SENATE STATE OF MINNESOTA NINETY-THIRD SESSION

S.F. No. 5385

(SENATE AUTHORS: WIKLUND)
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OFFICIAL STATUS

Introduction and first reading Referred to Health and Human Services

1.1 A bill for an act

relating to human services; the governor's budget bill for health and human services; modifying provisions related to health care, child welfare, child care licensing, the Department of Health, and the Department of Children, Youth, and Families; making technical changes to health and human services law; adjusting appropriations for forecasted programs; imposing certain penalties; appropriating money; amending Minnesota Statutes 2022, sections 62D.14, subdivision 1; 144.05, subdivision 6; 144.1501, subdivision 5; 144A.70, subdivisions 3, 5, 6, 7; 144A.71, subdivision 2, by adding a subdivision; 144A.72, subdivision 1; 144A.73; 245.975, subdivisions 2, 4, 9; 245A.07, subdivision 6; 245A.10, subdivisions 1, as amended, 2, as amended; 245A.144; 245A.175; 256.029, as amended; 260C.007, subdivisions 5, 6, by adding subdivisions; 260C.212, subdivision 13; 260E.03, by adding a subdivision; 260E.14, subdivision 3; 260E.36, subdivision 1a; Minnesota Statutes 2023 Supplement, sections 144.1501, subdivision 2; 144.1505, subdivision 2; 145.561, subdivision 4; 245A.16, subdivision 1, as amended; 245A.66, subdivision 4, as amended; 256.4793, subdivision 3; 256.4794, subdivision 3; 256B.0622, subdivision 8; 256B.0947, subdivision 7; 256M.42, by adding a subdivision; 260.014, by adding a subdivision; 260.761, subdivision 2; 260.762, subdivision 2; 260E.02, subdivision 1, as amended; 260E.03, subdivisions 15a, 15b, 22; 260E.14, subdivision 5; 260E.17, subdivision 1; 260E.18; 260E.20, subdivision 2; 260E.24, subdivisions 2, 7; 260E.33, subdivision 1; 260E.35, subdivision 6; 518A.42, subdivision 3; Laws 2023, chapter 22, section 4, subdivision 2; Laws 2023, chapter 70, article 12, section 30, subdivisions 2, 3; article 14, section 42, by adding a subdivision; article 20, sections 2, subdivisions 5, 24, 29; 3, subdivisions 2, 3; 12, as amended; 23; Laws 2023, chapter 75, section 10; Laws 2024, chapter 80, article 1, sections 34, subdivision 2; 96; article 2, sections 5, subdivision 21; 7, subdivision 2; 10, subdivision 6; 16, subdivision 1; 30, subdivision 2; 31; 74; article 4, section 26; article 6, section 4; article 7, section 4; proposing coding for new law in Minnesota Statutes, chapters 103I; 142A; 144A; proposing coding for new law as Minnesota Statutes, chapter 142B; repealing Minnesota Statutes 2022, sections 245.975, subdivision 8; 245A.065; Minnesota Statutes 2023 Supplement, section 144.0528; Laws 2023, chapter 25, section 190, subdivision 10; Laws 2023, chapter 70, article 20, section 2, subdivision 31, as amended; Laws 2024, chapter 80, article 2, sections 1, subdivision 11; 3, subdivision 3; 4, subdivision 4; 10, subdivision 4; 33; 69; Minnesota Rules, part 9545.0845.

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

2.2 ARTICLE 1

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2.3 **HEALTH CARE**

Section 1. **REVISOR INSTRUCTION.**

When the proposed rule published at Federal Register, volume 88, page 25313, becomes effective, the revisor of statutes must change: (1) the reference in Minnesota Statutes, section 256B.06, subdivision 4, paragraph (d), from Code of Federal Regulations, title 8, section 103.12, to Code of Federal Regulations, title 42, section 435.4; and (2) the reference in Minnesota Statutes, section 256L.04, subdivision 10, paragraph (a), from Code of Federal Regulations, title 8, section 103.12, to Code of Federal Regulations, title 45, section 155.20. The commissioner of human services shall notify the revisor of statutes when the proposed rule published at Federal Register, volume 88, page 25313, becomes effective.

2.13 ARTICLE 2
2.14 CHILD WELFARE

2.15 Section 1. Minnesota Statutes 2023 Supplement, section 260.761, subdivision 2, is amended to read:

Subd. 2. Notice to Tribes of services or court proceedings involving an Indian child. (a) When a child-placing agency has information that a family assessment, investigation, or noncaregiver sex human trafficking assessment being conducted may involve an Indian child, the child-placing agency shall notify the Indian child's Tribe of the family assessment, investigation, or noncaregiver sex human trafficking assessment according to section 260E.18. The child-placing agency shall provide initial notice by telephone and by email or facsimile and shall include the child's full name and date of birth; the full names and dates of birth of the child's biological parents; and if known the full names and dates of birth of the child's grandparents and of the child's Indian custodian. If information regarding the child's grandparents or Indian custodian is not immediately available, the child-placing agency shall continue to request this information and shall notify the Tribe when it is received. Notice shall be provided to all Tribes to which the child may have any Tribal lineage. The child-placing agency shall request that the Tribe or a designated Tribal representative participate in evaluating the family circumstances, identifying family and Tribal community resources, and developing case plans. The child-placing agency shall continue to include the Tribe in service planning and updates as to the progress of the case.

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- (b) When a child-placing agency has information that a child receiving services may be an Indian child, the child-placing agency shall notify the Tribe by telephone and by email or facsimile of the child's full name and date of birth, the full names and dates of birth of the child's biological parents, and, if known, the full names and dates of birth of the child's grandparents and of the child's Indian custodian. This notification must be provided for the Tribe to determine if the child is a member or eligible for Tribal membership, and the agency must provide this notification to the Tribe within seven days of receiving information that the child may be an Indian child. If information regarding the child's grandparents or Indian custodian is not available within the seven-day period, the child-placing agency shall continue to request this information and shall notify the Tribe when it is received. Notice shall be provided to all Tribes to which the child may have any Tribal lineage.
- (c) In all child placement proceedings, when a court has reason to believe that a child placed in emergency protective care is an Indian child, the court administrator or a designee shall, as soon as possible and before a hearing takes place, notify the Tribal social services agency by telephone and by email or facsimile of the date, time, and location of the emergency protective care or other initial hearing. The court shall make efforts to allow appearances by telephone or video conference for Tribal representatives, parents, and Indian custodians.
- (d) The child-placing agency or individual petitioner shall effect service of any petition governed by sections 260.751 to 260.835 by certified mail or registered mail, return receipt requested upon the Indian child's parents, Indian custodian, and Indian child's Tribe at least 10 days before the admit-deny hearing is held. If the identity or location of the Indian child's parents or Indian custodian and Tribe cannot be determined, the child-placing agency shall provide the notice required in this paragraph to the United States Secretary of the Interior, Bureau of Indian Affairs by certified mail, return receipt requested.
- (e) A Tribe, the Indian child's parents, or the Indian custodian may request up to 20 additional days to prepare for the admit-deny hearing. The court shall allow appearances by telephone, video conference, or other electronic medium for Tribal representatives, the Indian child's parents, or the Indian custodian.
- (f) A child-placing agency or individual petitioner must provide the notices required under this subdivision at the earliest possible time to facilitate involvement of the Indian child's Tribe. Nothing in this subdivision is intended to hinder the ability of the child-placing agency, individual petitioner, and the court to respond to an emergency situation. Lack of participation by a Tribe shall not prevent the Tribe from intervening in services and proceedings at a later date. A Tribe may participate in a case at any time. At any stage of

4.1 the child-placing agency's involvement with an Indian child, the agency shall provide full

4.2 cooperation to the Tribal social services agency, including disclosure of all data concerning

4.3 the Indian child. Nothing in this subdivision relieves the child-placing agency of satisfying

4.4 the notice requirements in state or federal law.

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EFFECTIVE DATE. This section is effective July 1, 2025.

- Sec. 2. Minnesota Statutes 2023 Supplement, section 260.762, subdivision 2, is amended to read:
- Subd. 2. Requirements for child-placing agencies and individual petitioners. Achild-placing agency or individual petitioner shall:
- 4.10 (1) work with the Indian child's Tribe and family to develop an alternative plan to 4.11 out-of-home placement;
 - (2) before making a decision that may affect an Indian child's safety and well-being or when contemplating out-of-home placement of an Indian child, seek guidance from the Indian child's Tribe on family structure, how the family can seek help, what family and Tribal resources are available, and what barriers the family faces at that time that could threaten its preservation; and
 - (3) request participation of the Indian child's Tribe at the earliest possible time and request the Tribe's active participation throughout the case-; and
- (4) notify the Indian child's Tribe or Tribes by telephone and by email or facsimile
 immediately but no later than 24 hours after receiving information on a missing child as
 defined under section 260C.212, subdivision 13, paragraph (a).
- Sec. 3. Minnesota Statutes 2022, section 260C.007, subdivision 5, is amended to read:
- Subd. 5. **Child abuse.** "Child abuse" means an act that involves a minor victim that
- 4.24 constitutes a violation of section 609.221, 609.222, 609.223, 609.224, 609.2242, 609.282,
- 4.25 609.322, 609.324, 609.342, 609.343, 609.344, 609.345, 609.3458, 609.377, 609.378,
- 4.26 617.246, or that is physical or sexual abuse as defined in section 260E.03, or an act committed
- in another state that involves a minor victim and would constitute a violation of one of these
- 4.28 sections if committed in this state.
- 4.29 **EFFECTIVE DATE.** This section is effective July 1, 2025.

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Sec. 4. Minnesota Statutes 2022, section 260C.007, subdivision 6, is amended to read: 5.1

- Subd. 6. Child in need of protection or services. "Child in need of protection or services" means a child who is in need of protection or services because the child:
 - (1) is abandoned or without parent, guardian, or custodian;

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- (2)(i) has been a victim of physical or sexual abuse as defined in section 260E.03, subdivision 18 or 20, (ii) resides with or has resided with a victim of child abuse as defined in subdivision 5 or domestic child abuse as defined in subdivision 13, (iii) resides with or would reside with a perpetrator of domestic child abuse as defined in subdivision 13 or child abuse as defined in subdivision 5 or 13, or (iv) is a victim of emotional maltreatment as defined in subdivision 15;
- (3) is without necessary food, clothing, shelter, education, or other required care for the child's physical or mental health or morals because the child's parent, guardian, or custodian is unable or unwilling to provide that care;
- (4) is without the special care made necessary by a physical, mental, or emotional condition because the child's parent, guardian, or custodian is unable or unwilling to provide that care;
- (5) is medically neglected, which includes, but is not limited to, the withholding of medically indicated treatment from an infant with a disability with a life-threatening condition. The term "withholding of medically indicated treatment" means the failure to respond to the infant's life-threatening conditions by providing treatment, including appropriate nutrition, hydration, and medication which, in the treating physician's, advanced practice registered nurse's, or physician assistant's reasonable medical judgment, will be most likely to be effective in ameliorating or correcting all conditions, except that the term does not include the failure to provide treatment other than appropriate nutrition, hydration, or medication to an infant when, in the treating physician's, advanced practice registered nurse's, or physician assistant's reasonable medical judgment:
 - (i) the infant is chronically and irreversibly comatose;
- (ii) the provision of the treatment would merely prolong dying, not be effective in ameliorating or correcting all of the infant's life-threatening conditions, or otherwise be futile in terms of the survival of the infant; or
- (iii) the provision of the treatment would be virtually futile in terms of the survival of the infant and the treatment itself under the circumstances would be inhumane;

5.1	(6) is one whose parent, guardian, or other custodian for good cause desires to be relieved
5.2	of the child's care and custody, including a child who entered foster care under a voluntary
5.3	placement agreement between the parent and the responsible social services agency under
5.4	section 260C.227;
5.5	(7) has been placed for adoption or care in violation of law;
5.6	(8) is without proper parental care because of the emotional, mental, or physical disability
5.7	or state of immaturity of the child's parent, guardian, or other custodian;
5.8	(9) is one whose behavior, condition, or environment is such as to be injurious or
5.9	dangerous to the child or others. An injurious or dangerous environment may include, but
5.10	is not limited to, the exposure of a child to criminal activity in the child's home;
5.11	(10) is experiencing growth delays, which may be referred to as failure to thrive, that
5.12	have been diagnosed by a physician and are due to parental neglect;
5.13	(11) is a sexually exploited youth;
5.14	(12) is a labor trafficked youth;
5.15	(12) (13) has committed a delinquent act or a juvenile petty offense before becoming
5.16	ten years old;
5.17	(13) (14) is a runaway;
5.18	(14) (15) is a habitual truant;
5.19	(15) (16) has been found incompetent to proceed or has been found not guilty by reason
5.20	of mental illness or mental deficiency in connection with a delinquency proceeding, a
5.21	certification under section 260B.125, an extended jurisdiction juvenile prosecution, or a
5.22	proceeding involving a juvenile petty offense; or
5.23	(16) (17) has a parent whose parental rights to one or more other children were
5.24	involuntarily terminated or whose custodial rights to another child have been involuntarily
5.25	transferred to a relative and there is a case plan prepared by the responsible social services
5.26	agency documenting a compelling reason why filing the termination of parental rights
5.27	petition under section 260C.503, subdivision 2, is not in the best interests of the child.

EFFECTIVE DATE. This section is effective July 1, 2025.

7.1	Sec. 5. Minnesota Statutes 2022, section 260C.007, is amended by adding a subdivision
7.2	to read:
7.3	Subd. 33. Labor trafficked youth. For the purposes of this section, "labor trafficked
7.4	youth" means a child, as defined in subdivision 4, who:
7.5	(1) is a labor trafficking victim as defined in section 609.281, subdivision 6; or
7.6	(2) is a victim of severe forms of trafficking in persons as defined in United States Code,
7.7	title 22, section 7102(11)(B).
7.8	EFFECTIVE DATE. This section is effective July 1, 2025.
7.9	Sec. 6. Minnesota Statutes 2022, section 260C.007, is amended by adding a subdivision
7.10	to read:
7.11	Subd. 34. Human trafficking. For purposes of this section, "human trafficking" includes
7.12	labor trafficking as defined in section 609.281, subdivision 5; sex trafficking as defined in
7.13	section 609.321, subdivision 7a; and severe forms of trafficking in persons as defined in
7.14	United States Code, title 22, section 7102(11).
7.15	EFFECTIVE DATE. This section is effective July 1, 2025.
7.16	Sec. 7. Minnesota Statutes 2022, section 260C.212, subdivision 13, is amended to read:
7.17	Subd. 13. Protecting Responding to missing and runaway children and youth at
7.18	risk of sex and preventing human trafficking or commercial sexual exploitation. (a)
7.19	For purposes of this subdivision, "missing child or youth" means a child, as defined by
7.20	section 260C.007, subdivision 4, who is under the legal custody of a responsible social
7.21	services agency, as defined by section 260C.007, subdivision 22, and is absent from the
7.22	foster care setting, including family foster home, residential facility or independent living
7.23	setting, or home of the parent or guardian during a trial home visit, and cannot be located.
7.24	(a) (b) The local responsible social services agency shall develop protocols to
7.25	expeditiously locate any missing child missing from foster care or youth.
7.26	(b) (c) When the local responsible social services agency shall report learns that a child
7.27	or youth is missing, the agency staff must immediately, but no later than 24 hours, after
7.28	receiving information on a missing or abducted child:
7.29	(1) report to the local law enforcement agency for entry into the National Crime
7.30	Information Center (NCIC) database of the Federal Bureau of Investigation, and to the
7.31	National Center for Missing and Exploited Children and document having made this report.

When making a report to local law enforcement and National Center for Missing and
Exploited Children, the agency must include, when reasonably possible:
(i) a photo of the child or youth;
(ii) a description of the child or youth's physical features, such as height, weight, sex,
ethnicity, race, hair color, and eye color; and
(iii) endangerment information, such as the child or youth's pregnancy status,
prescriptions, medications, suicidal tendencies, vulnerability to being trafficked, and other
health or risk factors; and
(2) notify the court, parties to the case, parents and relatives who are not parties as the
agency deems appropriate, and any Tribe who has legal responsibility or received notice
under section 260.761, subdivision 2, but has not yet determined enrollment or eligibility
status.
(e) (d) While the child or youth is missing, the local responsible social services agency
shall must:
 (1) implement protocols to expeditiously locate the child or youth; (2) maintain regular communication with law enforcement agencies and the National Center for Missing and Exploited Children in efforts to provide a safe recovery of the missing
child or youth and document this communication;
(3) share information pertaining to the child or youth's recovery, and circumstances
related to recovery, with law enforcement agencies and the National Center for Missing
and Exploited Children; and
(4) not discharge a child or youth from foster care or close the social services case unti
diligent efforts have been exhausted to locate the child or youth and the court terminates
the agency's jurisdiction.
(d) (e) When the child or youth is located, the local responsible social services agency
shall must:
(1) notify all individuals and agencies that require notification in paragraph (c) of the
child or youth's return;
(2) interview the child or youth to determine and document, on a form approved by the
commissioner of human services, what the child or youth experienced while missing and
the primary factors that contributed to the ehild's running away or otherwise being absent
child or youth's absence from care and :

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9.1	(3) to the extent possible and appropriate, respond to those the primary contributing
9.2	factors in current and subsequent placements-;
9.3	(e) The local social services agency shall determine what the child experienced while
9.4	absent from care, including screening (4) screen the child or youth's reported experience
9.5	to determine identify if the child or youth is a possible sex victim of human trafficking or
9.6	eommercial sexual exploitation victim, as defined in section 260C.007, subdivision 31 33.
9.7	(f) (5) if the child or youth is identified to have been a victim of human trafficking, the
9.8	local social services agency shall must report immediately, but no later than 24 hours, to
9.9	the local law enforcement agency any reasonable cause to believe a child is, or is at risk of
9.10	being, a sex trafficking or commercial sexual exploitation victim.
9.11	(g) (f) With respect to any child or youth for whom the responsible social services agency
9.12	has responsibility for placement, care, or supervision, the local responsible social services
9.13	agency shall determine:
9.14	(1) identify and document any reasonable cause to believe that the child or youth is a
9.15	human trafficking victim as defined in section 260C.007, subdivision 33, or a youth at risk
9.16	of sex trafficking or commercial sexual exploitation as defined by the commissioner of
9.17	human services; and
9.18	(2) provide access to appropriate services, which may include services under Safe Harbor,
9.19	as described in section 145.4717 145.4716, with respect to any child for whom the local
9.20	social services agency has responsibility for placement, care, or supervision when the local
9.21	social services agency has reasonable cause to believe that the child is, or is at risk of being,
9.22	a sex trafficking or commercial sexual exploitation victim. amending the child or youth's
9.23	out-of-home placement plan in subdivision 1, as necessary.
9.24	EFFECTIVE DATE. This section is effective July 1, 2024, except for paragraph (f),
9.25	which is effective July 1, 2025.
9.26	Sec. 8. Minnesota Statutes 2023 Supplement, section 260E.02, subdivision 1, as amended
9.27	by Laws 2024, chapter 80, article 8, section 31, is amended to read:
9.28	Subdivision 1. Establishment of team. A county shall establish a multidisciplinary
9.29	child protection team that may include, but is not limited to, the director of the local welfare
9.30	agency or designees, the county attorney or designees, the county sheriff or designees,
9.31	representatives of health and education, representatives of mental health, representatives of
9.32	agencies providing specialized services or responding to youth who experience or are at
9.33	risk of experiencing sex or labor trafficking or sexual exploitation, or other appropriate

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human services, children's services, or community-based agencies, and parent groups. As used in this section, a "community-based agency" may include, but is not limited to, schools, social services agencies, family service and mental health collaboratives, children's advocacy centers, early childhood and family education programs, Head Start, or other agencies serving children and families. A member of the team must be designated as the lead person of the team responsible for the planning process to develop standards for the team's activities with battered women's and domestic abuse programs and services.

EFFECTIVE DATE. This section is effective July 1, 2025.

- Sec. 9. Minnesota Statutes 2022, section 260E.03, is amended by adding a subdivision to 10.9 read: 10.10
- Subd. 11a. Labor trafficking. "Labor trafficking" means the subjection of a child to 10.11 the acts listed in section 609.281, subdivision 5, limited to the purposes of forced or coerced 10.12 labor or services as defined by section 609.281, subdivision 4, and debt bondage as defined 10.13 by section 609.281, subdivision 3, regardless of whether the alleged offender is a 10.14 noncaregiver human trafficker as defined in subdivision 17a. 10.15

10.16 **EFFECTIVE DATE.** This section is effective July 1, 2025.

- Sec. 10. Minnesota Statutes 2023 Supplement, section 260E.03, subdivision 15a, is 10.17 amended to read: 10.18
 - Subd. 15a. Noncaregiver sex human trafficker. "Noncaregiver sex human trafficker" means an individual who is alleged to have engaged in the act of sex or labor trafficking a child and who is not a person responsible for the child's care, who does not have a significant relationship with the child as defined in section 609.341, and who is not a person in a current or recent position of authority as defined in section 609.341, subdivision 10.

EFFECTIVE DATE. This section is effective July 1, 2025.

- Sec. 11. Minnesota Statutes 2023 Supplement, section 260E.03, subdivision 15b, is 10.25 amended to read: 10.26
- Subd. 15b. Noncaregiver sex human trafficking assessment. "Noncaregiver sex human 10.27 10.28 trafficking assessment" is a comprehensive assessment of child safety, the risk of subsequent child maltreatment, and strengths and needs of the child and family. The local welfare 10.29 agency shall only perform a noncaregiver sex human trafficking assessment when a 10.30 maltreatment report alleges sex or labor trafficking of a child by someone other than the 10.31 child's caregiver. A noncaregiver sex human trafficking assessment does not include a 10.32

determination of whether child maltreatment occurred. A noncaregiver sex human trafficking assessment includes a determination of a family's need for services to address the safety of the child or children, the safety of family members, and the risk of subsequent child maltreatment.

EFFECTIVE DATE. This section is effective July 1, 2025.

- Sec. 12. Minnesota Statutes 2023 Supplement, section 260E.03, subdivision 22, is amended to read:
- Subd. 22. **Substantial child endangerment.** "Substantial child endangerment" means that a person responsible for a child's care, by act or omission, commits or attempts to commit an act against a child in the person's care that constitutes any of the following:
- (1) egregious harm under subdivision 5;

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- 11.12 (2) abandonment under section 260C.301, subdivision 2;
- (3) neglect under subdivision 15, paragraph (a), clause (2), that substantially endangers the child's physical or mental health, including a growth delay, which may be referred to as failure to thrive, that has been diagnosed by a physician and is due to parental neglect;
- (4) murder in the first, second, or third degree under section 609.185, 609.19, or 609.195;
- 11.17 (5) manslaughter in the first or second degree under section 609.20 or 609.205;
- (6) assault in the first, second, or third degree under section 609.221, 609.222, or 609.223;
- 11.19 (7) sex trafficking, solicitation, inducement, or promotion of prostitution under section 609.322;
- (8) criminal sexual conduct under sections 609.342 to 609.3451;
- (9) sexual extortion under section 609.3458;
- (10) solicitation of children to engage in sexual conduct under section 609.352;
- 11.24 (11) malicious punishment or neglect or endangerment of a child under section 609.377 or 609.378;
- 11.26 (12) use of a minor in sexual performance under section 617.246; or
- (13) labor trafficking under sections 609.281 and 609.282; or
- 11.28 (13) (14) parental behavior, status, or condition requiring the county attorney to file a termination of parental rights petition under section 260C.503, subdivision 2.
- 11.30 **EFFECTIVE DATE.** This section is effective July 1, 2025.

