

JULY 1, 2025 THROUGH JUNE 30, 2027



UNITED HOME CARE WORKERS MINNESOTA





JOIN US

BECOME A MEMBER OF SEIU HEALTHCARE MINNESOTA & IOWA TODAY!

Scan the QR code to fill out your membership form online.



DUES STRUCTURE

Voted and approved by membership at convention September 16, 2017.

Dues will be taken out every paycheck based on earnings for that pay period.

Email DueslsPower@seiuhcmn.org with any questions or concerns.

3%
of gross wages,
per pay period

\$36
maximum per pay period

• BETTER TOGETHER •

WELCOME to SEIU HEALTHCARE MN &IA

→ CONGRATULATIONS!

You are a Union Member in SEIU Healthcare Minnesota & Iowa. You are part of a powerful group of people who have a voice at work and set the standards for working people across the country. The Service Employees International Union is a national union with over 2 million members and over 1 million in healthcare. SEIU Healthcare Minnesota & Iowa (SEIU HCMNIA) is a state-wide local that represents over 55,000 people who work in Hospitals, Clinics, Long Term Care and Home Care. As a union, we achieve things we could never achieve individually.

You are holding in your hand the result of hard fought negotiations between the State of Minnesota and SEIU Healthcare Minnesota & Iowa. Union member leaders, made up of Community PCAs, Family Caregivers, and Home Care Clients, have participated in bargaining based on member input and priorities since 2014.

You can find out what your fellow union members have won in the past by reviewing the full Collective Bargaining Agreement (CBA).

Whether you are new to your job or have been a union member for years, your membership and participation is what keeps our union strong. At the back of this contract booklet, you will find many resources on how to get involved and where to find help if you need it.

In Unity,

SFIU HC MN&IA Officers

Jamie Gulley, President

Jigme Ugen, Executive Vice President Phillip Cryan, Executive Vice President Brenda Hilbrich, Executive Vice President Rasha Ahmad Sharif, Executive Vice President



between

SEIU Healthcare Minnesota & Iowa

and

State of Minnesota

July 1, 2025 through June 30, 2027



SEIU HC MN&IA Office

345 Randolph Avenue, Suite 100 Saint Paul, MN 55102

651-294-8100 800-828-0206 mac@seiuhcmnia.org seiuhcmnia.org

TABLE OF CONTENTS

PREAMBLE	/
DEFINITION OF TERMS	8
ARTICLE 1: UNION RECOGNITION	.11
ARTICLE 2: NON-DISCRIMINATION	.11
Section 1: Prohibition Against Discrimination	.11
Section 2: Union Activity	.12
Section 3: Program Participants Rights	.12
ARTICLE 3: PROGRAM PARTICIPANT RIGHTS	.12
ARTICLE 4: COMPENSATION	.14
ARTICLE 5: PAID TIME OFF	.16
ARTICLE 6: PAY FOR WORK ON A HOLIDAY	.17
ARTICLE 7: ENHANCED RATE	.18
ARTICLE 8: RETIREMENT	.19
Section 1. Establishment of a Retirement Trust	
(Defined Contribution Plan	.19
ARTICLE 9: GRIEVANCE AND	
DISPUTE RESOLUTION	.20
Section 1: Intent	.20
Section 2: Definition	.20
Section 3: Grievance/Dispute Resolution Procedure.	.20
Section 4: Expedited Arbitration	.25
Section 5: Time Limits	
ARTICLE 10: BACKGROUND CHECKS	.26
ARTICLE 11: THE STATE-PROVIDER	
COOPERATION COMMITTEE	.26
Section 1: Purpose	.26
Section 2: The Committee	
Section 3: Financing	.29

ARTICLE 12. OVERVIEW AND ORIENTATION	.29
Section 1. Overview	.29
Section 2. Orientation	
ARTICLE 13: ACCESS TO VACCINATION	
INFORMATION	.33
ARTICLE 14: UNION RIGHTS	
Section 1: Dues Check-Off	
Section 2: Caregiver Provider List	
Section 3: Bulletin Boards and	
Intermediary Offices	37
Section 4: Union Materials	.o, 37
Section 5: Website	
Section 6: Union Representatives	
Section 7: Copies of Notices to Fiscal	.00
Intermediaries	38
Section 8: Indemnity	
ARTICLE 15: MANAGEMENT RIGHTS	39
ARTICLE 16: FISCAL INTERMEDIARY	.0,
ROLES AND RESPONSIBILITIES	41
ARTICLE 17: DURATION	
ARTICLE 18: SEVERABILITY	
ARTICLE 19: COMPLETE AGREEMENT	
ARTICLE 20: APPROPRIATION	
APPENDIX A	
Re: Electronic Visit Verification (EVV)	.47 47
Exploring Tiered Wage Structure (Letter)	49
Retention Incentive (Letter)	50
Single Issue Facilitation - Healthcare (Letter)	52
MNsure Information Session(s) (Letter)	53
Matching Registry (Letter) Training Registration and Stipend Application (Letter)	54
Electronic Visit Verification Update (Letter)	55 54
Electronic Visit Verification Update (Letter)	57
State Requests to FMS Providers (Letter)	58

PREAMBLE

This Agreement is made and entered into this 25th of February, 2025, by and between the State of Minnesota, hereinafter referred to as the "State," and SEIU Healthcare Minnesota and Iowa, hereinafter referred to as the "Union."

This Agreement has as its purpose the promotion of harmonious relations, with mutual dignity and respect, between the parties; the establishment of an equitable and peaceful procedure for the resolution of differences; the establishment of rates of pay and other conditions of employment; and to express the full and complete understanding of the parties relative to all terms and conditions of employment covered by the Agreement. The State and the Union share a commitment to strengthening and improving the home care programs on which people with disabilities and seniors rely. The State and the Union agree that recipients of in-home care should be provided with the highest possible quality of services and supports consistent with the principles of self-direction. We also agree that a stable, sufficient workforce is essential in helping people with disabilities and seniors live, work, and participate in their communities.

The parties recognize the importance of involving both Caregivers and Participants in strategy decisions and policymaking, and that nothing in this Agreement is intended to supersede or interfere with the principles of participant self-direction.

The parties also recognize and respect the critical services provided by Caregivers, their professionalism and dedication, and the importance of their contribution to the development of the best possible workforce and the delivery of high quality services to self-directed program participants in the State of Minnesota.

The parties acknowledge that the State is the employer of Caregivers for purposes of collective bargaining as defined under Minnesota Statutes Section 179A.54.

If the parties mutually agree during the term of this Agreement, the Agreement may be modified by additional provisions relating to specific conditions covering the terms of employment stated herein. Any Agreement which is to be included as a part of this Agreement must so indicate, must be reduced to writing, and must be signed by the parties to this Agreement.

DEFINITION OF TERMS

The following terms shall be interpreted as indicated below when used in this Agreement:

(a) "Caregiver," also known as "Direct Support Worker (DSW)," or "Direct Support Professional (DSP)," "Personal Care Attendant/Assistant (PCA)," or "Community First Services and Supports (CFSS) Worker," means an individual defined as an "Individual Provider"

by Minnesota Statute 2546B.0711, selected by and working under the direction of a participant in a covered program, or a participant's representative, to provide direct support services to the participant, but does not include an employee of a provider agency, subject to the agency's direction and control commensurate with agency employee status. Whether a participant is considered to be in a covered program, which would place their Individual Provider in the bargaining unit, is determined by the information about the participant's choice documented by the Fiscal Intermediary such as a written agreement between the participant and the Fiscal Intermediary.

