

Incorporating Public Comments: Department of Human Services (DHS)

In spring 2026, the Olmstead Implementation Office (OIO), in partnership with the Dendros Group, Inclusion Consultants, and state staff, held a public comment period. This included:

- Virtual meetings
- An online survey in multiple languages
- Individual interviews
- Submissions from organizations
- Email comments

This document includes themes from all public comment. Agency teams were asked to address how feedback was incorporated into their goals and strategies in the Olmstead Plan.

For more information about this feedback, please review the transition and crisis services public comment summary report.

The Department of Human Services (DHS) shared how they did or did not update their goals and strategies based on general feedback for each of their goals.

General feedback themes for all transition goals included:

- The Olmstead Plan needs to address the direct care workforce shortage.
- The transition goals need more accountability and enforcement measures.
- Intersectionality: Community members said the state must address disparities based on other identities held by people with disabilities. These identities can include race, ethnicity, gender, sexuality, socioeconomic status, language, and more.
- The Olmstead Plan should address crisis prevention.
- The plan is missing goals about important health topics.
- Goals about abuse and neglect need to focus on prevention.

Transition Goal 4

Transition Goal 4: More people with disabilities will move from segregated settings to integrated housing of their choice where they sign a lease and receive rent support

The DHS agency team reviewed the comments and strategy recommendations specific to this goal. The agency team made updates to their goal and strategies based on this specific feedback.

The agency shared:

Yes, we reviewed the comments and strategy recommendations specific to this goal. Note that the version published for public comment did not include targets. In our revision, we have included a baseline target and measurable goals.

Our goal includes baseline data from State Fiscal Year 2025 and yearly goals.

General feedback about Transition Goal 4

Feedback theme: The Olmstead Plan needs to address the direct care workforce shortage

DHS did not update Transition Goal 4 based on this feedback. The agency team shared:

DHS Housing, Homelessness, and Supportive Services Administration (HHSSA) did not update its Olmstead Plan goals or strategies in response to this feedback. While we recognize that direct care workforce shortages are an important issue that can affect access to services, transitions, health and safety, and crisis response, HHSSA does not currently collect or maintain data related to the direct care workforce that would suggest the development, measurement, or evaluation of workforce-specific goals or strategies within our section of the Olmstead Plan.

Feedback theme: The transition goals need more accountability and enforcement measure

DHS updated Transition Goal 4 based on this feedback. The agency team shared:

The transition goal was revised in response to feedback requesting greater accountability and measurable outcomes. The version of the Olmstead Plan released for public comment did not include baseline measures or performance targets. In the revised version, we added a baseline estimate and established measurable annual targets to track progress toward increasing the number of people living in integrated housing with a signed lease.

Feedback theme: Intersectionality

Community members said the state must address disparities based on other identities held by people with disabilities. These identities can include race, ethnicity, gender, sexuality, socioeconomic status, language, and more.

The DHS agency team did not update Transition Goal 4 based on this feedback. They shared:

DHS did not update Transition Goal 4 in response to this feedback. While HHSSA recognizes the importance of understanding and addressing disparities experienced by people with disabilities who hold multiple intersecting identities, demographic information is not consistently collected across the programs included in this measure.

Feedback theme: The Olmstead Plan should address crisis prevention

DHS did not update Transition Goal 4 based on this feedback. The agency team shared:

Transition Goal 4 was not updated in response to this feedback. While crisis services are an important component, Transition Goal 4 is specifically focused on increasing the number of people living in integrated housing with a signed lease.

Feedback theme: The plan is missing goals about important health topics

The DHS agency team did not update Transition Goal 4 based on this feedback. They shared:

While commenters identified additional health topics that could be included in the Plan, Transition Goal 4 remains focused on increasing the number of people living in integrated housing with a signed lease. As a result, no additional health-related goals or strategies were added in response to this feedback.

