
Appellant: [REDACTED]
For: DD Waiver
Agency: [REDACTED] County
Docket: 224208

**DECISION OF
STATE AGENCY
ON APPEAL**

On July 25, 2019, Human Services Judge Amber Kusler held a hearing under Minnesota Statutes, § 256.045, subdivision 3.¹

The following people appeared at the hearing:

[REDACTED]

The human services judge, based on the evidence in the record and considering the arguments of the parties, recommends the following Findings of Fact, Conclusions of Law, and Order.

¹ The Minnesota Department of Human Services ("DHS") conducts state fair hearings pursuant to Minnesota Statute § 256.045, subd. 3. DHS also conducts maltreatment and disqualification hearings on behalf of the Minnesota Departments of Health and Education pursuant to Minn. Stat. §§ 626.556, subd. 10i and 626.557, subd. 9d.

STATEMENT OF ISSUE(S)

The issue raised in this appeal is:

Whether the reduction in [REDACTED] ("Appellant")'s Consumer-Directed Community Supports ("CDCS") budget was based on an accurate Developmental Disabilities Screening.

PROCEDURAL HISTORY

1. On June 6, 2019, [REDACTED] County ("Agency") sent written notice to [REDACTED] that effective July 1, 2019, Appellant's CDCS budget would be reduced from \$21,695.60 to \$14,625.55 due to a change in his assessed level of need. *Agency Exhibit 8*.

2. On June 25, 2019, the [REDACTED] appealed the reduction of Appellant's CDCS budget. *Appellant Exhibit A*.

3. On July 25, 2019, Human Services Judge Amber Kusler held an evidentiary hearing on the matter by telephone conference. The record closed following the hearing, consisting of the hearing testimony and 13 exhibits.²

FINDINGS OF FACT

1. Appellant, born on April 27, 2015, is the four year-old son of [REDACTED] *Agency Exhibit 4 at 1; [REDACTED] Testimony, [REDACTED] Testimony*. He was born at 28 weeks gestation, weighing less than three pounds, and he spent three months in a neonatal intensive care unit. *Id. at 1*. Following his discharge, he was placed through the foster care system with the [REDACTED] who eventually adopted him. *Id.*

2. Appellant has a history of serious and complex medical conditions. Following his birth, he developed retinopathy of prematurity, chronic lung disease of prematurity, and brain hemorrhages, which resulted in permanent brain damage. *Agency Exhibit 4 at 1; [REDACTED] Testimony*. His other diagnoses include a heart murmur, right hip dysplasia, left knee inversion, microcephaly, vision impairment, and developmental delays. *Id. at 1-2; [REDACTED] Testimony; Appellant Exhibit A*. He has had multiple prior surgeries, including three shunt

² APPELLANT. *Exhibit A: Appeal to State Agency*.

AGENCY. *Exhibit 1: State Agency Appeals Summary and narrative, Notice of Appeal, Exhibit 2: 2018 MnCHOICES Planning Summary, Exhibit 3: 2018 DD Screening Report, Exhibit 4: 2019 MnCHOICES Planning Summary, Exhibit 5: 2019 DD Screening Report (initial), Exhibit 6: 2019 Community Support Plan, Exhibit 7: Notice of Action, dated May 30, 2019, Exhibit 8: Notice of Action, dated June 6, 2019, Exhibit 9: 2019 DD Screening Report (revised), Exhibit 10: Notice of Action, dated July 11, 2019, Exhibit 11: CDCS Manual, "Variables used in the CDCS budget methodology for the DD Waiver."*

OTHER. *Exhibit 12: DHS' DD Screening Document (DHS Form DHS 3067), admitted into the record by judicial notice. Minn. Stat. § 256.045, subd. 5. This form is available online at: <https://edocs.dhs.state.mn.us/lfserver/Public/DHS-3067-ENG>.*

placements, hernia repair, and procedures to his knee and hip, and he receives weekly physical therapy and injections every six months for spasticity. *Id. at 1; [REDACTED] Testimony.* He is described as “a happy little boy” who has overcome much in his young life. *Id. at 1.*

3. Appellant currently receives services through the Developmental Disabilities (“DD”) waiver program and CDCS, which are administered by the Agency. *Agency Exhibit 8; [REDACTED] Testimony.*

