

North Dakota Olmstead Commission Meeting Minutes of February 4, 2026

Voting Members Present

Christopher Joseph, Veronica Zietz, Donene Feist, Reuben Panchol, and Judge Bobbi Weiler (in-person) and Tawnya Taylor, Rep. Alisa Mitskog, and Senator Kathy Hogan (via Teams)

Voting Members Absent

Julianne Horntvedt and Carey Goetz

Non-Voting Members Present

Chad Frisinger - DOT, Anthony Bauer – ND Indian Affairs, Brandon Dettlaff and Jennifer Henderson – Housing Finance Agency, Pat Traynor – DHHS, Rikki Roerich and Jana Pastir – Dept. of Commerce, Pat Bertagnolli – Job Service ND, Zach Greenberg – Dept. of Labor and Human Rights

Other Attendees

Becky Rosenkranz and Stephanie Bouche, P & A Project; Brenda Schmid, Kylie Erickson, Paige Feist-Walters, Trevor Vannett, Susan Dengal, Shannon Coulter, Tim Eissinger, Tricia McNamee, Tami Ternes, Donald Winter, Tina Bay, Rachel Sinness

Welcome and Introductions

The meeting was called to order at 1:00 p.m. and introductions were made by everyone present.

Agenda Approval

The agenda covering Approval of Agenda, Approval of November 2025 minutes, Olmstead Plan Review Goal #4, Money Follows the Person/Transition and Diversion Program Presentation, Olmstead Functional Scope, Olmstead Plan Review Goal #7, Customized Employment, Workers with Disabilities Medicaid, Public Comment, and Upcoming Meeting Dates was reviewed. **MOTION:** A motion was made by Judge Weiler, and seconded by Ms. Zietz, that today’s agenda be approved as presented. The motion passed.

Minutes Approval

MOTION: A motion was made by Judge Weiler, and seconded by Ms. Feist, that the November 12, 2025 meeting minutes be approved as typed. The motion passed.

Olmstead Plan Review – Goal #4 Improve and expand housing options

Money Follows the Person/Transition and Diversion Presentation –Kylie Erickson, Money Follows the Person

Ms. Kylie Erickson introduced herself and Ms. Paige Feist-Walters from the Money Follows the Person (MFP) Program. Ms. Erickson is the Assistant State Housing Facilitator for MFP. She noted that the Department of Justice got involved with ND back in 2020 with a settlement agreement, while the MFP

program has been around since 2007. The settlement agreement made sure that individual rights were being met within nursing homes and to help individuals get back into the community of their choice. Ms. Erickson described MFP as a program that addresses the unique housing needs for the aging and people with disabilities. MFP works really hard to get these individuals into a community of their choice so it's a less restrictive environment and they are living more independent, all while making sure that their individual needs are met. To qualify for MFP services, the individual must express their desire to transition back to the community of their choice, needs to be in a nursing facility or intermediate care facility for at least 60 days, and Medicaid eligible on the last day of their stay. MFP works with transition coordinators across the state from the centers for independent living (Freedom Resource Center, Independence Center for Independent, Dakota Center for Independent Living, and Options). Transition coordinators bring the right professionals together to build a collaborative, wraparound team tailored to each individual's needs. MFP also works closely with DD program managers across the state. A Home and Community Based Services (HCBS) case manager is also involved with this team. The MFP Transition Coordinator aligns team members, services, and supports to promote a smooth and successful community transition. Ms. Erickson stated that she and Ms. Feist-Walters work closely with the housing authorities across the state to get vouchers in place and to help with anything the individual needs. If an individual is coming out of a nursing home they usually don't have anything. If a modification is needed to an apartment, they will work on that as well.

There is a RAP (Rehab Accessibility Program) grant available for ramps so that the individual has a safe way to enter and exit their home. MFP works with the nursing home itself, so that if the individual is involved in certain therapies, the nursing home social workers are around the table to address those needs. Individuals that need 24-hour care in a nursing home will need that in the community, so working with HCBS coordinators on these issues is really important.

