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State of Minnesota

HOUSE OF REPRESENTATIVES

NINETY-THIRD SESSION

H. F. No. 5317

04/08/2024 Authored by Liebling
The bill was read for the first time and referred to the Committee on Health Finance and Policy

1.1 A bill for an act
1.2 relating to human services; the governor's budget bill for health and human services;
1.3 modifying provisions related to health care, child welfare, child care licensing, the
1.4 Department of Health, and the Department of Children, Youth, and Families;
1.5 making technical changes to health and human services law; adjusting
1.6 appropriations for forecasted programs; imposing certain penalties; appropriating
1.7 money; amending Minnesota Statutes 2022, sections 62D.14, subdivision 1; 144.05,
1.8 subdivision 6; 144.1501, subdivision 5; 144A.70, subdivisions 3, 5, 6, 7; 144A.71,
1.9 subdivision 2, by adding a subdivision; 144A.72, subdivision 1; 144A.73; 245.975,
1.10 subdivisions 2, 4, 9; 245A.07, subdivision 6; 245A.10, subdivisions 1, as amended,
1.11 2, as amended; 245A.144; 245A.175; 256.029, as amended; 260C.007, subdivisions
1.12 5, 6, by adding subdivisions; 260C.212, subdivision 13; 260E.03, by adding a
1.13 subdivision; 260E.14, subdivision 3; 260E.36, subdivision 1a; Minnesota Statutes
1.14 2023 Supplement, sections 144.1501, subdivision 2; 144.1505, subdivision 2;
1.15 145.561, subdivision 4; 245A.16, subdivision 1, as amended; 245A.66, subdivision
1.16 4, as amended; 256.4793, subdivision 3; 256.4794, subdivision 3; 256B.0622,
1.17 subdivision 8; 256B.0947, subdivision 7; 256M.42, by adding a subdivision;
1.18 260.014, by adding a subdivision; 260.761, subdivision 2; 260.762, subdivision
1.19 2; 260E.02, subdivision 1, as amended; 260E.03, subdivisions 15a, 15b, 22;
1.20 260E.14, subdivision 5; 260E.17, subdivision 1; 260E.18; 260E.20, subdivision
1.21 2; 260E.24, subdivisions 2, 7; 260E.33, subdivision 1; 260E.35, subdivision 6;
1.22 518A.42, subdivision 3; Laws 2023, chapter 22, section 4, subdivision 2; Laws
1.23 2023, chapter 70, article 12, section 30, subdivisions 2, 3; article 14, section 42,
1.24 by adding a subdivision; article 20, sections 2, subdivisions 5, 24, 29; 3,
1.25 subdivisions 2, 3; 12, as amended; 23; Laws 2023, chapter 75, section 10; Laws
1.26 2024, chapter 80, article 1, sections 34, subdivision 2; 96; article 2, sections 5,
1.27 subdivision 21; 7, subdivision 2; 10, subdivision 6; 16, subdivision 1; 30,
1.28 subdivision 2; 31; 74; article 4, section 26; article 6, section 4; article 7, section
1.29 4; proposing coding for new law in Minnesota Statutes, chapters 103I; 142A;
1.30 144A; proposing coding for new law as Minnesota Statutes, chapter 142B; repealing
1.31 Minnesota Statutes 2022, sections 245.975, subdivision 8; 245A.065; Minnesota
1.32 Statutes 2023 Supplement, section 144.0528; Laws 2023, chapter 25, section 190,
1.33 subdivision 10; Laws 2023, chapter 70, article 20, section 2, subdivision 31, as
1.34 amended; Laws 2024, chapter 80, article 2, sections 1, subdivision 11; 3,
1.35 subdivision 3; 4, subdivision 4; 10, subdivision 4; 33; 69; Minnesota Rules, part
1.36 9545.0845.

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

2.2 **ARTICLE 1**
2.3 **HEALTH CARE**

2.4 Section 1. **REVISOR INSTRUCTION.**

2.5 When the proposed rule published at Federal Register, volume 88, page 25313, becomes
2.6 effective, the revisor of statutes must change: (1) the reference in Minnesota Statutes, section
2.7 256B.06, subdivision 4, paragraph (d), from Code of Federal Regulations, title 8, section
2.8 103.12, to Code of Federal Regulations, title 42, section 435.4; and (2) the reference in
2.9 Minnesota Statutes, section 256L.04, subdivision 10, paragraph (a), from Code of Federal
2.10 Regulations, title 8, section 103.12, to Code of Federal Regulations, title 45, section 155.20.
2.11 The commissioner of human services shall notify the revisor of statutes when the proposed
2.12 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
2.16 to read:

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

3.1 (b) When a child-placing agency has information that a child receiving services may be
3.2 an Indian child, the child-placing agency shall notify the Tribe by telephone and by email
3.3 or facsimile of the child's full name and date of birth, the full names and dates of birth of
3.4 the child's biological parents, and, if known, the full names and dates of birth of the child's
3.5 grandparents and of the child's Indian custodian. This notification must be provided for the
3.6 Tribe to determine if the child is a member or eligible for Tribal membership, and the agency
3.7 must provide this notification to the Tribe within seven days of receiving information that
3.8 the child may be an Indian child. If information regarding the child's grandparents or Indian
3.9 custodian is not available within the seven-day period, the child-placing agency shall continue
3.10 to request this information and shall notify the Tribe when it is received. Notice shall be
3.11 provided to all Tribes to which the child may have any Tribal lineage.

3.12 (c) In all child placement proceedings, when a court has reason to believe that a child
3.13 placed in emergency protective care is an Indian child, the court administrator or a designee
3.14 shall, as soon as possible and before a hearing takes place, notify the Tribal social services
3.15 agency by telephone and by email or facsimile of the date, time, and location of the
3.16 emergency protective care or other initial hearing. The court shall make efforts to allow
3.17 appearances by telephone or video conference for Tribal representatives, parents, and Indian
3.18 custodians.

3.19 (d) The child-placing agency or individual petitioner shall effect service of any petition
3.20 governed by sections 260.751 to 260.835 by certified mail or registered mail, return receipt
3.21 requested upon the Indian child's parents, Indian custodian, and Indian child's Tribe at least
3.22 10 days before the admit-deny hearing is held. If the identity or location of the Indian child's
3.23 parents or Indian custodian and Tribe cannot be determined, the child-placing agency shall
3.24 provide the notice required in this paragraph to the United States Secretary of the Interior,
3.25 Bureau of Indian Affairs by certified mail, return receipt requested.

3.26 (e) A Tribe, the Indian child's parents, or the Indian custodian may request up to 20
3.27 additional days to prepare for the admit-deny hearing. The court shall allow appearances
3.28 by telephone, video conference, or other electronic medium for Tribal representatives, the
3.29 Indian child's parents, or the Indian custodian.

3.30 (f) A child-placing agency or individual petitioner must provide the notices required
3.31 under this subdivision at the earliest possible time to facilitate involvement of the Indian
3.32 child's Tribe. Nothing in this subdivision is intended to hinder the ability of the child-placing
3.33 agency, individual petitioner, and the court to respond to an emergency situation. Lack of
3.34 participation by a Tribe shall not prevent the Tribe from intervening in services and
3.35 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.

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

4.6 Sec. 2. Minnesota Statutes 2023 Supplement, section 260.762, subdivision 2, is amended
4.7 to read:

4.8 Subd. 2. **Requirements for child-placing agencies and individual petitioners.** A
4.9 child-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;

4.12 (2) before making a decision that may affect an Indian child's safety and well-being or
4.13 when contemplating out-of-home placement of an Indian child, seek guidance from the
4.14 Indian child's Tribe on family structure, how the family can seek help, what family and
4.15 Tribal resources are available, and what barriers the family faces at that time that could
4.16 threaten its preservation; ~~and~~

4.17 (3) request participation of the Indian child's Tribe at the earliest possible time and
4.18 request the Tribe's active participation throughout the case; and

4.19 (4) notify the Indian child's Tribe or Tribes by telephone and by email or facsimile
4.20 immediately but no later than 24 hours after receiving information on a missing child as
4.21 defined under section 260C.212, subdivision 13, paragraph (a).

4.22 Sec. 3. Minnesota Statutes 2022, section 260C.007, subdivision 5, is amended to read:

4.23 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
4.27 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.

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

5.2 Subd. 6. **Child in need of protection or services.** "Child in need of protection or
5.3 services" means a child who is in need of protection or services because the child:

5.4 (1) is abandoned or without parent, guardian, or custodian;

5.5 (2)(i) has been a victim of physical or sexual abuse as defined in section 260E.03,
5.6 subdivision 18 or 20, (ii) resides with or has resided with a victim of child abuse as defined
5.7 in subdivision 5 or domestic child abuse as defined in subdivision 13, (iii) resides with or
5.8 would reside with a perpetrator of domestic child abuse as defined in subdivision 13 or child
5.9 abuse as defined in subdivision 5 or 13, or (iv) is a victim of emotional maltreatment as
5.10 defined in subdivision 15;

5.11 (3) is without necessary food, clothing, shelter, education, or other required care for the
5.12 child's physical or mental health or morals because the child's parent, guardian, or custodian
5.13 is unable or unwilling to provide that care;

5.14 (4) is without the special care made necessary by a physical, mental, or emotional
5.15 condition because the child's parent, guardian, or custodian is unable or unwilling to provide
5.16 that care;

5.17 (5) is medically neglected, which includes, but is not limited to, the withholding of
5.18 medically indicated treatment from an infant with a disability with a life-threatening
5.19 condition. The term "withholding of medically indicated treatment" means the failure to
5.20 respond to the infant's life-threatening conditions by providing treatment, including
5.21 appropriate nutrition, hydration, and medication which, in the treating physician's, advanced
5.22 practice registered nurse's, or physician assistant's reasonable medical judgment, will be
5.23 most likely to be effective in ameliorating or correcting all conditions, except that the term
5.24 does not include the failure to provide treatment other than appropriate nutrition, hydration,
5.25 or medication to an infant when, in the treating physician's, advanced practice registered
5.26 nurse's, or physician assistant's reasonable medical judgment:

5.27 (i) the infant is chronically and irreversibly comatose;

5.28 (ii) the provision of the treatment would merely prolong dying, not be effective in
5.29 ameliorating or correcting all of the infant's life-threatening conditions, or otherwise be
5.30 futile in terms of the survival of the infant; or

5.31 (iii) the provision of the treatment would be virtually futile in terms of the survival of
5.32 the infant and the treatment itself under the circumstances would be inhumane;

6.1 (6) is one whose parent, guardian, or other custodian for good cause desires to be relieved
6.2 of the child's care and custody, including a child who entered foster care under a voluntary
6.3 placement agreement between the parent and the responsible social services agency under
6.4 section 260C.227;

6.5 (7) has been placed for adoption or care in violation of law;

6.6 (8) is without proper parental care because of the emotional, mental, or physical disability,
6.7 or state of immaturity of the child's parent, guardian, or other custodian;

6.8 (9) is one whose behavior, condition, or environment is such as to be injurious or
6.9 dangerous to the child or others. An injurious or dangerous environment may include, but
6.10 is not limited to, the exposure of a child to criminal activity in the child's home;

6.11 (10) is experiencing growth delays, which may be referred to as failure to thrive, that
6.12 have been diagnosed by a physician and are due to parental neglect;

6.13 (11) is a sexually exploited youth;

6.14 (12) is a labor trafficked youth;

6.15 ~~(12)~~ (13) has committed a delinquent act or a juvenile petty offense before becoming
6.16 ten years old;

6.17 ~~(13)~~ (14) is a runaway;

6.18 ~~(14)~~ (15) is a habitual truant;

6.19 ~~(15)~~ (16) has been found incompetent to proceed or has been found not guilty by reason
6.20 of mental illness or mental deficiency in connection with a delinquency proceeding, a
6.21 certification under section 260B.125, an extended jurisdiction juvenile prosecution, or a
6.22 proceeding involving a juvenile petty offense; or

6.23 ~~(16)~~ (17) has a parent whose parental rights to one or more other children were
6.24 involuntarily terminated or whose custodial rights to another child have been involuntarily
6.25 transferred to a relative and there is a case plan prepared by the responsible social services
6.26 agency documenting a compelling reason why filing the termination of parental rights
6.27 petition under section 260C.503, subdivision 2, is not in the best interests of the child.

