

THE BRAINS BEHIND SAVING YOURS.™

Minnesota-North Dakota Chapter
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Dear members of the HHS Conference Committee:

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The burden of dementia is large in our state, with over 99,000 Minnesotans living with Alzheimer's disease. We estimate this number will increase to 120,000 by 2025 – an increase of over 21%. While the state has a crucial role to play in supporting Minnesotans with Alzheimer's and other forms of dementia, it is important to remember there are 170,000 unpaid caregivers in Minnesota working on the frontlines and providing 155 million hours of unpaid care with an estimated value of \$3.326 billion.

With the end of session approaching, the Alzheimer's Association urges this committee to reach a compromise on this bill and include the following items that will benefit people living with dementia and their families in a final agreement.

Here is the item we support in the Senate Bill:

- **Nursing Facility Rate Increase:** Nursing facilities are an important, underfunded service that support people living with Alzheimer's and other forms of dementia. Additional funding is necessary to stabilize struggling programs and expand the elder care workforce.

Here are the items we support in the House Bill:

- **PACE Implementation:** One-time appropriation to fully implement the Program for All-Inclusive Care for the Elderly (PACE). This program creates a team of health care professionals to ensure that older adults get coordinated medical, social, nutritional, recreational and spiritual support.
- **Community Health Worker:** Investment to expand and strengthen community health worker programs. This is an important part of our workforce that bridge the gap between communities and health systems and are especially effective at engaging communities of color.

Here are the items we support in both bills:

- **Palliative Care:** Extends funding for the Palliative Care Advisory Council and legislation to modify the definition of palliative care.
- **Elderly Waiver:** Reimbursements under the elderly waiver do not reflect the costs of care. We appreciate the efforts both bills make to increase funding under the elderly waiver.

Concerns with Changes to Assisted Living Protections in Senate Bill: While we are sympathetic to the difficulties that small assisted living providers are facing, it is important to approach these challenges in a comprehensive manner and not make piecemeal tweaks that are confusing for residents and complicated to enforce. Assisted Living licensure was developed in response to serious lapses in resident safety and dignity. Any significant changes must be carefully reviewed and have broad community-based support, including policy changes that would impact residents at the hundreds of providers that would qualify as small under these changes.

- **Temporary Change in Staff Training:** Article 13, Section 22. While we recognize that this change to staff training is temporary, it goes beyond the Waiver allowed under CMS for nursing home staff with potential risks for residents. Under this change, unlicensed staff could perform nursing tasks without the supervision of a licensed nurse, unlicensed staff would not have to demonstrate competency before working directly with residents, and the legislation is vague about what topics would be included in the eight-hour training.
- **Changes in design and life-safety code requirements for AL with less than 6 residents: Article 13, Sections 10-12 and 14.** Small assisted living providers face real challenges, but we cannot support a blanket exemption from design and life-safety standards for programs with less than six residents.
- **Change in Variance Process: Article 13, Section 13:** It is our understanding that this policy language was specifically crafted to resolve the issues facing one provider. Many assisted living providers are in crisis and there is already a shortage, but we are wary of adjusting state law to meet the needs of one provider in the state.
- **No need for license changes when moving to new location: Article 13, Section 9.** Many small assisted living providers operate in rental units, placing them at greater risk of having to move while their license is valid. There may be a pathway to simplifying the regulatory burden for these moves, but this language goes too far and could place residents at risk of substandard living conditions.

Thank you for your efforts this session. While we were disappointed that legislation to fund a public awareness campaign on Alzheimer's and other dementias focusing on underserved communities was not included, there are many proposals that will benefit people with Alzheimer's and their families. We are happy to answer any questions you may have.

Sincerely,

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