Ms. Erickson stated that the Housing Facilitator's role also includes filling out applications and locating personal identification, i.e. Social Security Card, Social Security Award Letter, photo ID's, etc. Ms. Erickson provided a list of the current housing facilitators around the state of ND. They are also there when housing contracts need to be signed for an apartment. Making sure that all of the individuals needs are met and everything is in order regarding affordability of the apartment, etc. There are often long-term options counselors involved. These counselors provide information about community-based services, personal centered planning and transition services to all target population members and guardians. Referrals also come from HCBS Coordinators that are trying to keep individuals in their own homes.

Ms. Erickson provided some statistics on ND's current MFP transition summary. The summary provided information on the ages of those requesting services, number of folks with intellectual disabilities and also those with physical disabilities. Ms. Erickson stated that there were a few years where the transition totals dipped down because the MFP grant was potentially ending. Things changed and MFP got word that they would stay up and running and things picked up again. They have had a lot more transitions and referrals since 2020.

Ms. Erickson added that she would also like to provide information on their Transition and Diversion Pilot Program (TDPP). That program used to be called the ADRL. It is funded by the legislature and is a permanent program in ND. Ms. Erickson added that the MFP program follows an individual for 365 days, while the TDPP follows an individual for only 90 days, depending on the situation. Eligibility for the TDPP is also different. The individual must have a physical or mental impairment that substantially limits one or more major life activities. They also need to be receiving Medicaid or Medicaid Expansion. Ms. Erickson stated that individuals that are in the community can be considered for the TDPP because they are already in the community and MFP is trying to prevent them from going into an institution. Ms. Erickson showed a map of where the Independent Centers are located across the state. Ms. Erickson shared some statistics regarding referrals to the TDPP over the last few years. She noted that a Survey was completed on the TDPP and the survey information was shared. Through the Survey several testimonials were shared by individuals extremely satisfied with the program.

Ms. Erickson stated that if anyone wants additional information on the MFP or the TDPP they can reach out to MVP's Program Directors, or contact Cheryl Merck or herself. Ms. Erickson opened up for the floor for questions from the Commission.

Ms. Henderson asked what percentage of those served get connected to long term rental assistance. Ms. Erickson stated that MFP can pay for an apartment until the individual is ready to move in. She noted that the wait lists for housing vouchers can be anywhere from 12 months to five years. The voucher usually covers about 70% of their rent, which leaves the individual responsible for 30%. Accessible housing units are in high demand across the entire state.

Chair Joseph asked whether the security deposit is the biggest barrier to accessible housing that MFP finds. Ms. Erickson stated, yes, that most of the accessible apartments are fair market value and a lot of the individuals seeking housing are on a fixed income and get Social Security. She added that with the TDPP, only the first month's rent and deposit can be covered, with MFP things can be covered for a longer term.

Chair Joseph asked if MFP is able to mediate landlord/tenant disputes and if so, what are some of the recurring issues between the landlord and tenant. Ms. Feist-Walters stated that reasonable accommodations, i.e. landlord putting in a ramp would be one of the biggest issues. MFP experiences a lot of backlash from landlords because these costs come directly out of their pockets. Ms. Feist-Walters stated that the MFP and the TDPP can often times mitigate these issues and help cover that accommodation if needed.

Another issue is the ability for a lot of individuals being able to pay their rent on time. Ms. Erickson noted that some individuals don't get their SSI or SSDI checks until the middle of the month, when rent is due on the 1st. MFP is able to advocate on behalf of these to get their rent payment moved to the middle of month. Another frequent issue is emotional support animals and getting that documentation for the landlords.

Ms. Feist-Walters added that most of the staff at MFP are trained to be ADA certified coordinators throughout the state of ND. This will help MFP in the long run because they will be certified to recommend the needed accommodations for the landlord to complete.

