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State of Minnesota

HOUSE OF REPRESENTATIVES

NINETY-THIRD SESSION

H. F. No. 691

01/23/2023 Authored by Quam
The bill was read for the first time and referred to the Committee on Health Finance and Policy

1.1 A bill for an act
1.2 relating to human services; requiring a report to the legislature on medical
1.3 assistance, long-term services and supports, and other public assistance program
1.4 applications.

1.5 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MINNESOTA:

1.6 Section 1. DIRECTION TO COMMISSIONER; CUSTOMER SERVICE SURVEY
1.7 AND REPORT TO LEGISLATURE ON APPLICATIONS FOR PUBLIC
1.8 ASSISTANCE SERVICES.

1.9 (a) The commissioner of human services shall work with lead agencies to develop a
1.10 customer service survey for medical assistance applicants and long-term services and
1.11 supports applicants by October 1, 2023. The customer service survey must be offered to
1.12 each individual applying for medical assistance or long-term services and supports between
1.13 November 1, 2023, and May 31, 2024, and must collect information on the applicant's
1.14 satisfaction with wait times and form complexity.

1.15 (b) By November 1, 2024, the commissioner of human services shall submit a report on
1.16 medical assistance applications and long-term services and supports applications, including
1.17 recommendations for legislative changes, to the chairs and ranking minority members of
1.18 the legislative committees with jurisdiction over human services. In preparing the report,
1.19 the commissioner must: (1) utilize information gathered from the direction to the
1.20 commissioner in Laws 2017, First Special Session chapter 6, article 1, section 51; (2) utilize
1.21 information gathered from the customer service surveys in paragraph (a); and (3) consult
1.22 with lead agencies responsible for administering medical assistance applications and
1.23 long-term services and supports applications throughout the state.

2.1 (c) The commissioner shall report findings and make legislative recommendations on
2.2 the following:

2.3 (1) summarizing customer service survey results and trends;

2.4 (2) reducing application and assessment times;

2.5 (3) increasing efficacy of application, assessment, and reassessment training of lead
2.6 agency staff;

2.7 (4) developing an expedited application process for applicants who previously resided
2.8 in neighboring states and received Medicaid or long-term services and supports;

2.9 (5) developing applications for medical assistance and long-term services and supports
2.10 that automatically populate duplicate information;

2.11 (6) using technology to efficiently manage caseloads, applications, assessments, and
2.12 reassessments;

2.13 (7) aligning similar requirements for different public assistance services to reduce
2.14 application length and duplication;

2.15 (8) developing best practices for lead agency staff to administer applications, assessments,
2.16 and reassessments to uniformly administer throughout the state;

2.17 (9) developing unified points of intake, application, and eligibility determination for
2.18 public assistance services; and

2.19 (10) identifying necessary federal waivers to implement any legislation recommendations.

2.20 (d) The commissioner shall also report on the cost, time, and resources necessary to
2.21 develop a computerized interactive eligibility form that adapts to the applicant's answers to
2.22 reduce duplicative information when applying for related public assistance services
2.23 administered by the Department of Human Services.