

Redacted Survey Responses: Employment

These survey responses have been redacted to exclude personally identifying information.

Responses about all employment goals

- Employment Goal 2: Need better employment goals for veterans, although it is a step in the right direction.
- Employment Data Goal 1: Need to track premium costs and have a goal to reduce premium costs across the state
- Employers are not interested in hiring neuro diverse employees. There is no benefit to spend the extra time and energy to hire people with disabilities. Additionally, neuro typical employees are not interested in helping out neuro diverse employees. Without incentives employers are not interested in community integration. Further, there is not the staff available to assist employees who need accomandations.
- The goals sound all fine and good, but in my experience having mental health disabilities, employers still discriminate against me even though they know about my disability. I've had employers refuse to allow me to have my vocational support worker meet onsite with me even though they are well aware of my disability. The formula for how much a disabled employee can earn also needs to be addressed, both from Social Security disability benefits and Medical Assistance benefits. It's criminal the way things are now - one cannot support themselves fully without being booted off of any government assistance. Plus, one cannot support themselves only by government assistance without working somewhere. It's all a catch-22, in my opinion - damned if you do, damned if you don't.
- The state MUST do better. Employer incentives. Upward mobility in current employment needs to be a goal. Increase tangible supports for those who work.
- Overall, these employment goals are directionally aligned with increasing competitive, integrated employment, but they are structurally too focused on program expansion, coordination, and outreach rather than enforceable outcomes. Across the goals, there is a consistent pattern of adding initiatives, training, and interagency collaboration without clearly defining what happens when systems do not deliver results. That creates administrative growth without guaranteed improvement in employment outcomes. A more effective framework would prioritize enforcement and accountability over expansion of programs. Specifically, employment systems should be held to clear performance standards tied to sustained

employment, wages, and retention-not participation in services or completion of planning activities. There is also an over-reliance on system coordination (DEED, DHS, MDE, VA-related systems, etc.). While coordination has value, it can also dilute accountability. Individuals should experience a streamlined employment pathway with clear responsibility, not multiple overlapping systems managing different parts of the process. Additionally, the goals underemphasize employer accountability. Long-term employment outcomes depend heavily on employer behavior, yet most strategies focus on preparing individuals rather than ensuring employers consistently hire, retain, and accommodate workers with disabilities in meaningful roles. Finally, vocational and skills-based workforce development is not strongly emphasized. There is a need for more direct alignment between training and actual labor market demand, especially in applied trades and job-ready skill development that leads to stable employment. In summary, the employment goals would be stronger if they shifted from expanding programs and coordination toward enforcing performance standards, simplifying systems, and focusing on measurable, sustained employment outcomes in the community.

- There may need to be incentives for employers to hire people with disabilities. How many people with disabilities are employed by cities, counties and the State of MN? If government wants to talk the talk, they better be ready to walk the walk. Enclaves need to be an option for day programs again. Currently, people sit in day programs and watch Netflix or color ALL DAY LONG! Day programs are more segregated than in the past.
- Employment needs to increase and knowing what incentives or supports improve employment outcomes is really important.
- Similar comment to previous - very aspirational and very general - you can't disagree with the goal - but also you can't see enough detail to decide if it is a good thing or not - for example: More people with disabilities will have jobs in the community vs. More people with disabilities will have the support required to allow them to be successful in their chosen jobs in the community.
- Work is a good thing for anyone regardless of ability. There has to be a balance between supports and barriers and this needs to be determined on a case-by-case basis. Not all disabilities are visible, and not all disabilities are the same. Being disabled does not mean the same thing for all clients.
- While I strongly believe that access to competitive employment is important for those who want it, it is important not to focus so strongly on work as a measure of someone's value to their community. It is very alienating to people who truly don't have the steady health, skills, support, etc - we need to value their humanity too.
- Disability Systems Change Council (p11 under Measurable goals and strategies) -- there is NOTHING on the home and community based services that make the rest even possible. Under "tracking progress" (p14) they talk about percentages of increase or decrease. Single digits? Then the claim: "This target reflects changes that DCYF can realistically make." "Discipline" (p18) means suspension longer than 10 days, or expulsion...but not reducing or eliminating restraint. Later on in the document (p22), they refer to "restrictive procedures" -- but do not

specifically address restraint. After reading this far, (redacted) is the Disability Systems Change Council for exactly? Looks like the OIO already decided on everything. Another charade like the WRAC committee, true to (redacted) past behavior. Abuse & Neglect research and goals pertain ONLY to facilities, not home environments and not group homes. NO mention of fortifying Adult Protection to become useful at all and NO mention of the catch-22 in Child Protection when families are not given sufficient funding for the HCBS supports. MDH will "Continue to train health care and other service providers about identifying and reporting abuse and neglect" -- which is absolutely stupid when NOTHING USEFUL ACTUALLY COMES OF IT. The trainers and trainees get more money, but the people get nothing. Housing Universal Design standards (p32) says nothing about those with Chemical Sensitivities who are homeless bc of construction toxins, shared ductwork and previous tenancies destroying the air quality with their substances. Also loans for "improvements" if you already own, but no loan opportunities for NEW home owners. They want us to rent and be under the thumb of landlords. Transportation (start p 34) NO Rideshare access. More unnecessary research for "potential approaches." That money could be spent on ACTUAL RIDES. A whole bunch of "MnDOT is working to confirm targets and baseline data." Why is MNDOT doing it themselves and not surveying the people to see what's needed? And then cost of transportation will go up under this plan with "updated rates would also more closely match the actual cost of providing services." Sounds like the state will not be subsidizing, which means a greater disability tax gap for us to foot. Anoka Metro Regional Treatment Center (AMRTC) p 40 -- NO mention of home and community based supports being a solution. A mention of "Increase access to peer support across all service areas" ...are they going to pay people with disabilities or are they expecting us to do more volunteer work? Crisis service (p48): "DHS recommends that in the future, this goal counts voluntary residential treatment as "staying in community." They are trying to pawn off an idea that is not, in fact, "in the community." Community Employment (p50) - "If someone makes \$600 or more per month, they are counted as having CIE. If someone makes \$599 or less per month, they are counted as having non-competitive employment." It says NOTHING about the hourly wage or how many hours. This is a stupid way to assess competitive employment. Competitive employment is GETTING A JOB AGAINST AN ABLED PERSON -- COMPETEING WITH AN ABLED PERSON FOR THE SAME JOB. They are passing off a definition that is not correct. They are also talking about allowing "subminium wages" after all the advocacy and new laws. "DHS is working on getting data that will show the number of people who have CIE" (p51) means that we're spending more money on a researcher instead of actually holding these job brokers/coordinators accountable for the already high rates they get. Councils and Advisory Boards (p61): "Minnesota is in the process of redesigning advisory councils to come into compliance with federal regulation (Access Rule). It is reforming the Medicaid Advisory Council and establishing an Interested Party Advisory Council. -- all these councils to pretend like they are engaging stakeholders. It's a ruse. Mechanical Restraints (p62) -- NOT physical restraint, NOT chemical restraint. ONLY "mechanical." Restraint should be addressed without an adjective/qualifier. Segregated settings to integrated settings (p65) -- again no mention of