Mr. Bauer questioned cost sharing for modifying homes. Ms. Erickson noted that MFP can cover any of those modifications with the RAP grant. She added that MFP works with the housing finance agency to do any modifications that make a home more accessible. MFP has a pot of money that can be used for modifications so that it's not all on the tenant or the landlord.

Mr. Bauer also asked about individuals transitioning into a rural tribal community areas. He noted that there are a lot of medical expenses associated with transportation to and from medical appointments and wondered if that is on the individual or if HCBS would assist with that. Ms. Erickson stated that there is an assessment that is completed to determine the individual's recipient reliability. It all depends on the individual's income and which program they are working with, but transportation can be covered in some cases. It all depends on whether the HCBS case manager can make it happen.

Judge Weiler asked if MFP has experienced some of the landlords just refusing to work with them because they don't want to work with the headache of a particular situation. Ms. Erickson noted, yes, some landlords set their payment standards higher so that the housing voucher doesn't work for their units. Ms. Erickson added that MFP is in the middle of discussions to fix that. She stated that this is something MFP has been trying to mitigate for about five years now.

Ms. Zietz stated that there is really not much assistance for people experiencing mental health or substance abuse issues or that are just unhoused. Ms. Erickson stated that MFP does refer a lot of people to other programs that assist people with those sorts of disabilities, i.e. Better Together, Free Through Recovery, F5, 1915i, and Heartview.

Rep. Mitskog stated that she has been sounding the alarm for quite some time. She thinks we have a looming crisis with housing for individuals coming out of institutions. People are being housed at the North Dakota State Hospital (NDSH) because there is just no place else for them to go. She added that there has been discussion over the last four years about whether we need to develop ICFs for these individuals. We need more housing options for the chronically mentally ill that are not stable to live on their own. Rep. Mitskog stated that its great we are referring individuals to other agencies, but she just wants to acknowledge and create awareness of the Commission of this looming crisis and we are going to have to tackle it. She really hopes that during the next Legislative Session we can do something because these individuals need stable housing vs. basic care and long-term care facilities because there are no community housing options.

Judge Weiler stated that they see a lot of these cases in the court system. She shared a story of an individual who could not be released from the NDSH because there wasn't appropriate housing to go to. The state basically paid for more restrictive housing than necessary. She sees a lot of people found not guilty by reason of mental illness. They have to be evaluated at the NDSH and then they are held until

appropriate housing can be found. Finding housing in ND with 24-hour supervision is extremely hard to find.

Rep. Mitskog stated that she has a constituent that has been housed at the NDSH for about 10 years. Basic care facilities have tried and failed to house him because of the lack of qualifications. This is a brilliant 32-year-old gentleman with a severe mental health diagnosis. As a state, ND has not done enough to allow this gentleman and others to live in the community with dignity. We need to solve this dilemma. These are real situations right now that are currently playing out in ND for individuals that don't have housing opportunities or choices for community-based living arrangements.

Ms. Erickson shared some information on four individuals with complex medical needs and modifications that are currently moving to Fargo from the Anne Carlsen Center in Jamestown. The transition for these individuals has been taking place for over a year now. She added that mental health issues is a big issue and she really hopes we can come together to figure out a plan for individuals with a mental health diagnosis.

Mr. Vannett stated that he agrees with Rep. Mitskog regarding the need for more services for those with mental health issues. We have people in our communities with CP who need track ceiling lifts, ventilators and two staff in their apartments. This is a major gap that we need to cover. The Commission and DHHS need to work on this. He gets calls constantly and it is really frustrating to deal with.

Ms. Feist stated that it was noted previously that there are 51 children and youth under the MFP program and she is curious about the circumstances for those children and their approximate ages. Ms. Erickson stated that she would be happy to get some additional information on these families.

Ms. Henderson asked how many of the individuals served by MFP are required to obtain some form of rental assistance in order to be successful in the community. What percentage of them are you finding homes for within their price range. Ms. Bouche asked if most people need to be on housing assistance. Ms. Erickson stated that the bottom line is that we need more accessible housing across the state. She doesn't know how many units we now have across the state that are accessible and affordable, but 95% of those receiving housing assistance feel it is important to them.

