

**SENATE
STATE OF MINNESOTA
NINETIETH SESSION**

S.F. No. 2262

(SENATE AUTHORS: HAYDEN)

DATE
03/27/2017

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OFFICIAL STATUS
Introduction and first reading
Referred to Health and Human Services Finance and Policy

1.1 A bill for an act
1.2 relating to health; appropriating money for identifying patients at risk for colon
1.3 cancer and providing screening.

1.4 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MINNESOTA:

1.5 Section 1. **APPROPRIATION TO EXPAND THE LINKS OF CARE PROGRAM**
1.6 **IN THE STATE.**

1.7 Subdivision 1. **Appropriation.** (a) \$125,000 in fiscal year 2018 and \$125,000 in fiscal
1.8 year 2019 are appropriated from the general fund to the commissioner of human services
1.9 to provide grants to federally qualified health centers in the west metro area to replicate the
1.10 Links of Care program model at the West Side Community Health Services. The funds shall
1.11 be used to hire community-based colon cancer screening coordinators and program
1.12 coordinators to support overall access to specialty referrals. The program objective is to
1.13 develop care linkages between nonprofit community-based health centers and
1.14 independent-provider-owned specialty clinics in order to reach patients who are at a higher
1.15 risk for colon cancer or are overdue for colon cancer screening. The overarching goal is to
1.16 save lives and prevent costly late-stage colon cancer diagnosis and treatment.

1.17 (b) The screening coordinator is a community-based position that works directly with
1.18 patients to schedule and process colorectal screening referrals and patient reminders. The
1.19 program coordinator works with current and prospective specialty providers and hospitals
1.20 to secure donated services such as diagnostic colonoscopy and imaging.

1.21 (c) In fiscal year 2018, the commissioner of human services shall conduct an assessment
1.22 to determine if the program can be replicated in greater Minnesota.

2.1 (d) In fiscal year 2019, a second community-based colon cancer screening coordinator
2.2 may be hired to serve an area in greater Minnesota or funds may be used to expand the
2.3 program model in the Twin Cities area if an expansion of the program is not feasible in
2.4 greater Minnesota.

2.5 (e) The appropriations in paragraph (a) are available until expended.

2.6 Subd. 2. **Report.** The commissioner of health shall report to the committees of the
2.7 legislature with jurisdiction over health care on the effectiveness of the expansion program
2.8 by January 15, 2019, and January 15, 2020, and publish the report on the department's Web
2.9 site.