- (b) "Covered Program" means a program providing direct support services funded in whole or in part by the State of Minnesota, including the Community First Services and Supports (CFSS) program; Consumer Directed Community Supports (CDCS) services and extended state plan personal care assistance services available under programs established pursuant to home and community-based service waivers and under the alternative care program; the Personal Care Assistance Choice (PCA Choice) program; the Consumer Support Grant (CSG) program; and any similar program that may provide similar services in the future.
- (c) "Direct Support Connect" is an online tool (and telephone) matching service for program participants seeking workers and Caregivers seeking work to voluntarily use in order to find one another.

- (d) "Direct Support Services" means personal care assistance services covered by Medical Assistance; assistance with activities of daily living (ADLs) and instrumental activities of daily living (IADLs); and other similar, in-home long-term services and supports provided to an eligible Participant by their employee or the employee of their representative to meet such person's daily living needs and ensure that such person may adequately function in the person's home and have safe access to the community.
- (e) "Fiscal Intermediary" means the Financial Management Service (FMS) that provides support to participants and participants' representatives with regard to employing Caregivers. Prior to the implementation of CFSS, PCA Choice Provider Agency shall be included in the definition of Fiscal Intermediary.
- (f) "Participant," also known as "Program Participant" means a person who receives direct support services through a covered program.
- (g) "Participant's Representative," also known as "Responsible Party," or "Managing Party" means a Participant's legal guardian or an individual having the authority and responsibility to act on behalf of a Participant with respect to the provision of direct support services through a covered program.

ARTICLE 1. UNION RECOGNITION

The State recognizes the Union as the exclusive representative under Minnesota Public Employee Labor Relations Act (PELRA) for all Caregivers in the bargaining unit certified by the Bureau of Mediation Services in Case Number 15PCE0010. The Union shall have the rights and duties as prescribed by Minnesota Statutes Section 179A.54 and other applicable provisions of PELRA and as set forth in this Agreement.

The State shall not, during the life of this Agreement, meet and negotiate within the meaning of PELRA with any other employee organization or any individual employee with respect to the terms and conditions of employment of the Caregivers covered by this Agreement.

ARTICLE 2. NON-DISCRIMINATION

Section 1. Prohibition Against Discrimination.

All Caregivers covered under this Agreement shall be treated with dignity and respect. In addition, the provisions of this Agreement shall be applied to all Caregivers without discrimination as to sex, marital status, sexual orientation, gender identity, familial status, race, color, religion, disability, national origin, veteran status, union membership status, current or former public assistance recipient status, age, political affiliation, or as defined by statute or executive order.

Race is inclusive of traits associated with race, including but not limited to hair texture and hair styles such as braids, locs, and twists.

Section 2. Union Activity.

The State shall not discriminate against, interfere with, restrain or coerce a Caregiver from exercising their right to join or not join the Union, to serve in an elected or appointed position with the Union, or to participate in any other official capacity on behalf of the Union. The State shall remain neutral on the question of whether Caregivers should join the Union under PELRA. The State shall also require that all Fiscal Intermediaries with which it contracts shall remain neutral on the question of whether Caregivers shall join the Union. All questions addressed to the State or its Fiscal Intermediaries by Caregivers concerning membership in or representation by the Union under PELRA shall be referred to the Union.

Section 3. Program Participants' Rights.

This Article does not apply to the Program Participants' sole and undisputed rights provided in the law, including the selection and termination of employment of Caregivers by Program Participants or Program Participants' representatives.

ARTICLE 3. PROGRAM PARTICIPANT RIGHTS

This Agreement shall not diminish in any way the rights of Program Participants or Participants' Representatives to:

- Select a service model of their choice, without interference or manipulation and with access to accurate information;
- 2. Select, hire, direct, train, supervise, and terminate the employment of their Caregivers;
- 3. Determine levels of service;
- Determine the work schedule of Caregivers in their employ;
- 5. Manage individual service budgets, within the limits established by the State's covered programs;
- 6. Determine Caregiver wages in accordance with Article 4 of this Agreement;
- 7. Receive direct support services from Caregivers not referred to them through a state registry.

No actions taken by the Program Participant, or Participant's Representative, with respect to this Article or any other participant rights shall be subject to the grievance and arbitration procedures provided for in this Agreement.

This Agreement shall not be interpreted to require the State to release confidential personal information regarding any Program Participant to the Union, without the express written consent of a Program Participant, or Participant's Representative.

Personal information includes, but is not limited to, Program Participants' names, addresses, telephone numbers, and email addresses. The Union and State agree that standards of confidentiality of Participant data should be followed in accordance with applicable state and federal law. Union representatives shall maintain confidentiality regarding Program Participants and shall not disclose personal information about a Program Participant obtained from any source unless the Program Participant, or Participant's Representative, has authorized the disclosure in writing or legal proceedings compel the disclosure. When a Caregiver raises a potentially grievable concern with a Union Representative, prior to asking questions related to the Program Participant's services, Union Representatives must obtain a written release of information from the Caregiver's Program Participant.

ARTICLE 4. COMPENSATION

Effective January 1, 2025, the minimum hourly wage rate for all Caregivers shall be \$20.00 and Tiered Wage Schedule 1 applies for PCA Choice or budget model under CFSS.

Effective January 1, 2026, or within 30 calendar days of federal approval of the required State and waiver plan amendments, whichever is later, Tiered Schedule 2 shall be implemented for PCA Choice or budget model under CFSS.

Effective January 1, 2027, or within 30 calendar days of federal approval of the required State and waiver

plan amendments, whichever is later, Caregivers in PCA Choice or budget model under CFSS who attend Orientation (see Article 12 Overview and Orientation) shall receive an additional forty cents (.40) per hour.

Cumulative PCA hours worked are defined by the Department of Human Services through the number of units of service provided by a Caregiver since July 1, 2017 according to claims data.

Tiered Wage Schedule 1

Cumulative PCA/ CFSS Hours Worked	Wage Floor (PCA Choice, CFSS Budget Model) (Effective Date: January 1, 2025)
0 - 1,000	\$20.00
1,001 – 2,000	\$20.50
2,001 – 6,000	\$21.00
6,001 – 10,000	\$21.70
10,001+	\$22.50

Tiered Wage Schedule 2

Cumulative PCA/ CFSS Hours Worked	Wage Floor (PCA Choice, CFSS Budget Model) (Effective Date: January 1, 2026)
0 - 1,000	\$20.00
1,001 – 2,000	\$20.90
2,001 – 6,000	\$21.40
6,001 – 10,000	\$22.10
10,001+	\$22.90

Program Participants or their representatives shall have the ability to choose to pay Caregivers wage rates above the levels established by this contract and in accordance with the parameters established under covered programs.

ARTICLE 5. PAID TIME OFF

Paid Time Off (PTO) accruals shall be managed by each Fiscal Intermediary.

A Caregiver shall accrue one (1) hour of PTO for every thirty (30) hours worked in covered programs. A Caregiver may use PTO hours in any pay period after the pay period in which they were accrued. PTO shall be paid at the Caregiver's normal rate of pay which they would have been paid had they worked for the Participant who approved their use of PTO.

