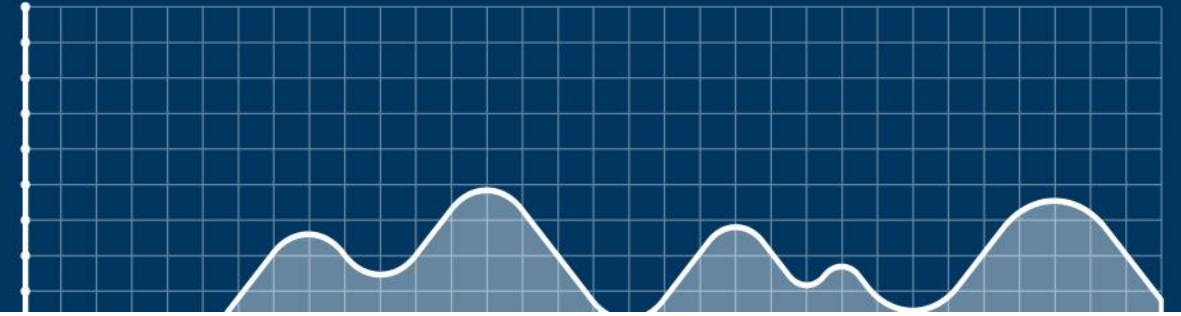
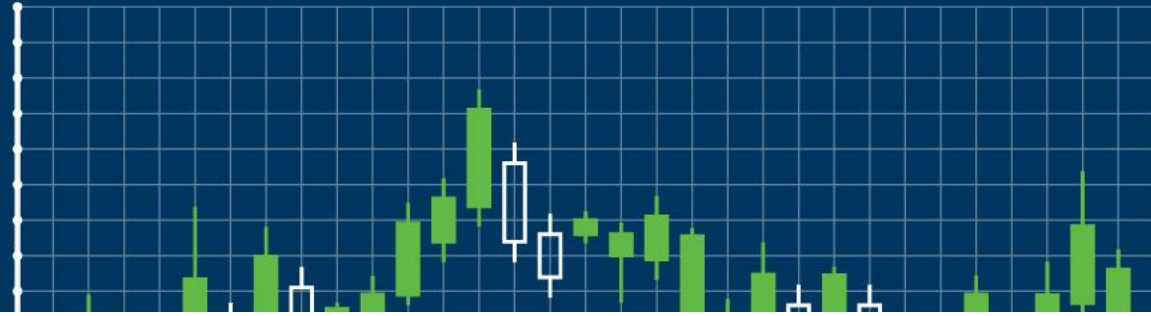
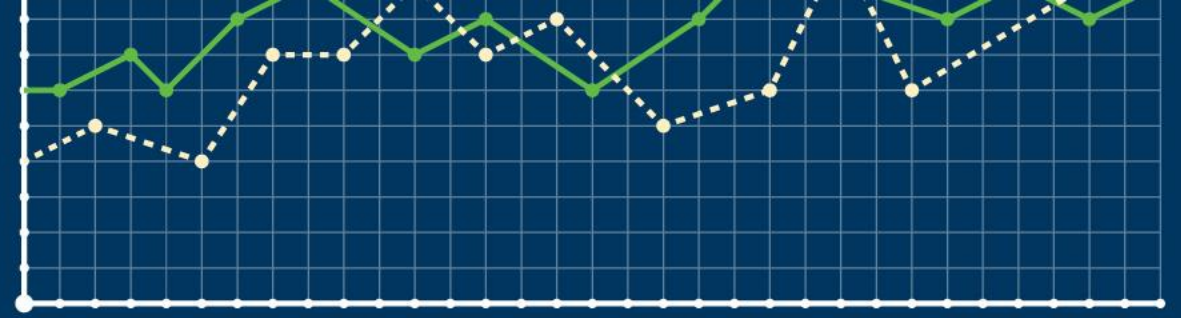
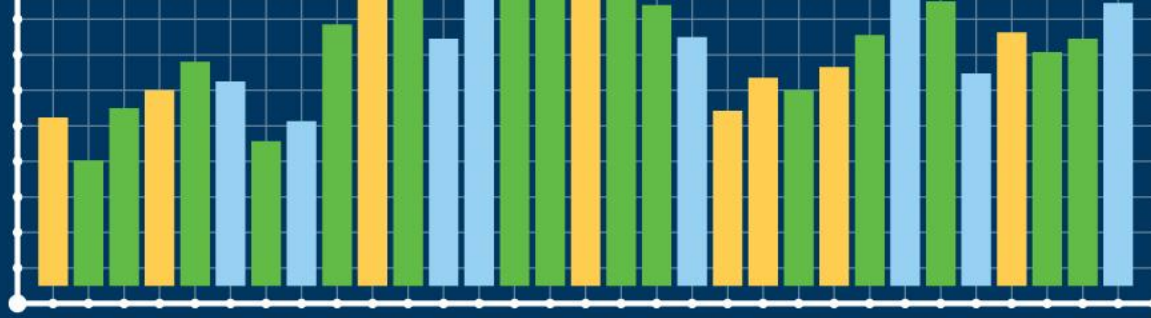