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- Sec. 13. Minnesota Statutes 2022, section 260E.14, subdivision 3, is amended to read: 12.1
 - Subd. 3. **Neglect or, physical abuse, or labor trafficking.** (a) The local welfare agency is responsible for immediately conducting a family assessment or investigation if the report alleges neglect or physical abuse by a parent, guardian, or individual functioning within the family unit as a person responsible for the child's care.
- (b) The local welfare agency is also responsible for assessing or investigating when a 12.6 child is identified as a victim of labor trafficking. 12.7
 - **EFFECTIVE DATE.** This section is effective July 1, 2025.
- Sec. 14. Minnesota Statutes 2023 Supplement, section 260E.14, subdivision 5, is amended 12.9 to read: 12.10
- Subd. 5. Law enforcement. (a) The local law enforcement agency is the agency 12.11 responsible for investigating a report of maltreatment if a violation of a criminal statute is 12.12 12.13 alleged.
 - (b) Law enforcement and the responsible agency must coordinate their investigations or assessments as required under this chapter when: (1) a report alleges maltreatment that is a violation of a criminal statute by a person who is a parent, guardian, sibling, person responsible for the child's care within the family unit, or by a person who lives in the child's household and who has a significant relationship to the child in a setting other than a facility as defined in section 260E.03; or (2) a report alleges sex or labor trafficking of a child.
- 12.20 **EFFECTIVE DATE.** This section is effective July 1, 2025.
- Sec. 15. Minnesota Statutes 2023 Supplement, section 260E.17, subdivision 1, is amended 12.21 to read: 12.22
- Subdivision 1. Local welfare agency. (a) Upon receipt of a report, the local welfare 12.23 agency shall determine whether to conduct a family assessment, an investigation, or a 12.24 noncaregiver sex human trafficking assessment as appropriate to prevent or provide a remedy 12.25 12.26 for maltreatment.
- (b) The local welfare agency shall conduct an investigation when the report involves 12.27 sexual abuse, except as indicated in paragraph (f), or substantial child endangerment. 12.28
- (c) The local welfare agency shall begin an immediate investigation at any time when 12.29 the local welfare agency is responding with a family assessment and the local welfare agency 12.30

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determines that there is reason to believe that sexual abuse, substantial child endangerment, or a serious threat to the child's safety exists.

as introduced

- (d) The local welfare agency may conduct a family assessment for reports that do not allege sexual abuse, except as indicated in paragraph (f), or substantial child endangerment. In determining that a family assessment is appropriate, the local welfare agency may consider issues of child safety, parental cooperation, and the need for an immediate response.
- (e) The local welfare agency may conduct a family assessment for a report that was initially screened and assigned for an investigation. In determining that a complete investigation is not required, the local welfare agency must document the reason for terminating the investigation and notify the local law enforcement agency is conducting a joint investigation.
- (f) The local welfare agency shall conduct a noncaregiver sex human trafficking assessment when a maltreatment report alleges sex or labor trafficking of a child and the alleged offender is a noncaregiver sex human trafficker as defined by section 260E.03, subdivision 15a.
- (g) During a noncaregiver sex human trafficking assessment, the local welfare agency shall initiate an immediate investigation if there is reason to believe that a child's parent, caregiver, or household member allegedly engaged in the act of sex or labor trafficking a child or was alleged to have engaged in any conduct requiring the agency to conduct an investigation.
 - **EFFECTIVE DATE.** This section is effective July 1, 2025.
- Sec. 16. Minnesota Statutes 2023 Supplement, section 260E.18, is amended to read:
- 13.23 **260E.18 NOTICE TO CHILD'S TRIBE.**
- The local welfare agency shall provide immediate notice, according to section 260.761, subdivision 2, to an Indian child's Tribe when the agency has reason to believe that the family assessment, investigation, or noncaregiver sex human trafficking assessment may involve an Indian child. For purposes of this section, "immediate notice" means notice provided within 24 hours.
- 13.29 **EFFECTIVE DATE.** This section is effective July 1, 2025.

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Sec. 17. Minnesota Statutes 2023 Supplement, section 260E.20, subdivision 2, is amended to read:

- Subd. 2. Face-to-face contact. (a) Upon receipt of a screened in report, the local welfare agency shall have face-to-face contact with the child reported to be maltreated and with the child's primary caregiver sufficient to complete a safety assessment and ensure the immediate safety of the child. When it is possible and the report alleges substantial child endangerment or sexual abuse, the local welfare agency is not required to provide notice before conducting the initial face-to-face contact with the child and the child's primary caregiver.
- (b) Except in a noncaregiver sex human trafficking assessment, the local welfare agency shall have face-to-face contact with the child and primary caregiver immediately after the agency screens in a report if sexual abuse or substantial child endangerment is alleged and within five calendar days of a screened in report for all other reports. If the alleged offender was not already interviewed as the primary caregiver, the local welfare agency shall also conduct a face-to-face interview with the alleged offender in the early stages of the assessment or investigation, except in a noncaregiver sex human trafficking assessment. Face-to-face contact with the child and primary caregiver in response to a report alleging sexual abuse or substantial child endangerment may be postponed for no more than five calendar days if the child is residing in a location that is confirmed to restrict contact with the alleged offender as established in guidelines issued by the commissioner, or if the local welfare agency is pursuing a court order for the child's caregiver to produce the child for questioning under section 260E.22, subdivision 5.
- (c) At the initial contact with the alleged offender, the local welfare agency or the agency responsible for assessing or investigating the report must inform the alleged offender of the complaints or allegations made against the individual in a manner consistent with laws protecting the rights of the person who made the report. The interview with the alleged offender may be postponed if it would jeopardize an active law enforcement investigation. In a noncaregiver sex human trafficking assessment, the local child welfare agency is not required to inform or interview the alleged offender.
- (d) The local welfare agency or the agency responsible for assessing or investigating the report must provide the alleged offender with an opportunity to make a statement, except in a noncaregiver sex human trafficking assessment. The alleged offender may submit supporting documentation relevant to the assessment or investigation.

EFFECTIVE DATE. This section is effective July 1, 2025.

24-08006

15.1	Sec. 18. Minnesota Statutes 2023 Supplement, section 260E.24, subdivision 2, is amended
15.2	to read:
15.3	Subd. 2. Determination after family assessment or a noncaregiver sex human
15.4	trafficking assessment. After conducting a family assessment or a noncaregiver sex human
15.5	trafficking assessment, the local welfare agency shall determine whether child protective
15.6	services are needed to address the safety of the child and other family members and the risk
15.7	of subsequent maltreatment. The local welfare agency must document the information
15.8	collected under section 260E.20, subdivision 3, related to the completed family assessment
15.9	in the child's or family's case notes.
15.10	EFFECTIVE DATE. This section is effective July 1, 2025.
15.11	Sec. 19. Minnesota Statutes 2023 Supplement, section 260E.24, subdivision 7, is amended
15.12	to read:
15.13	Subd. 7. Notification at conclusion of family assessment or a noncaregiver sex human
15.14	trafficking assessment. Within ten working days of the conclusion of a family assessment
15.15	or a noncaregiver sex human trafficking assessment, the local welfare agency shall notify
15.16	the parent or guardian of the child of the need for services to address child safety concerns
15.17	or significant risk of subsequent maltreatment. The local welfare agency and the family
15.18	may also jointly agree that family support and family preservation services are needed.
15.19	EFFECTIVE DATE. This section is effective July 1, 2025.
15.20	Sec. 20. Minnesota Statutes 2023 Supplement, section 260E.33, subdivision 1, is amended
15.21	to read:
15.22	Subdivision 1. Following a family assessment or a noncaregiver sex human trafficking
15.23	assessment. Administrative reconsideration is not applicable to a family assessment or
15.24	noncaregiver sex human trafficking assessment since no determination concerning
15.25	maltreatment is made.
15.26	EFFECTIVE DATE. This section is effective July 1, 2025.
15.27	Sec. 21. Minnesota Statutes 2023 Supplement, section 260E.35, subdivision 6, is amended
15.28	to read:
15.29	Subd. 6. Data retention. (a) Notwithstanding sections 138.163 and 138.17, a record
15.30	maintained or a record derived from a report of maltreatment by a local welfare agency,

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agency responsible for assessing or investigating the report, court services agency, or school

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under this chapter shall be destroyed as provided in paragraphs (b) to (e) by the responsible authority.

- (b) For a report alleging maltreatment that was not accepted for an assessment or an investigation, a family assessment case, a noncaregiver sex human trafficking assessment case, and a case where an investigation results in no determination of maltreatment or the need for child protective services, the record must be maintained for a period of five years after the date that the report was not accepted for assessment or investigation or the date of the final entry in the case record. A record of a report that was not accepted must contain sufficient information to identify the subjects of the report, the nature of the alleged maltreatment, and the reasons why the report was not accepted. Records under this paragraph may not be used for employment, background checks, or purposes other than to assist in future screening decisions and risk and safety assessments.
- (c) All records relating to reports that, upon investigation, indicate maltreatment or a need for child protective services shall be maintained for ten years after the date of the final entry in the case record.
- (d) All records regarding a report of maltreatment, including a notification of intent to interview that was received by a school under section 260E.22, subdivision 7, shall be destroyed by the school when ordered to do so by the agency conducting the assessment or investigation. The agency shall order the destruction of the notification when other records relating to the report under investigation or assessment are destroyed under this subdivision.
- (e) Private or confidential data released to a court services agency under subdivision 3, paragraph (d), must be destroyed by the court services agency when ordered to do so by the local welfare agency that released the data. The local welfare agency or agency responsible for assessing or investigating the report shall order destruction of the data when other records relating to the assessment or investigation are destroyed under this subdivision.

EFFECTIVE DATE. This section is effective July 1, 2025.

Sec. 22. Minnesota Statutes 2022, section 260E.36, subdivision 1a, is amended to read:

Subd. 1a. Sex Human trafficking and, sexual exploitation and youth missing from care training requirement. As required by the Child Abuse Prevention and Treatment Act amendments through Public Law 114-22 and to implement Public Law Laws 113-183 and 115-123, all child protection social workers and social services staff who have responsibility for child protective duties under this chapter or chapter 260C shall complete training implemented by the commissioner of human services regarding sex identification, prevention

	prevention for youth missing from care.
	EFFECTIVE DATE. This section is effective July 1, 2025.
	Sec. 23. REVISOR INSTRUCTION.
	The revisor of statutes shall renumber the subdivisions in Minnesota Statutes, section
	260E.03, in alphabetical order except for subdivision 1 and correct any cross-reference
_	changes that result.
	ARTICLE 3
	CHILD CARE LICENSING
	Section 1. [142B.171] CHILD CARE WEIGHTED RISK SYSTEM.
	Subdivision 1. Implementation. The commissioner shall develop and implement a child
	care weighted risk system that provides a tiered licensing enforcement framework for child
	care licensing requirements in this chapter or Minnesota Rules, chapter 9502 or 9503.
	Subd. 2. Documented technical assistance. (a) In lieu of a correction order under section
	142B.16, the commissioner shall provide documented technical assistance to a family child
	care or child care center license holder if the commissioner finds that:
	(1) the license holder has failed to comply with a requirement in this chapter or Minnesota
	Rules, chapter 9502 or 9503, that the commissioner determines to be low risk as determined
	by the child care weighted risk system;
	(2) the noncompliance does not imminently endanger the health, safety, or rights of the
	persons served by the program; and
	(3) the license holder did not receive documented technical assistance or a correction
	order for the same violation at the license holder's most recent annual licensing inspection.
	(b) Documented technical assistance must include communication from the commissioner
	to the child care provider that:
	(1) states the conditions that constitute a violation of a law or rule;
	(2) references the specific law or rule violated; and
	(3) explains remedies for correcting the violation.
	(c) The commissioner shall not publicly publish documented technical assistance on the
	department's website.

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as introduced

Sec. 2. **REPEALER.**

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Minnesota Statutes 2022, section 245A.065, is repealed.

18.3	ARTICLE 4
18.4	TECHNICAL CORRECTIONS

- Section 1. Minnesota Statutes 2022, section 245.975, subdivision 2, is amended to read:
- Subd. 2. **Duties.** (a) The ombudsperson's duties shall include: 18.6
- (1) advocating on behalf of a family child care provider to address all areas of concern related to the provision of child care services, including licensing monitoring activities, licensing actions, and other interactions with state and county licensing staff; 18.9
 - (2) providing recommendations for family child care improvement or family child care provider education;
 - (3) operating a telephone line to answer questions, receive complaints, and discuss agency actions when a family child care provider believes that the provider's rights or program may have been adversely affected; and
 - (4) assisting a family child care license applicant with navigating the application process.
 - (b) The ombudsperson must report annually by December 31 to the commissioner of children, youth, and families and the chairs and ranking minority members of the legislative committees with jurisdiction over child care on the services provided by the ombudsperson to child care providers, including the number and locations of child care providers served and the activities of the ombudsperson in carrying out the duties under this section. The commissioner shall determine the form of the report and may specify additional reporting requirements.
 - Sec. 2. Minnesota Statutes 2022, section 245.975, subdivision 4, is amended to read:
 - Subd. 4. Access to records. (a) The ombudsperson or designee, excluding volunteers, has access to any data of a state agency necessary for the discharge of the ombudsperson's duties, including records classified as confidential data on individuals or private data on individuals under chapter 13 or any other law. The ombudsperson's data request must relate to a specific case and is subject to section 13.03, subdivision 4. If the data concerns an individual, the ombudsperson or designee shall first obtain the individual's consent. If the individual is unable to consent and has no parent or legal guardian, then the ombudsperson's or designee's access to the data is authorized by this section.

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- (b) The ombudsperson and designees must adhere to the Minnesota Government Data Practices Act and must not disseminate any private or confidential data on individuals unless specifically authorized by state, local, or federal law or pursuant to a court order.
- (c) The commissioner <u>of human services</u>; the commissioner of children, youth, and <u>families</u>; and any county agency must provide the ombudsperson copies of all fix-it tickets, correction orders, and licensing actions issued to family child care providers.
- Sec. 3. Minnesota Statutes 2022, section 245.975, subdivision 9, is amended to read:
- Subd. 9. **Posting.** (a) The commissioner <u>of children</u>, youth, and families shall post on the department's website the mailing address, email address, and telephone number for the office of the ombudsperson. The commissioner shall provide family child care providers with the mailing address, email address, and telephone number of the ombudsperson's office on the family child care licensing website and upon request of a family child care applicant or provider. Counties must provide family child care applicants and providers with the name, mailing address, email address, and telephone number of the ombudsperson's office upon request.
- (b) The ombudsperson must approve all postings and notices required by the department and counties under this subdivision.
- 19.18 Sec. 4. Minnesota Statutes 2023 Supplement, section 256.4793, subdivision 3, is amended to read:
 - Subd. 3. **Special revenue account established.** (a) Funds appropriated under this section shall be transferred to a special revenue account. The commissioner shall retain federal reimbursement generated under this section. Federal reimbursement shall be transferred to the special revenue account and is appropriated to the commissioner for the purposes of this section. The commissioner shall transfer funds for administrative activities that support implementing prevention services activities to the special revenue fund and shall retain federal reimbursement generated under this section.
 - (b) The commissioner must provide an annual report to the chairs and ranking minority members of the legislative committees with jurisdiction over health and human services policy and finance that identifies the amount of funds appropriated and transferred to this account under paragraph (a) and how the funds were used.

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Sec. 5. Minnesota Statutes 2023 Supplement, section 256.4794, subdivision 3, is amended to read:

- Subd. 3. Special revenue account established. (a) Funds appropriated under this section shall be transferred to a special revenue account. The commissioner shall retain federal reimbursement generated under this section. Federal reimbursement shall be transferred to the special revenue account and is appropriated to the commissioner for the purposes of this section. The commissioner shall transfer funds for administrative activities that support implementing prevention services activities to the special revenue fund and shall retain federal reimbursement generated under this section.
- (b) The commissioner must provide an annual report to the chairs and ranking minority members of the legislative committees with jurisdiction over health and human services policy and finance that identifies the amount of funds appropriated and transferred to this account under paragraph (a) and how the funds were used.
- Sec. 6. Minnesota Statutes 2023 Supplement, section 256B.0622, subdivision 8, is amended to read:
 - Subd. 8. Medical assistance payment for assertive community treatment and intensive residential treatment services. (a) Payment for intensive residential treatment services and assertive community treatment in this section shall be based on one daily rate per provider inclusive of the following services received by an eligible client in a given calendar day: all rehabilitative services under this section, staff travel time to provide rehabilitative services under this section, and nonresidential crisis stabilization services under section 256B.0624.
 - (b) Except as indicated in paragraph (c), payment will not be made to more than one entity for each client for services provided under this section on a given day. If services under this section are provided by a team that includes staff from more than one entity, the team must determine how to distribute the payment among the members.
- (c) The commissioner shall determine one rate for each provider that will bill medical assistance for residential services under this section and one rate for each assertive community treatment provider. If a single entity provides both services, one rate is established for the entity's residential services and another rate for the entity's nonresidential services under this section. A provider is not eligible for payment under this section without authorization from the commissioner. The commissioner shall develop rates using the following criteria:

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(1) the provider's cost for services shall include direct services costs, or	other program
costs, and other costs determined as follows:	

- (i) the direct services costs must be determined using actual costs of salaries, benefits, payroll taxes, and training of direct service staff and service-related transportation;
- (ii) other program costs not included in item (i) must be determined as a specified percentage of the direct services costs as determined by item (i). The percentage used shall be determined by the commissioner based upon the average of percentages that represent the relationship of other program costs to direct services costs among the entities that provide similar services;
- (iii) physical plant costs calculated based on the percentage of space within the program 21.10 that is entirely devoted to treatment and programming. This does not include administrative 21.11 or residential space; 21.12
- (iv) assertive community treatment physical plant costs must be reimbursed as part of 21.13 the costs described in item (ii); and 21.14
 - (v) subject to federal approval, up to an additional five percent of the total rate may be added to the program rate as a quality incentive based upon the entity meeting performance criteria specified by the commissioner;
 - (2) actual cost is defined as costs which are allowable, allocable, and reasonable, and consistent with federal reimbursement requirements under Code of Federal Regulations, title 48, chapter 1, part 31, relating to for-profit entities, and Office of Management and Budget Circular Number A-122, relating to nonprofit entities;
- (3) the number of service units; 21.22
- (4) the degree to which clients will receive services other than services under this section; 21.23 and 21.24
- (5) the costs of other services that will be separately reimbursed. 21.25
- (d) The rate for intensive residential treatment services and assertive community treatment 21.26 must exclude the medical assistance room and board rate, as defined in section 256B.056, 21.27 subdivision 5d, and services not covered under this section, such as partial hospitalization, 21.28 home care, and inpatient services. 21.29
 - (e) Physician services that are not separately billed may be included in the rate to the extent that a psychiatrist, or other health care professional providing physician services within their scope of practice, is a member of the intensive residential treatment services

treatment team. Physician services, whether billed separately or included in the rate, may be delivered by telehealth. For purposes of this paragraph, "telehealth" has the meaning given to "mental health telehealth" in section 256B.0625, subdivision 46, when telehealth is used to provide intensive residential treatment services.

- (f) When services under this section are provided by an assertive community treatment provider, case management functions must be an integral part of the team.
- (g) The rate for a provider must not exceed the rate charged by that provider for the same service to other payors.
- (h) The rates for existing programs must be established prospectively based upon the expenditures and utilization over a prior 12-month period using the criteria established in paragraph (c). The rates for new programs must be established based upon estimated expenditures and estimated utilization using the criteria established in paragraph (c).
- (i) Effective for the rate years beginning on and after January 1, 2024, rates for assertive community treatment, adult residential crisis stabilization services, and intensive residential treatment services must be annually adjusted for inflation using the Centers for Medicare and Medicaid Services Medicare Economic Index, as forecasted in the fourth third quarter of the calendar year before the rate year. The inflation adjustment must be based on the 12-month period from the midpoint of the previous rate year to the midpoint of the rate year for which the rate is being determined.
- (j) Entities who discontinue providing services must be subject to a settle-up process whereby actual costs and reimbursement for the previous 12 months are compared. In the event that the entity was paid more than the entity's actual costs plus any applicable performance-related funding due the provider, the excess payment must be reimbursed to the department. If a provider's revenue is less than actual allowed costs due to lower utilization than projected, the commissioner may reimburse the provider to recover its actual allowable costs. The resulting adjustments by the commissioner must be proportional to the percent of total units of service reimbursed by the commissioner and must reflect a difference of greater than five percent.
- 22.29 (k) A provider may request of the commissioner a review of any rate-setting decision made under this subdivision.

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Sec. 7. Minnesota Statutes 2023 Supplement, section 256B.0947, subdivision 7, is amended to read:

- Subd. 7. **Medical assistance payment and rate setting.** (a) Payment for services in this section must be based on one daily encounter rate per provider inclusive of the following services received by an eligible client in a given calendar day: all rehabilitative services, supports, and ancillary activities under this section, staff travel time to provide rehabilitative services under this section, and crisis response services under section 256B.0624.
- (b) Payment must not be made to more than one entity for each client for services provided under this section on a given day. If services under this section are provided by a team that includes staff from more than one entity, the team shall determine how to distribute the payment among the members.
- (c) The commissioner shall establish regional cost-based rates for entities that will bill medical assistance for nonresidential intensive rehabilitative mental health services. In developing these rates, the commissioner shall consider:
- 23.15 (1) the cost for similar services in the health care trade area;
- 23.16 (2) actual costs incurred by entities providing the services;
- 23.17 (3) the intensity and frequency of services to be provided to each client;
- 23.18 (4) the degree to which clients will receive services other than services under this section; 23.19 and
- 23.20 (5) the costs of other services that will be separately reimbursed.
- 23.21 (d) The rate for a provider must not exceed the rate charged by that provider for the same service to other payers.
- 23.23 (e) Effective for the rate years beginning on and after January 1, 2024, rates must be
 23.24 annually adjusted for inflation using the Centers for Medicare and Medicaid Services
 23.25 Medicare Economic Index, as forecasted in the <u>fourth third</u> quarter of the calendar year
 23.26 before the rate year. The inflation adjustment must be based on the 12-month period from
 23.27 the midpoint of the previous rate year to the midpoint of the rate year for which the rate is
 23.28 being determined.
- Sec. 8. Minnesota Statutes 2023 Supplement, section 260.014, is amended by adding a subdivision to read:
- 23.31 <u>Subd. 5. Carryforward authority.</u> Funds appropriated under this section are available for two fiscal years.

