

2018 Legislative Initiatives

Engagement. Leadership. Advocacy.

Resourced, Equitable and Integrated Health and Human Services System

MACSSA supports policies that will form a sustainably resourced and equitable human services environment where contributing organizations and people are able to work together with a common purpose: to improve the health, safety, economic and social stability of Minnesota communities, families and individuals.

Policies that promote multi-generational and person-centered approaches, program uniformity and simplification, and the modernization of Minnesota's human services technology systems are critical components to strengthening the health and human services system.

MACSSA recommends legislative and policy solutions in the following areas:

Behavioral Health

- ▶ **Resource Permanent Supportive Housing and Regional Behavioral Health Crisis Programs.** With the growing number of individuals that have behavioral health needs, it has become critical that additional resources are made available to address gaps in the current behavioral health system. Minnesota can address gaps by providing supportive housing and by providing capital investment funds for regional behavioral health crisis facilities. Providing long-term, supportive housing and investment in crisis facilities is critical to preventing future crisis, use of deeper end services and will ultimately strengthen the behavioral health continuum.
- ▶ **Chemical health comprehensive assessments: County assessor certification process.** Current law requires persons conducting comprehensive assessments to be licensed alcohol and drug counselors (LADC) by 2020. Many counties currently employ staff who are not LADCs to conduct chemical use assessments. Due to the significant shortage of LADCs, counties are very concerned about access to services if individuals are not able to have an assessment done by an LADC in a timely manner. MACSSA recommends providing for a certification process for county staff so that counties continue to provide this service if they choose and promote timely access to treatment. Requiring an LADC for county staff will likely result in many counties no longer providing this service.
- ▶ **Statewide Access to a Common Telepresence Platform.** Public Health & Human Services, especially in the areas of mental health and substance use disorders, have rapidly increasing demands on person-centered service provision. Internet-based telepresence offers broad applications to assist in rapid innovation and statewide service implementation. MACSSA recommends leveraging the State of Minnesota's telepresence network to connect providers of critical services, especially in the areas of mental health and substance use disorders, with individuals that are not currently able to receive adequate services – possibly due to geographic location, lack of transportation or providers.
- ▶ **Expanding Mental Health Service Access through Integrated Behavioral Health In Primary Care.** It is estimated that 80% of mental health conditions are treated within the primary care setting with limited or no support from mental health professionals. Integrated Behavioral Health (IHB) practices allow for immediate, team-based approach to treating patients for both physical and behavioral health issues on the same visit in the same office. IHB has been well researched and found to greatly increase access to behavioral health services, improved outcomes, cost savings and improved experiences for both the consumer and the provider.
- ▶ **Statewide coverage and coordination of Minnesota's suicide prevention plan.** Minnesota has multiple suicide prevention efforts that overlap in many areas and are lacking in others. Programs within DHS, MDH, DOE and through private organizations risk duplication of services while lacking broader coordination due to working within silos. MACSSA recommends aligning oversight of statewide efforts, including programs within the Minnesota Departments of Health, Human Services, Education, and those holding contracts with the State of Minnesota for suicide prevention efforts.
- ▶ **Grant Funding to support Journey to Independence.** Funding to support a rural multicounty demonstration project to transition youth ages 16-24 with mental health needs to independence. The project would streamline transition services and provide motivational coaching, and social, housing, employment, and educational supports.

Child Well Being

- ▶ **Eliminate the child protection staffing formula funding withholds.** In 2015, the Legislature appropriated new funding to counties to support reducing caseloads for child protection staff. The formula requires counties to earn 20% of that funding by meeting performance measures. Counties are not able to fully leverage this funding to support child protection staffing due to the uncertainty of whether the full funding will be received. MACSSA recommends removing the withholds and utilizing the Human Services Performance Management process to hold counties accountable for the performance measures included in the formula.
- ▶ **Investment in a Child Wellbeing Model.** The state of Minnesota is experiencing unprecedented growth and demand on its child protection system. At the same time, the system remains significantly underfunded and under resourced. Minnesota's current model is not sustainable without significant investment in prevention and a practice orientation that supports families as early as possible. MACSSA supports the efforts of Hennepin County to secure authority and funding to pilot a child wellbeing model and recommends additional pilots to test the model in other parts of the state.
- ▶ **Supervisory discretion when children are safe.** Current law requires a 24-hour child protection response when certain criteria exist; however, there are times when children are safe at the time the report is made since they are no longer residing with the alleged offender. The allocation of staff resources when a child is safe diverts staff time away from other imminent safety matters. Authorizing a supervisory override in these special circumstances would allow resources to be allocated and directed more efficiently to assess and assure child safety.
- ▶ **Clarifying Public Information Disclosure for Child Fatality or Near Fatality Reviews.** MACSSA recommends clarifying statute to better inform counties on the information available for disclosure following a review of a child fatality or near fatality, and modifying the scope of information available for disclosure to be consistent with the federal Child Welfare Policy Manual guidance for the Child Abuse Prevention and Treatment Act and Minnesota Court rules. The lack of clear definitions in current law has led to inconsistent interpretation and response to requests for information.
- ▶ **Support resources to promote educational stability for children.** In 2016-17, legislation was passed to establish a \$1 million Educational Stability Pilot to provide incentives to school districts and counties to develop partnership agreements to help keep foster care students enrolled in their school or origin, as required by new federal law changes in the Every Student Succeeds Act (ESSA). MACSSA recommends requiring a report and recommendations for a permanent funding stream from MDE/DHS prior to the start of the 2018-19 legislative session.

