2038 and Senate File 2215. These bills will establish a Waiver Reimagine Task Force and ensure that budgets are based on an individual's needs rather than their living situation. Protecting choice, independence, and equitable funding is essential to upholding disability rights.

Please take action to prevent the harm Waiver Reimagine will cause. Thank you for your time and your commitment to the disability community.

Sincerely,

Michelle Bracewell-Musson
1303 4th St S., Stillwater, MN 55082
651-666-8569
michelle@mussosoncontracting.com

ADDENDUM TO WRITTEN TESTIMONY

For Consideration of HF 2038 - House Finance Committee Hearing

Reverend Katrin Bachmeier

Chair and Members of the House Finance Committee,

As I stated in my previous testimony on SF 2215, I appear before you as a reverend, caregiver advocate, and administrator of several support groups serving Minnesota families navigating disability services, including the Minnesota MNChoices Assessment Support Group. Today, I wish to provide additional perspective on the financial implications of Waiver Reimagine and why HF 2038 is fiscally prudent and legally necessary.

The Critical Connection: MnCHOICES Assessment and Waiver Reimagine

While DHS has repeatedly claimed that MnCHOICES is not part of Waiver Reimagine, this position deliberately obscures a fundamental reality: Waiver Reimagine cannot function without a stable, accurate assessment tool. MnCHOICES Assessment is the gateway to all waiver services.

This connection creates substantial fiscal risk for several reasons:

1. **Budget Projection Accuracy:** Any fiscal projections about Waiver Reimagine's costs are inherently flawed because DHS has not supplied budget methodologies utilizing the assessment tool. Projections also don't account for the documented inconsistency of the assessment tool that will drive service allocation.
2. **Implementation Costs:** Waiver Reimagine's implementation budget does not adequately account for the costs of reconciling assessment inconsistencies when they inevitably arise in the new two-waiver system.

As administrator of the MN Choices Assessment Support Group, I witness daily the real-world impact of these assessment failures across thousands of participants. DHS's attempt to separate MnCHOICES from Waiver Reimagine is not just misleading – it constitutes a significant fiscal risk by obscuring how assessment failures will cascade through the new waiver structure.

Documented Assessment Failures and Fiscal Implications

My support groups documents thousands of cases where the assessment tool produces inconsistent, inaccurate results that would have profound implications under Waiver Reimagine:

1. Service Reduction without Condition Changes: We regularly document cases where identical needs receive different service allocations on reassessment, despite no change in the individual's condition. This leaves large populations without access to their life-sustaining services

2. Inconsistent Dependency Tracking: The assessment tool tracks dependencies differently across programs, making it impossible to create accurate service comparisons or budget projections. This inconsistency will be magnified under the two-waiver system.

3. Selective Data Reporting: When DHS presents data on assessment outcomes, they consistently omit information about reductions requiring appeals and reassessments. In their October WRAC meeting minutes DHS states they are only accepting reports from 40 MNchoices assessors- yet no assessors or lead agencies we have consulted are aware that they are supposed to be reporting budget reductions to DHS. DHS has ignored virtually all reports of budget reductions from participants and advocates. This selective reporting creates artificially optimistic budget projections for Waiver Reimagine.

Legal Liability and Fiscal Risk

Waiver Reimagine's proposed structure, combined with known assessment failures, exposes Minnesota to significant legal and fiscal risk:

1. Olmstead Compliance: The location/setting-based waiver structure proposed under Waiver Reimagine violates Olmstead requirements by creating systemic barriers to integrated settings. Litigation for similar violations in other states has resulted in multi-million-dollar settlements and decades of federal oversight.

2. Additional Federal Violation: In the interest of time, I won't detail the specifics, but the proposed waiver structure intersects with numerous federal requirements regarding labor law, tax law, and Medicaid compliance. Each represents potential legal liability for Minnesota taxpayers.

3. Medicaid Compliance: Minnesota has already experienced Medicaid fund mismanagement to the tune of approximately \$113 million. **The proposed waiver structure, built on a flawed assessment foundation, virtually guarantees further mismanagement.**

The Fiscal Case for HF 2038

HF 2038 is fundamentally a fiscal responsibility measure that:

1.Ensures System Integration: The task force would ensure that all components of the disability services system, including assessment tools, are properly aligned before implementing costly structural changes.

2. Prevents Costly Litigation: By establishing proper oversight through a task force with legal authority, Minnesota can address compliance issues before they result in expensive federal intervention.

3. Creates Cost-Effective Solutions: By bringing together stakeholders with direct knowledge of system failures, the task force can identify efficient, effective solutions rather than proceeding with a flawed design.

4. Protects Vulnerable Minnesotans: Preventing service disruptions through proper system design avoids the high costs of crisis intervention and institutional placement that would result from implementation failures.

The Ethical and Fiscal Imperatives

As a faith leader, I am compelled to speak about both the ethical and fiscal dimensions of this issue. The current trajectory of Waiver Reimagine threatens to reinstitutionalize Minnesotans with disabilities by creating a two-waiver system based on location and setting rather than needs.

This approach will inevitably push more individuals toward institutional settings which is:

1. Fiscally Irresponsible:: National statistics demonstrate that home and community-based services save taxpayers 43-67% compared to institutional care.

2. Ethically Indefensible: As a reverend, I believe in the inherent worth and dignity of every person. Systems that segregate people with disabilities from their communities deny this fundamental dignity.

Waiver Reimagine cannot be separated from the assessment system that will drive its implementation. Proceeding with this flawed design without the task force oversight established by HF 2038 represents not just a policy failure, but fiscal negligence.

HF 2038 provides the necessary oversight to ensure that taxpayer dollars are spent responsibly, federal compliance is maintained, and the dignity of Minnesotans with disabilities is protected. I urge this committee to support HF 2038 as a matter of fiscal responsibility and ethical obligation to Minnesota's most vulnerable citizens.

Respectfully submitted,

Reverend Katrin Bachmeier
Administrator, MNChoices Assessment Support Group



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Written Testimony for SF 2215
Senate Human Services Committee
March 12, 2025**

Chair Hoffman, Lead Abeler, and members of the committee:

Thank you for the opportunity to submit testimony in strong support of SF 2215, which establishes essential legislative oversight of the Waiver Reimagine initiative through a legislative task force.

I am Reverend Katrin Bachmeier, a mother and caregiver of waiver participants. I also administer Minnesota's largest support groups for people with disabilities, including the MnCHOICES assessment support group, where I hear directly from families across our state struggling with these systems.

Grace's Story: Why SF 2215's Oversight Is Critical

Last year, I testified before this committee about Grace, a medically complex child who was approved for nursing care through a CAC waiver in Hennepin County. When Grace moved back to her home in St. Louis County, those same life-sustaining services were denied despite no change in her medical condition.

Today, she's fighting for her life in the PICU on a ventilator due to our state's failure to ensure equal access to life-sustaining disability services across settings and county lines in violation of Federal Laws.

SF 2215 directly addresses these inconsistencies by requiring review of assessment tools and methodologies that determine life-critical supports..

Discrimination in Assessments That SF 2215 Would Address

The current MnCHOICES assessment system contains concerning patterns of discriminatory outcomes based on factors including location, age, and living situation. SF 2215 recognizes that "MnCHOICES 2.0 is not working" and that we cannot implement a new waiver system until we fix these fundamental assessment issues.

The task force established by this bill would have the authority to examine these discriminatory practices and ensure assessments are based on actual needs rather than arbitrary factors.

