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State of Minnesota

HOUSE OF REPRESENTATIVES

EIGHTY-NINTH SESSION

H. F. No. 3751

03/31/2016 Authored by Bernardy and Clark

The bill was read for the first time and referred to the Committee on Health and Human Services Reform

1.1 A bill for an act
1.2 relating to human services; establishing an activities of daily living
1.3 reimbursement system.

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

1.5 Section 1. **ACTIVITIES OF DAILY LIVING REIMBURSEMENT SYSTEM.**

1.6 Subdivision 1. Establishment. (a) The commissioner of human services shall
1.7 develop and administer a pilot program for a medical assistance reimbursement system
1.8 to address the shortage of personal care assistants (PCAs) to serve people with a high
1.9 number of dependencies in activities of daily living (ADLs).

1.10 (b) Only personal care assistants serving individuals with dependencies in six or
1.11 more ADLs are eligible for the pilot program.

1.12 (c) "Activities of daily living" or "ADL" has the meaning given in section
1.13 256B.0659, subdivision 1, paragraph (b).

1.14 (d) "Personal care assistance provider agency" has the meaning given in section
1.15 256B.0659, subdivision 1, paragraph (l).

1.16 (e) "Personal care assistant" or "PCA" has the meaning given in section 256B.0659,
1.17 subdivision 1, paragraph (m).

1.18 (f) The commissioner shall seek necessary federal authority to implement the pilot
1.19 program.

1.20 Subd. 2. Reimbursement rates. The commissioner of human services shall
1.21 reimburse a personal care assistance provider agency at the rate of \$22.50 per hour. PCAs
1.22 shall receive an \$18 per hour wage for services provided under the program.

1.23 Subd. 3. Legislative report. By April 1, 2017, the commissioner of human services
1.24 shall submit a report on the pilot program to the chairs and ranking minority members of the

- 2.1 legislative committees with jurisdiction over health and human services policy and finance.
- 2.2 At a minimum, the report must include: (1) an overview of the pilot program design; (2)
- 2.3 an analysis of whether higher compensation for PCAs alleviates the shortage of services
- 2.4 available for individuals in the program; and (3) an analysis of whether PCAs receive
- 2.5 adequate training to serve individuals with a high number of dependencies in ADLs.