Rideshare firms may leave metro on May 1

Transportation network companies Uber and Lyft could end service in Minneapolis and beyond May 1, if a dispute over pay cannot be resolved. That is causing consternation for Twin Cities area residents with disabilities who rely on rideshare services. Many are wondering how they will get to work and school, and to other destinations.

The Minneapolis City Council set the controversy in motion in March by passing an ordinance requiring rideshare companies to pay drivers at least $6.40 per mile and 45 cents per minute on rides to, from and through the city. The increase would start May 1.

Lyft officials said they would end service in Minneapolis. Uber would drop service in Minneapolis and surrounding communities, and at Minneapolis/St. Paul International Airport.

Mayor Jacob Frey vetoed the ordinance. The veto was then overturned by the council, in what is called an override vote. As Access Press went to press, there was a proposal to reconsider the vote slated for April 1.

State officials have jumped into the fray, noting that the council voted before a state report on rideshare was released. That report recommends rideshare wages of 49 cents per minute and 85 cents per mile.

Gov. Tim Walz also has called for a compromise that at events in late March, he expressed skepticism about the ability to find a compromise. He has called out the debate as playing chicken with people with disabilities.

Metropolitan Council, which oversees Metro Transit and the Metro Mobility paratransit service, is also watching the situation closely.

As of late March state lawmakers were considering what if anything they could do. House Republicans want to preempt the rule. They have started efforts like the one in Minneapolis, and in other cities.

The conflict comes on the heels of a proposal to reconsider the vote slated for April 1.

Some bills clearing initial hurdles at capitol; others wait

With the first bill deadline in the rearview mirror, Minnesota disability advocates are pushing forward on bills that are still viable this session.

It’s been a mixed bag thus far as some bills didn’t meet a key March 22 deadline. It’s also still a time to tread lightly when it comes to funding requests. The most recent financial forecast indicates improvement since November 2023, with the 2024-25 biennium projected to end with a surplus of $1.73 billion. That is an increase of $1.324 billion compared to previous projections.

Advocates are being counseled to consider amendments to existing bills if their proposals didn’t meet the March deadline, or to lay groundwork for 2025.

Large rallies

Rallies have attracted large crowds, with a third large group expected March 27 for Disability Advocacy Day. Mental Health Day on the Hill drew more than 300 people March 7. More than 1,500 packed the rotunda for Disability Services Day March 19.

Rallies not only provide a show of support for bills, they also provide time for advocates to meet with state lawmakers.
Changing COVID-19 guidelines could become problematic

COVID-19 is very different from other viruses. Cases can be asymptomatic. That creates risk of transmission before a person becomes ill. COVID-19 is much more easily transmitted than some other respiratory ailments.

The guidelines state that individuals who are sick should stay home and away from other people. That hasn’t changed. What has changed is that the recommended five-day isolation period is gone if certain conditions are present. If someone has been free of fever and without symptoms for at least 24 hours, that person doesn’t have to quarantine. There are caveats, of course. The CDC urges people to continue to limit contact with others, mask up, test and avoid indoor spaces if possible for the next five days.

If symptoms come on again, it’s time to restart the clock. CDC leadership has promoted the change as providing more clarity. No at Access Press would agree with that aspect of this change.

The pandemic has gone on for so long. Attitudes about self-care and safety have changed. This kind of a reset and change can provide needed guidance.

In four years we have seen much more access to treatments and prevention strategies. We are also seeing fewer hospitalizations and deaths from respiratory illnesses including COVID-19.

But we also see red flags in media comments by health professionals who believe that the latest CDC change represents an oversimplification. COVID-19 is very different from other viruses. Cases can be asymptomatic. That creates risk of transmission before a person becomes ill. COVID-19 is much more easily transmitted than some other respiratory ailments.

We also very much appreciate that this concerns, especially for people with disabilities and their allies. Our colleagues at the news website Disability Scoop did a fine job of outlining concerns focused on this change. There’s a growing sense in parts of our community that the guideline changes don’t serve us well and put us at risk.

Among groups raising red flags are the Association of People with Disabilities (AAPD) and the Autism Self-Advocacy Network. Leaders contend that the new isolation guidelines are problematic. One statistic cited is that in February 2024, about 20,000 people were being hospitalized with COVID each week.

And we certainly agree that people with intellectual disabilities were just as likely as others to get COVID-19, and had more than a 2.5-4 times higher risk of dying in the first two waves of the pandemic. We appreciate that the CDC in its announcement acknowledged that risk but for people with disabilities and their loved ones, that kind of statement can ring hollow.

A helpful piece of advice from AAPD is that people should seek reasonable accommodations as needed – at work, home, school and in the community. Our suggestion is for employers of all types to expand their paid time off policies to help their employees stay home while sick and recovering.

The key to all of this is vaccination, vaccination, vaccination. The CDC indicates that those of those hospitalized for COVID-19, more than 95 percent had not been vaccinated. Only about one in five eligible people in our country have gotten their vaccines this winter.

And that, quite frankly, strikes us as problematic. If we’re dealing with a disease that will not go away. Why will people not take steps to protect their health and the health of others is quite simply, astounding.

The Minnesotan magazine served readers with visual disabilities

The closing of Volunteer Braille Services and suspension of services by BLIND, Inc. represent changes for Minnesotans with visual disabilities. The Minnesotan, a monthly magazine for Minnesotans with blindness community, and founder Frank Jordan, are part of that history of change.