home settings or group home settings as being “segregated.” If a person can't leave their home or group home in a self-directed fashion, it's segregated. Lots of consultants are being paid! (p66) to do more nothing useful. This money could be used to fund proper levels of care in HCBS settings instead of consultants. Community Engagement -- Telling us what we want to hear, but likely not to deliver bc of history of leadership. “Community engagement is accountable when there is full transparency with participants (p68) , “During engagement, facilitation must fit the needs of the community...We prioritize leading with a spirit of co-creation and honoring the community's feedback.” (p69) -- We are being fed a line of BS right now. I personally won't believe it until (redacted) no longer serves in or for a state agency and until the program designs actually support the people. “Community engagement is core to OIO's work” (p70) and yet, their procedures are exclusive, the agency representatives don't follow through meaningfully with solutions. they say “surveys will focus on quality of life for people in segregated settings...and that doesn't include everyone who is segregated. Agency Connect (p71) “OIO will track state agencies' timeliness and responsiveness” -- but not the quality of the responses. Remove (redacted) Her role on the OIO is a HUGE CONFLICT OF INTEREST to oversee this plan having been the former director of DHS Aging & Disability Services. She threw us under the bus many times during her time at DHS, namely with the Waiver Reimagine's MnChoices Assessment and Budget Methodologies. More: - No mention of Waiver Reimagine even though HSRI's own data projects people facing average \$34,644 budget cuts and many will face 50-80% reductions concentrated in home and family living settings. - An independent legal analysis already in the Minnesota Senate record (O'Meara Wagner, P.A., SF 4512, April 12, 2026) written by the same attorney whose prior litigation CREATED Minnesota's Olmstead Plan identifies Waiver Reimagine as illegal under the ADA, Olmstead, and federal Medicaid law. The 2026 plan does not mention it. - Minnesota is misclassifying 5-6 person congregate settings that meet the DOJ's definition of mini-institutions as participants' “own home.” Every community integration statistic the state reports is built on miscoded data and a definition that is wrong. - No budget adequacy standard and nothing requiring that waiver budgets actually be sufficient to sustain community living. - No home care staffing or nursing goals even though nursing and DSP vacancies represent 10-15% of ALL job openings in the state. You cannot access employment, housing, or community life if there is no one to help you perform ADLs in the morning. MN leads the nation in nursing homecare shortages. Goals without access consideration are unattainable. -The public comment process itself routes feedback through a filtered anonymous Formstack survey with text boxes and checkboxes. Also, the Olmstead Plan needs to clearly define what “supports” means. We demanding tangible supports: direct and indirect, formal and informal. Supports should be meaningful to the individual and their family if they choose. Undefined terms create enforcement gaps and leave too much room for narrow interpretation and cost-shifting onto families.

- In general, they seem to have been written for the agency instead of disabled Minnesotans who want to have employment and income. Section” about this target” seems to have been written for the agency instead of people with disabilities. I don't there are many challenges but across

as excuses. I would really like a goal that 75% of students with disabilities leave school with a job. That would lead to great outcomes, students never going to a day program. Instead of ensuring “more use getting CIE experience, ensure that more students are working PT for graduating and moving into permanent jobs. Hearing great things about the program “Minnesota Transformation Initiative”. County cultures are changing. Case managers are a huge key for employment. I realize they are not under the jurisdiction of DEED, but a goal about improving case managers belief systems, culture skills is imperative

- The goal is great, but the measurable outcomes do NOT achieve the goal. They are the status quo, for a select subgroup of people with disabilities. They do not help the majority of people with disabilities find sustainable jobs. Not to mention, the HUGE underemployment most folks with disabilities are stuck doing. My DD cousin stopped working and was very frustrated - “all they want me to do is clean shit off toilets” “Why should I be stuck doing that. ADHD and ASD friends find obtaining meaningful, lasting work very difficult. My aspie adult child sat home for over a year, with 3 AA degrees in an in demand field because she was unable to get past the interview process. I tried to get Voc Rehab help in increasing their interview skills sadly, they didn't “qualify.” They are currently working in a dead end job, full time, no health insurance, no leave time, poverty wages. A small, family owned business finally gave them a chance, but not the standard benefits. This happens to many people with disabilities.
- These goals are not particularly ambitious. Given the current climate of fraud investigations and potential Medicaid cuts, I can understand hesitation to commit to more ambitious goals. The part that I am most frustrated about with the draft plan is the state agencies appearing to take little responsibility for the part they play in complicating employment services and, in the case of DHS, focusing too much on services and policy and not enough on actual CIE outcomes. This excuse for low goals shows up twice in the plan: “This process usually takes about two years and often longer. That limits how fast VRS/SSB can increase the rate of people who get jobs.” It's stated as a certain, unchangeable fact that nobody can help. Maybe there should be goals or strategies around speeding up this process? People with disabilities get caught up in a confusing, unclear employment services system that everyone--providers, case managers, families, etc.--struggles to understand and navigate “correctly.” Where are the goals and strategies that acknowledge this and put the responsibility on the state agencies to improve this process?
- The goals for this Olmstead Plan are simply following the natural trajectory of improvement and are not aspirational. The mission of the Olmstead Plan is supposed to provide actual growth and improvement in the lives of PWD and this plan misses the mark completely.
- They are vague and the percent of goal increases are too low.
- The goal on post secondary transition plans is a joke-this is a law that is required by districts. While I can appreciate the goal of 100% up from 70%, you truly can't make a goal out of a law that is already required. This is a compliance issue and really shouldn't be a specific goal-this already should be just a system wide expectation.

- The Employment Goal 1 framework provides an important foundation for improving competitive employment outcomes for people with disabilities. However, strengthening the plan will require greater emphasis on early exposure to work experiences, the quality of jobs in addition to placement rates, workforce capacity and stability, and access to transportation and benefits supports. It will also be important to expand equity considerations and strengthen accountability measures to ensure meaningful and consistent outcomes across systems.
- I support these employment goals and believe they can improve the lives of Minnesotans with disabilities when paired with sustainable workforce and support systems. Following my recent meeting with the OIO ((redacted) & Team), I discussed the importance of strengthening coordination between staffing support, compliance awareness, job coaching, and community integration efforts. Through my work connected tot Le Courage Staffing (DSP Staffing Agency), I have seen how workforce instability directly impacts the ability of providers and individuals to succeed in CHB settings. I encourage the state to continue exploring pilot models and partnerships that strengthen employment pathways while also supporting providers, support workers, and operational sustainability. Successful employment outcomes depend not only on placement, but on continued community inclusion.
- Clients feel stuck in jobs that they do not enjoy and they should have the same outcome as anyone else. If they are not fulfilled, satisfied, having their needs met with the employment goals that they have been given, they should be allowed to change or modify them to meet their needs.
- Encourage goals for peer support and navigation employment opportunities
- These goals are nice- but it should also include metrics. Jobs need to be custom employment based with quality wages and jobs that use the skills of the disabled person in a fair way so that subminimum wages do not exist. Jobs that disabled people do should have a “union” with the state available for representation in jobs when performance indicator plans are given to fire disabled people. The union rep should be able to assess and support the disabled person in understanding the PIP and determining if discrimination is present
- We need to reduce the dependency on sub minimum wage by expanding e4ducation about emplyment supports and services available such as MAEPD to keep waiver programs.
- It is a worthy goal to have employment in the community for individuals with disabilities. However, it is not realistic. I have been involved with community employment for over 5 years and have yet to secure a job for the individual I've been working with. It is an unrealistic goal. Realistic was individuals with disabilities working in subminimum wage at Rise or Merrick, etc. At the very least, individuals were getting out of the house, working, earning some money and had a certain amount of productivity. Now these same individuals sit home because the MN Disability Law Center thought they knew better when it came to individuals with disabilities working in the community. Obviously this was a HUGE miscalculation on their part. The MN Disability Law center had one job, to protect individuals with disabilities and in this respect they failed miserably!!!