4. **2018 assessment.** On May 3, 2018, Agency social worker [REDACTED] completed a MnCHOICES assessment and DD Screening of Appellant, which assessed his needs and determined the level of care he required. *Agency Exhibits 2-3, 8; Exhibit 12.* Relevant here, the DD Screening required Ms. [REDACTED] to describe Appellant’s level of mobility by assigning a specific score. *Agency Exhibit 3; [REDACTED] Testimony.* At the time, she noted that he could use a reverse walker but preferred to crawl because he was quicker at it. *Agency Exhibit 2 at 1.* She also noted that he now had a gait trainer to encourage his independence with walking. *Id.* Concluding that Appellant was unable to move from one place to another, Ms. [REDACTED] assigned him a score of “08,” which indicated, “Not mobile due to overriding medical conditions.” *Agency Exhibit 3 at 2; [REDACTED] Testimony.* Based on the overall results of the 2018 MnCHOICES assessment and DD Screening, Appellant was determined eligible for several programs and services, including the DD waiver program, 3.5 hours of daily Personal Care Assistance (“PCA”) services, and an annual CDCS budget of \$21,695.60. *Agency Exhibits 2, 8.*

5. **2019 assessment.** On May 22, 2019, [REDACTED] [REDACTED] reassessed Appellant’s needs and level of care by completing an updated MnCHOICES assessment and DD Screening. *Agency Exhibits 4-5.* She was again required to describe Appellant’s level of mobility in the DD Screening by assigning one of the following nine scores:

- 01- No impairment
- 02- Walks short distances independently
- 03- Walks aided (walker, crutches, assistance of a person, etc.)
- 04- Propels own wheelchair – bears weight for transfers
- 05- Propels own wheelchair – total assistance with transfers
- 06- Uses electric wheelchair
- 07- Unable to propel wheelchair
- 08- Not mobile due to overriding medical conditions (specify in notes)
- 99- Unknown (justify in notes)

Agency Exhibit 5 at 2; Exhibit 12. At the time, Appellant moved around by using his reverse walker and crawling, and Ms. [REDACTED] understood that he engaged in each activity 50% of the time. [REDACTED] *Testimony; Agency Exhibit 4 at 1.* Concluding that he was now mobile, she assigned him a score of “03,” which indicated, “Walks aided (walker, crutches, assistance of

a person, etc.).” *Id.*; *Agency Exhibit 5 at 2; Exhibit 12*. Based on the overall results of the 2019 MnCHOICES assessment and DD Screening, Appellant was determined eligible for several programs and services, including the DD waiver program, 6.0 hours of daily PCA services, and an annual CDCS budget of \$14,625.55. *Agency Exhibits 4, 8*.

6. On June 6, 2019, the Agency sent written notice to the [REDACTED] that effective July 1, 2019, Appellant’s CDCS budget would be reduced from \$21,695.60 to \$14,625.55 due to his current assessed level of need. *Agency Exhibit 8*.

7. On June 25, 2019, the [REDACTED] appealed the reduction of Appellant’s CDCS budget. *Appellant Exhibit A*.

8. On June 25, 2019, [REDACTED] [REDACTED] completed a revised DD Screening, which corrected Appellant’s vision score. *Agency Exhibit 9 at 1-2*. As a result, his CDCS budget increased from \$14,625.55 to \$14,972.30. *Agency Exhibit 10*. The Agency sent the [REDACTED] written notice of this increase on July 11, 2019. *Agency Exhibit 10*.

9. On July 25, 2019, Human Services Judge Amber Kusler held an evidentiary hearing on the matter by telephone conference. During the hearing, the [REDACTED] confirmed that they were not appealing Appellant’s eligibility for PCA services and that their sole dispute with his DD Screening was his mobility score. [REDACTED] *Testimony*; [REDACTED] *Testimony*.

10. **Agency.** [REDACTED] [REDACTED] testified that in 2018, Appellant was unable to get from one place to another, but in 2019, he could move around by crawling or using his walker. [REDACTED] *Testimony*. Due to this change, and the fact that he did not yet have his wheelchair, she believed that a score of “03” most appropriately described his circumstances.³ *Id.*

11. **Appellant.** [REDACTED] is home with Appellant for most of the day. [REDACTED] *Testimony*. She testified that he continues to crawl approximately 70% of the time at home, but she agreed that he has used his walker up to 50% of the day. *Id.* However, this is because someone has told him to use it. *Id.* She testified that he currently lacks the stamina and wherewithal to use it full-time and may have to be transported by wagon at school. *Id.* She testified that when they are outside the home, she must carry Appellant at least 80% of the time. *Id.* [REDACTED] testified that when Appellant is home, he moves around by using a walker approximately 50% of the time and crawling or walking along furniture 50% of the time. [REDACTED] *Testimony*. He confirmed that when they are outside the home, Appellant crawls or must be carried. *Id.* He testified that Appellant is unable to control or navigate his wheelchair in crowds and will continuously bump into people. *Id.*

³ Since Appellant obtained a wheelchair after the DD Screening, it is unknown if or how it would affect his CDCS budget. If his parents are interested in obtaining more information about this, they should speak to the Agency.