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start-up grants to the Red Lake Nation, White

Earth Nation, and Mille Lacs Band of Ojibwe

to develop a fraud prevention program. This

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- is a onetime appropriation and is available
- 25.2 until June 30, 2025.
- 25.3 (b) American Indian food sovereignty
- 25.4 **funding program.** \$3,000,000 in fiscal year
- 25.5 2024 and \$3,000,000 in fiscal year 2025 are
- 25.6 for Minnesota Statutes, section 256E.342. This
- appropriation is available until June 30, 2025.
- 25.8 The base for this appropriation is \$2,000,000
- 25.9 in fiscal year 2026 and \$2,000,000 in fiscal
- 25.10 year 2027.
- 25.11 (c) Hennepin County grants to provide
- 25.12 services to people experiencing
- 25.13 **homelessness.** \$11,432,000 in fiscal year 2024
- 25.14 is for grants to maintain capacity for shelters
- 25.15 and services provided to persons experiencing
- 25.16 homelessness in Hennepin County. Of this
- 25.17 amount:
- 25.18 (1) \$4,500,000 is for a grant to Avivo Village;
- 25.19 (2) \$2,000,000 is for a grant to the American
- 25.20 Indian Community Development Corporation
- 25.21 Homeward Bound shelter;
- 25.22 (3) \$1,650,000 is for a grant to the Salvation
- 25.23 Army Harbor Lights shelter;
- 25.24 (4) \$500,000 is for a grant to Agate Housing
- 25.25 and Services;
- 25.26 (5) \$1,400,000 is for a grant to Catholic
- 25.27 Charities of St. Paul and Minneapolis;
- 25.28 (6) \$450,000 is for a grant to Simpson
- 25.29 Housing; and
- 25.30 (7) \$932,000 is for a grant to Hennepin
- 25.31 County.
- 25.32 Nothing shall preclude an eligible organization
- 25.33 receiving funding under this paragraph from

26.1	applying for and receiving funding under
26.2	Minnesota Statutes, section 256E.33, 256E.36,
26.3	256K.45, or 256K.47, nor does receiving
26.4	funding under this paragraph count against
26.5	any eligible organization in the competitive
26.6	processes related to those grant programs
26.7	under Minnesota Statutes, section 256E.33,
26.8	256E.36, 256K.45, or 256K.47.
26.9	(d) Diaper distribution grant program.
26.10	\$545,000 in fiscal year 2024 and \$553,000 in
26.11	fiscal year 2025 are for a grant to the Diaper
26.12	Bank of Minnesota under Minnesota Statutes,
26.13	section 256E.38.
26.14	(e) Prepared meals food relief. \$1,654,000
26.15	in fiscal year 2024 and \$1,638,000 in fiscal
26.16	year 2025 are for prepared meals food relief
26 17	4- This is a small man and a disc.
26.17	grants. This is a onetime appropriation.
26.18	(f) Emergency shelter facilities. \$98,456,000
26.18	(f) Emergency shelter facilities. \$98,456,000
26.18 26.19	(f) Emergency shelter facilities. \$98,456,000 in fiscal year 2024 is for grants to eligible
26.18 26.19 26.20	(f) Emergency shelter facilities. \$98,456,000 in fiscal year 2024 is for grants to eligible applicants for emergency shelter facilities.
26.18 26.19 26.20 26.21	(f) Emergency shelter facilities. \$98,456,000 in fiscal year 2024 is for grants to eligible applicants for emergency shelter facilities. This is a onetime appropriation and is
26.18 26.19 26.20 26.21 26.22	(f) Emergency shelter facilities. \$98,456,000 in fiscal year 2024 is for grants to eligible applicants for emergency shelter facilities. This is a onetime appropriation and is available until June 30, 2028.
26.18 26.19 26.20 26.21 26.22 26.23	 (f) Emergency shelter facilities. \$98,456,000 in fiscal year 2024 is for grants to eligible applicants for emergency shelter facilities. This is a onetime appropriation and is available until June 30, 2028. (g) Homeless youth cash stipend pilot
26.18 26.19 26.20 26.21 26.22 26.23 26.24	 (f) Emergency shelter facilities. \$98,456,000 in fiscal year 2024 is for grants to eligible applicants for emergency shelter facilities. This is a onetime appropriation and is available until June 30, 2028. (g) Homeless youth cash stipend pilot project. \$5,302,000 in fiscal year 2024 is for
26.18 26.19 26.20 26.21 26.22 26.23 26.24 26.25	(f) Emergency shelter facilities. \$98,456,000 in fiscal year 2024 is for grants to eligible applicants for emergency shelter facilities. This is a onetime appropriation and is available until June 30, 2028. (g) Homeless youth cash stipend pilot project. \$5,302,000 in fiscal year 2024 is for a grant to Youthprise for the homeless youth
26.18 26.19 26.20 26.21 26.22 26.23 26.24 26.25 26.26	(f) Emergency shelter facilities. \$98,456,000 in fiscal year 2024 is for grants to eligible applicants for emergency shelter facilities. This is a onetime appropriation and is available until June 30, 2028. (g) Homeless youth cash stipend pilot project. \$5,302,000 in fiscal year 2024 is for a grant to Youthprise for the homeless youth cash stipend pilot project. The grant must be
26.18 26.19 26.20 26.21 26.22 26.23 26.24 26.25 26.26 26.27	(f) Emergency shelter facilities. \$98,456,000 in fiscal year 2024 is for grants to eligible applicants for emergency shelter facilities. This is a onetime appropriation and is available until June 30, 2028. (g) Homeless youth cash stipend pilot project. \$5,302,000 in fiscal year 2024 is for a grant to Youthprise for the homeless youth cash stipend pilot project. The grant must be used to provide cash stipends to homeless
26.18 26.19 26.20 26.21 26.22 26.23 26.24 26.25 26.26 26.27 26.28	(f) Emergency shelter facilities. \$98,456,000 in fiscal year 2024 is for grants to eligible applicants for emergency shelter facilities. This is a onetime appropriation and is available until June 30, 2028. (g) Homeless youth cash stipend pilot project. \$5,302,000 in fiscal year 2024 is for a grant to Youthprise for the homeless youth cash stipend pilot project. The grant must be used to provide cash stipends to homeless youth, provide cash incentives for stipend
26.18 26.19 26.20 26.21 26.22 26.23 26.24 26.25 26.26 26.27 26.28 26.29	(f) Emergency shelter facilities. \$98,456,000 in fiscal year 2024 is for grants to eligible applicants for emergency shelter facilities. This is a onetime appropriation and is available until June 30, 2028. (g) Homeless youth cash stipend pilot project. \$5,302,000 in fiscal year 2024 is for a grant to Youthprise for the homeless youth cash stipend pilot project. The grant must be used to provide cash stipends to homeless youth, provide cash incentives for stipend recipients to participate in periodic surveys,
26.18 26.19 26.20 26.21 26.22 26.23 26.24 26.25 26.26 26.27 26.28 26.29 26.30	(f) Emergency shelter facilities. \$98,456,000 in fiscal year 2024 is for grants to eligible applicants for emergency shelter facilities. This is a onetime appropriation and is available until June 30, 2028. (g) Homeless youth cash stipend pilot project. \$5,302,000 in fiscal year 2024 is for a grant to Youthprise for the homeless youth cash stipend pilot project. The grant must be used to provide cash stipends to homeless youth, provide cash incentives for stipend recipients to participate in periodic surveys, provide youth-designed optional services, and

27.1 (h) Heading Home Ramsey County

- continuum of care grants. \$11,432,000 in
- 27.3 fiscal year 2024 is for grants to maintain
- 27.4 capacity for shelters and services provided to
- 27.5 people experiencing homelessness in Ramsey
- 27.6 County. Of this amount:
- 27.7 (1) \$2,286,000 is for a grant to Catholic
- 27.8 Charities of St. Paul and Minneapolis;
- 27.9 (2) \$1,498,000 is for a grant to More Doors;
- 27.10 (3) \$1,734,000 is for a grant to Interfaith
- 27.11 Action Project Home;
- 27.12 (4) \$2,248,000 is for a grant to Ramsey
- 27.13 County;
- 27.14 (5) \$689,000 is for a grant to Radias Health;
- 27.15 (6) \$493,000 is for a grant to The Listening
- 27.16 House;
- 27.17 (7) \$512,000 is for a grant to Face to Face;
- 27.18 and
- 27.19 (8) \$1,972,000 is for a grant to the city of St.
- 27.20 Paul.
- Nothing shall preclude an eligible organization
- 27.22 receiving funding under this paragraph from
- 27.23 applying for and receiving funding under
- 27.24 Minnesota Statutes, section 256E.33, 256E.36,
- 27.25 256K.45, or 256K.47, nor does receiving
- 27.26 funding under this paragraph count against
- 27.27 any eligible organization in the competitive
- 27.28 processes related to those grant programs
- under Minnesota Statutes, section 256E.33,
- 27.30 256E.36, 256K.45, or 256K.47.
- 27.31 (i) Capital for emergency food distribution
- 27.32 **facilities.** \$7,000,000 in fiscal year 2024 is for
- 27.33 improving and expanding the infrastructure

28.1	of food shelf facilities. Grant money must be
28.2	made available to nonprofit organizations,
28.3	federally recognized Tribes, and local units of
28.4	government. This is a onetime appropriation
28.5	and is available until June 30, 2027.
28.6	(j) Emergency services program grants.
28.7	\$15,250,000 in fiscal year 2024 and
28.8	\$14,750,000 in fiscal year 2025 are for
28.9	emergency services grants under Minnesota
28.10	Statutes, section 256E.36. Any unexpended
28.11	amount in the first year does not cancel and
28.12	is available in the second year. The base for
28.13	this appropriation is \$25,000,000 in fiscal year
28.14	2026 and \$30,000,000 in fiscal year 2027.
28.15	(k) Homeless Youth Act grants. \$15,136,000
28.16	in fiscal year 2024 and \$15,136,000 in fiscal
28.17	year 2025 are for grants under Minnesota
28.18	Statutes, section 256K.45, subdivision 1. Any
28.19	unexpended amount in the first year does not
28.20	cancel and is available in the second year.
28.21	(l) Transitional housing programs.
28.22	\$3,000,000 in fiscal year 2024 and \$3,000,000
28.23	in fiscal year 2025 are for transitional housing
28.24	programs under Minnesota Statutes, section
28.25	256E.33. Any unexpended amount in the first
28.26	year does not cancel and is available in the
28.27	second year.
28.28	(m) Safe harbor shelter and housing grants.
28.29	\$2,125,000 in fiscal year 2024 and \$2,125,000
28.30	in fiscal year 2025 are for grants under
28.31	Minnesota Statutes, section 256K.47. Any
28.32	unexpended amount in the first year does not
28.33	cancel and is available in the second year. The
28.34	base for this appropriation is \$1,250,000 in

DTT/VJ

24-08006

as introduced

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04/03/24

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EFFECTIVE DATE. Paragraph (b) is effective the day following final enactment.

30.1 **ARTICLE 5**

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30.2 **DEPARTMENT OF HEALTH**

Section 1. Minnesota Statutes 2022, section 62D.14, subdivision 1, is amended to read:

Subdivision 1. **Examination authority.** The commissioner of health may make an examination of the affairs of any health maintenance organization and its contracts, agreements, or other arrangements with any participating entity as often as the commissioner of health deems necessary for the protection of the interests of the people of this state, but not less frequently than once every three <u>five</u> years. Examinations of participating entities pursuant to this subdivision shall be limited to their dealings with the health maintenance organization and its enrollees, except that examinations of major participating entities may include inspection of the entity's financial statements kept in the ordinary course of business. The commissioner may require major participating entities to submit the financial statements directly to the commissioner. Financial statements of major participating entities are subject to the provisions of section 13.37, subdivision 1, clause (b), upon request of the major participating entity or the health maintenance organization with which it contracts.

Sec. 2. Minnesota Statutes 2022, section 144.05, subdivision 6, is amended to read:

Subd. 6. **Reports on interagency agreements and intra-agency transfers.** The commissioner of health shall provide quarterly reports to the chairs and ranking minority members of the legislative committees with jurisdiction over health and human services policy and finance on: the interagency agreements and intra-agency transfers report per section 15.0395.

(1) interagency agreements or service-level agreements and any renewals or extensions of existing interagency or service-level agreements with a state department under section 15.01, state agency under section 15.012, or the Department of Information Technology Services, with a value of more than \$100,000, or related agreements with the same department or agency with a cumulative value of more than \$100,000; and

(2) transfers of appropriations of more than \$100,000 between accounts within or between agencies.

The report must include the statutory citation authorizing the agreement, transfer or dollar amount, purpose, and effective date of the agreement, duration of the agreement, and a copy of the agreement.

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Sec. 3. Minnesota Statutes 2023 Supplement, section 144.1501, subdivision 2, is amended to read:

- Subd. 2. Creation of account Availability. (a) A health professional education loan forgiveness program account is established. The commissioner of health shall use money from the account to establish a appropriated for health professional education loan forgiveness program in this section:
- (1) for medical residents, mental health professionals, and alcohol and drug counselors agreeing to practice in designated rural areas or underserved urban communities or specializing in the area of pediatric psychiatry;
- (2) for midlevel practitioners agreeing to practice in designated rural areas or to teach at least 12 credit hours, or 720 hours per year in the nursing field in a postsecondary program at the undergraduate level or the equivalent at the graduate level;
- (3) for nurses who agree to practice in a Minnesota nursing home; in an intermediate care facility for persons with developmental disability; in a hospital if the hospital owns and operates a Minnesota nursing home and a minimum of 50 percent of the hours worked by the nurse is in the nursing home; in an assisted living facility as defined in section 144G.08, subdivision 7; or for a home care provider as defined in section 144A.43, subdivision 4; or agree to teach at least 12 credit hours, or 720 hours per year in the nursing field in a postsecondary program at the undergraduate level or the equivalent at the graduate level;
- (4) for other health care technicians agreeing to teach at least 12 credit hours, or 720 hours per year in their designated field in a postsecondary program at the undergraduate level or the equivalent at the graduate level. The commissioner, in consultation with the Healthcare Education-Industry Partnership, shall determine the health care fields where the need is the greatest, including, but not limited to, respiratory therapy, clinical laboratory technology, radiologic technology, and surgical technology;
- (5) for pharmacists, advanced dental therapists, dental therapists, and public health nurses who agree to practice in designated rural areas;
- (6) for dentists agreeing to deliver at least 25 percent of the dentist's yearly patient encounters to state public program enrollees or patients receiving sliding fee schedule discounts through a formal sliding fee schedule meeting the standards established by the United States Department of Health and Human Services under Code of Federal Regulations, title 42, section 51, chapter 303; and

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- (7) for nurses employed as a hospital nurse by a nonprofit hospital and providing direct care to patients at the nonprofit hospital.
- (b) Appropriations made to the account for health professional education loan forgiveness in this section do not cancel and are available until expended, except that at the end of each biennium, any remaining balance in the account that is not committed by contract and not needed to fulfill existing commitments shall cancel to the fund.
- Sec. 4. Minnesota Statutes 2022, section 144.1501, subdivision 5, is amended to read:
- Subd. 5. **Penalty for nonfulfillment.** If a participant does not fulfill the required minimum commitment of service according to subdivision 3, the commissioner of health shall collect from the participant the total amount paid to the participant under the loan forgiveness program plus interest at a rate established according to section 270C.40. The commissioner shall deposit the money collected in the health care access fund to be credited to a dedicated account in the special revenue fund. The balance of the account is appropriated annually to the commissioner for the health professional education loan forgiveness program account established in subdivision 2. The commissioner shall allow waivers of all or part of the money owed the commissioner as a result of a nonfulfillment penalty if emergency circumstances prevented fulfillment of the minimum service commitment.
- Sec. 5. Minnesota Statutes 2023 Supplement, section 144.1505, subdivision 2, is amended to read:
- Subd. 2. **Programs.** (a) For advanced practice provider clinical training expansion grants, the commissioner of health shall award health professional training site grants to eligible physician assistant, advanced practice registered nurse, pharmacy, dental therapy, and mental health professional programs to plan and implement expanded clinical training. A planning grant shall not exceed \$75,000, and a three-year training grant shall not exceed \$150,000 for the first year, \$100,000 for the second year, and \$50,000 for the third year \$300,000 per program project. The commissioner may provide a one-year, no-cost extension for grants.
- (b) For health professional rural and underserved clinical rotations grants, the commissioner of health shall award health professional training site grants to eligible physician, physician assistant, advanced practice registered nurse, pharmacy, dentistry, dental therapy, and mental health professional programs to augment existing clinical training programs to add rural and underserved rotations or clinical training experiences, such as credential or certificate rural tracks or other specialized training. For physician and dentist training, the expanded training must include rotations in primary care settings such as

33.1 33.2	community clinics, hospitals, health maintenance organizations, or practices in rural communities.
33.3	(c) Funds may be used for:
33.4	(1) establishing or expanding rotations and clinical training;
33.5	(2) recruitment, training, and retention of students and faculty;
33.6	(3) connecting students with appropriate clinical training sites, internships, practicums,
33.7	or externship activities;
33.8	(4) travel and lodging for students;
33.9	(5) faculty, student, and preceptor salaries, incentives, or other financial support;
33.10	(6) development and implementation of cultural competency training;
33.11	(7) evaluations;
33.12	(8) training site improvements, fees, equipment, and supplies required to establish,
33.13	maintain, or expand a training program; and
33.14	(9) supporting clinical education in which trainees are part of a primary care team model.
33.15	Sec. 6. Minnesota Statutes 2022, section 144A.70, subdivision 3, is amended to read:
33.16	Subd. 3. Controlling person. "Controlling person" means a business entity or entities,
33.17	officer, program administrator, or director, whose responsibilities include the direction of
33.18	the management or policies of a supplemental nursing services agency the management and
33.19	decision-making authority to establish or control business policy and all other policies of a
33.20	supplemental nursing services agency. Controlling person also means an individual who,
33.21	directly or indirectly, beneficially owns an interest in a corporation, partnership, or other
33.22	business association that is a controlling person.
33.23	Sec. 7. Minnesota Statutes 2022, section 144A.70, subdivision 5, is amended to read:
33.24	Subd. 5. Person. "Person" includes an individual, firm, corporation, partnership, limited
33.25	liability company, or association.
33.26	Sec. 8. Minnesota Statutes 2022, section 144A.70, subdivision 6, is amended to read:
33.27	Subd. 6. Supplemental nursing services agency. "Supplemental nursing services
33.28	agency" means a person, firm, corporation, partnership, limited liability company, or
33.29	association engaged for hire in the business of providing or procuring temporary employment

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REVISOR

in health care facilities for nurses, nursing assistants, nurse aides, and orderlies. Supplemental
nursing services agency does not include an individual who only engages in providing the
individual's services on a temporary basis to health care facilities. Supplemental nursing
services agency does not include a professional home care agency licensed under section
144A.471 that only provides staff to other home care providers.
Sec. 9. Minnesota Statutes 2022, section 144A.70, subdivision 7, is amended to read:

- - Subd. 7. Oversight. The commissioner is responsible for the oversight of supplemental nursing services agencies through annual semiannual unannounced surveys and follow-up surveys, complaint investigations under sections 144A.51 to 144A.53, and other actions necessary to ensure compliance with sections 144A.70 to 144A.74.
- Sec. 10. Minnesota Statutes 2022, section 144A.71, subdivision 2, is amended to read: 34.11
- Subd. 2. Application information and fee. The commissioner shall establish forms and 34.12 procedures for processing each supplemental nursing services agency registration application. 34.13 An application for a supplemental nursing services agency registration must include at least 34.14 the following: 34.15
 - (1) the names and addresses of the owner or owners all owners and controlling persons of the supplemental nursing services agency;
 - (2) if the owner is a corporation, copies of its articles of incorporation and current bylaws, together with the names and addresses of its officers and directors;
 - (3) satisfactory proof of compliance with section 144A.72, subdivision 1, clauses (5) to (7) if the owner is a limited liability company, copies of its articles of organization and operating agreement, together with the names and addresses of its officers and directors;
 - (4) documentation that the supplemental nursing services agency has medical malpractice insurance to insure against the loss, damage, or expense of a claim arising out of the death or injury of any person as the result of negligence or malpractice in the provision of health care services by the supplemental nursing services agency or by any employee of the agency;
 - (5) documentation that the supplemental nursing services agency has an employee dishonesty bond in the amount of \$10,000;
- (6) documentation that the supplemental nursing services agency has insurance coverage 34.29 for workers' compensation for all nurses, nurse aids, and orderlies provided or procured by 34.30 34.31 the agency;

35.1	(7) documentation that the supplemental nursing services agency filed with the
35.2	commissioner of revenue: (i) the name and address of the bank, savings bank, or savings
35.3	association in which the supplemental nursing services agency deposits all employee income
35.4	tax withholdings; and (ii) the name and address of any nurse, nurse aid, or orderly whose
35.5	income is derived from placement by the agency, if the agency purports the income is not
35.6	subject to withholding;
35.7	(4) (8) any other relevant information that the commissioner determines is necessary to
35.8	properly evaluate an application for registration;
35.9	(5) (9) a policy and procedure that describes how the supplemental nursing services
35.10	agency's records will be immediately available at all times to the commissioner and facility;
35.11	and
35.12	(6) (10) a nonrefundable registration fee of \$2,035.
35.13	If a supplemental nursing services agency fails to provide the items in this subdivision
35.14	to the department, the commissioner shall immediately suspend or refuse to issue the
35.15	supplemental nursing services agency registration. The supplemental nursing services agency
35.16	may appeal the commissioner's findings according to section 144A.475, subdivisions 3a
35.17	and 7, except that the hearing must be conducted by an administrative law judge within 60
35.18	calendar days of the request for hearing assignment.
35.19	Sec. 11. Minnesota Statutes 2022, section 144A.71, is amended by adding a subdivision
35.20	to read:
35.21	Subd. 2a. Renewal applications. An applicant for registration renewal must complete
35.22	the registration application form supplied by the department. An application must be
35.23	submitted at least 60 days before the expiration of the current registration.
35.24	Sec. 12. [144A.715] PENALTIES.
35.25	Subdivision 1. Authority. The fines imposed under this section are in accordance with
35.26	section 144.653, subdivision 6.
35.27	Subd. 2. Fines. Each violation of sections 144A.70 to 144A.74, not corrected at the time
35.28	of a follow-up survey, is subject to a fine. A fine must be assessed according to the schedules
35.29	established in the sections violated.
35.30	Subd. 3. Failure to correct. If, upon a subsequent follow-up survey after a fine has been
35.31	imposed under subdivision 2, a violation is still not corrected, another fine shall be assessed.
35.32	The fine shall be double the amount of the previous fine.

36.1	Subd. 4. Payment of fines. Payment of fines is due 15 business days from the registrant's
36.2	receipt of notice of the fine from the department.
36.3	Sec. 13. Minnesota Statutes 2022, section 144A.72, subdivision 1, is amended to read:
36.4	Subdivision 1. Minimum criteria. (a) The commissioner shall require that, as a condition
36.5	of registration:
36.6	(1) all owners and controlling persons must complete a background study under section
36.7	144.057 and receive a clearance or set aside of any disqualification;
36.8	(1) (2) the supplemental nursing services agency shall document that each temporary
36.9	employee provided to health care facilities currently meets the minimum licensing, training,
36.10	and continuing education standards for the position in which the employee will be working
36.11	and verifies competency for the position. A violation of this provision may be subject to a
36.12	fine of \$3,000;
36.13	(2) (3) the supplemental nursing services agency shall comply with all pertinent
36.14	requirements relating to the health and other qualifications of personnel employed in health
36.15	care facilities;
36.16	(3) (4) the supplemental nursing services agency must not restrict in any manner the
36.17	employment opportunities of its employees; A violation of this provision may be subject
36.18	to a fine of \$3,000;
36.19	(4) the supplemental nursing services agency shall carry medical malpractice insurance
36.20	to insure against the loss, damage, or expense incident to a claim arising out of the death
36.21	or injury of any person as the result of negligence or malpractice in the provision of health
36.22	care services by the supplemental nursing services agency or by any employee of the agency;
36.23	(5) the supplemental nursing services agency shall carry an employee dishonesty bond
36.24	in the amount of \$10,000;
36.25	(6) the supplemental nursing services agency shall maintain insurance coverage for
36.26	workers' compensation for all nurses, nursing assistants, nurse aides, and orderlies provided
36.27	or procured by the agency;
36.28	(7) the supplemental nursing services agency shall file with the commissioner of revenue:
36.29	(i) the name and address of the bank, savings bank, or savings association in which the
36.30	supplemental nursing services agency deposits all employee income tax withholdings; and
36 31	(ii) the name and address of any nurse, nursing assistant, nurse aide, or orderly whose income

is derived from placement by the agency, if the agency purports the income is not subject to withholding;

- (8) (5) the supplemental nursing services agency must not, in any contract with any employee or health care facility, require the payment of liquidated damages, employment fees, or other compensation should the employee be hired as a permanent employee of a health care facility; A violation of this provision may be subject to a fine of \$3,000;
- (9) (6) the supplemental nursing services agency shall document that each temporary employee provided to health care facilities is an employee of the agency and is not an independent contractor; and
- (10) (7) the supplemental nursing services agency shall retain all records for five calendar years. All records of the supplemental nursing services agency must be immediately available to the department.
- (b) In order to retain registration, the supplemental nursing services agency must provide services to a health care facility during the year in Minnesota within the past 12 months preceding the supplemental nursing services agency's registration renewal date.
- Sec. 14. Minnesota Statutes 2022, section 144A.73, is amended to read:

144A.73 COMPLAINT SYSTEM.

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- The commissioner shall establish a system for reporting complaints against a supplemental nursing services agency or its employees. Complaints may be made by any member of the public. Complaints against a supplemental nursing services agency shall be investigated by the Office of Health Facility Complaints commissioner of health under sections 144A.51 to 144A.53.
- Sec. 15. Minnesota Statutes 2023 Supplement, section 145.561, subdivision 4, is amended to read:
- Subd. 4. **988 telecommunications fee.** (a) In compliance with the National Suicide
 Hotline Designation Act of 2020, the commissioner shall impose a monthly statewide fee
 on each subscriber of a wireline, wireless, or IP-enabled voice service at a rate that provides
 must pay a monthly fee to provide for the robust creation, operation, and maintenance of a
 statewide 988 suicide prevention and crisis system.
- 37.30 (b) The commissioner shall annually recommend to the Public Utilities Commission an adequate and appropriate fee to implement this section. The amount of the fee must comply

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with the limits in paragraph (c). The commissioner shall provide telecommunication service 38.1 providers and carriers a minimum of 45 days' notice of each fee change. 38.2 (c) (b) The amount of the 988 telecommunications fee must not be more than 25 is 12 38.3 cents per month on or after January 1, 2024, for each consumer access line, including trunk 38.4 equivalents as designated by the commission Public Utilities Commission pursuant to section 38.5 403.11, subdivision 1. The 988 telecommunications fee must be the same for all subscribers. 38.6 (d) (c) Each wireline, wireless, and IP-enabled voice telecommunication service provider 38.7 shall collect the 988 telecommunications fee and transfer the amounts collected to the 38.8 commissioner of public safety in the same manner as provided in section 403.11, subdivision 38.9 38.10 1, paragraph (d). (e) (d) The commissioner of public safety shall deposit the money collected from the 38.11 988 telecommunications fee to the 988 special revenue account established in subdivision 38.12 3. 38.13 (f) (e) All 988 telecommunications fee revenue must be used to supplement, and not 38.14 supplant, federal, state, and local funding for suicide prevention. 38.15 (g) (f) The 988 telecommunications fee amount shall be adjusted as needed to provide 38.16 for continuous operation of the lifeline centers and 988 hotline, volume increases, and 38.17 maintenance. 38.18 (h) (g) The commissioner shall annually report to the Federal Communications 38.19 Commission on revenue generated by the 988 telecommunications fee. 38.20 **EFFECTIVE DATE.** This section is effective the day following final enactment. 38.21 Sec. 16. REPEALER. 38.22 Minnesota Statutes 2023 Supplement, section 144.0528, is repealed. 38.23 **ARTICLE 6** 38.24 DEPARTMENT OF CHILDREN, YOUTH, AND FAMILIES 38.25 Section 1. [142A.045] CHILDREN, YOUTH, AND FAMILIES 38.26 INTERGOVERNMENTAL ADVISORY COMMITTEE. 38.27 (a) An intergovernmental advisory committee is established to provide advice, 38.28

Article 6 Section 1.

