

Minnesota LTSS Advisory Council

December 2025 Meeting

December 18, 2025

Greetings & Housekeeping

Housekeeping

- Meeting is open to the public, both in person and virtually
- Public comment will be included for meetings when Council recommendation decisions are discussed
- Today's meeting will not include public comment
- Public attendee access to chat/Q&A is not available
- Meeting will not be recorded
- Meeting minutes will be taken by PCG, distributed to the Council, and posted publicly after the Council approves the minutes
- Council member accessibility and accommodation requests during the meeting- put in chat

Introductions

Briefly share:

- Your name, organization, and seat/role on Council



Agenda Review

Today's Agenda

- Adoption of October 30, 2025, Minutes & Action Item Status
- Charter Updates & Adoption
- MN LTSS 101
- DHS Budget Forecast Presentation
- Competitive Workforce Factor & County Share
- Community Partner Survey
- Summary & Next Steps



Adoption of October 30, 2025, Meeting Minutes & Status Review of Action Items

October 30, 2025, Minutes & Action Items

- Discuss any requested updates to the 10/30/25 meeting minutes
- Vote for adoption of minutes

Action Items:

Action Item	Status
Send out calendar invitations for recurring Council Meetings	Complete
Send Council meeting minutes.	Complete
Update Charter for December meeting, send out with meeting materials	Complete

October 30, 2025, Action Items— Continued

Action Item	Status
Compile Council feedback on data needs for financial analysis	In progress
SharePoint Access requests for Council Members	Complete
Follow up on Disability Justice Information to share with the Council	Complete

Charter Updates & Adoption

Impact

In conducting its work and developing recommendations, the Council highly values these goals:

Prioritizing the well-being of people served and workers

Ensuring the stability of Minnesota's LTSS

Preserving access to services and choices

Enhancing quality of life

Focusing on viable strategies for the Legislature to consider

Responsibilities *(slide 1 of 3)*

The Council agrees to be mindful, respectful, and inclusive of:

- Preferred communication and learning styles
- Everyone's unique perspective and contribution
- Differences in opinions

Responsibilities *(slide 2 of 3)*

Sins Invalid's 10 Principles of Disability Justice

- Intersectionality
- Leadership of Those Most Impacted
- Anti-capitalist Politic
- Commitment to Cross-Movement Organizing
- Recognizing Wholeness
- Sustainability
- Commitment to Cross-Disability Solidarity
- Interdependence
- Collective Access
- Collective Liberation

Responsibilities *(slide 3 of 3)*

- Attend meetings
- Stay focused, minimize disruptions
- Share the air
- Assume positive intent of each other but attend to impact
- Stay on topic
- Follow through on action items
- Focus on solutions
- Treat each other with respect
- Review pre- & post-meeting materials
- Share your thoughts
- Parking lot of non-topic items
- Seek to understand, ask questions
- Define acronyms you use
- Personal note taking, including Artificial Intelligence (AI) notetaking, is for Council member use
- The PCG meeting minutes will be the official record of the meetings

Timeline & Activities

October 30, 2025	Introduction to Council Work
December 18, 2025	Level Setting & Information Gathering
February 19, 2026	Current Financial Analysis, Best Practices, and Peer State Research
April 16, 2026	Recommendation Planning
June 18, 2026	Recommendation Drafting
August 20, 2026	Legislative Report Draft
October 15, 2026	Legislative Report Finalization
December 16, 2026	Recognition, Reflection, & Future Planning

Workgroup Structure & Decision Making

Workgroups

- The Council will form workgroups identify, evaluate, and select recommendations to bring to the Council.
- Workgroups will be formed based on the three main levers available to states to reduce Medicaid spending:



Eligibility



Benefits



Provider Rates

Picking Your Workgroup

- Each Council member is asked to serve on one workgroup based on their primary area of interest.
- **Indicate your preferences using the linked survey by December 29.**
 - Meeting invitations will go out on December 30.
 - Members will be assigned to workgroups based on their preferences as well as the need to balance workgroups.