In 1924 the first monthly magazine in Braille was published in Minneapolis. News accounts noted that the publication was to provide an open forum for Minnesotans blind community. It was believed that the publication was the first of its kind in the United States.

The publication was produced by the Minnesota Council of Agencies for the Blind. The council was based at the Minneapolis Society for the Blind.

“Current events in the state, achievements and humorous paragraphs are included in the raised pages of the magazine,” said a March 30, 1925 Minnesotan journal article. Other magazine goals were to provide information about services available through the state, other public and private agencies.

Minneapolis resident Frank Jordan chaired the magazine’s publication board. The board included community members and representatives from the state department for the blind and the state school for the blind at Faribault.

The magazine was free to readers. Its first two issues were financed by the Minneapolis Kiwanis Club, a service organization. Copies were printed in Braille, at a printing plant outside of Minnesota. Some copies were set and printed for readers who didn’t use Braille.

One feature was radio programs “to emphasize the enjoyment the blind may derive from the radio.” The publication offered a key for readers to translate. At the time, some people with visual disabilities were using the New York Point System. Like Braille, it is a tactile system. It was invented by William Bell Wait (1839–1916), a teacher at the New York Institute for the Education of the Blind. Wait advocated the New York System as more logical than either the American Braille or the English Braille alphabets. The three scripts competed in what was known as the War of the Dot. The New York System continued for several more issues. It was a project championed by the energetic Frank Jordan, a man who had been blind since childhood.

Born near Hinckley, Jordan faced a fight due to an illness at age three. His obstinacy note that Jordan was determined to support himself. He first sold newspapers on a downtown Minneapolis street corner.

He got a job with the Minneapolis Society for the Blind in 1920, teaching rug weaving to others who had lost their sight. He became head weaver at the society’s Victor shops on Nicollet Avenue. The shops became a national model of disability employment.

Jordan soon immersed himself in work on the Governor’s Council on Developmental Disabilities. He was appointed to a state commission in 1921, and was one of the people instrumental in creating a state department for the blind in 1923. It initially administered pensions to blind people and supervised work training programs.

He married Deise Smith and bought a house on Washburn Avenue.

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The History Note is a monthly column produced in cooperation with the Minnesota Governor’s Council on Developmental Disabilities. Past History Notes and other disability history may be found at www.mndcg.org

Editorial: Editorial submissions and news releases on topics of interest to persons with disabilities, or persons serving those with disabilities, are welcomed. We reserve the right to edit all submissions. Editorial material and advertising do not necessarily reflect the views of Minnesotan Reader of Access Press.

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Peter D. "Pete" Feigal had an unswerving dedication to mental health advocacy and the need to treat mental health and physical health as equal and linked issues. He was remembered in March at a memorial service in St. Paul, after his death February 23. He was 66 years old.

Feigal was a longtime disability advocate as well as a writer and an artist. He was well known for his award-winning, detailed military artwork.

His life story was one of hardship and perseverance, as recalled in 2008 when he was given the Access Press Charlie Smith Award. The award is presented for outstanding service to Minnesotans with disabilities.

Feigal gave more than 1,600 talks on mental health. He was a founding director for the, “Access Press, Tilling at Windmills.” But he was also the name of the theater group he founded.

Who called for everyone to build on the many presidencies of the National Alliance for the Mentally Ill (NAMI) Minnesota. He was also active in People Inc. programs.

Sue Abderholden, executive director of NAMI Minnesota, said: “Pete was an incredible advocate for our mental health movement. He traveled the state sharing his story of living with bipolar disorder which he had titled ‘How Harley Davidson Saved My Life.”

Moving ahead – or not?

One key bill Walz signed into law in 2023 was sweeping on school resource officers and use of force. This is seen as resolving disagreements that started after the 2022 session, and resulted in many law enforcement agencies pulling their officers out of schools.

At issue was use of prone restraint. The new changes allow officers to use the measure but with significant safeguards. Staff are banned from doing so. Improved training and creation of a model policy are also part of the new law. Law enforcement and community groups are expected to weigh in policy development. The Peace Officer Standards and Training Board, Board, will adopt the final version of the model policy and training protocol.

Other bills are still in the riding foray in the wings. One flash point has been efforts on subminimum wage, which as of late March has stalled in the Senate. The bill has a chance to be adopted in the Senate. A sharply divided reaction, with advocates and labor unions calling it an equity measure. Foes contend it will take away opportunities for some people with disabilities.

For other updates on bills, check with specific advocacy organizations on their lists. One of the most comprehensive lists is on Minnesota Council on Disability’s website, at https://www.disability.state.mn.us/about-our-public-policy/bill-tracker/

Budget, targets out

The Walz administration released a one-page supplemental budget proposal as this issue of the paper went to press. The House and Senate released budget targets. The documents determine how much money the various finance committees have to spend before the 2024-25 fiscal year and the following year.

It’s a big change from the $2 billion state bond that was passed in 2013, with a similar amount to support schools that are operating. Last session the per-mile rate was $1.30 to $1.43 per mile. For Minnesta transportation companies saw their first reimbursement on subminimum wage, which as of late March

The budget and targets don’t leave a lot of room for new spending, which disappoints many advocacy groups. Some departmental targets are for cuts to programs that help with a chair, the rate increased from $2.50 to $2.75. But that is seen as inadequate.