Broken Promises That SF 2215 Would Prevent

In March 2024, Natasha Mertz from DHS promised this committee there would be no budget drops under Waiver Reimagine and that a specialized DHS team would review problematic assessments. Despite numerous emails and inquiries from desperate families over the past year, those promises remain unfulfilled.

SF 2215 prevents such broken promises by requiring transparent oversight and accountability before major system changes are implemented.

Transparency Issues That SF 2215 Addresses

Hard evidence submitted to this committee demonstrates a troubling pattern: DHS initially presented multiple initiatives—including CDCS unbundling, CSP form changes, and other policy modifications—as connected parts of Waiver Reimagine. When questioned about these connections, DHS deleted references from their website and denied these relationships.

SF 2215 addresses this lack of transparency by requiring complete disclosure of plans to the legislature, the task force, and all waiver recipients before implementation.

Budget Disparities That SF 2215 Would Correct

According to DHS's own legislative report (page 38), a medically complex person with identical support needs would receive an a maximum of \$93,674 if living independently, but more than double—\$210,064—if living in a congregate setting. This disparity creates a powerful financial incentive pushing people into more restrictive environments.

SF 2215 directly tackles this issue by requiring that individual budgets be set based on the needs of the individual, not tied to location of services.

Wasted Investments That SF 2215 Would Protect

Families have invested enormous sums in home modifications, purchased duplexes, built mother-in-law apartments, and created accessible homes to support their loved ones. These investments would be rendered useless under a system that financially penalizes independent living.

SF 2215 protects these investments by ensuring budgets allow people to live in the setting of their choice with adequate support.

Breaking The Implementation-Without-Oversight Cycle

Our state has a troubling pattern of implementing massive system changes first, then attempting to create Band-Aid fixes that cannot address fundamentally broken and federally non-compliant programs. SF 2215 breaks this harmful cycle by requiring proper study and approval before implementation.

For Grace, for thousands of Minnesotans with disabilities, and for fiscal responsibility, I strongly urge your support for SF 2215. This bill ensures that changes to Minnesota's disability waiver system receive proper oversight,

address discrimination, comply with federal law, and truly meet the needs of the people they are designed to serve.

Respectfully submitted,

Reverend Katrin Bachmeier
Katrin.bachmeier00@gmail.com

Subject: Oppose Waiver Reimagine – Support HF 2038 & SF 2215

Dear Chair Schomacker & Committee Members,

I strongly oppose Waiver Reimagine. This plan eliminates critical waiver options, restricts provider choice, and forces individuals with disabilities into more costly congregate institutional settings. Waiver Reimagine directly contradicts the ADA integration mandate and Minnesota's Olmstead Plan, which prioritize community-based services and individual choice. This policy is a step backward for disability rights and must be reconsidered.

My son, Gabriel, who has Down Syndrome, will be negatively impacted by the passage of the Waiver Reimagine. Currently he has self/family directed care through CDCS and can access the specific community supports needed for his unique situation. The passage of Waiver Reimagine would totally turn that on its head and would force us to make choices that don't align with the best supports for Gabe.

I urge you to intervene on behalf of Minnesotans with disabilities by supporting House File 2038 and Senate File 2215. These bills will establish a Waiver Reimagine Task Force and ensure that budgets are based on an individual's needs rather than their living situation. Protecting choice, independence, and equitable funding is essential to upholding disability rights.

Please take action to prevent the harm Waiver Reimagine will cause. Thank you for your time and your commitment to the disability community.

**Sincerely,
Tara King
525 Eben Ct Stillwater, MN 55082
651-491-9025
kingfamilymn@comcast.net**

Jonathan Murray

To: megan.rossbach@house.mn.gov
Subject: Oppose Waiver Reimagine – Support HF 2038 & SF 2215
Attachments: Oppose Waiver Reimagine – Support HF 2038 & SF 2215 Jonathan Murray.pdf

Dear Chair Schomacker & Committee Members,

I strongly oppose Waiver Reimagine. This plan eliminates critical waiver options, restricts provider choice, and forces individuals with disabilities into more costly congregate institutional settings. Waiver Reimagine directly contradicts the ADA integration mandate and Minnesota's Olmstead Plan, which prioritize community-based services and individual choice. This policy is a step backward for disability rights and must be reconsidered.

****I am a CDCS waiver holder and I have already struggled to get my needs met under existing waiver limitations. Adding more will make these challenges harder--and this is not the independence I was promised as a waiver holder. I have many friends on waivers who feel the same.****

I urge you to intervene on behalf of Minnesotans with disabilities by supporting House File 2038 and Senate File 2215. These bills will establish a Waiver Reimagine Task Force and ensure that budgets are based on an individual's needs rather than their living situation. Protecting choice, independence, and equitable funding is essential to upholding disability rights.

Please take action to prevent the harm Waiver Reimagine will cause. Thank you for your time and your commitment to the disability community.

Sincerely,

Jonathan Murray
2730 Dale St N, Apt 205
Roseville, MN 55113
651-895-6478
erudition@botlivesmatter.org

Jonathan Murray | (Please use name/Any Pronouns)

** composed via dictation & I'm autistic which causes communication barriers from errors & [the double Empathy problem](#) if you need clarity of intent, [please drop this e-mail in Goblin Tools](#)*

I run on [Criptime](#) so it may take a while to respond. Please follow up if I've missed your e-mail, especially if it's urgent.

Megan,

I understand there is a noon hearing tomorrow regarding two bills amending WR. I am on my way to Mayo and can't attend or respond adequately now. I am quite ill. Long term caregivers have many medical complications which is my case.

I sent commentary to David Zak last week. I'm the mother/guardian/conservator for my 27 year old son with disabilities. He is currently experiencing the promise of Olmstead by living in his community of choice and working at a company of his choice. He is able to do this by having staff dedicated to him at his apartment. Under the WR funding rates for individuals living with family or in their own homes, he will be denied this support. He lived in two group homes where he was abused and kept separate from the community at large. He has told us that he will commit suicide if he has to return to congregate living - and I take him at his word.

I understand the cost pressures on the state. In my experience, care providers take more than 50% of waiver funds for admin or profit. I was told by two care providers that I needed to source staff, interview them, schedule their shifts, train them, and manage daily problems without pay. I consider this to be a variant of fraud that never seems to get addressed. WR ranges provide greater funding levels for congregate care which will largely accrue to these providers instead of providing benefits to individuals with disabilities. Providers aren't required to undergo financial audits which has been pointed out by the Legislative Auditor.

I encourage House members to take the proposed legislation seriously. There are undoubtedly other ways to structure funding for people with disabilities but WR is a packaged program that was purchased by the state. DHS has obstructed any real debate from individuals and families who will be most affected by these changes. WRAC has been simply a "show" of obtaining feedback.

I thought we were past the time of institutionalizing people against their will. If individuals with higher needs want some autonomy, they will need to rely on UNPAID SUPPORTS given Waiver Reimagine's design. Unpaid support is not available for my son.

Sincerely,

Rebecca Wallin on behalf of Alexei Dickinson

March 18, 2024

Chair Schomaker and Members of Human Services Finance and Policy Committee,

Thank you so much for the opportunity to speak today on behalf of persons with disabilities and their families. I am a parent of a child with disabilities and I am a member of the WRAC. I have worked with children and youth with disabilities and their families for over 14 years helping them navigate complex systems of care, including Medicaid Waivers. The Minnesota Department of Human Services (DHS) established the Waiver Reimagine Advisory Committee (WRAC) in 2021 to provide feedback and assist in developing proposed plans for Waiver Reimagine. As a member of the WRAC and a person in daily communications with waiver recipients and support organizations, I am here to report that there are significant problems with WR and DHS is refusing to acknowledge these issues.

