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UNITED STATES DISTRICT COURT

DISTRICT OF MINNESOTA

FOURTH DIVISION

Patricia Welsch, et al.,

Plaintiffs,

v.

Arthur E. Noot, et al.,

Defendants.

Paragraph 95(g) HEARING

No. 4-72 Civil 451

Following a careful review of the entire record in this matter, I herewith adopt in total the Findings of Fact, Conclusions and Recommendations submitted on May 21, 1981 by Frank J. Madden, Hearing Officer, regarding the above matter.

Respectfully submitted,

Lyle D. Wray

Lyle Wray, Ph.D.
Monitor

Dated this 21st day of May, 1981

UNITED STATES DISTRICT COURT

DISTRICT OF MINNESOTA

FOURTH DIVISION

Patricia Welsch, et al.,

Plaintiffs,

v.

Arthur E. Noot, et al.,

Defendants.

Paragraph 95(g) HEARING

FINDINGS OF FACT AND RECOMMENDATIONS

No. 4072 Civil 451

A compliance hearing was held on March 13, 1981 pursuant to paragraph 95(g) of the Welsch v. Noot Consent Decree. Frank J. Madden was appointed hearing officer by Court Monitor Lyle Wray pursuant to paragraph 95(g) of the Consent Decree. Dr. Wray was in attendance at the hearing.

Luther A. Granquist, 222 Grain Exchange Building, 323 Fourth Avenue South, Minneapolis, Minnesota appeared as counsel on behalf of the Plaintiffs, and P. Kenneth Kohnstamm, Special Assistant Attorney General, 515 Transportation Building, St. Paul, Minnesota appeared on behalf of the Defendants. The defendant Department of Finance made an appearance by its attorney Michael Miles, Attorney General's Office.

STATEMENT OF ISSUES

The issues for determination are as follows:

1. Does the reduction of the GS salary account constitute a reduction in the MR salary account and the MR staff allocation in violation of paragraphs 37 and 39 of the Consent Decree?

2. Has the Defendant failed to make legislative proposals which eliminate the financial incentive to counties to place mentally retarded persons in state hospitals in violation of paragraph 89(f) of the Consent Decree?

3. Has the Defendant failed to make legislative proposals regarding the need for additional capacity and community based residential facilities and development achievement centers (DAC's), including the development of additional bed capacity and DAC capacity necessary to accommodate former residents of state institutions and the funding mechanism for DAC programs, transportation, and building renovation necessary to serve former residents of state institutions in violation of [illegible] of the Consent Decree?

for community DAC services.

7. Pursuant to paragraph 89(b) the Commissioner has proposed funding for 100 additional DAC bed capacity and an increase of $350,950 in CSSA funding. (Exhibit 12).

DISCUSSION, CONCLUSIONS AND RECOMMENDATIONS

Discussion

A. Budget Reduction Issue

The Plaintiffs assert that the reduction in the GS salary account made in the fall of 1980 is tantamount to a reduction in positions. This contention is based on the premise, adopted in the January 30, 1981, Findings of Fact and Recommendations made by the Cambridge Monitor, that "there is clearly a correlation between allocation of funding and allocated positions. If there is a reduction in one component, there will likely be a reduction in the other." In alleging a violation of the Consent Decree the Plaintiffs do not allege that no reduction may be made in the GS salary account, but rather that a reduction in the GS salary account may be made only if 45% of the amount by which that account is reduced is added to the MR salary account. In support of this position the Plaintiffs rely on paragraphs 36 through 40 of the Consent Decree. Specifically, paragraphs 37, 38 and 39 provide as follows:

> 37. For purposes of settlement, the parties agree that 2915.93 of these positions will be deemed to be serving mentally retarded individuals. There shall be no reduction in this staff allocation until such time as each state hospital has positions sufficient to meet all of the staffing requirements of paragraphs 46 through 55 of this Decree.
>
> 38. The parties also agree that 1556.52 positions will be deemed to be serving mentally ill and chemically dependent individuals. Nothing in this Decree governs the future use of these positions.
>
> 39. The remaining 1204.55 positions will be deemed to serve the needs of all three groups. If there is a reduction or reallocation of these positions, at least 45 percent of staff removed from these positions must be allocated to serve mentally retarded persons. (For example, if 100 of these positions are eliminated, at least 45 will be reallocated to serve mentally retarded individuals and will be added to the 2915.93 positions referred to in paragraph 37.) This process of reallocating at least 45 percent of these positions shall continue until such time as each state hospital has positions sufficient to meet all of the staffing requirements of paragraphs 46 through 55.

