

S.F. No. 3367 and H.F. No. 3287, which had been referred to the Chief Clerk for comparison, were examined and found to be not identical.

The following document shows the differences between S.F. No. 3367, the second engrossment, and H.F. No. 3287, the second engrossment.

May 8, 2018

Patrick D. Murphy  
Chief Clerk, House of Representatives

### **Explanation of Comparison Reports**

When a Senate File is received from the Senate, it is given its first reading and must be referred to the appropriate standing committee or division under Rule 1.11.

But if the House File companion of that Senate File has already been reported out of Committee and given its second reading and is on the General Register, the Senate File must be referred to the Chief Clerk for comparison pursuant to Rule 1.15.

The Chief Clerk reports whether the bills were found to be identical or not identical. Once the bills have been compared and the differences have been reported, the Senate File is given its second reading and is substituted for the House File. The House File is then considered withdrawn.

Pursuant to rule 3.33, if the bills are not identical and the chief author of the bill wishes to use the House language, the chief author must give notice of their intent to substitute the House language when the bill is placed on the Calendar for the Day or the Fiscal Calendar. If the chief author of the bill wishes to keep the Senate language, no action is required.

1.1 A bill for an act  
 1.2 relating to public safety; requiring employees of lodging facilities to be trained to  
 1.3 recognize sex trafficking; proposing coding for new law in Minnesota Statutes,  
 1.4 chapter 157.

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

1.1 A bill for an act  
 1.2 relating to public health; requiring employees of hotels and motels to receive  
 1.3 training on identifying activities associated with sex trafficking; modifying  
 1.4 children's immunization provisions; requiring an autism spectrum disorder task  
 1.5 force plan; amending Minnesota Statutes 2016, sections 121A.15, subdivisions 3,  
 1.6 3a; 135A.14, subdivision 3; proposing coding for new law in Minnesota Statutes,  
 1.7 chapter 157.

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

1.9 Section 1. Minnesota Statutes 2016, section 121A.15, subdivision 3, is amended to read:

1.10 Subd. 3. **Exemptions from immunizations.** (a) If a person is at least seven years old  
 1.11 and has not been immunized against pertussis, the person must not be required to be  
 1.12 immunized against pertussis.

1.13 (b) If a person is at least 18 years old and has not completed a series of immunizations  
 1.14 against poliomyelitis, the person must not be required to be immunized against poliomyelitis.

1.15 (c) If a statement, signed by a physician, is submitted to the administrator or other person  
 1.16 having general control and supervision of the school or child care facility stating that an  
 1.17 immunization is contraindicated for medical reasons or that laboratory confirmation of the  
 1.18 presence of adequate immunity exists, the immunization specified in the statement need  
 1.19 not be required.

1.20 (d) If a notarized statement signed by the minor child's parent or guardian or by the  
 1.21 emancipated person is submitted to the administrator or other person having general control  
 1.22 and supervision of the school or child care facility stating that the person has not been  
 1.23 immunized as prescribed in subdivision 1 because of the conscientiously held beliefs of the  
 1.24 parent or guardian of the minor child or of the emancipated person, the immunizations  
 2.1 specified in the statement shall not be required. ~~This statement must also be forwarded to~~  
 2.2 ~~the commissioner of the Department of health.~~

2.3 (e) If the person is under 15 months, the person is not required to be immunized against  
 2.4 measles, rubella, or mumps.

2.5 (f) If a person is at least five years old and has not been immunized against haemophilus  
 2.6 influenzae type b, the person is not required to be immunized against haemophilus influenzae  
 2.7 type b.

2.8 (g) If a person who is not a Minnesota resident enrolls in a Minnesota school online  
 2.9 learning course or program that delivers instruction to the person only by computer and  
 2.10 does not provide any teacher or instructor contact time or require classroom attendance, the  
 2.11 person is not subject to the immunization, statement, and other requirements of this section.