Feedback theme: Goals about abuse and neglect need to focus on prevention

The DHS agency team did not update Transition Goal 4 based on this feedback. The agency team shared:

DHS Housing, Homelessness and Supportive Services Administration (HHSSA) did not update Transition Goal 4 in response to this feedback. While the prevention of abuse and neglect is an important objective, HHSSA does not have access to or oversight of abuse and neglect data relevant to this goal. These data are managed by other areas within DHS that are responsible for monitoring, investigating, and reporting on abuse and neglect outcomes.

Transition Goal 5: how specific feedback was incorporated

Transition Goal 5: People who receive home- and community-based services will experience less use of restrictive procedures

DHS reviewed the specific comments and strategy suggestions for this goal. In response to this feedback the agency shared:

Small changes were made to the goals and strategies for Transition Goal 5 based on the specific feedback. We ensured people could see when Emergency Use of Mechanical Restraints (EUMR) is allowed to be used.

We provided an example to show how mental health can impact restraint use in the mechanical restraint goal.

None of the public comments (outside of Office of Ombudsman for Mental Health and Developmental Disabilities (OOMHDD) not wanting us to use Behavior Intervention Reporting Form (BIRF) (reports at the data number) were specifically linked to Transition Goal 5. We believe that tracking the use of EUMR and attempted to reduce by 5% is a strong, concrete goal that has little risk of harm to people.

Transition Data Goal 3: how general feedback themes were incorporated

Transition Data Goal 3: Fewer Minnesotans with disabilities will go out-of-state to receive services

Feedback theme: The Olmstead Plan needs to address the direct care workforce shortage

The DHS agency team updated their goals and strategies based on this specific feedback. They shared:

See changes to Transitions Data Goal 3. We modified the goal to specifically address workforce. This goal remains a data collection goal but is focused on the impact the direct care worker shortage had on a person.

Feedback theme: The transition goals need more accountability and enforcement measures

The agency team updated some of their goals and strategies based on this feedback. They shared:

A workforce shortage goal was added with some context about limitations in DHS's scope of authority. Limitations include the role of the legislature in setting rates which help drive wages. It is also worth noting that recent changes have increased work needs related to program integrity and that we only currently have 1 staff devoted to direct care workforce shortage initiatives.

DHS Disability Services Division (DSD) policy is not able to investigate unreported use of restraint (what the feedback seemed to be about) as that is the domain of licensing. We did add information related to the role of DHS in the workforce shortage strategies.

Feedback theme: Intersectionality

Community members said the state must address disparities based on other identities held by people with disabilities. These identities can include race, ethnicity, gender, sexuality, socioeconomic status, language, and more.

Feedback theme: The Olmstead Plan should address crisis prevention

The DHS agency team updated their goals and strategies based on this specific feedback. They shared: “We believe that the addition of a workforce shortage goal addresses the comments that suggested the workforce is driving crisis. “

Feedback theme: The plan is missing goals about important health topics

DHS did not update their goals and strategies based on this topic. The agency team shared: “We didn’t see anything about important health topics in our feedback.”

Feedback theme: Goals about abuse and neglect need to focus on prevention

DHS did not update their goals and strategies based on this specific feedback. The agency shared:

We added some comments in the documents so Olmstead team would know what is already available and how the system could address these concerns. A new goal led by Office of Inspector General (OIG) or Minnesota Department of Health would likely be better equipped to address the concerns.

Transition Data Goal 4

Transition Data Goal 4: Minnesotans with disabilities will have timely access to services

Feedback theme: The Olmstead Plan needs to address the direct care workforce shortage

DHS did not update Transition Data Goal 4 based on this feedback. The agency shared:

The direct care workforce shortage is related to this set of transition goals in that an adequate workforce plays an essential role in timely access to services. Addressing the direct care workforce shortage, however, is out of scope for this set of transition goals. This set of transition goals is focused on measuring timepoints along the journey of accessing services and measuring the percentage of authorized services that were received.

Feedback theme: The transition goals need more accountability and enforcement measures

DHS updated Transition Data Goal 4 based on this feedback. The agency shared: “Transition Data Goal 4a was revised to shorten the timeline of the development of a measure from 2031 to June 30, 2027.”