WRAC was a Legislative Mandate: The Minnesota Legislature required DHS to establish WRAC as part of efforts to increase oversight and stakeholder involvement in Waiver Reimagine. But WRAC is not a DHS Initiative. DHS portrays WRAC as part of its ongoing collaboration with the disability community, but the truth is that without legislative pressure, DHS would not have created WRAC at all.

The WRAC began its meetings in early 2022, convening virtually every other month. In March of 2024, DHS was to pause WR and take a hard look at WRAC members' concerns, and they were strongly encouraged to authentically partner with stakeholders in the WR process. However, DHS continues to proceed with a one-sided process, doing things to us and for us, not WITH us. Despite this directive from the senate committee in March of 2024, NO meaningful efforts have been made by DHS to collaborate. In fact, I have witnessed several instances of WRAC members being met with condescension and belittling, as well as ignoring accessibility concerns. It has been made extremely clear that the WRAC is a check-box for DHS, and we are not considered to have any meaningful expertise regarding this matter.

With extremely good reason, waiver recipients are genuinely in fear of what they will endure in congregate care if WR passes as proposed by DHS.

WR is not fiscally responsible.

- Many stakeholders have submitted testimony which supports this with data.
- WR is wasting taxpayer dollars on a solution that most people don't want.
- Tax payers are demanding to have more transparency on how their tax dollars are being spent, especially considering the coming budget shortfall.

WR will reinstitutionalize Minnesotans with Disabilities.

- WR will drastically decrease budgets for those living in their own homes and in the community. Budgets for those living in congregate care will be significantly higher. Persons with disabilities and their families and caregivers will not be able to afford to live in their homes and receive necessary care.
- Historically, conditions in institutions and facilities lacked proper care or education, they were wrought with segregation and isolation, and these institutions were overcrowded, underfunded,

and poorly maintained...and now we have a staffing shortage. We have overwhelming data that tells us **keeping Minnesotans with disabilities in their homes and communities saves tax-payer dollars!**

HF 2028 must be passed because:

- The Minnesota Administrative Procedure Act (APA) requires rulemaking for policies that impact the public and create new obligations. Instead of drafting formal rules, DHS has used policy bulletins, website updates, and internal training materials to push major changes with no legal review or public input.
- The Minnesota Legislature directed DHS to pause Waiver Reimagine to allow for further review and stakeholder input, DHS is ignoring it. DHS has continued implementing components of Waiver Reimagine under different names, such as CDCS Unbundling and MnCHOICES 2.0. Archived DHS documents show that these policies were originally part of Waiver Reimagine—but DHS removed references to them and proceeded anyway. The task force is needed to hold DHS accountable for defying legislative directives and misleading lawmakers about what is actually happening.
- Minnesota is at risk of federal Olmstead and Medicaid Violations. Olmstead v. L.C. requires states to provide services in the most integrated setting. By cutting waiver budgets and restricting services, DHS is increasing the risk of unnecessary institutionalization, violating Olmstead protections. If these policies had gone through rulemaking, stakeholders could have challenged them on Olmstead grounds. DHS is also failing to ensure that Medicaid-funded services comply with federal parity laws, potentially putting Minnesota at risk of federal intervention.
- DHS is not transparent about budget cuts, relevant data, or CMS communications. DHS refuses to provide budget impact analyses for Waiver Reimagine and MnCHOICES 2.0. DHS has not disclosed communications with CMS (Centers for Medicare & Medicaid Services) to prove that these policy changes are federally mandated. Public requests for transparency—including requests for DHS's presentation ahead of hearings—have been ignored.
- The WRAC is controlled by DHS, not stakeholders. DHS created the Waiver Reimagine Advisory Committee (WRAC) in 2021, but it is not an independent oversight body. WRAC members were not meaningfully consulted on MnCHOICES 2.0 budget reductions or CDCS Unbundling changes. Even though WRAC was mandated by legislators, DHS still controls the agenda, membership structure, and the flow of information—limiting its ability to serve as a truly independent oversight body.

The Legislative Task Force on Waiver Reimagine (HF 2038 / SF 2215) is needed because DHS has proven that it will not regulate itself.

- ✓ It will ensure that all future waiver changes comply with the law.
- ✓ It will prevent DHS from continuing to bypass the Legislature and stakeholders.
- ✓ It will demand transparency on budgets, data, and CMS communications.

✓ It will investigate whether DHS's policies violate federal Medicaid, Olmstead, and disability rights laws.

Without this task force, DHS will continue to implement major disability service changes without oversight, public accountability, or compliance with the law.

Sincerely,

Tricia Brisbane

7201 103rd Ave. N.

Brooklyn Park, MN 55445

tkbristine@gmail.com

612-968-2254

Dear Chair Schomacker & Committee Members,

I strongly oppose Waiver Reimagine. This plan eliminates critical waiver options, restricts provider choice, and forces individuals with disabilities into more costly congregate institutional settings. Waiver Reimagine directly contradicts the ADA integration mandate and Minnesota's Olmstead Plan, which prioritize community-based services and individual choice. This policy is a step backward for disability rights and must be reconsidered.

I am speaking on behalf of my disabled son Dillon Wong who is on a CDCS waiver. Please stop this Waiver Reimagine madness which will make us to have the unnecessary nursing assessment hours which would not benefit my son's care at all. In the past, going through a nursing agency has proven that it had no benefit to my son's care other than wasting our time and money which could have been put to better use. As busy parents caring for a 99% disabled adult son, we don't need a more complicated self-directed budget plan, the current self-directed budget plan that we have works just fine, please leave good enough alone. What my son Dillon needs is good therapists, medical care, equipment, and the people who know him well (his family members) to provide him with the care that he needs, not some nurses who don't know Dillon to spend hours to do assessment on him. Waiver Reimagine would be a serious misallocation of valuable resources and time for disabled members and their families.

I urge you to intervene on behalf of Minnesotans with disabilities by supporting House File 2038 and Senate File 2215. These bills will establish a Waiver Reimagine Task Force and ensure that budgets are based on an individual's needs rather than their living situation. Protecting choice, independence, and equitable funding is essential to upholding disability rights.

Please take action to prevent the harm Waiver Reimagine will cause. Thank you for your time and your commitment to the disability community.

Sincerely,
Sandy Huang
4779 198th Circle West
Farmington, MN 55024
323-509-7966
sandy_h_huang@yahoo.com

March 17, 2025

Mr. Chair and Committee Members,

Please see below our Position Statement on Waiver Reimagine.



Flawed Waiver Reimagine Plan

Executive Summary: Addressing Inequities in Minnesota's Waiver Reimagine Plan

The Minnesota Department of Human Services (DHS) is advancing its Waiver Reimagine initiative, a reform of the Home and Community-Based Services (HCBS) waiver system aimed at streamlining services and promoting equity. However, the proposed changes risk creating significant inequities and undermine the rights and well-being of Minnesotans with disabilities. These concerns must be addressed to ensure a fair and effective system for over 62,000 individuals who rely on HCBS waivers.