A Caregiver in CDCS, CSG or CFSS, may waive PTO so that those funds are returned to the Participant's budget for alternative use by the Participant at any time during the Participant's service plan year. Once an Caregiver has waived PTO, they will not be eligible to accrue PTO until the start of the Participant's next service plan year.

A Caregiver must obtain the express consent of their participant or participant's representative in order to use or waive PTO except during a period in which the Participant is unable to receive paid services, such as when a Participant is hospitalized, travels internationally, or experiences a gap between service plan years. Within CDCS, CSG, and CFSS, Caregivers may cash out their accrued PTO at any time, upon request, with the express approval of their Program Participant. However, where a Caregiver is no longer employed by their Program Participant, the Caregiver is not required to receive express approval from their Program Participant to cash out their accrued PTO.

A Caregiver may carry over up to eighty (80) hours of PTO from one State fiscal year to the next (July 1 – June 30).

Up to eighty (80) hours of accrued PTO shall be cashed out and paid to the Caregiver upon termination of all employment managed by a Fiscal Intermediary. Upon implementation of CFSS, up to eighty (80) hours of accrued PTO shall be cashed out by a Fiscal Intermediary and paid to a Caregiver upon termination of the Caregiver's membership in the bargaining unit. Effective January 1, 2026, up to one hundred twenty (120) hours of accrued PTO shall be cashed out and paid to the Caregiver by an FMS upon termination of all employment managed by that FMS.

ARTICLE 6. PAY FOR WORK ON A HOLIDAY

A Caregiver shall be paid at 1.5 times their normal rate of pay for all hours worked on the following nine (9)

holidays:

- New Year's Day
- Rev. Dr. Martin Luther King Jr. Day
- Memorial Day
- Juneteenth
- Independence Day
- Labor Day
- Veterans Day
- Thanksgiving
- Christmas Day

ARTICLE 7. ENHANCED RATE/BUDGET

The State and the Union recognize the need for career development for Caregivers to align compensation with skills and experience. The enhanced rate/budget is intended to enable eligible Participants to attract the Caregivers they need to remain in their homes and communities.

Participants eligible to access increased financial incentives to attract Caregivers will be identified by the State through assessment as those Participants who are eligible for at least ten (10) hours of personal care assistance services each day. Caregivers who may access increased financial incentives to work with eligible Participants must complete designated training approved by the DHS Commissioner or the Commissioner's designee. Beginning July 1, 2019, increased financial incentives will include a seven and

one-half percent (7.5%) increase to the rate for personal care assistance services (resulting in a seven and one-half percent (7.5%) increase in the qualifying Caregivers' wages) and a seven and one-half percent (7.5%) increase in the budgets of Participants using CDCS, CSG and CFSS.

Contingent on legislative change(s) to the enhanced rate (256B.0659) from 107.5 percent to 112.5 percent, the increase in participants' budgets will change from 7.5% to 12.5% to be used to improve caregivers' wages and cover wage-related costs.

ARTICLE 8. RETIREMENT

Section 1. Establishment of a Retirement Trust (Defined Contribution Plan)

Upon enactment of a state law authorizing the creation of such a trust, the Union and the State agree to sponsor and create a joint labor and management trust fund for retirement that is a defined contribution plan. Effective July 1, 2025, or upon the establishment of the Trust, whichever is later, the State shall provide one-time funding of \$350,000 to the Trust for retirement administration, which includes contracting for retirement-related work.

The Trust will be responsible for the administration and operation of retirement benefits in accordance with the terms of its Trust Agreement and policies.

ARTICLE 9. GRIEVANCE AND DISPUTE RESOLUTION

Section 1. Intent.

The purpose of this procedure is to secure, in the easiest and most efficient manner, resolution of grievances.

The State and the Union commit to resolving conflict in a responsible manner, and to the use of mediation and conflict resolution procedures when appropriate.

The State and the Union agree that Caregivers and Union representatives should make every effort to resolve concerns on an informal basis at the earliest opportunity. Accordingly, if the dispute involves the actions of a Fiscal Intermediary, the Caregiver and/or the Union shall address the issue through informal means with the Fiscal Intermediary prior to the initiation of the grievance process with DHS.

Section 2. Definition.

For the purposes of this Agreement, a grievance shall be defined as a dispute or disagreement as to the interpretation or application of any term or terms of this Agreement.

<u>Section 3. Grievance/Dispute Resolution</u> Procedure.

- Step 1: Informal Resolution
 - The Caregiver and/or a Union representative

- may confer with the DHS-designated representative and attempt to resolve the issue informally.
- Where issues arise involving a Fiscal Intermediary, in recognition of the partnership with Fiscal Intermediaries, the Caregiver and/or a Union representative may contact the Fiscal Intermediary and attempt to resolve the issue informally. A DHS-designated representative shall be included in or copied on all such communication between the Caregiver and/or Union representative and the Fiscal Intermediary.

• Step 2: Written Grievance

- If the Union wishes to initiate a formal grievance, the Union representative may consult with the Caregiver. The Union representative or Caregiver, shall, on a form supplied by the Union, set forth the grievance in writing, including a statement of the pertinent facts surrounding the grievance, the date on which the incident occurred, the alleged violations of the Agreement, the specific remedy requested, and attach any supporting documentation. Where supporting documentation is required, the Union shall provide such documentation within twenty-one (21) calendar days of filing the grievance.
- The written grievance shall be submitted to the DHS-designated representative within twenty-one (21) calendar days of the occurrence of the alleged violation or within twenty-one (21) calendar days of when the Caregiver or the Union

- could reasonably have been aware of the incident or occurrence giving rise to the grievance. The written grievance shall be submitted by email.
- The DHS designee shall contact the Union representative within seven (7) calendar days of receipt of the written grievance, and schedule a meeting in order to discuss and resolve the grievance. Subsequent to this meeting, DHS shall provide a written response to the grievance to the Union by email within ten (10) calendar days from the date the parties met to discuss the grievance. If the response does not resolve the grievance, the Union may, within twenty-one (21) calendar days of the date the written response is given or due, proceed to Step 4, Arbitration.
- In cases where DHS becomes aware through the Step 2 grievance process about the Fiscal Intermediary's potential need for technical assistance with the Fair Labor Standards Act or Minnesota's legal protections against wage theft, DHS will inform the Fiscal Intermediary on where to find official guidance (e.g., Department of Labor and Industry) on compliance with their responsibilities under the Fair Labor Standards Act or Minnesota's legal protections against wage theft.
- Step 3 (Optional): Mediation
 - As an alternative prior to final and binding arbitration in Step 4, if the grievance is not resolved in Step 2 the parties may choose by mutual agreement to submit the matter to mediation through the Minnesota Bureau of Mediation Services ("BMS")

to resolve it.