On the basis of these provisions the Plaintiffs contend that notwithstanding any directive issued by the Commissioner of Finance pursuant to Minn. Stat. §16A.15, subd. 1, which requires the Commissioner of Finance to reduce allocations to state agencies if the state revenue is less than needed to fund appropriations, the Commissioner of Public Welfare is precluded from reducing the GS and MR salary accounts pursuant to paragraph 103 of the Consent Decree which provides as follows:

> The defendant Commissioner and the defendant Chief Executive Officers must not comply with any executive or administrative order or directive which in any way interferes with or impedes compliance by them with all provisions of this Decree.

In light of this provision the Plaintiffs argue that the cost saving measures implemented by the state hospitals relative to holding staff vacancies open to generate salary savings is in violation of the Consent Decree. Specifically, there is no difference in effect between eliminating a position from the complement entirely and holding a position open to achieve salary savings since in both instances the number of complement positions has been reduced. Although the Decree does not prohibit the Defendants from effecting a reduction in the 1204.55 positions in the GS salary account, the Decree does require a reallocation to the MR salary account of 45% of any GS positions reduced or reallocated. In addition, since there is a correlation between allocation of funding and allocated positions, 45% of any salary savings achieved by not filling vacant GS positions must be reallocated to the MR salary account to increase the protected number of MR positions. Therefore, since the Defendants have intentionally maintained vacancies in the GS salary account in order to eliminate a projected deficit, (Exhibits 133 to 137), and since there has been no reallocation of 45% of the monies saved, the Defendants have violated the Consent Decree.

In response the Defendants argue that they have substantially complied with the Consent Decree since all monies appropriated by the state to the GS and MR salary accounts have been spent to fill and maintain the allocated number of positions. In addition, the Plaintiffs have not proven that there has beeen a diminution in the quality of direct patient care

4. The cost cutting measures relative to the GS and MR allocated positions included the following: Brainerd State Hospital established a plan to "phase-in" new positions because the "total appropriation was not sufficient to cover the cost of all positions," and in addition determined that $201,097 in workers' compensation and unemployment compensation costs were to be paid out of fiscal year 1981 salary monies (Exhibit 112); Faribault State Hospital prevented a budget deficit in its GS and MR salary accounts by generating salary savings through "the phase-in of human services personnel and the time required to recruit and fill professional positions" (Exhibit 113); Fergus Falls State Hospital reported that it did not project a deficit in the GS and MR salary accounts because it had maintained a sufficient number of vacancies open within the GS and MR accounts to eliminate the projected deficit (Exhibits 115 and 133); Moose Lake State Hospital reported that in order to eliminate its projected deficit it must maintain vacant positions (Exhibit 116); Rochester State Hospital, St. Peter State Hospital and Willmar State Hospital each determined that the projected budget deficit would be eliminated by holding positions open to achieve salary savings. (Exhibits 117, 119 and 122).

5. In response to these measures the Commissioner of the Department of Public Welfare issued a directive to the Chief Executive Officers of the state hospitals stating that they must proceed to fill vacancies as required by the Consent Decree and the Governor's Executive Order No. 81-2 dated March 2, 1981. (Exhibit 128). Subsequently, various state hospitals reported that they had ceased to delay filling vacant positions. (Exhibits 133 through 137).

C. Legislative Proposals

6. The Commissioner has submitted legislative proposals pursuant to paragraph 89(f) which would require counties to pay 4.4% of the costs of state hospital residential and day services for MA eligible persons and 4.4% of the costs in the community for an ICF/MR home. (Exhibits 6 and 15). The pro-

[illegible] provides that counties will pay approximately 45.3%

FINDINGS OF FACT

A. Background

1 On September 15, 1980, the United States District Court for the District of Minnesota approved a Consent Decree which had been agreed to by the parties after a Memorandum of Understanding stating basic principles to be incorporated into the Consent Decree had been agreed to on July 12, 1980. Pursuant to paragraph 95(g) of said Decree the court appointed Monitor is empowered to conduct, or retain a hearing officer to conduct, an evidentiary hearing regarding the question of compliance.

