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State of Minnesota

HOUSE OF REPRESENTATIVES

A bill for an act

relating to health; establishing the School-Based Health Center Task Force;

NINETY-FIRST SESSION

H. F. No. 4499

03/16/2020

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Authored by Morrison
The bill was read for the first time and referred to the Committee on Health and Human Services Policy

1.3	providing appointments; requiring a report; appropriating money.
1.4	BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MINNESOTA:
1.5	Section 1. SCHOOL-BASED HEALTH CENTER TASK FORCE.
1.6	Subdivision 1. Establishment; purpose. (a) The Departments of Health, Human Services,
1.7	and Education shall establish the School-Based Health Center Task Force.
1.8	(b) For purposes of this section, "school-based health center" means a child-centered,
1.9	integrated health clinic that is located in or near a school facility of a school district or of
1.10	an Indian tribe; is organized through school, community, and health provider relationships;
1.11	is administered by a sponsoring facility; and provides care, through health professionals,
1.12	that may include but is not limited to primary health care, mental health care, health
1.13	education, nutrition, optometry, dental care, and other services to children, regardless of
1.14	ability to pay.
1.15	(c) The Departments of Health, Human Services, and Education shall collaborate with
1.16	the task force initiative.
1.17	(d) The purpose of the School-Based Health Center Task Force is to support and promote
1.18	school-based health centers in providing equal access to health care and mental health
1.19	services to all children in Minnesota, regardless of ability to pay for services.
1.20	Subd. 2. Membership. (a) The School-Based Health Center Task Force consists of at

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least 18 members, appointed as follows:

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<u>(1</u>) five members from the Minnesota School-Based Health Alliance, including at least
three	administrators of school-based health centers;
<u>(2</u>) the State Adolescent Health Coordinator from the Department of Health, convener
of the	e Minnesota School-Based Health Alliance;
<u>(3</u>) five school-based health care providers;
<u>(4</u>	one member from the Indian Health Board;
<u>(5</u>) three school administrators;
<u>(6</u>) no more than two school board members or parents of students from districts with
existi	ng school-based health centers; and
<u>(7</u>) one to four city or county public health appointees where at least one comes from
greate	er Minnesota.
<u>(b</u>) Appointments to the task force must be made no later than July 1, 2020. Members
of the	e task force may be compensated as provided by Minnesota Statutes, section 15.059,
<u>subdi</u>	vision 3.
<u>S</u> ı	abd. 3. Duties. The task force must:
<u>(1</u>) set clear standards and provide a framework for school-based health centers operating
in Mi	nnesota;
<u>(2</u>) work cooperatively with the Minnesota School-Based Health Alliance in supporting
new a	and existing school-based health centers;
(3) support and promote school-based health centers in providing equal access to health
care t	o all children in Minnesota, regardless of ability to pay;
<u>(4</u>) identify critical shortage regional areas in Minnesota where new school-based health
cente	rs are needed;
<u>(5</u>) identify funding mechanisms for expanding activities of the Minnesota School-Based
Healt	h Alliance to provide technical assistance to new and existing school-based health
cente	<u>rs;</u>
<u>(6</u>) identify funding mechanisms for school-based health centers; and
<u>(7</u>	produce a written report as described in subdivision 6.
Sı	abd. 4. Officers; meetings. (a) The Department of Health shall convene the first
	ng of the task force. At the first meeting, the task force must elect a chair and vice-chair
from	among its members and may elect other officers as necessary.

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3.1	(b) The task force must meet at least six times each year. The chair of the task force
3.2	must convene the first meeting no later than July 15, 2020.
3.3	(c) The task force is subject to the Open Meeting Law under Minnesota Statutes, chapter
3.4	<u>13D.</u>
3.5	Subd. 5. Staff and meeting space. The Departments of Health, Human Services, and
3.6	Education must provide staff assistance and meeting space to support the work of the task
3.7	force.
3.8	Subd. 6. Report required. No later than December 1, 2020, the task force must submit
3.9	a written report describing its work and recommendations to the legislative committees with
3.10	jurisdiction over school-based health centers. The report must describe the current state of
3.11	school-based health centers in Minnesota. It must identify critical shortage areas and regions
3.12	of Minnesota where new school-based health centers are needed. The task force must
3.13	recommend legislation for the 2021 legislative session.
3.14	Subd. 7. Expiration. The task force expires on July 1, 2022.
3.15	EFFECTIVE DATE. This section is effective the day following final enactment.
3.16	Sec. 2. APPROPRIATION.
3.17	\$100,000 in fiscal year 2021 is appropriated from the general fund to the Department
3.18	of Health to fund the operations of the Minnesota School-Based Health Alliance for
3.19	developing and supporting school-based health centers.
3.20	EFFECTIVE DATE. This section is effective the day following final enactment.

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