**Complete the
Workgroup Survey
by December 29**

Survey link:
<https://forms.office.com/r/0GkqxUVhZf>

Schedule for Workgroup Meetings

Eligibility

1st **Wednesday**
of Each Month

1-3pm

Benefits

1st **Thursday**
of Each Month

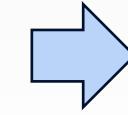
1-3pm

Provider Rates

1st **Friday**
of Each Month

1:30-3:30pm

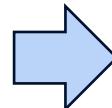
Making Recommendations (slide 1 of 2)



Workgroup evaluates and selects, by majority, a recommendation to bring to the Council

All recommendations consider the estimated impact on the:

- State budget
- People receiving services
- Existing capacity of state agencies, including staffing needs, technology resources, and existing agency responsibilities
- Capacity of county agencies and Tribal partners.



Workgroup recommendation is presented to the Council

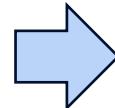
Decisions will only be made in a quorum of the full Council during scheduled Council meetings and not in workgroups or breakout sessions.

Making Recommendations (slide 2 of 2)

Council members vote on each workgroup recommendation

Council members will vote on each recommendation to indicate if they are:

- In support of the recommendation
- Against the recommendation
- Neutral



Each recommendation is included in the final legislative report

All recommendations will be included in the final legislative report.

The report will include a record of how each Council member voted on each recommendation.

Workgroup Structure and Decision-Making Feedback

Structure:

- Do you have any feedback on the structure?
- Do you have any suggested changes or other comments related to meeting logistics?

Decision-Making Process:

- Is the process clear and efficient?
- Is there anything that needs further detail or revision?
- Do you have any suggested changes or other comments?



MN LTSS 101

State Plan and Waiver Services

Medical Assistance State Plan

- Required, federally approved agreement between MN and the Centers for Medicare and Medicaid Services (CMS)
- Defines the mandatory and optional services Medicaid must cover such as core medical services and some home health

➤ Possible pathways to access

- Income and other criteria (varies based on age, disability, etc.)

Medical Assistance Waiver

- Optional, federally approved agreement between MN and CMS
- Provides home and community-based services to targeted, eligible populations to support people to live independently in their communities

➤ Possible pathways to access

- Functional criteria, such “nursing facility level of care”

In-Scope LTSS Programs

The Minnesota LTSS programs for older adults and people with disabilities to be considered for purposes of the Advisory Council recommendations are:

- Alternative Care (AC) program
- Brain Injury (BI) waiver
- Community Alternative Care (CAC) waiver
- Community access for Disability Inclusion (CADI) waiver
- Community First Services and Supports (CFSS) and Personal Care Assistance (PCA)
- Developmental Disabilities (DD) waiver
- Elderly Waiver (EW)
- Essential Community Supports (ECS)
- Nursing facility services

Alternative Care (AC) Program—Eligibility

Minnesotans 65 or over who:

- Require the level of care provided in a nursing home, but choose to reside in the community
- Are NOT financially eligible for MA.
Income/assets won't cover a nursing facility over 135 days
- Pay the assessed monthly fee, when applicable
- Have no other funding source available for the community services
- Does NOT pay for residential services

State Fiscal Year 2024

3,385

Minnesotans
Served

\$48.2M

Total Funds Spent

\$14,249

Average Yearly Cost
per Person Served

Alternative Care (AC) Program—Services

- Adult companion services
- Adult day services
- Adult day services bath
- Case management
- Case management aide
- Case management conversation
- Chore services
- Consumer-directed community supports
- Discretionary services
- Environmental accessibility adaptations
- Family adult services (FADS)
- Family caregiver services
- Home-delivered meals
- Home Care nursing
- Homemaker services
- Individual Community Living Support (ICLS)
- Nonmedical transportation
- Nutrition services
- Personal emergency response systems (PERS)
- Respite care
- Specialized equipment and supplies
- Transitional Services
- Personal care assistance (PCA)/Community First
- Service and Supports (CFSS)

Brain Injury (BI) Waiver—Eligibility

Minnesotans who:

- Need the level of care available in a nursing facility or neurobehavioral hospital, as determined
- Be younger than age 65 when opening to the waiver
- Have a documented diagnosis of a traumatic, acquired, or degenerative brain injury secondary to an event or disease that is not congenital
- Need for supports and services beyond those available through the MA state plan
- Due to cognitive and behavior impairments, require a higher level of service than is available through other waivers