# Summary of survey responses to the intervention services redesign proposal

# Overview

- The survey was open for just over 1 month. Multiple reminders were sent out via email.
- 99 of the survey responses provided feedback on the [service draft](#) (other responses never got past the demographic questions so we couldn't use those).
- Supporting legislation for this project is available under [Minnesota Laws 2023 Chapter 61, Article 1, Section 74.](#)

# Gathering feedback

In 2024, DHS worked with a vendor to gather input on intervention services from partners. The vendor conducted surveys, focus groups, interviews, and listening sessions with 755 community partners. The vendor was specifically required to reach BIPOC communities and people using services, as well as other underrepresented communities.

This 2026 survey was just the latest round of gathering feedback on these services, and there will be more opportunities to give feedback after this survey. With this round, in addition to the survey:

- DHS held 3 public question and answer sessions.
- DHS staff presented on the draft and answered questions during public meetings for the:
  - External Program Review Committee, which is responsible for monitoring statewide implementation of Minn. Rule 9544 (the Positive Supports Rule).
  - Regional capacity building meeting for positive supports.

# Respondent demographics – race/ethnicity and locations

- 81% of respondents identified as white, 11% preferred not to answer the question, 8% made other selections. For comparison:
  - Minnesota's population: 78.5% identifies as white and 21.5% identifies as BIPOC.
  - People living in institutions: 86.9% identifies as white and 9.8% identifies as BIPOC.
- Locations (of those who answered the long version of the survey):
  - Hennepin – 18%
  - Dakota – 11%
  - Stearns – 7%
  - Anoka, Clay, Ramsey, St. Louis, Washington – 5% each
  - 19 other counties selected with 3 or fewer respondents

# Respondent demographics – roles

- 32 lead agency representatives/contracted case managers
- 27 positive support services management and 21 positive support services direct care staff
- 12 specialist providers who provide direct care
- 11 residential support providers
- 11 individually licensed professionals
- 8 crisis respite providers
- 6 MN state agency staff
- 11 guardians/caregivers
- 2 people eligible for services

# Demographics

- 1 person took the survey in Somali, no one took it in Hmong, remaining were done in English
- 93 were adults under age 65, 5 were adults over age 65, and 1 person was age 17 or under who got help from an adult
- 75 were female, 15 were male, and remainder were non-binary or preferred not to answer

# Would respondents change anything about the draft? (first half)

- Definition section: 28 yes/60 no
- Eligibility section (documented need part): 19 yes/64 no
- Covered services section: 27 yes/49 no
- Billable indirect support activities: 20 yes/57 no
- Non-covered services section: 28 yes/47 no
- Remote support: 16 yes/58 no
- Service locations: 24 yes/50 no

# Would respondents change anything about the draft? (second half)

- Outcomes section: 18 yes/55 no
- Lead agency responsibilities section: 24 yes/49 no
- Staff levels, licensing and authorization section: 20 yes/52 no
- Staff levels, advisory professional section: 23 yes/49 no
- Staff levels, implementation professional section: 24 yes/47 no
- Examples section: 14 yes/57 no

# Service expansion

- Eligibility section (waiver eligibility part): 32 people indicated knowing someone on the EW waiver “that would likely benefit from a service like this”
- Covered services - support during long-distance, high intensity physical activities: 24 people indicated knowing someone that might benefit from this proposed service option

# Meeting age-related needs

How likely is it that this new service design will be sufficient to meet the needs of the following age groups?