ARGUMENTS OF THE PARTIES

1. **Appellant.** The [REDACTED] argued that crawling does not constitute mobility for a four year old and that a score of “03” does not accurately describe how Appellant lives his day-to-day life. They believe the Agency should have erred on the side of difficulty and assigned him a score of “08.” While they agreed Appellant is making progress, they argued that his overall level of need has not decreased. As a result, they questioned the Agency’s grounds for reducing his CDCS budget. [REDACTED] and [REDACTED] *Testimony; Appellant Exhibit A.*

2. **Agency.** The Agency argued it correctly assessed Appellant’s needs in the DD Screening based on the information known and the assessor’s best efforts and judgment. It argued that while the MnCHOICES assessment may show increased need in certain areas, it has no weight on the DD Screening, which is used to determine the CDCS budget. It also argued that due to the differing weights of the variables assessed in the DD Screening, an individual’s decreased need in one area can still result in a reduced CDCS budget despite increased needs in other areas. [REDACTED] *Testimony; [REDACTED] Testimony; Agency Exhibit 1.*

CONCLUSIONS OF LAW

1. **Jurisdiction.** A state agency hearing is available to any individual applying for, receiving, or having received public assistance, medical care, or a program of social services granted by a state or county agency or the federal Food Stamp Act whose application for assistance is denied, not acted upon with reasonable promptness, or whose assistance is suspended, reduced, terminated, or claimed to have been incorrectly paid. *Minn. Stat. § 256.045, subd. 3(a).* Unless a different deadline is otherwise specified by state or federal law, a party is authorized to request a state fair hearing to contest an agency’s action by filing a written appeal within 30 days after receiving written notice of the action or within 90 days of such written notice if the party shows good cause why the request was not submitted within 30 days. *Id. at subd. 3(i).* The party filing the appeal has the burden of proving good cause by a preponderance of the evidence. *Id.*

2. **Scope of review.** The appeal hearing must address the correctness and legality of the Agency’s action and shall not be limited simply to a review of its propriety. *Minn. Stat. § 256.0451, subd. 16; Minn. Stat. § 256.045, subd. 5.*

3. **Burden of persuasion.** The burden of persuasion in an administrative appeal is governed by state or federal laws that apply to the hearing. *Minn. Stat. § 256.0451, subd. 17.* When there is no specific burden of persuasion provision, the party seeking that a certain action be taken must prove the facts at issue by a preponderance of the evidence. *Id.*

4. **Preponderance of the evidence.** The “preponderance of the evidence” means, in light of the record as a whole, the evidence leads the human services judge to believe that the finding of fact is more likely to be true than not true. *Minn. Stat. § 256.0451, subd. 22(b)*. To make a fair and accurate decision, the human services judge must accept all relevant, non-privileged evidence and ensure that the record is sufficiently-developed. *Id. at subd. 19; Minn. Stat. § 245.045, subd. 4(b)*. A participant’s legal claims or arguments do not constitute a finding of fact or a conclusion of law, except to the extent the human services judge adopts an argument as a finding of fact or conclusion of law. *Minn. Stat. § 256.0451, subd. 22(b)*.

WAIVER SERVICES

5. **Federal authority and oversight over waiver programs.** Under Section 1915(c) of the Social Security Act (42 U.S.C. § 1396n(c)), a state may obtain a Medicaid waiver that allows it to include in its Medicaid program the cost of home or community-based services (other than room and board) provided to individuals who would otherwise require care in a hospital, nursing facility, or intermediate care facility. Home or community-based services include personal care services, habilitation services, and other services requested by the agency and approved by the Centers for Medicare & Medicaid Services as cost effective and necessary to avoid institutionalization. *42 C.F.R. § 440.180*. The Minnesota Department of Human Services (“DHS”) has authorization from the federal government to offer services exceeding the scope and limitations of its standard Medicaid program, known as Medical Assistance (“MA”). *Minn. Stat. § 256B.49, subd. 11; 42 U.S.C. §§ 1396 et seq.* The authorized federal waivers are intended to avoid institutionalization, not exceed the cost of institutionalization, and make broader services available to address recipient needs unmet by MA. *Id.* As such, several home and community-based waiver programs were developed and are managed by DHS, including the DD waiver. *DHS Community-Based Services (“CBS”) Manual, Waiver programs: “Waiver and Alternative Care programs overview.”*⁴