2. Paragraphs 36 through 39 of the Consent Decree set forth the staff requirements for state hospitals. Specifically, paragraph 37 provides that of the 5677 full-time equivalent positions allocated 2915.93 will be deemed to be serving mentally retarded individuals, and that there would be no reductions in this staff allocation until various staffing standards specified in paragraphs 46 through 55 had been met. Paragraph 39 provides that 1204.55 positions will be deemed to serve the needs of all three groups, namely, mentally retarded, mentally ill and chemically dependent persons. In addition, paragraph 39 provides that if there is a reduction or reallocation of the 1204.55 positions at least 45% of staff removed from these positions must be allocated to serve mentally retarded persons. These reallocated positions are to be added to the 2915.93 positions specified in paragraph 37, and the process of reallocation shall continue until various staffing standards specified in paragraphs 46 through 55 of the Decree have been met.

B. Budget Reduction

3. In the fall of 1980 the Department of Public Welfare reduced the MR salary account by $257,153 and the GS salary account by $133,012 to assist the state in meeting a projected $195 million deficit. As a result of these salary account reductions the various state hospitals began to project year end deficits and to implement cost cutting measures including holding staff vacancies open to generate salary savings.

as a result of the underfunded hospital salary accounts. More importantly, notwithstanding the Commissioner of Finance's directive to implement salary saving controls, the Commissioner of Public Welfare directed the Chief Executive Officers of the state hospitals to proceed to fill the positions protected by the Consent Decree in order to achieve compliance with the Decree. This directive was issued irrespective of the fact that it would result in the Department's inability to pay approximately $600,000 to $800,000 of its obligations for workers' compensation and unemployment compensation. (Exhibit 129). The Chief Executive Officers of the state hospitals acted in accordance with the Welfare Commissioner's directive and ceased to maintain positions vacant in order to generate salary savings. (Exhibits 133 through 137).

The Defendants further contend that read as a whole paragraphs 36 through 40 are intended to prevent the wholesale reduction of positions which provide care for the mentally retarded and cannot be construed to mean that a state budget reduction is equivalent to a reduction in the number of allocated positions. Specifically, the terms "reduction" and "reallocation" as used in paragraph 39 of the Decree refer to the intentional elimination of allocated positions resulting in a diminution of the quality of direct care provided to mentally retarded persons, and these terms simply are not applicable to the existing circumstances involving a substantial state budget deficit and necessary budget reductions. Finally, the Defendants assert that even assuming arguendo that the budget reduction in the fall of 1980 was tantamount to a reduction in the number of allocated positions, since the budget reduction has now been restored last fall's reduction cannot be the basis for claiming a violation of the Decree now. Once the Department has expended on patient care all the monies appropriated for such care it cannot be found to be in violation of the staffing requirements set forth in the Consent Decree.

B. Legislative Proposal Issues

Pursuant to paragraphs 89(b) and (f) the Commissioner

is required, as part of the Governor's 1981 budget recommendation, to submit for inclusion in the Governor's legislative budget proposals addressing the following:

> b. Need for additional capacity in community-based residential facilities and developmental achievement centers (DACs). The proposal will provide for the development of additional bed capacity and DAC capacity necessary to accommodate former residents of state institutions. The legislation shall address the funding mechanism for DAC programs, transportation, and building renovation necessary to serve former residents of state institutions.
>
> f. Financial incentives to place mentally retarded persons in state hospitals. The proposal will eliminate the financial incentives currently encouraging counties to place mentally retarded persons in state hospitals.

The Plaintiffs contend that based on the clear language of paragraph 89(f) the Commissioner has discharged his duties when he has proposed legislation which will eliminate the difference in the rate paid by a county for community services versus state hospital services. This interpretation of the phrase "financial incentives" is supported by the Department's own study which stated in pertinent part that "incentives are considered eliminated when the county agency pays for a day of residential service at the same rate (percentage) regardless of where those services are provided (i.e. in a state hospital or community-based setting)." (Exhibit 15).