6.28 **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.

8.1 When making a report to local law enforcement and National Center for Missing and
8.2 Exploited Children, the agency must include, when reasonably possible:

8.3 (i) a photo of the child or youth;

8.4 (ii) a description of the child or youth's physical features, such as height, weight, sex,
8.5 ethnicity, race, hair color, and eye color; and

8.6 (iii) endangerment information, such as the child or youth's pregnancy status,
8.7 prescriptions, medications, suicidal tendencies, vulnerability to being trafficked, and other
8.8 health or risk factors; and

8.9 (2) notify the court, parties to the case, parents and relatives who are not parties as the
8.10 agency deems appropriate, and any Tribe who has legal responsibility or received notice
8.11 under section 260.761, subdivision 2, but has not yet determined enrollment or eligibility
8.12 status.

8.13 ~~(e)~~ (d) While the child or youth is missing, the local responsible social services agency
8.14 shall must:

8.15 (1) implement protocols to expeditiously locate the child or youth;

8.16 (2) maintain regular communication with law enforcement agencies and the National
8.17 Center for Missing and Exploited Children in efforts to provide a safe recovery of the missing
8.18 child or youth and document this communication;

8.19 (3) share information pertaining to the child or youth's recovery, and circumstances
8.20 related to recovery, with law enforcement agencies and the National Center for Missing
8.21 and Exploited Children; and

8.22 (4) not discharge a child or youth from foster care or close the social services case until
8.23 diligent efforts have been exhausted to locate the child or youth and the court terminates
8.24 the agency's jurisdiction.

8.25 ~~(d)~~ (e) When the child or youth is located, the local responsible social services agency
8.26 shall must:

8.27 (1) notify all individuals and agencies that require notification in paragraph (c) of the
8.28 child or youth's return;

8.29 (2) interview the child or youth to determine and document, on a form approved by the
8.30 commissioner of human services, what the child or youth experienced while missing and
8.31 the primary factors that contributed to the child's running away or otherwise being absent
8.32 child or youth's absence from care and;

9.1 (3) to the extent possible and appropriate, respond to these 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 ~~commercial 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

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

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

10.9 Sec. 9. Minnesota Statutes 2022, section 260E.03, is amended by adding a subdivision to
 10.10 read:

10.11 **Subd. 11a. Labor trafficking.** "Labor trafficking" means the subjection of a child to
 10.12 the acts listed in section 609.281, subdivision 5, limited to the purposes of forced or coerced
 10.13 labor or services as defined by section 609.281, subdivision 4, and debt bondage as defined
 10.14 by section 609.281, subdivision 3, regardless of whether the alleged offender is a
 10.15 noncaregiver human trafficker as defined in subdivision 17a.

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

10.17 Sec. 10. Minnesota Statutes 2023 Supplement, section 260E.03, subdivision 15a, is
 10.18 amended to read:

10.19 **Subd. 15a. Noncaregiver ~~sex~~ human trafficker.** "Noncaregiver ~~sex~~ human trafficker"
 10.20 means an individual who is alleged to have engaged in the act of sex or labor trafficking a
 10.21 child and who is not a person responsible for the child's care, who does not have a significant
 10.22 relationship with the child as defined in section 609.341, ~~and who is not a person in a current~~
 10.23 ~~or recent position of authority as defined in section 609.341, subdivision 10.~~

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

10.25 Sec. 11. Minnesota Statutes 2023 Supplement, section 260E.03, subdivision 15b, is
 10.26 amended to read:

10.27 **Subd. 15b. Noncaregiver ~~sex~~ human trafficking assessment.** "Noncaregiver ~~sex~~ human
 10.28 trafficking assessment" is a comprehensive assessment of child safety, the risk of subsequent
 10.29 child maltreatment, and strengths and needs of the child and family. The local welfare
 10.30 agency shall only perform a noncaregiver ~~sex~~ human trafficking assessment when a
 10.31 maltreatment report alleges sex or labor trafficking of a child by someone other than the
 10.32 child's caregiver. A noncaregiver ~~sex~~ human trafficking assessment does not include a

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

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

11.6 Sec. 12. Minnesota Statutes 2023 Supplement, section 260E.03, subdivision 22, is amended
 11.7 to read:

11.8 Subd. 22. **Substantial child endangerment.** "Substantial child endangerment" means
 11.9 that a person responsible for a child's care, by act or omission, commits or attempts to
 11.10 commit an act against a child in the person's care that constitutes any of the following:

11.11 (1) egregious harm under subdivision 5;

11.12 (2) abandonment under section 260C.301, subdivision 2;

11.13 (3) neglect under subdivision 15, paragraph (a), clause (2), that substantially endangers
 11.14 the child's physical or mental health, including a growth delay, which may be referred to
 11.15 as failure to thrive, that has been diagnosed by a physician and is due to parental neglect;

11.16 (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;

11.18 (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
 11.20 609.322;

11.21 (8) criminal sexual conduct under sections 609.342 to 609.3451;

11.22 (9) sexual extortion under section 609.3458;

11.23 (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
 11.25 or 609.378;

11.26 (12) use of a minor in sexual performance under section 617.246; ~~or~~

11.27 (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
 11.29 termination of parental rights petition under section 260C.503, subdivision 2.

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

12.1 Sec. 13. Minnesota Statutes 2022, section 260E.14, subdivision 3, is amended to read:

12.2 Subd. 3. **Neglect ~~or~~, physical abuse, or labor trafficking.** (a) The local welfare agency
12.3 is responsible for immediately conducting a family assessment or investigation if the report
12.4 alleges neglect or physical abuse by a parent, guardian, or individual functioning within the
12.5 family unit as a person responsible for the child's care.

12.6 (b) The local welfare agency is also responsible for assessing or investigating when a
12.7 child is identified as a victim of labor trafficking.

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

12.9 Sec. 14. Minnesota Statutes 2023 Supplement, section 260E.14, subdivision 5, is amended
12.10 to read:

12.11 Subd. 5. **Law enforcement.** (a) The local law enforcement agency is the agency
12.12 responsible for investigating a report of maltreatment if a violation of a criminal statute is
12.13 alleged.

12.14 (b) Law enforcement and the responsible agency must coordinate their investigations
12.15 or assessments as required under this chapter when: (1) a report alleges maltreatment that
12.16 is a violation of a criminal statute by a person who is a parent, guardian, sibling, person
12.17 responsible for the child's care within the family unit, or by a person who lives in the child's
12.18 household and who has a significant relationship to the child in a setting other than a facility
12.19 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.

12.21 Sec. 15. Minnesota Statutes 2023 Supplement, section 260E.17, subdivision 1, is amended
12.22 to read:

12.23 Subdivision 1. **Local welfare agency.** (a) Upon receipt of a report, the local welfare
12.24 agency shall determine whether to conduct a family assessment, an investigation, or a
12.25 noncaregiver sex human trafficking assessment as appropriate to prevent or provide a remedy
12.26 for maltreatment.

12.27 (b) The local welfare agency shall conduct an investigation when the report involves
12.28 sexual abuse, except as indicated in paragraph (f), or substantial child endangerment.

12.29 (c) The local welfare agency shall begin an immediate investigation at any time when
12.30 the local welfare agency is responding with a family assessment and the local welfare agency

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

13.3 (d) The local welfare agency may conduct a family assessment for reports that do not
13.4 allege sexual abuse, except as indicated in paragraph (f), or substantial child endangerment.
13.5 In determining that a family assessment is appropriate, the local welfare agency may consider
13.6 issues of child safety, parental cooperation, and the need for an immediate response.

13.7 (e) The local welfare agency may conduct a family assessment for a report that was
13.8 initially screened and assigned for an investigation. In determining that a complete
13.9 investigation is not required, the local welfare agency must document the reason for
13.10 terminating the investigation and notify the local law enforcement agency if the local law
13.11 enforcement agency is conducting a joint investigation.

13.12 (f) The local welfare agency shall conduct a noncaregiver ~~sex~~ human trafficking
13.13 assessment when a maltreatment report alleges ~~sex~~ or labor trafficking of a child and the
13.14 alleged offender is a noncaregiver ~~sex~~ human trafficker as defined by section 260E.03,
13.15 subdivision 15a.

13.16 (g) During a noncaregiver ~~sex~~ human trafficking assessment, the local welfare agency
13.17 shall initiate an immediate investigation if there is reason to believe that a child's parent,
13.18 caregiver, or household member allegedly engaged in the act of ~~sex~~ or labor trafficking a
13.19 child or was alleged to have engaged in any conduct requiring the agency to conduct an
13.20 investigation.

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

13.22 Sec. 16. Minnesota Statutes 2023 Supplement, section 260E.18, is amended to read:

13.23 **260E.18 NOTICE TO CHILD'S TRIBE.**

13.24 The local welfare agency shall provide immediate notice, according to section 260.761,
13.25 subdivision 2, to an Indian child's Tribe when the agency has reason to believe that the
13.26 family assessment, investigation, or noncaregiver ~~sex~~ human trafficking assessment may
13.27 involve an Indian child. For purposes of this section, "immediate notice" means notice
13.28 provided within 24 hours.

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

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

14.3 Subd. 2. **Face-to-face contact.** (a) Upon receipt of a screened in report, the local welfare
14.4 agency shall have face-to-face contact with the child reported to be maltreated and with the
14.5 child's primary caregiver sufficient to complete a safety assessment and ensure the immediate
14.6 safety of the child. When it is possible and the report alleges substantial child endangerment
14.7 or sexual abuse, the local welfare agency is not required to provide notice before conducting
14.8 the initial face-to-face contact with the child and the child's primary caregiver.