6. **DD waiver.**

a. **Overview.** The DD waiver provides home and community-based services to children and adults with a diagnosis of a developmental disability or a related condition who require the level of care provided in an intermediate care facility for persons with developmental disabilities. *CBS Manual, Waiver programs: “Developmental Disabilities (DD) Waiver.”* These services are an alternative to institutionalization; they help the individual live as independently as possible in community settings and promote optimal health, independence, safety and community integration. *Id.*

⁴ The CBS Manual is a resource for lead agencies who administer home and community-based services that support older adults and people with disabilities. It is available online through the DHS website, located at: https://www.dhs.state.mn.us/main/idcplg?IdcService=GET_DYNAMIC_CONVERSION&RevisionSelectionMethod=LatestReleased&dDocName=id_000402.

b. **Eligibility.** To be eligible for the DD Waiver, a person must choose to live in the community and meet all of the following criteria:

- Be eligible for MA based on a disability or other eligibility status;
- Have a developmental disability or related condition as defined in Minnesota Rule 9525.0016, subpart 2;
- Be assessed using MnCHOICES or a DD screening and be determined to need the level of care provided in an intermediate care facility for persons with developmental disabilities;
- Require daily interventions, daily service needs and a 24-hour plan of care that is specified in the support plan;
- Have an assessed need for habilitation, which must be included in the support plan;⁵ and
- Have an assessed need for supports and services beyond those available through MA.

CBS Manual, Waiver programs: “Developmental Disabilities (DD) Waiver.”

c. **DD Screening.** The DD Screening evaluates the level of care needed for an individual who has been diagnosed with a developmental disability or related condition. *CBS Manual, Assessment and support planning: “Developmental Disabilities Screening.”* It contains 50 different fields that fall under four different categories: case information, present at screening, assessment section, and support planning. *DD Screening Document Codebook, “Developmental disabilities (DD) screening document fields.”*⁶ To complete the assessment section, the agency worker must enter a predetermined code (score) for each field listed. *Id.* Workers are advised to enter the code that best describes the individual’s circumstances, and the DD Screening Document Codebook provides some examples for assistance. *Id.* Relevant here, it instructs agency workers to complete the mobility field as follows:

Enter the code that best describes the person’s level of mobility. If the person’s mobility is limited by any medical condition, specify that condition in the notes section.

01 – No impairment

Example: The person walks without difficulty.

02 – Walks short distances independently

Example: The person walks with a rough gait, is at risk of falling down or has difficulty walking on uneven surfaces.

03 – Walks aided (with assistance)

Example: The person may use a walker, crutches or need assistance from another person to ambulate.

⁵ Habilitation is designed to help those with developmental disabilities develop, maintain, and improve the self-help, socialization, and adaptive skills necessary to live successfully in their homes and communities. It is directed toward increasing and maintaining physical, intellectual, emotional and social functioning. Habilitation is different from rehabilitation, which involves the restoration of function a person lost. *CBS Manual, “CBSM glossary of terms and acronyms.”*

⁶ The Developmental Disabilities (DD) Screening Document Codebook is a reference tool for lead agency workers who complete DD screening documents. The cited section is available online at: https://www.dhs.state.mn.us/main/dcplg?IdcService=GET_DYNAMIC_CONVERSION&RevisionSelectionMethod=LatestReleased&dDocName=id_008494#.

04 – Propels own wheelchair – Bears weight for transfers

Example: The person manually propels his/her own wheelchair, is mobile and can bear weight but is not ambulatory.

05 – Propels own wheelchair – total assistance with transfers

Example: The person manually propels his/her own wheelchair, but he/she cannot bear weight for transfers. He/she is mobile but not ambulatory.

06 – Uses electric wheelchair

Example: The person can independently operate his/her own electric wheelchair.

07 – Unable to propel wheelchair

Example: The person can move his/her wheelchair slightly to change his/her view, but he/she does not move the wheelchair from one room to another. His/her wheelchair movements are for extremely short distances.