- Please make sure you honor informed choice and person centered planning to allow those people with disabilities to have employment choices from the widest array of options, including supported center based employment. DO NOT TAKE AWAY 14c EMPLOYMENT.
- Taken together, this entire suite of employment goals is compromised by a reliance on administrative paperwork, passive “awareness” campaigns, and an ableist, capitalist definition of success. Goals 1A, 1B, and 1C attempt to address competitive integrated employment by streamlining “informed choice” forms and tracking IEP compliance. This reduces the transition process to administrative churn. The state is giving itself until 2030 to achieve a mere 45% employment rate and 100% paperwork compliance, while simultaneously refusing to use its financial leverage to force a hard end to sub-minimum wage sheltered workshops. Goal 2 similarly fails disabled veterans by focusing entirely on clinical healthcare access. Setting an insultingly low target of placing 223 veterans over five years, while completely ignoring the functional workplace accommodations required for acquired disabilities (such as profound hearing loss), demonstrates a profound disconnect from the realities of the civilian labor market. Finally, the underlying premise of these goals conflates the right to work with the coercion to work. The state must decouple a disabled person's community value from their labor productivity. “Community jobs” must be expanded to include the structural support of self-employment and LLC creation for those whose bodies cannot conform to W-2 environments. Furthermore, for those who are medically unable to work, their right to survival services and community integration must be fiercely protected, not penalized by a state metric that views wage labor as the only valid measure of a successful life. Until the state funds actual economic transition, explicitly protects individuals from the “benefits cliff,” and dismantles its reliance on sub-minimum wage exploitation, these goals merely administrate systemic failure.
- No
- Employment goals assume that participants with disabilities will survive long enough to reach the labor market. For many participants with complex needs, this is not guaranteed. Waiver Reimagine threatens the in-home supports that currently keep these individuals alive. People will not achieve any employment goals if they lose the supports that keep them out of the hospital. The Olmstead Plan must prioritize survival first—and employment second.
- Employment is an important goal and is worth supporting. However, these objectives are meaningless to participants facing the reduction or elimination of their life-sustaining supports as a result of Waiver Reimagine. One cannot be employed if one does not survive. The Plan must include explicit protection of life-sustaining supports as a prerequisite for achieving any employment objective.
- These employment goals assume that participants will be alive to achieve them. For many participants with complex and high-level needs in Minnesota, that is not guaranteed—because Waiver Reimagine is poised to dismantle, limit, or reduce the very supports that keep them alive. There are not enough group homes. Providers are not accepting these participants. Hospitals are not long-term supportive environments. There is no hidden safety net. There is only the home-based support system that is already keeping them alive—and that system is in

jeopardy. We cannot begin to talk about workforce inclusion, community integration, or anything else—if people do not survive. You have to be alive to work. You have to be alive to be included. You have to be alive to have rights. Saving lives must be the number one priority before any other goal of the Olmstead Plan can make sense.

Employment Goal 1A

- The proposed goal of achieving 45% Competitive Integrated Employment (CIE) by 2030 is unacceptably low. Setting a target where the majority of individuals served by VRS and SSB will fail to achieve CIE accepts systemic failure as the baseline. Furthermore, the proposed strategies rely heavily on passive methods like “awareness,” “promising practices,” and “evaluating feasibility.” For disabled job seekers—ranging from transitioning youth to older adults with significant disabilities, including DeafBlind individuals and those with intellectual/developmental disabilities—awareness training for the local chamber of commerce does not secure a job. CIE was designed under WIOA specifically to dismantle sub-minimum wage sheltered workshops, but DEED's strategies lack the economic teeth required to force this structural transition. I suggest the following action steps: 1. Force the End of the Sub-Minimum Wage Pipeline: You cannot achieve CIE outcomes while the state continues to allow parallel systems of exploitation. Despite recommendations from the state task force, legislative efforts to phase out 14(c) certificates have stalled in Minnesota, meaning the state continues to subsidize segregated, sub-minimum wage labor via Community Rehabilitation Providers (CRPs). DEED cannot merely “promote hiring”; it must use its financial leverage to enforce a hard phase-out of the sheltered workshop model. Providers must be forced—via targeted transition grants and strict funding cutoffs—to dismantle their segregated models and transition entirely into individualized CIE job development. 2. Move Beyond “Evaluating Feasibility” via the DIF Grant: DEED currently lists “evaluating feasibility” of Progressive Employment via the Disability Innovation Fund (DIF) SWTCIE grant (the “Go MN!” project) as a primary strategy. While pilot projects are useful, evaluating a demonstration grant cannot be the primary statewide action step for the next four years. DEED must pivot from evaluating to mandating that Progressive Employment, IPS, and Customized Employment are fully funded, universally available statewide standards of practice, without waitlists or geographic restrictions. 3. Direct Economic Subsidies Over “Awareness”: Instead of spending state funds on “disability awareness training” for businesses, DEED must aggressively expand direct economic interventions to employers. Action steps should include robust, long-term wage subsidies, frictionless funding for on-the-job accommodations, and fully funding job coaching models, making it economically advantageous and risk-free for a business to hire a disabled worker. 4. Inter-Agency Alignment on the “Benefits Cliff”: For individuals across the lifespan, achieving CIE is often terrifying because of the “benefits cliff”—the immediate threat of losing Medicaid, MA-EPD, or SSI/SSDI upon earning wages. A critical strategy missing here is an inter-agency mandate between DEED and DHS to provide specialized, pre-employment benefits counseling. This must guarantee the protection

of healthcare and waiver services before the individual begins their CIE job search, removing the primary economic disincentive to competitive employment.

