

DHS Vulnerable Adult Protections Costs Summary

(Last updated May 15)

Note: The explanation for costs related to the Ombudsman for Long Term Care (OOLTC) will be summarized separately by the OOLTC Ombudsman. All summary amounts are state General Fund, net of federal matching funds, where applicable.

Assisted Living Report Card

FY 20-21- \$1.728 million, FY 22-23- \$1.540 million

This proposal establishes a comprehensive report card quality measurement system for the nearly 1,700 facilities currently operating as housing with services in Minnesota, facilities that will require an assisted living license in August 2021. There is little existing information on quality of services for consumers and families to use.

Funding covers the cost of: (1) surveys of 47,000 residents using interviews and paper surveys, and up to 50,000 family or friend via mail or phone; (2) a stakeholder workgroup to help design assisted living quality measures, including measures from consumer and family survey data; (3) piloting the measures; (4) developing an online report card platform; and (5) launching and maintaining the report card. The funding is detailed below:

- An appropriation of **\$2,500,000** is needed for the family and consumer surveys would be appropriated every two years starting in FY 2022.
- In addition, another **\$120,000** in FY 2020 and FY 2021 is needed for stakeholder engagement and outreach and marketing. **\$100,000** is needed ongoing for this purpose.
- Two FTE's are needed for integrating and analyzing data from the surveys, data collection, and report card and measure development. **FY 2020- FY \$207,000 (1.5 FTE's), FY 2021- \$227,000 ongoing (2 FTE's).**
- In addition, **\$105,000** is needed for systems costs (state share) to complete the web design and development in FY 2020 and FY 2021. **\$21,000** is needed ongoing.
- In addition, **\$1,000,000** from Aging grants to administrative funds to repurpose the existing funds to develop the first Home and Community Based Services report card for assisted living. This transfer is budget neutral.

Civil and Criminal Coordination for Protection of Vulnerable Adults

FY 20-21- \$4.591 million, FY 22-23- \$5.649 million

Timely and accurate law enforcement notification and response is needed when investigating allegations of maltreatment or abuse. This improves the ability of law enforcement and the state to share information about these allegations so law enforcement are immediately notified of reports that may require a criminal investigation.

This spending includes improvements to the existing Minnesota Adult Abuse Reporting Center (MAARC), the statewide reporting system for suspected maltreatment of vulnerable adults:

- 24/7 systems and application support for MAARC; **Systems costs: \$300,000 per year state share**
- A MAARC dashboard for real time management, oversight and compliance; **Systems costs: \$812,000 state share over four years.**
- GIS mapping to identify law enforcement agencies investigating alleged crimes; **Systems costs: \$817,000 state share over four years**
- Data transmission between law enforcement and MAARC to improve use of resources, reduce unnecessary data entry, and secure data transmission between agencies; **Systems costs: \$806,000 over four years.**
- Creating a dedicated state grant appropriation of **\$2.5 million in FY 20-21 and \$4.705 million in FY 22-23** for county or tribal responses on behalf of vulnerable adults who have been abused, neglected or exploited.

Vulnerable Adult Protection- Case management system at MDH

FY 20-21: \$1.093 million, FY 21-22- \$436K

This funding provides systems funding for MNIT at DHS required by the MDH proposal- Vulnerable Adult Protection-Current Operations Improvements. MDH is creating a centralized framework for case management using DHS's Social Services Information System (SSIS). It will integrate existing IT systems for electronic licensing and document management and the Minnesota Adult Abuse and Reporting Center (MAARC). Systems funding is also required for a reporting portal related to nursing home self-reports.