08 – Not mobile due to overriding medical conditions (specify in notes)

You must justify this code in the notes section.

Example: The person is confined to bed.

99 - Unknown (justify in notes)

You must justify this code in the notes section.

Examples:

- The person is an infant or young child who has not reached the developmental stage in which mobility skills can be expected and/or accessed
- The person's recent spinal injury prevents an accurate diagnosis.

Id.

CONSUMER DIRECTED COMMUNITY SUPPORTS

7. **Overview and budget.** CDCS is a service option available to individuals on the DD and other home and community-based services waivers. *CDCS Policy Manual, "Home Page."*⁷ It provides recipients with more flexibility and responsibility for directing both traditional and self-designed services and supports, including hiring and managing direct care staff. *Id.* CDCS recipients receive individual budgets that include the costs of all authorized waiver and MA state plan home care services. *Id.* CDCS budget amounts are calculated annually based upon a formula developed by the State in accordance with federal waiver authority for each waiver program. *CDCS Policy Manual, "CDCS budgets."* This formula uses identified variables from the recipient's face-to-face assessment which are scored according to what is reported and/or observed during the assessment process. *Id.* The CDCS budget methodology differs depending on the program or waiver involved. *Id.* In addition, while the budget is based partly upon scores determined by the agency, the actual budget calculations are completed by DHS.

⁷ DHS' CDCS Manual is the primary source for CDCS policy and is a reference for lead agencies, financial management services providers, support planners and individuals who use CDCS. It is available online at: https://www.dhs.state.mn.us/main/idcplg?IdcService=GET_DYNAMIC_CONVERSION&RevisionSelectionMethod=LatestReleased&dDocName=cdfs_home#.

8. **Budget methodology for the DD waiver.**

a. **Formula.** The formula used to determine the CDCS budgets of DD waiver recipients is: (Total Daily Weight) x (0.9964) x (0.70). *CDCS Policy Manual, "CDCS budget methodology for the DD waiver."*⁸ The agency determines the recipient's totally daily weight using a constant of -120.534 and 28 specific variables, whose individual weights range from -56.839 to 48.724. *CDCS Policy Manual, "Variables used in the CDCS budget methodology for the DD waiver."*⁹ Relevant here is the variable of mobility, which has an assigned weight of 4.780 and a range of scores from 0-8, which indicate the following:

- 0 = Code of 99 (unknown)
- 1 = Code of 01 (no impairment)
- 2 = Code of 02 (walks short distances independently)
- 3 = Code of 03 (walks aided – e.g., walker, crutches, assistance of a person, etc.)
- 4 = Code of 04 (propels own wheelchair – bears weight for transfers)
- 5 = Code of 05 (propels own wheelchair – total assistance with transfers)
- 6 = Code of 06 (uses electric wheelchair)
- 7 = Code of 07 (unable to propel wheelchair)
- 8 = Code of 08 (not mobile due to overriding medical conditions)

Id.

b. **Calculating the budget.** Once the variable scores are determined, the recipient's CDCS budget is calculated by taking the following steps:

- First, the weight of each variable is multiplied by the recipient's score for it, as identified in his or her DD Screening.
- Second, values calculated in step 1 are added to the constant of -120.534. This subtotal creates the total daily weight.
- Third, the total daily weight is multiplied by 0.9964.
- Fourth, the amount calculated in step 3 is multiplied by 0.70. This produces the total daily rate.
- Fifth, the total daily rate is multiplied by the current cumulative cost-of-living adjustment ("COLA"). This produces the adjusted daily rate. See CDCS – COLA.¹⁰

⁸ Available online at: https://www.dhs.state.mn.us/main/idcplg?IdcService=GET_DYNAMIC_CONVERSION&RevisionSelectionMethod=LatestReleased&dDocName=dhs-294529#. Per the CDCS manual, the 0.9964 factor reflects the 1% reduction imposed in the 2003 legislative session, and the 0.70 factor is necessary to keep the lead agency within its budget. *Id.*

⁹ Available online at: https://www.dhs.state.mn.us/main/idcplg?IdcService=GET_DYNAMIC_CONVERSION&RevisionSelectionMethod=LatestReleased&dDocName=dhs-294531#.