- End subminimum wage (yes, requires legislative action, I know). Work with MDE on making sure students with disabilities have access to career/technical education, including through community colleges. Get more aggressive with DACs and other 14c providers. Start enforcing penalties for even small violations. Make it too much of a regulatory headache for them to continue being 14c providers while offering TA and other “carrots” for switching to CIE/engage plan keep phase service providers. Provide TA for counties/local governments who want to set up something like the Connect 700 program.
- The current strategy places too much responsibility on state agencies like VRS and SSB to directly drive employment outcomes, rather than holding the broader employment services market accountable. This creates an overextended government role and does not build a sustainable, market-driven system. VRS and SSB should shift away from operating as primary service drivers and instead focus on oversight, enforcement, and accountability. Their role should be to set clear performance standards, monitor outcomes, and ensure that providers and employers are delivering results-not to continuously expand programs and training. Private and community-based employment service providers should be responsible for delivering job placement, retention, and career development. These providers should operate in a competitive environment with clear expectations tied to outcomes such as sustained employment, wages, and advancement. To support this shift: First, establish strict performance-based contracting. Providers should only receive funding if they demonstrate measurable success in placing individuals into competitive, integrated employment with retention benchmarks. Second, reduce duplication of services across state programs. If private providers are capable of delivering employment services, the state should not be replicating those efforts. Third, redefine the role of VRS and SSB as regulators and performance managers. This includes auditing providers, enforcing standards, and removing underperforming vendors from the system. Fourth, streamline government involvement to focus on barrier removal (such as policy and accessibility issues), rather than direct service delivery. In summary, the system should move toward a model where private employment services drive outcomes, and state agencies ensure accountability. This approach reduces government overreach while improving efficiency and focusing resources on what actually works: measurable employment results.
- Use programs like MEED program in 1980s to help people get jobs by subsidizing employers for profit and non profit
- Well trained job coaches are and should be a very important part of this plan. In order to keep people served safe and to protect the business they are working for. Cannot be a one size fits all type of training for job coaches. They need to work with the person served as well as their team for the best outcome. Also it is important to remember that this is about what the people served want. Some have zero interest in working in the community. Also in rural areas it is not even possible to find the number of jobs or job coaches to have this be an attainable goal.

- The only program that has shown success in finding students employment after school is Project Search. Perhaps Project Search should be expanded in order to get more students employed. School staff and parents need to be educated early in the process. Many parents are not interested in their child working in the community. Most parents I worked with when given the choice between DEED and day programs, chose day programs. DEED was just too confusing, time consuming and stressful for families.
- I have worked for years with people who use supported work sites. I have seen some lovely success stories of finding jobs in the community. In outstate, transportation can be an issue to community jobs. Yes, partnerships with employers can be helpful. There are still some people with disabilities who have not yet met or might not be able to learn the skills needed to work in the community. Supported work sites give them great opportunities.
- I don't have a specific idea, but some of the major barriers are related to VRS capacity and knowledge. Some locations lack staff who take employment seriously, and some are significantly understaffed. Since they are the foundation to helping people find competitive work, they should be where you start with the plans and goals.
- These goals are very important however due to staffing shortages and budget restraints people especially with intellectual disabilities wants to have job however there is not staff to support there needs.
- More work programs. I remember holding jobs through a work program with the Anoka County Job. Training Center back in the latter 1980s.
- Why is this goal limited to people eligible for Voc Rehab or SSB benefits only? Is it because that is measurable and achievable. MOST people with disabilities DO NOT qualify for these two programs.
- Allow Voc rehab to allocate money for job coaches so it doesn't have to be taken out of their waivers
- Get the word out. Employers do not know that they can reach out to VRS or SSB for potential employees to hire. Offer tax breaks for employers that hire individuals with disabilities. Money motivates and this might help employers decide to give people with disabilities a chance that they might not have otherwise considered. Discrimination is alive and well and when employers see a disability, they don't necessarily give the candidate a fair chance to prove themselves. VRS and SSB can help by suggesting individuals that might be a better fit for the employer's needs. If a person has an open case with VRS or SSB, their case manager gets to know them and understand their needs and goals.
- Great!

Employment Goal 1B

- A fundamental issue missing from this goal is that subminimum wage employment should be phased out entirely. Maintaining a parallel system that allows subminimum wages undermines the objective of competitive, integrated employment and creates a structural incentive to

channel individuals into lower-value work rather than fully integrated labor participation. The goal should move toward eliminating subminimum wage pathways rather than streamlining them. Beyond that structural issue, the strategy still relies heavily on process changes (choice counseling, coordination, and planning adjustments) rather than enforceable employment outcomes. To strengthen this goal, the state should: First, establish a clear transition away from subminimum wage employment, with a defined timeline and replacement pathways into competitive employment. This should include accountability for providers currently operating under subminimum wage models. Second, shift funding models toward outcome-based reimbursement. Providers serving Medicaid waiver populations and VRS/SSB clients should only be compensated based on successful competitive, integrated employment placement and retention, not service volume or participation. Third, ensure that “informed choice” is genuinely structured around competitive employment as the default expectation, not a comparative option alongside subminimum wage work. Choice frameworks should not preserve lower-wage segregation as a viable endpoint. Fourth, strengthen accountability for educational transition outcomes. Increasing IEP employment goals and work-based learning opportunities is appropriate, but must be tied to actual post-graduation employment outcomes, not just planning documentation. Fifth, directly address systemic barriers for underserved populations, including BIPOC individuals, by measuring and enforcing equity in employment outcomes rather than simply improving access to services. In summary, this goal should move away from managing subminimum wage systems and toward eliminating them, while holding providers accountable for delivering real competitive employment outcomes rather than maintaining parallel lower-wage pathways.

- The measurable goal of 45% for individuals receiving both Medicaid waiver services and DEED services is unacceptably low. These individuals have the highest level of state-funded case management attached to them; aiming for a 55% failure rate for this demographic indicates a severe lack of inter-agency alignment. Furthermore, the strategies proposed-particularly “streamlining the informed choice process”-focus on administrative compliance rather than systemic transition. “Informed choice” counseling (which is already legally required under WIOA Section 511) has largely devolved into an annual check-box exercise that allows providers to maintain the status quo of sub-minimum wage labor, rather than genuinely offering viable CIE alternatives. I suggest the following action steps: 1. Eradicate “Informed Choice” as a Loophole for Segregation: DEED and DHS must not merely “streamline” the informed choice process; they must overhaul it entirely. Currently, disabled adults are asked to choose between the known stability of their sub-minimum wage day program and the unknown, high-risk reality of the competitive job market (which carries the threat of the benefits cliff). Action steps must require that “informed choice” counseling includes a mandatory, fully funded trial period in a CIE setting via Progressive Employment, ensuring the choice is based on actual community experience rather than theoretical discussion. 2. Eliminate the MnCHOICES vs. VRS Funding Bottleneck: A primary barrier to CIE for individuals on waivers is the bureaucratic friction between DHS (county waivers) and DEED (VRS). Often, VRS demands that county waivers fund

long-term job coaching, while the county demands VRS fund the initial job development, leaving the disabled individual stranded in a jurisdictional standoff. MDE, DEED, and DHS must mandate a single, unified “braided funding” portal that prevents county workers and VRS counselors from denying services based on jurisdictional disputes. 3. Address BIPOC Barriers Through Independent Navigators, Not Just “Awareness”: The strategy to “address barriers” for BIPOC individuals on waivers is dangerously vague. The primary barrier is systemic racism within the county assessment (MnCHOICES) and VRS eligibility processes, which frequently label Black, Indigenous, and Brown disabled folks as “unfeasible” for CIE or divert them to segregated day programs. DHS and DEED must fund independent, community-based, culturally specific navigators who operate outside the county system to enforce equity in the authorization of employment waiver funding. 4. Mandate Paid Pre-ETS for Youth, Not Just IEP Goals: Increasing the percentage of IEPs with “goals for life after high school” is merely a paperwork metric. Transition-age youth do not need more goals written on paper; they need paid labor experience. MDE and DEED must mandate that Pre-Employment Transition Services (Pre-ETS) funding is utilized to guarantee fully paid, integrated internship experiences for disabled youth prior to graduation, completely bypassing the sub-minimum wage pipeline.