Housing and Transportation

- ▶ **Incentive Payments for Group Residential Housing (GRH) Collections.** Effective July 2017, counties are now responsible for collection GRH overpayments. The state transferred its responsibility for doing this work with no provision for covering the costs associated with it. Counties are mandated by the State to collect various types of public assistance overpayments made to clients. The State reimburses the counties for this work by paying incentives, a percentage of the amount recovered. MACSSA recommends authorizing a 25% incentive payment for the costs associated with GRH overpayment recoveries.

Long Term Services and Supports

- ▶ **MnCHOICES Assessments: Resource and Promote Improved Experiences for Individuals.** The 2017 Legislature enacted a county cost share for the cost of administering MnCHOICES assessments for individuals needing Home and Community Based Services (HCBS). The intent was to improve program efficiency and improve the experience of individuals receiving assessments. However, the Legislature did not make significant changes to the program requirements and counties have been left under-resourced. To appropriately resource and improve the MnCHOICES assessment process the Legislature should 1) Sunset the county cost share by 2020 2) Reduce assessment processes by 50% by 2020 3) Removing Rule 185 and State Plan services of Personal Care Assistant (PCA)/Home Care Nursing from the process and 4) Develop a reassessment administrative option for lead agencies to validate ongoing eligibility for current HCBS recipients.
- ▶ **Development and Implementation of the Community Support Plan (CSP) and the Coordinated Service & Support Plan (CSSP) for Home and Community Based Services.** Current law requires case managers to complete a CSSP within 10 working days of receipt of a CSP from a certified assessor. Extending this to 30 working days while at the same time shortening the time frame to complete a CSP from 40 calendar days to 20 working days will better support staff's ability to best meet the needs of HCBS recipients.

Modernization

- ▶ **Simplify and Streamline Health and Human Services Programs.** Minnesota's health and human services programs are governed by statutes and rules that have institutionalized complexity. Concurrently, services are delivered on antiquated computer systems that foster "siloeed" approaches to serving people. Technical challenges to programing Minnesota's complex laws have impeded improvement. Additionally, "siloeed" programs impede the state's vision to provide holistic services and use data to improve services and outcomes. It is essential to comprehensively simplify program requirements and processes to facilitate person-centered, integrated and efficient services.

Self-Sufficiency

- ▶ **Promoting Outcomes, Work Participation, and Accountability for the Supplemental Nutritional Assistance Program.** Support streamlining certain redundant administrative process requirements for financial workers, when administering SNAP benefits for persons required to work. Streamlining these requirements would allow resources to better focused on outcomes for program participants. Individuals receiving benefits will still be held accountable, as required by Federal law, for meeting the work participation requirements.
- ▶ **Increase Access to Basic Sliding Fee Child Care.** Access to childcare is critical for families to maintain self-sufficiency. Funding levels have not been sufficient in this program, resulting in families being waitlisted for benefits and jeopardizing the states' ability to move more families to economic stability. MACSSA recommends simplifying the Basic Sliding Fee (BSF) Child Care Program by reordering the BSF wait list priorities to increase the use of forecast funds.
- ▶ **Clarifying that income and assets from self-employment count as income and assets for purposes of eligibility for the economic assistance programs.** MACSSA recommends modifying statutes that cover MFIP, SNAP, Medical Assistance and Child Care to state that personal expenses paid by use of self-employment business funds, loans or co-mingled accounts are considered income and assets for determining eligibility for the programs. This change will reduce fraud in the programs by clarifying rules for county financial workers and prosecutors. This change will also assist in ensuring that resources are going to those truly in need.



Minnesota Association of County
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