14.9 (b) Except in a noncaregiver ~~sex~~ human trafficking assessment, the local welfare agency
14.10 shall have face-to-face contact with the child and primary caregiver immediately after the
14.11 agency screens in a report if sexual abuse or substantial child endangerment is alleged and
14.12 within five calendar days of a screened in report for all other reports. If the alleged offender
14.13 was not already interviewed as the primary caregiver, the local welfare agency shall also
14.14 conduct a face-to-face interview with the alleged offender in the early stages of the
14.15 assessment or investigation, except in a noncaregiver ~~sex~~ human trafficking assessment.
14.16 Face-to-face contact with the child and primary caregiver in response to a report alleging
14.17 sexual abuse or substantial child endangerment may be postponed for no more than five
14.18 calendar days if the child is residing in a location that is confirmed to restrict contact with
14.19 the alleged offender as established in guidelines issued by the commissioner, or if the local
14.20 welfare agency is pursuing a court order for the child's caregiver to produce the child for
14.21 questioning under section 260E.22, subdivision 5.

14.22 (c) At the initial contact with the alleged offender, the local welfare agency or the agency
14.23 responsible for assessing or investigating the report must inform the alleged offender of the
14.24 complaints or allegations made against the individual in a manner consistent with laws
14.25 protecting the rights of the person who made the report. The interview with the alleged
14.26 offender may be postponed if it would jeopardize an active law enforcement investigation.
14.27 In a noncaregiver ~~sex~~ human trafficking assessment, the local child welfare agency is not
14.28 required to inform or interview the alleged offender.

14.29 (d) The local welfare agency or the agency responsible for assessing or investigating
14.30 the report must provide the alleged offender with an opportunity to make a statement, except
14.31 in a noncaregiver ~~sex~~ human trafficking assessment. The alleged offender may submit
14.32 supporting documentation relevant to the assessment or investigation.

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

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

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

16.3 (b) For a report alleging maltreatment that was not accepted for an assessment or an
16.4 investigation, a family assessment case, a noncaregiver ~~sex~~ human trafficking assessment
16.5 case, and a case where an investigation results in no determination of maltreatment or the
16.6 need for child protective services, the record must be maintained for a period of five years
16.7 after the date that the report was not accepted for assessment or investigation or the date of
16.8 the final entry in the case record. A record of a report that was not accepted must contain
16.9 sufficient information to identify the subjects of the report, the nature of the alleged
16.10 maltreatment, and the reasons why the report was not accepted. Records under this paragraph
16.11 may not be used for employment, background checks, or purposes other than to assist in
16.12 future screening decisions and risk and safety assessments.

16.13 (c) All records relating to reports that, upon investigation, indicate maltreatment or a
16.14 need for child protective services shall be maintained for ten years after the date of the final
16.15 entry in the case record.

16.16 (d) All records regarding a report of maltreatment, including a notification of intent to
16.17 interview that was received by a school under section 260E.22, subdivision 7, shall be
16.18 destroyed by the school when ordered to do so by the agency conducting the assessment or
16.19 investigation. The agency shall order the destruction of the notification when other records
16.20 relating to the report under investigation or assessment are destroyed under this subdivision.

16.21 (e) Private or confidential data released to a court services agency under subdivision 3,
16.22 paragraph (d), must be destroyed by the court services agency when ordered to do so by the
16.23 local welfare agency that released the data. The local welfare agency or agency responsible
16.24 for assessing or investigating the report shall order destruction of the data when other records
16.25 relating to the assessment or investigation are destroyed under this subdivision.

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

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

16.28 Subd. 1a. **Sex Human trafficking and, sexual exploitation and youth missing from**
16.29 **care training requirement.** As required by the Child Abuse Prevention and Treatment Act
16.30 amendments through Public Law 114-22 and to implement Public ~~Law~~ Laws 113-183 and
16.31 115-123, all child protection social workers and social services staff who have responsibility
16.32 for child protective duties under this chapter or chapter 260C shall complete training
16.33 implemented by the commissioner of human services regarding ~~sex~~ identification, prevention

17.1 and response to human trafficking and sexual exploitation of children and youth, including
17.2 prevention for youth missing from care.

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

17.4 Sec. 23. **REVISOR INSTRUCTION.**

17.5 The revisor of statutes shall renumber the subdivisions in Minnesota Statutes, section
17.6 260E.03, in alphabetical order except for subdivision 1 and correct any cross-reference
17.7 changes that result.

17.8 **ARTICLE 3**
17.9 **CHILD CARE LICENSING**

17.10 Section 1. **[142B.171] CHILD CARE WEIGHTED RISK SYSTEM.**

17.11 Subdivision 1. **Implementation.** The commissioner shall develop and implement a child
17.12 care weighted risk system that provides a tiered licensing enforcement framework for child
17.13 care licensing requirements in this chapter or Minnesota Rules, chapter 9502 or 9503.

17.14 Subd. 2. **Documented technical assistance.** (a) In lieu of a correction order under section
17.15 142B.16, the commissioner shall provide documented technical assistance to a family child
17.16 care or child care center license holder if the commissioner finds that:

17.17 (1) the license holder has failed to comply with a requirement in this chapter or Minnesota
17.18 Rules, chapter 9502 or 9503, that the commissioner determines to be low risk as determined
17.19 by the child care weighted risk system;

17.20 (2) the noncompliance does not imminently endanger the health, safety, or rights of the
17.21 persons served by the program; and

17.22 (3) the license holder did not receive documented technical assistance or a correction
17.23 order for the same violation at the license holder's most recent annual licensing inspection.

17.24 (b) Documented technical assistance must include communication from the commissioner
17.25 to the child care provider that:

17.26 (1) states the conditions that constitute a violation of a law or rule;

17.27 (2) references the specific law or rule violated; and

17.28 (3) explains remedies for correcting the violation.

17.29 (c) The commissioner shall not publicly publish documented technical assistance on the
17.30 department's website.

18.1 Sec. 2. **REPEALER.**

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

18.3 **ARTICLE 4**

18.4 **TECHNICAL CORRECTIONS**

18.5 Section 1. Minnesota Statutes 2022, section 245.975, subdivision 2, is amended to read:

18.6 Subd. 2. **Duties.** (a) The ombudsperson's duties shall include:

18.7 (1) advocating on behalf of a family child care provider to address all areas of concern
18.8 related to the provision of child care services, including licensing monitoring activities,
18.9 licensing actions, and other interactions with state and county licensing staff;

18.10 (2) providing recommendations for family child care improvement or family child care
18.11 provider education;

18.12 (3) operating a telephone line to answer questions, receive complaints, and discuss
18.13 agency actions when a family child care provider believes that the provider's rights or
18.14 program may have been adversely affected; and

18.15 (4) assisting a family child care license applicant with navigating the application process.

18.16 (b) The ombudsperson must report annually by December 31 to the commissioner of
18.17 children, youth, and families and the chairs and ranking minority members of the legislative
18.18 committees with jurisdiction over child care on the services provided by the ombudsperson
18.19 to child care providers, including the number and locations of child care providers served
18.20 and the activities of the ombudsperson in carrying out the duties under this section. The
18.21 commissioner shall determine the form of the report and may specify additional reporting
18.22 requirements.

18.23 Sec. 2. Minnesota Statutes 2022, section 245.975, subdivision 4, is amended to read:

18.24 Subd. 4. **Access to records.** (a) The ombudsperson or designee, excluding volunteers,
18.25 has access to any data of a state agency necessary for the discharge of the ombudsperson's
18.26 duties, including records classified as confidential data on individuals or private data on
18.27 individuals under chapter 13 or any other law. The ombudsperson's data request must relate
18.28 to a specific case and is subject to section 13.03, subdivision 4. If the data concerns an
18.29 individual, the ombudsperson or designee shall first obtain the individual's consent. If the
18.30 individual is unable to consent and has no parent or legal guardian, then the ombudsperson's
18.31 or designee's access to the data is authorized by this section.

19.1 (b) The ombudsperson and designees must adhere to the Minnesota Government Data
19.2 Practices Act and must not disseminate any private or confidential data on individuals unless
19.3 specifically authorized by state, local, or federal law or pursuant to a court order.

19.4 (c) The commissioner of human services; the commissioner of children, youth, and
19.5 families; and any county agency must provide the ombudsperson copies of all fix-it tickets,
19.6 correction orders, and licensing actions issued to family child care providers.

19.7 Sec. 3. Minnesota Statutes 2022, section 245.975, subdivision 9, is amended to read:

19.8 Subd. 9. **Posting.** (a) The commissioner of children, youth, and families shall post on
19.9 the department's website the mailing address, email address, and telephone number for the
19.10 office of the ombudsperson. The commissioner shall provide family child care providers
19.11 with the mailing address, email address, and telephone number of the ombudsperson's office
19.12 on the family child care licensing website and upon request of a family child care applicant
19.13 or provider. Counties must provide family child care applicants and providers with the
19.14 name, mailing address, email address, and telephone number of the ombudsperson's office
19.15 upon request.

19.16 (b) The ombudsperson must approve all postings and notices required by the department
19.17 and counties under this subdivision.

19.18 Sec. 4. Minnesota Statutes 2023 Supplement, section 256.4793, subdivision 3, is amended
19.19 to read:

19.20 Subd. 3. **Special revenue account established.** (a) Funds appropriated under this section
19.21 shall be transferred to a special revenue account. The commissioner shall retain federal
19.22 reimbursement generated under this section. Federal reimbursement shall be transferred to
19.23 the special revenue account and is appropriated to the commissioner for the purposes of
19.24 this section. The commissioner shall transfer funds for administrative activities that support
19.25 implementing prevention services activities to the special revenue fund and shall retain
19.26 federal reimbursement generated under this section.

19.27 (b) The commissioner must provide an annual report to the chairs and ranking minority
19.28 members of the legislative committees with jurisdiction over health and human services
19.29 policy and finance that identifies the amount of funds appropriated and transferred to this
19.30 account under paragraph (a) and how the funds were used.

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

20.3 Subd. 3. **Special revenue account established.** (a) Funds appropriated under this section
20.4 shall be transferred to a special revenue account. The commissioner shall retain federal
20.5 reimbursement generated under this section. Federal reimbursement shall be transferred to
20.6 the special revenue account and is appropriated to the commissioner for the purposes of
20.7 this section. The commissioner shall transfer funds for administrative activities that support
20.8 implementing prevention services activities to the special revenue fund and shall retain
20.9 federal reimbursement generated under this section.

20.10 (b) The commissioner must provide an annual report to the chairs and ranking minority
20.11 members of the legislative committees with jurisdiction over health and human services
20.12 policy and finance that identifies the amount of funds appropriated and transferred to this
20.13 account under paragraph (a) and how the funds were used.

20.14 Sec. 6. Minnesota Statutes 2023 Supplement, section 256B.0622, subdivision 8, is amended
20.15 to read:

20.16 Subd. 8. **Medical assistance payment for assertive community treatment and**
20.17 **intensive residential treatment services.** (a) Payment for intensive residential treatment
20.18 services and assertive community treatment in this section shall be based on one daily rate
20.19 per provider inclusive of the following services received by an eligible client in a given
20.20 calendar day: all rehabilitative services under this section, staff travel time to provide
20.21 rehabilitative services under this section, and nonresidential crisis stabilization services
20.22 under section 256B.0624.

20.23 (b) Except as indicated in paragraph (c), payment will not be made to more than one
20.24 entity for each client for services provided under this section on a given day. If services
20.25 under this section are provided by a team that includes staff from more than one entity, the
20.26 team must determine how to distribute the payment among the members.