- One of the largest barriers to people having CIE is lack of businesses willing to hire. Case managers refer people with disabilities to support service providers, only to wait for months or even years to get an opportunity. Also, there are school districts who likely provide excellent person-centered support for employment goals. However, this is a huge challenge in Greater MN. Schools leave out the “individual” in IEP. A large component to this is likely related to available staffing support.
- The reality is that many people with disabilities do not care if they make \$5/hour or \$50/hour. They just want to be and feel productive. If someone wants to make at least minimum wage, they absolutely should be able to work at that wage. If a person and their guardians do not care about the wage, but want their individual to be productive, that is more important than the wage. Enclaves need to be an option for people again. Enclaves have gone the way of the dodo, which is a shame. People who were not able to work by themselves did great in enclaves. Another word for enclaves - BODY DOUBLING! Body doubling is a common ADHD tactic.
- Rural communities need more help finding employment for their waived loved ones.
- Work programs through the county
- Define CIE experience to include a variety of job experiences. It would be great for more youth to get CIE experience before graduation but give them a variety of experiences. One or two places does not give them adequate experiences to make decisions on. Even if they want to focus on housekeeping for example, try out hotel/motel, industrial, educational, restaurant, etc. Maybe they do some cleaning at a motel for a set period, then move to a factory and do cleaning there, then they can clean at a school with the maintenance workers. This helps them learn that while the job might be the same basic work, different employers have different leadership styles and different expectations. Plus, maybe they like working around one type of environment over the others.

- Same comment as above even fewer people with disabilities are eligible for MA and a small subset of them are eligible for a waiver. These goals aren't for ALL Minnesotans with disabilities, they are for only a small subset of Minnesotans.
- Medicaid waivers under attack by current Federal administration, may need to rework this goal
- This goal is focused on the percent of people receiving both waiver and VR services who find competitive employment, but the description states that the process takes 2 years or longer, and VR resources have been cut. That reduces the likelihood of success, and perhaps the goal should be eliminated for now. There should be a goal focused on reducing the time it takes to get a community job.
- See feedback on goal 1A
- No

Employment Goal 1C

- Embed mental health staff within the schools.
- This is a lofty goal, but I appreciate that 100% of students will have the opportunity to know that they have options and what those options might be.
- A 100% goal seems unrealistic. This is a process goal that should be included in strategies or as best practice but not as a goal.
- Qualitative interviews with students on how to make this successful and implement their strategies
- Setting a goal of 100% compliance for “complete postsecondary transition planning” by 2030 is merely an administrative target. Having a completed transition plan in an IEP is already a long-standing federal requirement under IDEA. Giving districts until the end of the decade to achieve 100% compliance with a basic paperwork mandate-while failing to measure the execution of those plans-is an abdication of systemic responsibility. Furthermore, the strategies proposed completely ignore the current fiscal reality. As of 2025/2026, DEED/VRS has faced severe budget deficits resulting in the closure of waitlist Categories 2-4, and DHS has faced reductions in waiver program funding. Writing a better transition plan does not secure a disabled youth a job if the state systems they are transitioning into are financially hollowed out. I suggest the following action steps: 1. Track Systemic Gatekeeping Caused by Deficits: Because of DEED/VRS waitlists and county waiver budget cuts, schools frequently engage in “gatekeeping”- withholding information about VRS, Pre-ETS, or MnCHOICES assessments because they know the state funding is not there. Relying on PACER to “expand families' access to information” places the burden of navigation entirely on the parents. MDE must mandate that districts provide a frictionless, automatic referral pipeline to DEED and county waiver assessments the moment the student turns 16, and actively track when those state agencies deny or waitlist the student due to budget shortfalls. 2. Shift the Goal from “Planning” to “Execution Outcomes”:
The measurable goal must track how many of those transition plans actually resulted in a successful, warm handoff to a Competitive Integrated Employment (CIE) setting, a post-

secondary institution, or an active (non-waitlisted) VRS/waiver funding stream within 90 days of graduation. Measuring the completion of the paperwork without measuring the outcome reduces the IEP process to administrative churn. 3. Mandate Inter-Agency Funding at Age 16, Not Age 21: Transition planning frequently fails because schools defer financial responsibility to county waivers (DHS) or vocational rehab (DEED/VRS), but those agencies often delay authorization until the student is about to “age out” at 21. MDE must institute a binding, inter-agency policy that requires DEED and DHS to actively fund and authorize employment supports (such as Pre-ETS) the moment the transition plan is written at age 16, preventing the sudden “services cliff” upon graduation. 4. Decouple “On-the-Job Training” from the Segregated Pipeline: MDE's strategy to work with DEED on “on-the-job training” must be strictly defined. Often, school-based transition programs place students in unpaid or sub-minimum wage enclaves and label it “training.” MDE must mandate that all school-coordinated on-the-job training meets the federal WIOA definition of Competitive Integrated Employment (CIE) and is paid at or above the state minimum wage.

- There have to be facilities to house such transition programs, led by well trained staff. This seems to be one of the biggest problems. Training of staff.
- The current goal is primarily paperwork-driven and risks becoming a compliance exercise rather than producing real employment outcomes. “Complete transition planning” in an IEP does not guarantee access to jobs, skills, or postsecondary success. This approach expands documentation requirements without ensuring meaningful pathways to employment. This is an example of over-structuring the system without improving results. A more effective strategy would reduce administrative burden and focus on real-world outcomes and access. First, simplify transition requirements and shift emphasis from documentation completion to verified participation in real employment and training experiences. Students should be measured by actual exposure to work-based learning, internships, apprenticeships, or vocational training-not the presence of planning language in an IEP. Second, prioritize direct employer-linked pathways over additional training frameworks and communities of practice. Schools should be expected to connect students directly to workforce experiences rather than rely on internal planning systems. Third, reduce duplication between agencies. DEED, MDE, and DHS should not each build parallel systems for transition support. Instead, define clear roles and eliminate redundant programming that adds administrative burden without improving outcomes. Fourth, expand access to hands-on vocational and technical training pathways that lead directly to employment, rather than focusing primarily on planning documentation. Real transition success is measured by skills acquisition and job placement, not paperwork completion. Fifth, ensure that postsecondary transition planning is outcome-based. The only meaningful measure of success is whether students actually move into stable employment, apprenticeships, or further training that leads to work-not whether planning documents are “complete.” In summary, this goal should shift away from compliance-heavy planning requirements and toward direct, measurable employment and skills outcomes. Otherwise, it risks becoming administrative workload without functional benefit to students.