Mr. Vannett stated that the Housing Authority doesn't know what the word accessible means. There is a gap between what is and isn't accessible. Ms. Erickson said they see a lot of buildings that are advertised as accessible, but they aren't really accessible. Rep. Mitskog stated that we need to do a better job of educating state agencies all over ND about accommodations, modifications and accessibility. Ms. Erickson said education around accessibility, accommodations, and modifications would be beneficial.

Discussion was held on the need to get three bids before work can be done on any accommodations. Ms. Schmid said this is a huge challenge in rural areas of the state. Ms. Erickson said they are seeing this as an issue as well. Mr. Vannett stated that it is unreasonable to have to get three bids and that

people in rural areas are lucky if they can get one bid. It is unfair to these families in those situations. There needs to be greater consistency across the waivers. Ms. Feist-Walters stated that MFP doesn't authorize services, they just assess the needs and others do the work.

Senator Hogan stated that there are also staffing challenges. Do we have adequate QSPs in both the urban and rural areas of the state. Are they good workers and are there any opportunities with rural healthcare transformation.

Ms. Erickson responded that there are a lot of home and community based services available. HCBS staff might be able to answer that question better because MFP doesn't deal with authorizing services.

Ms. Zietz stated that in reference to getting three bids and making this consistent with the other waivers, the DD waiver is open for comment and amendment and people could be making suggestions to the department right now to create that consistency. There are individuals in this meeting that are listening that could take this into account as well.

Chair Joseph thanked Ms. Erickson and Ms. Feist-Walters for their enlightening presentation.

Comments

Judge Weiler stated that she knows that the state just got some money to help with rural healthcare. She wonders if any of that money be used as a way to set up greater accessibility to rural areas for people with disabilities, like a transition center. Rep. Mitskog stated that she does know that this money cannot be used for new construction. She believes renovations, remodels or enhancement of current facilities would be acceptable. It can't supplant existing funding. Rep. Mitskog added that the first year of this funding is probably going to be gobbled up by large organizations that have teams working on this. It is a 5-year program. There are facilities sitting empty across the state that could be turned into affordable housing for people with disabilities. This is something the Commission should explore.

Ms. Feist added that depending upon the information we get about children and youth, she would like to see that information brought back to review to see if there are some gaps that we missed somewhere along the way to better serve these families.

Olmstead Functional Scope – Stephanie Bouche

Ms. Bouche stated that Chair Joseph had asked her to put something together on what the Olmstead Commission can do. These options include:

- Request information from relevant agencies, organizations, or stakeholders.
- Receive Speakers and Presentations.
- Develop and Issue Recommendations to appropriate decision-making bodies.
- Write Letters of Support.
- Publish White Papers (report that explains, analyzes, or solves a specific issue/intended to inform).
- Issue Position Statements (formal declaration of the Commission's stance on an issue/intended to persuade).
- Bring Legislation in partnership with the Commission's legislative members.

- Provide Testimony during legislative session, to interim committees, or to advisory groups.
- Submit Comments on Administrative Rules.
- File Complaints or Referrals with licensing entities, the Department of Justice, the Department of Labor, Office for Civil Rights, or payors such as Medicaid.

Chair Joseph thanked Ms. Bouche for this information.

Chair Joseph asked Commission members if there is any action that the Commission would like to take regarding Goal #4, relating to improving and expanding housing options or are there any suggestion on how to move forward for our next meeting.