State Fiscal Year 2024

998

Total Minnesotans
Served

\$111

Million

Total Funds Spent

\$111,861

**Average yearly cost
per each person
served**

Brain Injury (BI) Waiver—Services

- 24-hour emergency assistance
- Adult day service/Adult day service bat
- Caregiver living expenses
- Case management and case management aide
- Chore
- Community residential services
- Consumer-directed community supports, a service option giving the person flexibility and responsibility to direct his or her own services and supports
- Crisis respite
- Customized living
- Day support services
- Employment development
- Employment exploration
- Employment support
- Environmental accessibility adaptations
- Extended home care nursing
- Extended home health care services, including extended home health aide, and extended occupational, physical, speech and respiratory therapies
- Extended personal care assistance
- Family residential services
- Family training and counseling
- Home-delivered meals
- Homemaker
- Independent living skills therapies
- Independent living skills training (service affected by Waiver Reimagine streamline service changes)
- Individualized home supports, including 3 different options of support
- Integrated community supports
- Night supervision

Community Alternative Care (CAC) Waiver—Eligibility

Minnesotans who:

- Have a documented need for professional nursing assessments and intervention multiple times during a 24-hour period to maintain and prevent deterioration of health status
- Be younger than age 65 when opening to the waiver
- Require a 24-hour plan of care that includes a backup plan
- Choose care and services in the community instead of a hospital

**State Fiscal Year
2024**

833

**Total Minnesotans
Served**

**\$80.4
Million**

Total Funds Spent

**\$96,566
Average Yearly
Cost Per Person
Served**

Community Alternative Care (CAC) Waiver—Services

- 24-hour emergency assistance
- Adult day service in family adult day settings
- Caregiver living expenses
- Case management and case management aide
- Chore
- Community residential services
- Consumer-directed community supports, a service option giving the person flexibility and responsibility to direct his or her own services and supports
- Crisis respite
- Day support services
- Employment development
- Employment exploration
- Employment support
- Environmental accessibility adaptations
- Extended home care nursing
- Extended home health care services, including extended home health aide, and extended occupational, physical, speech and respiratory therapies
- Extended personal care assistance
- Family residential services
- Family training and counseling
- Home-delivered meals
- Homemaker
- Independent living skills therapies
- Individualized home supports, including 3 different options of support
- Integrated community supports
- Night supervision
- Positive support services
- Prevocational services
- Respite
- Specialist services
- Specialized equipment and supplies
- Transitional services
- Transportation

Community Access for Disability Inclusion (CADI) Waiver—Eligibility

Minnesotans who:

- Require the level of care provided to people in a nursing facility
- Be younger than age 65 when opening to the waiver
- Have an assessed need for supports and services beyond those available through the MA state plan
- Choose care and services in the community instead of a nursing facility

State Fiscal Year

2024

47,244

Total Minnesotans
Served

3.1

Billion

Total Funds
Spent

\$53,868

Average Yearly
Cost per Person
Served

Community Access for Disability Inclusion (CADI) Waiver— Services

- 24-hour emergency assistance
- Adult day service/Adult day service bath
- Caregiver living expenses
- Case management and case management aide
- Chore
- Community residential services
- Consumer-directed community supports, a service option giving the person flexibility and responsibility to direct his or her own services and supports
- Crisis respite
- Customized living
- Day support services
- Employment development
- Employment exploration
- Employment support
- Environmental accessibility adaptations
- Extended home care nursing
- Extended home health care services, including extended home health aide, and extended occupational, physical, speech and respiratory therapies
- Extended personal care assistance
- Family residential services
- Family training and counseling
- Home delivered meals
- Homemaker
- Independent living skills therapies
- Individualized home supports, including 3 different options of support
- Integrated community supports
- Night supervision
- Positive support services
- Prevocational services

Developmental Disabilities (DD) Waiver—Eligibility

Minnesotans who:

- Have a documented diagnosis of a developmental disability or a related condition
- Require the level of care provided to people in an Intermediate Care Facility for Individuals with Developmental Disabilities (ICF/DD)
- Require daily interventions, daily services and a 24-hour plan of care
- Have an assessed need for habilitation which must be included in the person's support plan
- Have an assessed need for supports and services beyond those available through the MA state plan
- Choose care and services in the community instead of an ICF-DD