20.27 (c) The commissioner shall determine one rate for each provider that will bill medical
20.28 assistance for residential services under this section and one rate for each assertive community
20.29 treatment provider. If a single entity provides both services, one rate is established for the
20.30 entity's residential services and another rate for the entity's nonresidential services under
20.31 this section. A provider is not eligible for payment under this section without authorization
20.32 from the commissioner. The commissioner shall develop rates using the following criteria:

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

21.3 (i) the direct services costs must be determined using actual costs of salaries, benefits,
21.4 payroll taxes, and training of direct service staff and service-related transportation;

21.5 (ii) other program costs not included in item (i) must be determined as a specified
21.6 percentage of the direct services costs as determined by item (i). The percentage used shall
21.7 be determined by the commissioner based upon the average of percentages that represent
21.8 the relationship of other program costs to direct services costs among the entities that provide
21.9 similar services;

21.10 (iii) physical plant costs calculated based on the percentage of space within the program
21.11 that is entirely devoted to treatment and programming. This does not include administrative
21.12 or residential space;

21.13 (iv) assertive community treatment physical plant costs must be reimbursed as part of
21.14 the costs described in item (ii); and

21.15 (v) subject to federal approval, up to an additional five percent of the total rate may be
21.16 added to the program rate as a quality incentive based upon the entity meeting performance
21.17 criteria specified by the commissioner;

21.18 (2) actual cost is defined as costs which are allowable, allocable, and reasonable, and
21.19 consistent with federal reimbursement requirements under Code of Federal Regulations,
21.20 title 48, chapter 1, part 31, relating to for-profit entities, and Office of Management and
21.21 Budget Circular Number A-122, relating to nonprofit entities;

21.22 (3) the number of service units;

21.23 (4) the degree to which clients will receive services other than services under this section;
21.24 and

21.25 (5) the costs of other services that will be separately reimbursed.

21.26 (d) The rate for intensive residential treatment services and assertive community treatment
21.27 must exclude the medical assistance room and board rate, as defined in section 256B.056,
21.28 subdivision 5d, and services not covered under this section, such as partial hospitalization,
21.29 home care, and inpatient services.

21.30 (e) Physician services that are not separately billed may be included in the rate to the
21.31 extent that a psychiatrist, or other health care professional providing physician services
21.32 within their scope of practice, is a member of the intensive residential treatment services

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

22.5 (f) When services under this section are provided by an assertive community treatment
22.6 provider, case management functions must be an integral part of the team.

22.7 (g) The rate for a provider must not exceed the rate charged by that provider for the
22.8 same service to other payors.

22.9 (h) The rates for existing programs must be established prospectively based upon the
22.10 expenditures and utilization over a prior 12-month period using the criteria established in
22.11 paragraph (c). The rates for new programs must be established based upon estimated
22.12 expenditures and estimated utilization using the criteria established in paragraph (c).

22.13 (i) Effective for the rate years beginning on and after January 1, 2024, rates for assertive
22.14 community treatment, adult residential crisis stabilization services, and intensive residential
22.15 treatment services must be annually adjusted for inflation using the Centers for Medicare
22.16 and Medicaid Services Medicare Economic Index, as forecasted in the ~~fourth~~ third quarter
22.17 of the calendar year before the rate year. The inflation adjustment must be based on the
22.18 12-month period from the midpoint of the previous rate year to the midpoint of the rate year
22.19 for which the rate is being determined.

22.20 (j) Entities who discontinue providing services must be subject to a settle-up process
22.21 whereby actual costs and reimbursement for the previous 12 months are compared. In the
22.22 event that the entity was paid more than the entity's actual costs plus any applicable
22.23 performance-related funding due the provider, the excess payment must be reimbursed to
22.24 the department. If a provider's revenue is less than actual allowed costs due to lower
22.25 utilization than projected, the commissioner may reimburse the provider to recover its actual
22.26 allowable costs. The resulting adjustments by the commissioner must be proportional to the
22.27 percent of total units of service reimbursed by the commissioner and must reflect a difference
22.28 of greater than five percent.

22.29 (k) A provider may request of the commissioner a review of any rate-setting decision
22.30 made under this subdivision.

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

23.3 Subd. 7. **Medical assistance payment and rate setting.** (a) Payment for services in this
23.4 section must be based on one daily encounter rate per provider inclusive of the following
23.5 services received by an eligible client in a given calendar day: all rehabilitative services,
23.6 supports, and ancillary activities under this section, staff travel time to provide rehabilitative
23.7 services under this section, and crisis response services under section 256B.0624.

23.8 (b) Payment must not be made to more than one entity for each client for services
23.9 provided under this section on a given day. If services under this section are provided by a
23.10 team that includes staff from more than one entity, the team shall determine how to distribute
23.11 the payment among the members.

23.12 (c) The commissioner shall establish regional cost-based rates for entities that will bill
23.13 medical assistance for nonresidential intensive rehabilitative mental health services. In
23.14 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
23.22 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 ~~fourth~~ third 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.

23.29 Sec. 8. Minnesota Statutes 2023 Supplement, section 260.014, is amended by adding a
23.30 subdivision to read:

23.31 Subd. 5. Carryforward authority. Funds appropriated under this section are available
23.32 for two fiscal years.

24.1 Sec. 9. Minnesota Statutes 2023 Supplement, section 518A.42, subdivision 3, is amended
24.2 to read:

24.3 Subd. 3. **Exception.** (a) ~~This section~~ The minimum basic support amount under
24.4 subdivision 2 does not apply to an obligor who is incarcerated ~~or is a recipient of a general~~
24.5 ~~assistance grant, Supplemental Security Income, temporary assistance for needy families~~
24.6 ~~(TANF) grant, or comparable state-funded Minnesota family investment program (MFIP)~~
24.7 ~~benefits.~~

24.8 (b) The minimum basic support amount under subdivision 2 does not apply to an obligor
24.9 who is a recipient of:

24.10 (1) a general assistance grant;

24.11 (2) Supplement Security Income;

24.12 (3) a Temporary Assistances for Needy Families (TANF) grant; or

24.13 (4) comparable state-funded Minnesota family investment program (MFIP) benefits.

24.14 ~~(b)~~ (c) If the court finds the obligor receives no income and completely lacks the ability
24.15 to earn income, the minimum basic support amount under ~~this~~ subdivision 2 does not apply.

24.16 ~~(e)~~ (d) If the obligor's basic support amount is reduced below the minimum basic support
24.17 amount due to the application of the parenting expense adjustment, the minimum basic
24.18 support amount under ~~this~~ subdivision 2 does not apply and the lesser amount is the guideline
24.19 basic support.

24.20 Sec. 10. Laws 2023, chapter 70, article 14, section 42, is amended by adding a subdivision
24.21 to read:

24.22 Subd. 9. **Compensation.** Compensation of board members is governed by Minnesota
24.23 Statutes, section 15.0575.

24.24 Sec. 11. Laws 2023, chapter 70, article 20, section 2, subdivision 24, is amended to read:

24.25 Subd. 24. **Grant Programs; Children and**
24.26 **Economic Support Grants** 212,877,000 78,333,000

24.27 (a) **Fraud prevention initiative start-up**
24.28 **grants.** \$400,000 in fiscal year 2024 is for
24.29 start-up grants to the Red Lake Nation, White
24.30 Earth Nation, and Mille Lacs Band of Ojibwe
24.31 to develop a fraud prevention program. This

25.1 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
25.7 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 grants. This is a onetime appropriation.

26.18 **(f) Emergency shelter facilities.** \$98,456,000
26.19 in fiscal year 2024 is for grants to eligible
26.20 applicants for emergency shelter facilities.
26.21 This is a onetime appropriation and is
26.22 available until June 30, 2028.

26.23 **(g) Homeless youth cash stipend pilot**
26.24 **project.** \$5,302,000 in fiscal year 2024 is for
26.25 a grant to Youthprise for the homeless youth
26.26 cash stipend pilot project. The grant must be
26.27 used to provide cash stipends to homeless
26.28 youth, provide cash incentives for stipend
26.29 recipients to participate in periodic surveys,
26.30 provide youth-designed optional services, and
26.31 complete a legislative report. This is a onetime
26.32 appropriation and is available until June 30,
26.33 2028.

- 27.1 **(h) Heading Home Ramsey County**
27.2 **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 Radas 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.
- 27.21 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
27.29 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

29.1 fiscal year 2026 and \$1,250,000 in fiscal year
29.2 2027.

29.3 **(n) Supplemental nutrition assistance**
29.4 **program (SNAP) outreach.** \$1,000,000 in
29.5 fiscal year 2024 and \$1,000,000 in fiscal year
29.6 2025 are for the SNAP outreach program
29.7 under Minnesota Statutes, section 256D.65.
29.8 The base for this appropriation is \$500,000 in
29.9 fiscal year 2026 and \$500,000 in fiscal year
29.10 2027.

29.11 **(o) Minnesota Food Assistance Program.**
29.12 **Unexpended funds for the Minnesota food**
29.13 **assistance program for fiscal year 2024 do not**
29.14 **cancel but are available in fiscal year 2025.**

29.15 ~~(o)~~ **(p) Base level adjustment.** The general
29.16 fund base is \$83,179,000 in fiscal year 2026
29.17 and \$88,179,000 in fiscal year 2027.

29.18 Sec. 12. **REVIVAL AND REENACTMENT.**

29.19 **Minnesota Statutes 2022, section 256B.051, subdivision 7, is revived and reenacted**
29.20 **effective retroactively from August 1, 2023. The time-limited supplemental rate reduction**
29.21 **in Minnesota Statutes 2022, section 256B.051, subdivision 7, does not restart when the**
29.22 **subdivision is revived and reenacted. Any time frames within or dependent on the subdivision**
29.23 **are based on the original effective date in Laws 2017, First Special Session chapter 6, article**
29.24 **2, section 10.**

29.25 **EFFECTIVE DATE.** **This section is effective the day following final enactment.**

29.26 Sec. 13. **REPEALER.**

29.27 **(a) Minnesota Statutes 2022, section 245.975, subdivision 8, is repealed.**

29.28 **(b) Laws 2023, chapter 25, section 190, subdivision 10, is repealed.**

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

30.1 **ARTICLE 5**

30.2 **DEPARTMENT OF HEALTH**

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

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

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

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

30.22 ~~(1) interagency agreements or service-level agreements and any renewals or extensions~~
 30.23 ~~of existing interagency or service-level agreements with a state department under section~~
 30.24 ~~15.01, state agency under section 15.012, or the Department of Information Technology~~
 30.25 ~~Services, with a value of more than \$100,000, or related agreements with the same department~~
 30.26 ~~or agency with a cumulative value of more than \$100,000; and~~

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

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

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

31.3 Subd. 2. ~~Creation of account~~ Availability. (a) ~~A health professional education loan~~
31.4 ~~forgiveness program account is established.~~ The commissioner of health shall use money
31.5 ~~from the account to establish a~~ appropriated for health professional education loan forgiveness
31.6 program in this section:

31.7 (1) for medical residents, mental health professionals, and alcohol and drug counselors
31.8 agreeing to practice in designated rural areas or underserved urban communities or
31.9 specializing in the area of pediatric psychiatry;

31.10 (2) for midlevel practitioners agreeing to practice in designated rural areas or to teach
31.11 at least 12 credit hours, or 720 hours per year in the nursing field in a postsecondary program
31.12 at the undergraduate level or the equivalent at the graduate level;

31.13 (3) for nurses who agree to practice in a Minnesota nursing home; in an intermediate
31.14 care facility for persons with developmental disability; in a hospital if the hospital owns
31.15 and operates a Minnesota nursing home and a minimum of 50 percent of the hours worked
31.16 by the nurse is in the nursing home; in an assisted living facility as defined in section
31.17 144G.08, subdivision 7; or for a home care provider as defined in section 144A.43,
31.18 subdivision 4; or agree to teach at least 12 credit hours, or 720 hours per year in the nursing
31.19 field in a postsecondary program at the undergraduate level or the equivalent at the graduate
31.20 level;

31.21 (4) for other health care technicians agreeing to teach at least 12 credit hours, or 720
31.22 hours per year in their designated field in a postsecondary program at the undergraduate
31.23 level or the equivalent at the graduate level. The commissioner, in consultation with the
31.24 Healthcare Education-Industry Partnership, shall determine the health care fields where the
31.25 need is the greatest, including, but not limited to, respiratory therapy, clinical laboratory
31.26 technology, radiologic technology, and surgical technology;

31.27 (5) for pharmacists, advanced dental therapists, dental therapists, and public health nurses
31.28 who agree to practice in designated rural areas;

31.29 (6) for dentists agreeing to deliver at least 25 percent of the dentist's yearly patient
31.30 encounters to state public program enrollees or patients receiving sliding fee schedule
31.31 discounts through a formal sliding fee schedule meeting the standards established by the
31.32 United States Department of Health and Human Services under Code of Federal Regulations,
31.33 title 42, section 51, chapter 303; and

32.1 (7) for nurses employed as a hospital nurse by a nonprofit hospital and providing direct
32.2 care to patients at the nonprofit hospital.

32.3 (b) Appropriations made ~~to the account~~ for health professional education loan forgiveness
32.4 in this section do not cancel and are available until expended, except that at the end of each
32.5 biennium, any remaining balance in the account that is not committed by contract and not
32.6 needed to fulfill existing commitments shall cancel to the fund.

32.7 Sec. 4. Minnesota Statutes 2022, section 144.1501, subdivision 5, is amended to read:

32.8 Subd. 5. **Penalty for nonfulfillment.** If a participant does not fulfill the required
32.9 minimum commitment of service according to subdivision 3, the commissioner of health
32.10 shall collect from the participant the total amount paid to the participant under the loan
32.11 forgiveness program plus interest at a rate established according to section 270C.40. The
32.12 commissioner shall deposit the money collected in ~~the health care access fund to be credited~~
32.13 ~~to a dedicated account in the special revenue fund.~~ The balance of the account is appropriated
32.14 annually to the commissioner for the health professional education loan forgiveness program
32.15 ~~account~~ established in subdivision 2. The commissioner shall allow waivers of all or part
32.16 of the money owed the commissioner as a result of a nonfulfillment penalty if emergency
32.17 circumstances prevented fulfillment of the minimum service commitment.

32.18 Sec. 5. Minnesota Statutes 2023 Supplement, section 144.1505, subdivision 2, is amended
32.19 to read:

32.20 Subd. 2. **Programs.** (a) For advanced practice provider clinical training expansion grants,
32.21 the commissioner of health shall award health professional training site grants to eligible
32.22 physician assistant, advanced practice registered nurse, pharmacy, dental therapy, and mental
32.23 health professional programs to plan and implement expanded clinical training. A planning
32.24 grant shall not exceed \$75,000, and a three-year training grant shall not exceed ~~\$150,000~~
32.25 ~~for the first year, \$100,000 for the second year, and \$50,000 for the third year~~ \$300,000 per
32.26 program project. The commissioner may provide a one-year, no-cost extension for grants.

32.27 (b) For health professional rural and underserved clinical rotations grants, the
32.28 commissioner of health shall award health professional training site grants to eligible
32.29 physician, physician assistant, advanced practice registered nurse, pharmacy, dentistry,
32.30 dental therapy, and mental health professional programs to augment existing clinical training
32.31 programs to add rural and underserved rotations or clinical training experiences, such as
32.32 credential or certificate rural tracks or other specialized training. For physician and dentist
32.33 training, the expanded training must include rotations in primary care settings such as

33.1 community clinics, hospitals, health maintenance organizations, or practices in rural
33.2 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

34.1 in health care facilities for nurses, ~~nursing assistants~~, nurse aides, and orderlies. Supplemental
 34.2 nursing services agency does not include an individual who only engages in providing the
 34.3 individual's services on a temporary basis to health care facilities. Supplemental nursing
 34.4 services agency does not include a professional home care agency licensed under section
 34.5 144A.471 that only provides staff to other home care providers.

34.6 Sec. 9. Minnesota Statutes 2022, section 144A.70, subdivision 7, is amended to read:

34.7 Subd. 7. **Oversight.** The commissioner is responsible for the oversight of supplemental
 34.8 nursing services agencies through ~~annual~~ semiannual unannounced surveys and follow-up
 34.9 surveys, complaint investigations under sections 144A.51 to 144A.53, and other actions
 34.10 necessary to ensure compliance with sections 144A.70 to 144A.74.

34.11 Sec. 10. Minnesota Statutes 2022, section 144A.71, subdivision 2, is amended to read:

34.12 Subd. 2. **Application information and fee.** The commissioner shall establish forms and
 34.13 procedures for processing each supplemental nursing services agency registration application.
 34.14 An application for a supplemental nursing services agency registration must include at least
 34.15 the following:

34.16 (1) the names and addresses of ~~the owner or owners~~ all owners and controlling persons
 34.17 of the supplemental nursing services agency;

34.18 (2) if the owner is a corporation, copies of its articles of incorporation and current bylaws,
 34.19 together with the names and addresses of its officers and directors;

34.20 (3) ~~satisfactory proof of compliance with section 144A.72, subdivision 1, clauses (5) to~~
 34.21 ~~(7)~~ if the owner is a limited liability company, copies of its articles of organization and
 34.22 operating agreement, together with the names and addresses of its officers and directors;

34.23 (4) documentation that the supplemental nursing services agency has medical malpractice
 34.24 insurance to insure against the loss, damage, or expense of a claim arising out of the death
 34.25 or injury of any person as the result of negligence or malpractice in the provision of health
 34.26 care services by the supplemental nursing services agency or by any employee of the agency;

34.27 (5) documentation that the supplemental nursing services agency has an employee
 34.28 dishonesty bond in the amount of \$10,000;

34.29 (6) documentation that the supplemental nursing services agency has insurance coverage
 34.30 for workers' compensation for all nurses, nurse aids, and orderlies provided or procured by
 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

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

37.3 ~~(8)~~ (5) the supplemental nursing services agency must not, in any contract with any
 37.4 employee or health care facility, require the payment of liquidated damages, employment
 37.5 fees, or other compensation should the employee be hired as a permanent employee of a
 37.6 health care facility; A violation of this provision may be subject to a fine of \$3,000;

37.7 ~~(9)~~ (6) the supplemental nursing services agency shall document that each temporary
 37.8 employee provided to health care facilities is an employee of the agency and is not an
 37.9 independent contractor; and

37.10 ~~(10)~~ (7) the supplemental nursing services agency shall retain all records for five calendar
 37.11 years. All records of the supplemental nursing services agency must be immediately available
 37.12 to the department.

37.13 (b) In order to retain registration, the supplemental nursing services agency must provide
 37.14 services to a health care facility ~~during the year in Minnesota~~ within the past 12 months
 37.15 preceding the supplemental nursing services agency's registration renewal date.

37.16 Sec. 14. Minnesota Statutes 2022, section 144A.73, is amended to read:

37.17 **144A.73 COMPLAINT SYSTEM.**

37.18 The commissioner shall establish a system for reporting complaints against a supplemental
 37.19 nursing services agency or its employees. Complaints may be made by any member of the
 37.20 public. Complaints against a supplemental nursing services agency shall be investigated by
 37.21 ~~the Office of Health Facility Complaints~~ commissioner of health under sections 144A.51
 37.22 to 144A.53.

37.23 Sec. 15. Minnesota Statutes 2023 Supplement, section 145.561, subdivision 4, is amended
 37.24 to read:

37.25 Subd. 4. **988 telecommunications fee.** (a) In compliance with the National Suicide
 37.26 Hotline Designation Act of 2020, ~~the commissioner shall impose a monthly statewide fee~~
 37.27 ~~on~~ each subscriber of a wireline, wireless, or IP-enabled voice service ~~at a rate that provides~~
 37.28 must pay a monthly fee to provide for the robust creation, operation, and maintenance of a
 37.29 statewide 988 suicide prevention and crisis system.

37.30 ~~(b) The commissioner shall annually recommend to the Public Utilities Commission an~~
 37.31 ~~adequate and appropriate fee to implement this section. The amount of the fee must comply~~

38.1 ~~with the limits in paragraph (c). The commissioner shall provide telecommunication service~~
 38.2 ~~providers and carriers a minimum of 45 days' notice of each fee change.~~

38.3 ~~(e)~~ (b) The amount of the 988 telecommunications fee ~~must not be more than 25~~ is 12
 38.4 cents per month ~~on or after January 1, 2024~~, for each consumer access line, including trunk
 38.5 equivalents as designated by the ~~commission~~ Public Utilities Commission pursuant to section
 38.6 403.11, subdivision 1. The 988 telecommunications fee must be the same for all subscribers.

38.7 ~~(d)~~ (c) Each wireline, wireless, and IP-enabled voice telecommunication service provider
 38.8 shall collect the 988 telecommunications fee and transfer the amounts collected to the
 38.9 commissioner of public safety in the same manner as provided in section 403.11, subdivision
 38.10 1, paragraph (d).

38.11 ~~(e)~~ (d) The commissioner of public safety shall deposit the money collected from the
 38.12 988 telecommunications fee to the 988 special revenue account established in subdivision
 38.13 3.

38.14 ~~(f)~~ (e) All 988 telecommunications fee revenue must be used to supplement, and not
 38.15 supplant, federal, state, and local funding for suicide prevention.

38.16 ~~(g)~~ (f) The 988 telecommunications fee amount shall be adjusted as needed to provide
 38.17 for continuous operation of the lifeline centers and 988 hotline, volume increases, and
 38.18 maintenance.

38.19 ~~(h)~~ (g) The commissioner shall annually report to the Federal Communications
 38.20 Commission on revenue generated by the 988 telecommunications fee.

38.21 **EFFECTIVE DATE.** This section is effective the day following final enactment.