Walz also has proposed a $98 million bonding. The budget totals about $4.47 million over the span of 2024-25. The budget and targets don’t leave a lot of room for new spending, which disappoints many advocacy groups. Some departmental targets are for cuts to programs that help with a chair, the rate increased from $2.50 to $2.75. But that is seen as inadequate.

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"he made us believe that it was like for people with mental illness and other disabilities. His message of hope, determination, opportunity and possibility encouraged others to tell their stories.

Feigal is survived by a sister and her family, and special friends Tim Willey, Mike Lunde, Chris Dietz, Aliden Drew and Kris Hecker. Memories preferred to NAMI Minnesota or People Incorporated.

Peter D. "Pete" Feigal

Me From the Insane Asylum. Pete did make people laugh, but he also provided people with hope. He courageously shared his story at a time when people were "anonymous."

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Continuous Medicaid eligibility supports healthy families, communities

From the This is Medicaid coalition, Mid-Minnesota Legal Aid

When Minnesotans get the health care they need, they can live their lives fully, in the communities they choose, and contribute to building their futures. Minnesota has a strong history of investing in health care, and can continue to make the state’s health care system more equitable so that it works for everyone, regardless of income, disability, race, ethnicity, or gender.

Churn disrupts care. Medicaid churn happens when people unexpectedly dropped from Medical Assistance (MA) due to processes and paperwork problems or small changes in living situations, only to re-enroll months later. It is a chronic problem that causes costly disruptions to care for Minnesotans and the providers and state agencies that serve them. During the COVID pandemic, Minnesota counties had to expand 2017 federal requirements to keep people enrolled during the public health emergency, thereby reducing the chances for disruptions in coverage.

Since the end of the public health emergency, states have begun to re-determine eligibility ("unwinding"). and are seeing a return to churn and a costly spike in the number of Minnesotans losing care and coverage. This discretion is being done to fulfill state mandates outlined in the federal program, meaning the person was not determined ineligible, they just may not have received the renewal notice or been able to complete the process, and likely do not have another source of coverage. This is a national and a local problem, and while Minnesota DHS is taking many steps to mitigate coverage loss during this moment of transition, we need long term solutions to prevent the disruptive, wasteful cycle of churn.

Minnesota needs continuous MA eligibility for adults to provide stability and security for enrollees and health care providers, to reap the full benefits of continuous eligibility for children by keeping parents covered, and to learn and improve from the eligibility review framework.

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Medical aid in dying has become a personal issue as his disability progresses

by Tom Albin

For nine years, Minnesotans have pleaded with their lawmakers to end the belief that ill adults the option of medical aid in dying. Last year, this topic became personal for me, so I joined the fight.

For more than two years I’ve been living with ALS, a fatal disease that causes progressive muscular weakness. ALS attacks the nerves in my brain and spinal cord causing severe weakness. I have the “bulbar” form which first affects my swallowing, speech and breathing, then my limbs.

My voice is strained and hoarse, and I can’t speak fast or loudly anymore. If I’m at a party, I’m not able to engage in the conversation as much as I want. I love to joke around, so that’s tough for me. The disconnect in speaking is hard and it’s going to get worse. Eating, too, is difficult and painful, and choking is common for me. Nevertheless, I’m very much enjoying life. I have ice cream every week. I watch and still play hockey. I love listening to music and talking walks in nature. I meet up with friends often for a meal, coffee, or a beer. I’ve been very blessed that my friends have stepped up so that I don’t feel alone, even though ALS is currently a very isolating disease.

I also know what lies ahead. Eventually, I will become weaker and weaker, become unable to walk, to feed myself, to dress myself, and will eventually be unable to breathe on my own (I already have one but can also eat real food when I have weeks of energy). I don’t know if or when I will decline but when that begins to happen, I want to be able to die on my terms, in as little pain as possible.

I’ve been following the End-of-Life Options Act since I received my diagnosis, attending nearly every legislative hearing. What I’ve learned is that the bill authors have responded to feedback and made improvements that protect vulnerable individuals. For example, the bill emphasizes that disability or advanced age alone do not qualify a person for the option of medical aid in dying. The individual must have a terminal diagnosis with a six month or less prognosis, the accepted standard for hospice care. The individual must also be capable of giving informed consent for their own healthcare which eliminates people with developmental or cognitive limitations like dementia.

The bill requires that oral and written requests be made only by the terminally ill person themselves and in compliance with ADA guidelines. Requests for medical aid in dying may not be made by a surrogate decision-maker, including a guardian, conservator or other healthcare proxy. Or by a family member. The bill prohibits insurers, including public and private insurers, from denying or altering healthcare benefits or services just because medical aid in dying is a legal option. It also creates strong penalties for coercion, which is an attempt to force or prevent someone from choosing medical aid in dying. I am living with a disability which is going to progress. Until then, I’m living my life fully and benefiting from the many protections disability rights advocates have fought for. But I am capable of making my own decisions about how I treat my disease. The time will come when my death is imminent, that’s when I will want the option to leave this life on my own terms.

We have a daughter who lives in Washington, where medical aid in dying is available, but my wife and I don’t want to leave Minnesota. It’s been our home for 35 years. It’s where we’ve built our community and social support, and it’s where my medical team is. It doesn’t make sense to have to leave my home just to have some say in the last stretch of my life. Minnesota lawmakers, rightly, have made bodily autonomy a priority by protecting reproductive and gender-affirming medical care. The right to make decisions about our own bodies should apply at the end of life, too. Tom Albin is a resident of Minneapolis.