- Step 4: Arbitration
 - If the grievance is not settled at Step 2 or Step 3, the Union may appeal the grievance in writing to final and binding arbitration. The written appeal must be submitted to the Assistant State Negotiator of Minnesota Management and Budget or the Minnesota
 - Management and Budget Commissioner's designee. The Parties agree that prolonged delays in taking matters to arbitration can make it challenging to the arbitrator, and for both parties, to effectively address the alleged contract violation being arbitrated. Any grievance that is not appealed in writing by the Union to the Assistant State Negotiator or the Minnesota Management and Budget Commissioner's designee within twenty-one (21) calendar days after DHS's written response is submitted or due shall be waived.
 - The arbitration proceeding shall be conducted by an Arbitrator to be selected from a panel of seven (7) arbitrators obtained from BMS. The Arbitrator shall be selected from the panel by the following method: the Union and the State shall each strike names from the list, alternating choices of names to strike, until only one arbitrator remains. The remaining arbitrator shall hear the grievance and decide the case. The party that strikes first shall be determined by coin toss.
 - The Union shall be responsible for contacting the

- arbitrator to seek availability for an arbitration date(s). The scheduled arbitration date(s) shall be mutually agreeable to both parties.
- The award of the Arbitrator shall be final and binding upon both parties.
- The parties shall each pay one half (1/2) the costs or fees, if any, of the Arbitrator. Each party shall be responsible for its own costs, including the costs of representation, advocacy and the costs of that party's appointed representatives. If either party cancels an arbitration hearing or asks for a postponement fewer than 21 days before a hearing, and that cancelation or postponement leads to the arbitrator making a charge, the canceling party or the party asking for the postponement shall pay this charge. If the parties mutually agree to cancel or mutually agree to ask for a last minute postponement that leads to the arbitrator making a charge, the parties shall each pay one half (1/2) of the charge.
- The Arbitrator shall be without power to amend, modify, nullify, ignore, add to, or subtract from the provisions of this Agreement. The Arbitrator shall consider and decide only the specific issue submitted in writing by the State and the Union, and shall have no authority to make a decision on any other issue not so submitted.
- The Arbitrator shall be without power to make decisions contrary to, or inconsistent with, or modifying or varying in any way the application of laws, rules or regulations having the force and effect of law.

Section 4. Expedited Arbitration.

If both parties mutually agree in writing, the parties may skip any of the steps of the grievance procedure and utilize an expedited arbitration procedure for mutually identified grievances in the interest of achieving swift and economical resolution of those grievances. Selection of the arbitrator and distribution of arbitrator costs and fees among the parties shall follow the same procedure as outlined under the Step 4 Arbitration procedure. All decisions are final and binding on the parties, but shall not be considered as precedential in any other proceeding or matter. The hearing shall last no more than three (3) hours unless mutually agreed to by the parties.

Section 5. Time Limits.

The State and the Union agree that the time limits provided in this Article are essential to the prompt and orderly resolution of any grievance, and that each will abide by the time limitations. Days will be counted by excluding the first day and including the last day of timelines. When the last day falls on a Saturday, Sunday or holiday, the last day will be the next day that is not a Saturday, Sunday or holiday.

Any grievance not properly presented in writing and within the time limits specified, or any grievance not moved to the next step within the specified time limits shall be considered to have been withdrawn. If the State fails to meet the time limits specified, the Union may move the grievance to the next step. Time limits may be extended only by mutual agreement of the parties.

ARTICLE 10. BACKGROUND CHECKS

Caregivers shall not be required to pay for the cost of any required background checks, including fingerprinting.

ARTICLE 11. THE STATE-PROVIDER COOPERATION COMMITTEE

Section 1. Purpose.

The State and the Union support a cooperative relationship between the parties, characterized by trust, respect, and a shared commitment to improving the quality of the home care services program participants receive. In order to foster such a cooperative relationship, the parties agree to continue and further develop the work of the joint State-Provider Cooperation Committee to deal with mutually identified issues through a problem-solving approach, and make related recommendations to the Commissioner of DHS or designee. Furthermore, the State and the Union recognize the importance and value of Caregiver training, education, and preparation to perform support services Program Participants require. To enhance the quality of home care services provided to Program Participants by Caregivers and to improve the safety of home care work for both Caregivers and Program Participants, the State and the Union agree to continue and further develop the work of the State Provider Cooperation Committee. A key goal of the Committee's work is to make available voluntary training programs, required orientation programs for all Caregivers, and stipends of \$750 for Caregivers who

have completed designated, voluntary trainings made available through or recommended by the Committee. The Committee may consider development of training programs that pay experienced Caregivers to provide on-the-job training to new Caregivers serving the same Program Participant.

Section 2. The Committee.

The State Provider Cooperation Committee shall consist of no more than eight (8) DHS-designated representatives and no more than eight (8) Union representatives, unless mutually agreed to by the parties. The State Provider Cooperation Committee shall determine training and overview needs and priorities, evaluate options for training and overview subject matter, the frequency and locations of trainings and overviews, and potential partnerships with other organizations and/or academic institutions for the provision of trainings, and make recommendations to the Commissioner of DHS or designee. The State shall provide Fiscal Intermediaries information about available voluntary trainings.

The parties understand that the Committee is not intended to replace or substitute for the work of other councils, task forces, or other entities established by DHS to issue recommendations on home and community-based services policy. Committee meetings shall not be considered or used as a bargaining forum, or to make any specific amendments to the Agreement, nor shall they be considered or used as a substitute for the grievance procedure.

The Committee shall identify and address issues of mutual concern specific to Caregivers working in covered programs. The Committee shall be authorized to deliver to DHS and the Union recommendations regarding mutual areas of concern, including but not limited to: implementation of the Community First Services and Supports (CFSS) program; continued development and improvement of the matching registry for program participants and Caregivers; strategies for career development described in Article 7; strategies to address acute care transitions in Minnesota; Enhanced Rate (e.g., eligibility); Electronic Visit Verification (EVV); and any other mutually agreed upon areas of discussion. The Committee is authorized to establish subcommittees on specific issues. These subcommittees may include representatives of the State or of the Union who do not serve on the full Committee. The Committee shall be responsible for coordinating the activities of the subcommittees.

The State Provider Cooperation Committee shall continue to make recommendations to the Commissioner of DHS or designee for the implementation, further development of, and improvements to, Direct Support Connect for Program Participants and Caregivers. The State, upon request of the Union, shall meet and confer regarding any concerns the Union may have related to the implementation or operation of Direct Support Connect.

Section 3. Financing.

The State agrees to provide \$500,000 per year to the State Provider Cooperation Committee for providing trainings to Caregivers.

The State also agrees to provide one-time funding of \$2,250,000 effective July 1, 2025 for stipends of \$750 for Caregivers who complete designated, voluntary trainings made available through or recommended by the State Provider Cooperation Committee.

ARTICLE 12. OVERVIEW AND ORIENTATION

Section 1. Overview

All new Caregivers are required to complete an overview of Caregiver work to include, at a minimum: principles of independent living and self-direction; prevention of fraud and abuse; basic operational procedures (e.g., filling in time-sheets, requirements); privacy compliance and confidentiality for program participants; and a list of public health clinics in each county that offer vaccines. When such an overview is conducted in person, the Union shall have the opportunity to discuss worker's rights and responsibilities, collective bargaining, the provisions of this contract and steps to take if they experience contract violations. The State Provider Cooperation Committee shall make recommendations in line with the intention of the overview and that relate to the overview's curriculum and providers, and shall evaluate

and make recommendations for improvements to the program.

Section 2. Orientation

The State and the Union recognize the benefit from providing Caregivers access to information that covers a variety of topics which are intended to provide assistance to all Caregivers in navigating their role as a Caregiver.