In support of its position that the Defendants have failed to comply with paragraph 89(f), the Plaintiffs have focused on two specific areas of service: (1) the developmental achievement center services (DAC), and (2) residential services to children who are not eligible for medical assistance (MA). With respect to the DAC services, in fiscal year 1980 counties paid 0.0% for services which included both residential and day programs, but 4.44% for community ICF/MR services and 45.3% for community DAC services. (Exhibit 1, Table 1 and Exhibit 15, Table 1). Under the Commissioner's legislative proposal counties will pay 4.44% for an MA eligible resident of a state hospital for both residential and day program services, and 4.44% for residential services for an MA eligible person in an ICF/MR home and approximately 45% for a community DAC for day program services. (Exhibits 2, 3, 4, 5, 6, 7, 8 and 9). Testimony was

submitted by the Plaintiffs to the effect that this proposal would not substantially change the 45.3% currently paid by counties for DAC services, that certain counties are presently experiencing serious problems in providing sufficient DAC services and that due to the high rate counties must currently pay for DAC services, the counties are unable or unwilling to provide enough DAC services to allow additional individuals to be released from state hospitals.

Wth respect to residential services to non-MA eligible children, in fiscal year 1980 counties paid 0.0% for state hospital residential services and 30.39% of the cost for community-based residential services. The Plaintiffs submitted evidence that pursuant to the legislative proposals submitted by the Commissioner counties would pay 10% of the cost of residential services for a non-MA eligible child in a state hospital and 45% of the cost of residential services in a community group home, thereby increasing rather than eliminating the financial incentive for counties to place children in state hospitals. The Commissioner's proposals provide in part for the repealing of Minn. Stat. §252.27, the Cost of Care Program, and for the distributing of $8,002,000 currently used for the Cost of Care Program to the counties. The Plaintiff's objections to this proposal are based in part on the fact that it includes no requirement that the money be spent for residential services for handicapped children and therefore will result in further pressures on counties and families to rely upon the less costly option of state hospital placement for non-MA eligible children.

The Plaintiffs further contend that the Defendants have not complied with paragraph 89(b) of the Consent Decree and in particular have failed to provide for additional DAC capacity and have failed to address the funding mechanism for DAC programs, transportation and building renovation. With respect to the need for additional DAC capacity the Plaintiffs point out that by the Department's own projections there will be an increase of 200 DAC positions based on an assumption that 200 new public school graduates will require DAC services, yet

the Department has submitted a budget request for only 100 additional DAC positions. Moreover, the projected need for 200 additional DAC positions does not take into account the needs of current state hospital residents for DAC services. Therefore, the legislative proposal will undoubtedly delay release of state residents to DAC programs.

Finally, the Plaintiffs presented testimony in support of their position that the Commissioner has failed to submit legislative proposals addressing the "funding mechanism for DAC programs, transportation, and building renovation to serve former residents of state institutions." Specifically, although an additional $350,950 was added to the Community Social Services Act (CSSA) budget, this money was not earmarked for DAC services and there was no specific proposal to meet DAC transportation or building renovation costs. Therefore, the CSSA does not meet the requirements of paragraph 89(b) regarding funding mechanisms for DAC programs, transportation and building renovation.

Recognizing that there is a mathematical disparity between the county's 4.4% cost for hospital services and the county's 45% cost of community DAC costs, the Defendants argue that when viewed in the context of the full proposal there will be financial incentives to counties to deinstitutionalize. Specifically, the proposal in its entirety adds approximately $5.1 million to existing programs, and these additional monies will have a substantial influence in fostering placement in less restrictive programs. In addition, the Defendants emphasize that the Plaintiffs' own witnesses testified that historically the rate differential has not been an incentive for counties to place individuals in the state hospitals. Therefore, the Defendants assert that the Plaintiffs must show that the Department's legislative proposal creates new financial incentives to institutionalize individuals, a burden which the Plaintiffs have failed to satisfy.

With respect to distributing $8,002,000 currently used for the Cost of Care Program to the counties, the Defendants assert that the Plaintiffs contentions regarding the "folding

in" of these funds into the CSSA are wholly unfounded. Specifically, the legislative proposal targets certain groups, including the mentally retarded, for priority attention under CSSA. Therefore, the counties will not be free to spend these monies in other areas and the Plaintiffs' assertions that the "folding-in" of these monies will encourage counties to hospitalize medically needy, low functioning retarded persons is speculative and unsupported by evidence.