- It would be great if transition planning started before age 16, especially related to employment. Most students are already working part-time jobs at age 16, but students with disabilities are many times just being introduced to the idea of work at this age.
- Expand CTE programming!
- Secondary transition services SHOULD NOT be handled by the home school district. Of course they don't want to pay for the service. I spent two years driving my daughter from Battle Lake to Alexandria to transition school, and making the same trip to pick her up. ABSOLUTELY no help from the school district.
- Families and students need to be aware of all of the options available to them. Access to working in the community, with or without DEED needs to be more accessible. Bringing in a DEED counselor at an IEP meeting and telling the family the student will have to get to work on their own and work alone, when they are accustomed to the cocoon of the school, is a big ask and leap. Project Search is the best option for many students.
- My IEP kiddo had ZERO transition planning or services. Why do some kids with an IEP get these services and others don't?
- No

Employment Goal 2

- The measurable goal of placing only 223 disabled veterans in jobs over five years is an unacceptable administrative target. It requires minimal systemic effort from the state to achieve such a low number. Furthermore, the proposed strategies are deeply misaligned with the goal of employment. Nearly every action step listed—healthcare navigators, community awareness, and suicide prevention—focuses on clinical and healthcare access. While vital, these are not employment strategies. They rely on the assumption that if a veteran is connected to the VA medical system, they will magically secure a civilian job. This ignores the functional realities of transitioning to the civilian workforce with an acquired disability. I suggest the following strategies: 1. Address Functional Workplace Accommodations for Acquired Disabilities: MDVA's strategies focus entirely on healthcare access, completely ignoring the functional realities of acquired disabilities in the civilian workplace. For example, the number one service-connected disability for returning veterans is hearing loss/tinnitus. These veterans generally do not know ASL and are thrust into a civilian workforce relying entirely on spoken English, leading to severe communication breakdown and job loss. Likewise, veterans navigating Traumatic Brain Injuries (TBI), PTSD, or limb loss require specific, non-clinical interventions to work. MDVA and DEED must create strategies that directly fund functional workplace accommodations—such as amplified communication technology, cognitive support software for TBI, and sensory-friendly workspaces for PTSD—rather than assuming clinical healthcare connections will naturally lead to employment success. 2. Fund Specialized Benefits Counseling for Veterans: Veterans face a unique and highly complex “benefits cliff” involving federal VA disability compensation, military pensions, and civilian wages. MDVA must provide

specialized, pre-employment economic strategy counseling that specifically calculates how civilian earned income will impact their VA rating and tax liabilities. 3. Direct Subsidies for Workplace Accommodations: Healthcare navigators do not pay for workplace accommodations. Often, civilian employers hesitate to hire disabled veterans because they do not understand how to accommodate PTSD triggers or physical/sensory disabilities. MDVA and DEED must offer direct financial subsidies to civilian employers to fully fund required workplace accommodations, removing the financial risk from the employer. 4. Track Inter-Agency Failures (MDVA to DEED/VRS): The goal relies entirely on DEED's Veteran Employment Services program, yet we know DEED/VRS is facing severe budget deficits and waitlists. MDVA must track how often a disabled veteran is referred to DEED for employment supports, only to be waitlisted or denied due to state funding shortages. The state cannot use DEED as its primary veteran employment vehicle if DEED is structurally underfunded.

- The current strategies are heavily focused on outreach, identification, and service navigation, rather than directly improving employment outcomes. Increasing awareness of services does not necessarily translate into sustained employment, and the structure risks expanding administrative activity without improving job placement or retention. To strengthen this goal, the approach should shift toward measurable employment accountability and streamlined service delivery. First, focus on direct employment placement and retention outcomes rather than expanded outreach systems. Success should be defined by stable competitive employment over time, not just initial job placement through a program. Second, simplify service pathways. Veterans with disabilities should not need multiple layers of navigation (healthcare systems, navigators, digital outreach networks) to access employment services. The system should be direct, efficient, and outcome-driven. Third, strengthen performance accountability for employment service providers serving Veterans. Providers should be evaluated based on job retention, wage levels, and long-term employment stability, with underperformance resulting in corrective action or contract loss. Fourth, prioritize employer engagement over system expansion. Employers should be the primary driver of hiring Veterans with disabilities, with public systems focusing on removing barriers rather than building parallel outreach structures. Fifth, ensure alignment across federal and state systems (MDVA, DEED, VA programs) to reduce duplication. Veterans should experience a single, streamlined employment pathway, not multiple overlapping systems. Sixth, integrate disability-specific employment pathways that emphasize skills-based training and rapid workforce entry, rather than extended service coordination models. In summary, this goal would be stronger if it reduced system complexity, emphasized direct employment outcomes, and held providers accountable for sustained job success rather than expanding outreach and navigation infrastructure.
- Increase availability and options for Veterans to be able to see more doctors and therapists, outside of the VA.
- It would be helpful to know how many veterans with disabilities there are and how many get placed each year.

- While 178 and 223 veterans are abstract numbers to me, at least there is a measurable goal. Is this a percentage of veterans in Minnesota? They need trained professionals to work with them that have also experienced the military. The experience with the military is completely different from anything civilians experience and that mutual knowledge is extremely beneficial for helping disabled veterans.
- Qualitative interviews with Veterans on how to make this successful, what works and doesn't work in the system and implement those strategies
- AGAIN - do ALL vets with disabilities qualify for these DEED programs? I doubt it.
- No
- I do not know enough about veteran-specific programming to have feedback
- No
- No

Employment Data Goal 1

- Employment opportunities in THEIR communities not in the closest large city.
- In an ideal world this would be an amazing situation. I feel it comes back to having trained staff but also guardian support. For example, if a person being served has high aggressive behaviors, it would be helpful to first get the client into therapies that would support them. After the person served as well as his direct support team found ways to help the individual succeed, then try to find employment.
- Take a good look at the thresholds for these programs. They are set so low that basically any employment will punish the worker for trying to improve their circumstances. You made \$XX so now you lose way more than they can make up for with the job income.
- See previous comments on Medicaid waivers and if they will be available Qualitative interviews with people to identify what works and doesn't work in systems and implement their strategies. Address impact of increase income on other benefits and housing by deferring/ not counting income for a period of time
- One of the barriers to this has been the lack of communication. Many times VRS works with someone who has case management support, but they don't collaborate with the case manager. One goal that would be great is that VRS will communicate with other support providers throughout the entire process 100% of the time.
- The measures are limited to very small groups of people. Most Minnesotan's with disabilities are NOT eligible for these programs. We need programs and resources to help ALL Minnesotan's with disabilities, not just those in deep poverty that are eligible for these highly selective programs.
- Expand IPS services beyond just pilot/very small programs! Improve coordination between mental health services and VRS/IPS providers/waivered services providers so that more people with mental health disabilities get IPS services.