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Access Press welcomes submissions for the People and Places Pages. Questions? Call 651-644-2133 or email access@accesspress.org

We may be accepting applications for our large number of mobility impaired accessible units. Please call us for more information.
Four years in, Access Press shares our community pandemic stories

By Jane McClure

Four years in, I think about the friends and family members we lost. I think about the friends I seldom if ever see in person because they are still striving to keep themselves or their loved ones safe.

How do you measure four years? In mid-March 2020, our lives were forever changed by the sweeping global pandemic of COVID-19. The worry leading up to the mass shutdown was palpable. That was especially true for those of us who live with disabilities. Oddly, it reminded me of growing up in rural Iowa and preparing for incoming blizzards. In those pre-high tech forecasting days, we often didn’t know how much snow we’d get. If the snow would blow and drift, and whether or not we’d lose power. We didn’t know how long we’d be cooped up. As the pandemic threat materialized, I made myself some masks and tried to keep safe distance at a time when any work had me in close contact with many people. We were in the midst of Minnesota’s 2020 legislative session. Access Press was housed in the offices at Capitol Ridge. That meant near-constant contact with people in elevators and common areas. Our last big disability rally day of the 2020 session was Mental Health Day on the Hill. Fewer allies were present as the 2020 session was postponed during the pandemic. It was then housed in the tiny school gym for our polio vaccines, I remember obediently lining up in a state of isolation, our lives became more challenging. The lockdown added to our loneliness.

Some of us lost the all-important day activity centers, as the shutdown became permanent in some cases. Others lost members of our direct support staff and personal care teams. Family members sometimes picked up the slack. Too many of us spent even more time alone, without proper care. How many died due to lack of proper care? We likely will never know. COVID-19 on top of the ongoing personal care crisis was just too much.

Four years in, COVID-19 is still with us despite the best efforts to promote vaccinations. As someone old enough to remember obediently lining up in a tiny school gym for my polio vaccines, I cannot imagine why people are still so opposed to staying safe.

After more than a year, I still do not have fibromyalgia for many years and it can be very disabling. It has led to bouts with depression. My name is Claudia. I’m 70 and am retired from a career with the state. I have had other health issues, including cancer. I had one surgery repeatedly postponed during the pandemic. It was hard for me emotionally. I have had fibromyalgia for many years and it can be very disabling. It has led to bouts with depression. 

"Zealous" is a good word to describe how I’ve taken care of myself with hand sanitizer, wearing masks, and social distancing. I’ve had two bouts with COVID-19. One was mild. The other had me down for the count for almost two weeks. I was tired for another couple of weeks after that.

What affected me the most was losing my senses of smell and taste. After more than a year I still do not have either one back in full. With encouragement from my doctor, I’ve taken part in research studies. It’s been quite the learning experience! I learned that people can lose their sense of smell for different reasons - a head injury, infections, aging, polyps or growths in the nasal passages. COVID-19 is not the only cause. But COVID-19 has drawn our attention to the loss of these senses. Not being able to smell foods meant that meals and snacks tasted bland for me. Some foods typically like didn’t taste good at all.

I enjoy gardening and working outdoors. You don’t know how much I really missed those smells of fresh earth and new plants and blooming flowers. Heck, I even missed the smells of new clothes and grease and all else that comes back. It takes time, through research and links to other resources. We hope you find the stories and links informative. How do you measure four years?

As of March 20, 2024. Source: Woldometer
A busy young man lost his work and was bored and unhappy

Craig lives with intellectual disabilities. He is 22 and has finished school in the St. Paul Public Schools. He makes his home with his parents in St. Paul. His older brother and sisters are working or in college. His parents both work outside of the home.

Craig was sick for more than two months of the COVID-19 pandemic. It was very hard for all of them. Craig was bored and unhappy, with very little to do. It was difficult for him to see family members being active and out in the community.

But like many people with his type of disability, Craig is immunocompromised. He could not risk getting sick. One worry Craig’s family had was whether he would remember to wear a face mask while out in public. They also worried about people being in close contact with him.

Children with respiratory illnesses must be vigilant against the virus

Children with respiratory illnesses must be vigilant against the virus

Elise is 12 and in seventh grade in Minneapolis Public Schools. She lives with her mother, stepfather and two siblings. Her father, stepmother and stepbrother are also family members she spends time with.

One worry Craig’s family had was whether he would remember to wear a face mask while out in public. They also worried about people being in close contact with him.

Elise likes science and English classes. She and her family have pet dogs and cats to dote on. She loves Taylor Swift, and enjoys drawing and beading.

Elise said children and teens should get vaccinated. But like many people with his type of disability, Craig is immunocompromised. He could not risk getting sick.

Take your best shot!

Learn more about vaccines and how to talk to your kids. Talk about the importance of getting vaccinated. Discuss which vaccine is best for your child. Take the time to explore what kind of vaccine might be best for your child. And make sure to get your child vaccinated.


The Center for Community Solutions released a study in mid-2023 indicating that people with intellectual and development disabilities are three times more likely to die of COVID-19, compared with patients without such disabilities.

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**MY COVID STORY: LUCY**

My name is Lucy. I work in communications. I also have an active side business making and selling jewelry and knitted items. I volunteer with my children’s schools, our church and a few community groups. My family and I live in Eagan. I’m 53 years old.