With respect to paragraph 89(b) the Defendants' contend that they have met the requirements set forth in the Consent Decree. Specifically, paragraph 89(b) requires only that the Commissioner "address" the funding mechanism for DAC programs, transportation and building renovation. These areas were addressed in H.F. 3, Sections 9 and 20. Therefore, the Commissioner has discharged his responsibilities in this regard, and the Plaintiffs cannot prevail on this issue merely because there is disagreement as to the substance of the legislative proposals.

Findings and Conclusions

On the basis of the findings of fact and a careful analysis of the evidence and testimony presented in the hearing, the Hearing Officer makes the following conclusions:

1. Paragraph 37 is clear in its requirement that a staff allocation of 2915.93 full-time equivalent positions must be maintained and that no reduction in this staff allocation may be made until all the staffing requirements of paragraphs 46 through 55 are met. In conjunction with these requirements, paragraph 39 provides that in the event there is a reduction in the 1204.55 positions allocated to the GS salary account, at least 45% of the staff removed must be reallocated to serve mentally retarded persons and this 45% reallocation must be added to the 2915.93 positions protected under paragraph 37. Thus, although paragraph 39 does not preclude the reduction of GS staff positions, it does require that at least 45% of the GS positions reduced be allocated to the MR account.

The Commissioner of Public Welfare is free to make budget reductions in accordance with the directives of the Gov-

ernor and the Commissioner of Finance provided such budget reductions do not "interfere" with or "impede" the steps necessary to achieve and maintain compliance with the Consent Decree. Thus, a budget reduction in the GS salary account does not in and of itself constitute a violation of paragraph 39 since, as discussed above, paragraph 39 does not preclude the Commissioner from making such budget reductions. However, to the extent that such budget cuts cause a reduction in the 1204.55 positions specified in paragraph 39, the Defendants have an affirmative duty to reallocate 45% of those positions reduced to the MR account, thereby adding to the 2915.93 positions protected under paragraph 37. The actions of the Department in the fall of 1980 in reducing the MR salary account by $257,153 without maintaining the specified number of allocated MR positions and in reducing the GS salary account without allocating to the MR account 45% of the positions adversely affected by the budget reduction indicates that the Defendants have violated paragraphs 37 and 39 of the Consent Decree. This conclusion is not unduly restrictive with respect to the budgetary process of the Department of Public Welfare, but rather merely enforces the agreement entered into by the Department pursuant to paragraphs 37, 39 and 103 of the Consent Decree.

2. The mere existence of a vacancy in an allocated position in either the MR or the GS salary account does not, without more, indicate a violation of the Consent Decree. Specifically, the state hospitals will experience normal turnover in the allocated MR and GS positions which in turn may result in a position remaining open during the recruitment and selection processes. It cannot be said that such circumstances indicate that a position has been reduced, removed or eliminated so as to impose upon the Defendants the affirmative duty pursuant to paragraph 39 to reallocate 45% of such vacant positions to the MR salary account. Nor can it be concluded that merely because the Department has maintained sufficient monies in the MR and GS salary accounts, without also recruiting and selecting persons to fill the budgeted positions, the require-

ments of the Consent Decree have been met. Thus, it is incumbent upon the parties to establish criteria upon which a determination can be made as to what point in time a reduction in the number of allocated positions has occurred.

3. Paragraph 89(f) requires the Commissioner to submit legislative proposals to eliminate the financial incentives currently encouraging counties to place mentally retarded persons in state hospitals. Although the Commissioner made various legislative proposals regarding this matter, the evidence and testimony submitted at the hearing indicate that the proposals do not effectively address the elimination of financial incentives which encourage counties to institutionalize mentally retarded persons. For example, with respect to non-MA eligible children counties paid 0.0% for state hospital residential services and 30.39% of the cost for community-based residential services in fiscal year 1980. Pursuant to the Commissioner's legislative proposal counties would pay 10% of the cost for state hospital residential services and 45% of the cost for community-based residential services. It is therefore clear that the counties would continue to bear a much greater financial burden for non-MA eligible children who are placed in community-based centers than for those non-MA eligible children placed in state hospitals. Thus, no incentive has been created under the Commissioner's proposal for the counties to discontinue their reliance upon state hospital placements for non-MA eligible children.

