

HOUSE RESEARCH

Bill Summary

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1 Individual providers of direct support services.

Subd. 1. Definitions. Provides definitions for Public Employment Labor Relations (PELRA) purposes through cross reference to medical assistance law definitions for the following terms: direct support services, individual provider, participant, and participant's representative.

Subd. 2. Rights of individual providers and participants. Provides that for the purposes of PELRA, individual providers are considered executive branch state employees employed by the commissioner of MMB. Individual providers, however, are not public employees for any other purpose. Individual providers are covered under these provisions regardless of part-time or full-time employment status. Specifies that compensation rates, payments and practices, fringe benefits (excluding retirement), grievance procedures, funding for training and required orientation programs are subject to negotiation.

States that no agreement or arbitration award interferes with participant rights to select, hire, supervise or terminate the employment of individual providers, to manage individual service budgets, or to receive direct support services from providers not referred through a state registry. Also sets forth that:

- agreements and arbitration awards must be submitted for legislative approval or rejection;
- individual providers may not strike;
- the only appropriate unit for individual providers shall be a statewide unit of

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individual providers.

- Beginning July 1, 2013, an employee organization may show the commissioner of mediation services that at least 500 individual providers support representation; subsequently the commissioner of human services must provide to the organization the most recent list of individual providers compiled by the commissioner; and
- Beginning August 1, 2013, any employee organization seeking to represent providers may seek exclusive representative status. Representation elections are to be conducted by mail ballot; the election may be conducted upon presentation of a petition stating that at least 10 percent of the unit wishes to be represented by the petitioner. Individual providers eligible to vote in an election are those providers on the list compiled by the commissioner of DHS.

2 Quality self-directed services workforce.

Subd. 1. Findings and purpose.

Subd. 2. Definitions. Provides the following definitions:

- commissioner is the commissioner of human services;
- covered program means one that provides direct support services and includes the Community First Services and Supports program, Consumer Directed Community Supports, extended state plan personal care assistance services under home and community based waivers and under the alternative care program; the personal care assistance choice program and similar programs;
- direct support services means MA covered services; assistance with activities of daily living and instrumental activities of daily living; and similar programs and services for the elderly or disabled;
- individual provider means a person selected by and working under the direction of a participant in a covered program; it does not cover an employee from a workforce assembled, directed and controlled by a provider agency;
- participant means a person receiving direct support services through a covered program; and
- participant's representative is a legal guardian or person with authority to act on a participant's behalf.

Subd. 3. Quality self-directed services workforce council established.

Establishes a council made up of the DHS commissioner and gubernatorial appointees to advise the commissioner.

Subd. 4. Duties of council. Directs the council in consultation with the commissioner to assess the size, quality and stability of the provider workforce;

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assess and propose strategies to identify, recruit and train providers; advise the commissioner about orientation programs, training and education opportunities, and maintenance of public registries; provide advice about preventing neglect and abuse, compensation standards, benefits and other conditions of employment; and expanding access to quality services.

Subd. 5. Operation of covered programs. Directs that all covered programs operate under the requirements of this bill, however, participants may choose to receive services through a provider agency.

Subd. 6. Duties of Dept. of Human Services. Specifies that the commissioner, in consultation with the council, shall establish rates of compensations, payment terms and practices, benefits, provide for orientation programs for new providers, provide for training, maintain public registries, provide referrals, employment opportunities, and establish other appropriate terms and conditions of employment. The commissioner's authority over the items enumerated above is subject to the state's obligations to meet and negotiate with an exclusive representative.

By July 1, 2013, and then monthly thereafter, the commissioner must compile and maintain a list of names and addresses of individual providers who have been paid for providing direct support services within the previous six months. The list must be shared with the council and others as needed.