



Minnesota Council on Disability
1600 University Avenue W.
Suite 8
Saint Paul, MN 55104

2022 Public Policy Agenda

Tier #1 – Capacity Building

Tier #1 are priorities that are led by MCD and include coalition building, advocacy, bill-drafting, working with chief authors, building support in the House and the Senate, working with the Governor’s Office, advising legislators, lobbying on behalf of an agency, and testifying in committee.

1. Minnesota Council on Disability Budget Expansion

MCD has an extensive list of duties established in MCD’s founding statute. However, the finite capacity of the current staff and budget restrains MCD from meeting all the diverse needs of Minnesota disability communities. A budget expansion of at least \$2 million per fiscal year would provide the initial funding to increase staff and programming capacity and specialize in specific, complex disability issues.

2. State Employment & Retention of Employees with Disabilities

Codifying into state statute the recommendations from the Task Force for the State Employment Retention of Employees with Disabilities. This includes improving the Connect 700 disability affirmative action program, providing better oversight over disability workplace accommodations, and extensive training on the hiring and retaining of people with disabilities for hiring managers. With more people with disabilities in state government positions, we will create a pipeline of new state leaders and policymakers who approach disability services from a personal perspective.

3. Collection and Interagency Sharing of Disability Data

Most decisions on disability programming and services are made based on existing data on disabilities. However, often that data is incomplete. Directing our cabinet agencies to be more proactive in collecting data on a wide range of disability indicators and fostering interagency collaboration of that data will allow for more informed policymaking. MDH and MDE especially. Better health data and collecting data on multiple disabilities for students.

4. Rare Disease Advisory Council

[Subject to RDAC approval]. The Rare Disease Advisory Council is seeking a new organization to be housed in and is considering MCD as a candidate. Not all disabilities are rare diseases, but all rare diseases manifest disabilities. Combining resources and staff capacity will create new opportunities for better advocacy on behalf of people with rare diseases. MCD is an appropriate facilitator because we can work directly with the state legislature and advocate for issues that affect the rare disease community, beyond clinical research and medical treatment.

Tier #2 – Interagency Partnership

Tier #2 Priorities are partnerships with other state agencies and include supporting agency initiatives, collaboration, advising, meeting with legislators, and testifying.

Interagency Priorities

(Full agency names listed in next section)

1. Communication and Broadband Access for Minnesotans with Disabilities

Many Minnesotans with disabilities face barriers to access broad internet and adaptive communication, especially rural Minnesotans and Deaf, DeafBlind, and Hard of Hearing Minnesotans. Expanding broadband and communication access ensures that all Minnesotans have access to services such as telehealth, health and security monitoring services, interpreters, and telecommunication assistive devices. This includes expanding the Telephone Equipment Distribution (TED) Program, Rural Broadband Access, and correcting language to ensure Telehealth access for DDBHH Minnesotans.

Partner Agencies: MNCDHH, DSD, DEED *(full agency names listed in next section)*

2. Hearing Aid Affordability

Hearing aids are critical communication and assistive hearing devices for many Minnesotans; however, the cost for hearing aids averages about \$5,000 for a pair. Recent regulation changes have allowed over-the-counter (OTC) hearing aids to be sold to increase competition in the market and lower prices. However, OTC hearing aids are not a viable option for those with severe to profound hearing losses. We believe a tax credit or voucher program for Minnesotans to apply towards the cost of hearing aids will make them more affordable or even free. It is important to note that we do not advocate for a tax deduction scheme because low-income Minnesotans do not normally benefit from a tax deduction.

Partner Agencies: MNCDHH, DHHS, DEED, DHS, MDC

3. Accessible & Affordable Housing

Affordable housing is challenging to find, and [Minnesota has the worst housing shortage in the nation](#), as reported by the Star Tribune. For Minnesotans with Disabilities, this is even more of a challenge because truly accessible units are limited, even in an affordable housing complex. We would like to create a mix of incentives and mandates to expand the number of accessible units, which would include requiring that all units with ground-level access should be accessible.

Partner Agencies: DEED, OIO, DHS, DHS

4. Access to Mental Health Services

Treatment and services for mental health are often cumbersome and difficult to navigate, especially while experiencing mental health struggles. We seek to reduce barriers and increase access to mental health services for Minnesotans with disabilities through telehealth expansion, Medicaid policy changes, and professional support.