Ms. Bouche shared that the Olmstead Commission Advisory Council said there is an issue with getting contractors to do smaller home modification projects. They also discussed making the process of obtaining three bids easier and having some continuity amongst the waivers. Ms. Henderson mentioned the comment period is open for the DD waiver. That should be something the Commission could look at. Chair Joseph stated that he is a little concerned about the waiver issue because he didn't know why there was such a difference between the two waivers. We need to make sure what we are proposing is not prohibited by federal law and that we aren't advocating for something that will end of not happening anyway. Chair Panchol stated that this is the reason for public comment. He stated that you put your comments in and if it's federal they will give you an answer that it's federal. You don't need to know the reason before you put in the comment. Ms. Zietz stated that they are both federal waivers with the same criteria requirements. When a comment is put forward, whether you are just an individual citizen or an organization, if the department feels like you know that would be against the law or against CMS rules, they just put out their response to your comment. There is no reason why the Commission couldn't take the opportunity to say it; the worst they are going to say is that CMS doesn't allow that or something. CMS also gets a copy then so it may push CMS to examine their rules.

Chair Panchol noted that the three bid rule is from the State Procurement Office. They require that in their regulations. Ms. Zietz stated that this rule is what state agencies are subjected to, but we don't know if this equates to the same thing we are looking at.

Olmstead Plan Review – Goal #7 Employment opportunities & incomes

Customized Employment

Ms. Bouche shared a few modifications to the Customized Employment (CE) presentation from the last meeting, given conversations with Vocational Rehabilitation (VR) and a provider of CE. It was noted that VR is considering reassessing their reimbursement structure. VR stated that more providers would be willing to provide training if they were paid more. VR likes the idea of engaging in broad marketing efforts to share the successes of CE. VR and the provider Ms. Bouche spoke with both like the idea of exploring the creation of a career path for high school and college students to enter the Direct Service Workforce as a strategic response to staffing shortages and turnover. She provided examples of what other states are doing to allow for high school and college students who are training and working in the

DSP field while receiving school credit. At the last meeting, Mr. Tom Schiwal from VR had suggested that there be one provider in each region trained on customized employment in order to do a better job of training staff vs. just doing it every once in a while.

Ms. Brenda Schmid, a member of the Olmstead Commission Advisory Council, introduced herself. She noted that Ms. Bouche did some research on Goal #7 in order for the Advisory Council to be more educated on Customized Employment. Ms. Schmid stated that the Advisory Council supports Recommendation #2 which recommends that VR reassess the reimbursement structure for CE services. A higher reimbursement rate, reflecting the actual time and effort involved for the service could encourage providers to train their staff, despite the lack of reimbursement for training time. The Advisory Council also supports Recommendation #9 which is to have one provider (with a dedicated staff member) to do CE services for a region in the state. It also supports Recommendation #4 which encourages the Commission to engage in broad marketing efforts, such as publishing white papers or other materials, to share the successes of CE with the broader community. Recommendation #5 is also important to explore the creation of a career path for high school and college students to enter the Direct Service Workforce as a strategic response to staffing shortages and turnover.

Chair Joseph asked Ms. Schmid if she presented the recommendations in the order the Advisory Council would like to see them achieved. She stated, yes, with #2 (VR reassess and update their reimbursement structure) and #9 (have one provider who is an expert in each region of ND) being their top recommendations.

Ms. Feist stated that she lives in a rural area of ND and would really like to see something happen for our students and youth that are in rural areas as well. Ms. Feist added that a lot of families she talks to don't even know that VR exists until she says something about them. Ms. Bouche commented that Recommendation #3 suggests supporting and expanding programs that introduce students with disabilities and their families to Competitive Integrated Employment (CIE) early. Is this what she is referring to? Ms. Feist confirmed that it is.

Chair Joseph asked what the Commission's wishes, ideas, suggestions are and how they want to proceed.

MOTION: A motion was made by Mr. Panchol, and seconded by Ms. Feist, that the Commission adopt the full recommendations of the Advisory Council which include Recommendations #2, #3, #4, #5, and #9. A roll call vote of Commission members was taken and the motion passed.

Ms. Zietz made a comment on about rural communities having trouble accessing services, she thought it would be good to spotlight some rural communities or plan specific outreach to those communities. For the DSP pathway item, she suggested the Olmstead Coordinator look into what ABLE is doing in Dickinson.