**State Fiscal Year
2024**

25,215

Total Minnesotans
Served

\$2.4

Billion

Total Funds Spent

\$95,197

**Average Yearly
Cost per Person
Served**

Developmental Disabilities (DD) Waiver—Services

- 24-hour emergency assistance
- Adult day service/adult day service bath
- Assistive technology
- Caregiver living expenses
- Case management and case management aide
- Chore
- Community residential services
- Consumer-directed community supports, a service option giving the person flexibility and responsibility to direct his or her own services and supports
- Crisis respite
- Day support services
- Employment development
- Employment exploration
- Employment support
- Environmental accessibility adaptations
- Extended personal care assistance
- Family residential services
- Family training and counseling
- Home delivered meals
- Homemaker
- Independent living skills therapies
- Individualized home supports, including 3 different options of support
- Integrated community supports
- Night supervision
- Positive support services
- Prevocational services
- Respite
- Specialist services
- Transitional services
- Transportation

Elderly Waiver (EW)—Eligibility

Minnesotans 65 or older who:

- Are eligible for Medical Assistance and require the level of care provided to individuals in a nursing home, Require waiver services that would cost less than the estimated nursing home cost for that person
- Choose to receive Elderly Waiver services in the community instead of nursing home services

State Fiscal Year 2024

33,934
Total People
Served

\$719.3M
Total Funds
Spent

\$18,851
Average Yearly
Cost per
Person Served

Elderly Waiver (EW)—Services

- Adult companion services
- Adult day services
- Adult day services bath
- Adult foster care
- Case management/care coordination
- Chore services
- Consumer-directed community supports (CDCS)
- Customized living/24-hour customized living
- Environmental accessibility adaptations (changes to make homes and vehicles accessible)
- Extended home care services
- Extended personal care assistance/Extended community first services and supports
- Family adult day services (FADS)
- Family caregiver services
- Home-delivered meals
- Homemaker
- Individual community living supports (ICLS)
- Personal emergency response systems (PERS)
- Respite
- Specialized equipment and supplies
- Transitional services
- Transportation (non-medical)

Community First Services and Supports (CFSS) and Personal Care Assistance (PCA)—Eligibility

Minnesotans who:

- Live in the community and not a facility such as a skilled nursing home
- Can direct care or have a representative who can direct care on their behalf
- Are enrolled in one of Minnesota's health care programs:
 - Medical Assistance (MA)
 - MA waiver
 - Alternative Care program
 - Some people on MinnesotaCare
- Have an assessment that determines they are eligible
- Are not using the Family Support Grant

**State Fiscal Year
2024**

49,522
Total People
Served

\$999.3M
Total Funds
Spent

\$37,380
Average Yearly
Cost per
Person Served

Community First Services and Supports (CFSS) and Personal Care Assistance (PCA)—Services

- Activities of daily living:
 - Eating, bathing, grooming and transferring, etc.
- Health-related tasks
- Instrumental activities of daily living:
 - Shopping, cooking, laundry, assistance with self-administered medications, etc.
- Observation and redirection of behavior

Essential Community Supports (ECS)—Eligibility

Minnesotans 65 or older who:

- Are not eligible for Medical Assistance
- Do not require nursing facility level of care
- Live in their own home or apartment
- Meet financial eligibility criteria for the [Alternative Care program](#)
- Need one or more waiver services to live in the community

**State Fiscal Year
2024**

167
Total People
Served

\$397k
Total Funds
Spent

\$2,377
Average Yearly
Cost per
Person Served

Essential Community Supports (ECS)—Services

- Adult day services
- Case management
- Chore services
- Community living assistance
- Family caregiver services
- Home-delivered meals
- Homemaker
- Personal emergency response systems

Nursing Facilities—Eligibility

Minnesotans who:

- Are eligible for [MA](#)*
- Require a nursing facility level-of-care
- Have home equity at or below the [home equity limit](#)
- Are not be subject to a period of ineligibility under the [uncompensated transfer rules](#)

* *MA eligible members must reside in a Medicaid certified bed for their stay to be considered for payment by MHCP.*

**State Fiscal Year
2024**

19,777
Total People
Served

\$1.2B
Total Funds
Spent

\$56,653
Average Yearly
Cost per
Person Served

Nursing Facilities—Services

MHCP covers room and board care for an MA member in a certified NF or certified boarding care facility.