My family and I have been attentive about keeping up on our vaccines and boosters to combat COVID-19. My husband had a mild bout with COVID-19. He recovered and is back at work but has had to cut back on his volunteer activities and work at colleges and universities near his new home.

My arthritis has been affected because of COVID-19. I am now using an inhaler for breathing problems. I miss all of those things.

I am back at work but have had to cut back on my volunteer activities and make squeaking noises. My lungs hurt so much. All I could some days was make squeaking noises.

Lung inflammation and its many complications can linger over time.

**MY COVID STORY: GARY**

Gary is a retired university professor, with a distinguished career teaching English. An academic award is given in his name at a school where he taught for many years. He recently downsized and moved to be closer to family and friends in the Upper Midwest.

Gary’s retirement plans included travel, gardening and work at colleges and universities near his new home. He looked forward to filling in for staff sabbaticals and as a part-time adjunct professor of English. That all changed with COVID-19.

Gary lives with several disabilities including MS. He also has a compromised immune system. He has been faithful about keeping up with vaccines for COVID-19 and other conditions that affect people in their 70s and older. He masks up in public and takes other steps to not become ill.

But Gary was unable to ward off COVID-19, and has had a few bouts of it ever since. He has struggled with Long COVID effects. Those struggles have caused setbacks in his ongoing efforts to stay healthy.

A bout of COVID-19 in early autumn has led to another round of weeks of fatigue, brain fog, flu-like symptoms and a couple of falls for Gary. He is using a walker again.

“I just got so tired,” he said. He had enjoyed walking around the condo complex where he lives, and visiting a nearby park. “Now I have days when I can barely get from one end of my condo to another. Making dinner can wear me out.”


At one point Gary lost his sense of smell and his sense of taste. Another worry for Gary is that because he lives in a smaller community, it has been a challenge to find services and supports. He has limited personal care attendant help. He relies on Meals on Wheels more often than he would like. “I miss cooking,” he said.

Gary’s greatest fear is that despite his taking precautions, he could wind up with Long COVID issues for the rest of his life. “I know that not everyone who has Long COVID recovers fully and that really is scary for me. It’s not how I planned to spend my retirement.”

From Access Press: Symptoms of Long COVID can include shortness of breath, extreme fatigue, headaches, dizziness, brain fog and memory issues. Symptoms may last for months or years, affecting mental health, quality of life and financial stability.

Long COVID can include shortness of breath, extreme fatigue, headaches, dizziness, brain fog and memory issues. Symptoms may last for months or years, affecting mental health, quality of life and financial stability.

My arthritis has been affected because I am not as physically active. I was in an aerobics class that disbanded during the pandemic and I have not found a substitute.

The big worry for me is worrying about Long COVID issues for the rest of his life. “I know that not everyone who has Long COVID recovers fully and that really is scary for me. It’s not how I planned to spend my retirement.”

From Access Press: Symptoms of Long COVID can include shortness of breath, extreme fatigue, headaches, dizziness, brain fog and memory issues. Symptoms may last for months or years, affecting mental health, quality of life and financial stability.

Long COVID and post-COVID conditions can be considered a disability under the Americans with Disabilities Act (ADA) in certain cases. Some people with Long COVID have mild to moderate symptoms that gradually get better after several months. Others may have more severe symptoms and face challenges returning to work, school, family life, exercise and other activities that help them to thrive. A subset of people will have very severe symptoms that leave them newly disabled by Long COVID. It isn’t yet known yet if these effects will be permanent.

The Minnesota Department of Health (MDH) works with the first state health departments in the country to have a program and staff dedicated to Long COVID and post COVID conditions. Read more at https://www.health.state.mn.us/diseases/longcovid/index.html

**STAY SAFE IN MINNESOTA**

**What is happening in Minnesota with COVID-19?**

**How many cases are in my home county?**

**What are the latest variants?**

Learn more at www.health.state.mn.us/diseases/coronavirus/stats/index.html
ACCESS PRESS

APRIL 2024    Volume 35, Number 4

WORK WITH YOUR CARE PROVIDER TO STAY HEALTHY

PROTECT YOURSELF

VACCINES ARE YOUR BEST PROTECTION AGAINST BEING SICK

KEEPING YOUR VACCINES UPDATED IS A MUST IF YOU LIVE WITH DISABILITIES!

EMPHASIZE TO YOUR CARE PROVIDER THAT WORKERS NEED TO HAVE THEIR VACCINES UPDATED TOO.

FAMILY MEMBERS AND CAREGIVERS MUST DO SO, TOO.

PREPARE

PLAN WHAT YOU WILL DO IF YOU OR YOUR DIRECT PROVIDER GETS SICK.

CREATE A CONTACT LIST OF FAMILY, FRIENDS, NEIGHBORS AND LOCAL SERVICES AGENCIES THAT CAN PROVIDE SUPPORT.

URGE HELPERS TO BE VACCINATED AND DIRECT THEM TO VACCINE RESOURCES.

PLAN AT LEAST TWO WAYS OF COMMUNICATING FROM HOME AND WORK THAT CAN BE USED IN AN EMERGENCY.

HAVE ENOUGH HOUSEHOLD ITEMS AND GROCERIES YOU WILL NEED FOR A FEW WEEKS, AT LEAST 30 DAY SUPPLY OF MEDICINES AND ANY MEDICAL EQUIPMENT OR SUPPLIES.