- While tracking employment outcomes is necessary, this proposed data goal is built on a deeply ableist, capitalist premise: that a disabled person's value, integration, and worthiness in society are strictly defined by their labor productivity. By setting an absolute goal that “more people... will have community jobs,” DEED, DHS, and MDE are conflating the right to work with the coercion to work. Human beings have inherent ways of contributing to society outside of wage labor. If the state's only metric for successful community integration is whether a disabled person is generating value for an employer, the state has lost the plot of the Olmstead mandate. To prevent this data goal from becoming a tool of coercion, the agencies must restructure it with the following systemic guardrails: 1. Track Coercion vs. Informed Choice: There is a massive difference between a disabled person who genuinely wants to work and requires support to overcome barriers, and a disabled person who is being coerced by their case manager into seeking a job to satisfy a state compliance metric. The data goal must track genuine, uncoerced informed choice. It must include metrics that measure how often individuals decline employment goals without facing punitive action, reduction in services, or administrative pressure from their county teams. 2. Acknowledge and Protect the Right Not to Work: The state must explicitly acknowledge that for many disabled Minnesotans—such as those with Myalgic Encephalomyelitis/Chronic Fatigue Syndrome (ME/CFS), Long COVID, or other severe, energy-limiting conditions—employment of any kind is physically impossible and actively harmful. The data goal must not penalize county waiver programs or mental health teams for individuals who are medically unable to work. “Integration” for these individuals means having their survival needs fully funded and their community presence supported without the prerequisite of economic productivity. 3. Explicitly Track Self-Employment and Business Ownership: When individuals do choose to work, the state's narrow definition of “community jobs” frequently defaults to traditional W-2 employment. This ignores those whose bodies or neurotypes cannot conform to rigid 9-to-5 schedules. For many, self-employment and LLC creation are the only viable paths to economic autonomy. The data must explicitly track the successful launch and support of self-employment and micro-enterprises, ensuring the state is not forcing disabled individuals into inaccessible W-2 environments when entrepreneurship is a better fit. 4. Decouple “Worth” from “Wage”: Ultimately, the data must reflect that a disabled person's well-being should not be tied to their capacity to earn money. Until the state decouples survival (healthcare, housing, food) from labor, employment goals will always carry an element of coercion. The agencies must ensure that tracking employment outcomes never results in the reduction of baseline survival supports for those who cannot or choose not to engage in wage labor.
- The intent of increasing competitive, integrated employment is positive, but this goal is framed in a way that expands government planning and coordination rather than improving actual employment outcomes. It risks becoming another layer of administrative goal-setting across multiple systems without clear enforcement or accountability for results. The core issue is not the absence of goals—it is inconsistent enforcement of existing expectations and weak accountability for providers and systems that are already funded to support employment.

Instead of creating additional cross-agency goal structures, the focus should be shifted to enforcement and performance requirements: First, require strict outcome-based accountability for all providers serving these populations. Employment services funded through Medicaid waivers, mental health programs, or related supports should be evaluated on sustained competitive employment outcomes, not participation in services or planning activities. Second, reduce interagency goal-setting structures. DEED, DHS, and MDE should not be jointly designing additional layered goals. Their role should be clearly defined: set standards, enforce compliance, and remove underperforming providers. Third, simplify the system for individuals. People should not need to navigate multiple programs (waivers, mental health services, MAEPD, etc.) to access employment supports. The structure should be streamlined into a direct pathway with clear accountability for outcomes. Fourth, prioritize enforcement of existing employment expectations over expanding new planning initiatives. If providers are already funded to support employment, the focus should be on whether they are delivering results, not whether new interagency goals exist. In summary, this goal would be stronger if it reduced administrative expansion and focused instead on enforcement, performance accountability, and measurable employment outcomes.

- E1MN is the worst program the state of MN has ever put in place!! It has only slowed the process for a person to get a job. People who are on a waiver are being discriminated against by the state of MN and DEED because they are forced to work with DEED. People who do not have a waiver are able to work with job coaches to help them find a job. People on a waiver are forced to work with DEED, even if they already have a job coach in place. Allow the waiver to pay for FIND services.
- No

Missing employment goals

- The Phase-Out of Sub-Minimum Wage: The goals completely fail to mandate the hard economic phase-out of 14(c) certificates and sheltered workshops. Promoting CIE is useless if the state continues to subsidize segregated, exploitative labor models. - Benefits Cliff Navigation: The goals are missing inter-agency mandates for specialized, pre-employment benefits counseling. Securing a job is economically dangerous for a disabled person if the state does not proactively protect their Medicaid, waivers, and SSI/SSDI from the benefits cliff. - Self-Employment and Entrepreneurship: The definition of “community jobs” ignores self-employment, independent contracting, and LLC creation, which are often the only accessible employment options for individuals with severe flare-up cycles or energy-limiting conditions. - Functional Accommodations for Acquired Disabilities: The veteran-specific goals focus entirely on healthcare access rather than directly addressing functional workplace accommodations (e.g., communication technology for service-connected hearing loss).
- These goals would be strengthened by including more focus on workforce ecosystem stability, provider support, and coordinated job coaching systems. Many employment outcomes are

impacted by staffing shortages, compliance burdens, transportation between employment services, residential providers, and community supports. I also encourage stronger inclusion of culturally responsive and community-rooted organizations that often have direct relationships with underserved populations and can help bridge gaps between policy and implementation. More emphasis should also be placed on long-term employment retention, individualized support follow-up, and pathways that support both independence and community intergration.

- First, there is no strong emphasis on enforcement and provider accountability. The system continues to expand programs, coordination, and outreach, but there is limited focus on removing underperforming providers or tying funding strictly to sustained employment outcomes. Without enforcement mechanisms, these goals risk becoming process-heavy rather than results-driven. Second, the goals do not sufficiently address systemic barriers created by over-fragmentation of services. Individuals are often required to navigate multiple programs (DEED, DHS waivers, mental health services, rehabilitation programs, etc.) with overlapping requirements. A clearer, streamlined employment pathway with defined accountability would be more effective than expanding interagency coordination structures. Third, there is limited attention to performance-based contracting. Employment services should be evaluated and funded based on measurable outcomes such as job retention, wages, and long-term stability in competitive employment-not service delivery volume or participation. Fourth, there is not enough focus on employer-side accountability. Most strategies emphasize preparing individuals, but there is less emphasis on ensuring employers actively hire, retain, and accommodate people with disabilities in meaningful roles. Employment success depends on both supply and demand sides of the labor market. Fifth, vocational and skills-based workforce pathways are underemphasized. There is a strong focus on system navigation, transition planning, and service coordination, but less emphasis on direct skill acquisition tied to real labor market demand, especially in trades and applied careers. Finally, there is limited discussion of placement appropriateness and long-term stability. Employment should not only be measured by job placement, but by sustained employment, wage progression, and reduction of dependency on public systems over time. In summary, the missing element across the employment goals is a stronger shift toward enforcement, simplification, and outcome-based accountability. The current structure emphasizes system activity more than real-world employment results.
- holding people accountable for their actions in employment instead letting them go every six months when funding run out. look at ways to keep them at their job if their therving at what they do
- Unfair barriers, such as “must be able to occasionally lift 50 lbs” when used on the job under a certain amount of times, should be removed from job descriptions as they discriminate against disabled people as an unspoken barrier.
- There will be no improvement until there in an incentive for an employer to take the extra time and responsibility to employ, train and develop a neuro diverse employee. There needs to be

more options with employers for neuro diverse employees. Unless there is a real financial incentive community jobs for people with disabilities will not increase.