Items and services usually included in the per diem (not an all-inclusive list):

- Nursing services
- Laundry and linen services
- Dietary services
- Personal hygiene items necessary for daily personal care (e.g., soap, shampoo, toothpaste, toothbrush, shaving cream, etc.)
- Over-the-counter drugs or supplies used on an occasional, as needed basis (e.g., aspirin, acetaminophen, antacids, cough syrups, etc.)

Break

Break—10 Minutes



DHS Budget Forecast Presentation

Competitive Work Force Factor & County Share

Community Partner Survey

Purpose of Survey & Target Audiences

Purpose

Gather information from community partners, families, and individuals on their experiences receiving and providing services to inform potential cost savings recommendations in the areas of eligibility, benefits, and provider rates.

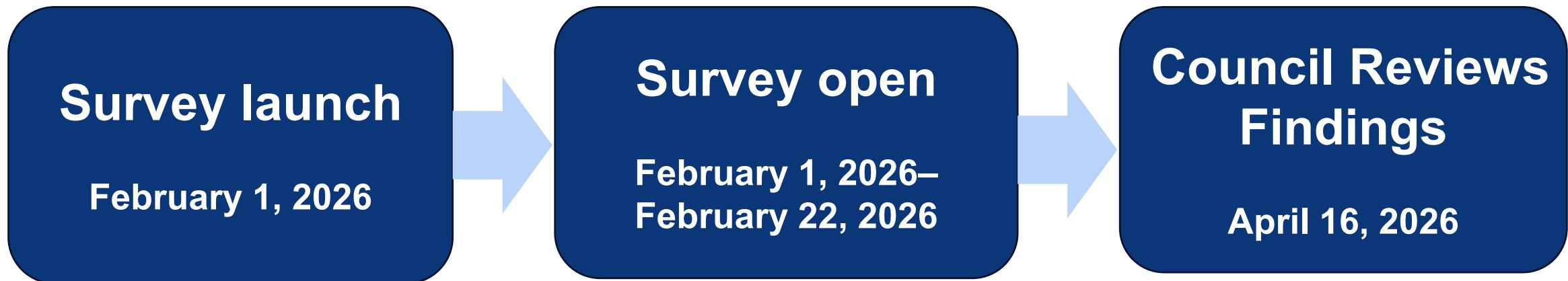
Target Audiences

- People receiving services
- Family Members/natural support of People receiving services
- Organizations providing in-scope LTSS
- Direct Care Workers providing in-scope LTSS
- Lead agencies, eligibility workers and assessors

Format & Accessibility

- Electronic survey platform
- Questions will branch based on respondent
- Accessible for individuals with visual impairments/compatible with assistive screen reader technology
- Translated versions will be available in: Hmong, Somali, Russian, and Spanish

Timeline & Distribution



Distribution Discussion:

- PCG will develop the Survey link and share it with the Council
- Each council member is asked to share the survey with their network to expand the audience reach
- MN DHS will share the survey with all lead agencies, providers and MCOs
- Are there additional distribution lists we should consider?

Survey Question Themes

**Services
Used**

**Most
Impactful
Services**

**Service
Provision
Process**

**Technology
Access &
Use**

**Areas to
Focus on
for Savings**

**Leveraging
Community
Resources**

Summary & Next Steps

Meeting Summary, Next Steps

- General questions/comments from Council members
- Recap meeting themes and action items

Contact Information:

Board Support: Jensina Rosen, Jensina.E.Rosen@state.mn.us

Council Chair: Colin Stemper, colin.stemper@state.mn.us

Meeting Facilitator: Michele Craig, micraig@pcgus.com

Supporting Resources

- Board support: Jensina Rosen
- Briefing Document
- [Board/Commission Details](#)
- [Long-Term Services and Supports Advisory Council / Minnesota Department of Human Services](#)
- SharePoint site for Council materials





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Solutions that Matter