Key Issues with the Current Proposal

1. **Financial Inequities:** The two-waiver system disproportionately allocates resources, providing higher budgets for individuals in residential settings compared to those living independently or with family. This institutional bias violates the *Olmstead* mandate, ADA integration principles, and Minnesota's Independent Living First policy.
2. **Increased Risk of Institutionalization:** Limited budgets for independent living may force individuals into congregate care settings to receive necessary services, restricting their autonomy.
3. **Overreliance on Unpaid Caregivers:** The plan assumes that family supports will fill service gaps, an unsustainable model as caregivers work to sustain their families, age or pass away.
4. **Restricted Services:** Exclusion of overnight care for those in independent settings undermines choice and may push individuals toward institutional care.

5. **Provider Exodus:** Reduced funding for independent living services could lead providers to abandon these settings in favor of more profitable congregate care.
6. **Cultural Insensitivity:** The plan inadequately considers the preferences of diverse communities, many of which prioritize care within their own cultural or familial settings.
7. **Quality of Life Concerns:** Evidence suggests that individuals thrive in community-based, non-institutional settings, yet the plan's structure threatens their ability to live integrated, fulfilling lives.

Recommendations for an Equitable Waiver System

To build a system that meets the needs of all Minnesotans with disabilities, the following principles should guide reform:

1. **Person-Centered Planning:** Regular assessments and robust support for individual choice in services and living arrangements.
2. **Adequate and Equitable Funding:** Resource allocation based on individual needs, regardless of living setting.
3. **Diverse Service Options:** Flexibility to support in-home care, self-directed budgets, and other community-based services.
4. **Support for Caregivers:** Expanded respite care, training, and resources for unpaid caregivers.
5. **Cultural Competence:** Tailored services that respect and reflect diverse cultural and community preferences.
6. **Quality Assurance:** Strong safeguards against abuse, neglect, and exploitation, with consistent oversight.
7. **Stakeholder Engagement:** Meaningful involvement of individuals with disabilities and their families in policymaking.

Legislative Solutions

Disability Voice Advocates (DiVA) is drafting legislation to address the flaws in Waiver Reimagine, including:

- Establishing a waiver system that ensures equitable budgets based on individual needs.
- Requires reporting back to the legislature before submitting final report to CMS.
- Creating a Legislative Taskforce to study the impacts of Waiver Reimagine and related policies, such as the MNChoices 2.0 assessment.

Conclusion

While reform is necessary, Waiver Reimagine must prioritize equity, individual choice, and quality of life for all Minnesotans with disabilities. Policymakers, DHS, and stakeholders must work collaboratively to design a system that upholds these principles and fosters independence, dignity, and inclusion for individuals with disabilities.

Detailed Discussion

The Waiver Reimagine plan, as currently proposed, introduces significant inequities for Minnesotans with disabilities. *It creates financial inequities, relies on unsustainable caregiving models, restricts individual choice, and risks institutionalizing individuals against their will.*

It is crucial for legislators and DHS personnel to address these issues to ensure a fair and equitable system that truly supports over **62,000** individuals with disabilities in Minnesota who receive HCBS (Home and Community-Based Services) waivers.

Current Plan for Minnesota DHS's Waiver Reimagine Initiative

Minnesota Department of Human Services (DHS) is promoting its overhaul of the Home and Community-Based Services (HCBS) waiver system under the Waiver Reimagine initiative. This plan is touted as a means to simplify and streamline the system, providing people with disabilities informed choice, person-centered supports, equity, and self-directed services. While reform is necessary to address existing inequities, the proposed two-waiver system under Waiver Reimagine introduces significant financial disparities between individuals living in their own homes or family homes, and those in group homes or other provider-controlled congregate care settings.

These changes will likely force individuals with higher support needs to move into congregate care settings to receive necessary services or forego needed supports to stay in their homes.

A. Collapse of Four Waivers into Two Based on Living Situation

Under Waiver Reimagine, the four current disability waivers—Community Alternative for Disabled Individuals (CADI), Community Alternative Care (CAC), Developmental Disabilities (DD), and Brain Injury (BI)—will be eliminated. Instead, DHS will categorize people with disabilities into two waivers based solely on their living situation:

1. Individual Supports Waiver, for those receiving services in their own homes or family homes.
2. Residential Supports Waiver, for those receiving services in group homes and other congregate care settings.

B. Support Range and Individual Budget Model

Individuals will be assigned to a support range based on their MnCHOICES assessment, which considers behavioral and medical issues. Budgets will be individualized based on these support ranges, considering the person's need and living setting.

C. Legislative Approval and Implementation Timeline

Phase I of Waiver Reimagine was approved by the Minnesota legislature in 2019, simplifying the service menu. Phase II, approved in June 2021, includes the two-waiver system and individualized budget

methodology. If the federal Centers for Medicare & Medicaid Services (CMS) approve, the two waivers could be effective by July 1, 2027.

Significant Problems with Minnesota DHS's Waiver Reimagine Plan

Providing individual budgets that are twice as much for those living in residential settings versus those living independently violates the Olmstead Promise (<https://www.olmsteadrights.org>) and ADA (<https://www.ada.gov/topics/community-integration/>) integration mandate as well as Minnesota's Independent Living First policy (<https://www.revisor.mn.gov/statutes/cite/256B.4905>).

- This may cause forced institutionalization because waiver recipients will not have enough budget to live in their own homes. Waiver Reimagine promotes an “institutional bias.”
- Justifying larger budgets for residential providers perpetuates the status quo of erasing the administration, effort & stress individuals and their families experience and devalues the work of care staff in the least restrictive setting.

A. Budget Inequities: The proposed two-waiver system creates stark financial inequities. Budget ranges for high-needs individuals living in their own or family homes are less than half of those for similar individuals in group homes. Providers will receive significantly more funding for individuals in group homes, benefiting from economies of scale and additional rent payments, while individuals in their own homes will face reduced budgets that fail to cover necessary services.

B. Reliance on Unpaid Care: The Individual Supports Waiver assumes that unpaid, natural caregivers will fill care gaps. This expectation is unsustainable as caregivers age or pass away, and it overlooks the preferences of adults with disabilities who may desire non-family support for autonomy and privacy.

C. Overnight Services Exclusion: Individuals in their own or family homes will be denied overnight care. Those requiring 24-hour care will be pushed towards group homes, restricting their choice to live independently.

D. Provider Exodus: Due to low budget ranges for the Individual Supports Waiver, many providers are likely to exit the business of serving individuals in their own homes, focusing instead on congregate care where higher profits are anticipated. This trend limits the options for individuals who prefer or need to live independently.

E. Impact on Families: Families who have invested in independent living solutions for their loved ones will be penalized by a system that undermines their efforts, potentially forcing their loved ones into congregate care settings.

F. Quality of Life Considerations: The Olmstead Quality of Life Survey highlights that individuals have better outcomes when not in institutionalized settings. Waiver Reimagine's design fails to ensure adequate funds for individuals to live where they choose, threatening their quality of life and community integration.

G. Cultural Considerations: Waiver Reimagine does not adequately account for the preferences of various ethnic, racial, cultural, and faith communities, which often prefer to care for loved ones within their own communities.

H. Risk of Institutionalization: Group homes often operate as mini-institutions, with residents experiencing neglect and isolation. Minnesota's lack of adequate protections for individuals alleging maltreatment exacerbates these risks. Waiver Reimagine's trend towards larger facilities echoes a move back towards institutionalization.