2.12 Sec. 2. Minnesota Statutes 2016, section 121A.15, subdivision 3a, is amended to read:

- 2.13 Subd. 3a. **Disclosures required.** (a) This paragraph applies to any written information  
 2.14 about immunization requirements for enrollment in a school or child care facility that:
- 2.15 (1) is provided to a person to be immunized or enrolling or enrolled in a school or child  
 2.16 care facility, or to the person's parent or guardian if the person is under 18 years of age and  
 2.17 not emancipated; and
- 2.18 (2) is provided by the Department of Health; the Department of Education; the  
 2.19 Department of Human Services; an immunization provider; or a school or child care facility.
- 2.20 Such written information must describe the exemptions from immunizations permitted under  
 2.21 subdivision 3, paragraphs (c) and (d). The Any written information on exemptions from  
 2.22 immunizations provided according to this paragraph must be in a font size at least equal to  
 2.23 the font size of the immunization requirements, in the same font style as the immunization  
 2.24 requirements, and on the same page of the written document as the immunization  
 2.25 requirements.
- 2.26 (b) Before immunizing a person, an immunization provider must provide the person, or  
 2.27 the person's parent or guardian if the person is under 18 years of age and not emancipated,  
 2.28 with the following information in writing:
- 2.29 (1) a list of the immunizations required for enrollment in a school or child care facility;  
 2.30 (2) a description of the exemptions from immunizations permitted under subdivision 3,  
 2.31 paragraphs (c) and (d);
- 3.1 (3) a list of additional immunizations currently recommended by the commissioner of  
 3.2 health; and
- 3.3 (4) in accordance with federal law, a copy of the vaccine information sheet from the  
 3.4 federal Department of Health and Human Services that lists possible adverse reactions to  
 3.5 the immunization to be provided.
- 3.6 (c) The commissioner will continue the educational campaign to providers and hospitals  
 3.7 on vaccine safety including, but not limited to, information on the vaccine adverse events  
 3.8 reporting system (VAERS), the federal vaccine information statements (VIS), and medical  
 3.9 precautions and contraindications to immunizations.
- 3.10 (d) The commissioner will encourage providers to provide the vaccine information  
 3.11 statements at multiple visits and in anticipation of subsequent immunizations.
- 3.12 (e) The commissioner will encourage providers to use existing screening for immunization  
 3.13 precautions and contraindication materials and make proper use of the vaccine adverse  
 3.14 events reporting system (VAERS).
- 3.15 (f) In consultation with groups and people identified in subdivision 12, paragraph (a),  
 3.16 clause (1), the commissioner will continue to develop and make available patient education  
 3.17 materials on immunizations including, but not limited to, contraindications and precautions  
 3.18 regarding vaccines.
- 3.19 (g) The commissioner will encourage health care providers to use thimerosal-free vaccines  
 3.20 when available.

1.6 Section 1. [157.177] SEX TRAFFICKING PREVENTION TRAINING.

1.7 Subdivision 1. Definition. "Sex trafficking" has the meaning given in section 609.321,  
1.8 subdivision 7a.

1.9 Subd. 2. Prevention training required. (a) Every person, firm, or corporation operating  
1.10 a hotel or motel within this state shall ensure that each employee who works on site, including  
1.11 but not limited to any owner, operator, or manager, receive the training described in paragraph  
1.12 (c) within the later of 90 days of the time of hire or 120 days of the effective date of this  
1.13 section, and annually thereafter. The operator of each hotel or motel shall annually certify,  
1.14 in an employee roster or in each employee's personnel file, that each employee has received  
1.15 the training approved by the commissioner.

1.16 (b) The operators shall conduct ongoing awareness campaigns for employees that address  
1.17 the components described in paragraph (c).

