



May 11, 2022

To: Chair Abeler and Chair Utke, and Senators Benson, Koran, and Hoffman  
Chair Liebling and Chair Schultz, and Representatives Pinto, Gomez, and Albright  
Re: Senate File 4410

Dear Members of the Health and Human Services Omnibus Committee,

The Minnesota Consortium for Citizens with Disabilities (MNCCD) is a broad-based coalition of advocacy and provider organizations, as well as individual members, working to change public policy to improve the lives of people with disabilities through building awareness, providing education, and engaging in the community.

Thank you for prioritizing Minnesotans who have disabilities and for your steadfast commitment to enacting near, mid-term and long-term solutions to the pressing workforce crisis. We write to express our support of many provisions included in the Senate and House versions of SF 4410. Passing these critical targeted investments now will help avoid further collapse of essential disability supports and services. These investments will also promote safety, equity, access and individual choice for Minnesotans who have disabilities so that they may continue to authentically participate their communities.

We are especially grateful for investments in both the Senate and House bills that:

- Strengthen and stabilize the PCA/CFSS rate system by increasing the PCA rate implementation factor (House Article 9, Sections 21 and 36, Senate Article 1, Section 39)
- Lift the 40-hour cap for parents and spouses to provide PCA services (Senate Article 1, Sections 17, 36, and 38, House Article 9, Sections 15, 18, and 19)
- Allow PCAs to drive clients (House Article 9, section 9-12, Senate Article 1 Section 6, 7, 9, and 10)
- Allow more shared services in Medicaid services (Senate Article 1, Sections 21-22, 57-58; Article 2, Section 15; House Article 9, Sections 16-17, 23, 27, 33, and 34)
- Ensure equitable appeal rights from service terminations in own home settings (Senate Article 8, Sections 14 (paragraph (b)), 33; House Article 9, Sections 2 (paragraph (b)), 4)
- Convene a stakeholder group to create a Life Sharing service that increases options for people to choose where they want to live (Senate Article 1, Section 59; House Article 9, Section 31)
- Move the Rare Disease Advisory Council to the Minnesota Council on Disability (House Article 22, Sections 2, 20, Senate Article 3, Sections 1, 13, 15). Note that we prefer the Senate language on this similar provision
- Include home and community based settings in a Temporary Staffing Pool (Senate Article 16, Section 12; House Article 9, Section 28).

We are also strongly support important House provisions:

- Increasing Medicaid asset limit and income standard to align with other Medicaid eligibility pathways (Article 3, Sections 16, 17)
- Rare Disease Access (House Article 7, Sections 6, 7)
- Disability Services Accessibility Task Force (House Article 2, Section 32)



We strongly support the following Senate provisions:

- MA-EPD premium schedule changes (Senate Article 3, Section 3).
- CDCS budget exceptions (Article 1, Sections 15, 16).

MNCCD is grateful for your partnership and commitment to improving the lives of people who have disabilities. Thank you so much for making the most of this once in a generation opportunity that we have as a state to address the workforce crises that the pandemic has only made worse these last few years. Your action will help ensure that people who have disabilities can continue to choose where and with whom they want to live while building their best life in community.

Sincerely,

Melissa Haley  
Public Policy Co-Chair

Maren Hulden  
Public Policy Co-Chair