FOR MORE INFO, PLEASE VISIT
www.cdc.gov/coronavirus/2019-ncov/vaccines/stay-up-to-date.html
www.cdc.gov/handwashing/when-how-handwashing.html

Source: Centers for Disease Control and Prevention.
MEDICAL SUPPLIES/EQUIPMENT

Handi Medical Supply
V-651-644-9770 ayana.soria@handimedical.com www.handimedical.com

HME Medical Shop
V- 800-258-6313 customerservice@hmemedicalshop.com www.hmemedicalshop.com

National Alliance on Mental Illness (NAMI)
V-651-645-2948 namihelps@namimn.org www.namimn.org

Reach for Resources
V-952-200-3030 info@reachforresources.org www.reachforresources.org

MENTAL HEALTH

Avivo
V-612-752-8000 contact@avivomn.org www.avivomn.org

ACCORD
V-612-362-4400 info@accord.org www.accord.org

BrightPath
V-651-462-2380 services@brightpath-mn.com www.brightpath-mn.com

Fraser
V- 612-861-1688 fraser@fraser.org www.fraser.org

National Alliance on Mental Illness (NAMI)
V-651-645-2948 namihelps@namimn.org www.namimn.org

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V-952-200-3030 info@reachforresources.org www.reachforresources.org

RECREATION

PAI
V-651-846-9274 mduffy@paimn.org www.paimn.org

BrightPath
V-651-462-2380 services@brightpath-mn.com www.brightpath-mn.com

Fraser
V- 612-861-1688 fraser@fraser.org www.fraser.org

RECREATION-ADAPTIVE RECREATION - HOBBIES

Lake Harriet YC - Adaptive Sailing
V-928-264-2069 pawavin@gmail.com https://lhycsailing.com/adaptive

Reach for Resources
V-952-200-3030 info@reachforresources.org www.reachforresources.org

RECREATION-HOBBIES/CLUBS/SOCIAL GROUPS

Reach for Resources
V-952-200-3030 info@reachforresources.org www.reachforresources.org

RECREATION - MOVIES/PERFORMING ARTS/SPECTATOR

Young Dance
V-612-423-3064 info@youngdance.org www.youngdance.org

RECREATION-TRAVEL/CAMPING

Hammer Travel
V-1-877-345- info@hammertravel.org https://hammertravel.org/

Wilderness Inquiry
V-612-676-9400 info@wildernessinquiry.org www.wildernessinquiry.org

RESIDENTIAL/GROUP HOME PROGRAMS

BrightPath
V-651-462-2380 services@brightpath-mn.com www.brightpath-mn.com

Opportunity Partners
V-952-938-5511 info@opportunities.org www.opportunities.org

SERVICE ANIMALS

Can Do Canines
V-763-331-3000 marketing@candocanines.org www.candocanines.org

Helping Paws
V- 952-988-9359 info@helpingpaws.org www.helpingpaws.org

Pawsitive Perspectives Assistance Dogs (PawPADs)
V-612-643-6671 info@pawpads.org www.PawPADS.org

SKILLED NURSING FACILITIES

ACCORD
V-612-362-4400 info@accord.org www.accord.org

MSS
V-651-778-1000 info@mssmn.org www.mssmn.org

SOCIAL SERVICES

MSS
V-651-778-1000 info@mssmn.org www.mssmn.org

SUPPORTS - OTHER TYPES

BrightPath
V-651-462-2380 services@brightpath-mn.com www.brightpath-mn.com

Phoenix Alternatives, Inc. (PAI)
V-612-861-9274 mduffy@paimn.org www.paimn.org

VISION IMPAIRMENT

Minnesota Commission of the Deaf, V-651-431-5961 mncdh.info@state.mn.us www.mn.gov/deaf-commission

WAIVER CASE MANAGEMENT

ACCORD
V-612-362-4400 info@accord.org www.accord.org

Advocating Change Together
V-651-641-0297 act@selfadvocacy.org www.selfadvocacy.org

Reach for Resources
V-952-200-3030 info@reachforresources.org www.reachforresources.org

Want to be in the spotlight?
Access Press offers advertiser spotlights!
It’s a great way for an advertiser to prepare copy, which photos, and tell readers about themselves.
It’s also a great way to highlight a special month focused on a specific disability or topic.
Spotlights include a page 1 banner and a page 3 article.
Don’t delay! Reserve your 2024 spotlight today!
Email for more details: ads@accesspress.org