Partner Agencies: OMHDD, GCDD

5. Inclusive Higher Education

Higher education options for Minnesotans with Intellectual or Developmental Disabilities (IDDs) are limited in the State of Minnesota. Currently, only 4 higher education institutions offer programs for Minnesotans with IDDs. Expanding programs through grants and mandates for public institutions to develop programs & adaptive education curriculums for Minnesotans with IDDs. It is also important to have IEP transition planning while students are in primary and secondary school to prepare for higher education programs.

Partner Agencies: MDE, OHE, GCDD

6. Inclusive K-12 Education

The COVID-19 Pandemic has impacted schools severely, and students with disabilities have been disproportionately affected. We will advocate for COVID-19 recovery programs for special/adaptive education and IEP transition planning. We will also push for including more disability history and perspectives in K-12 curriculums.

Partner Agencies: MDE

7. Parental & Guardianship Rights for People with Disabilities

This includes eliminating discrimination against prospective adoptive or foster parents with disabilities and allowing guardians to open ABLE accounts.

Partner Agencies: DHS, DSD

8. Unemployment Insurance/Social Security Parameters and Income Thresholds

Social safety nets are designed to create a floor to prevent low-income people from falling into abject poverty. However, regulations and rules in the programs also create poverty traps through income thresholds, forcing Minnesotans with disabilities to choose between critical disability services or economic opportunities. We believe the American dream should not be out of reach simply because of a disability. Social safety net programs for people with disabilities are a right, not a privilege.

Partner Agencies: DEED, DHS

9. Expand Access and affordability of Dental Care for Minnesotans with Disabilities

Medicaid and other disability-focused health plans do not include dental care. Minnesotans with disabilities who can find dental coverage plans are often restricted to a few dental offices and service providers. This can force Minnesotans with disabilities to travel several hours from their communities to access dental care.

Partner Agencies: MDH, DHS

10. Transportation Access

Minnesotans with disabilities face many transportation barriers such as limited public transportation, non-compatible/adaptable vehicles, and restricted disability parking access. This priority will include supporting and funding micro-transit programs in all of Minnesota and helping DPS MVD expand capacity to process disability parking certificates faster and improve the user experience when applying.

Partner Agencies: MnDOT, DPS

Cabinet and Subcabinet Agency Full Names:

- Minnesota Commission for the Deaf, DeafBlind, & Hard of Hearing (**MNCDHH**)
- Minnesota Department of Education (**MDE**)
- Minnesota Department of Employment & Economic Development (**DEED**)
 - State Services for the Blind (**SSB**)
 - Vocational Rehabilitation Services (**VRS**)
- Minnesota Department of Health (**MDH**)
- Minnesota Department of Human Rights (**MDHR**)
- Minnesota Department of Human Services (**DHS**)
 - Deaf & Hard of Hearing Services Division (**DHHS**)
 - Disability Services Division (**DSD**)
- Minnesota Department of Public Safety (**DPS**)
- Minnesota Department of Transportation (**MNDOT**)
- Minnesota Department of Commerce (**MDC**)
- Minnesota Governor's Council on Developmental Disabilities (**GCDD**)

- Minnesota Office of Higher Education (**OHE**)
- Minnesota Office of Ombudsman for Mental Health and Developmental Disabilities (**OMHDD**)
- Minnesota Olmstead Implementation Office (**OIO**)

Tier #3 – External Partner Support

Tier #3 Priorities are led by external non-profit partners with MCD playing a supporting role which includes advising, providing letters of support, and networking.

Minnesota Consortium for Citizens with Disabilities (MNCCD)

MNCCD is our non-profit partner that leads the dozens of non-profit organizations that serve the disability community. They are currently considering and planning their public policy agenda. MCD will support and assist when appropriate and where our values align.

The Arc Minnesota

- Accessibility in Housing Requirements for housing projects that utilize bonding dollars
- Inclusive Higher Education (with MIHEC).

Minnesota Inclusive Higher Education Consortium (MIHEC)

- Inclusive Higher Education – Expanding Post-Secondary opportunities for Minnesotans with development or intellectual disabilities.

The Metropolitan Council – Metro Transit

- Expanding public transit options and improving accessibility on existing routes and lines.