A. Minnesota Home Care Orientation Trust Operations and Financing

The Minnesota Home Care Orientation Trust, hereinafter referred to as the "Orientation Trust," will be responsible for the administration and operation of the orientation program in accordance with the terms of its Trust Agreement and policies. The State agrees to provide \$500,000 per year to the Orientation Trust for providing orientation to Caregivers, which includes contracting for orientation-related work.

Effective July 1, 2025, the State agrees to provide one-time funding of \$1,500,000 to the Orientation Trust for providing orientation-related work.

The State also agrees to provide one-time funding of \$3,000,000 effective July 1, 2025 for stipends for Caregivers who complete designated, voluntary orientation session available through or recommended by the Orientation Trust.

B. Orientation Committee

The Orientation Committee, which is distinct from the State Provider Cooperation Committee, shall consist of no more than four (4) DHS-designated representatives and no more than four (4) Union representatives, unless mutually agreed to by the parties. Those on the Orientation Committee shall have a role in providing information and/or recommendations to the Orientation Trust on orientation topics.

The parties understand that the Orientation Committee is not intended to replace or substitute for the work of other councils, task forces, or other entities established by DHS to issue recommendations on home and community-based services policy. The establishment and role of the Orientation Committee does not modify the management rights reserved to the State in this agreement. The Orientation Committee shall abide by the State's standards for contracting and paying qualified individuals, incorporating stakeholder input, communications, instructional design, and accessibility. Orientation Committee meetings shall not be considered or used as a bargaining forum, or to make any specific amendments to the Agreement, nor shall they be considered or used as a substitute for the grievance procedure.

C. <u>Contributions by Committee Union Members</u> Those committee members not regularly employed at half-time or more hours by the Union or employed by the State shall be eligible to enter into a contract with the State, not to exceed five thousand (\$5,000.00) dollars per member per state fiscal year (July 1 – June 30), for completing contractually defined deliverables on behalf of the Committee.

D. Orientation Program

All new Caregivers should be invited to complete the voluntary orientation session.

The Caregiver may choose to complete the orientation session in one of the following formats: virtual-live or in-person.

Caregivers who complete virtual-live or in-person orientation shall receive a one-time stipend of \$100 for completing orientation.

The State and the Union agree these topics provide a general knowledge base for all Caregivers and will be covered in an orientation session. At the Orientation Trust's discretion, additional topics may be added or existing topics may be removed:

- Program system overview (support services structure, employment structure)
- Mandated reporting
- Emergencies
- Where to obtain information regarding client's disabilities
- Learning about client
- Independent living basics

- Cultural responsiveness
- Access to available trainings

The Union shall be provided thirty (30) minutes of time at virtual-live or in-person orientation for a Union representative to orient Caregivers to collective bargaining and the provisions of this contract.

The Minnesota Home Care Orientation Trust will determine how to reach all Caregivers to encourage attendance at an orientation session.

ARTICLE 13. ACCESS TO VACCINATION INFORMATION

The State will make information about access to free or low cost vaccinations available to all Caregivers through online overview materials; and posting the information on the DHS web site; and sharing the information with Fiscal Intermediaries and asking them to share it with affiliated Caregivers.

ARTICLE 14. UNION RIGHTS

Section 1. Dues Check-Off.

The Department of Human Services, hereinafter referred to as "DHS," shall require Fiscal Intermediaries to implement all the terms of dues-checkoff authorizations submitted by the Union and agreed to by the Caregiver, including terms regarding the duration, renewal,

procedure for revocation, amount of dues deducted, and all other provisions agreed to by the employee as stated in the authorization, upon receipt of proper authorizations for such deductions from the Union subject to all applicable laws.

The Union shall provide the Fiscal Intermediary with a notice listing all Caregivers who have submitted proper authorization for dues deductions and the rate at which dues shall be deducted. A list of any and all additional Caregivers who have submitted proper authorization shall be transmitted electronically from the Union to the Fiscal Intermediary at least ten (10) days prior to the beginning of the payroll period for which the deductions must be effective. The dues of all Caregivers who have submitted proper authorizations shall be electronically remitted, together with an itemized statement, to the Union within ten (10) days after such deductions are taken

Upon implementation of CFSS, the dues remittance shall be accompanied by a list of members and amounts deducted, in a sortable electronic file transmitted to the Union via secure file upload or email on the same day the dues is remitted. The file shall list the following information for each member:

- A. Pay period in which the dues were deducted
- B. Unique Minnesota Provider Identification (UMPI) number
- C. First Name

- D. Last Name
- E. Address
- F. City
- G. State
- H. Zip Code
- I. Total gross pay in the pay period
- J. Amount of dues deducted
- K. Amount of additional voluntary dues deducted, if any

Within PCA Choice, the amounts to be deducted may be deducted each payroll period, but shall be deducted no less frequently than once per month. Within CDCS, CSG, and CFSS, dues shall be deducted each payroll period. Caregiver earnings must be sufficient after required federal and state deductions are made to cover the amount of dues certified by the Union. When a Caregiver is in non-pay status for a full pay period, no dues payment will be withheld for that pay period.

Section 2. Caregiver List.

The State will provide Fiscal Intermediaries with a template in a sortable, electronic format with the fields labeled and columns arranged in the order below. The State shall require the Fiscal Intermediaries who provide PCA Choice, CSG, CFSS, and CDCS services to provide to the Union on a pay period basis, in a sortable electronic format, the following information on Caregivers:

- 1. Unique Minnesota Provider ID number;
- 2. Full name, with separate fields for first and last names;

- 3. Full home address, with separate fields for address, city, state, and zip code;
- 4. Telephone number;
- 5. Hire date;
- 6. Termination date (if any);
- 7. Hours paid in the previous pay period;
- 8. Hourly wage rate (or rates, if providing services to multiple recipients);
- 9. Gross pay in the previous pay period;
- 10. PTO accrued in the previous pay period;
- 11. PTO used in the previous pay period;
- 12. PTO account balance;
- 13. Union membership status;
- 14. Amount of dues deducted in the previous pay period;
- Fiscal Intermediary name and mailing address;
 and
- Any other Caregiver information in accordance with state law.

The State shall require the Fiscal Intermediaries who provide PCA Choice, CSG, CFSS, and CDCS services to denote those Caregivers who began providing services during the previous pay period with the same information and in the same format as the others described above. The State shall also require the Fiscal Intermediaries who provide PCA Choice, CSG, CFSS and CDCS services to send to the Union each pay period a list of Caregivers who were terminated during the pay period.

The State shall provide to the Union, on a monthly basis, a list of all Fiscal Intermediaries eligible to provide PCA Choice, CDCS, CSG, and CFSS services (budget model only), along with the telephone number, mailing address, and email address, if documented in their enrollment record with Minnesota Health Care Programs, for those Fiscal Intermediaries.

The State and the Union shall cooperate to address any discrepancies or questions about information and records pertaining to the bargaining unit.

Section 3. Bulletin Boards and Intermediary Offices.

Upon implementation of the Community First Services and Supports (CFSS) program, the Union shall have access to post information on bulletin boards in the offices of Fiscal Intermediaries and reasonable access to the intermediaries' offices at times when Caregivers are likely to be there in groups.

Section 4. Union Materials.

