



## Immediate Relief

*Staffing shortages continue to press providers and restrict the level of quality and consistent care they provide.*

### Relieve Pressure on Staffing Shortages



In the 14 years since Alternative Overnight Supervision (AOS) was put in place, the technology has evolved greatly, driving a need to update AOS policy and regulations. **ARRM's language will remove the need for a separate AOST license and instead utilize the protections and procedures that are currently place within 245D,** the Monitoring Technology usage policy and Remote Supports procedures.

### HCBS Scholarship Funds



Allowing our staff to access scholarship grant dollars while working as a Direct Support Professional is a way to incentivize workers into the profession and provide the tools for career growth. Our proposal would open up the current HCBS Scholarship process to Direct Support Professionals supporting individuals with disabilities and provide additional funding for the program.

### 5% ICF Rate Increase



ICF services face the same workforce pressures as other care based services. A 5% rate increase will allow providers the resources to continue raising the wages of their Direct Support Professionals.

### Retain Care Providers



With over two-thirds of DSPs leaving the job within the first year, staff retention is a top concern for providers. **ARRM supports the Best Life Alliance proposal to utilize one-time federal dollars from the American Rescue Plan for retention bonuses for staff.**

### DSP Child Care Grants



One of the top reasons a DSP leaves the profession is the growing cost of child care. Many state that they are working just to pay for their kids' child care expenses. ARRM proposed using one time funding to provide up to 12 months of child care grants to qualifying DSPs to help with the cost of child care.

## Long-Term Workforce Sustainability

*We must continue to make investments in the services that are provided to individuals with disabilities through the waiver. Additional investments in the Disability Waiver Rate System will help provide competitive wages long term and provide resources for providers to recruit and retain staff.*

### Fixing Rate Adjustment Inequity



Currently, DWRS reimbursement rates, a key driver of DSP wages, are adjusted based on data that is 30 month and 1 day old. By the time rate adjustments are made, the data used is outdated, leaving service providers and staff in a constant state of playing catch-up. **ARRM and our allies in the Best Life Alliance propose using current data available from the Bureau of Labor Statistics to make rate adjustments, allowing our rates to reflect current economic conditions and costs.**

Additionally, the Legislature created the Competitive Workforce Factor (CWF) to help address low wages, but it hasn't been adjusted since its creation in 2019. **We propose adjusting the CWF to reflect recommendations from DHS in 2024 and every two years after.**

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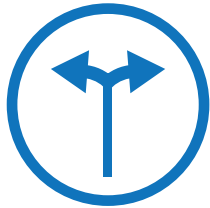


*of DSPs who quit leave in the first 12 months of employment*

## Regulatory Reforms

COVID-19 highlighted the importance of the DWRS framework to be flexible and respond to life's daily challenges. Small changes to existing regulations can open new doors to individuals served while maximizing providers' administrative efficiencies.

### Expand Choice to Meet Individual Needs



Currently, Respite provided under 10 hours a day is billed in 15-minute increments and is subject to the DWRS framework rate versus the daily option which is a market rate service. **ARRM is proposing making Unit Based Respite a market rate service, in alignment with how Daily Respite is currently operating.** This will eliminate an unnecessary inconsistency, while allowing providers to design programs that meet the unique needs of their community and work with counties on a payment rate that reflects the service, while providing greater access to the service.

### Support to Stay in Own Home



Currently, in order to meet the definition of "Own Home," a provider cannot co-sign a traditional lease with an individual. One exception is a Transitional Lease, which allows the provider to sign with an individual who is living in their own apartment for two years. Transitional Leases have the option for one, two-year extension. ARRM is trying to address what happens after that two-year extension, if the landlord will still not allow the individual to be on the lease by themselves for whatever reason, including not meeting minimum income requirements, background checks and landlord hesitancy. **ARRM is proposing allowing up to four, two-year extensions on a Transitional Lease.**

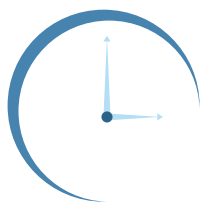
### Reduce Administrative Error Opportunities



Under Waiver ReImagine, there is a new tiered level of services called Individualized Home Supports. These services are provided to individuals that are living in their own home, outside of a provider-controlled setting. The most utilized of these services is Individualized Home Supports with Training, which can only be billed in 15-minute increments, or what providers call Unit Based Services, or as Daily Rate, if the service is provided for exactly 6 hours each day.

Tracking what can be upwards of 70 Units of service each day vs. what used to be one Daily Rate has posed administrative hurdles for providers. **ARRM proposes eliminating the Daily Rate option for this service and instead creating two different units of service, the 15-minute unit and an hourly unit.** This will have no impact on the individual receiving service but will make the billing process simpler for the service provider.

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15-minute units that must be administratively accounted for throughout a year, for individuals receiving support 24/7.



**ARRM is a nonprofit association of more than 200 provider organizations, businesses and advocates dedicated to leading the advancement of home and community-based services supporting people living with disabilities in their pursuit of meaningful lives.**

**Founded in 1970, ARRM continues to lead advocacy and training for positive industry reforms that support Minnesotans with disabilities.**

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