- People age 17 or younger: 34 (very likely/likely), 30 (unsure), 8 (unlikely/very unlikely)
- People age 18 to 64: 48 (very likely/likely), 16 (unsure), 8 (unlikely/very unlikely)
- People age 65 or older: 31 (very likely/likely), 28 (unsure), 13 (unlikely/very unlikely)

# Service redesign goals met? (first half)

All the people eligible for the existing services, and more people, will be eligible for the new service: 35 (goal met or likely met), 15 (unsure), 9 (goal not met or unlikely)

It will cover culturally-specific needs: 28 (goal met or likely met), 17 (unsure), 7 (goal not met or unlikely)

Will cover transition planning during major life changes: 40 (goal met or likely met), 10 (unsure), 5 (goal not met or unlikely)

Will cover service needs where people need them: 26 (goal met or likely met), 18 (unsure), 10 (goal not met or unlikely)

# Service redesign goals met? (second half)

Will be easier to recruit workers because of the expanded ways a person can qualify to work: 30 (goal met or likely met), 12 (unsure), 15 (goal not met or unlikely)

Will have defined outcomes and expectations of service providers: 38 (goal met or likely met), 7 (unsure), 13 (goal not met or unlikely)

Lead agencies will know how long services can be authorized and what requirements must be met annually: 29 (goal met or likely met), 10 (unsure), 17 (goal not met or unlikely)

# Common themes from the narrative responses (page 1)

- Many people would like the covered services under specialized services to be available to people using crisis respite services as well.
- Many people commented on confusion about service duplication and what is the responsibility of each service provider when multiple services are being offered at the same time.
- Some of the terms needed clarifying, such as “maintain stability,” “administrative costs,” and other “experts” that should be consulted.
- People supported that the proposal added outcomes requirements to the services, and some would like to expand on the outcomes language further to ensure providers are helping people meet their goals.
- Some people asked for clarification on the duties of the supervisor versus the advisory professional.

# Common themes from the narrative responses (page 2)

- Several people felt lead agencies do not have time to do all the requirements listed in the service draft.
- There were several comments of concern about requiring the use of the “lowest cost professional” available and notes about preferring to let teams make decisions on who they want to work with. Other, though fewer, people commented that they like the requirement.
- Some comments indicated people did not know the license holders will also be required to follow additional service requirements outside this proposal, such as requirements in:
  - Minn. Stat. 245D;
  - Minn. Rule 9544; and
  - Background check laws.

# Common themes from the narrative responses (page 3)

- Many people commented on things they would like related to billing for the service, though that was not part of this survey and will be included in a later survey once the service components are updated to reflect feedback.
- Multiple people commented they would like more requirements added to provider qualifications or would like fewer people to qualify to provide the services. Whereas others commented they thought the requirements were already too difficult to meet and would make it difficult to find enough workers.
- Several people were concerned about fraud with the current and proposed services, including lack of progress made with the services paired with never ending use of the services.
- Several people generally expressed excitement about the new opportunities the proposal provides.

# Common themes from the narrative responses (page 4)

- Some comments were made requesting the use of certain therapies or support strategies.
- Some people did not think the change or the services were needed and did not feel people would use intervention services much or engage in physical activities.
- There was confusion about the role of the MNChoices assessment, other assessments, and service authorizations.
- Some people asked what to do when a person, guardian, or other service provider refuses to implement the recommendations of a specialized services provider or refuses to comply with the service requirements.
- Multiple comments indicated that people are under the impression that existing services and this new service typically cover person-centered planning facilitation. However, that type of planning facilitation is covered under the waiver service called “family training and counseling.”

# Common themes from the narrative responses (page 5)

- Several people wanted more flexibility in timelines and requirements for additional assessments, particularly when they do not have control over assessment timelines or access to those documents.
- Many people asked for clarity between lead agency and provider roles when it comes to incorporating recommendations from other types of assessments, collaboration and consultation with others, and coordinating of services.
- In the definition and eligibility sections, several people asked for clarification on terms and would like more detail and additions.
- Multiple people thought supporting people with challenging behaviors with recreational activities in isolated settings was too dangerous and should be removed as an option.

# Common themes from the narrative responses (page 6)

- A few people provided ideas for adding services to the proposal.
- For remote and indirect supports, many people wanted more detail or were concerned about fraud or misuse of supports provided in that way.
- For locations where services can be offered, multiple people requested more detail. A few people asked for specialized services in educational settings.
- A few people requested expansion to eligibility for services, such as they would like people who are blind to specifically benefit from this service.

## Next steps

- Using the feedback, DHS will update the draft along with some recommendations to prevent misuse of the services and to improve program integrity.
- DHS will ask members of the Virtual Insight Panel who are people receiving services to weigh in on the updated draft through focus group meetings, since the survey and public meeting approaches only reached a small number of people using services.
- Another survey will be sent to service providers and lead agencies to weigh in on potential service rates and proposed billing guidelines.
- DHS may need to publish some clarifications in the meantime, such as how to bill for person-centered planning facilitation.