38.22 Sec. 16. **REPEALER.**

38.23 Minnesota Statutes 2023 Supplement, section 144.0528, is repealed.

38.24 **ARTICLE 6**

38.25 **DEPARTMENT OF CHILDREN, YOUTH, AND FAMILIES**

38.26 Section 1. **[142A.045] CHILDREN, YOUTH, AND FAMILIES**

38.27 **INTERGOVERNMENTAL ADVISORY COMMITTEE.**

38.28 (a) An intergovernmental advisory committee is established to provide advice,
 38.29 consultation, and recommendations to the commissioner on the planning, design,
 38.30 administration, funding, and evaluation of services to children, youth, and families.

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

39.1 and the Minnesota Association of County Social Services Administrators must codevelop
 39.2 and execute a process to administer the committee that ensures each county is represented.
 39.3 The committee must meet at least quarterly and special meetings may be called by the
 39.4 committee chair or a majority of the members.

39.5 (b) Subject to section 15.059, the commissioner may reimburse committee members or
 39.6 their alternates for allowable expenses while engaged in their official duties as committee
 39.7 members.

39.8 (c) Notwithstanding section 15.059, the intergovernmental advisory committee does not
 39.9 expire.

39.10 **Sec. 2. [142B.47] TRAINING ON RISK OF SUDDEN UNEXPECTED INFANT**
 39.11 **DEATH AND ABUSIVE HEAD TRAUMA FOR CHILD FOSTER CARE**
 39.12 **PROVIDERS.**

39.13 (a) Licensed child foster care providers that care for infants or children through five
 39.14 years of age must document that before caregivers assist in the care of infants or children
 39.15 through five years of age, they are instructed on the standards in section 142B.46 and receive
 39.16 training on reducing the risk of sudden unexpected infant death and abusive head trauma
 39.17 from shaking infants and young children. This section does not apply to emergency relative
 39.18 placement under section 142B.06. The training on reducing the risk of sudden unexpected
 39.19 infant death and abusive head trauma may be provided as:

39.20 (1) orientation training to child foster care providers who care for infants or children
 39.21 through five years of age under Minnesota Rules, part 2960.3070, subpart 1; or

39.22 (2) in-service training to child foster care providers who care for infants or children
 39.23 through five years of age under Minnesota Rules, part 2960.3070, subpart 2.

39.24 (b) Training required under this section must be at least one hour in length and must be
 39.25 completed at least once every five years. At a minimum, the training must address the risk
 39.26 factors related to sudden unexpected infant death and abusive head trauma, means of reducing
 39.27 the risk of sudden unexpected infant death and abusive head trauma, and license holder
 39.28 communication with parents regarding reducing the risk of sudden unexpected infant death
 39.29 and abusive head trauma.

39.30 (c) Training for child foster care providers must be approved by the county or private
 39.31 licensing agency that is responsible for monitoring the child foster care provider under
 39.32 section 142B.30. The approved training fulfills, in part, training required under Minnesota
 39.33 Rules, part 2960.3070.

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

40.2 Subd. 6. **Appeal of multiple sanctions.** (a) When the license holder appeals more than
40.3 one licensing action or sanction that were simultaneously issued by the commissioner, the
40.4 license holder shall specify the actions or sanctions that are being appealed.

40.5 (b) If there are different timelines prescribed in statutes for the licensing actions or
40.6 sanctions being appealed, the license holder must submit the appeal within the longest of
40.7 those timelines specified in statutes.

40.8 (c) The appeal must be made in writing by certified mail ~~or~~, by personal service, or
40.9 through the provider licensing and reporting hub. If mailed, the appeal must be postmarked
40.10 and sent to the commissioner within the prescribed timeline with the first day beginning
40.11 the day after the license holder receives the certified letter. If a request is made by personal
40.12 service, it must be received by the commissioner within the prescribed timeline with the
40.13 first day beginning the day after the license holder receives the certified letter. If the appeal
40.14 is made through the provider hub, the appeal must be received by the commissioner within
40.15 the prescribed timeline with the first day beginning the day after the commissioner issued
40.16 the order through the hub.

40.17 (d) When there are different timelines prescribed in statutes for the appeal of licensing
40.18 actions or sanctions simultaneously issued by the commissioner, the commissioner shall
40.19 specify in the notice to the license holder the timeline for appeal as specified under paragraph
40.20 (b).

40.21 Sec. 4. Minnesota Statutes 2022, section 245A.10, subdivision 1, as amended by Laws
40.22 2024, chapter 80, article 2, section 48, is amended to read:

40.23 Subdivision 1. **Application or license fee required, programs exempt from fee.** (a)
40.24 Unless exempt under paragraph (b), the commissioner shall charge a fee for evaluation of
40.25 applications and inspection of programs which are licensed under this chapter.

40.26 (b) Except as provided under subdivision 2, no application or license fee shall be charged
40.27 for a child foster residence setting, adult foster care, or a community residential setting.

40.28 Sec. 5. Minnesota Statutes 2022, section 245A.10, subdivision 2, as amended by Laws
40.29 2024, chapter 80, article 2, section 49, is amended to read:

40.30 Subd. 2. **County fees for applications and licensing inspections.** (a) For purposes of
40.31 adult foster care and child foster residence setting licensing and licensing the physical plant
40.32 of a community residential setting, under this chapter, a county agency may charge a fee to

41.1 a corporate applicant or corporate license holder to recover the actual cost of licensing
41.2 inspections, not to exceed \$500 annually.

41.3 (b) Counties may elect to reduce or waive the fees in paragraph (a) under the following
41.4 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.

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

41.9 **245A.144 TRAINING ON RISK OF SUDDEN UNEXPECTED INFANT DEATH**
41.10 **AND ABUSIVE HEAD TRAUMA FOR CHILD FOSTER CARE PROVIDERS.**

41.11 (a) Licensed child foster care providers that care for infants or children through five
41.12 years of age must document that before staff persons ~~and caregivers~~ assist in the care of
41.13 infants or children through five years of age, they are instructed on the standards in section
41.14 ~~245A.1435~~ 142B.46 and receive training on reducing the risk of sudden unexpected infant
41.15 death and abusive head trauma from shaking infants and young children. ~~This section does~~
41.16 ~~not apply to emergency relative placement under section 245A.035.~~ The training on reducing
41.17 the risk of sudden unexpected infant death and abusive head trauma may be provided as:

41.18 (1) orientation training to child foster care providers, who care for infants or children
41.19 through five years of age, under Minnesota Rules, part 2960.3070, subpart 1; or

41.20 (2) in-service training to child foster care providers, who care for infants or children
41.21 through five years of age, under Minnesota Rules, part 2960.3070, subpart 2.

41.22 (b) Training required under this section must be at least one hour in length and must be
41.23 completed at least once every five years. At a minimum, the training must address the risk
41.24 factors related to sudden unexpected infant death and abusive head trauma, means of reducing
41.25 the risk of sudden unexpected infant death and abusive head trauma, and license holder
41.26 communication with parents regarding reducing the risk of sudden unexpected infant death
41.27 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

43.1 both approve a variance for dual licensure of family child foster care and family adult foster
 43.2 care or family adult foster care and family child care. Variances under this paragraph are
 43.3 excluded from the delegation of variance authority and may be issued only by both
 43.4 commissioners.

43.5 ~~(b)~~ (c) For family adult day services programs, the commissioner may authorize licensing
 43.6 reviews every two years after a licensee has had at least one annual review.

43.7 ~~(e)~~ (d) A license issued under this section may be issued for up to two years.

43.8 ~~(d)~~ (e) During implementation of chapter 245D, the commissioner shall consider:

43.9 (1) the role of counties in quality assurance;

43.10 (2) the duties of county licensing staff; and

43.11 (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.

43.14 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
 43.17 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
 43.19 1, paragraph (b), clause (1), is excluded from the delegation of authority to county agencies.

43.20 Sec. 8. Minnesota Statutes 2022, section 245A.175, is amended to read:

43.21 **245A.175 CHILD FOSTER CARE TRAINING REQUIREMENT; MENTAL**
 43.22 **HEALTH TRAINING; FETAL ALCOHOL SPECTRUM DISORDERS TRAINING.**

43.23 Prior to a nonemergency placement of a child in a foster care home, the child foster care
 43.24 license holder and ~~caregivers in foster family and treatment foster care settings~~, and all staff
 43.25 providing care in foster residence settings must complete two hours of training that addresses
 43.26 the causes, symptoms, and key warning signs of mental health disorders; cultural
 43.27 considerations; and effective approaches for dealing with a child's behaviors. At least one
 43.28 hour of the annual training requirement for the ~~foster family license holder and caregivers~~,
 43.29 ~~and~~ foster residence staff must be on children's mental health issues and treatment. Except
 43.30 for providers and services under chapter 245D, the annual training must also include at least
 43.31 one hour of training on fetal alcohol spectrum disorders, which must be counted toward the
 43.32 12 hours of required in-service training per year. ~~Short-term substitute caregivers are exempt~~

44.1 ~~from these requirements.~~ Training curriculum shall be approved by the commissioner of
44.2 human services.

44.3 Sec. 9. Minnesota Statutes 2023 Supplement, section 245A.66, subdivision 4, as amended
44.4 by Laws 2024, chapter 80, article 2, section 73, is amended to read:

44.5 Subd. 4. **Ongoing training requirement.** (a) In addition to the orientation training
44.6 required by the applicable licensing rules and statutes, children's residential facility license
44.7 holders must provide a training annually on the maltreatment of minors reporting
44.8 requirements and definitions in chapter 260E to each mandatory reporter, as described in
44.9 section 260E.06, subdivision 1.

44.10 (b) In addition to the orientation training required by the applicable licensing rules and
44.11 statutes, all foster residence setting staff and volunteers that are mandatory reporters as
44.12 described in section 260E.06, subdivision 1, must complete training each year on the
44.13 maltreatment of minors reporting requirements and definitions in chapter 260E.

44.14 Sec. 10. Minnesota Statutes 2022, section 256.029, as amended by Laws 2024, chapter
44.15 80, article 1, section 66, is amended to read:

44.16 **256.029 DOMESTIC VIOLENCE INFORMATIONAL BROCHURE.**

44.17 (a) The commissioner shall provide a domestic violence informational brochure that
44.18 provides information about the existence of domestic violence waivers for eligible public
44.19 assistance applicants to all applicants of general assistance, medical assistance, and
44.20 MinnesotaCare. The brochure must explain that eligible applicants may be temporarily
44.21 waived from certain program requirements due to domestic violence. The brochure must
44.22 provide information about services and other programs to help victims of domestic violence.

44.23 (b) The brochure must be funded with TANF funds.

44.24 (c) The commissioner must work with the commissioner of children, youth, and families
44.25 to create a brochure that meets the requirements of this section and section 142G.05.

44.26 Sec. 11. Minnesota Statutes 2023 Supplement, section 256M.42, is amended by adding a
44.27 subdivision to read:

44.28 Subd. 7. **Adult protection grant allocation under Reform 2020.** The requirements of
44.29 subdivisions 2 to 6 apply to the Reform 2020 adult protection state grants in Minnesota
44.30 Statutes 2013 Supplement, section 256M.40, subdivision 1, and Laws 2013, chapter 108,

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;

45.30 (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,
46.11 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,
46.22 article 20, section 2, subdivision 24, paragraph (i);
- 46.23 (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 33;

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 13;

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
48.2 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
48.9 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.