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Notwithstanding section 15.059, the commissioner, the Association of Minnesota Counties,

consultation, and recommendations to the commissioner on the planning, design,

administration, funding, and evaluation of services to children, youth, and families.

Rules, part 2960.3070.

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section 142B.30. The approved training fulfills, in part, training required under Minnesota

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Sec. 3. Minnesota Statutes 2022, section 245A.07, subdivision 6, is amended to read:

- Subd. 6. Appeal of multiple sanctions. (a) When the license holder appeals more than one licensing action or sanction that were simultaneously issued by the commissioner, the license holder shall specify the actions or sanctions that are being appealed.
- (b) If there are different timelines prescribed in statutes for the licensing actions or sanctions being appealed, the license holder must submit the appeal within the longest of those timelines specified in statutes.
- (c) The appeal must be made in writing by certified mail or, by personal service, or through the provider licensing and reporting hub. If mailed, the appeal must be postmarked and sent to the commissioner within the prescribed timeline with the first day beginning the day after the license holder receives the certified letter. If a request is made by personal service, it must be received by the commissioner within the prescribed timeline with the first day beginning the day after the license holder receives the certified letter. If the appeal is made through the provider hub, the appeal must be received by the commissioner within the prescribed timeline with the first day beginning the day after the commissioner issued the order through the hub.
- (d) When there are different timelines prescribed in statutes for the appeal of licensing actions or sanctions simultaneously issued by the commissioner, the commissioner shall specify in the notice to the license holder the timeline for appeal as specified under paragraph (b).
- Sec. 4. Minnesota Statutes 2022, section 245A.10, subdivision 1, as amended by Laws 40.21 2024, chapter 80, article 2, section 48, is amended to read: 40.22
- Subdivision 1. Application or license fee required, programs exempt from fee. (a) 40.23 Unless exempt under paragraph (b), the commissioner shall charge a fee for evaluation of 40.24 applications and inspection of programs which are licensed under this chapter. 40.25
- (b) Except as provided under subdivision 2, no application or license fee shall be charged 40.26 40.27 for a child foster residence setting, adult foster care, or a community residential setting.
- Sec. 5. Minnesota Statutes 2022, section 245A.10, subdivision 2, as amended by Laws 40.28 2024, chapter 80, article 2, section 49, is amended to read: 40.29
- Subd. 2. County fees for applications and licensing inspections. (a) For purposes of 40.30 adult foster care and child foster residence setting licensing and licensing the physical plant 40.31 of a community residential setting, under this chapter, a county agency may charge a fee to 40.32

- a corporate applicant or corporate license holder to recover the actual cost of licensing inspections, not to exceed \$500 annually.
- (b) Counties may elect to reduce or waive the fees in paragraph (a) under the following circumstances:
- 41.5 (1) in cases of financial hardship;
- 41.6 (2) if the county has a shortage of providers in the county's area; or
- 41.7 (3) for new providers.

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Sec. 6. Minnesota Statutes 2022, section 245A.144, is amended to read:

245A.144 TRAINING ON RISK OF SUDDEN UNEXPECTED INFANT DEATH AND ABUSIVE HEAD TRAUMA FOR CHILD FOSTER CARE PROVIDERS.

- (a) Licensed child foster care providers that care for infants or children through five years of age must document that before staff persons and caregivers assist in the care of infants or children through five years of age, they are instructed on the standards in section 245A.1435 142B.46 and receive training on reducing the risk of sudden unexpected infant death and abusive head trauma from shaking infants and young children. This section does not apply to emergency relative placement under section 245A.035. The training on reducing the risk of sudden unexpected infant death and abusive head trauma may be provided as:
- (1) orientation training to child foster care providers, who care for infants or children through five years of age, under Minnesota Rules, part 2960.3070, subpart 1; or
- (2) in-service training to child foster care providers, who care for infants or children through five years of age, under Minnesota Rules, part 2960.3070, subpart 2.
- (b) Training required under this section must be at least one hour in length and must be completed at least once every five years. At a minimum, the training must address the risk factors related to sudden unexpected infant death and abusive head trauma, means of reducing the risk of sudden unexpected infant death and abusive head trauma, and license holder communication with parents regarding reducing the risk of sudden unexpected infant death and abusive head trauma.
- 41.28 (c) Training for child foster care providers must be approved by the county or private
 41.29 licensing agency that is responsible for monitoring the child foster care provider under
 41.30 section 245A.16. The approved training fulfills, in part, training required under Minnesota
 41.31 Rules, part 2960.3070.

42.1	Sec. 7. Minnesota Statutes 2023 Supplement, section 245A.16, subdivision 1, as amended
42.2	by Laws 2024, chapter 80, article 2, section 65, is amended to read:
42.3	Subdivision 1. Delegation of authority to agencies. (a) County agencies that have been
42.4	designated by the commissioner to perform licensing functions and activities under section
42.5	245A.04; to recommend denial of applicants under section 245A.05; to issue correction
42.6	orders, to issue variances, and recommend a conditional license under section 245A.06; or
42.7	to recommend suspending or revoking a license or issuing a fine under section 245A.07,
42.8	shall comply with rules and directives of the commissioner governing those functions and
42.9	with this section. The following variances are excluded from the delegation of variance
42.10	authority and may be issued only by the commissioner:
42.11	(1) dual licensure of family child foster care and family adult foster care, dual licensure
42.12	of child foster residence setting and community residential setting, and dual licensure of
42.13	family adult foster care and family child care;
42.14	(2) until the responsibility for family child foster care transfers to the commissioner of
42.15	children, youth, and families under Laws 2023, chapter 70, article 12, section 30, dual
42.16	licensure of family child foster care and family adult foster care;
42.17	(3) until the responsibility for family child care transfers to the commissioner of children,
42.18	youth, and families under Laws 2023, chapter 70, article 12, section 30, dual licensure of
42.19	family adult foster care and family child care;
42.20	(4) adult foster care maximum capacity;
42.21	(3) (5) adult foster care minimum age requirement;
42.22	(4) (6) child foster care maximum age requirement;
42.23	(5) (7) variances regarding disqualified individuals;
42.24	(6) (8) the required presence of a caregiver in the adult foster care residence during
42.25	normal sleeping hours;
42.26	(7) (9) variances to requirements relating to chemical use problems of a license holder
42.27	or a household member of a license holder; and
42.28	(8) (10) variances to section 142B.46 for the use of a cradleboard for a cultural
42.29	accommodation.
42.30	(b) Once the respective responsibilities transfer from the commissioner of human services
42.31	to the commissioner of children, youth, and families, under Laws 2023, chapter 70, article
42.32	12, section 30, the commissioners of human services and children, youth, and families must

13.1	both approve a variance for dual licensure of family child foster care and family adult foster
13.2	care or family adult foster care and family child care. Variances under this paragraph are
13.3	excluded from the delegation of variance authority and may be issued only by both
13.4	commissioners.
13.5	(b) (c) For family adult day services programs, the commissioner may authorize licensing
13.6	reviews every two years after a licensee has had at least one annual review.
13.7	(e) (d) A license issued under this section may be issued for up to two years.
13.8	(d) (e) During implementation of chapter 245D, the commissioner shall consider:
13.9	(1) the role of counties in quality assurance;
43.10	(2) the duties of county licensing staff; and
13.11	(3) the possible use of joint powers agreements, according to section 471.59, with counties
43.12	through which some licensing duties under chapter 245D may be delegated by the
43.13	commissioner to the counties.
13.14	Any consideration related to this paragraph must meet all of the requirements of the corrective
43.15	action plan ordered by the federal Centers for Medicare and Medicaid Services.
43.16	(e) (f) Licensing authority specific to section 245D.06, subdivisions 5, 6, 7, and 8, or
13.17	successor provisions; and section 245D.061 or successor provisions, for family child foster
43.18	care programs providing out-of-home respite, as identified in section 245D.03, subdivision
13.19	1, paragraph (b), clause (1), is excluded from the delegation of authority to county agencies.
13.20	Sec. 8. Minnesota Statutes 2022, section 245A.175, is amended to read:
13.21	245A.175 CHILD FOSTER CARE TRAINING REQUIREMENT; MENTAL
13.22	HEALTH TRAINING; FETAL ALCOHOL SPECTRUM DISORDERS TRAINING.
13.23	Prior to a nonemergency placement of a child in a foster care home, the child foster care
13.24	license holder and earegivers in foster family and treatment foster care settings, and all staff
13.25	providing care in foster residence settings must complete two hours of training that addresses
13.26	the causes, symptoms, and key warning signs of mental health disorders; cultural
13.27	considerations; and effective approaches for dealing with a child's behaviors. At least one
13.28	hour of the annual training requirement for the foster family license holder and caregivers,
13.29	and foster residence staff must be on children's mental health issues and treatment. Except
13.30	for providers and services under chapter 245D, the annual training must also include at least
13.31	one hour of training on fetal alcohol spectrum disorders, which must be counted toward the
13 32	12 hours of required in-service training per year. Short-term substitute caregivers are exempt

from these requirements. Training curriculum shall be approved by the commissioner of 44.1 human services. 44.2 Sec. 9. Minnesota Statutes 2023 Supplement, section 245A.66, subdivision 4, as amended 44.3 by Laws 2024, chapter 80, article 2, section 73, is amended to read: 44.4 Subd. 4. **Ongoing training requirement.** (a) In addition to the orientation training 44.5 required by the applicable licensing rules and statutes, children's residential facility license 44.6 holders must provide a training annually on the maltreatment of minors reporting 44.7 requirements and definitions in chapter 260E to each mandatory reporter, as described in 44.8 section 260E.06, subdivision 1. 44.9 (b) In addition to the orientation training required by the applicable licensing rules and 44.10 statutes, all foster residence setting staff and volunteers that are mandatory reporters as 44.11 described in section 260E.06, subdivision 1, must complete training each year on the 44.12 maltreatment of minors reporting requirements and definitions in chapter 260E. 44.13 Sec. 10. Minnesota Statutes 2022, section 256.029, as amended by Laws 2024, chapter 44.14 80, article 1, section 66, is amended to read: 44.15 256.029 DOMESTIC VIOLENCE INFORMATIONAL BROCHURE. 44.16 (a) The commissioner shall provide a domestic violence informational brochure that 44.17 provides information about the existence of domestic violence waivers for eligible public 44.18 assistance applicants to all applicants of general assistance, medical assistance, and 44.19 MinnesotaCare. The brochure must explain that eligible applicants may be temporarily 44.20 waived from certain program requirements due to domestic violence. The brochure must 44.21 provide information about services and other programs to help victims of domestic violence. 44.22 44.23 (b) The brochure must be funded with TANF funds. (c) The commissioner must work with the commissioner of children, youth, and families 44.24 44.25 to create a brochure that meets the requirements of this section and section 142G.05. Sec. 11. Minnesota Statutes 2023 Supplement, section 256M.42, is amended by adding a 44.26 subdivision to read: 44.27 Subd. 7. Adult protection grant allocation under Reform 2020. The requirements of 44.28 subdivisions 2 to 6 apply to the Reform 2020 adult protection state grants in Minnesota 44.29

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Statutes 2013 Supplement, section 256M.40, subdivision 1, and Laws 2013, chapter 108,

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45.1	article 15. The Reform 2020 state adult protection grant must be allocated annually consistent
45.2	with the calendar year 2023 allocation made under section 256M.40.
45.3	Sec. 12. Laws 2023, chapter 70, article 12, section 30, subdivision 2, is amended to read:
45.4	Subd. 2. Department of Human Services. The powers and duties of the Department
45.5	of Human Services with respect to the following responsibilities and related elements are
45.6	transferred to the Department of Children, Youth, and Families according to Minnesota
45.7	Statutes, section 15.039:
45.8	(1) family services and community-based collaboratives under Minnesota Statutes,
45.9	section 124D.23;
45.10	(2) child care programs under Minnesota Statutes, chapter 119B;
45.11	(3) Parent Aware quality rating and improvement system under Minnesota Statutes,
45.12	section 124D.142;
45.13	(4) migrant child care services under Minnesota Statutes, section 256M.50;
45.14	(5) early childhood and school-age professional development training under Laws 2007,
45.15	chapter 147, article 2, section 56;
45.16	(6) licensure of family child care and child care centers, child foster care, and private
45.17	child placing agencies under Minnesota Statutes, chapter 245A;
45.18	(7) certification of license-exempt child care centers under Minnesota Statutes, chapter
45.19	245H;
45.20	(8) program integrity and fraud related to the Child Care Assistance Program (CCAP),
45.21	the Minnesota Family Investment Program (MFIP), and the Supplemental Nutrition
45.22	Assistance Program (SNAP) under Minnesota Statutes, chapters 119B and 245E;
45.23	(9) SNAP under Minnesota Statutes, sections 256D.60 to 256D.63;
45.24	(10) electronic benefit transactions under Minnesota Statutes, sections 256.9862,
45.25	256.9863, 256.9865, 256.987, 256.9871, 256.9872, and 256J.77;
45.26	(11) Minnesota food assistance program under Minnesota Statutes, section 256D.64;
45.27	(12) Minnesota food shelf program under Minnesota Statutes, section 256E.34;
45.28	(13) MFIP and Temporary Assistance for Needy Families (TANF) under Minnesota
45.29	Statutes, sections 256.9864 and 256.9865 and chapters 256J and 256P;

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(14) Diversionary Work Program (DWP) under Minnesota Statutes, section 256J.95;

- 46.1 (15) resettlement programs under Minnesota Statutes, section 256B.06, subdivision 6
- 46.2 American Indian food sovereignty program under Minnesota Statutes, section 256E.342;
- 46.3 (16) child abuse under Minnesota Statutes, chapter 256E;
- 46.4 (17) reporting of the maltreatment of minors under Minnesota Statutes, chapter 260E;
- 46.5 (18) children in voluntary foster care for treatment under Minnesota Statutes, chapter
- 46.6 **260D**;
- 46.7 (19) juvenile safety and placement under Minnesota Statutes, chapter 260C;
- 46.8 (20) the Minnesota Indian Family Preservation Act under Minnesota Statutes, sections
- 46.9 260.751 to 260.835;
- 46.10 (21) the Interstate Compact for Juveniles under Minnesota Statutes, section 260.515,
- and the Interstate Compact on the Placement of Children under Minnesota Statutes, sections
- 46.12 260.851 to 260.93;
- 46.13 (22) adoption under Minnesota Statutes, sections 259.20 to 259.89;
- 46.14 (23) Northstar Care for Children under Minnesota Statutes, chapter 256N;
- 46.15 (24) child support under Minnesota Statutes, chapters 13, 13B, 214, 256, 256J, 257, 259,
- 46.16 518, 518A, 518C, 551, 552, 571, and 588, and Minnesota Statutes, section 609.375;
- 46.17 (25) community action programs under Minnesota Statutes, sections 256E.30 to 256E.32;
- 46.18 and
- 46.19 (26) Family Assets for Independence in Minnesota under Minnesota Statutes, section
- 46.20 256E.35.;
- 46.21 (27) capital for emergency food distribution facilities under Laws 2023, chapter 70,
- article 20, section 2, subdivision 24, paragraph (i);
- (28) community resource centers under Laws 2023, chapter 70, article 14, section 42;
- 46.24 (29) diaper distribution grant program under Minnesota Statutes, section 256E.38;
- 46.25 (30) emergency services program under Minnesota Statutes, section 256E.36;
- 46.26 (31) emergency shelter facilities grants under Laws 2023, chapter 70, article 11, section
- 46.27 14;
- 46.28 (32) Family First Prevention Services Act support and development grant program under
- 46.29 Minnesota Statutes, section 256.4793;

47.1	(33) Family First Prevention Services Act kinship navigator program under Minnesota
47.2	Statutes, section 256.4794;
47.3	(34) family first prevention and early intervention allocation program under Minnesota
47.4	Statutes, section 260.014;
47.5	(35) grants for prepared meals food relief under Laws 2023, chapter 70, article 12, section
47.6	<u>33;</u>
47.7	(36) Homeless Youth Act under Minnesota Statutes, sections 256K.45 to 256K.451;
47.8	(37) homeless youth cash stipend pilot under Laws 2023, chapter 70, article 11, section
47.9	<u>13;</u>
47.10	(38) independent living skills for foster youth under Laws 2023, chapter 70, article 14,
47.11	section 41;
47.12	(39) legacy adoption assistance under Minnesota Statutes, chapter 259A;
47.13	(40) opiate epidemic response fund under Minnesota Statutes, section 256.043;
47.14	(41) quality parenting initiative grant program under Laws 2023, chapter 70, article 14,
47.15	section 1;
47.16	(42) relative custody assistance under Minnesota Statutes, section 257.85;
47.17	(43) reimbursement to counties and Tribes for certain out-of-home placements under
47.18	Minnesota Statutes, section 477A.0126;
47.19	(44) safe harbor shelter and housing under Minnesota Statutes, section 256K.47;
47.20	(45) shelter-linked youth mental health grants under Minnesota Statutes, section 256K.46;
47.21	(46) Supplemental Nutrition Assistance Program outreach under Minnesota Statutes,
47.22	section 256D.65; and
47.23	(47) transitional housing programs under Minnesota Statutes, section 256E.33.
47.24	Sec. 13. Laws 2023, chapter 70, article 12, section 30, subdivision 3, is amended to read:
47.25	Subd. 3. Department of Education. The powers and duties of the Department of
47.26	Education with respect to the following responsibilities and related elements are transferred
47.27	to the Department of Children, Youth, and Families according to Minnesota Statutes, section
47.28	15.039:
47.29	(1) Head Start Program and Early Head Start under Minnesota Statutes, sections 119A.50
47.30	to 119A.545;

- 48.1 (2) the early childhood screening program under Minnesota Statutes, sections 121A.16 to 121A.19;
- 48.3 (3) early learning scholarships under Minnesota Statutes, section 124D.165;
- 48.4 (4) the interagency early childhood intervention system under Minnesota Statutes, 48.5 sections 125A.259 to 125A.48;
- 48.6 (5) voluntary prekindergarten programs and school readiness plus programs under
 48.7 Minnesota Statutes, section 124D.151;
- 48.8 (6) early childhood family education programs under Minnesota Statutes, sections 124D.13 to 124D.135;
- 48.10 (7) school readiness under Minnesota Statutes, sections 124D.15 to 124D.16; and
- 48.11 (8) after-school community learning programs under Minnesota Statutes, section
- 48.12 124D.2211.; and
- 48.13 (9) grow your own program under Minnesota Statutes, section 122A.731.
- Sec. 14. Laws 2024, chapter 80, article 1, section 34, subdivision 2, is amended to read:
- Subd. 2. **Definitions.** (a) For purposes of this section, the following definitions have the meanings given.
- (b) "Associated entity" means a provider or vendor owned or controlled by an excluded individual.
- (c) "Associated individual" means an individual or entity that has a relationship with the business or its owners or controlling individuals, such that the individual or entity would have knowledge of the financial practices of the program in question.
- 48.22 (d) "Excluded" means removed under other authorities from a program administered by
 48.23 a Minnesota state or federal agency, including a final determination to stop payments.
- (e) "Individual" means a natural person providing products or services as a provider or vendor.
- 48.26 (f) "Provider" means any entity, individual, owner, controlling individual, license holder, 48.27 director, or managerial official of an entity receiving payment from a program administered 48.28 by a Minnesota state or federal agency.
- 48.29 (g) "Vendor" means a private individual or entity contracted to provide services for, on 48.30 behalf of, or with money provided by the commissioner.

Sec. 15. Laws 2024, chapter 80, article 1, section 96, is amended to read:

Sec. 96. **REVISOR INSTRUCTION.**

The revisor of statutes must renumber sections or subdivisions in Column A as Column

49.4	В.

49.5	Column A	Column B
49.6	256.01, subdivision 12	142A.03, subdivision 7
49.7	256.01, subdivision 12a	142A.03, subdivision 8
49.8	256.01, subdivision 15	142A.03, subdivision 10
49.9	256.01, subdivision 36	142A.03, subdivision 22
49.10	256.0112, subdivision 10	142A.07, subdivision 8
49.11	256.019, subdivision 2	142A.28, subdivision 2
49.12	<u>256.043</u>	142A.50
49.13	256.4793	142A.45
49.14	256.4794	142A.451
49.15	256.82	142A.418
49.16	256.9831	142A.13, subdivision 14
49.17	256.9862, subdivision 1	142A.13, subdivision 10
49.18	256.9862, subdivision 2	142A.13, subdivision 11
49.19	256.9863	142A.13, subdivision 5
49.20	256.9865, subdivision 1	142A.13, subdivision 6
49.21	256.9865, subdivision 2	142A.13, subdivision 7
49.22	256.9865, subdivision 3	142A.13, subdivision 8
49.23	256.9865, subdivision 4	142A.13, subdivision 9
49.24	256.987, subdivision 2	142A.13, subdivision 2
49.25	256.987, subdivision 3	142A.13, subdivision 3
49.26	256.987, subdivision 4	142A.13, subdivision 4
49.27	256.9871	142A.13, subdivision 12
49.28	256.9872	142A.13, subdivision 13
49.29	256.997	142A.30
49.30	256.998	142A.29
49.31	256B.06, subdivision 6	142A.40
49.32	256E.20	142A.41
49.33	256E.21	142A.411
49.34	256E.22	142A.412
49.35	256E.24	142A.413
49.36	256E.25	142A.414

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50.1		256E.26		142A.415	
50.2		256E.27		142A.416	
50.3		256E.28		142A.417	
50.4		<u>256E.38</u>		<u>142A.42</u>	
50.5		256N.001		142A.60	
50.6		256N.01		142A.601	
50.7		256N.02		142A.602	
50.8		256N.20		142A.603	
50.9		256N.21		142A.604	
50.10		256N.22		142A.605	
50.11		256N.23		142A.606	
50.12		256N.24		142A.607	
50.13		256N.25		142A.608	
50.14		256N.26		142A.609	
50.15		256N.261		142A.61	
50.16		256N.27		142A.611	
50.17		256N.28		142A.612	
50.18		257.175		142A.03, subdivision 32	
50.19		257.33, subdivision 1		142A.03, subdivision 33	
50.20		257.33, subdivision 2		142A.03, subdivision 34	
50.21		260.014		142A.452	
50.22		299A.72		142A.75	
50.23		299A.73		142A.43	
50.24		299A.95		142A.76	

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as introduced

The revisor of statutes must correct any statutory cross-references consistent with this renumbering.

Sec. 16. Laws 2024, chapter 80, article 2, section 5, subdivision 21, is amended to read:

Subd. 21. **Plan for transfer of clients and records upon closure.** (a) Except for license holders who reside on the premises and child care providers, an applicant for initial or continuing licensure or certification must submit a written plan indicating how the program or private agency will ensure the transfer of clients and records for both open and closed cases if the program closes. The plan must provide for managing private and confidential information concerning the clients of the program elients or private agency. The plan must also provide for notifying affected clients of the closure at least 25 days prior to closure, including information on how to access their records. A controlling individual of the program or private agency must annually review and sign the plan.

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(b) Plans for the transfer of open cases and case records must specify arrangements the
program or private agency will make to transfer clients to another provider or county agency
for continuation of services and to transfer the case record with the client.