DHS shall require the Fiscal Intermediary to distribute to Caregivers Union membership applications and Union orientation materials in either written or electronic format by email, whichever is mutually agreed upon by the Fiscal Intermediary and the Union. Within CDCS, CSG, and CFSS, DHS shall require the Fiscal Intermediary to distribute to Caregivers Union membership applications and Union orientation materials within the first month of the Caregiver's paid employment. It shall be the Union's responsibility to provide the Fiscal Intermediary with any

updated Union applications and orientation materials as well as sufficient copies for distribution (if provided in written format). The Fiscal Intermediary should direct any requests for materials in alternative formats to the Union. The materials shall not be partisan or defamatory in nature, and shall be subject to prior review and approval by the State.

Section 5. Website.

DHS will maintain a link on the PCA and CFSS Caregiver overview webpage to the Union's website.

Section 6. Union Representatives.

The State shall recognize and deal with official Union advocates and staff representatives on matters within the scope of the Union's representational role. The Union shall advise DHS of the names, email addresses, and phone numbers of official Union advocates and representatives within thirty (30) days of appointment by the Union and include the nature, scope and authority granted each by the Union.

Section 7. Copies of Notices to Fiscal Intermediaries.

The State shall provide to the Union a copy of any notices, direction, or other official communication relating to operational and programmatic functions sent by DHS to Fiscal Intermediaries. When DHS sends notices, direction, or other official communication to Fiscal Intermediaries on terms and conditions covered by the collective bargaining agreement, DHS will provide these to the Union before they are sent out; this

provision shall not be subject to the grievance procedure. The Union may request to include Union materials in the information sent to Fiscal Intermediaries on a periodic basis, as mutually agreed, provided that the Union must cover any additional costs incurred due to inclusion of its communications materials and subject to prior review and approval of those materials by the State.

Section 8. Indemnity.

The Union agrees to indemnify and hold the State, its agents, officers and employees harmless against any and all claims, suits, orders, or judgments brought or issued against the State as a result of any action taken or not taken as a result of a request of the Union under the provisions of this Article.

The Union also agrees to indemnify and hold Fiscal Intermediaries harmless against any and all claims, suits, orders, or judgments brought or issued against them as a result of any action taken or not taken as a result of a request of the Union under the provisions of this Article. The indemnity language in this section shall not prevent the Union from filing a grievance to enforce the provisions of this Article.

ARTICLE 15. MANAGEMENT RIGHTS

Except to the extent modified by this Agreement, the State reserves exclusively all inherent rights and authority to manage and operate its programs, including but not limited to:

- A. To establish missions, programs, objectives, activities and priorities.
- B. To manage, direct and control all of the agency's activities to implement programs.
- C. To develop, modify and administer policies, procedures, rules and regulations and determine the methods and means by which programs are to be carried out.
- D. To make and execute contracts and all other instruments necessary or convenient for the performance of the State's duties or exercise of the State's powers, including contracts with public and private agencies, organizations or corporations and individuals to pay them for services rendered or furnished.
- E. To modify any and all operations in order to more efficiently and effectively provide services as a result of any existing and/or new laws, rules and regulatory provisions of state and/or federal origin which may in any way affect the State's ability to provide services.

All rights not specifically granted in this Agreement are reserved solely to the State. The exercise or non-exercise of rights retained by the State shall not be construed to mean that any right is waived.

The State shall not be liable for any action, including but not limited to any grievance or any Unfair Labor Practice

proceeding, brought by the Union or any Caregiver based upon any alleged wrongdoing by a Participant.

ARTICLE 16. FISCAL INTERMEDIARY ROLES AND RESPONSIBILITIES

The State and the Union recognize the importance of Fiscal Intermediaries as essential partners in providing high quality services on which people participating in self-directed services rely. Although Fiscal Intermediaries are not a party to this Agreement, the State and the Union recognize the importance of working in partnership with Fiscal Intermediaries to effectively execute the terms and conditions of this Agreement. The parties agree to collaborate and communicate in good faith with Fiscal Intermediaries to ensure the principles of respect, courtesy and dignity apply to those partnerships.

The State recognizes the importance of the provision of timely and accurate payments to Caregivers. Agreements between DHS and Fiscal Intermediaries shall require the following:

- a. Timely and accurate payment of compensation to Caregivers.
- b. Information required by Article 14, Section 2 (Caregiver Information), reported regularly and timely to the State.
- c. Timely and accurate payroll deductions for dues check-off as provided by this Agreement and

- Minnesota Statutes Section 256B.0711, Subd. 4(h).
- d. Timely written notification to all affected Caregivers of any change in hourly wage, PTO accrual rate, or contract holidays.

The State and the Union shall work together to identify concerns and develop solutions to other provider payment issues.

When payroll errors are brought to the attention of the Fiscal Intermediary and the Fiscal Intermediary has confirmed an error, or an arbitrator has confirmed a payroll error pursuant to Article 8, the Fiscal Intermediary shall be required to correct the error.

When the Union becomes aware of State action related to a Fiscal Intermediary's enrollment or payment status with the State, through communication from the State, the Union agrees not to share this information.

Upon implementation of CFSS, the State shall require that all Fiscal Intermediaries make available to all Caregivers an electronic pay stub and the option to receive their paycheck by direct deposit.

ARTICLE 17. DURATION

The provisions of this Agreement shall be implemented by the Commissioner of Management and Budget on the 1st of July, 2025, and shall remain in full force and effect through the 30th of June, 2027, except for terms and conditions requiring appropriations, changes to state law, or approval from the federal government which shall be contingent upon and executed following receipt of appropriations and state and federal approval and as described in Article 20. Economic provisions of this Agreement requiring appropriations, changes to state law, or approval from the federal government shall become effective on the 1st of July, 2025 unless otherwise described in this Agreement and shall remain in full force and effect through the 30th of June, 2027. This Agreement shall be automatically renewed from biennium to biennium thereafter unless either party shall notify the other in writing no later than September 1st of even-numbered years that it desires to modify the Agreement.

This Agreement shall remain in full force and effect during the period of negotiations and until notice of termination of this Agreement is provided to the other party in the manner set forth in the following paragraph.

In the event that a Successor Agreement has not been agreed upon by an expiration date of this Agreement as provided for in paragraphs 1 or 2 above, either party may terminate this Agreement by the serving of written notice upon the other party not less than ten (10) calendar days prior to the desired termination date which shall not be before the expiration date provided above.

ARTICLE 18. SEVERABILITY

Should any part of this Agreement or any provisions contained herein be determined to be contrary to law in a final decision by a court of competent jurisdiction, such invalidation of a part or provision shall not invalidate the remaining portions hereof and they shall remain in full force and effect. In such event, upon the request of either party, the parties shall meet promptly and negotiate regarding substitute provisions for those provisions rendered or declared unlawful, invalid or unenforceable.

ARTICLE 19. COMPLETE AGREEMENT

This Agreement is the full and complete Agreement between the Union and the State. The parties acknowledge that during the negotiations which resulted in this Agreement, each had the unlimited right and opportunity to make requests and proposals with respect to any subject matter not removed by law from collective bargaining, and that the complete understandings and agreements arrived at by the parties after the exercise of that right and opportunity are set forth in this Agreement. The State and the Union, for the life of this Agreement, each waives the right, and each agrees that the other shall not be obligated to bargain with respect to any subject or matter referred to or covered in this Agreement. The parties may mutually agree, in writing, to correct misspelled words, mathematical errors, and other clerical errors in this Agreement.

