1.1   .... moves to amend H.F. No. 2331 as follows:

1.2   Delete everything after the enacting clause and insert:

1.3   "Section 1. Minnesota Statutes 2024, section 256B.4914, subdivision 10a, is amended to

1.4   read:

1.5   Subd. 10a. **Reporting and analysis of cost data.** (a) The commissioner must ensure

1.6   that wage values and component values in subdivisions 5 to 9 reflect the cost to provide the

1.7   service. As determined by the commissioner, in consultation with stakeholders identified

1.8   in subdivision 17, a provider enrolled to provide services with rates determined under this

1.9   section must submit requested cost data to the commissioner to support research on the cost

1.10   of providing services that have rates determined by the disability waiver rates system.

1.11   Requested cost data may include, but is not limited to:

1.12   (1) worker wage costs;

1.13   (2) benefits paid;

1.14   (3) supervisor wage costs;

1.15   (4) executive wage costs;

1.16   (5) vacation, sick, and training time paid;

1.17   (6) taxes, workers' compensation, and unemployment insurance costs paid;

1.18   (7) administrative costs paid;

1.19   (8) program costs paid;

1.20   (9) transportation costs paid;

1.21   (10) vacancy rates; and

2.1   (11) other data relating to costs required to provide services requested by the

2.2   commissioner.

2.3   (b) At least once in any five-year period, a provider must submit cost data for a fiscal

2.4   year that ended not more than 18 months prior to the submission date. The commissioner

2.5   shall provide each provider a 90-day notice prior to its submission due date. If a provider

2.6   fails to submit required reporting data, the commissioner shall provide notice to providers

2.7   that have not provided required data 30 days after the required submission date, and a second

2.8   notice for providers who have not provided required data 60 days after the required

2.9   submission date. The commissioner shall temporarily suspend payments to the provider if

2.10   cost data is not received 90 days after the required submission date. Withheld payments

2.11   shall be made once data is received by the commissioner.

2.12   (c) The commissioner shall conduct a random validation of data submitted under

2.13   paragraph (a) to ensure data accuracy. The commissioner shall analyze cost documentation

2.14   in paragraph (a) and provide recommendations for adjustments to cost components.

2.15   (d) The commissioner shall analyze cost data submitted under paragraph (a). The

2.16   commissioner shall release cost data in an aggregate form. Cost data from individual

2.17   providers must not be released except as provided for in current law.

2.18   (e) Beginning January 1, 2029, the commissioner shall use data collected in paragraph

2.19   (a) to determine the compliance with requirements identified under subdivision 10d. The

2.20   commissioner shall identify providers who have not met the thresholds identified under

2.21   subdivision 10d on the Department of Human Services website for the year for which the

2.22   providers reported their costs.

2.23   **EFFECTIVE DATE.** This section is effective retroactive to January 1, 2025.

2.24   Sec. 2. Minnesota Statutes 2024, section 256B.4914, subdivision 10d, is amended to read:

2.25   Subd. 10d. **Direct care staff; compensation.** (a) A provider paid with rates determined

2.26   under subdivision 6 must use a minimum of 66 percent of the revenue generated by rates

2.27   determined under that subdivision for direct care staff compensation.

2.28   (b) A provider paid with rates determined under subdivision 7 must use a minimum of

2.29   45 percent of the revenue generated by rates determined under that subdivision for direct

2.30   care staff compensation.

2.31   (c) A provider paid with rates determined under subdivision 8 or 9 must use a minimum

2.32   of 60 percent of the revenue generated by rates determined under those subdivisions for

2.33   direct care staff compensation.

3.1 (d) Compensation under this subdivision includes:

3.2 (1) wages;

3.3 (2) taxes and workers' compensation;

3.4 (3) health insurance;

3.5 (4) dental insurance;

3.6 (5) vision insurance;

3.7 (6) life insurance;

3.8 (7) short-term disability insurance;

3.9 (8) long-term disability insurance;

3.10 (9) retirement spending;

3.11 (10) tuition reimbursement;

3.12 (11) wellness programs;

3.13 (12) paid vacation time;

3.14 (13) paid sick time; or

3.15 (14) other items of monetary value provided to direct care staff.

3.16 (e) This subdivision does not apply to a provider licensed as an assisted living facility

3.17 by the commissioner of health under chapter 144G.

3.18 (f) This subdivision is effective January 1, 2029, and applies to services provided on or

3.19 after that date.

3.20 **EFFECTIVE DATE.** This section is effective retroactive to January 1, 2025.

3.21 Sec. 3. **DIRECTION TO COMMISSIONER; COST REPORTING IMPROVEMENT**

3.22 **AND DIRECT CARE STAFF REVIEW.**

3.23 (a) The commissioner of human services must consult with interested parties and make

3.24 recommendations to the legislature to clarify provider cost reporting obligations to promote

3.25 more uniform and meaningful data collection under 256B.4914. By February 15, 2026, the

3.26 commissioner must submit to the chairs and ranking minority members of the legislative

3.27 committees with jurisdiction over health and human services policy and finance draft

3.28 legislation required to implement the commissioner's recommendations.

4.1   (b) The commissioner of human services must consult with interested parties and, based

4.2   on the results of the cost reporting completed for calendar year 2026, recommend what, if

4.3   any, encumbrance of medical assistance reimbursement is appropriate to support direct care

4.4   staff retention and the provision of quality services under Minnesota Statutes, section

4.5   256B.4914. By January 15, 2028, the commissioner must submit to the chairs and ranking

4.6   minority members of the legislative committees with jurisdiction over health and human

4.7   services policy and finance draft legislation required to implement the commissioner's

4.8   recommendations."

4.9   Amend the title accordingly