¹⁰ The CDCS Manual includes a chart documenting the cost-of-living adjustments ("COLA") authorized by the Minnesota Legislature since 2005. Effective August 1, 2017, the annual COLA totaled 1.642% and the cumulative COLA totaled 16.4938%. Effective July 1, 2017, the annual COLA increased to 2.37%, and the cumulative COLA increased to 19.2547%. *CDCS Policy Manual, "Cost-of-living adjustments (COLA) for CDCS budgets – BI, CAC, CADI and DD,"* available online at:

- Finally, the adjusted daily rate is rounded to the nearest penny and multiplied by 365 days. This produces the recipient's individual budget limit for the service-plan year.

ANALYSIS AND CONCLUSION

9. ***Jurisdiction.*** Based on the foregoing, this Human Services Judge concludes that the Commissioner of Human Services has jurisdiction over Appellant's appeal under Minnesota Statutes, § 256.045, subdivisions 3(a) and 3(i), because it involves a matter for which a state agency hearing is available, and it was filed on a timely basis.

DD Screening. Based on the foregoing, this Human Services Judge concludes that the Agency has proven, by a preponderance of the evidence, that it correctly-assessed Appellant's needs in his DD Screening. At the time of the assessment, there were only two options that could apply: "03 – Walks aided," such as through use of a walker, crutches, or assistance of a third person, or "08 – Not mobile" due to overriding medical conditions. According to the DD Screening Document Codebook, a score of 08 would be appropriate for an individual confined to bed. Given these parameters and the evidence demonstrating that Appellant can physically-move from one place to another through crawling and—to a lesser extent—use of a walker, a score of 03 best described his level of mobility at the time.

The [REDACTED] provided credible testimony regarding their son's needs and their arguments regarding why crawling should not be considered mobility for a four year old or why a score of 03 is not an accurate characterization of Appellant's current abilities were both well-reasoned and persuasive. However, they are essentially objecting to the DD Screening itself—versus the Agency's interpretation of it—and the validity of this assessment tool is beyond the scope of this appeal. This Human Services Judge has no doubt that the DD Screening Tool does not adequately reflect Appellant's unique needs and abilities. However, the evidence demonstrates that it was completed properly by the Agency, and for this reason, the Agency's decision should be affirmed.

RECOMMENDED ORDER

Based on all of the evidence, I recommend that the Commissioner of Human Services:

- AFFIRM the reduction in Appellant's CDCS budget, because it was based on an accurate DD Screening of his needs.

Amber Kusler
Human Services Judge

Date

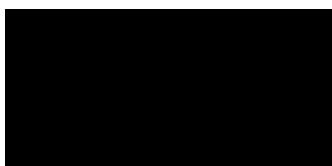
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ORDER

On behalf of the Commissioner of Human Services and for the reasons stated above, I adopt the recommended Findings of Fact, Conclusions of Law, and Recommended Order as the final decision of the Department of Human Services.

Date

cc:



FURTHER APPEAL RIGHTS

This decision is final unless you take further action.

Appellants who disagree with this decision should consider seeking legal counsel to identify further legal action. If you disagree with this decision, you may:

- **Request the appeal be reconsidered.** The request must state the reasons why you believe your appeal should be reconsidered. The request may include legal arguments and may include proposed additional evidence supporting the request. If you propose additional evidence, you must explain why the evidence was not provided at the hearing. **The request must be in writing and be made within 30 days of the date this decision was issued by the co-chief human services judge.** You can mail the request to: Appeals Office, Minnesota Department of Human Services, P.O. Box 64941, St. Paul, MN 55164-0941. You can also fax the request to (651) 431-7523. **You must send a copy of the request to the other parties.** To ensure timely processing of your request, please include the name of the human services judge assigned to your appeal and the docket number. The law that describes this process is Minnesota Statutes, § 256.0451, subdivision 24.
- **Start an appeal in the district court.** This is a separate legal proceeding that you must start **within 30 days of the date this decision was issued by the co-chief human services judge.** You start this proceeding by: 1) serving a written copy of a notice of appeal upon the Commissioner of Human Services and upon any other adverse party of record; and 2) filing the original notice and proof of service with the court administrator of the county district court. The law that describes this process is Minnesota Statutes § 256.045, subdivision 7.¹¹

¹¹ County agencies do not have the option of appealing decisions about Supplemental Nutrition Assistance Program (SNAP), Minnesota Family Investment Program (MFIP), or Diversionary Work Program (DWP) benefits to district court under 7 C.F.R. § 273.15(q)(2) and Minn. Stat. § 256J.40. A prepaid health plan may not appeal this order under Minn. Stat. § 256.045, subd. 7.