ARTICLE 20. APPROPRIATION

Consistent with state law, the economic provisions contained in this Agreement shall be subject to the

FOR THE UNION

Docusioned by: Reachel Bendickson Family Caregiver, Mankato	EDUCYTEMP 2455. A Family and Community Caregiver, St. Paul
Docustigned by: EDITATE CORP. EST. Starlisha Doby Paid Parent, St. Paul	Rebecca knorr Family Caregiver, Hawley
Doors flux Flyns Doors Flyns Retired Family Caregiver and Union Executive Board Member, Roseville	Decessioned by: LAYSM BESSIGN SHANAFE. Gail LAYSM BESSIGN SHANAFE. Gail LAYSON Family and Community Caregiver, Bloomington
Signed by: Induce C Husek Andrea Hanek Family Caregiver and Union Executive Board Member, Duluth	Michael Nowling Client and Former Family Caregiver, Minneapolis
Docusioned by: DEFENDABLE ACTUAL DIFFERONMENT ACTUAL Jeremy Heyer Client, Rochester	Community Caregiver and Union Trustee, Fridley
Processioned by Transposed La Tanya Hughes Family and Community Caregiver and Union Vice President, Minneapolis	Jacin La Salin Jacin Casalin Jacin Casalin Jacin Casalin Family Caregiver, North Branch
Signed by: Plullip (Typu	No.080c88c28446. Tyler Frank Lead Negotiator and Union Internal Organizer Minneapolis

FOR THE STATE

Erin Camphull Erin Camphull Erin Campbell Commissioner of Minnesota Management & Budget
Junifur Linjur Jennifer Ziegler Enterprise Director of Labor Relations Minnesota Management & Budget
Signed by: Clask: Claffic
Doublighed by Imanufa Johnson Amanda Onnson Labor Relations Consultant 4 Minnesota Management & Budget
Docusigned by: Elizabellu L Blomberg

Minnesota Management & Budget

APPENDIX A

Re: Electronic Visit Verification (EVV)

Dear Tyler,

As discussed in our negotiations related to the Department of Human Services' (DHS) implementation of federally mandated electronic visit verification (EVV), the parties share interest in ensuring the following areas are considered when implementing EVV:

- DHS's obligation under 45 CFR 80.3(b)(2) which requires DHS to provide meaningful access to people with limited English proficiency.
- If an Individual Provider is part of the Safe at Home Program, an Individual Provider will have an alternative option regarding location services reporting.
- DHS will continue to seek options to reduce the burden for live-in caregivers relating to EVV requirements.
- DHS will continue to work towards the incorporation of self-direction into EVV implementation including the functionality for data entered by an Individual Provider to be reviewed and approved by the person self-directing their services.

In an effort to continue conversation and share updates regarding EVV implementation, the parties agree to engage in quarterly and ad hoc Meet & Confer meetings with the intention of having just-in-time meetings as EVV implementation is underway. This also includes meeting and conferring as DHS develops policies regarding live-in

caregivers and Safe At Home Program Participants with support from Safe At Home program representative(s). At the time of EVV implementation, the parties agree to meet monthly for the first three (3) months post-EVV implementation. These conversations and updates may also take place within the framework of existing Meet & Confer meetings.

Regards,

Exploring Tiered Wage Structure (Letter)

January 6, 2023

TO: Tyler Frank, SEIU, Internal Organizer SEIU Healthcare Minnesota & Iowa 345 Randolph Avenue, Suite 100 Saint Paul, MN 55102

Dear Tyler,

As discussed in our 2023 – 2025 contract negotiations, the parties agree to engage in discussions with the State Provider Cooperation Committee (SPCC) regarding future criteria in the tiered wage structure. This includes, but is not limited to, consideration of completion of orientation as well as the experience, education, and specialized skills of Individual Providers.

The parties will work toward the inclusion of orientation completion as a factor for placement on the tiered wage structure.

DHS will provide a written update in August 2024 regarding the progress toward inclusion of the orientation completion as a factor for placement on the tiered wage structure.

Regards,

Retention Incentive (Letter)

January 11, 2025

TO: Tyler Frank, SEIU Internal Organizer SEIU Healthcare Minnesota & Iowa 345 Randolph Avenue, Suite 100 Saint Paul, MN 55102

Dear Tyler,

As discussed in our 2025 – 2027 contract negotiations, the parties agree to a stipend payment during the contract period to workers who meet at least six (6) months of service. This stipend is in recognition of our shared interest in retaining caregivers in this profession while the parties explore healthcare options for Caregivers through the single issue facilitation process. This stipend is intended to provide an incentive for workers to continue service and to defray health insurance costs bargaining unit members may be incurring. The details are outlined below.

Funding

The State agrees to provide one-time funding of \$30,000,000 for a stipend of \$1200 to Caregivers each fiscal year covered by the collective bargaining agreement.

Eligibility Requirements

- The Caregiver must have been a member of the bargaining unit for at least six (6) months at the time they submit their request for the stipend.
- To receive the stipend, the Caregiver must be a current bargaining unit member at the time of payment.

Process

 Upon notice from the Minnesota Department of Human Services that the stipend processing system is ready to process requests, Caregivers who meet eligibility requirements must submit a request for the stipend no later than May 31st of each fiscal year.

Payments

 Stipend payments shall be made by June 30th of each fiscal year, or until funds appropriated for this agreement are no longer available, whichever is earlier. Funds appropriated for this agreement may be exhausted in the first fiscal year. Any Caregiver not paid the stipend at the time the funds appropriated for this agreement are no longer available will not be entitled to the stipend payment.

Regards,

Single Issue Facilitation - Healthcare (Letter)

January 11, 2025

TO: Tyler Frank, SEIU Internal Organizer SEIU Healthcare Minnesota & Iowa 345 Randolph Avenue, Suite 100 Saint Paul, MN 55102

Re: Single Issue Facilitation - Healthcare

Dear Tyler,

As discussed in our 2025 – 2027 contract negotiations, the parties agree to the following:

The State and the Union each are committed to participating in single issue facilitation for two days in fall 2026 with facilitation from the Minnesota Bureau of Mediation Services. The single issue facilitation session will take place prior to the 2027 – 2029 contract negotiations. The parties anticipate using the process to explore healthcare options for Caregivers. Both parties are committed to the process, but recognize the process may not identify a viable solution.

Regards,

MNsure Information Session(s) (Letter)

January 10, 2025

TO: Tyler Frank, SEIU Internal Organizer SEIU Healthcare Minnesota & Iowa 345 Randolph Avenue, Suite 100 Saint Paul, MN 55102

Re: MNsure Information Session(s)

Dear Tyler,

As discussed in our 2025-2027 negotiations, the State is committed to working with MNsure to provide information sessions regarding health insurance options through MNsure for Caregivers.

Regards,

Matching Registry (Letter)

January 10, 2025

TO: Tyler Frank, SEIU Internal Organizer SEIU Healthcare Minnesota & Iowa 345 Randolph Avenue, Suite 100 Saint Paul, MN 55102

Re: Matching Registry

Dear Tyler,

As discussed in our 2025-2027 negotiations, the parties have a shared interest in improving access to and choice among prospective caregivers for participants and for caregivers to access their desired number of work hours and in identifying another system to replace the current matching registry.

The Department of Human Services agrees to engage in a Request for Proposal (RFP) process to seek a system/vendor for a matching registry which will provide \$475,000 in FY26 and \$990,000 in FY27. The Department of Human Services agrees to include two (2) Union representatives to be part of the RFP process, which includes involvement in writing RFP requirements.