Transition Data Goal 5

Transition Data Goal 5: Direct support professionals (DSPs) and people with disabilities will shape the future of Minnesota’s Medicaid program

The DHS agency team reviewed the comments and strategy recommendations for Transition Data Goal 5. They updated this goal based on these comments. They shared:

With regards to the comment about the difficulty to recruit Direct Support Professionals (DSPs), this goal does have funding from legislature to provide stipends for individuals participating. It will be held as short series of sessions with DSPs and individuals who require the use direct support assistance in their services to gather their feedback on the state of the direct support profession, including wages, benefits, working environments, etc.

Also, while this is a Centers for Medicare & Medicaid Services (CMS) requirement, we do believe it will help make an impact by learning more about the working experience of DSPs, which is a top theme to address in the Omstead Plan. We feel it is important to learn from people through deep conversations to gather qualitative data as opposed to relying only on surveys, wage analyses, and other quantitative data gathering methods to understand how we can improve our Medicaid system that DSPs form the backbone of. Without goals like this to better understand the problems the problems of our workforce shortage, other goals may end up missing their mark by failing to bring in the DSPs they are designed to support.

Transition Data Goal 6

Transition Data Goal 6: People with disabilities are protected from increases in the use of mechanical restraint

The DHS agency team reviewed the comments and strategy recommendations for this goal. They updated Transition Data Goal 6 based on this feedback. The agency shared:

We created a goal around collaborating with DHS HCBS Licensing to assure appropriate follow-up of unreported mechanical restraint usage. Additionally, Community Capacity and Positive Supports team (CCPS) and DHS Licensing will partner with other offices to publicize mechanisms for reporting prohibited use of mechanical restraints. CCPS will use the EPRC annual report to

attest to the fact that the EPRC had timely review, was staffed by required professionals, and was in adherence with other positive support standards.

Transition Data Goal 7

Transition Data Goal 7: More people with disabilities will move from segregated settings to integrated settings

DHS reviewed the comments and strategy recommendations specific for this goal. DHS updated Transition Goal 7 based on this feedback. The agency team shared:

With clearly defining segregated and integrated settings, the above settings are included in the following ways: CRFs would be considered integrated settings and data would track whether someone enters a CRF from a segregated setting. PRTFs are considered a segregated setting in the definition.

Group homes would be considered an integrated setting per the definition now included in the updated goal.

Settings have been clearly defined what segregated and integrated settings are to be able to capture more accurate data.

Segregated Settings:

- Nursing Facility
- Intermediate Care Facility for Persons with Developmental Disabilities (ICF/DD)
- Child and Adolescent Behavioral Health Services (CABHS)
- Psychiatric Residential Treatment Facility (PRTF)
- Institute for Mental Disease (IMD) for those younger than 21 and older than 64
- IMD/SUD that meetings the following requirements (MHM only):
- Licensed under Minn. Stat. Ch. 245G as a residential SUD treatment program.
- Attested to provide a specified ASAM level of care and meet ASAM criteria standards under the 1115 Substance Use Disorder System Reform Demonstration, as required by Minn. Stat. §265B.0759, subd. 2b.
- Regional Treatment Center (RTC) that provides inpatient services to people on MA (RSC only)

Integrated Settings:

- A home owned or leased by the person or their family member.

- An apartment with an individual lease and living areas in which the person or their family has control.
- A Minnesota Department of Health (MDH)-licensed assisted living residence with an individual lease, lockable access and egress and living areas in which the person or the person's family has access or control.
- A home in a community-based residential setting (i.e., community residential settings [CRS], adult foster care or family foster care) in which no more than four unrelated people live.

General feedback about Transition Data Goal 7

Feedback theme: The transition goals need more accountability and enforcement measures

DHS updated Transition Data Goal 7 based on this feedback. The agency shared:

Transition Data Goal 7 settings have been clearly defined what segregated and integrated settings are to be able to capture more accurate data.