Our Recommendations:

The best waiver system for people with disabilities is one that prioritizes individual needs, promotes choice, ensures equity, and provides sufficient funding and support across various living settings. An optimal waiver system is dynamic and responsive to the evolving needs of people with disabilities. It should aim to provide a balance of flexibility, equity, and support, ensuring that all individuals can lead fulfilling and independent lives within their communities. Continuous evaluation and adaptation, informed by feedback from the disability community, are essential to maintaining and improving such a system.

An ideal waiver system would include the following:

1. Person-Centered Planning

- **Individualized Assessments:** Regular and comprehensive assessments to determine each person's unique needs and preferences.
- **Choice and Control:** Empowering individuals to make decisions about their own care, including selecting services, providers and where they live.

2. Adequate and Equitable Funding

- **Sufficient Budgets:** Ensuring budgets are adequate to cover necessary supports and services, regardless of living setting.
- **Equity in Funding:** Fair distribution of resources between those living in their own homes, family homes, and congregate care settings.

3. Comprehensive Service Options

- **Range of Services:** A wide array of services and supports, including in-home care, respite, employment support, transportation, and community integration.
- **Flexible Service Models:** Options for self-directed services where individuals can manage their own care budgets and hire providers directly.

4. Support for Unpaid Caregivers

- **Respite Care:** Providing regular and emergency respite care for family caregivers.
- **Training and Support:** Offering training and support resources for unpaid caregivers to enhance their capacity and well-being.

5. Integrated Care Settings

- **Community-Based Services:** Prioritizing services that enable individuals to live in their own homes and communities.
- **Support for Transition:** Assisting individuals who wish to move from congregate settings to more integrated living arrangements.

6. Quality Assurance and Safeguards

- **Monitoring and Oversight:** Regular oversight to ensure quality and safety in service delivery.
- **Protection Against Abuse:** Strong safeguards and prompt investigation of abuse, neglect, or exploitation allegations.

7. Cultural Competence and Inclusivity

- **Respect for Diversity:** Recognizing and respecting cultural, ethnic, and community preferences in care planning and service delivery.
- **Tailored Services:** Providing services that are sensitive to cultural, linguistic, and individual preferences.

8. Advocacy and Feedback Mechanisms

- **Stakeholder Involvement:** Including individuals with disabilities and their families in policy-making and program development.
- **Feedback Channels:** Establishing robust channels for feedback and grievances to continuously improve the system.

9. Coordination Across Systems

- **Integrated Services:** Coordinating between healthcare, social services, housing, and employment systems to provide holistic support.
- **Simplified Processes:** Streamlining administrative processes to reduce bureaucratic barriers and ensure ease of access to services.

Legislative Recommendation:

In response, Disability Voice Advocates (DiVA) has introduced SF2215 and HF2038. DiVA's bills include developing a single-waiver system that allocates budgets based on need, regardless of living setting, and establishing a Legislative Taskforce to study the Waiver Reimagine proposal and related factors, such as the MNChoices 2.0 assessment.

Kristine Sundberg, Executive Director

Elder Voice Advocates & Disability Voice Advocates

Pronouns: she/her/hers

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www.eldervoicefamilyadvocates.org

Dear Chair Schomacker & Committee Members,

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I urge you to intervene on behalf of Minnesotans with disabilities by supporting House File 2038 and Senate File 2215. These bills will establish a Waiver Reimagine Task Force and ensure that budgets are based on an individual's needs rather than their living situation. Protecting choice, independence, and equitable funding is essential to upholding disability rights.

Please take action to prevent the harm Waiver Reimagine will cause. Thank you for your time and your commitment to the disability community.

Sincerely,
Joseph Wong
4779 198th Cir W.
Farmington, MN 55024
651-276-6125
joewmsn@msn.com

Please oppose the current Waiver Reimagine plan! I am the mother of a young woman with autism, an intellectual disability, and an anxiety disorder. As an attendee at a conference on disabilities, I will never forget hearing the speaker say he 'knew my greatest wish - to live just one day longer than my child with a disability.' The audience fell silent with the weight of those words. The truth of it almost brought me to tears. The most serious work of my life has been to teach, nurture, encourage, and support my daughter so that she could live in a safe place of her choosing, as independently as possible, with the support she needs. At age 33, she has been living in a one-bedroom apartment for four years now and that has been possible because of staff support paid for by her waiver. Today my daughter is thriving - she is living in her community in a place she loves and where she receives needed support.

Change is especially difficult for her and can cause intense anxiety. The possibility of her having to move out of a home she loves to a congregate care setting (which would actually be more expensive for the state) because of the Waiver Reimagine budget cuts would be truly devastating to her mental health and quality of life.

Importantly, the Olmstead Promise and Minnesota Independent Living First Policy have promised that people with disabilities have a choice to live in the place of their choosing in their communities . Waiver Reimagine, in its current form, does not honor that. Please intervene. Please support the Waiver Reimagine Reform bills - SF2215 and HF2038.

Thank you.

Jane Steinhagen

5825 W 61st Street

Edina, MN. 55436

612-483-5803

steinhagenjane@gmail.com

Dear Chair Schomacker and Committee Members,

With extensive experience in the social services field, as the parent of a child who relies on waived services, and as someone who has supported countless loved ones and clients who depend on these critical resources, I feel a deep and personal responsibility to oppose the Waiver Reimagine Plans and Governor Walz's proposed waiver funding cuts. These changes jeopardize the vital support systems that empower not only my child but also countless others with disabilities to lead fulfilling and independent lives.

Over the years, I have witnessed firsthand the transformative impact waived services have on individuals with disabilities. My loved ones and former clients have flourished in environments where they can make choices about their care, live independently, and fully engage with their communities. Waived services not only provide essential assistance but also foster dignity and autonomy, in alignment with the ADA integration mandate and Minnesota's Olmstead Plan.

The proposed Waiver Reimagine Plans would eliminate critical options, severely restrict provider choice, and increase the likelihood of individuals being funneled into more restrictive and costly institutional settings. This represents a profound step backward for disability rights and contradicts the principles of inclusion and equity that Minnesota strives to uphold.

I urge you to support House File 2038 and Senate File 2215, which would create a Waiver Reimagine Task Force to ensure that budgets are based on individual needs rather than living situations. Protecting choice, independence, and fair funding is essential to preserving the rights of people with disabilities and preventing the harmful consequences these changes would bring.

Please take action to safeguard the future of Minnesotans with disabilities by reconsidering these plans. Thank you for your time and your commitment to our state's most vulnerable communities.

Sincerely,

Tanjanina Saka

March 16, 2025

Dear Chair Schomacker & Committee Members,

I am writing in support of HF2038 and SF2215, the bill modifying requirements of Waiver Reimagine. The original plan would eliminate critical waiver options, restrict provider choice, and force individuals with disabilities into more costly congregate institutional settings. This directly contradicts the ADA integration mandate and Minnesota's Olmstead Plan, which prioritize community-based services and individual choice. This would be a huge step backward for disability rights.

My 7-year-old daughter, Macy, has a rare neurodevelopmental disorder. She has profound physical and intellectual disabilities and is nonspeaking. Macy is also medically complex, has multiple medical diagnoses, and at times her condition can change within seconds. She will always require 24 hour care. Macy also loves music, dancing, her family, and her caregivers. Her laugh is contagious and her smile will melt your heart. Our family loves Macy exactly as she is, and we want her to continue to live at home and be cared for by us, and by caregivers who are genuinely concerned about her well-being, happiness, and growth.