Regards,

Training Registration and Stipend Application (Letter)

January 10, 2025

TO: Tyler Frank, SEIU Internal Organizer SEIU Healthcare Minnesota & Iowa 345 Randolph Avenue, Suite 100 Saint Paul, MN 55102

Re: Training Registration and Stipend Application

Dear Tyler,

As discussed in our 2025-2027 negotiations, the Department of Human Services agrees to engage the State Provider Cooperation Committee in identifying requirements in the Request for Proposal (RFP) process for the vendor to administer training registration and stipends.

Regards,

Electronic Visit Verification Update (Letter)

January 10, 2025

TO: Tyler Frank, SEIU Internal Organizer SEIU Healthcare Minnesota & Iowa 345 Randolph Avenue, Suite 100 Saint Paul, MN 55102

Re: Electronic Visit Verification (EVV) Update

Dear Tyler,

As discussed in our 2025 -2027 negotiations, and in an effort to continue conversation and share updates regarding federally mandated electronic visit verification (EVV), the parties agree to engage in quarterly and ad hoc Meet & Confer meetings with the intention of having justin-time meetings on EVV. This also includes meeting and conferring regarding live-in caregivers and Safe at Home Program Participants with support from Safe at Home program representative(s).

Regards,

Tracking Hours Worked for Caregivers in CDCS (Letter)

January 10, 2025

TO: Tyler Frank, SEIU Internal Organizer SEIU Healthcare Minnesota & Iowa 345 Randolph Avenue, Suite 100 Saint Paul, MN 55102

Re: Tracking Hours Worked for Caregivers in CDCS

Dear Tyler,

As discussed in our 2025-2027 negotiations, the parties have a shared interest in gathering information from FMS Providers regarding the number of hours Caregivers in CDCS provide services.

Effective January 1, 2027, contingent on legislative funding, the Department of Human Services shall begin collecting data, through claims, from FMS Providers on the number of hours worked by Caregivers in CDCS by UMPI number. In the interim, the Department of Human Services will work with SEIU to review FMS spreadsheet data on the number of hours worked by Caregivers in CDCS dating back to 2017.

Regards,

State Requests to FMS Providers (Letter)

January 11, 2025

TO: Tyler Frank, SEIU Internal Organizer SEIU Healthcare Minnesota & Iowa 345 Randolph Avenue, Suite 100 Saint Paul, MN 55102

Re: State Requests to FMS Providers

Dear Tyler,

As discussed in our 2025-2027 negotiations, the Department of Human Services agrees to make the following requests to FMS providers no later than July 30, 2025:

- FMS providers inform Caregivers of their option to waive PTO no later than thirty (30) days before the start of the Participant's next service plan year.
- FMS providers inform Caregivers of the maximum allowed annual PTO rollover no later than May 1 of each year.
- FMS providers add the Caregivers UMPI number to the Caregiver's pay stub.

Regards,

MEMBER ACTION CENTER

THE RESOURCE FOR ALL YOUR UNION QUESTIONS!

651-294-8100 • 800-828-0206 • 651-294-8200 (fax) • mac@seiuhcmn.org

Our Member Action Center (MAC) is a central place for all members to call for information on our contracts, facilities, and union events, as well as advice on problems at work or to file a grievance. Our MAC is available Monday-Friday from 9am-5pm and has dedicated organizers who provide consistent, accurate advice and support to members across our union.



COPE: HOLD POLITICIANS ACCOUNTABLE

A VOICE FOR ALL WORKERS

THOUSANDS OF MEMBERS VOLUNTEER TO GIVE TO OUR COPE FUND.

OUR RIGHT

Corporate interest

OUR RIGHTS AT WORK

Corporate interests want low wages and use the law to undermine our voice by eliminating the right to collectively bargain, therefore making it harder to join together, and taking away our voice on the job. SEIU COPE works to elect politicians who will defend our voice and make it easier for others to join us.

•

A VOICE IN HEALTHCARE

Politicians control half of all the money spent on healthcare. When they make decisions about Medicare, Medicaid and health insurance, we need a seat at the table. SEIU makes sure that our elected leaders listen to workers, not just industry officials.



LIFTING ALL WORKERS

Union members cannot raise our workplace standards if other workers keep falling behind. We're fighting for a higher minimum wage, paid family leave, and stronger protections against harassment at work. Politicians set these legal standards—we must work hard to elect ones who support workers.

GET INVOLVED



POLITICAL LEADER

Political leaders are members who are actively involved in achieving our union's political goals to be the strongest voice for health in the State by electing candidates and holding them accountable to our members, winning legislative victories including a strong home care contract, advocating increased funding for long-term care, and aligning with other groups building political power for working people who decide who governs our state.



HOME CARE ACTIVIST

Home Care Activist meetings are a great place to stay informed on any changes in our State programs, connect with other Caregivers and Clients, and get involved in our work to improve care in Minnesota. Find our next meeting on our calendar or webpage and join us!



EXECUTIVE BOARD

The officers of SEIU Healthcare Minnesota & lowa work together to provide leadership and direction for our union. The President, along with the Executive Vice Presidents, act to the best of their abilities to further the purposes and objectives of the union. They are elected by the membership of our union, in elections that take place once every three years.

The Executive Board is comprised of SEIU Healthcare Minnesota members from all across the state, who meet quarterly, together with the officers, to direct the union and make plans to maintain a strong membership.



MEMBER CONVENTION

The SEIU Healthcare Minnesota & Iowa Member Convention is held annually in September. We invite you to join with fellow members as we spend the day celebrating our victories and setting the course for the coming year. Members plan and shape the events of the day and the goals we set over the next year.

STAY CONNECTED

STAY CONNECTED WITH SEIU HEALTHCARE MINNESOTA & IOWA

You can find our contract and other resources online, as well as up-to-date information about the activities of our Union and how you can get involved in shaping the future of working families.





VISIT OUR HOME CARE WEBPAGE TO ACCESS:

seiuhcmnia.org/home-care



- Steps to claim your \$1,200 Healthcare stipend
- Instructions to sign up for free training and claim your \$750 training stipend Up to date Home Care developments
- Contact information for your organizers





@seiuhcmnia





seiumb.com





youtube.com/ seiuhcmnia





member.seiuhcmn.org





HOME CARE CALENDAR





HOME CARE MEMBER CHAT

WhatsApp group



REMEMBERING



DAMON LEIVESTAD

1973 - 2024

Damon Leivestad (1973-2024) was a very active leader of the Union bargaining team during the first few weeks of negotiations of this contract, right up until his sudden death on October 24, 2024. Damon sent multiple detailed messages to the other members of the Union team about the finer points of bargaining proposals just hours before he died.

Several specific provisions of this contract come directly from ideas Damon brought into the bargaining process and from proposals he drafted. That was true of the two prior home care contracts as well, as this was the third consecutive round of negotiations Damon participated in as a home care client and advocate.

Damon's leadership, intelligence, sense of humor, and passion for worker justice had a powerful impact on every participant in those three rounds of negotiations, from both the Union and the State of Minnesota.

We were all very fortunate that he chose to serve as a leader in this process, and his leadership and friendship will be sorely missed by everyone involved in the months and years to come.

Back Cover Art:
"Invisible No More"
by Ricardo Levins Morales
https://www.rlmartstudio.com/