Segregated Settings:

- Nursing Facility
- Intermediate Care Facility for Persons with Developmental Disabilities (ICF/DD)
- Child and Adolescent Behavioral Health Services (CABHS)
- Psychiatric Residential Treatment Facility (PRTF)
- Institute for Mental Disease (IMD) for those younger than 21 and older than 64
- IMD/SUD that meetings the following requirements (MHM only):
- Licensed under Minn. Stat. Ch. 245G as a residential SUD treatment program.
- Attested to provide a specified ASAM level of care and meet ASAM criteria standards under the 1115 Substance Use Disorder System Reform Demonstration, as required by Minn. Stat. §265B.0759, subd. 2b.
- Regional Treatment Center (RTC) that provides inpatient services to people on MA (RSC only)

Integrated Settings:

- A home owned or leased by the person or their family member.
- An apartment with an individual lease and living areas in which the person or their family has control.
- A Minnesota Department of Health (MDH)-licensed assisted living residence with an individual lease, lockable access and egress and living areas in which the person or the person's family has access or control.

- A home in a community-based residential setting (i.e., community residential settings [CRS], adult foster care or family foster care) in which no more than four unrelated people live.

Feedback theme: Intersectionality

Community members said the state must address disparities based on other identities held by people with disabilities. These identities can include race, ethnicity, gender, sexuality, socioeconomic status, language, and more.

DHS did not update Transition Data Goal 7 based on this feedback. The agency shared: “We did not include this because not all transitions capture this data. Currently, RSC does not track this data, however Moving Home MN does. The Olmstead Plan should address crisis prevention.”

Crisis Services Data Goal 1

Crisis Services Data Goal 1: More people will stay in the community after a crisis

The DHS team reviewed the comments and strategy recommendations specific to this goal. They updated Crisis Services Data Goal 1 based on this feedback. The agency shared: “We revised and added more strategies based on the public feedback. We also added a baseline and targets, to turn the goal into a measurable goal. See goal document for details.”

General feedback about Crisis Services Data Goal 1

Feedback theme: The Olmstead Plan needs to address the direct care workforce shortage

DHS did not update Crisis Services Goal 1 based on this feedback. The agency team shared:

The goal was not revised. This comment addresses direct care workforce shortages, which are a significant issue affecting multiple service systems and broader Olmstead Plan implementation efforts. The state recognizes that workforce availability, recruitment, and retention challenges can affect the ability of people with disabilities to access needed support and live successfully in the community. However, workforce planning and development activities are outside the scope of this specific crisis services goal and strategy. Addressing statewide workforce shortages would require broader policy development, cross-agency coordination, and consideration of additional legislative authority and funding beyond the scope of this data collection and performance goal. Therefore, no changes were made to the goal or associated strategies in response to this comment.

Feedback theme: The transition goals need more accountability and enforcement measures

DHS did not update Crisis Services Data Goal 1 based on this feedback. The agency shared:

The goals were not revised. This comment addresses accountability and enforcement measures, which fall outside the scope of the transition goals framework. While accountability, oversight, and compliance activities are important components of service delivery, they are addressed through existing regulatory, licensing, monitoring, and enforcement processes. The purpose of the transition goals is to measure progress toward successful transitions and improved outcomes for individuals receiving services. Therefore, no changes were made to these goals or associated strategies.

Feedback theme: Intersectionality

Community members said the state must address disparities based on other identities held by people with disabilities. These identities can include race, ethnicity, gender, sexuality, socioeconomic status, language, and more.

DHS did not update Crisis Services Data Goal 1 based on this feedback. The agency shared:

The goal, "More people will stay in the community after a crisis," has not changed because it is intended to measure outcomes for all Minnesotans receiving mobile crisis services. DHS agrees that understanding disparities among people with disabilities who also hold intersecting identities, such as race, ethnicity, gender, sexual orientation, socioeconomic status, and language, is important. However, narrowing this goal to only individuals with documented disability status would reduce the completeness and representativeness of the measure.

Mobile crisis services are available to all Minnesotans regardless of insurance status or ability to pay. In 2024, more than 14,000 Minnesotans received mobile crisis services. Many individuals with disabilities do not have disability status documented through Medical Assistance (MA), while others do not have MA coverage. In addition, disability information may not be captured during a crisis response. As a result, limiting this measure to individuals with documented disability status would substantially reduce the available data and likely exclude many Minnesotans with disabilities who receive mobile crisis services.

