



2023 Legislative Agenda

Minnesota Council on Disability (MCD)
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- State Employment and Retention of Employees with Disabilities
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More Detail

Pillar #1 – Increasing Disability Representation in State Government

Minnesota Council on Disability Capacity Building Funding

The Minnesota Council on Disability will request a capacity building budget increase of \$750,000 in FY2024 and then \$1,247,000 each fiscal year afterwards. This is on top of the current budget of \$1,038,000, resulting in a total yearly budget of \$2,285,000. This budget will result in increased capacity for the agency to serve Minnesotans with disabilities and advise the Minnesota legislative and executive branches. With stronger capacity, MCD will be a better representative & advocate for Minnesotans with disabilities in our state government. MCD will focus on increasing authentic community engagement and serving as a resource for Minnesotans with disabilities.

State Employment and Retention of Employees with Disabilities

The goal of this policy is to improve the hiring and retention of employees with disabilities at the state of Minnesota.

The bill that is introduced does the following:

- Codifies [Gov. Dayton Executive Order 14-14](#) & [Gov. Walz Executive Order 19-15](#)
- Improves the implementation and execution of the [Connect 700](#) program
- Provides direction to MMB regarding disability policies and employment
- Codifies and clarifies the roles and responsibilities of ADA coordinators in state agencies
- Standardizes the training of hiring managers and ADA coordinators across all state agencies
- Establishes a data collection and reporting structure on the advancement of employees with disabilities

We believe when more people with disabilities work for the state, policies that impact the disability community will have better disability representation. With more people disabilities in our state enterprise and at the policy/decision-making table, the more informed and impactful those policies will be.

Rare Disease Advisory Council On-Going Funding

The Rare Disease Advisory Council is a new state agency whose focus is to represent and advocate for Minnesotans with rare diseases. The council currently has a sunset provision for its funding at the end of FY2023. We support on-going funding for the council so they can continue their work to improve the lives of Minnesotans with rare diseases.

Pillar #2 – Improving the Lives of Minnesotans with Disabilities

MHRA Amendment to Include “Episodic Disabilities”

This proposal would clarify that “episodic disabilities” are covered under the Minnesota Human Rights Act. This policy idea resulted from a U.S. district court judge who ruled in *Josianne Mell vs. The Minnesota State*

Agriculture Society that because the MHRA does not have specific language around “episodic disabilities” but the Americans with Disabilities Act does, it means the MRHA is intentionally omitting “episodic disabilities” from state disability protections. This means the State of Minnesota cannot intervene in cases that involve episodic disabilities. Those with episodic disabilities must go to the federal government to have their cases heard. This proposal will bring the MHRA in line with the ADA and allow the state of Minnesota to assist Minnesotans with episodic disabilities in discrimination cases.

Increasing PCA Pay and Homecare Support Shortage

The shortage of home care workers is growing at an alarming rate in Minnesota. This has had a tremendous impact on those who rely on home care services because it inhibits their ability to have the security and stability in their lives that most people take for granted. Due to their inability to hire and retain quality home care workers they know and trust, their health, safety, and dignity needs have not been met. The time, energy, and challenges of finding workers leaves people with disabilities feeling very vulnerable, burdensome, and at times with little hope for the future. We support raising the pay for PCAs and creating viable career pathways for those who enter this profession. We believe that with better pay and retention incentives, more people will enter and stay in the profession, thus relieving the homecare worker shortage.

PCA Ability to Drive Clients While Working

Currently, Personal Care Assistants (PCAs) in Minnesota can only clock-in hours during which they are providing services to a person with a disability. However, if they need to drive their client to medical appointments or other personal errands, the time spent driving is not considered time during which a PCA can clock-in. PCAs provide critical services to the disability community and the current wage-earning process inhibits PCAs from providing more services that require travel by car. Allowing PCAs to consider time driving a client as on-the-clock expands access to services to the disability community. Restricting PCAs’ ability to transport clients directly contradicts the principles set forth by the Minnesota Olmstead Plan, adopted by the State of Minnesota in response to a legal settlement in 2011. The Olmstead Plan states that people with disabilities are entitled to live, learn, work, participate in their communities and enjoy life in the most integrated setting possible.

Rare Disease Insurance Access

Under most Minnesota-based health insurance policies, Minnesotans with rare diseases must first see doctors and specialists within their insurance network before being referred to see a specialist that is out-of-network. Due the nature of rare diseases there are likely few doctors in-network who may be aware of the disease, much less able to treat the condition. This requires a person with a rare disease to see many doctors and can be both a time and financial burden on a person with a rare disease. Updating Minnesota law to require health insurance plans to allow people with rare diseases to see rare disease specialists right away, regardless if they are in-network or not, would save time and reduce the financial burden on the person with the rare disease. Rare disease patients often have diagnostic odysseys, waiting an average of 6 years from onset of symptoms for an accurate diagnosis.

Accessible and Affordable Housing

For Minnesotans with disabilities, the housing shortage crisis is exacerbated by the lack of *accessible*, affordable housing. Accessible, affordable, and inclusive housing is nearly impossible to find for people with disabilities in Minnesota. The most accessible building code in Minnesota still makes a roll-in shower “optional” and there are currently no standards for sensory accessibility features for housing developments. This proposal would increase accessibility (make roll-in shower required) for the existing accessibility requirements (5% of units) and add sensory accessible units (5%) for housing projects utilizing Housing Infrastructure Bonds (HIBs).