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- (c) Plans for the transfer of closed case records must be accompanied by a signed agreement or other documentation indicating that a county or a similarly licensed provider has agreed to accept and maintain the program's or private agency's closed case records and to provide follow-up services as necessary to affected clients.
- Sec. 17. Laws 2024, chapter 80, article 2, section 7, subdivision 2, is amended to read: 51.8
 - Subd. 2. County fees for applications and licensing inspections. (a) A county agency may charge a license fee to an applicant or license holder not to exceed \$50 for a one-year license or \$100 for a two-year license.
 - (b) Counties may allow providers to pay the applicant fee in paragraph (a) on an installment basis for up to one year. If the provider is receiving child care assistance payments from the state, the provider may have the fee under paragraph (a) deducted from the child care assistance payments for up to one year and the state shall reimburse the county for the county fees collected in this manner.
 - (c) For purposes of child foster care licensing under this chapter, a county agency may charge a fee to a corporate applicant or corporate license holder to recover the actual cost of licensing inspections, not to exceed \$500 annually.
- (d) Counties may elect to reduce or waive the fees in paragraph (c) under the following 51.20 circumstances: 51.21
- 51.22 (1) in cases of financial hardship;
- (2) if the county has a shortage of providers in the county's area; or 51.23
- 51.24 (3) for new providers.
- Sec. 18. Laws 2024, chapter 80, article 2, section 10, subdivision 6, is amended to read: 51.25
- Subd. 6. Appeal of multiple sanctions. (a) When the license holder appeals more than 51.26 one licensing action or sanction that were simultaneously issued by the commissioner, the 51.27 license holder shall specify the actions or sanctions that are being appealed. 51.28
- (b) If there are different timelines prescribed in statutes for the licensing actions or 51.29 sanctions being appealed, the license holder must submit the appeal within the longest of 51.30 those timelines specified in statutes. 51.31

- (c) The appeal must be made in writing by certified mail or, by personal service, or through the provider licensing and reporting hub. If mailed, the appeal must be postmarked and sent to the commissioner within the prescribed timeline with the first day beginning the day after the license holder receives the certified letter. If a request is made by personal service, it must be received by the commissioner within the prescribed timeline with the first day beginning the day after the license holder receives the certified letter. If the appeal is made through the provider hub, the appeal must be received by the commissioner within the prescribed timeline with the first day beginning the day after the commissioner issued the order through the hub.
- (d) When there are different timelines prescribed in statutes for the appeal of licensing actions or sanctions simultaneously issued by the commissioner, the commissioner shall specify in the notice to the license holder the timeline for appeal as specified under paragraph (b).
- Sec. 19. Laws 2024, chapter 80, article 2, section 16, subdivision 1, is amended to read:
- Subdivision 1. **Delegation of authority to agencies.** (a) County agencies and private agencies that have been designated or licensed by the commissioner to perform licensing functions and activities under section 142B.10 and background studies for family child care under chapter 245C; to recommend denial of applicants under section 142B.15; to issue correction orders, to issue variances, and to recommend a conditional license under section 142B.16; or to recommend suspending or revoking a license or issuing a fine under section 142B.18, shall comply with rules and directives of the commissioner governing those functions and with this section. The following variances are excluded from the delegation of variance authority and may be issued only by the commissioner:
- (1) dual licensure of family child care and family child foster care, dual licensure of family child foster care and family adult foster care, dual licensure of child foster residence setting and community residential setting, and dual licensure of family adult foster care and family child care;
 - (2) child foster care maximum age requirement;
- 52.29 (3) variances regarding disqualified individuals;
- 52.30 (4) variances to requirements relating to chemical use problems of a license holder or a 52.31 household member of a license holder; and

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53.1	(5) variances to section 142B.74 for a time-limited period. If the commissioner grants
53.2	a variance under this clause, the license holder must provide notice of the variance to all
53.3	parents and guardians of the children in care.
53.4	(b) The commissioners of human services and children, youth, and families must both
53.5	approve a variance for dual licensure of family child foster care and family adult foster care
53.6	or family adult foster care and family child care. Variances under this paragraph are excluded
53.7	from the delegation of variance authority and may be issued only by both commissioners.
53.8	(c) Except as provided in section 142B.41, subdivision 4, paragraph (e), a county agency
53.9	must not grant a license holder a variance to exceed the maximum allowable family child
53.10	care license capacity of 14 children.
53.11	(b) (d) A county agency that has been designated by the commissioner to issue family
53.12	child care variances must:
53.13	(1) publish the county agency's policies and criteria for issuing variances on the county's
53.14	public website and update the policies as necessary; and
53.15	(2) annually distribute the county agency's policies and criteria for issuing variances to
53.16	all family child care license holders in the county.
53.17	(e) (e) Before the implementation of NETStudy 2.0, county agencies must report
53.18	information about disqualification reconsiderations under sections 245C.25 and 245C.27,
53.19	subdivision 2, paragraphs (a) and (b), and variances granted under paragraph (a), clause
53.20	(5), to the commissioner at least monthly in a format prescribed by the commissioner.
53.21	(d) (f) For family child care programs, the commissioner shall require a county agency
53.22	to conduct one unannounced licensing review at least annually.
53.23	(e) (g) A license issued under this section may be issued for up to two years.
53.24	(f) (h) A county agency shall report to the commissioner, in a manner prescribed by the
53.25	commissioner, the following information for a licensed family child care program:
53.26	(1) the results of each licensing review completed, including the date of the review, and
53.27	any licensing correction order issued;
53.28	(2) any death, serious injury, or determination of substantiated maltreatment; and
53.29	(3) any fires that require the service of a fire department within 48 hours of the fire. The
53.30	information under this clause must also be reported to the state fire marshal within two
53.31	business days of receiving notice from a licensed family child care provider.

Sec. 20. Laws 2024, chapter 80, article 2, section 30, subdivision 2, is amended to read:

- Subd. 2. **Maltreatment of minors ongoing training requirement.** (a) In addition to the orientation training required by the applicable licensing rules and statutes, private child-placing agency license holders must provide a training annually on the maltreatment of minors reporting requirements and definitions in chapter 260E to each mandatory reporter, as described in section 260E.06, subdivision 1.
- (b) In addition to the orientation training required by the applicable licensing rules and statutes, all family child foster care license holders and caregivers and foster residence setting staff and volunteers who are mandatory reporters as described in section 260E.06, subdivision 1, must complete training each year on the maltreatment of minors reporting requirements and definitions in chapter 260E.
- Sec. 21. Laws 2024, chapter 80, article 2, section 31, is amended to read:

Sec. 31. 142B.80 CHILD FOSTER CARE TRAINING REQUIREMENT; MENTAL HEALTH TRAINING; FETAL ALCOHOL SPECTRUM DISORDERS TRAINING.

Prior to a nonemergency placement of a child in a foster care home, the child foster care license holder and caregivers in foster family and treatment foster care settings, and all staff providing care in foster residence settings must complete two hours of training that addresses the causes, symptoms, and key warning signs of mental health disorders; cultural considerations; and effective approaches for dealing with a child's behaviors. At least one hour of the annual training requirement for the foster family license holder and caregivers, and foster residence staff must be on children's mental health issues and treatment. Except for providers and services under chapter 245D, the annual training must also include at least one hour of training on fetal alcohol spectrum disorders, which must be counted toward the 12 hours of required in-service training per year. Short-term substitute caregivers are exempt from these requirements. Training curriculum shall be approved by the commissioner of children, youth, and families.

Sec. 22. Laws 2024, chapter 80, article 2, section 74, is amended to read:

Sec. 74. **REVISOR INSTRUCTION.**

The revisor of statutes must renumber sections or subdivisions in column A as column

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55.1		Column A		Column B
55.2		245A.02, subdivisi	on 2c	142B.01, subdivision 3
55.3		245A.02, subdivisi	on 6a	142B.01, subdivision 11
55.4		245A.02, subdivisi	on 6b	142B.01, subdivision 12
55.5		245A.02, subdivisi	on 10a	142B.01, subdivision 22
55.6		245A.02, subdivisi	on 12	142B.01, subdivision 23
55.7		245A.02, subdivisi	on 16	142B.01, subdivision 26
55.8		245A.02, subdivisi	on 17	142B.01, subdivision 27
55.9		245A.02, subdivisi	on 18	142B.01, subdivision 28
55.10		245A.02, subdivisi	on 19	142B.01, subdivision 13
55.11		245A.03, subdivisi	on 2a	142B.05, subdivision 3
55.12		245A.03, subdivisi	on 2b	142B.05, subdivision 4
55.13		245A.03, subdivisi	on 4	142B.05, subdivision 6
55.14		245A.03, subdivisi	on 4a	142B.05, subdivision 7
55.15		245A.03, subdivisi	on 8	142B.05, subdivision 10
55.16		245A.035		142B.06
55.17		245A.04, subdivisi	on 9a	142B.10, subdivision 17
55.18		245A.04, subdivisi	on 10	142B.10, subdivision 18
55.19		245A.06, subdivisi	on 8	142B.16, subdivision 5
55.20		245A.06, subdivisi	on 9	142B.16, subdivision 6
55.21		245A.065		142B.17
55.22		245A.07, subdivisi	on 4	142B.18, subdivision 6
55.23		245A.07, subdivisi	on 5	142B.18, subdivision 7
55.24		245A.14, subdivisi	on 3	142B.41, subdivision 3
55.25		245A.14, subdivisi	on 4	142B.41, subdivision 4
55.26		245A.14, subdivisi	on 4a	142B.41, subdivision 5
55.27		245A.14, subdivisi	on 6	142B.41, subdivision 6
55.28		245A.14, subdivisi	on 8	142B.41, subdivision 7
55.29		245A.14, subdivisi	on 10	142B.41, subdivision 8
55.30		245A.14, subdivisi	on 11	142B.41, subdivision 9
55.31		245A.14, subdivisi	on 15	142B.41, subdivision 11
55.32		245A.14, subdivisi	on 16	142B.41, subdivision 12
55.33		245A.14, subdivisi	on 17	142B.41, subdivision 13
55.34		245A.1434		142B.60
55.35		245A.144		142B.47
55.36		245A.1445		142B.48
55.37		245A.145		142B.61
55.38		245A.146, subdivis	sion 2	142B.45, subdivision 2

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56.1		245A.146, subdi	vision 3	142B.45, subdivision 3	
56.2		245A.146, subdi	vision 4	142B.45, subdivision 4	
56.3		245A.146, subdi	vision 5	142B.45, subdivision 5	
56.4		245A.146, subdi	vision 6	142B.45, subdivision 6	
56.5		245A.147		142B.75	
56.6		245A.148		142B.76	
56.7		245A.149		142B.77	
56.8		245A.15		142B.78	
56.9		245A.1511		142B.79	
56.10		245A.152		142B.62	
56.11		245A.16, subdiv	rision 7	142B.30, subdivision 7	
56.12		245A.16, subdiv	rision 9	142B.30, subdivision 9	
56.13		245A.16, subdiv	rision 11	142B.30, subdivision 11	
56.14		245A.23		142B.63	
56.15		245A.40		142B.65	
56.16		245A.41		142B.66	
56.17		245A.42		142B.67	
56.18		245A.50		142B.70	
56.19		245A.51		142B.71	
56.20		245A.52		142B.72	
56.21		245A.53		142B.74	
56.22		245A.66, subdiv	rision 2	142B.54, subdivision 2	
56.23		245A.66, subdiv	rision 3	142B.54, subdivision 3	
56.24	The rowi	sor of statutes mus	t aannaat anvi stati	utory cross references consist	tant with this

The revisor of statutes must correct any statutory cross-references consistent with this renumbering.

Sec. 23. Laws 2024, chapter 80, article 4, section 26, is amended to read:

Sec. 26. REVISOR INSTRUCTION.

(a) The revisor of statutes shall renumber each section of Minnesota Statutes listed in column A with the number listed in column B. The revisor shall also make necessary cross-reference changes consistent with the renumbering. The revisor shall also make any technical, language, and other changes necessitated by the renumbering and cross-reference changes in this act.

56.33	Column A	Column B
56.34	119A.50	142D.12
56.35	119A.52	142D.121

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57.1	119A.53			142D.122		
57.2	119A.535			142D.123		
57.3	119A.5411			142D.124		
57.4	119A.545			142D.125		
57.5	119B.195			142D.30		
57.6	119B.196			142D.24		
57.7	119B.25			142D.20		
57.8	119B.251			142D.31		
57.9	119B.252			142D.32		
57.10	119B.27			142D.21		
57.11	119B.28			142D.22		
57.12	119B.29			142D.23		
57.13	121A.16			142D.09		
57.14	121A.17			142D.091		
57.15	121A.18			142D.092		
57.16	121A.19			142D.093		
57.17	122A.731			142D.33		
57.18	124D.13			142D.10		
57.19	124D.135			142D.11		
57.20	124D.141			142D.16		
57.21	124D.142			142D.13		
57.22	124D.15			142D.05		
57.23	124D.151			142D.08		
57.24	124D.16			142D.06		
57.25	124D.165			142D.25		
57.26	124D.2211			142D.14		
57.27	124D.23			142D.15		
57.28	(b) The revis	or of statutes shall	codify Law	vs 2017, Firs	t Special Session chap	oter 5, article

57.28 (b) The revisor of statutes shall codify Laws 2017, First Special Session chapter 5, article 8, section 9, as amended by article 4, section 25, as Minnesota Statutes, section 142D.07.

(c) The revisor of statutes shall change "commissioner of education" to "commissioner of children, youth, and families" and change "Department of Education" to "Department of Children, Youth, and Families" as necessary in Minnesota Statutes, chapters 119A and 120 to 129C, to reflect the changes in this act and Laws 2023, chapter 70, article 12. The revisor shall also make any technical, language, and other changes resulting from the change of term to the statutory language, sentence structure, or both, if necessary to preserve the meaning of the text.

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Sec. 24. Laws 2024, chapter 80, article 6, section 4, is amended to read:

Sec. 4. REVISOR INSTRUCTION.

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(a) The revisor of statutes must renumber each section of Minnesota Statutes in Column A with the number in Column B.

58.5	Column A	Column B
58.6	245.771	142F.05
58.7	256D.60	142F.10
58.8	256D.61	142F.11
58.9	256D.62	142F.101
58.10	256D.63	142F.102
58.11	256D.64	142F.13
58.12	256D.65	142F.12
58.13	256E.30	142F.30
58.14	256E.31	142F.301
58.15	256E.32	142F.302
58.16	<u>256E.33</u>	142F.51
58.17	256E.34	142F.14
58.18	<u>256E.342</u>	142F.15
58.19	256E.35	142F.20
58.20	<u>256E.36</u>	142F.52
58.21	<u>256K.45</u>	142F.55
58.22	<u>256K.451</u>	142F.56
58.23	<u>256K.46</u>	142F.57
58.24	<u>256K.47</u>	142F.58

- 58.25 (b) The revisor of statutes must correct any statutory cross-references consistent with 58.26 this renumbering.
- Sec. 25. Laws 2024, chapter 80, article 7, section 4, is amended to read:
- Sec. 4. Minnesota Statutes 2022, section 256J.09, is amended by adding a subdivision to read:
- Subd. 11. **Domestic violence informational brochure.** (a) The commissioner shall provide a domestic violence informational brochure that provides information about the existence of domestic violence waivers to all MFIP applicants. The brochure must explain that eligible applicants may be temporarily waived from certain program requirements due

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59.1	to domestic	violence. The broc	hure must provid	e information about service	ces and other
59.2	programs to	help victims of do	mestic violence.		
59.3	(b) The b	prochure must be for	unded with TANF	funds.	
50.4	(a) The	ommissioner must	want with the ec	ammissioner of human ser	rvices to evente e
59.4	-			ommissioner of human sertion and section 256.029.	vices to create a
59.5	brochure tha	it meets the require	ments of this sec	tion and section 230.029.	
59.6	Sec. 26. <u>C</u>	HILD FOSTER I	RESIDENCE SE	TTINGS TO STAY AT	ГНЕ
59.7	DEPARTM	ENT OF HUMA	N SERVICES.		
59.8	The resp	onsibility to licens	e child foster resi	dence settings as defined i	in Minnesota
59.9		<u>-</u>		not transfer to the Departm	
59.10	Youth, and I	Families under Law	vs 2023, chapter 7	70, article 12, section 30, a	and remains with
59.11	the Departm	ent of Human Serv	vices.		
59.12	Sec. 27. <u>D</u>	IRECTION TO T	HE COMMISSI	ONER OF CHILDREN,	, YOUTH, AND
59.13	FAMILIES	; COORDINATIO	ON OF SERVIC	ES FOR CHILDREN W	<u>TTH</u>
59.14	DISABILIT	TIES AND MENT	AL HEALTH.		
59.15	The com	missioner shall des	ignate a departme	ent leader to be responsible	for coordination
59.16	of services a	and outcomes arou	nd children's men	tal health and for children	with or at risk
59.17	for disabiliti	es within and betw	een the Departmo	ent of Children, Youth, an	d Families; the
59.18	Department	of Human Service	s; and related age	ncies.	
	G 20 B				
59.19	Sec. 28. <u>R</u>	EPEALER.			
59.20	(a) Laws	2024, chapter 80,	article 2, sections	s 1, subdivision 11; 3, subd	division 3; 4,
59.21	subdivision	4; 10, subdivision	4; 33; and 69, are	repealed.	
59.22	(b) Minn	esota Rules, part 9	545.0845, is repe	aled.	
59.23	Sec. 29. <u>E</u>	FFECTIVE DAT	E; TRANSFER	OF RESPONSIBILITIE	<u>.S.</u>
59.24	(a) This	article is effective.	July 1, 2024.		
59.25	(b) Notw	rithstanding paragra	aph (a), the power	s and responsibilities trans	sferred under this
59.26	article are ef	fective upon notice	e of the commissi	oner of children, youth, an	nd families to the
59.27	commission	ers of administration	on, management a	and budget, and other relev	ant departments
59.28	along with the	he secretary of the	senate, the chief	clerk of the house of repre	esentatives, and
59.29	the chairs ar	nd ranking minority	members of rele	evant legislative committee	es and divisions,

59.30

pursuant to Laws 2023, chapter 70, article 12, section 30, subdivision 1.

(c) By August 1, 2025, the commissioners of human services and children, youth, and 60.1 families shall notify the chairs and ranking minority members of relevant legislative 60.2 60.3 committees and divisions and the revisor of statutes of any sections of this article or programs to be transferred that are waiting for federal approval to become effective pursuant to Laws 60.4 2023, chapter 70, article 12, section 30, subdivision 1, paragraph (b). 60.5 ARTICLE 7 60.6 FORECAST ADJUSTMENTS 60.7 Section 1. HUMAN SERVICES FORECAST ADJUSTMENTS. 60.8 60.9 The sums shown in the columns marked "Appropriations" are added to or, if shown in parentheses, subtracted from the appropriations in Laws 2023, chapter 61, article 9, and 60.10 Laws 2023, chapter 70, article 20, to the commissioner of human services from the general 60.11 fund or other named fund for the purposes specified in section 2 and are available for the 60.12 fiscal years indicated for each purpose. The figures "2024" and "2025" used in this article 60.13 60.14 mean that the addition to or subtraction from the appropriation listed under them is available for the fiscal year ending June 30, 2024, or June 30, 2025, respectively. 60.15 **APPROPRIATIONS** 60.16 Available for the Year 60.17 60.18 **Ending June 30** 2024 2025 60.19 Sec. 2. COMMISSIONER OF HUMAN 60.20 **SERVICES** 60.21 Subdivision 1. Total Appropriation \$ 60.22 137,604,000 \$ 329,432,000 Appropriations by Fund 60.23 General Fund 139,746,000 325,606,000 60.24 Health Care Access 60.25 Fund 10,542,000 6,224,000 60.26 Federal TANF (12,684,000)(2,398,000)60.27 Subd. 2. Forecasted Programs 60.28 60.29 (a) MFIP/DWP 60.30 Appropriations by Fund General Fund (5,990,000)(2,793,000)60.31 60.32 Federal TANF (12,684,000)(2,398,000)

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61.1	(b) MFIP Chi	ild Care Assistand	<u>ce</u>	<u>(</u>	(36,726,000)	(26,004,000)
61.2	(c) General A	ssistance			(567,000)	292,000
61.3	(d) Minnesota	a Supplemental A	<u>id</u>		1,424,000	1,500,000
61.4	(e) Housing S	<u>Support</u>			11,200,000	14,667,000
61.5	(f) Northstar	Care for Children	<u>n</u>		(3,697,000)	(11,309,000)
61.6	(g) Minnesota	aCare			10,542,000	6,224,000
61.7 61.8	These appropraccess fund.	riations are from th	e health care			
61.9	(h) Medical A	<u>assistance</u>			180,321,000	352,357,000
61.10	(i) Behavioral	l Health Fund			(6,219,000)	(3,104,000)
61.11	EFFECTI	VE DATE. This s	ection is effective	e the day	following final	enactment.
61.12 61.13			ARTICLE APPROPRIAT			
	Section 1. HE	ALTH AND HUN			OPRIATIONS.	
61.15	The sums s	shown in the colun	nns marked "App	propriatio	ons" are added to	or, if shown in
61.16		ubtracted from the				_
61.17	agencies and f	for the purposes sp	ecified in this art	icle. The	e appropriations a	are from the
61.18	general fund o	or other named fund	d and are availab	le for the	e fiscal years ind	icated for each
61.19	purpose. The f	figures "2024" and	"2025" used in t	his artic	le mean that the a	addition to or
61.20	subtraction fro	om the appropriation	on listed under th	em is av	ailable for the fis	scal year ending
61.21	June 30, 2024	, or June 30, 2025,	respectively. Bas	se adjust	tments mean the	addition to or
61.22	subtraction fro	om the base level a	djustment set in l	Laws 20	23, chapter 70, a	rticle 20.
61.23	Supplemental	appropriations and	d reductions to ap	propriat	ions for the fisca	l year ending
61.24	June 30, 2024	, are effective the o	day following fin	al enactr	ment unless a dif	ferent effective
61.25	date is explicit	<u>t.</u>				
61.26 61.27 61.28 61.29	Sac 2 COM	MISSIONED OF	HIIM A N		APPROPRIAT Available for the Ending June 2024	ne Year
61.30 61.31	SERVICES.	MISSIONER OF	HUMAN			
61.32	Subdivision 1.	. Total Appropria	tion.	<u>\$</u>	<u>4,967,000</u> <u>\$</u>	27,981,000

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62.1	Approp	riations by Fund			
62.2		2024	2025		
62.3	General	4,967,000	29,799,000		
62.4	Health Care Access	<u>-0-</u>	(1,818,000)		
62.5	The amounts that may	be spent for each	<u>1</u>		
62.6	purpose are specified	in the following			
62.7	subdivisions.				
62.8	Subd. 2. Central Offi	ce; Operations.			
62.9	Approp	riations by Fund			
62.10	General	2,369,000	19,901,000		
62.11	Health Care Access	<u>-0-</u>	572,000		
62.12	(a) Child Welfare Te	chnology System	l <u>•</u>		
62.13	\$15,000,000 in fiscal	year 2025 is for			
62.14	information technolog	y improvements	to the		
62.15	statewide child welfar	e information sys	tem.		
62.16	This is a onetime appr	opriation.			
62.17	(b) Base Level Adjust	ment. The genera	<u>l fund</u>		
62.18	base is increased by \$	5,021,000 in fisca	ıl year		
62.19	2026 and each year th	ereafter.			
62.20	(c) Base Level Adjus	tment. The healtl	n care		
62.21	access fund base is inc	creased by \$115,0	<u>000 in</u>		
62.22	fiscal year 2026 and e	ach year thereafte	er.		
62.23	Subd. 3. Central Offi	ce; Children and	l Families.		
62.24	Approp	riations by Fund			
62.25	General	2,598,000	4,898,000		
62.26	Base Level Adjustme	ent. The general f	<u>und</u>		
62.27	base is increased by \$.	5,025,000 in fisca	ıl year		
62.28	2026 and each year th	ereafter.			
62.29	Subd. 4. Central Offi	ce; Health Care.	<u>:</u>		
62.30	Approp	riations by Fund			
62.31	Health Care Access	<u>-0-</u>	72,000		
62.32	(a) Continued actuar	rial and economi	<u>c</u>		
62.33	analyses. \$72,000 in 1	fiscal year 2025 is	s from		

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63.1	the health care access fund to continue			
63.2	actuarial and economic analyses, community			
63.3	engagement, technology, and implementation			
63.4	planning, and to prepare and submit a state			
63.5	innovation waiver under section 1332 of the			
63.6	federal Affordable Care Act for a Minnesota			
63.7	public option health care plan. The			
63.8	commissioner of human services may transfer			
63.9	funds from this appropriation to the			
63.10	Department of Commerce or the Board of			
63.11	Directors of MNsure for uses authorized under			
63.12	this paragraph. The commissioner is exempt			
63.13	from the requirements of Minnesota Statutes,			
63.14	chapter 16C, when entering into a new			
63.15	contract or amending an existing contract to			
63.16	complete the work. This is a onetime			
63.17	appropriation.			
63.18	Subd. 5. Forecasted Programs; MinnesotaCare	<u>.</u>	<u>-0-</u>	(2,456,000)
63.19	This appropriation is from the health care			
63.20	access fund.			
63.21 63.22	Subd. 6. Forecasted Programs; Medical Assistance.		<u>-0-</u>	(6,000)
63.23	This appropriation is from the health care			
63.24	access fund.			
63.25 63.26	Subd. 7. Grant Programs; Children and Economic Support Grants.		<u>-0-</u>	5,000,000
63.27	(a) Base Level Adjustment. The general fund			
63.28	base is increased by \$0 in fiscal year 2026 and			
63.29	each year thereafter.			
63.30	EFFECTIVE DATE. This section is effective	e the day follow:	ing final ena	actment.
63.31	Sec. 3. COMMISSIONER OF HEALTH			
63.32	Subdivision 1. Total Appropriation	<u>\$</u>	<u>-0-</u> <u>\$</u>	4,091,000

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64.1	Appropriations by Fund	
64.2	2024 2025	
64.3	<u>General</u> <u>-0-</u> <u>\$4,091,000</u>	
64.4	The amount that may be spent for each	
64.5	purpose is specified in the following	
64.6	subdivision.	
64.7	Subd. 2. Health Protection	
64.8	Appropriations by Fund	
64.9	<u>General</u> <u>-0-</u> <u>\$4,091,000</u>	
64.10 64.11	State Government Special Revenue -0- (2,880,000)	
64.12	Nitrate contamination in private wells.	
64.13	\$4,091,000 in fiscal year 2025 is from the	
64.14	general fund to establish a mitigation program	
64.15	for contaminated wells, including repairing	
64.16	and replacing wells and providing home water	
64.17	treatment such as reverse osmosis treatment	
64.18	for private wells that are tested at or above the	
64.19	maximum contaminant level of 10mg/L. This	
64.20	appropriation is available until June 30, 2027.	
64.21	This is a onetime appropriation.	
64.22	Sec. 4. <u>HEALTH-RELATED BOARDS</u>	
64.23	Subdivision 1. Total Appropriation \$ 1,500,000 \$	-0-
64.24	Appropriations by Fund	
64.25	<u>General</u> <u>1,500,000</u> <u>-0-</u>	
64.26	The amount that may be spent for each	
64.27	purpose is specified in the following	
64.28	subdivision.	
64.29	Subd. 2. Board of Pharmacy	
64.30	Appropriations by Fund	
64.31	<u>General</u> <u>1,500,000</u> <u>-0-</u>	
64.32	EFFECTIVE DATE. This section is effective the day following final enactment.	
64.33	Sec. 5. PUBLIC OPTION PLANNING.	