Ms. Bouche introduced Ms. Shannon Coulter, from XR for VR, who provided information on extended reality for VR. Ms. Coulter provided information on getting these extended reality rooms into some of

the more rural areas of the state. Ms. Coulter shared that the core components of this project focus on increasing awareness of manufacturing careers through extended reality. VR's first immersive reality room has been opened on the campus of Bismarck State College. Eight additional rooms will be opened across the state and the plan is to get the reality rooms in more rural areas so that individuals with disabilities have the opportunity to see what career options are out there for them when they can't go to a bigger city.

Rep. Mitskog added that the Commission should push to expand the work to include employers. We have a potential workforce full of workers that might just need a little assistance for customization, whether it's someone on the autism spectrum or they have a physical disability. Rep. Mitskog added that it's great to expose these individuals to current job opportunities, but we also need to educate our employers. A portion of our population may be overlooked that would be great workers, but we may need to modify some of the jobs to accommodate for their disabilities. Ms. Coulter stated that this is a big part of XR for VR's grant, to educate on assistive technology (AT) for people with disabilities. We are currently working with manufacturing employers as well as other sectors to educate them on assistive technology that is available to help individuals with disabilities to be able to do jobs that they might not be able to do otherwise. VR is working closely with North Dakota Assistive on this issue.

Mr. Pat Traynor introduced himself. He added that he would like to suggest that the Olmstead Commission have a presentation on the rural health transformation opportunities at the Commission's next meeting. The DHHS final budget has been submitted, but this can be amended. It may take up to 30 days to approve the budget. Mr. Traynor noted that with rural health transformation dollars there are several unallowable things like Rep. Mitskog said. We don't know every single disallowable thing, but we know a few of them. New construction is unallowable, but we could remodel certain things. Putting child care centers within healthcare facilities and remodel different areas for that is a possibility. Technical assistant grants are available and we try to integrate better care closer to home. Planning grants to ensure care closest to home could be something that we could get experts to help with. We know that housing is a serious problem. We do have telehealth. We have all sorts of things that could be door openers that expand accessibility and care closer to home. We are going to have a lot more clarity on what the Center for Medicaid Services (CMS) feels is permissible or not. Paying for wages is definitely something that would be considered unsustainable.

Mr. Traynor noted that there were some comments on accommodations and things that were made that were really good suggestions and then with the comments on waivers he would encourage everyone to get on the record. Mr. Traynor encouraged everyone to write DHHS a letter and if the letter is particular to a waiver have that in there for the department to look at. Mr. Traynor encouraged Ms. Bouche to make a list of key takeaways from today's meeting minutes, even if they're not formal motions but were things for the Department to look into and follow up on. If we don't have the answers immediately DHHS can follow up on those questions. Mr. Traynor encouraged the Commission to give DHHS a call and get suggestions to us on how we can be the most accommodative as an agency. We have a lot to work on. Mr. Traynor thanked the Commission for what they do. Ms. Bouche asked Mr. Traynor who she should contact at DHHS about setting up that presentation for the Commission's next meeting. He said that a request could be made to him and he will get it to the right person.

Chair Joseph asked Ms. Bouche to send that request to Mr. Traynor. Follow up items should be added to today's meeting minutes. Chair Joseph stated that the Commission is going to revisit Goal #4 regarding improving and expanding housing options. He asked if Commission members have any suggestions or motions regarding housing and improvements. MOTION: A Motion was made by Ms. Zietz, and seconded by Judge Weiler, that comments be submitted regarding the open DD waiver. A roll call vote was taken and the motion passed.

Workers with Disabilities (WWD) Medicaid

Ms. Bouche stated that while she is giving the same presentation as was given at the last meeting, she has added some numbers for clarification in red. She added that there was a concern expressed about the monthly deductible that has to be paid by the client. There was an average of 522 members with WWD Medicaid each month from January to October 2025. HHS estimates automation will be complete by 2027.