MA-EPD Income & Asset Limit Increase

Medical Assistance for Employed Persons with Disabilities (MA-EPD) is a program that many Minnesotans with disabilities rely on for consistent and reliable access to healthcare. However, current income and asset limits restrict Minnesotans with disabilities on MA-EPD ability to earn and save money to ensure their financial security. The income and asset limits perpetuate poverty for people with disabilities by requiring spend downs or high premiums to access Medicaid. MA-EPD also restrict Minnesotans with disabilities from saving up for vehicles, housing, and other large purchases that help Minnesotans with disabilities live independent and financially secure lives. We believe that increasing income and asset limits for MA-EPD will improve the financial freedom for Minnesotans with disabilities, allow them to grow their careers, and have the chance to become business entrepreneurs.

Pillar #3 – Disability Partner Support

Inclusive Higher Education (MN Inclusive Higher Education Consortium)

Colleges and universities across the country are establishing post-secondary education options for students with intellectual disabilities (ID). While Minnesota has three colleges with the comprehensive transition and postsecondary (CTP) designation from the US Department of Education that are offering enrollment for students with intellectual disabilities, there is limited capacity and access across Minnesota. Inclusive higher education addresses the lack of equity and accessibility of higher education for people with ID in Minnesota—it expands enrollment options in MN and opens the door for federal financial aid for students who may not be able to attend college without financial support.

Hearing Aid Affordability (Minnesota Commission of the Deaf, DeafBlind, & Hard of Hearing)

For many Minnesotans who are deaf or hard of hearing, hearing aids are critical devices for access and communication. Unfortunately, hearing aids are not considered durable medical equipment (DMEs) and are not covered under many health insurance plans. Cochlear implants are covered at \$80-120k for the surgery, but a \$3k-6k pair of HAs are not covered or affordable and have significant barriers to access due to cost. We will advocate for the best avenue that can help bring those costs down or make hearing aids more accessible for Minnesotans, whether through an insurance mandate, tax credit, or a voucher program.

Expanding & Improving Public Transit Options (Metro Mobility & Autonomous Vehicles Pilots)

Many Minnesotans with disabilities rely on public transit and paratransit option to get to work, run errands, and be part of their communities. We will support the Department of Transportation, Metro Transit, and Metro Mobility to improve transit options in Minnesota for Minnesotans with disabilities. We will also support the innovative pilot programs such as autonomous vehicles in Greater Minnesota which seek expand public transit options far beyond the Twin Cities Metro area.

Accessible State Parks (MN Dept. of Natural Resources)

Minnesota is known for its beautiful and breathtaking state parks, however for Minnesotans with disabilities, many state parks are inaccessible. We will work with the Department of Natural Resources to improve access to state parks through various innovative programs such as the All-Terrain Track Chair rentals and upgrading trails and paths to be more accessible.

Study on Disabled-Owned Businesses (Department of Administration)

Our state policies allow for disabled-owned businesses to get additional preference as a vendor for the state in contracting or proposals. However, the kinds of disabilities that qualify is very narrow and focus only on physical disabilities. This program requires an economic study to prove the economic inequities for all preference programs (BIPOC-owned, women-owned, and disabled-owned). We support the Department of Administration's proposal to do a new study that expands the kinds of disabilities they study which would allow the state to expand the kinds of disabilities that benefit from this program and increase economic opportunity for disability-owned businesses.

SmART Proposal (Department of Administration)

The Department of Administration's Small Agency Resource Team (SmART) supports several of our agency's operations, including human resources, financial reporting, and more. Because of our close relationship with SmART, supporting their efforts benefits our agencies and other disability agencies we collaborate with, such as the Ombudsman for Mental Health and Developmental Disabilities (also a SmART client). SmART has two similar proposals that we support:

1. A study to review small agency needs, gaps in services, and what capacity levels are needed to meet their needs, in addition to reviewing other state's small agency support approaches. This study would result in future legislative recommendations based on the findings of the study.
2. Funding to increase the staffing and capacity of SmART to support their growing number of client agencies to ensure MCD (and others) get timely, effective, and supportive services from our main agency that we depend on for internal controls, logistics, and operations.

Health Equity and Data Collection Proposal (MN Department of Health)

The Department of Health proposal is to increase data collection and reporting on the disability populations in Minnesota, the health outcomes for these populations, and a focus on disability as a part of Health Equity throughout the whole agency. We are consulting with MDH to guide their efforts, provide technical assistance,

and ensure their proposal meets our advocacy needs. This proposal is primarily financial to fund positions to do this work. We would advocate to add statutory language to require this work to occur so that the funds cannot be used elsewhere and future leadership must continue this work.

MNCCD 2023 Public Policy Agenda (MN Consortium for Citizens with Disabilities)

The Minnesota Consortium for Citizens with Disabilities is a non-governmental advocacy organization representing dozens of disability organizations in Minnesota. Each legislative session, their board, which MCD is represented on, decides on a legislative agenda based on submissions from its member organizations. MCD supports the policies of MNCCD's legislative agenda that align with MCD's values and mission.

Other Disability-Related Bills

MCD will support any disability-related bills of high importance introduced in the 2023 Legislative Session.