Community First  
Services and Supports

Disability Services Division  
March 2016

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This information is available in accessible formats to individuals with disabilities by calling 651-431-2400 or by using your preferred relay service.

For other information on disability rights and protections, contact the agency’s ADA coordinator.

Minnesota Statutes, Chapter 3.197, requires the disclosure of the cost to prepare this report. The estimated cost of preparing this report is $2,000.

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Community First Services and Supports

Table of contents

I. Legislation............................................................................................................................. 4

II. Introduction.......................................................................................................................... 5

III. Eligibility criteria ............................................................................................................... 6

IV. Report recommendations .................................................................................................. 8
I. Legislation

2015 Laws of Minnesota, Chapter 71, Article 7, Section 57:

INSTRUCTIONS TO THE COMMISSIONER

The commissioner shall determine the number of individuals who were determined to be ineligible to receive community first services and supports because they did not require constant supervision and cuing in order to accomplish activities of daily living. The commissioner shall issue a report with these findings to the chairs and ranking minority members of the house and senate committees with jurisdiction over human services programs.
II. Introduction

The 2015 Minnesota Legislature directed the Department of Human Services (DHS) to analyze the effect of specific criteria on the number of people eligible to participate in Community First Services and Supports (CFSS). DHS is developing CFSS as a new Medical Assistance service to replace personal care assistance (PCA) services.

CFSS has not yet been implemented; therefore, no one has been assessed for eligibility for the CFSS. DHS intends to use the same eligibility criteria for CFSS as currently used for PCA services. Minnesota Statutes, section 256B.85 authorizes CFSS and states its eligibility criteria. Eligibility and service authorization depend on the number of identified dependencies a person has in activities of daily living. If a person requires hands-on assistance or constant supervision and cueing to accomplish an activity of daily living, that person is dependent in that activity of daily living.

The 2015 Minnesota Legislature directed DHS to determine how many people would not be eligible for CFSS because they did not require constant supervision and cueing to accomplish activities of daily living. Based on previous discussions with legislators and other stakeholders, DHS interpreted the legislative concern to be that some people require supervision and cueing to accomplish activities of daily living but the amount of supervision may not be “constant.” In this report, DHS estimates the number of additional people who would be eligible for CFSS if the word “constant” was removed from the definition of dependency that will be used to determine eligibility for CFSS.
III. Eligibility criteria

DHS is developing CFSS as a new Medical Assistance service to replace personal care assistance (PCA) services. DHS intends to use the same eligibility criteria for CFSS as currently used for PCA services. Minn. Stat. §256B.85 authorizes CFSS and states its eligibility criteria.

The number of identified dependencies a person has in activities of daily living determines eligibility and service authorization for CFSS. If a person requires hands-on assistance or constant supervision and cueing to accomplish an activity of daily living, that person is dependent in that activity of daily living.

Some people require supervision and cueing to accomplish activities of daily living but the amount of supervision may not be “constant.” DHS estimated the number of additional people who would be eligible for CFSS if the word “constant” was removed from the definition of dependency that will be used to determine CFSS eligibility.

If the Minnesota Legislature removed the word “constant” from the definition of dependency used to determine eligibility for CFSS, additional people would qualify for the service. People who require some supervision and cueing to accomplish activities of daily living, but not “constant supervision and cueing,” would become eligible.

The 2009 Minnesota Legislature changed the definition of dependency used to determine eligibility for PCA services. (2009 Minn. Session Law, ch. 79, art. 8, sec. 31) As a result, approximately 5 percent of the people using PCA services at that time no longer were eligible. Based on this experience, DHS estimates removing the word “constant” from the definition of dependency for CFSS would increase the number of people eligible for CFSS by 5 percent. When DHS includes the forecasted growth in the number of people in the analysis, DHS estimates that approximately 1,837 additional people would use CFSS in 2019 with the expanded definition of dependency.

Table 1: CFSS estimated recipients based on February 2015 forecast

<table>
<thead>
<tr>
<th></th>
<th>State fiscal year 2017</th>
<th>State fiscal year 2018</th>
<th>State fiscal year 2019</th>
</tr>
</thead>
<tbody>
<tr>
<td>Estimated average monthly Medicaid State Plan (only CFSS recipients)</td>
<td>19,698</td>
<td>27,269</td>
<td>28,258</td>
</tr>
<tr>
<td>Factor to convert to unduplicated annual CFSS recipients</td>
<td>1.3</td>
<td>1.3</td>
<td>1.3</td>
</tr>
<tr>
<td>Estimated unduplicated annual Medicaid State Plan (only CFSS recipients)</td>
<td>25,607</td>
<td>35,449</td>
<td>36,735</td>
</tr>
</tbody>
</table>
### Table 2: Additional CFSS recipients with expanded definition of dependency

<table>
<thead>
<tr>
<th></th>
<th>State fiscal year 2017</th>
<th>State fiscal year 2018</th>
<th>State fiscal year 2019</th>
</tr>
</thead>
<tbody>
<tr>
<td>Percent increase in Medicaid State Plan (only CFSS recipients)</td>
<td>5%</td>
<td>5%</td>
<td>5%</td>
</tr>
<tr>
<td>Average monthly increase Medicaid State Plan (only CFSS recipients added)</td>
<td>985</td>
<td>1,363</td>
<td>1,413</td>
</tr>
<tr>
<td>Unduplicated number of annual Medicaid State Plan (only CFSS recipients added)</td>
<td>1,280</td>
<td>1,772</td>
<td>1,837</td>
</tr>
</tbody>
</table>
IV. Report recommendations

If a legislator has an interest in amending the definition of dependency, he or she should contact DHS for a fiscal analysis. If requested, DHS will conduct a fiscal analysis on the costs to change the definition of dependency. That estimate also would include service and administrative costs for training and technical assistance, which would be necessary to implement the change successfully.