Waiver Reimagine, as currently written, would force us to place Macy into a congregate care facility, which is essentially institutionalized care. Macy's budget in a congregate care facility would be several times the budget for keeping her at home, living with people who love her. How is it acceptable to tie a budget to a location rather than to a human being? This concept is reprehensible, unethical, and it directly violates the Olmstead Plan. Additionally, it would cost taxpayers significantly more than what Macy receives on her CAC waiver, living at home with her family, where we all **choose** for her to live. To put it simply, if a person is forced to live where they don't want to live *and* it will cost more money, there is no win. We can, and must, do better.

I urge you to intervene on behalf of Macy and all Minnesotans with disabilities, by supporting HF2038 and SF2215. These bills will establish a Waiver Reimagine Task Force and ensure that budgets are based on an individual's **needs** rather than their living situation. Protecting choice, independence, and equitable funding is essential to upholding disability rights.

Please take action to prevent the harm Waiver Reimagine will cause. Thank you for your time and your commitment to the disability community.

Sincerely,

Julie McDonell
11377 Louisiana Ave. S.
Bloomington, MN 55438
952-215-7550
j_wennerstrom@hotmail.com

Dear Chair Schomacker & Committee Members,

I strongly oppose Waiver Reimagine Plans and Gov Walz intention to cut waiver funding.

These plans eliminate critical waiver options, restrict provider choice, and forces individuals with disabilities into more costly congregate institutional settings and directly contradicts the ADA integration mandate and Minnesota's Olmstead Plan, which prioritize community-based services and individual choice. These policies are a step backward for disability rights and must be reconsidered.

My husband has a Traumatic Brain Injury. He has been able to work part time for many years. This past year his short term memory deficits have made that increasingly difficult. He was evaluated by VRS and it was determined that he can no longer work in the community. I have recently become his paid caregiver on the Medicaid waiver. He is now doing self-employment, working twice a month in order to keep his healthcare. This would also end with cuts to the Medicaid program. Any cuts to this program would devastate our family.

I urge you to intervene on behalf of Minnesotans with disabilities by supporting House File 2038 and Senate File 2215. These bills will establish a Waiver Reimagine Task Force that will ensure budgets are based on an individual's needs rather than their living situation. Protecting choice, independence, and equitable funding is essential to upholding disability rights.

Please take action to prevent the harm Waiver Reimagine will cause. Thank you for your time and your commitment to the disability community.

Sincerely,

Donna Kneeland

330 Park Ave, Big Lake, MN 55309

763-898-6043]

donnalk08@gmail.com

Dear Chair Schomacker & Committee Members,

I strongly oppose Waiver Reimagine Plans and Gov Walz intention to cut waiver funding. These plans eliminate critical waiver options, restrict provider choice, and forces individuals with disabilities into more costly congregate institutional settings and directly contradicts the ADA integration mandate and Minnesota's Olmstead Plan, which prioritize community-based services and individual choice. These policies are a step backward for disability rights and must be reconsidered.

I urge you to intervene on behalf of Minnesotans with disabilities by supporting House File 2038 and Senate File 2215. These bills will establish a Waiver Reimagine Task Force that will ensure budgets are based on an individual's needs rather than their living situation. Protecting choice, independence, and equitable funding is essential to upholding disability rights. Please take action to prevent the harm Waiver Reimagine will cause.

Thank you for your time and your commitment to the disability community.

Sincerely,

Mona Albatouti

612.425.8692

6205 Halifax Ave South

Edina, MN 55424

Dear Chair Schomacker & Committee Members,

I strongly oppose Waiver Reimagine Plans and Gov Walz intention to cut waiver funding.

These plans eliminate critical waiver options, restrict provider choice, and forces individuals with disabilities into more costly congregate institutional settings and directly contradicts the ADA integration mandate and Minnesota's Olmstead Plan, which prioritize community-based services and individual choice. These policies are a step backward for disability rights and must be reconsidered.

Having waiver funding has enabled us as parents to provide a support system for our disabled child in our home where he is most comfortable. It provides us access to services to enrich his life such as adaptive swim lessons which we are looking forward to starting. Waiver Reimagine would reduce our ability to continue to provide these services.

I urge you to intervene on behalf of Minnesotans with disabilities by supporting House File 2038 and Senate File 2215. These bills will establish a Waiver Reimagine Task Force that will ensure budgets are based on an individual's needs rather than their living situation. Protecting choice, independence, and equitable funding is essential to upholding disability rights.

Please take action to prevent the harm Waiver Reimagine will cause. Thank you for your time and your commitment to the disability community.

Sincerely,

Lynette Anderson

12333 Riverview Rd,

Eden Prairie, MN 55347

952-356-7451

Lm_coelho@yahoo.com

Dear Chair Schomacker & Committee Members,

I strongly oppose Waiver Reimagine Plans and Gov Walz intention to cut waiver funding.

These plans eliminate critical waiver options, restrict provider choice, and forces individuals with disabilities into more costly congregate institutional settings and directly contradicts the ADA integration mandate and Minnesota's Olmstead Plan, which prioritize community-based services and individual choice. These policies are a step backward for disability rights and must be reconsidered.

My adopted son with FASD, who is now age 24 has been living in a subsidized apartment for over 3 years. He is thriving as he feels independent. He has a job that he drives to and is doing his best to be a contributing member of society. Because of his care waiver supporting with Independent living skills as well as someone to help him keep his home clean and organized and a having a behavioral analyst that helps him to manage his feelings and thoughts and receiving balanced meals bi-weekly he is able to make his life and others around him better. He is an empathic person that assist others in his apartment building.

Without his Waiver supports he will not be able to continue down this path of being a productive member of society.

I urge you to intervene on behalf of Minnesotans with disabilities by supporting House File 2038 and Senate File 2215. These bills will establish a Waiver Reimagine Task Force that will ensure budgets are based on an individual's needs rather than their living situation. Protecting choice, independence, and equitable funding is essential to upholding disability rights.

Please take action to prevent the harm Waiver Reimagine will cause. Thank you for your time and your commitment to the disability community.

Sincerely,

Christine Fisher
150 Albert St, Loretto, MN 55357
612-741-9233
Chrisallanfisher@gmail.com

Subject: Oppose Waiver Reimagine – Support HF 2038 & SF 2215

Dear Chair Schomacker & Committee Members,

I strongly oppose Waiver Reimagine Plans and Gov Walz intention to cut waiver funding.

These plans eliminate critical waiver options, restrict provider choice, and forces individuals with disabilities into more costly congregate institutional settings and directly contradicts the ADA integration mandate and Minnesota's Olmstead Plan, which prioritize community-based services and individual choice. These policies are a step backward for disability rights and must be reconsidered.

I am caring for four disabled children, we already struggle to find and pay for adequate support. My priority is to keep them at home and meet their needs. Reducing funding would make it impossible.

I urge you to intervene on behalf of Minnesotans with disabilities by supporting House File 2038 and Senate File 2215. These bills will establish a Waiver Reimagine Task Force that will ensure budgets are based on an individual's needs rather than their living situation. Protecting choice, independence, and equitable funding is essential to upholding disability rights.

Please take action to prevent the harm Waiver Reimagine will cause. Thank you for your time and your commitment to the disability community.

Sincerely,

Amanda Morcomb (she/her)

Dear Chair Schomacker & Committee Members,

I strongly oppose Waiver Reimagine Plans and Gov Walz intention to cut waiver funding.

