

## **Letter of Support for House HHS Omnibus**

Dear Chair Liebling, Chair Schultz, and Members of the Committee:

The Minnesota Council on Disability appreciates your inclusion of the following provisions into the House HHS Omnibus bill and requests that you advocate for these to be included through conference committee:

- 1. Reducing Health Disparities Among People with Disabilities (Article 1; Sec. 44)
  - Increasing our state's capacity to support people with disabilities through increased data collection would provide much-needed data to create evidence-based decisions for future public policy decisions.
- 2. Funding a Long COVID support and monitoring program (Article 1; Sec. 34)
  - Long COVID is a new mass-disabling event that needs further study, support, and monitoring.
- 3. Unrestricted Access to Services for the Diagnosis, Monitoring, and Treatment of Rare Diseases (Article 7; Sec. 6).
  - It is far too hard for people with rare diseases to receive treatment. It is expensive for patients and for insurers. Allowing patients to see specialists quicker will result in better health outcomes, better care, and faster identification.
- 4. Moving the Rare Disease Advisory Committee (Article 8; Sec. 2).
  - Moving RDAC helps the committee fulfill its original legislative purpose, which includes advocacy and advisory roles, which it cannot currently do while housed at the University of Minnesota.
- 5. Minnesota Council on Disability's increased funding beginning in FY 23 (Article 10; Sec. 5).
  - MCD has several technical and policy-related funding needs to track data, results, increase
    policy expertise, and grow its capacity. This increased funding is critical to help MCD meet its
    legislatively mandated duties.

We appreciate your support of these provisions and your partnership in supporting the lives of Minnesotans with disabilities.

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