Be part of our Access Press Directory 651-644-2133 ads@accesspress.org

Next edition: July 2024
The expiration of the continuous enrollment contract allowed the district to phase out
Coronavirus Response Act (FCCRA) was a very
significant health coverage transition event.
States were required to extend the eligibility of nearly all Medicaid enrollees during the
Coronavirus coverage continues in Minnesota access
create a global pandemic and
maintained minimum access standards under
the state. It also allowed the state to receive billions in additional federal funding under the Families
First Coronavirus Response Act, which
federal stimulus package passed by Congress.
These federal funds were used during the public health emergency to help keep many school
services, make COVID-19 testing and treatment accessible at no cost to Minnesotans, and help
support the direct care workforce, however
condition on March 31, 2020, meant that
states had up to 12 months to return to normal eligibility and enrollment operations.
Minnesotans with recurring performance
guaranteed Minnesota Department of Human Services (DHS). Roughly 280,000 Minnesotans were
in the December and March renewal groups and
needed their eligibility reviewed by February
15, 2021, and 170,000 of those enrollees, or 67 percent, remained eligible, based on the
latest data released by DHS.
Those numbers are about 90,000 Minnesotans, or 7 percent, ineligible for Medical Assistance or
Minnesotans, care, with some qualifying
importantly supply the payer mix that we
serve here in Robbinsdale,” Trevor Sawallish, North Memorial chief executive. “And it’s reaching a critical point.
The share of enrollees covered by
platforms that make social media platforms safe
for children to navigate the internet, and
resulted in suicidal ideation, self-harm and
and by association, to share stories about how
social media has created a
website for Minnesota parents
unsafe situation for children in the garden.
A community gathering space and create an
project is rejected by Hennepin County transportation
planners. Planners said the garden is the best
disability access to the Whittier neighborhood
rail trail. The project was seen as a way to increase
engagement. The project has
a $1.1 million federal grant that hangs in the balance of the project budget in
state. But gardeners will not be tilling the soil
at Soo Line at all this year. Just before the March
2023 closing sent facility users and members
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Blazing Cats, Hawks with titles in Minnesota 2024 state adapted hockey tournaments


The defending champs from Braeview went home with the third place trophy this year, topping the Rochester Raiders, 7-4.

Travis Blanchard scored three goals and added three assists for the Braeview Warriors. Junior forward Andrew Westerman struck twice for the Raiders.

The Maple Grove Crimson defeated the Minneapolis St. Paul Tigers, 1-0, for the consultation crown. Freshman forward Ben Piefer led Maple Grove, scoring six of the team’s nine goals.

Other teams in the PI tournament were the St. Paul Humboldt Hawks and South Suburban Jets.

Full tournament team members are Baha, William Warder and Cayden Needham, Dakota United, Nick Johnson, Jayda Johnson and Jose Leon Estrada, Robbinsdale/Hopkins/Mound Westonka, Blakenhury and Aiden Olson, Braeview, Westerman and Cooper Morrissey, Rochester, Jorge Rosas-Bravo, Minneapolis South, Evan Bartlett, Maple Grove.

Coming up next are the spring tournaments, including adapted bowling and softball in May, with track and field wrapping up the year’s activities in June.

Merz wins inaugural award

Natasha Merz, Assistant Commissioner of Aging and Disability Services at the Minnesota Department of Human Services, is the inaugural recipient of the Jim Wolford Community Impact Award. The award is presented by Lifeworks Services, Inc.

The award honors the memory of Jim Wolford, founder and owner of local IT firm, and 2024 Lifeworks Annual Celebration presenters. Wolford’s family selected Natasha who has significantly advanced disability inclusion through advocacy, policy, employment, or fundraising, and who lives into Wolford's mission.

It was a first time Mankato that qualified for the state tournament.

Senior forward Alec Singh netted six goals and Dix Woods paced the Knights with four goals and one assist.

It’s an honor to carry on Jim’s legacy through this award. He was a pillar in our community, and tirelessly advanced disability inclusion through his support of the Lifeworks mission,” said Gertrude Matesma-Mutua, Lifework’s president and CEO. “Natasha’s the type of changemaker Jim encouraged all of us to be — one who challenges deficiencies and inequities within the system while keeping all Minnesotans and their needs at the forefront of decision-making.”

Lifeworks’ mission is to partner with people with disabilities to drive change by increasing opportunity and access in the community.

Travel program reopens

True Friends has announced the return of its True Friends Travel program, which returns this spring with trips starting in April. True Friends is a nonprofit program providing life-changing experiences that enhance independence and self-esteem for children and adults with disabilities. True Friends programs include camp, respite, retreats, team building, therapy and adaptive riding, and Travel, serving more than 25,000 individuals yearly.

True Friends Travel had shut down due to the COVID-19 pandemic.

True Friends Travel offers vacations to a variety of destinations for adults with disabilities. Trips are fully accessible and planned to meet the needs of each guest.

More than 20 trips will be offered this year in Minnesota and throughout the United States, with destinations that include Walt Disney World, Wisconsin Dolrs, Twin Cities Arts and Theatre, a Lades Spa Weekend, and many more.

Staff are highly trained to meet a variety of needs so travelers can focus on fun, adventure, and creating lifelong memories on their vacation. To learn more about the program and register for upcoming trips, visit www.truefriends.org/travel.

Handi Medical Supply

Special education officials across the state are finding interest in tracking outcomes in general. They also suggested that families are keeping children with disabilities home over health concerns.

The individual with Disabilities in Education Act, the law that guarantees disabled children rights, requires districts to identify children who need supports — a mandate that extends to tracking down missing pupils and investigating whether their disability factors into why they are not in school. If so — common reasons include an environment that is hostile or unsuitable for a child with sensory issues — the school must make appropriate accommodations.

(News Access Press)
All times listed are Central Standard Time.

Abhorrent V – violent content
R – racial epithets
L – strong language
S – sexual situation
G – gory descriptions

group of scientists to a series of revelations that challenge the notion of what it means to be human.

Read by Laura Young, 13 broadcasts; begins Wed, April 3.


A space-tech thriller where a group of pioneering astromechanics must overcome never-before-attempted engineering challenges to rescue colleagues stranded at a distant asteroid.

Read by Stuart Holland, 21 broadcasts; begins Mon, April 22.

RTB After Hours*

Monday – Friday 11 p.m.