These plans eliminate critical waiver options, restrict provider choice, and forces individuals with disabilities into more costly congregate institutional settings and directly contradicts the ADA integration mandate and Minnesota's Olmstead Plan, which prioritize community-based services and individual choice. These policies are a step backward for disability rights and must be reconsidered.

I write as a multiply disabled, waived individual. I don't have family or other social supports who are willing or able to help care for me, and until recently lived alone. Waiver services have helped keep me alive, from providing meals, to assisting in transportation with my appointments. The waiver directly helps me remain a member of my community. Cutting funding would be cutting me off from my community, as well as sentencing me back into a very poor quality-of-life I lived before I qualified for the waiver and began receiving services.

I urge you to intervene on behalf of Minnesotans with disabilities by supporting House File 2038 and Senate File 2215. These bills will establish a Waiver Reimagine Task Force that will ensure budgets are based on an individual's needs rather than their living situation. Protecting choice, independence, and equitable funding is essential to upholding disability rights.

Please take action to prevent the harm Waiver Reimagine will cause. Thank you for your time and your commitment to the disability community.

Sincerely,

Morgan Waite

2627 Malmquist Ave, Red Wing MN 55066

(602) 388-0785

alumirust@gmail.com

Subject: Oppose Waiver Reimagine – Support HF 2038 & SF 2215

Dear Chair Schomacker & Committee Members,

I strongly oppose Waiver Reimagine Plans and Gov Walz intention to cut waiver funding.

These plans eliminate critical waiver options, restrict provider choice, and forces individuals with disabilities into more costly congregate institutional settings and directly contradicts the ADA integration mandate and Minnesota's Olmstead Plan, which prioritize community-based services and individual choice. These policies are a step backward for disability rights and must be reconsidered.

I am 5q years old and served Saint Paul Public Schools for nearly 25 years before multiple Sclerosis took me out of the classroom and left me 100% disabled. When did disabled require a citizen to be impoverished???

These programs are essential to me and my children's lives. Do not blow up our lives. Living disabled here is hard.

I urge you to intervene on behalf of Minnesotans with disabilities by supporting House File 2038 and Senate File 2215. These bills will establish a Waiver Reimagine Task Force that will ensure budgets are based on an individual's needs rather than their living situation. Protecting choice, independence, and equitable funding is essential to upholding disability rights.

Please take action to prevent the harm Waiver Reimagine will cause. Thank you for your time and your commitment to the disability community.

Sincerely,
Sarah Wellington
1810 Ivy Ave East
Saint Paul MN 55119
651 442 3497
Swell2205@gmail.com

Dear Chair Schomacker & Committee Members,

I strongly oppose Waiver Reimagine Plans and Gov Walz intention to cut waiver funding.

These plans eliminate critical waiver options, restrict provider choice, and forces individuals with disabilities into more costly congregate institutional settings and directly contradicts the ADA integration mandate and Minnesota's Olmstead Plan, which prioritize community-based services and individual choice. These policies are a step backward for disability rights and must be reconsidered.

We have a severely disabled 18 year old daughter who lives with us, and Medicaid and her DD Waiver have saved us from being destitute as a family. We very much appreciate what Minnesota has generously offered to disabled people in the past, and hope that the future can continue to support families with disabilities in appropriate and helpful ways.

I urge you to intervene on behalf of Minnesotans with disabilities by supporting House File 2038 and Senate File 2215. These bills will establish a Waiver Reimagine Task Force that will ensure budgets are based on an individual's needs rather than their living situation. Protecting choice, independence, and equitable funding is essential to upholding disability rights.

Please take action to prevent the harm Waiver Reimagine will cause. Thank you for your time and your commitment to the disability community.

Sincerely,

Katherine Wallace

Brooklyn Park MN

Dear Chair Schomacker & Committee Members,

I strongly oppose Waiver Reimagine Plans. This plan eliminates critical waiver options, restricts provider choice, and forces individuals with disabilities into more costly congregate institutional settings. Waiver Reimagine directly contradicts the ADA integration mandate and Minnesota's Olmstead Plan, which prioritize community-based services and individual choice. This policy is a step backward for disability rights and must be reconsidered.

My severely autistic 18 year old son is very complicated and not very many places know how to take care of him.

He has been in two Crisis homes where the first one he was sexually abused by another teen because they left him.

The next one there was neglect, and they placed him with another young girl in the home and we know that severely autistic boys going through hormonal changes don't understand their bodies. Definitely not his fault but he was humiliated and place blame because he reached out to the little girl and he never even touched her and they blamed him just like they're doing now as he's being criminally charged because he ran off when he had three on one caretakers in a DHS foster home where they could not take care of him as well.

He jumped out of the window twice, trying to get back home because he was so sad where he was staying.

Every weekend I would take him and he would scream "please don't take me back there!!"

He was physically abused at the DHS home and I immediately asked for his discharge and they retaliated and that's how he was criminally charged.

Out of four reports of abuse, none of them were held accountable and most were screened out.

I don't ever want my son to be in one of those places again. The disabled want to be with their family members where they are taken care of.

Why are they supported more in the congregate settings when we need help in the homes taking care of them and we are working very hard to do it?

In the DHS home where he was placed with the help of CPS and me signing a placement agreement when I never was neglectful, they reconstructed the home to meet his needs and had at least 10 caretakers for him with 3:1 Care during the day and 2:1 care at night and still he managed to jump out of the window while they were sleeping. He also had a Behavioral Consultant.

Why are we paying them \$35-\$50 an hour with benefits for them to sleep on the job?

Why am I struggling to get 6.5 hours of PCA day that's not even available because the waiver doesn't have enough money in it to support it?

After they held my son in the hospital for seven months and caused him to decline after I went above and beyond to get him medical care outside of AMA and I was charged for taking care of him.

It's totally unfair for them to continue to hurt him like this and not give us support that we need.

The hospitals County Waiver system and CPS needs to be sued, but I can't even get an attorney anymore because there's so much corruption.

They (Caryn Roddy Hennepin county Waivered services) tried to ship my son out of state every day he was held in that hospital. She also cried out that she didn't think he gained so much weight when it was all documented on paper in court in front of the judge. My son was declining with his respiratory status and gaining 150 pounds and she's trying to protect the county.

They don't care about the disabled and never could like we do as the family members.

They seem to think that a DHS foster home was more sufficient than a Crisis home. They are the same.

I urge you to intervene on behalf of Minnesotans with disabilities by supporting House File 2038 and Senate File 2215. These bills will establish a Waiver Reimagine Task Force and ensure that budgets are based on an individual's needs rather than their living situation. Protecting choice, independence, and equitable funding is essential to upholding disability rights.

Please take action to prevent the harm Waiver Reimagine will cause. Thank you for your time and your commitment to the disability community.

Nobody wants us speak up for our rights and for my son who cannot speak.

Why do you not want me to testify on my son's behalf?

Everything I speak of is truth.

But we continue to be traumatized and humiliated.

I will not keep silent.

The corruption needs to be exposed.

Please stop the hurt.

He has been through enough trauma and has traumatic outburst and psychological problems because he was held in four walls for so long. He cannot go into a congregate setting, and he doesn't deserve to go back into that when they have failed him so many times.