Ms. Schmid noted that the Advisory Council recommends HHS automate enrollment sooner than 2027 if possible. She noted that the policy administrator has admitted that the spaces system was never tested for WWD Medicaid and wasn't tested before launching, estimating that 300 plus potential eligible will not be enrolled. The Advisory Council also recommends HHS clarify terminology on its website to avoid confusion caused by interchangeable use of terms, gross income, accountable income, gross accountable income, and publish a transparent, user-friendly online guide explaining how accountable income is calculated. HHS should provide more training to eligibility workers to ensure they are testing for workers with Disability Medicaid prior to automation, and HHS should contact anyone who is currently paying a client share to give them information about WWD Medicaid and ask them to schedule an appointment. The Advisory Council also recommends HHS create an online payment/documentation portal for Workers with Disabilities. Mr. Vannett added that there has to be a better way to keep track of this in the Department. Finally, the Advisory Council recommends removing the \$100 enrollment fee. A question was raised as to why the enrollment fee was established and what the money is spent on. Senator Hogan stated that oftentimes there were policies that were put in place to make sure that people made a personal commitment. If a consumer had more skin in the game, they would comply more thoroughly. Rep. Mitskog asked if it will take legislative action to remove the \$100 enrollment fee. Senator Hogan stated that she feels this is a policy (administrative rule) and not in law. There would be an 18-month period of time to change anything in administrative code. If the \$100 fee is codified in N.D.C.C. 50-24.1-02.7 then it has to be removed by legislation as well. Chair Joseph clarified that this is in Century Code and would have to be removed by the assembly or via legislation.

Ms. Feist asked for clarification on whether WWD Medicaid has to go through the Zones or deal only with people working through the toll-free line. Mr. Vannett stated that they want us to go through the mail, but he doesn't trust the USPS so he takes it to the zone to get it stamped. Senator Hogan said individuals can go to the Zone office or call the toll-free line. Ms. Feist added that there are so many issues with people staying on hold for two hours. It is very frustrating and there has to be something better for the vulnerable population. It's not productive for anyone.

MOTION: A motion was made by Judge Weiler, and seconded by Mr. Bauer, that we recommend a better appointment system that is automated and streamlined to everyone's benefit. This would be added as Number 7 on the list of recommendations. A roll call vote was taken and the motion passed.

MOTION: A motion was made by Judge Weiler, and seconded by Ms. Zietz, to approve all 7 recommendations as noted above. Ms. Zietz stated that she would like to see additional work on #6 with some assistance from Ms. Bouche. Judge Weiler amended her motion to move #7 to #6 and approve all 6 of the recommendations. Ms. Zietz seconded the motion. A roll call vote was taken and the motion passed, with one member voting no.

Public Comment

Chair Joseph wanted to express his appreciation to Ms. Bouche in her role as Olmstead Commission Coordinator and let her know that she is doing a great job.

Upcoming Meeting Dates

The Olmstead Commission's next meeting date is May 13, 2026 from 1:00 -3:00 p.m. There will be a presentation by DHHS. Judge Weiler asked if we could look into housing for individuals with MH disorders. A recommendation was made that Chandler Eisinger, President of the coalition on ending homelessness could speak to that and potentially give insight on the Governor's commission on ending homelessness. Heather Brandt, from the Behavioral Health Division, was another recommendation, to provide a presentation on the gaps in housing for serious mentally ill individuals. Rep. Mitskog stated that this is extremely timely. We are spending a lot of money on MH treatment in schools. We need to talk about the ramifications and the potential impact of housing barriers and homelessness. Mr. Eisinger encouraged everyone to sign up for updates on the rural health transformation program through DHHS. Additional meeting dates in 2026 include: August 12, 2026 and November 4, 2026, both from 1:00 – 3:00 p.m.

Meeting Adjourned

Chair Joseph adjourned the meeting at 2:54 p.m.

Follow-up Items

- Ms. Bouche will follow up with Ms. Erickson to obtain the data from MFP regarding what percentage of those served get connected to long term rental assistance and additional information about the children served by MFP.
- Ms. Bouche will research the \$100 enrollment fee for WWD Medicaid.