48.14 Sec. 14. Laws 2024, chapter 80, article 1, section 34, subdivision 2, is amended to read:

48.15 Subd. 2. **Definitions.** (a) For purposes of this section, the following definitions have the
48.16 meanings given.

48.17 (b) "Associated entity" means a provider or vendor owned or controlled by an excluded
48.18 individual.

48.19 (c) "Associated individual" means an individual or entity that has a relationship with
48.20 the business or its owners or controlling individuals, such that the individual or entity would
48.21 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.

48.24 (e) "Individual" means a natural person providing products or services as a provider or
48.25 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.

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

49.2 Sec. 96. **REVISOR INSTRUCTION.**

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

49.4 B.

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>	<u>142A.50</u>
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

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

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

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

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

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

51.4 (c) Plans for the transfer of closed case records must be accompanied by a signed
 51.5 agreement or other documentation indicating that a county or a similarly licensed provider
 51.6 has agreed to accept and maintain the program's or private agency's closed case records and
 51.7 to provide follow-up services as necessary to affected clients.

51.8 Sec. 17. Laws 2024, chapter 80, article 2, section 7, subdivision 2, is amended to read:

51.9 Subd. 2. **County fees for applications and licensing inspections.** (a) A county agency
 51.10 may charge a license fee to an applicant or license holder not to exceed \$50 for a one-year
 51.11 license or \$100 for a two-year license.

51.12 (b) Counties may allow providers to pay the applicant fee in paragraph (a) on an
 51.13 installment basis for up to one year. If the provider is receiving child care assistance payments
 51.14 from the state, the provider may have the fee under paragraph (a) deducted from the child
 51.15 care assistance payments for up to one year and the state shall reimburse the county for the
 51.16 county fees collected in this manner.

51.17 ~~(e) For purposes of child foster care licensing under this chapter, a county agency may~~
 51.18 ~~charge a fee to a corporate applicant or corporate license holder to recover the actual cost~~
 51.19 ~~of licensing inspections, not to exceed \$500 annually.~~

51.20 ~~(d) Counties may elect to reduce or waive the fees in paragraph (e) under the following~~
 51.21 ~~circumstances:~~

51.22 ~~(1) in cases of financial hardship;~~

51.23 ~~(2) if the county has a shortage of providers in the county's area; or~~

51.24 ~~(3) for new providers.~~

51.25 Sec. 18. Laws 2024, chapter 80, article 2, section 10, subdivision 6, is amended to read:

51.26 Subd. 6. **Appeal of multiple sanctions.** (a) When the license holder appeals more than
 51.27 one licensing action or sanction that were simultaneously issued by the commissioner, the
 51.28 license holder shall specify the actions or sanctions that are being appealed.

51.29 (b) If there are different timelines prescribed in statutes for the licensing actions or
 51.30 sanctions being appealed, the license holder must submit the appeal within the longest of
 51.31 those timelines specified in statutes.

52.1 (c) The appeal must be made in writing by certified mail ~~or~~, by personal service, or
 52.2 through the provider licensing and reporting hub. If mailed, the appeal must be postmarked
 52.3 and sent to the commissioner within the prescribed timeline with the first day beginning
 52.4 the day after the license holder receives the certified letter. If a request is made by personal
 52.5 service, it must be received by the commissioner within the prescribed timeline with the
 52.6 first day beginning the day after the license holder receives the certified letter. If the appeal
 52.7 is made through the provider hub, the appeal must be received by the commissioner within
 52.8 the prescribed timeline with the first day beginning the day after the commissioner issued
 52.9 the order through the hub.

52.10 (d) When there are different timelines prescribed in statutes for the appeal of licensing
 52.11 actions or sanctions simultaneously issued by the commissioner, the commissioner shall
 52.12 specify in the notice to the license holder the timeline for appeal as specified under paragraph
 52.13 (b).

52.14 Sec. 19. Laws 2024, chapter 80, article 2, section 16, subdivision 1, is amended to read:

52.15 Subdivision 1. **Delegation of authority to agencies.** (a) County agencies and private
 52.16 agencies that have been designated or licensed by the commissioner to perform licensing
 52.17 functions and activities under section 142B.10 ~~and background studies for family child care~~
 52.18 ~~under chapter 245C~~; to recommend denial of applicants under section 142B.15; to issue
 52.19 correction orders, to issue variances, and to recommend a conditional license under section
 52.20 142B.16; or to recommend suspending or revoking a license or issuing a fine under section
 52.21 142B.18, shall comply with rules and directives of the commissioner governing those
 52.22 functions and with this section. The following variances are excluded from the delegation
 52.23 of variance authority and may be issued only by the commissioner:

52.24 (1) ~~dual licensure of family child care and family child foster care, dual licensure of~~
 52.25 ~~family child foster care and family adult foster care, dual licensure of child foster residence~~
 52.26 ~~setting and community residential setting, and dual licensure of family adult foster care and~~
 52.27 ~~family child care;~~

52.28 (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

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.

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

54.2 Subd. 2. **Maltreatment of minors ongoing training requirement.** (a) In addition to
 54.3 the orientation training required by the applicable licensing rules and statutes, private
 54.4 child-placing agency license holders must provide a training annually on the maltreatment
 54.5 of minors reporting requirements and definitions in chapter 260E to each mandatory reporter,
 54.6 as described in section 260E.06, subdivision 1.

54.7 (b) In addition to the orientation training required by the applicable licensing rules and
 54.8 statutes, all family child foster care license holders and caregivers ~~and foster residence~~
 54.9 ~~setting staff and volunteers~~ who are mandatory reporters as described in section 260E.06,
 54.10 subdivision 1, must complete training each year on the maltreatment of minors reporting
 54.11 requirements and definitions in chapter 260E.

54.12 Sec. 21. Laws 2024, chapter 80, article 2, section 31, is amended to read:

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

54.15 Prior to a nonemergency placement of a child in a foster care home, the child foster care
 54.16 license holder and caregivers in foster family and treatment foster care settings, ~~and all staff~~
 54.17 ~~providing care in foster residence settings~~ must complete two hours of training that addresses
 54.18 the causes, symptoms, and key warning signs of mental health disorders; cultural
 54.19 considerations; and effective approaches for dealing with a child's behaviors. At least one
 54.20 hour of the annual training requirement for the foster family license holder and caregivers,
 54.21 ~~and foster residence staff~~ must be on children's mental health issues and treatment. Except
 54.22 for providers and services under chapter 245D, the annual training must also include at least
 54.23 one hour of training on fetal alcohol spectrum disorders, which must be counted toward the
 54.24 12 hours of required in-service training per year. Short-term substitute caregivers are exempt
 54.25 from these requirements. Training curriculum shall be approved by the commissioner of
 54.26 children, youth, and families.

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

54.28 Sec. 74. **REVISOR INSTRUCTION.**

54.29 The revisor of statutes must renumber sections or subdivisions in column A as column
 54.30 B.

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

56.1	245A.146, subdivision 3	142B.45, subdivision 3
56.2	245A.146, subdivision 4	142B.45, subdivision 4
56.3	245A.146, subdivision 5	142B.45, subdivision 5
56.4	245A.146, subdivision 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, subdivision 7	142B.30, subdivision 7
56.12	245A.16, subdivision 9	142B.30, subdivision 9
56.13	245A.16, subdivision 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, subdivision 2	142B.54, subdivision 2
56.23	245A.66, subdivision 3	142B.54, subdivision 3

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

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

56.27 Sec. 26. **REVISOR INSTRUCTION.**

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

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

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	<u>122A.731</u>	<u>142D.33</u>
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 revisor of statutes shall codify Laws 2017, First Special Session chapter 5, article
57.29 8, section 9, as amended by article 4, section 25, as Minnesota Statutes, section 142D.07.

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

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

58.2 Sec. 4. **REVISOR INSTRUCTION.**

58.3 (a) The revisor of statutes must renumber each section of Minnesota Statutes in Column
58.4 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>	<u>142F.51</u>
58.17	256E.34	142F.14
58.18	<u>256E.342</u>	<u>142F.15</u>
58.19	256E.35	142F.20
58.20	<u>256E.36</u>	<u>142F.52</u>
58.21	<u>256K.45</u>	<u>142F.55</u>
58.22	<u>256K.451</u>	<u>142F.56</u>
58.23	<u>256K.46</u>	<u>142F.57</u>
58.24	<u>256K.47</u>	<u>142F.58</u>

58.25 (b) The revisor of statutes must correct any statutory cross-references consistent with
58.26 this renumbering.

58.27 Sec. 25. Laws 2024, chapter 80, article 7, section 4, is amended to read:

58.28 Sec. 4. Minnesota Statutes 2022, section 256J.09, is amended by adding a subdivision to
58.29 read:

58.30 Subd. 11. **Domestic violence informational brochure.** (a) The commissioner shall
58.31 provide a domestic violence informational brochure that provides information about the
58.32 existence of domestic violence waivers to all MFIP applicants. The brochure must explain
58.33 that eligible applicants may be temporarily waived from certain program requirements due

59.1 to domestic violence. The brochure must provide information about services and other
59.2 programs to help victims of domestic violence.

59.3 (b) The brochure must be funded with TANF funds.

59.4 (c) The commissioner must work with the commissioner of human services to create a
59.5 brochure that meets the requirements of this section and section 256.029.

59.6 **Sec. 26. CHILD FOSTER RESIDENCE SETTINGS TO STAY AT THE**
59.7 **DEPARTMENT OF HUMAN SERVICES.**

59.8 The responsibility to license child foster residence settings as defined in Minnesota
59.9 Statutes, section 245A.02, subdivision 6e, does not transfer to the Department of Children,
59.10 Youth, and Families under Laws 2023, chapter 70, article 12, section 30, and remains with
59.11 the Department of Human Services.

59.12 **Sec. 27. DIRECTION TO THE COMMISSIONER OF CHILDREN, YOUTH, AND**
59.13 **FAMILIES; COORDINATION OF SERVICES FOR CHILDREN WITH**
59.14 **DISABILITIES AND MENTAL HEALTH.**

59.15 The commissioner shall designate a department leader to be responsible for coordination
59.16 of services and outcomes around children's mental health and for children with or at risk
59.17 for disabilities within and between the Department of Children, Youth, and Families; the
59.18 Department of Human Services; and related agencies.

59.19 **Sec. 28. REPEALER.**

59.20 (a) Laws 2024, chapter 80, article 2, sections 1, subdivision 11; 3, subdivision 3; 4,
59.21 subdivision 4; 10, subdivision 4; 33; and 69, are repealed.

59.22 (b) Minnesota Rules, part 9545.0845, is repealed.

59.23 **Sec. 29. EFFECTIVE DATE; TRANSFER OF RESPONSIBILITIES.**

59.24 (a) This article is effective July 1, 2024.

59.25 (b) Notwithstanding paragraph (a), the powers and responsibilities transferred under this
59.26 article are effective upon notice of the commissioner of children, youth, and families to the
59.27 commissioners of administration, management and budget, and other relevant departments
59.28 along with the secretary of the senate, the chief clerk of the house of representatives, and
59.29 the chairs and ranking minority members of relevant legislative committees and divisions,
59.30 pursuant to Laws 2023, chapter 70, article 12, section 30, subdivision 1.