Sincerely,

Nadine Monge c/o Matthew Monge

4022 Thomas Ave N

Mpls , MN 55412

612-584-8360

nadinemonge@yahoo.com

Personal testimony on 3/19/25 Waiver Reimagine Status Update from DHS

Lisa Vala

3/19/25

Chair Schomacker & members of the committee,

My name is Lisa Vala and my daughter, Amanda, is a traditional DD waiver recipient who lives in her Own Home and will be severely & adversely affected by Waiver Reimagine. The budget inequities inherent in DHS's Waiver Reimagine will cut her current waiver budget in HALF. Waiver Reimagine bases budgets on where a person lives, providing generous budgets to those living in residential care and about half that budget amount to people living independently or in their Own Home. HALF of Amanda's current budget will not be adequate for services needed to live independently with supports and she will need to move to more expensive congregate residential care.

Here are the numbers:

Today, Amanda's residential supports cost \$190/day. If she is forced to move into a residential setting, that cost will rise to \$335/day. This is a 50% increase to the state for her care – where she would be forced to live in a setting NOT of her choosing which violates her rights.

>Supporting people to live in their Own Homes is supporting choice AND is more cost effective than providing care in residential settings. Waiver Reimagine budgets should NOT be based on where a person lives.

Reinforcing the above point with numbers at the state level, DHS IS aware that there are major flaws in their Waiver Reimagine Plan and is choosing to ignore them. According to the HRSI Fiscal Impact Study, which DHS commissioned,

- a. 12% of waiver recipients would experience budget cuts (8,400 people in MN!!)
- b. 1:5 DD, 1:2 CAC will have budget cuts
 - All these cuts while people's needs are unchanged?
- With these statistics, is this budget framework really working?
- How many lives will be disrupted?
- Will DHS be able to handle the massive requests for appeals and how much will that cost taxpayers?

>DHS needs to ensure the Waiver Reimagine budgets are not reduced if there is no change in need. Budgets based on Need, not living setting are needed.

Source: HRSI Recalibration of Provisional Individual Budgets for Adult – Dec. 2018

<https://acrobat.adobe.com/id/urn:aaid:sc:va6c2:fd076d95-9150-464f-af65-bcf60d748e90>

Lastly, I also want to make you aware of the major rulings and policies that Waiver Reimagine clearly violates. At the federal level, the Olmstead Promise – 1999 Supreme Court case that

establishes a person's right to needed supports to live in the community. At the state level, Minnesota's Independent Living First policy which is in statute(256B.4905) & is based on the idea that people should be able to live independently in a non-provider-controlled setting.

>Because Waiver Reimagine has an institutional bias, it violates both important policies.

Please – we have to get this right for the 70,000 Minnesotans who rely on waived services. HF 2038 requires DHS to base waiver budgets on NEED and not on where a person lives and it requires DHS to seek legislative approval before submitting their plan to CMS. In addition, we are seeking a legislative taskforce to study the problems. This taskforce will develop a roadmap for waivers that will serve us well into the future.

Please support HF 2038 and help us move it forward.

Thank you for reading my testimony.

Lisa Vala
4615 Juneau Lane N
Plymouth MN 55446
Lisa_v3@yahoo.com
612.743.7348

Dear Chair Schomacker & Committee Members,

I would like to provide my viewpoint and story as well as highlight that I strongly oppose the current approach to Waiver Reimagine(d) and DO SUPPORT HF2038 and SF2215 to establish a task force to provide stakeholder input and direction.

This plan eliminates critical waiver options, restricts provider choice, and forces individuals with disabilities into more costly congregate institutional settings. Waiver Reimagine directly contradicts the ADA integration mandate and Minnesota's Olmstead Plan, which prioritize community-based services and individual choice. This policy is a step backward for disability rights and must be reconsidered.

I have three (young) adult daughters with Down Syndrome. They each currently have a DD waiver and receive services through the CDCS option. I want to insure they ALWAYS have choices to live the life they choose – and are not forced (economically) into making decisions that are not in their best interests or not of their choosing. Budgets and support should ALWAYS be based on a person's need and not their living situation. I had a close relative who spent a significant portion of his life in Minnesota institutions; I visited him and that is NOT where we want to go. We need to maximize freedom, choice and stay focused on providing the maximum amount of individual choice for those who need extra supports.

I urge you to intervene on behalf of Minnesotans with disabilities by supporting House File 2038 and Senate File 2215. These bills will establish a Waiver Reimagine Task Force and ensure that budgets are based on an individual's needs rather than their living situation. Protecting choice, independence, and equitable funding is essential to upholding disability rights.

Please take action to prevent the harm Waiver Reimagine will cause. Thank you for your time and your commitment to the disability community.

Sincerely,
Lee Shervheim
6435 Stella Circle
Lino Lakes, MN 5038
612.271.7836
lshervheim@comcast.net

Dear Chair Schomacker & Committee Members,

I strongly oppose Waiver Reimagine. This plan eliminates critical waiver options, restricts provider choice, and forces individuals with disabilities into more costly congregate institutional settings. Waiver Reimagine directly contradicts the ADA integration mandate and Minnesota's Olmstead Plan, which prioritize community-based services and individual choice. This policy is a step backward for disability rights and must be reconsidered.

I live in rural Minnesota and my 29 year old son with Angelman Syndrome (IDD) lives at home with us. The way Waiver Reimagine is structured will force him to leave his community for institutional style settings, which is not in his best interest. We as a state moved away from this for people, decency, and for human rights. Please don't allow Waiver Reimagine to bring this state and my son backward.

I urge you to intervene on behalf of Minnesotans with disabilities by supporting House File 2038 and Senate File 2215. These bills will establish a Waiver Reimagine Task Force and ensure that budgets are based on an individual's needs rather than their living situation. Protecting choice, independence, and equitable funding is essential to upholding disability rights.

Please take action to prevent the harm Waiver Reimagine will cause. Thank you for your time and your commitment to the disability community.

Sincerely,
Dawn D. Bly
704 3rd Street NE
Fosston, MN 56542
218-280-0575
ddbly@icloud.com

Subject: Oppose Waiver Reimagine – Support HF 2038 & SF 2215

Dear Chair Schomacker & Committee Members,

I strongly oppose Waiver Reimagine. This plan eliminates critical waiver options, restricts provider choice, and forces individuals with disabilities into more costly congregate institutional settings. Waiver Reimagine directly contradicts the ADA integration mandate and Minnesota's Olmstead Plan, which prioritize community-based services and individual choice. This policy is a step backward for disability rights and must be reconsidered.

Kylen Ware is a 30-year-old man with profound physical, intellectual, medical, and behavioral disabilities who requires around the clock care. Kylen can never be left alone. He must be repositioned, diapered, fed through a Jejunostomy tube, showered daily, and transferred with a ceiling lift that we have throughout our house. Kylen is non-verbal and lives with chronic pain. I love and adore my son and want him to always live at home with me. Waiver Reimagine changes will ruin his life and make our living arrangement impossible. Waiver reimagine, as designed will force me to place Kylen in congregate institutional care; group home or Community Residential Services Facility that will cost taxpayers three to four times more than what he receives on a CAC waiver with CDCS living at home with me.

I urge you to intervene on behalf of Minnesotans with disabilities by supporting House File 2038 and Senate File 2215. These bills will establish a Waiver Reimagine Task Force and ensure that budgets are based on an individual's needs rather than their living situation. Protecting choice, independence, and equitable funding is essential to upholding disability rights.

Please take action to prevent the harm Waiver Reimagine will cause. Thank you for your time and your commitment to the disability community.

Sincerely,

Kathy Jo Ware
240 11th Avenue South
South Saint Paul, MN 55075
651-261-2587
kitkat24@comcast.net