A warrenheated, hilarious queer rom-com about what happens when a group of friends are actually brave enough to live the dream and give up their dreary city apartments to buy a house in the country together. Read by Dan Sadoff, 11 broadcasts; begins Mon, April 8 – L,

The Duchess Takes a Husband, fiction by Harper St. George, 2023. A scandalous arrangement between a London rogue and an American duchess leads to lavish stakes in this period romance. Read by Holly Sylvester, 11 broadcasts; begins Tue, April 23 – L, S

Weekend Program Books

Your Personal World, 1 p.m. Sat, presents Breaking the Age Code by Becs Levy, read by Jan Anderson; followed by Life is Hard by Kieran Setiya, read by Parsho Pundla.

For the Younger Set, 11 a.m. Sun, presents Fearless by Kristin F. Johnson, fiction by Chuck Hogan, 2022.


Read by Stuart Holland, 21 broadcasts; begins Mon, April 22.


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A space-tech thriller where a group of pioneering astromechanics must overcome never-before-attempted engineering challenges to rescue colleagues stranded at a distant asteroid.
The 2024 Lifeworks Annual Celebration is Thu, April 13 at the Depot, Mpls. The event is open to all Lifeworks community members and the public. Tickets can be purchased here. The gala celebrates the success and inclusion as the key that unlocks opportunities for people with disabilities that partner with Lifeworks, and will be emceed by A.J. Hilton of WCCO-TV and will feature stories of people with disabilities and other secondary ticket holders that partner with Lifeworks, and live and silent auctions. All proceeds of the evening directly benefit Lifeworks programs and services. Advanced ticket sales are more than 30% of the available tickets each year. Ticket information can be found here.

**Opportunities**

**Conferences**

**DSMn Rally Conference**
The annual Down Syndrome Association of Minnesota conference and retreat is Thu, April 20 at the Holiday Inn Express Marriott Northwest in Brooklyn Park. This conference is targeted toward individuals with Down syndrome and their families/caregivers. The self-advocate retreat is for individuals with Down syndrome in their 20s, 30s, and older. Conference keynote speakers are Brian Chicoine, MD & Kareem Neal. For information and registration: https://dsamn.org/events/save-the-date-statewide-learning-and-youth-conferences-2

**Spinal cord injury information**

Lifeworks presents a spinal cord injury awareness rally-workshop April 10 followed by the MN Neurorehabilitation Symposium April 11-12 at the University of Minnesota. The annual symposium is being held in conjunction with the Neurorehabilitation for Spinal Cord Injury conference. The symposium is for healthcare professionals, caregivers, parents, and SOCI to discuss challenges and opportunities in neurorehabilitation. There is a discount available for ID members and a caregiver, bringing the cost down to $50 per event. For information: neurorehab@umn.edu

**Children and families**

PACER workshops sampling

PACER workshop offers an opportunity to visit free or low-cost workshops and other resources for families of children with any disabilities. Some in-person workshops are offered at PACER Center, at Greater Minnesota locations and also offered online. Other workshops are online and livestreamed at this time. Advance registration is required for all workshops. At least 48 hours’ notice is needed for interpretation. Check PACER’s website and link to the newsletter for statewide workshops that will be offered. Effective Communication With the Individual with Education Program (IIP) Team is 4:30-6 p.m., Wed, April 3. The workshop focuses on 10 communication tips for parents and teachers. It will allow participants to learn more about effective communication and assist their child at IEP team meetings. The presentation will be followed by a Q&A segment. Resolving Disputes Through the Special Education Process is 4:30-6 p.m., Wed, April 21, online. This workshop is a detailed review of options Minnesota parents have in the special education process to resolve disagreements with the school. The presentation will be followed by a Q&A segment. Getting Help for Children and Youth With Mental Health Needs is Noon to 1 p.m. Mon, April 24. Online. Navigating school, home and community supports and services for children and youth with mental health needs can be a challenge. Learn more about the support and services available, what to expect, and how to deal with the wait to access care.

**Classifieds**

Members of the community can post event details to the online calendar. View listing and create a calendar account at calendar.mnaccess.org. To receive a free monthly events calendar, send your updates to events-general@mnaccess.org

**Info & Assistance**

Many classes available

NAMI Minnesota (National Alliance on Mental Illness) has set up a wide variety of free and in-person online mental health classes. Choices include Hope for Recovery, Transitioning, Ending the Silence, Understanding Early Episode Psychosis for Families, In Our Own Voice, Family Support, and more. Positive Psychology, Creating Caring Communities, smoking cessation, a suicide prevention class called GPR – Question, Persuade and Refer, a Special QPR class for Agricultural Communities and many more. NAMI Minnesota’s Online Support Groups moved to a new and improved platform that is called Heykey which provides a safe, easy to access environment exclusively designed for online support groups.

The classes and online support groups are designed for family members and caregivers of individuals with mental illness, service providers, and also the general public. Find a complete listing of these classes and how to join in by going to namin.org and clicking on “Classes” or go straight to https://namin.org/education/public-awareness/classes/scheduled/
**TRAVEL WITH TRUE FRIENDS!**

More than 20 destinations in 2024, including:
- Country Jam USA
- Magic of Disney
- Ultimate NASCAR
- Wisconsin Dells
- Tanque Verde Ranch
- Royal Caribbean Cruise
- And many more!

Check out our Travel Catalog to plan your adventure: [www.truefriends.org/travel](http://www.truefriends.org/travel)

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**Accessible, Affordable Housing**

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