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as introduced

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66.1	The base for this appropriation is \$572,000 in			
66.2	fiscal year 2026 and each year thereafter.			
66.3	(b) Operating Adjustment DCYF			
66.4	Transition. \$173,000 in fiscal year 2025 is			
66.5	for the agency to maintain current levels of			
66.6	service after the transition of staff and			
66.7	resources to the Department of Children,			
66.8	Youth, and Families. The base for this			
66.9	appropriation is \$345,000 in fiscal year 2026			
66.10	and each year thereafter.			
66.11	EFFECTIVE DATE. This section is effective	e the day follow	ing final enac	etment.
66.12 66.13	Sec. 7. COMMISSIONER OF CHILDREN, YOUTH, AND FAMILIES.	<u>\$</u>	<u>-0-</u> <u>\$</u>	3,279,000
66.14	Base Level Adjustment. The general fund			
66.15	base is increased by \$7,183,000 in fiscal year			
66.16	2026 and increased by \$6,833,000 in fiscal			
66.17	year 2027.			
66.18 66.19	Sec. 8. OFFICE OF THE FAMILY CHILD CARE OMBUDSPERSON.	<u>\$</u>	<u>-0-</u> \$	350,000
			<u> </u>	
66.19	CARE OMBUDSPERSON.	AMINATION II	— – N PRIVATE	WELLS.
66.19	CARE OMBUDSPERSON. Sec. 9. [1031.104] MITIGATION OF CONTA	AMINATION II	N PRIVATE	WELLS.
66.19 66.20 66.21	CARE OMBUDSPERSON. Sec. 9. [103I.104] MITIGATION OF CONTACTOR OF CONT	AMINATION II ogram for mitigatinue, Houston, Mo	N PRIVATE ting nitrate co	WELLS. ontamination d, Wabasha,
66.19 66.20 66.21 66.22	Sec. 9. [103I.104] MITIGATION OF CONTACTOR The commissioner of health shall establish a prein private wells located in Dodge, Fillmore, Goodle	AMINATION II ogram for mitigatinue, Houston, Mo	N PRIVATE ting nitrate co	WELLS. ontamination d, Wabasha,
66.19 66.20 66.21 66.22 66.23	Sec. 9. [103I.104] MITIGATION OF CONTA The commissioner of health shall establish a pre in private wells located in Dodge, Fillmore, Goodle and Winona Counties for private wells that are test	AMINATION In ogram for mitigatinue, Houston, Moted at or above the	N PRIVATE ting nitrate co ower, Olmste	wells. ontamination d, Wabasha, contaminant
66.19 66.20 66.21 66.22 66.23 66.24	Sec. 9. [1031.104] MITIGATION OF CONTA The commissioner of health shall establish a pre in private wells located in Dodge, Fillmore, Goodle and Winona Counties for private wells that are test level of 10 mg/L. The program must:	amination in ogram for mitigatinue, Houston, Moted at or above the far private well is	N PRIVATE ting nitrate co ower, Olmste te maximum of	WELLS. Intamination d, Wabasha, contaminant
66.19 66.20 66.21 66.22 66.23 66.24 66.25	Sec. 9. [1031.104] MITIGATION OF CONTA The commissioner of health shall establish a pre in private wells located in Dodge, Fillmore, Goodle and Winona Counties for private wells that are test level of 10 mg/L. The program must: (1) ensure water samples used to determine if	amination in a private well is nitigation assista	ting nitrate co	wells. ontamination d, Wabasha, contaminant the ved from a
66.19 66.20 66.21 66.22 66.23 66.24 66.25 66.26	Sec. 9. [103I.104] MITIGATION OF CONTACT The commissioner of health shall establish a proint private wells located in Dodge, Fillmore, Goodle and Winona Counties for private wells that are test level of 10 mg/L. The program must: (1) ensure water samples used to determine if contamination level of 10 mg/L and eligible for respectively.	amination in a private well is nitigation assista	ting nitrate co	wells. ontamination d, Wabasha, contaminant the ved from a
66.19 66.20 66.21 66.22 66.23 66.24 66.25 66.26 66.27	Sec. 9. [1031.104] MITIGATION OF CONTA The commissioner of health shall establish a pre in private wells located in Dodge, Fillmore, Goodle and Winona Counties for private wells that are test level of 10 mg/L. The program must: (1) ensure water samples used to determine if contamination level of 10 mg/L and eligible for re laboratory accredited under Minnesota Statutes, so	amination in a private well is nitigation assista	ting nitrate co	wells. ontamination d, Wabasha, contaminant the ved from a
66.19 66.20 66.21 66.22 66.23 66.24 66.25 66.26 66.27 66.28	Sec. 9. [1031.104] MITIGATION OF CONTA The commissioner of health shall establish a pre in private wells located in Dodge, Fillmore, Goodle and Winona Counties for private wells that are test level of 10 mg/L. The program must: (1) ensure water samples used to determine if contamination level of 10 mg/L and eligible for re laboratory accredited under Minnesota Statutes, sec. (a), clause (2);	amination in ogram for mitigation. Houston, Moted at or above the mitigation assistance section 144.98, s	ting nitrate coower, Olmstene maximum of at or above to the are received and the area of the	wells. Intamination d, Wabasha, contaminant the ved from a a, paragraph
66.19 66.20 66.21 66.22 66.23 66.24 66.25 66.26 66.27 66.28	Sec. 9. [103I.104] MITIGATION OF CONTATE The commissioner of health shall establish a present in private wells located in Dodge, Fillmore, Goodle and Winona Counties for private wells that are test level of 10 mg/L. The program must: (1) ensure water samples used to determine if contamination level of 10 mg/L and eligible for relaboratory accredited under Minnesota Statutes, so (a), clause (2); (2) prioritize mitigation funds driven toward:	amination in ogram for mitigation. Houston, Moted at or above the mitigation assistance section 144.98, s	ting nitrate coower, Olmstene maximum of at or above to the are received and the area of the	wells. Intamination d, Wabasha, contaminant the ved from a a, paragraph

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67.1	(3) ensure mitigation funds are used on the most cost-effective mitigation option that
67.2	provides drinking water with a nitrate level below 10 mg/L and protects groundwater.
67.3	Sec. 10. Laws 2023, chapter 22, section 4, subdivision 2, is amended to read:
67.4	Subd. 2. Grants to navigators.
67.5	(a) \$1,936,000 in fiscal year 2024 is
67.6	appropriated from the health care access fund
67.7	to the commissioner of human services for
67.8	grants to organizations with a MNsure grant
67.9	services navigator assister contract in good
67.10	standing as of the date of enactment. The grant
67.11	payment to each organization must be in
67.12	proportion to the number of medical assistance
67.13	and MinnesotaCare enrollees each
67.14	organization assisted that resulted in a
67.15	successful enrollment in the second quarter of
67.16	fiscal years 2020 and 2023, as determined by
67.17	MNsure's navigator payment process. This is
67.18	a onetime appropriation and is available until
67.19	June 30, 2025.
67.20	(b) \$3,000,000 in fiscal year 2024 is
67.21	appropriated from the health care access fund
67.22	to the commissioner of human services for
67.23	grants to organizations with a MNsure grant
67.24	services navigator assister contract for
67.25	successful enrollments in medical assistance
67.26	and MinnesotaCare. This is a onetime
67.27	appropriation and is available until June 30,
67.28	<u>2025</u> .
67.29	EFFECTIVE DATE. This section is effective the day following final enactment.
67 30	Sec. 11. Laws 2023, chapter 70, article 20, section 2, subdivision 5, is amended to read

Subd. 5. Central Office; Health Care

	A	- E- 1	
68.1	Appropriations by		1 240 000
68.2	General 35,807 Health Care Access 30,668	,	1,349,000 0,168,000
68.3	Health Care Access 30,008	,000 3	0,108,000
68.4	(a) Medical assistance and Min	nnesotaCa	re
68.5	accessibility improvements. \$4	,000,000 i	n
68.6	fiscal year 2024 is from the gene	eral fund fo	or
68.7	interactive voice response upgrad	des and	
68.8	translation services for medical as	ssistance a	nd
68.9	MinnesotaCare enrollees with lin	nited Engli	sh
68.10	proficiency. This appropriation is	s available	
68.11	until June 30, 2025.		
68.12	(b) Transforming service delive	e ry. \$155,0	00
68.13	in fiscal year 2024 and \$180,000	in fiscal ye	ear
68.14	2025 are from the general fund f	for	
68.15	transforming service delivery pro	ojects.	
68.16	(c) Improving the Minnesota e	ligibility	
68.17	technology system functionality		00
68.18	in fiscal year 2024 and \$711,000		
68.19	2025 are from the general fund for	•	
68.20	the Minnesota eligibility technol	-	
68.21	functionality. The base for this a		
68.22	is \$1,421,000 in fiscal year 2026		
68.23	fiscal year 2027.	•	
	•	alere e :	
68.24	(d) Actuarial and economic and	•	1
68.25	\$2,500,000 is from the health care		na
68.26	for actuarial and economic analy	_	
68.27	community engagement, technol		1
68.28	implementation planning, and to		
68.29	submit a state innovation waiver u		
68.30	1332 of the federal Affordable C		
68.31	Minnesota public option health ca		
68.32	commissioner is exempt from the		<u>nts</u>
68.33	of Minnesota Statutes, chapter 1		
68.34	entering into a new contract or a		_
68.35	existing contract to complete the	work. Th	<u>e</u>

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69.1	commissioner of human services may transfer
69.2	funds from this appropriation to the
69.3	Department of Commerce or the Board of
69.4	Directors of MNSure for uses authorized under
69.5	this paragraph. This is a onetime appropriation
69.6	and is available until June 30, 2025.
69.7	(e) Contingent appropriation for Minnesota
69.8	public option health care plan. \$22,000,000
69.9	in fiscal year 2025 is from the health care
69.10	access fund to implement a Minnesota public
69.11	option health care plan. This is a onetime
69.12	appropriation and is available upon approval
69.13	of a state innovation waiver under section
69.14	1332 of the federal Affordable Care Act. This
69.15	appropriation is available until June 30, 2027.
69.16	(f) Carryforward authority. Notwithstanding
69.17	Minnesota Statutes, section 16A.28,
69.18	subdivision 3, \$2,367,000 of the appropriation
69.19	in fiscal year 2024 is available until June 30,
69.20	2027.
69.21	(g) Base level adjustment. The general fund
69.22	base is \$32,315,000 in fiscal year 2026 and
69.23	\$27,536,000 in fiscal year 2027. The health
69.24	care access fund base is \$28,168,000 in fiscal
69.25	year 2026 and \$28,168,000 in fiscal year 2027.
69.26	Sec. 12. Laws 2023, chapter 70, article 20, section 2, subdivision 24, is amended to read:
69.27 69.28	Subd. 24. Grant Programs; Children and Economic Support Grants 212,877,000 78,333,000
69.29	(a) Fraud prevention initiative start-up
69.30	grants. \$400,000 in fiscal year 2024 is for
69.31	start-up grants to the Red Lake Nation, White
69.32	Earth Nation, and Mille Lacs Band of Ojibwe
69.33	to develop a fraud prevention program. This

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- is a onetime appropriation and is available
- 70.2 until June 30, 2025.
- 70.3 (b) American Indian food sovereignty
- 70.4 **funding program.** \$3,000,000 in fiscal year
- 70.5 2024 and \$3,000,000 in fiscal year 2025 are
- 70.6 for Minnesota Statutes, section 256E.342. This
- appropriation is available until June 30, 2025.
- The base for this appropriation is \$2,000,000
- 70.9 in fiscal year 2026 and \$2,000,000 in fiscal
- 70.10 year 2027.
- 70.11 (c) Hennepin County grants to provide
- 70.12 **services to people experiencing**
- 70.13 **homelessness.** \$11,432,000 in fiscal year 2024
- 70.14 is for grants to maintain capacity for shelters
- and services provided to persons experiencing
- 70.16 homelessness in Hennepin County. Of this
- 70.17 amount:
- 70.18 (1) \$4,500,000 is for a grant to Avivo Village;
- 70.19 (2) \$2,000,000 is for a grant to the American
- 70.20 Indian Community Development Corporation
- 70.21 Homeward Bound shelter;
- 70.22 (3) \$1,650,000 is for a grant to the Salvation
- 70.23 Army Harbor Lights shelter;
- 70.24 (4) \$500,000 is for a grant to Agate Housing
- 70.25 and Services;
- 70.26 (5) \$1,400,000 is for a grant to Catholic
- 70.27 Charities of St. Paul and Minneapolis;
- 70.28 (6) \$450,000 is for a grant to Simpson
- 70.29 Housing; and
- 70.30 (7) \$932,000 is for a grant to Hennepin
- 70.31 County.
- Nothing shall preclude an eligible organization
- 70.33 receiving funding under this paragraph from

- applying for and receiving funding under
- 71.2 Minnesota Statutes, section 256E.33, 256E.36,
- 71.3 256K.45, or 256K.47, nor does receiving
- 71.4 funding under this paragraph count against
- any eligible organization in the competitive
- 71.6 processes related to those grant programs
- vinder Minnesota Statutes, section 256E.33,
- 71.8 256E.36, 256K.45, or 256K.47.
- 71.9 (d) Diaper distribution grant program.
- 71.10 \$545,000 in fiscal year 2024 and \$553,000 in
- 71.11 fiscal year 2025 are for a grant to the Diaper
- 71.12 Bank of Minnesota under Minnesota Statutes,
- 71.13 section 256E.38.
- 71.14 **(e) Prepared meals food relief.** \$1,654,000
- 71.15 in fiscal year 2024 and \$1,638,000 in fiscal
- year 2025 are for prepared meals food relief
- 71.17 grants. This is a onetime appropriation.
- 71.18 **(f) Emergency shelter facilities.** \$98,456,000
- 71.19 in fiscal year 2024 is for grants to eligible
- 71.20 applicants for emergency shelter facilities.
- 71.21 This is a onetime appropriation and is
- 71.22 available until June 30, 2028.
- 71.23 (g) Homeless youth cash stipend pilot
- 71.24 **project.** \$5,302,000 in fiscal year 2024 is for
- a grant to Youthprise for the homeless youth
- 71.26 cash stipend pilot project. The grant must be
- vised to provide cash stipends to homeless
- 71.28 youth, provide cash incentives for stipend
- 71.29 recipients to participate in periodic surveys,
- 71.30 provide youth-designed optional services, and
- 71.31 complete a legislative report. This is a onetime
- 71.32 appropriation and is available until June 30,
- 71.33 2028 2027.

72.1 (h) Heading Home Ramsey County

- 72.2 **continuum of care grants.** \$11,432,000 in
- fiscal year 2024 is for grants to maintain
- 72.4 capacity for shelters and services provided to
- 72.5 people experiencing homelessness in Ramsey
- 72.6 County. Of this amount:
- 72.7 (1) \$2,286,000 is for a grant to Catholic
- 72.8 Charities of St. Paul and Minneapolis;
- 72.9 (2) \$1,498,000 is for a grant to More Doors;
- 72.10 (3) \$1,734,000 is for a grant to Interfaith
- 72.11 Action Project Home;
- 72.12 (4) \$2,248,000 is for a grant to Ramsey
- 72.13 County;
- 72.14 (5) \$689,000 is for a grant to Radias Health;
- 72.15 (6) \$493,000 is for a grant to The Listening
- 72.16 House;
- 72.17 (7) \$512,000 is for a grant to Face to Face;
- 72.18 and
- 72.19 (8) \$1,972,000 is for a grant to the city of St.
- 72.20 Paul.
- 72.21 Nothing shall preclude an eligible organization
- 72.22 receiving funding under this paragraph from
- 72.23 applying for and receiving funding under
- 72.24 Minnesota Statutes, section 256E.33, 256E.36,
- 72.25 256K.45, or 256K.47, nor does receiving
- 72.26 funding under this paragraph count against
- 72.27 any eligible organization in the competitive
- 72.28 processes related to those grant programs
- 72.29 under Minnesota Statutes, section 256E.33,
- 72.30 256E.36, 256K.45, or 256K.47.
- 72.31 (i) Capital for emergency food distribution
- 72.32 **facilities.** \$7,000,000 in fiscal year 2024 is for
- 72.33 improving and expanding the infrastructure

73.1	of food shelf facilities. Grant money must be
73.2	made available to nonprofit organizations,
73.3	federally recognized Tribes, and local units of
73.4	government. This is a onetime appropriation
73.5	and is available until June 30, 2027.
73.6	(j) Emergency services program grants.
73.7	\$15,250,000 in fiscal year 2024 and
73.8	\$14,750,000 in fiscal year 2025 are for
73.9	emergency services grants under Minnesota
73.10	Statutes, section 256E.36. Any unexpended
73.11	amount in the first year does not cancel and
73.12	is available in the second year. The base for
73.13	this appropriation is \$25,000,000 in fiscal year
73.14	2026 and \$30,000,000 in fiscal year 2027.
73.15	(k) Homeless Youth Act grants. \$15,136,000
73.16	in fiscal year 2024 and \$15,136,000 in fiscal
73.17	year 2025 are for grants under Minnesota
73.18	Statutes, section 256K.45, subdivision 1. Any
73.19	unexpended amount in the first year does not
73.20	cancel and is available in the second year.
73.21	(l) Transitional housing programs.
73.22	\$3,000,000 in fiscal year 2024 and \$3,000,000
73.23	in fiscal year 2025 are for transitional housing
73.24	programs under Minnesota Statutes, section
73.25	256E.33. Any unexpended amount in the first
73.26	year does not cancel and is available in the
73.27	second year.
73.28	(m) Safe harbor shelter and housing grants.
73.29	\$2,125,000 in fiscal year 2024 and \$2,125,000
73.30	in fiscal year 2025 are for grants under
73.31	Minnesota Statutes, section 256K.47. Any
73.32	unexpended amount in the first year does not
73.33	cancel and is available in the second year. The

73.34

base for this appropriation is \$1,250,000 in

74.1	fiscal year 2026 and \$1,250,000 in fiscal year
74.2	2027.
74.3	(n) Supplemental nutrition assistance
74.4	program (SNAP) outreach. \$1,000,000 in
74.5	fiscal year 2024 and \$1,000,000 in fiscal year
74.6	2025 are for the SNAP outreach program
74.7	under Minnesota Statutes, section 256D.65.
74.8	The base for this appropriation is \$500,000 in
74.9	fiscal year 2026 and \$500,000 in fiscal year
74.10	2027.
74.11	(o) Base level adjustment. The general fund
74.12	base is \$83,179,000 in fiscal year 2026 and
74.13	\$88,179,000 in fiscal year 2027.
74.14	(p) Minnesota Food Assistance Program.
74.15	Unexpended funds for the Minnesota food
74.16	assistance program for fiscal year 2024 are
74.17	available until June 30, 2025.
74.18	EFFECTIVE DATE. This section is effective the day following final enactment.
74.19	Sec. 13. Laws 2023, chapter 70, article 20, section 2, subdivision 29, is amended to read:
74.20 74.21	Subd. 29. Grant Programs; Adult Mental Health Grants 132,327,000 121,270,000
74.22	(a) Mobile crisis grants to Tribal Nations.
74.23	\$1,000,000 in fiscal year 2024 and \$1,000,000
74.24	in fiscal year 2025 are for mobile crisis grants
74.25	under Minnesota Statutes section, sections
74.26	245.4661, subdivision 9, paragraph (b), clause
74.27	(15), and 245.4889, subdivision 1, paragraph
74.28	(b), clause (4), to Tribal Nations.
74.29	(b) Mental health provider supervision
74.30	grant program. \$1,500,000 in fiscal year
74.31	2024 and \$1,500,000 in fiscal year 2025 are
74.32	for the mental health provider supervision

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as introduced

grant program under Minnesota Statutes, 75.1 section 245.4663. 75.2 (c) Minnesota State University, Mankato 75.3 community behavioral health center. 75.4 \$750,000 in fiscal year 2024 and \$750,000 in 75.5 fiscal year 2025 are for a grant to the Center 75.6 for Rural Behavioral Health at Minnesota State 75.7 75.8 University, Mankato to establish a community behavioral health center and training clinic. 75.9 The community behavioral health center must 75.10 provide comprehensive, culturally specific, 75.11 trauma-informed, practice- and 75.12 evidence-based, person- and family-centered 75.13 mental health and substance use disorder 75.14 treatment services in Blue Earth County and 75.15 the surrounding region to individuals of all 75.16 ages, regardless of an individual's ability to 75.17 pay or place of residence. The community 75.18 behavioral health center and training clinic 75.19 must also provide training and workforce 75.20 development opportunities to students enrolled 75.21 in the university's training programs in the 75.22 fields of social work, counseling and student 75.23 personnel, alcohol and drug studies, 75.24 psychology, and nursing. Upon request, the 75.25 commissioner must make information 75.26 regarding the use of this grant funding 75.27 available to the chairs and ranking minority 75.28 members of the legislative committees with 75.29 jurisdiction over behavioral health. This is a 75.30

75.32 June 30, 2027.

75.31

75.33 (d) White Earth Nation; adult mental health

onetime appropriation and is available until

- 75.34 **initiative.** \$300,000 in fiscal year 2024 and
- 75.35 \$300,000 in fiscal year 2025 are for adult

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- mental health initiative grants to the White
- Earth Nation. This is a onetime appropriation.
- 76.3 (e) **Mobile crisis grants.** \$8,472,000 in fiscal
- 76.4 year 2024 and \$8,380,000 in fiscal year 2025
- are for the mobile crisis grants under
- 76.6 Minnesota Statutes, section sections 245.4661,
- subdivision 9, paragraph (b), clause (15), and
- 76.8 245.4889, subdivision 1, paragraph (b), clause
- 76.9 (4). This is a onetime appropriation and is
- 76.10 available until June 30, 2027.
- 76.11 (f) **Base level adjustment.** The general fund
- 76.12 base is \$121,980,000 in fiscal year 2026 and
- 76.13 \$121,980,000 in fiscal year 2027.
- Sec. 14. Laws 2023, chapter 70, article 20, section 3, subdivision 2, is amended to read:

76.15 Subd. 2. Health Improvement

76.16	Appropriations by Fund		
76.17	General	229,600,000	210,030,000
76.18 76.19	State Government Special Revenue	12,392,000	12,682,000
76.20	Health Care Access	49,051,000	53,290,000
76.21	Federal TANF	11,713,000	11,713,000

- 76.22 (a) Studies of telehealth expansion and
- 76.23 **payment parity.** \$1,200,000 in fiscal year
- 76.24 2024 is from the general fund for studies of
- 76.25 telehealth expansion and payment parity. This
- 76.26 is a onetime appropriation and is available
- 76.27 until June 30, 2025.
- 76.28 (b) Advancing equity through capacity
- 76.29 building and resource allocation grant
- 76.30 **program.** \$916,000 in fiscal year 2024 and
- 76.31 \$916,000 in fiscal year 2025 are from the
- 76.32 general fund for grants under Minnesota
- 76.33 Statutes, section 144.9821. This is a onetime
- 76.34 appropriation.