- End subminimum wage. Crack down hard on sheltered workshops and enclave work.
- The plan falls short on how it will work with employers on reasonable accommodations, recruitment and retention strategies for employers.
- Under DHS/MDE/DEED strategies: I am VERY supportive of the focus on sub-minimum wage earners as a strategy. This could go further and be more impactful if a strategy was the continued work and promotion on behalf of the state agencies to incent and encourage the ELIMINATION of 14c in Minnesota. That will go far in helping increase CIE, as evidenced by states who have already eliminated it. Also please refer back to the Legislative Taskforce Report by the Taskforce for Eliminating Subminimum Wages for more ideas for strategies to this end. Under MDE Strategies: There should be efforts to getting kids jobs (not just experience) before they graduate. I have heard from all over the state that students want to access HCBS EES and EDS-Plan and VRS FIND during school. That would be a great strategy. Under strategies in general: There should be more of an emphasis on making CIE the first and expected outcome, and stressing culture change, and truly living the principles of our state's employment first policy. All agencies should have increased communication campaigns about the successes we have seen the capacity people have.
- Assistive Technology assessments, services and equipment is important for people with disabilities to achieve vocational goals and employment.
- I feel it's important to remember the person first. Find out if they want to pursue a job in the community. If so, help them explore options and give support. But be realistic also. If there are 35 clients wanting community employment and only 10 positions are available in your area, then having other options are very important.
- Need clear goal on what is employment in community. It's important to track progress and being clear about what is current and then changed requires specific clarity. Part time, full time, those with supports or not, what parameters for employed for how long since being let go is common - does that count , If you are not employed are you counted in the data set , if you are not employed - where are they and what is the data for that group. - if you just drop them out of data - so then magically employment looks really great.
- Yes. Many people have environmental and chemical sensitivities and fragrances and other chemicals are impossible to be around. This is an invisible disability and it is real. Please encourage fragrance free or at least scent neutral for anyone working with someone with a disability. The strong laundry detergent smell is impossible to get out once it is in clothing so people need to be aware of that and things like air freshners and plug-ins contaminate everything in that room. I know several people who could have jobs, but had to quit because employers would not force employees to accommodate.
- Listen to the people what works and doesn't work and implement their strategies into the plan
- The goals aren't ambitious enough. For example, moving from 41% to 45% over the course of four years isn't that ambitious. Double that. Further, which practices are leading to improved

outcomes? I'd like to see more strategies. For example, study your low and high-performing offices. What practices are leading to higher performing offices? What practices are leading to high-performing/successful VRS counselors? 45% over four years seems pretty low. Surely some counselors are doing much better. Why? I know some community providers that are successful with 75% within one year..

- Needs to be specific! Anyone can write “we need more” but these goals must be more specific!
- Address transportation access in every individual's service plan.
- There are vague references to the workforce who provides support for people with disabilities, but without clear goals around workforce training and retention, these goals won't be met. Chronic understaffing and lack of training available for staff make it difficult for them to do their jobs supporting people to find and keep jobs in the community.
- How work will impact any services or supports they currently have in place. It seems the system is set up to keep people from working instead of incentivizing them to work.
- Vocational rehabilitation wasn't around for me when I was growing up. We can only gain so much money because we have so many hours. We need better employment opportunities for people with disabilities. We deserve to be employed and out there. Deed needs to do better with vocational rehabilitation services. Premiums are a minimum of \$35 while (redacted) is experiencing premiums of \$135 per month. We don't know what's out there for jobs. Should reach out from the schools. Need more skills training from camps
- Providing vocational support services for people with disabilities to not only help them to find a job, but to keep a job; how to find employers who will give people with disabilities a job and not discriminate against them once they have said job; helping high-functioning people with disabilities - especially mental health disabilities - to keep a job.
- Working one day/two hours a week at minimum wage is considered a successful placement. By the time taxes are taken out, there is not enough to even go out to eat. While it may be a social outing for the client, there have been many job coaches with the feedback being “not enough hours” The client has asked for either more days or more hours but nothing changes. This has been addressed at annual/semi-annual team meetings and still nothing changes. The client has requested vocational rehabilitation services with the goal of finding a better job fit but has been denied since they “have a job currently” Anyone without a disability can search for and change jobs at any point they choose to. But not in the disability community.
- While business education is in a strategy section-this has to be a main goal. We will never increase Customized integrated employment without Seriously taking a pause and educating businesses. We as a state need to prioritize this before we can prioritize our numbers in CIE. We need to educate businesses on why their business will do better when hiring people with disabilities. What customized employment is and, getting rid of subminimum wage. You mentioned educating on it so people have informed decisions. This shouldn't even be a decision. Maybe your goal could be eliminating subminimum wage.
- A significant gap in the current employment strategy is the reduced emphasis on early exposure to work and career development experiences prior to age 16. Historically, these opportunities

were more robustly supported through a combination of community-based organizations, Vocational Rehabilitation Services (VRS/SSB), and partnerships outside the traditional school day, allowing students with disabilities to explore work environments, build foundational employment skills, and develop career interests early. In recent years, however, due in part to budget constraints within Vocational Rehabilitation Services and State Services for the Blind (VRS/SSB) and the shifting of greater responsibility to schools under the Minnesota Department of Education (MDE), this early exposure component has become less consistent and, in some cases, significantly diminished. As a result, families and educators have increasingly reported that students are receiving fewer real-world, hands-on employment experiences prior to high school transition planning. This gap has been consistently raised by both parents and teachers at community engagement events, who note that early work exposure is a critical predictor of later employment success. Without structured, early opportunities to explore work environments, students may enter transition planning later with limited understanding of job expectations, workplace behavior, or personal career interests. Strengthening this area-through renewed collaboration between MDE, DEED, and DHS, along with community providers-would help ensure that employment readiness is not delayed until age 16, but instead developed progressively and intentionally throughout a student's educational experience.

- Support must start early. Inclusive educational practices can help with this goal. As students move into the workforce, they will better understand and appreciate their peers with disabilities.
- What about the support needed to be successful in the jobs? Wages paid - jobs with sub-minimum wage aren't jobs - the plan appears to be silent on sub-min wages.
- If a person has a job coach, and just wants another job or more hours, let them work with their job coach to find another job. Involving DEED is a waste of time and resources.
- Abolishment of subminimum wages.
- All of the services mentioned already exist - that's why I believe they will not lead to "Improvement." These very small programs have existed for many years.
- Specific action steps as to how the goals will be met - eg. more funding for VRS, more education to employers about accommodations, etc.
- RURAL COMMUNITIES HAVE A HARDER TIME FINDING EMPLOYMENT POSSIBILITIES.
- No
- What is completely missing from these objectives is the reality of what Waiver Reimagine will do to participants with complex needs in Minnesota. Waiver Reimagine directly threatens life-sustaining supports—the supports that currently keep people with high needs out of hospitals, out of institutions, and alive. When those supports are cut or limited, people do not simply lose employment opportunities. They lose their lives. We cannot speak of inclusive employment for people who will not survive the implementation of Waiver Reimagine. Workforce inclusion is a meaningless goal for someone who is no longer alive to achieve it.

End of document