

144A.4799 HOME CARE AND ASSISTED LIVING ADVISORY COUNCIL.

Subdivision 1. **Membership.** (a) The commissioner of health shall appoint 14 persons to a home care and assisted living advisory council consisting of the following:

(1) four public members as defined in section 214.02, one of whom must be a person who either is receiving or has received home care services preferably within the five years prior to initial appointment, one of whom must be a person who has or had a family member receiving home care services preferably within the five years prior to initial appointment, one of whom must be a person who either is or has been a resident in an assisted living facility preferably within the five years prior to initial appointment, and one of whom must be a person who has or had a family member residing in an assisted living facility preferably within the five years prior to initial appointment;

(2) two Minnesota home care licensees representing basic and comprehensive levels of licensure who may be a managerial official, an administrator, a supervising registered nurse, or an unlicensed personnel performing home care tasks;

(3) one member representing the Minnesota Board of Nursing;

(4) one member representing the Office of Ombudsman for Long-Term Care;

(5) one member representing the Office of Ombudsman for Mental Health and Developmental Disabilities;

(6) one member of a county health and human services or county adult protection office;

(7) two Minnesota assisted living facility licensees representing assisted living facilities and assisted living facilities with dementia care levels of licensure who may be the facility's assisted living director, managerial official, or clinical nurse supervisor;

(8) one organization representing long-term care providers, home care providers, and assisted living providers in Minnesota; and

(9) one representative of a consumer advocacy organization representing individuals receiving long-term care from licensed home care providers or assisted living facilities.

(b) When a vacancy occurs for an appointment identified in paragraph (a), the commissioner must select an applicant for appointment within 81 calendar days of the position being posted by the secretary of state if the application of a qualified and, if applicable, a licensee in good standing applicant is received within 21 days of posting. If no qualified applications are received within the first 21 days, the commissioner must select an applicant for appointment within 60 calendar days of receiving the application of a qualified and, if applicable, a licensee in good standing applicant.

Subd. 2. **Organizations and meetings.** The advisory council shall be organized and administered under section 15.059 with per diems and costs paid within the limits of available appropriations. Meetings will be held quarterly and hosted by the department. Subcommittees may be developed as necessary by the commissioner. Advisory council meetings are subject to the Open Meeting Law under chapter 13D.

Subd. 3. **Duties.** (a) At the commissioner's request, the advisory council shall provide advice regarding regulations of Department of Health licensed assisted living facilities and home care providers in this chapter and chapter 144G, including advice on the following:

(1) community standards for home care practices;

- (2) enforcement of licensing standards and whether certain disciplinary actions are appropriate;
- (3) ways of distributing information to licensees and consumers of home care and assisted living services defined under chapter 144G;
- (4) training standards;
- (5) identifying emerging issues and opportunities in home care and assisted living services defined under chapter 144G;
- (6) identifying the use of technology in home and telehealth capabilities;
- (7) allowable home care licensing modifications and exemptions, including a method for an integrated license with an existing license for rural licensed nursing homes to provide limited home care services in an adjacent independent living apartment building owned by the licensed nursing home; and
- (8) recommendations for studies using the data in section 62U.04, subdivision 4, including but not limited to studies concerning costs related to dementia and chronic disease among an elderly population over 60 and additional long-term care costs.

(b) The advisory council shall perform other duties as directed by the commissioner.

(c) The advisory council shall make recommendations annually to the commissioner for the purposes of allocating the appropriation in sections 144A.474, subdivision 11, paragraph (j), and 144G.31, subdivision 8. The commissioner shall act upon the recommendations of the advisory council within one year of the advisory council submitting its recommendations to the commissioner. The recommendations shall address ways the commissioner may improve protection of the public under existing statutes and laws and improve quality of care. The council's recommendations may include but are not limited to special projects or initiatives that:

- (1) create and administer training of licensees and ongoing training for their employees to improve clients' and residents' lives, support licensees, improve and enhance quality care, and provide technical assistance to licensees to improve compliance;
- (2) develop and implement information technology and data projects that analyze and communicate information about trends in violations or lead to ways of improving resident and client care;
- (3) improve communications strategies to licensees and the public;
- (4) recruit and retain direct care staff;
- (5) recommend education related to the care of vulnerable adults in professional nursing programs, nurse aide programs, and home health aide programs; and
- (6) benefit residents, clients, families, and the public in other ways.

History: 2013 c 108 art 11 s 27; 2014 c 291 art 6 s 18; 2016 c 179 s 13,14; 1Sp2017 c 6 art 10 s 70; 2019 c 60 art 4 s 26; 1Sp2019 c 9 art 11 s 65,66; 2022 c 98 art 1 s 18,19; 1Sp2025 c 9 art 8 s 3; 2026 c 95 art 3 s 8