Similarly, with respect to the DAC's counties paid 0.0% for state hospital services including residential and day programs but 45.3% for community DAC services in fiscal year 1980; under the proposals submitted by the Commissioner counties will pay 4.44% for state hospital residential and day program services, but 4.44% for community ICF/MR services and approximately 45.3% for community DAC services. These statistics indicate that the legislative proposals do not eliminate financial incentives for the counties to discontinue their reliance upon state hospital services, nor do they encourage counties

to develop community services providing the "least restrictive environment". (Minn. Stat. §253A.075, subd. 17(b), Minn. Stat. §252A.11, subd. 5 and Rule 185). Therefore, the proposals for legislation submitted by the Commissioner do not comply with paragraph 89(f) of the Consent Decree. Finally, the evidence does not support a finding that the distribution to the counties of $8,002,000 from the Cost of Care Program will necessarily relieve the counties' financial burden for community-based services since these funds are not specifically targeted for residential services for handicapped children.

5. Paragraph 89(b) requires the Commissioner to submit legislative proposals addressing the need for additional capacity in community-based residential facilities and developmental achievement centers. There was evidence presented to indicate that there may be a need for an additional 200 DAC positions and that the Department has submitted a budget request for only 100 additional DAC positions. Although the record is not conclusive regarding the extent of the additional DAC position needs, it is clear that the need for additional capacity exists and that the Department has identified these needs at least to the extent of 100 additional DAC positions. In addition, the Department's proposal for the "folding in" of funds into the CSSA potentially addresses the funding mechanism for DAC programs, transportation and building renovation. This proposal does not, however, set forth the specific dollar amounts to be utilized for DAC programs, transportation and building renovation, nor does it establish guidelines for the counties in administering these funds or provide for sufficient monitoring by the Commissioner of the counties' expenditures of the funds folded into the CSSA. Insofar as the "folded in" funds are not "earmarked" for specific expenditures and the responsibility for determining the appropriate use of these funds is left to the counties, it can be concluded that the Commissioner's proposal does not clearly "address" DAC programs, transportation and building renovation. While paragraph 89(b) imposes no burden upon the Defendants with respect to specific substantive

contents of the legislative proposal, it does require that the Department propose legislation to effectively deal with in particularity the funding mechanism for DAC programs, transportation and building renovation so that the additional capacity for these services will be achieved. The record in the present matter does not support the conclusion that the Defendants have met this objective.

RECOMMENDATIONS

1. If the Department of Public Welfare implements budget reductions in the GS salary account which effectively reduce, eliminate or reallocate the positions specified in paragraph 39, it must allocate at least 45% of said positions to serve mentally retarded individuals, thereby adding to the 2915.93 positions protected under paragraph 37.

2. In order to insure compliance with paragraph 37 of the Consent Decree, the Defendants must provide a sufficient guarantee of funding necessary to maintain the allocated positions until such time as each state hospital meets all of the staffing requirements set forth in paragraphs 46 through 55 of the Decree.

3. Within thirty (30) days from the receipt of these Findings and Recommendations the Defendants and the Plaintiffs should meet in an attempt to agree upon criteria for determining at what point a reduction in the allocated positions under paragraphs 37 and 39 has occurred. In establishing these criteria the parties should give consideration to the reasonable time necessary for the recruitment and selection processes for filling vacancies. An agreement regarding these criteria should be reached by at least July 1, 1981.

4. For the next legislative session the Commissioner should propose legislation which will equalize the percentage of costs paid by the counties for state hospital services and for community-based services. If such proposals are not adopted during the 1981 legislative session, the Commissioner should propose such measures for adoption during the 1982 session of the legislature.

5. For the next legislative session the Commissioner should seek to amend the legislative proposal regarding paragraph 89(b) to state with particularity the funding mechanisms for DAC programs, transportation and building renovation. In addition, the Commissioner should closely monitor the counties' administration of the "folded in" monies to insure consistency with the intent of paragraph 89(b) and the proposals relative thereto, and provide copies of such a monitoring system to the Plaintiffs and undersigned Monitor prior to implementation.

6. Within the interim period the undersigned Monitor retains jurisdiction over these matters to the degree necessary and consistent with his authority to insure that effective measures are taken consistent with the Consent Decree and the Conclusions and Recommendations herein.

Respectfully submitted,

Dated this 21st day
of May, 1981

Frank J. Madden
Hearing Officer
Suite 200 Tallmadge Building
1219 Marquette Avenue South
Minneapolis, Minnesota 55403
(612) 333-3160