The Mental Health Information System (MHIS), which DHS uses for policy analysis, program management, service administration, and federally required reporting, currently collects demographic information including race, ethnicity, gender, payment source, and grant funding status. These data support analyses of disparities across multiple populations. However, MHIS does not consistently capture disability status for all individuals receiving mobile crisis services. Providers submit MHIS data twice annually, supporting ongoing statewide monitoring of service utilization and outcomes.

For these reasons, DHS is maintaining a population-level goal to ensure the measure reflects outcomes for everyone served by the mobile crisis system. At the same time, DHS will explore opportunities with the MHIS data team to enhance data collection mechanisms and capture additional demographic information, including disability status where operationally feasible. This approach preserves a comprehensive statewide outcome measure while strengthening future analyses of intersectional disparities.

Feedback theme: The Olmstead Plan should address crisis prevention

DHS did not update Crisis Services Data Goal 1 based on this feedback. The agency shared:

The goal, "More people will stay in the community after a crisis," has not changed because it is intended to measure outcomes for individuals who have already experienced a behavioral health crisis and received crisis intervention services. Mobile crisis services are designed to stabilize individuals during or immediately following a crisis and support safe diversion from emergency departments, hospitalization, or other institutional settings. They are not primary prevention services.

DHS acknowledges the importance of crisis prevention and agrees that preventing behavioral health crises is a critical component of a comprehensive behavioral health system. Expanding statewide crisis prevention efforts would require broader policy development, cross-agency coordination, and, where appropriate, consideration of additional legislative authority and funding. In addition, prevention activities fall outside the scope of this goal and are more appropriately addressed through upstream prevention initiatives, including the Minnesota Department of Health's 988 Lifeline System and Services. Maintaining the current goal preserves a clear focus on measuring the effectiveness of crisis response services and their intended outcome—helping individuals remain safely in their communities after a crisis.

Feedback theme: The plan is missing goals about important health topics

The DHS agency team did not update Crisis Services Data Goal 1 based on this feedback. They shared:

The goal, "More people will stay in the community after a crisis," has not changed because it is intended to measure the primary outcome of mobile crisis services: stabilizing individuals during a behavioral health crisis and supporting them to remain safely in the community. While mobile crisis teams facilitate connections to ongoing treatment and community resources, access to services is not the primary purpose or outcome of the intervention.

The Mental Health Information System (MHIS), which DHS uses for policy analysis, program management, service administration, and federally required reporting, is designed to capture crisis response activities and outcomes. MHIS records the type of crisis response provided, such as face-to-face intervention, telephone assessment, emergency referral, or referral-only

response. MHIS also captures referrals made following the crisis, including behavioral health treatment, housing supports, case management, crisis stabilization, psychiatric services, and other community-based services. These referral data demonstrate how mobile crisis teams connect individuals to ongoing supports, but they do not measure long-term access to or utilization of those services.

DHS recognizes the importance of improving access to health care, disability services, and other community-based supports. However, those outcomes extend beyond the scope of mobile crisis services and are addressed through other DHS programs and statewide initiatives. Maintaining the current goal preserves a clear and measurable focus on the intended purpose of mobile crisis services: responding to behavioral health crises, stabilizing individuals, and supporting them in remaining safely in their communities following a crisis.

Feedback theme: Goals about abuse and neglect need to focus on prevention

DHS did not update Crisis Services Data Goal 1 based on this feedback. The agency shared:

The goal was not revised. This comment addresses abuse and neglect prevention, which falls outside the scope of the crisis services framework. While proactive prevention efforts, including early identification of risks, strengthening safeguards, and ensuring access to appropriate support, are important, these activities are addressed through separate prevention-focused initiatives. The purpose of this goal is to evaluate the effectiveness of crisis response services in supporting individuals to remain safely in the community following a behavioral health crisis. Therefore, no changes were made to this goal or its associated strategies.