77.1 (c) Grant to Minnesota Community Health

- 77.2 Worker Alliance; program administration
- and evaluation. \$971,000 in fiscal year 2024
- and \$971,000 in fiscal year 2025 are from the
- general fund for Minnesota Statutes, section
- 77.6 144.1462. Of the total amount appropriated,
- 77.7 \$750,000 in fiscal year 2024 and \$750,000 in
- fiscal year 2025 are for a noncompetitive grant
- to the Minnesota Community Health Worker
- 77.10 Alliance.
- 77.11 (d) Community solutions for healthy child
- 77.12 **development grants.** \$2,730,000 in fiscal year
- 77.13 2024 and \$2,730,000 in fiscal year 2025 are
- 77.14 from the general fund for grants under
- 77.15 Minnesota Statutes, section 145.9257. The
- base for this appropriation is \$2,415,000 in
- 77.17 fiscal year 2026 and \$2,415,000 in fiscal year
- 77.18 2027.
- 77.19 (e) Comprehensive Overdose and Morbidity
- 77.20 **Prevention Act.** \$9,794,000 in fiscal year
- 77.21 2024 and \$10,458,000 in fiscal year 2025 are
- 77.22 from the general fund for comprehensive
- 77.23 overdose and morbidity prevention strategies
- vinder Minnesota Statutes, section 144.0528.
- The base for this appropriation is \$10,476,000
- 77.26 in fiscal year 2026 and \$10,476,000 in fiscal
- 77.27 year 2027.
- 77.28 (f) Emergency preparedness and response.
- 77.29 \$10,486,000 in fiscal year 2024 and
- 77.30 \$14,314,000 in fiscal year 2025 are from the
- general fund for public health emergency
- 77.32 preparedness and response, the sustainability
- of the strategic stockpile, and COVID-19
- 77.34 pandemic response transition. The base for

- this appropriation is \$11,438,000 in fiscal year
- 78.2 2026 and \$11,362,000 in fiscal year 2027.
- 78.3 (g) Healthy Beginnings, Healthy Families.
- 78.4 (1) \$8,440,000 in fiscal year 2024 and
- 78.5 \$7,305,000 in fiscal year 2025 are from the
- 78.6 general fund for grants under Minnesota
- 78.7 Statutes, sections 145.9571 to 145.9576. The
- base for this appropriation is \$1,500,000 in
- 78.9 fiscal year 2026 and \$1,500,000 in fiscal year
- 78.10 2027. (2) Of the amount in clause (1),
- 78.11 \$400,000 in fiscal year 2024 is to support the
- 78.12 transition from implementation of activities
- 78.13 under Minnesota Statutes, section 145.4235,
- 78.14 to implementation of activities under
- 78.15 Minnesota Statutes, sections 145.9571 to
- 78.16 145.9576. The commissioner shall award four
- 78.17 sole-source grants of \$100,000 each to Face
- 78.18 to Face, Cradle of Hope, Division of Indian
- 78.19 Work, and Minnesota Prison Doula Project.
- 78.20 The amount in this clause is a onetime
- 78.21 appropriation.
- 78.22 (h) **Help Me Connect.** \$463,000 in fiscal year
- 78.23 2024 and \$921,000 in fiscal year 2025 are
- 78.24 from the general fund for the Help Me
- 78.25 Connect program under Minnesota Statutes,
- 78.26 section 145.988.
- 78.27 (i) **Home visiting.** \$2,000,000 in fiscal year
- 78.28 2024 and \$2,000,000 in fiscal year 2025 are
- 78.29 from the general fund for home visiting under
- 78.30 Minnesota Statutes, section 145.87, to provide
- 78.31 home visiting to priority populations under
- 78.32 Minnesota Statutes, section 145.87,
- 78.33 subdivision 1, paragraph (e).
- 78.34 (j) No Surprises Act enforcement.
- 78.35 \$1,210,000 in fiscal year 2024 and \$1,090,000

- in fiscal year 2025 are from the general fund
- 79.2 for implementation of the federal No Surprises
- 79.3 Act under Minnesota Statutes, section
- 79.4 62Q.021, and an assessment of the feasibility
- of a statewide provider directory. The general
- fund base for this appropriation is \$855,000
- in fiscal year 2026 and \$855,000 in fiscal year
- 79.8 2027.
- 79.9 (k) Office of African American Health.
- 79.10 \$1,000,000 in fiscal year 2024 and \$1,000,000
- 79.11 in fiscal year 2025 are from the general fund
- 79.12 for grants under the authority of the Office of
- 79.13 African American Health under Minnesota
- 79.14 Statutes, section 144.0756.
- 79.15 (l) Office of American Indian Health.
- 79.16 \$1,000,000 in fiscal year 2024 and \$1,000,000
- 79.17 in fiscal year 2025 are from the general fund
- 79.18 for grants under the authority of the Office of
- 79.19 American Indian Health under Minnesota
- 79.20 Statutes, section 144.0757.
- 79.21 (m) Public health system transformation
- 79.22 **grants.** (1) \$9,844,000 in fiscal year 2024 and
- 79.23 \$9,844,000 in fiscal year 2025 are from the
- 79.24 general fund for grants under Minnesota
- 79.25 Statutes, section 145A.131, subdivision 1,
- 79.26 paragraph (f).
- 79.27 (2) \$535,000 in fiscal year 2024 and \$535,000
- 79.28 in fiscal year 2025 are from the general fund
- 79.29 for grants under Minnesota Statutes, section
- 79.30 145A.14, subdivision 2b.
- 79.31 (3) \$321,000 in fiscal year 2024 and \$321,000
- in fiscal year 2025 are from the general fund
- 79.33 for grants under Minnesota Statutes, section
- 79.34 144.0759.

80.1	(n) Health care workforce. (1) \$1,010,000
80.2	in fiscal year 2024 and \$2,550,000 in fiscal
80.3	year 2025 are from the health care access fund
80.4	for rural training tracks and rural clinicals
80.5	grants under Minnesota Statutes, sections
80.6	144.1505 and 144.1507. The base for this
80.7	appropriation is \$4,060,000 in fiscal year 2026
80.8	and \$3,600,000 in fiscal year 2027.
80.9	(2) \$420,000 in fiscal year 2024 and \$420,000
80.10	in fiscal year 2025 are from the health care
80.11	access fund for immigrant international
80.12	medical graduate training grants under
80.13	Minnesota Statutes, section 144.1911.
80.14	(3) \$5,654,000 in fiscal year 2024 and
80.15	\$5,550,000 in fiscal year 2025 are from the
80.16	health care access fund for site-based clinical
80.17	training grants under Minnesota Statutes,
80.18	section 144.1508. The base for this
80.19	appropriation is \$4,657,000 in fiscal year 2026
80.20	and \$3,451,000 in fiscal year 2027.
80.21	(4) \$1,000,000 in fiscal year 2024 and
80.22	\$1,000,000 in fiscal year 2025 are from the
80.23	health care access fund for mental health for
80.24	health care professional grants. This is a
80.25	onetime appropriation and is available until
80.26	June 30, 2027.
80.27	(5) \$502,000 in fiscal year 2024 and \$502,000
80.28	in fiscal year 2025 are from the health care
80.29	access fund for workforce research and data
80.30	analysis of shortages, maldistribution of health
80.31	care providers in Minnesota, and the factors
80.32	that influence decisions of health care
80.33	providers to practice in rural areas of
80.34	Minnesota.

Article 8 Sec. 14.

81.1	(o) School health. \$800,000 in fiscal year
81.2	2024 and \$1,300,000 in fiscal year 2025 are
81.3	from the general fund for grants under
81.4	Minnesota Statutes, section 145.903. The base
81.5	for this appropriation is \$2,300,000 in fiscal
81.6	year 2026 and \$2,300,000 in fiscal year 2027.
81.7	(p) Long COVID. \$3,146,000 in fiscal year
81.8	2024 and \$3,146,000 in fiscal year 2025 are
81.9	from the general fund for grants and to
81.10	implement Minnesota Statutes, section
81.11	145.361.
81.12	(q) Workplace safety grants. \$4,400,000 in
81.13	fiscal year 2024 is from the general fund for
81.14	grants to health care entities to improve
81.15	employee safety or security. This is a onetime
81.16	appropriation and is available until June 30,
81.17	2027. The commissioner may use up to ten
81.18	percent of this appropriation for
81.19	administration.
81.20	(r) Clinical dental education innovation
81.21	grants. \$1,122,000 in fiscal year 2024 and
81.22	\$1,122,000 in fiscal year 2025 are from the
81.23	general fund for clinical dental education
81.24	innovation grants under Minnesota Statutes,
81.25	section 144.1913.
81.26	(s) Emmett Louis Till Victims Recovery
81.27	Program. \$500,000 in fiscal year 2024 is from
81.28	the general fund for a grant to the Emmett
81.29	Louis Till Victims Recovery Program. The
81.30	commissioner must not use any of this
81.31	appropriation for administration. This is a
81.32	onetime appropriation and is available until
81.33	June 30, 2025.

82.1	(t) Center for health care affordability.
82.2	\$2,752,000 in fiscal year 2024 and \$3,989,000
82.3	in fiscal year 2025 are from the general fund
82.4	to establish a center for health care
82.5	affordability and to implement Minnesota
82.6	Statutes, section 62J.312. The general fund
82.7	base for this appropriation is \$3,988,000 in
82.8	fiscal year 2026 and \$3,988,000 in fiscal year
82.9	2027.
82.10	(u) Federally qualified health centers
82.11	apprenticeship program. \$690,000 in fiscal
82.12	year 2024 and \$690,000 in fiscal year 2025
82.13	are from the general fund for grants under
82.14	Minnesota Statutes, section 145.9272.
82.15	(v) Alzheimer's public information
82.16	program. \$80,000 in fiscal year 2024 and
82.17	\$80,000 in fiscal year 2025 are from the
82.18	general fund for grants to community-based
82.19	organizations to co-create culturally specific
82.20	messages to targeted communities and to
82.21	promote public awareness materials online
82.22	through diverse media channels.
82.23	(w) Keeping Nurses at the Bedside Act;
82.24	contingent appropriation Nurse and Patient
82.25	Safety Act. The appropriations in this
82.26	paragraph are contingent upon legislative
82.27	enactment of 2023 Senate File 1384 by the
82.28	93rd Legislature. The appropriations in this
82.29	paragraph are available until June 30, 2027.
82.30	(1) \$5,317,000 in fiscal year 2024 and
82.31	\$5,317,000 in fiscal year 2025 are from the
82.32	general fund for loan forgiveness under
82.33	Minnesota Statutes, section 144.1501, for
82.34	eligible nurses who have agreed to work as
82.35	hospital nurses in accordance with Minnesota

- Statutes, section 144.1501, subdivision 2, 83.1 83.2 paragraph (a), clause (7). (2) \$66,000 in fiscal year 2024 and \$66,000 83.3 in fiscal year 2025 are from the general fund 83.4 for loan forgiveness under Minnesota Statutes, 83.5 section 144.1501, for eligible nurses who have 83.6 agreed to teach in accordance with Minnesota 83.7 83.8 Statutes, section 144.1501, subdivision 2, paragraph (a), clause (3). 83.9
- 83.10 (3) \$545,000 in fiscal year 2024 and \$879,000
- in fiscal year 2025 are from the general fund
- 83.12 to administer Minnesota Statutes, section
- 83.13 144.7057; to perform the evaluation duties
- 83.14 described in Minnesota Statutes, section
- 83.15 <u>144.7058</u> <u>144.566</u>; to continue prevention of
- violence in health care program activities; to
- 83.17 analyze potential links between adverse events
- 83.18 and understaffing; to convene stakeholder
- 83.19 groups and create a best practices toolkit; and
- 83.20 for a report on the current status of the state's
- 83.21 nursing workforce employed by hospitals,
- 83.22 according to Laws 2023, chapter 75. The base
- for this appropriation is \$624,000 in fiscal year
- 83.24 2026 and \$454,000 in fiscal year 2027.
- 83.25 (x) Supporting healthy development of
- 83.26 **babies.** \$260,000 in fiscal year 2024 and
- \$3.27 \$260,000 in fiscal year 2025 are from the
- 83.28 general fund for a grant to the Amherst H.
- 83.29 Wilder Foundation for the African American
- 83.30 Babies Coalition initiative. The base for this
- appropriation is \$520,000 in fiscal year 2026
- and \$0 in fiscal year 2027. Any appropriation
- in fiscal year 2026 is available until June 30,
- 83.34 2027. This paragraph expires on June 30,
- 83.35 2027.

84.1	(y) Health professional education loan
84.2	forgiveness. \$2,780,000 in fiscal year 2024
84.3	is from the general fund for eligible mental
84.4	health professional loan forgiveness under
84.5	Minnesota Statutes, section 144.1501. This is
84.6	a onetime appropriation. The commissioner
84.7	may use up to ten percent of this appropriation
84.8	for administration.
84.9	(z) Primary care residency expansion grant
84.10	program. \$400,000 in fiscal year 2024 and
84.11	\$400,000 in fiscal year 2025 are from the
84.12	general fund for a psychiatry resident under
84.13	Minnesota Statutes, section 144.1506.
84.14	(aa) Pediatric primary care mental health
84.15	training grant program. \$1,000,000 in fiscal
84.16	year 2024 and \$1,000,000 in fiscal year 2025
84.17	are from the general fund for grants under
84.18	Minnesota Statutes, section 144.1509. The
84.19	commissioner may use up to ten percent of
84.20	this appropriation for administration.
84.21	(bb) Mental health cultural community
84.22	continuing education grant program.
84.23	\$500,000 in fiscal year 2024 and \$500,000 in
84.24	fiscal year 2025 are from the general fund for
84.25	grants under Minnesota Statutes, section
84.26	144.1511. The commissioner may use up to
84.27	ten percent of this appropriation for
84.28	administration.
84.29	(cc) Labor trafficking services grant
84.30	program. \$500,000 in fiscal year 2024 and
84.31	\$500,000 in fiscal year 2025 are from the
84.32	general fund for grants under Minnesota
84.33	Statutes, section 144.3885.

85.1	(dd) Palliative Care Advisory Council.
85.2	\$40,000 in fiscal year 2024 and \$40,000 in
85.3	fiscal year 2025 are from the general fund for
85.4	grants administration under Minnesota
85.5	Statutes, section 144.059.
85.6	(ee) Analysis of a universal health care
85.7	financing system. \$1,815,000 in fiscal year
85.8	2024 and \$580,000 in fiscal year 2025 are
85.9	from the general fund to the commissioner to
85.10	contract for an analysis of the benefits and
85.11	costs of a legislative proposal for a universal
85.12	health care financing system and a similar
85.13	analysis of the current health care financing
85.14	system. The base for this appropriation is
85.15	\$580,000 in fiscal year 2026 and \$0 in fiscal
85.16	year 2027. This appropriation is available until
85.17	June 30, 2027.
85.18	(ff) Charitable assets public interest review.
85.19	(1) The appropriations under this paragraph
85.20	are contingent upon legislative enactment of
85.21	2023 House File 402 by the 93rd Legislature.
85.22	(2) \$1,584,000 in fiscal year 2024 and
85.23	\$769,000 in fiscal year 2025 are from the
85.24	general fund to review certain health care
85.25	entity transactions; to conduct analyses of the
85.26	impacts of health care transactions on health
85.27	care cost, quality, and competition; and to
85.28	issue public reports on health care transactions
85.29	in Minnesota and their impacts. The base for
85.30	this appropriation is \$710,000 in fiscal year
85.31	2026 and \$710,000 in fiscal year 2027.
85.32	(gg) Study of the development of a statewide
85.33	registry for provider orders for
85.34	life-sustaining treatment. \$365,000 in fiscal
85.35	year 2024 and \$365,000 in fiscal year 2025

85.1

86.1	are from the general fund for a study of the
86.2	development of a statewide registry for
86.3	provider orders for life-sustaining treatment.
86.4	This is a onetime appropriation.
86.5	(hh) Task Force on Pregnancy Health and
86.6	Substance Use Disorders. \$199,000 in fiscal
86.7	year 2024 and \$100,000 in fiscal year 2025
86.8	are from the general fund for the Task Force
86.9	on Pregnancy Health and Substance Use
86.10	Disorders. This is a onetime appropriation and
86.11	is available until June 30, 2025.
86.12	(ii) 988 Suicide and crisis lifeline. \$4,000,000
86.13	in fiscal year 2024 is from the general fund
86.14	for 988 national suicide prevention lifeline
86.15	grants under Minnesota Statutes, section
86.16	145.561. This is a onetime appropriation.
86.17	(jj) Equitable Health Care Task Force.
86.18	\$779,000 in fiscal year 2024 and \$749,000 in
86.19	fiscal year 2025 are from the general fund for
86.20	the Equitable Health Care Task Force. This is
86.21	a onetime appropriation.
86.22	(kk) Psychedelic Medicine Task Force.
86.23	\$338,000 in fiscal year 2024 and \$171,000 in
86.24	fiscal year 2025 are from the general fund for
86.25	the Psychedelic Medicine Task Force. This is
86.26	a onetime appropriation.
86.27	(ll) Medical education and research costs.
86.28	\$300,000 in fiscal year 2024 and \$300,000 in
86.29	fiscal year 2025 are from the general fund for
86.30	the medical education and research costs
86.31	program under Minnesota Statutes, section
86.32	62J.692.
86.33	(mm) Special Guerilla Unit Veterans grant
86.34	program. \$250,000 in fiscal year 2024 and

87.1	\$250,000 in fiscal year 2025 are from the
87.2	general fund for a grant to the Special
87.3	Guerrilla Units Veterans and Families of the
87.4	United States of America to offer
87.5	programming and culturally specific and
87.6	specialized assistance to support the health
87.7	and well-being of Special Guerilla Unit
87.8	Veterans. The base for this appropriation is
87.9	\$500,000 in fiscal year 2026 and \$0 in fiscal
87.10	year 2027. Any amount appropriated in fiscal
87.11	year 2026 is available until June 30, 2027.
87.12	This paragraph expires June 30, 2027.
87.13	(nn) Safe harbor regional navigator.
87.14	\$300,000 in fiscal year 2024 and \$300,000 in
87.15	fiscal year 2025 are for a regional navigator
87.16	in northwestern Minnesota. The commissioner
87.17	may use up to ten percent of this appropriation
87.18	for administration.
87.19	(oo) Network adequacy. \$798,000 in fiscal
87.20	year 2024 and \$491,000 in fiscal year 2025
87.21	are from the general fund for reviews of
87.22	provider networks under Minnesota Statutes,
87.23	section 62K.10, to determine network
87.24	adequacy.
87.25	(pp)(1) TANF Appropriations. TANF funds
87.26	must be used as follows:
87.27	(i) \$3,579,000 in fiscal year 2024 and
87.28	\$3,579,000 in fiscal year 2025 are from the
87.29	TANF fund for home visiting and nutritional
87.30	services listed under Minnesota Statutes,
87.31	section 145.882, subdivision 7, clauses (6) and
87.32	(7). Funds must be distributed to community
87.33	health boards according to Minnesota Statutes,

87.34

section 145A.131, subdivision 1;

- 88.1 (ii) \$2,000,000 in fiscal year 2024 and
- \$2,000,000 in fiscal year 2025 are from the
- 88.3 TANF fund for decreasing racial and ethnic
- 88.4 disparities in infant mortality rates under
- 88.5 Minnesota Statutes, section 145.928,
- subdivision 7;
- 88.7 (iii) \$4,978,000 in fiscal year 2024 and
- 88.8 \$4,978,000 in fiscal year 2025 are from the
- TANF fund for the family home visiting grant
- 88.10 program under Minnesota Statutes, section
- 88.11 145A.17. \$4,000,000 of the funding in fiscal
- 88.12 year 2024 and \$4,000,000 in fiscal year 2025
- 88.13 must be distributed to community health
- 88.14 boards under Minnesota Statutes, section
- 88.15 145A.131, subdivision 1. \$978,000 of the
- 88.16 funding in fiscal year 2024 and \$978,000 in
- 88.17 fiscal year 2025 must be distributed to Tribal
- 88.18 governments under Minnesota Statutes, section
- 88.19 145A.14, subdivision 2a;
- 88.20 (iv) \$1,156,000 in fiscal year 2024 and
- \$1,156,000 in fiscal year 2025 are from the
- 88.22 TANF fund for sexual and reproductive health
- 88.23 services grants under Minnesota Statutes,
- 88.24 section 145.925; and
- 88.25 (v) the commissioner may use up to 6.23
- 88.26 percent of the funds appropriated from the
- 88.27 TANF fund each fiscal year to conduct the
- 88.28 ongoing evaluations required under Minnesota
- 88.29 Statutes, section 145A.17, subdivision 7, and
- 88.30 training and technical assistance as required
- under Minnesota Statutes, section 145A.17,
- 88.32 subdivisions 4 and 5.
- 88.33 (2) TANF Carryforward. Any unexpended
- 88.34 balance of the TANF appropriation in the first

89.1	year does not cancel but is available in the	
89.2	second year.	
89.3	(qq) Base level adjustments. The general	
89.4	fund base is \$197,644,000 in fiscal year 2026	
89.5	and \$195,714,000 in fiscal year 2027. The	
89.6	health care access fund base is \$53,354,000	
89.7	in fiscal year 2026 and \$50,962,000 in fiscal	
89.8	year 2027.	
89.9	Sec. 15. Laws 2023, chapter 70, article 20, section 3, subdivision 3, is amended to read:	
89.10	Subd. 3. Health Protection	
89.11	Appropriations by Fund	
89.12	General 38,125,000 36,030,000	
89.13 89.14	State Government Special Revenue 72,282,000 73,522,000	
89.15	(a) Climate resiliency. \$506,000 in fiscal year	
89.16	2024 and \$506,000 in fiscal year 2025 are	
89.17	from the general fund for activities under	
89.18	Minnesota Statutes, section 144.9981.	
89.19	(b) Lead remediation in schools and child	
89.20	care settings. \$146,000 in fiscal year 2024	
89.21	and \$239,000 in fiscal year 2025 are from the	
89.22	general fund for grants under Minnesota	
89.23	Statutes, section 145.9275.	
89.24	(c) MinnesotaOne Health Antimicrobial	
89.25	Stewardship Collaborative. \$312,000 in	
89.26	fiscal year 2024 and \$312,000 in fiscal year	
89.27	2025 are from the general fund for the	
89.28	Minnesota One Health Antibiotic Stewardship	
89.29	Collaborative under Minnesota Statutes,	
89.30	section 144.0526.	
89.31	(d) Skin-lightening products public	
89.32	awareness and education grant. \$100,000	
89.33	in fiscal year 2024 and \$100,000 in fiscal year	

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DTT/VJ

24-08006

as introduced

90.1	2025 are from the general fund for a grant to
90.2	the Beautywell Project for public awareness
90.3	and education activities to address issues of
90.4	colorism, skin-lightening products, and
90.5	chemical exposures from these products. This
90.6	is a onetime appropriation.
90.7	(e) Comprehensive Overdose and Morbidity
90.8	Prevention Act; public health laboratory
90.9	and infectious disease prevention.
90.10	\$2,432,000 in fiscal year 2024 and \$1,732,000
90.11	in fiscal year 2025 are from the general fund
90.12	for comprehensive overdose and morbidity
90.13	prevention strategies under Minnesota
90.14	Statutes, section 144.0528.
90.15	(f) HIV prevention health equity. \$2,267,000
90.16	in fiscal year 2024 and \$2,267,000 in fiscal
90.17	year 2025 are from the general fund for equity
90.18	in HIV prevention. This is a onetime
90.19	appropriation.
90.20	(g) Green burials and natural organic
90.21	reduction study and report. \$132,000 in
90.22	fiscal year 2024 is from the general fund for
90.23	a study and report on green burials and a study
90.24	on natural organic reduction.
90.25	(h) Uninsured and underinsured adult
90.26	vaccine program. \$1,470,000 in fiscal year
90.27	2024 and \$1,470,000 in fiscal year 2025 are
90.28	from the general fund for the program for
90.29	vaccines for uninsured and underinsured
90.30	adults. This is a onetime appropriation.
90.31	(i) Transfer to public health response
90.32	contingency account. The commissioner shall
90.33	transfer \$2,500,000 in fiscal year 2024 from
90.34	the general fund to the public health response