1.18 (c) The commissioner shall, in consultation with the state hotel and lodging association,  
1.19 approve an educational training that focuses on sex trafficking. Training should include, at  
1.20 a minimum, instruction on:

1.21 (1) what sex trafficking is in order to raise awareness of it;

1.22 (2) how to recognize potential victims of trafficking;

2.1 (3) how to identify activities commonly associated with trafficking; and

2.2 (4) effective responses to trafficking situations including, but not limited to, how to  
2.3 report suspected trafficking to proper law enforcement officials.

2.4 (d) Each operator must post and maintain a poster, written or approved by the  
2.5 commissioner and containing information described in paragraph (c), in a place readily  
2.6 accessible to each employee who works on site.

2.7 (e) Any cost incurred for the training program shall be the responsibility of the licensee.

3.21 Sec. 3. Minnesota Statutes 2016, section 135A.14, subdivision 3, is amended to read:

3.22 Subd. 3. Exemptions from immunization. (a) An immunization listed in subdivision  
3.23 2 is not required if the student submits to the administrator a statement signed by a physician  
3.24 that shows:

3.25 (1) that, for medical reasons, the student did not receive an immunization;

3.26 (2) that the student has experienced the natural disease against which the immunization  
3.27 protects; or

3.28 (3) that a laboratory has confirmed the presence of adequate immunity.

3.29 (b) If the student submits a notarized statement that the student has not been immunized  
3.30 as required in subdivision 2 because of the student's conscientiously held beliefs, the  
3.31 immunizations described in subdivision 2 are not required. ~~The institution shall forward~~  
3.32 this statement to the commissioner of health.

4.1 Sec. 4. [157.177] SEX TRAFFICKING PREVENTION TRAINING.

4.2 Subdivision 1. Definition. "Sex trafficking" has the meaning given in section 609.321,  
4.3 subdivision 7a.

4.4 Subd. 2. Prevention training required. (a) Every person, firm, or corporation that  
4.5 operates a hotel or motel in Minnesota shall ensure that all employees who work on site,  
4.6 including the owner, operator, and manager, receive the training described in paragraph (c)  
4.7 by December 1, 2018, or within 90 days from the date the employee begins employment,  
4.8 and annually thereafter. The operator of the hotel and motel shall annually certify in each  
4.9 employee's personnel file that the employee has received the required training that is approved  
4.10 by the commissioner.

4.11 (b) In addition to the training required under paragraph (a), the operator of each hotel  
4.12 and motel shall conduct an ongoing awareness campaign for employees on the activities  
4.13 commonly associated with sex trafficking victim identification resources, and effective  
4.14 responses for hotels and motels.

4.15 (c) The commissioner shall, in consultation with the commissioner of public safety, law  
4.16 enforcement, Minnesota County Attorneys Association, trafficking victim advocacy groups,  
4.17 and the state hotel and lodging association, approve an educational training program that  
4.18 focuses on the accurate and prompt identification, reporting, and response of suspected sex  
4.19 trafficking. The commissioner shall allow the use of existing training modules and materials,  
4.20 to the extent possible. The training program must include at a minimum:

4.21 (1) awareness of sex trafficking;

4.22 (2) recognition of potential victims of sex trafficking;

4.23 (3) activities commonly associated with sex trafficking; and

4.24 (4) effective responses to sex trafficking situations, including reporting to proper law  
4.25 enforcement officials.

2.8 **EFFECTIVE DATE.** This section is effective August 1, 2018.

4.26 (d) Any cost incurred for the training program shall be the responsibility of the licensee.

4.27 Sec. 5. **AUTISM SPECTRUM DISORDER TASK FORCE PLAN.**

4.28 The commissioner of health, in consultation with the commissioners of human services  
4.29 and education, shall submit a plan to the chairs and ranking minority members of the  
4.30 legislative committees with jurisdiction over health care, human services, and education by  
4.31 January 15, 2019, to reconstitute the Autism Spectrum Disorder Task Force originally  
4.32 established in 2011. The plan must include proposed membership of the task force that takes  
5.1 into consideration all points of view and represents a diverse range of agencies, community  
5.2 groups, advocacy organizations, educators, and families.