91.1	contingency account established in Minnesota			
91.2	Statutes, section 144.4199. This is a onetime			
91.3	transfer.			
91.4	(j) Base level adjustments. The general fund			
91.5	base is \$32,332,000 in fiscal year 2026 and			
91.6	\$32,162,000 in fiscal year 2027. The state			
91.7	government special revenue fund base is			
91.8	\$73,391,000 \$70,511,000 in fiscal year 2026			
91.9	and \$73,391,000 \$70,511,000 in fiscal year			
91.10	2027.			
91.11	Sec. 16. Laws 2023, chapter 70, article 20, secti	on 12, as	s amended by Lav	ws 2023, chapter
91.12	75, section 13, is amended to read:			
91.13	Sec. 12. COMMISSIONER OF			
91.14	MANAGEMENT AND BUDGET	\$	12,932,000 \$	3,412,000
91.15	(a) Outcomes and evaluation consultation.			
91.16	\$450,000 in fiscal year 2024 and \$450,000 in			
91.17	fiscal year 2025 are for outcomes and			
91.18	evaluation consultation requirements.			
91.19	(b) Department of Children, Youth, and			
91.20	Families. \$11,931,000 in fiscal year 2024 and			
91.21	\$2,066,000 in fiscal year 2025 are to establish			
91.22	the Department of Children, Youth, and			
91.23	Families. This is a onetime appropriation.			
91.24	(c) Keeping Nurses at the Bedside Act			
91.25	impact evaluation; contingent			
91.26	appropriation. \$232,000 in fiscal year 2025			
91.27	is for the Keeping Nurses at the Bedside Act			
91.28	impact evaluation. This appropriation is			
91.29	contingent upon legislative enactment by the			
91.30	93rd Legislature of a provision substantially			
91.31	similar to the impact evaluation provision in			
91.32	2023 S.F. No. 2995, the third engrossment,			
91.33	article 3, section 22. This is a onetime			

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24-08006

as introduced

- 92.3 (d) Health care subcabinet. \$551,000 in
- 92.4 fiscal year 2024 and \$664,000 in fiscal year
- 92.5 2025 are to hire an executive director for the
- 92.6 health care subcabinet and to provide staffing
- 92.7 and administrative support for the health care
- 92.8 subcabinet.
- 92.9 (e) **Base level adjustment.** The general fund
- 92.10 base is \$1,114,000 in fiscal year 2026 and
- 92.11 \$1,114,000 in fiscal year 2027.
- 92.12 Sec. 17. Laws 2023, chapter 70, article 20, section 23, is amended to read:
- 92.13 Sec. 23. TRANSFERS.
- 92.14 Subdivision 1. **Grants.** The commissioner of human services and commissioner of
- 92.15 children, youth, and families, with the approval of the commissioner of management and
- 92.16 budget, may transfer unencumbered appropriation balances for the biennium ending June
- 92.17 30, 2025, within fiscal years among MFIP; general assistance; medical assistance;
- 92.18 MinnesotaCare; MFIP child care assistance under Minnesota Statutes, section 119B.05;
- 92.19 Minnesota supplemental aid program; housing support program; the entitlement portion of
- 92.20 Northstar Care for Children under Minnesota Statutes, chapter 256N; and the entitlement
- 92.21 portion of the behavioral health fund between fiscal years of the biennium. The commissioner
- 92.22 shall report to the chairs and ranking minority members of the legislative committees with
- 92.23 jurisdiction over health and human services quarterly about transfers made under this
- 92.24 subdivision.
- 92.25 Subd. 2. **Administration.** Positions, salary money, and nonsalary administrative money
- may be transferred within and between the Department of Human Services and Department
- 92.27 <u>of Children, Youth, and Families</u> as the commissioners consider necessary, with the advance
- 92.28 approval of the commissioner of management and budget. The commissioners shall report
- 92.29 to the chairs and ranking minority members of the legislative committees with jurisdiction
- over health and human services finance quarterly about transfers made under this section.

93.1 Sec. 18. Laws 2023, chapter 75, section 10, is amended to read:

Sec. 10. USE OF APPROPRIATION; LOAN FORGIVENESS ADMINISTRATION. 93.2 The commissioner of health may also use the appropriation in S.F. No. 2995, article 20, 93.3 section 3, subdivision 2, paragraph (w), clause (3), if enacted during 2023 regular legislative 93.4 session, Laws 2023, chapter 70, article 20, section 3, subdivision 2, paragraph (w), clause 93.5 (3), for administering sections 2 to 5. 93.6 Sec. 19. REDUCTIONS IN APPROPRIATIONS, CANCELLATIONS, AND 93.7 REAPPROPRIATIONS. 93.8 Subdivision 1. Central Office Adjustments. (a) The general fund appropriation in Laws 93.9 2023, chapter 70, article 20, section 2, subdivision 7, for fiscal year 2024 is reduced by 93.10 \$136,000 and that amount cancels to the general fund. 93.11 (b) \$136,000 in fiscal year 2025 is appropriated from the general fund to the commissioner 93.12 of human services for behavioral health, deaf and hard of hearing, and housing services 93.13 administration costs. This appropriation is available until June 30, 2027. 93.14 (c) The general fund appropriation in Laws 2023, chapter 70, article 20, section 2, 93.15 subdivision 5, paragraph (a), for fiscal year 2024 is reduced by \$3,216,000, and that amount 93.16 cancels to the general fund. 93.17 (d) \$3,216,000 in fiscal year 2025 is appropriated from the general fund to the 93.18 commissioner of human services for interactive voice response upgrades and translation 93.19 services for medical assistance and MinnesotaCare enrollees with limited English proficiency. 93.20 This appropriation is available until June 30, 2027. 93.21 (e) The TANF appropriations in Laws 2023, chapter 70, article 20, section 3, are reduced 93.22 by \$1,090,000 for fiscal year 2024 and \$1,194,000 for fiscal year 2025, and those amounts 93.23 cancel to the TANF fund. 93.24

93.25 (f) \$1,090,000 in fiscal year 2024 and \$1,194,000 in fiscal year 2025 are appropriated
93.26 from the TANF fund to the commissioner of human services for children and families;
93.27 administrative costs.

Subd. 2. Family Assets for Independence in Minnesota. (a) The general fund
appropriation in Laws 2023, chapter 70, article 20, section 2, subdivision 22, paragraph (o),
for fiscal year 2025 is reduced by \$1,391,000, and that amount cancels to the general fund.

94.1	(b) \$1,391,000 in fiscal year 2025 is appropriated from the general fund to the		
94.2	commissioner of human services for the family assets for independence in Minnesota		
94.3	program under Minnesota Statutes, section 256E.35. This is a onetime appropriation and is		
94.4	available until June 30, 2027.		
94.5	Subd. 3. Community Action Agency Grants. (a) The general fund appropriation in		
94.6	Laws 2023, chapter 70, article 20, section 2, subdivision 23, for fiscal year 2025 is reduced		
94.7	by \$2,704,000, and that amount cancels to the general fund.		
94.8	(b) \$2,704,000 in fiscal year 2025 is appropriated from the general fund to the		
94.9	commissioner of human services for community action agencies under Minnesota Statutes		
94.10	section 256E.30.		
94.11	Subd. 4. Fraud Prevention Grants. (a) The general fund appropriation in Laws 2023,		
94.12	chapter 70, article 20, section 2, subdivision 3, for fiscal year 2025 is reduced by \$425,000,		
94.13	and that amount cancels to the general fund. The general fund base in Laws 2023, chapter		
94.14	70, article 20, section 2, subdivision 3, paragraph (h), is reduced by \$425,000 in fiscal years		
94.15	2026 and 2027.		
94.16	(b) \$425,000 in fiscal year 2025 is appropriated from the general fund to the commissioner		
94.17	of human services for fraud prevention grants.		
94.18	(c) The general fund appropriation in Laws 2023, chapter 70, article 20, section 2,		
94.19	subdivision 24, for fiscal year 2025 is reduced by \$2,593,000, and that amount cancels to		
94.20	the general fund. The general fund base in Laws 2023, chapter 70, article 20, section 2,		
94.21	subdivision 24, paragraph (o), is reduced by \$2,593,000 in fiscal years 2026 and 2027.		
94.22	(d) \$2,593,000 in fiscal year 2025 is appropriated from the general fund to the		
94.23	commissioner of human services for fraud prevention grants.		
94.24	EFFECTIVE DATE. The fiscal year 2024 appropriation reductions and cancellations		
94.25	in this section are effective the day following final enactment.		
94.26	Sec. 20. DEPARTMENT OF CHILDREN, YOUTH, AND FAMILIES FEDERAL		
94.27	REIMBURSEMENT.		
74.27			
94.28	Minnesota Management and Budget shall reflect Department of Children, Youth, and		
94.29	Families federal reimbursement costs as expenditure reductions in the general fund budgeted		
94.30	fund balance as they would be reported in conformity with generally accepted accounting		
94.31	principles.		

04/03/24 REVISOR DTT/VJ 24-08006 as introduced

- 95.1 Sec. 21. **REPEALER.**
- Laws 2023, chapter 70, article 20, section 2, subdivision 31, as amended by Laws 2023,
- 95.3 chapter 75, section 12, is repealed.

APPENDIX

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144.0528 COMPREHENSIVE DRUG OVERDOSE AND MORBIDITY PREVENTION ACT.

Subdivision 1. **Definition.** For the purpose of this section, "drug overdose and morbidity" means health problems that people experience after inhaling, ingesting, or injecting medicines in quantities that exceed prescription status; medicines taken that are prescribed to a different person; medicines that have been adulterated or adjusted by contaminants intentionally or unintentionally; or nonprescription drugs in amounts that result in morbidity or mortality.

- Subd. 2. **Establishment.** The commissioner of health shall establish a comprehensive drug overdose and morbidity program to conduct comprehensive drug overdose and morbidity prevention activities, epidemiologic investigations and surveillance, and evaluation to monitor, address, and prevent drug overdoses statewide through integrated strategies that include the following:
 - (1) advance access to evidence-based nonnarcotic pain management services;
- (2) implement culturally specific interventions and prevention programs with population and community groups in greatest need, including those who are pregnant and their infants;
- (3) enhance overdose prevention and supportive services for people experiencing homelessness. This strategy includes funding for emergency and short-term housing subsidies through the homeless overdose prevention hub and expanding support for syringe services programs serving people experiencing homelessness statewide;
- (4) equip employers to promote health and well-being of employees by addressing substance misuse and drug overdose;
- (5) improve outbreak detection and identification of substances involved in overdoses through the expansion of the Minnesota Drug Overdose and Substance Use Surveillance Activity (MNDOSA);
 - (6) implement Tackling Overdose With Networks (TOWN) community prevention programs;
- (7) identify, address, and respond to drug overdose and morbidity in those who are pregnant or have just given birth through multitiered approaches that may:
 - (i) promote medication-assisted treatment options;
- (ii) support programs that provide services in accord with evidence-based care models for mental health and substance abuse disorder;
- (iii) collaborate with interdisciplinary and professional organizations that focus on quality improvement initiatives related to substance use disorder; and
- (iv) implement substance use disorder-related recommendations from the maternal mortality review committee, as appropriate; and
- (8) design a system to assess, address, and prevent the impacts of drug overdose and morbidity on those who are pregnant, their infants, and children. Specifically, the commissioner of health may:
- (i) inform health care providers and the public of the prevalence, risks, conditions, and treatments associated with substance use disorders involving or affecting pregnancies, infants, and children; and
- (ii) identify communities, families, infants, and children affected by substance use disorder in order to recommend focused interventions, prevention, and services.
- Subd. 3. **Partnerships.** The commissioner of health may consult with sovereign Tribal nations, the Minnesota Departments of Human Services, Corrections, Public Safety, and Education, local public health agencies, care providers and insurers, community organizations that focus on substance abuse risks and recovery, individuals affected by substance use disorders, and any other individuals, entities, and organizations as necessary to carry out the goals of this section.
- Subd. 4. **Grants authorized.** (a) The commissioner of health may award grants, as funding allows, to entities and organizations focused on addressing and preventing the negative impacts of drug overdose and morbidity. Examples of activities the commissioner may consider for these grant awards include:
- (1) developing, implementing, or promoting drug overdose and morbidity prevention programs and activities;

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- (2) community outreach and other efforts addressing the root causes of drug overdose and morbidity;
- (3) identifying risk and protective factors relating to drug overdose and morbidity that contribute to identification, development, or improvement of prevention strategies and community outreach;
- (4) developing or providing trauma-informed drug overdose and morbidity prevention and services;
- (5) developing or providing culturally and linguistically appropriate drug overdose and morbidity prevention and services, and programs that target and serve historically underserved communities;
- (6) working collaboratively with educational institutions, including school districts, to implement drug overdose and morbidity prevention strategies for students, teachers, and administrators;
- (7) working collaboratively with sovereign Tribal nations, care providers, nonprofit organizations, for-profit organizations, government entities, community-based organizations, and other entities to implement substance misuse and drug overdose prevention strategies within their communities; and
- (8) creating or implementing quality improvement initiatives to improve drug overdose and morbidity treatment and outcomes.
- (b) Any organization or government entity receiving grant money under this section must collect and make available to the commissioner of health aggregate data related to the activity funded by the program under this section. The commissioner of health shall use the information and data from the program evaluation to inform the administration of existing Department of Health programming and the development of Department of Health policies, programs, and procedures.
- Subd. 5. **Promotion; administration.** In fiscal years 2026 and beyond, the commissioner may spend up to 25 percent of the total funding appropriated for the comprehensive drug overdose and morbidity program in each fiscal year to promote, administer, support, and evaluate the programs authorized under this section and to provide technical assistance to program grantees.
- Subd. 6. **External contributions.** The commissioner may accept contributions from governmental and nongovernmental sources and may apply for grants to supplement state appropriations for the programs authorized under this section. Contributions and grants received from the sources identified in this subdivision to advance the purpose of this section are appropriated to the commissioner for the comprehensive drug overdose and morbidity program.
- Subd. 7. **Program evaluation.** Beginning February 28, 2024, the commissioner of health shall report every even-numbered year to the legislative committees with jurisdiction over health detailing the expenditures of funds authorized under this section. The commissioner shall use the data to evaluate the effectiveness of the program. The commissioner must include in the report:
 - (1) the number of organizations receiving grant money under this section;
 - (2) the number of individuals served by the grant programs;
 - (3) a description and analysis of the practices implemented by program grantees; and
- (4) best practices recommendations to prevent drug overdose and morbidity, including culturally relevant best practices and recommendations focused on historically underserved communities.
- Subd. 8. **Measurement.** Notwithstanding any law to the contrary, the commissioner of health shall assess and evaluate grants and contracts awarded using available data sources, including but not limited to the Minnesota All Payer Claims Database (MN APCD), the Minnesota Behavioral Risk Factor Surveillance System (BRFSS), the Minnesota Student Survey, vital records, hospitalization data, syndromic surveillance, and the Minnesota Electronic Health Record Consortium.

245.975 OMBUDSPERSON FOR FAMILY CHILD CARE PROVIDERS.

Subd. 8. **Office support.** The commissioner shall provide the ombudsperson with the necessary office space, supplies, equipment, and clerical support to effectively perform the duties under this section.

245A.065 CHILD CARE FIX-IT TICKET.

(a) In lieu of a correction order under section 245A.06, the commissioner shall issue a fix-it ticket to a family child care or child care center license holder if the commissioner finds that:

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- (1) the license holder has failed to comply with a requirement in this chapter or Minnesota Rules, chapter 9502 or 9503, that the commissioner determines to be eligible for a fix-it ticket;
- (2) the violation does not imminently endanger the health, safety, or rights of the persons served by the program;
- (3) the license holder did not receive a fix-it ticket or correction order for the violation at the license holder's last licensing inspection;
- (4) the violation can be corrected at the time of inspection or within 48 hours, excluding Saturdays, Sundays, and holidays; and
- (5) the license holder corrects the violation at the time of inspection or agrees to correct the violation within 48 hours, excluding Saturdays, Sundays, and holidays.
 - (b) The fix-it ticket must state:
 - (1) the conditions that constitute a violation of the law or rule;
 - (2) the specific law or rule violated; and
- (3) that the violation was corrected at the time of inspection or must be corrected within 48 hours, excluding Saturdays, Sundays, and holidays.
 - (c) The commissioner shall not publicly publish a fix-it ticket on the department's website.
- (d) Within 48 hours, excluding Saturdays, Sundays, and holidays, of receiving a fix-it ticket, the license holder must correct the violation and within one week submit evidence to the licensing agency that the violation was corrected.
- (e) If the violation is not corrected at the time of inspection or within 48 hours, excluding Saturdays, Sundays, and holidays, or the evidence submitted is insufficient to establish that the license holder corrected the violation, the commissioner must issue a correction order for the violation of Minnesota law or rule identified in the fix-it ticket according to section 245A.06.

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Laws 2023, chapter 25, section 190, subdivision 10

Sec. 190. REPEALER.

Subd. 10. **Obsolete subdivision.** Minnesota Statutes 2022, section 256B.051, subdivision 7, is repealed.

Laws 2023, chapter 70, article 20, section 2, subdivision 31, as amended by Laws 2023, chapter 75, section 12;

Sec. 2. COMMISSIONER OF HUMAN SERVICES

Subd. 31. Direct Care and Treatment - Mental Health and Substance Abuse

-0- 6,109,000

- (a) **Keeping Nurses at the Bedside Act; contingent appropriation.** The appropriation in this subdivision is contingent upon legislative enactment by the 93rd Legislature of 2023 Senate File 1384 by the 93rd Legislature provisions substantially similar to 2023 S.F. No. 1561, the second engrossment, article 2.
- (b) **Base level adjustment.** The general fund base is increased by \$7,566,000 in fiscal year 2026 and increased by \$7,566,000 in fiscal year 2027. *Laws 2024, chapter 80, article 2, section 1, subdivision 11*

Section 1. [142B.01] DEFINITIONS.

Subd. 11. **Foster residence setting.** "Foster residence setting" has the meaning given in Minnesota Rules, part 2960.3010, subpart 26, and includes settings licensed by the commissioner of children, youth, and families or the commissioner of corrections.

Laws 2024, chapter 80, article 2, section 10, subdivision 4

Sec. 10. [142B.18] SANCTIONS.

Subd. 4. Immediate suspension of residential programs. For suspensions issued to a licensed residential program as defined in section 142B.01, subdivision 24, the effective date of the order may be delayed for up to 30 calendar days to provide for the continuity of care of service recipients. The license holder must cooperate with the commissioner to ensure service recipients receive continued care during the period of the delay and to facilitate the transition of service recipients to new providers. In these cases, the suspension order takes effect when all service recipients have been transitioned to a new provider or 30 days after the suspension order was issued, whichever comes first.

Laws 2024, chapter 80, article 2, section 3, subdivision 3

Sec. 3. [142B.03] SYSTEMS AND RECORDS.

Subd. 3. First date of working in a setting; documentation requirements. Foster residence setting license holders must document the first date that a person who is a background study subject begins working in the license holder's setting. If the license holder does not maintain documentation of each background study subject's first date of working in the setting in the license holder's personnel files, the license holder must provide documentation to the commissioner that contains the first date that each background study subject began working in the license holder's program upon the commissioner's request.

Laws 2024, chapter 80, article 2, section 33

- Sec. 33. Minnesota Statutes 2022, section 245A.02, subdivision 6e, is amended to read:
- Subd. 6e. **Foster residence setting.** "Foster residence setting" has the meaning given in Minnesota Rules, part 2960.3010, subpart 26, and includes settings licensed by the commissioner of human services children, youth, and families or the commissioner of corrections.

Laws 2024, chapter 80, article 2, section 4, subdivision 4

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Sec. 4. [142B.05] WHO MUST BE LICENSED.

- Subd. 4. Licensing moratorium. (a) The commissioner shall not issue an initial license for child foster care licensed under Minnesota Rules, parts 2960.3000 to 2960.3340, under this chapter for a physical location that will not be the primary residence of the license holder for the entire period of licensure. If a family child foster care home license is issued during this moratorium and the license holder changes the license holder's primary residence away from the physical location of the foster care license, the commissioner shall revoke the license according to section 142B.18. When approving an exception under this paragraph, the commissioner shall consider the resource need determination process in paragraph (e), the availability of foster care licensed beds in the geographic area in which the licensee seeks to operate, the results of a person's choices during their annual assessment and service plan review, and the recommendation of the local county board. The determination by the commissioner is final and not subject to appeal. Exceptions to the moratorium include:
- (1) foster care licenses replacing foster care licenses in existence on May 15, 2009, and determined to be needed by the commissioner under paragraph (b); and
- (2) new foster care licenses determined to be needed by the commissioner under paragraph (b) for persons requiring hospital-level care.
- (b) The commissioner shall determine the need for newly licensed foster care homes. As part of the determination, the commissioner shall consider the availability of foster care capacity in the area in which the licensee seeks to operate, and the recommendation of the local county board. The determination by the commissioner must be final. A determination of need is not required for a change in ownership at the same address.
- (c) At the time of application and reapplication for licensure, the applicant and the license holder that are subject to the moratorium or an exclusion established in paragraph (a) are required to inform the commissioner whether the physical location where the foster care will be provided is or will be the primary residence of the license holder for the entire period of licensure. If the primary residence of the applicant or license holder changes, the applicant or license holder must notify the commissioner immediately. The commissioner shall print on the foster care license certificate whether or not the physical location is the primary residence of the license holder.
- (d) License holders of foster care homes identified under paragraph (c) that are not the primary residence of the license holder and that also provide services in the foster care home that are covered by a federally approved home and community-based services waiver, as authorized under chapter 256S or section 256B.092 or 256B.49, must inform the children, youth, and families licensing division that the license holder provides or intends to provide these waiver-funded services.
- (e) The commissioner may adjust capacity to address needs identified in section 144A.351. Under this authority, the commissioner may approve new licensed settings or delicense existing settings. Delicensing of settings will be accomplished through a process identified in section 256B.493.

Laws 2024, chapter 80, article 2, section 69

Sec. 69. Minnesota Statutes 2022, section 245A.25, subdivision 1, is amended to read:

Subdivision 1. **Certification scope and applicability.** (a) This section establishes the requirements that a children's residential facility or child foster residence setting must meet to be certified for the purposes of Title IV-E funding requirements as:

- (1) a qualified residential treatment program;
- (2) a residential setting specializing in providing care and supportive services for youth who have been or are at risk of becoming victims of sex trafficking or commercial sexual exploitation;
- (3) a residential setting specializing in providing prenatal, postpartum, or parenting support for youth; or
 - (4) a supervised independent living setting for youth who are 18 years of age or older.
- (b) This section does not apply to a foster family setting in which the license holder resides in the foster home.

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- (c) Children's residential facilities licensed as detention settings according to Minnesota Rules, parts 2960.0230 to 2960.0290, or secure programs according to Minnesota Rules, parts 2960.0300 to 2960.0420, may not be certified under this section.
- (d) For purposes of this section, "license holder" means an individual, organization, or government entity that was issued a children's residential facility or foster residence setting license by the commissioner of human services under this chapter; by the commissioner of children, youth, and families under chapter 142B; or by the commissioner of corrections under chapter 241.
- (e) Certifications issued under this section for foster residence settings may only be issued by the commissioner of human services and are not delegated to county or private licensing agencies under section 245A.16.

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9545.0845 PLAN FOR TRANSFER OF RECORDS.

An applicant for initial or continuing licensure must submit a written plan indicating how the agency will provide for the transfer of records on both open and closed cases if the agency closes. The plan must provide for managing private and confidential information on agency clients, according to Minnesota Statutes, section 259.79. A controlling individual of the agency must sign the plan.

- A. Plans for the transfer of open cases and case records must specify arrangements the agency will make to transfer clients to another agency or county for continuation of services and to transfer the case record with the client.
- B. Plans for the transfer of closed adoption records must be accompanied by a signed agreement or other documentation indicating that a county or licensed child placing agency has agreed to accept and maintain the agency's closed case records and to provide follow-up services to affected clients.