60.1 (c) By August 1, 2025, the commissioners of human services and children, youth, and
 60.2 families shall notify the chairs and ranking minority members of relevant legislative
 60.3 committees and divisions and the revisor of statutes of any sections of this article or programs
 60.4 to be transferred that are waiting for federal approval to become effective pursuant to Laws
 60.5 2023, chapter 70, article 12, section 30, subdivision 1, paragraph (b).

60.6 **ARTICLE 7**

60.7 **FORECAST ADJUSTMENTS**

60.8 Section 1. **HUMAN SERVICES FORECAST ADJUSTMENTS.**

60.9 The sums shown in the columns marked "Appropriations" are added to or, if shown in
 60.10 parentheses, subtracted from the appropriations in Laws 2023, chapter 61, article 9, and
 60.11 Laws 2023, chapter 70, article 20, to the commissioner of human services from the general
 60.12 fund or other named fund for the purposes specified in section 2 and are available for the
 60.13 fiscal years indicated for each purpose. The figures "2024" and "2025" used in this article
 60.14 mean that the addition to or subtraction from the appropriation listed under them is available
 60.15 for the fiscal year ending June 30, 2024, or June 30, 2025, respectively.

60.16 **APPROPRIATIONS**

60.17 **Available for the Year**

60.18 **Ending June 30**

60.19 **2024**

2025

60.20 **Sec. 2. COMMISSIONER OF HUMAN**
60.21 **SERVICES**

60.22	<u>Subdivision 1. Total Appropriation</u>	<u>\$</u>	<u>137,604,000</u>	<u>\$</u>	<u>329,432,000</u>
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60.23 **Appropriations by Fund**

60.24	<u>General Fund</u>	<u>139,746,000</u>	<u>325,606,000</u>
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60.25	<u>Health Care Access</u>		
60.26	<u>Fund</u>	<u>10,542,000</u>	<u>6,224,000</u>

60.27	<u>Federal TANF</u>	<u>(12,684,000)</u>	<u>(2,398,000)</u>
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60.28 **Subd. 2. Forecasted Programs**

60.29 **(a) MFIP/DWP**

60.30 **Appropriations by Fund**

60.31	<u>General Fund</u>	<u>(5,990,000)</u>	<u>(2,793,000)</u>
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60.32	<u>Federal TANF</u>	<u>(12,684,000)</u>	<u>(2,398,000)</u>
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61.1	<u>(b) MFIP Child Care Assistance</u>	<u>(36,726,000)</u>	<u>(26,004,000)</u>
61.2	<u>(c) General Assistance</u>	<u>(567,000)</u>	<u>292,000</u>
61.3	<u>(d) Minnesota Supplemental Aid</u>	<u>1,424,000</u>	<u>1,500,000</u>
61.4	<u>(e) Housing Support</u>	<u>11,200,000</u>	<u>14,667,000</u>
61.5	<u>(f) Northstar Care for Children</u>	<u>(3,697,000)</u>	<u>(11,309,000)</u>
61.6	<u>(g) MinnesotaCare</u>	<u>10,542,000</u>	<u>6,224,000</u>
61.7	<u>These appropriations are from the health care</u>		
61.8	<u>access fund.</u>		
61.9	<u>(h) Medical Assistance</u>	<u>180,321,000</u>	<u>352,357,000</u>
61.10	<u>(i) Behavioral Health Fund</u>	<u>(6,219,000)</u>	<u>(3,104,000)</u>

61.11 **EFFECTIVE DATE.** This section is effective the day following final enactment.

61.12 **ARTICLE 8**

61.13 **APPROPRIATIONS**

61.14 Section 1. **HEALTH AND HUMAN SERVICES APPROPRIATIONS.**

61.15 The sums shown in the columns marked "Appropriations" are added to or, if shown in
 61.16 parentheses, subtracted from the appropriations in Laws 2023, chapter 70, article 20, to the
 61.17 agencies and for the purposes specified in this article. The appropriations are from the
 61.18 general fund or other named fund and are available for the fiscal years indicated for each
 61.19 purpose. The figures "2024" and "2025" used in this article mean that the addition to or
 61.20 subtraction from the appropriation listed under them is available for the fiscal year ending
 61.21 June 30, 2024, or June 30, 2025, respectively. Base adjustments mean the addition to or
 61.22 subtraction from the base level adjustment set in Laws 2023, chapter 70, article 20.
 61.23 Supplemental appropriations and reductions to appropriations for the fiscal year ending
 61.24 June 30, 2024, are effective the day following final enactment unless a different effective
 61.25 date is explicit.

61.26	<u>APPROPRIATIONS</u>	
61.27	<u>Available for the Year</u>	
61.28	<u>Ending June 30</u>	
61.29	<u>2024</u>	<u>2025</u>

61.30 **Sec. 2. COMMISSIONER OF HUMAN**
 61.31 **SERVICES.**

61.32	<u>Subdivision 1. Total Appropriation.</u>	<u>\$</u>	<u>4,967,000</u>	<u>\$</u>	<u>27,981,000</u>
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62.1	<u>Appropriations by Fund</u>	
62.2	<u>2024</u>	<u>2025</u>
62.3	<u>General</u>	<u>4,967,000</u> <u>29,799,000</u>
62.4	<u>Health Care Access</u>	<u>-0-</u> <u>(1,818,000)</u>

62.5 The amounts that may be spent for each
 62.6 purpose are specified in the following
 62.7 subdivisions.

62.8 **Subd. 2. Central Office; Operations.**

62.9	<u>Appropriations by Fund</u>	
62.10	<u>General</u>	<u>2,369,000</u> <u>19,901,000</u>
62.11	<u>Health Care Access</u>	<u>-0-</u> <u>572,000</u>

62.12 **(a) Child Welfare Technology System.**

62.13 \$15,000,000 in fiscal year 2025 is for
 62.14 information technology improvements to the
 62.15 statewide child welfare information system.

62.16 This is a onetime appropriation.

62.17 **(b) Base Level Adjustment.** The general fund
 62.18 base is increased by \$5,021,000 in fiscal year
 62.19 2026 and each year thereafter.

62.20 **(c) Base Level Adjustment.** The health care
 62.21 access fund base is increased by \$115,000 in
 62.22 fiscal year 2026 and each year thereafter.

62.23 **Subd. 3. Central Office; Children and Families.**

62.24	<u>Appropriations by Fund</u>	
62.25	<u>General</u>	<u>2,598,000</u> <u>4,898,000</u>

62.26 **Base Level Adjustment.** The general fund
 62.27 base is increased by \$5,025,000 in fiscal year
 62.28 2026 and each year thereafter.

62.29 **Subd. 4. Central Office; Health Care.**

62.30	<u>Appropriations by Fund</u>	
62.31	<u>Health Care Access</u>	<u>-0-</u> <u>72,000</u>

62.32 **(a) Continued actuarial and economic**
 62.33 **analyses.** \$72,000 in fiscal year 2025 is from

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.** -0- (2,456,000)

63.19 This appropriation is from the health care
 63.20 access fund.

63.21 **Subd. 6. Forecasted Programs; Medical**
 63.22 **Assistance.** -0- (6,000)

63.23 This appropriation is from the health care
 63.24 access fund.

63.25 **Subd. 7. Grant Programs; Children and**
 63.26 **Economic Support Grants.** -0- 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 the day following final enactment.

63.31 **Sec. 3. COMMISSIONER OF HEALTH**

63.32 **Subdivision 1. Total Appropriation** **\$ -0- \$ 4,091,000**

64.1	<u>Appropriations by Fund</u>		
64.2		<u>2024</u>	<u>2025</u>
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	<u>Appropriations by Fund</u>		
64.9	<u>General</u>	<u>-0-</u>	<u>\$4,091,000</u>
64.10	<u>State Government</u>		
64.11	<u>Special Revenue</u>	<u>-0-</u>	<u>(2,880,000)</u>

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. HEALTH-RELATED BOARDS

64.23	<u>Subdivision 1. Total Appropriation</u>	<u>\$</u>	<u>1,500,000</u>	<u>\$</u>	<u>-0-</u>
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64.24	<u>Appropriations by Fund</u>		
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	<u>Appropriations by Fund</u>		
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.

65.1 (a) \$200,000 in fiscal year 2025 is from the
 65.2 health care access fund to the commissioner
 65.3 of commerce to support planning and
 65.4 development of a public option. The
 65.5 commissioner of commerce may transfer funds
 65.6 from this appropriation to the Department of
 65.7 Human Services or the Board of Directors of
 65.8 MNsure for uses authorized under this
 65.9 paragraph. The commissioner of commerce is
 65.10 exempt from the requirements of Minnesota
 65.11 Statutes, chapter 16C, when entering into a
 65.12 new contract or amending an existing contract
 65.13 to complete the work. This is a onetime
 65.14 appropriation.

65.15 (b) \$315,000 in fiscal year 2025 is from the
 65.16 health care access fund to the Board of
 65.17 Directors of MNsure to support planning and
 65.18 development of a public option. The
 65.19 commissioner of commerce may transfer funds
 65.20 from this appropriation to the Department of
 65.21 Human Services or the Board of Directors of
 65.22 MNsure for uses authorized under this
 65.23 paragraph. The commissioner of commerce is
 65.24 exempt from the requirements of Minnesota
 65.25 Statutes, chapter 16C, when entering into a
 65.26 new contract or amending an existing contract
 65.27 to complete the work. This is a onetime
 65.28 appropriation.

65.29 **Sec. 6. DEPARTMENT OF EDUCATION. \$ 1,822,000 \$ 1,715,000**

65.30 (a) **Summer EBT.** \$1,822,000 in fiscal year
 65.31 2024 and \$1,542,000 in fiscal year 2025 are
 65.32 for administration of the summer electronic
 65.33 benefits transfer program under Public Law
 65.34 117-328. Any balance in fiscal year 2024 does
 65.35 not cancel but is available in fiscal year 2025.

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 the day following final enactment.

66.12 **Sec. 7. COMMISSIONER OF CHILDREN,**
66.13 **YOUTH, AND FAMILIES.** \$ -0- \$ **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 **Sec. 8. OFFICE OF THE FAMILY CHILD**
66.19 **CARE OMBUDSPERSON.** \$ -0- \$ **350,000**

66.20 **Sec. 9. [1031.104] MITIGATION OF CONTAMINATION IN PRIVATE WELLS.**

66.21 The commissioner of health shall establish a program for mitigating nitrate contamination
66.22 in private wells located in Dodge, Fillmore, Goodhue, Houston, Mower, Olmsted, Wabasha,
66.23 and Winona Counties for private wells that are tested at or above the maximum contaminant
66.24 level of 10 mg/L. The program must:

66.25 (1) ensure water samples used to determine if a private well is at or above the
66.26 contamination level of 10 mg/L and eligible for mitigation assistance are received from a
66.27 laboratory accredited under Minnesota Statutes, section 144.98, subdivision 3a, paragraph
66.28 (a), clause (2);

66.29 (2) prioritize mitigation funds driven toward:

66.30 (i) private wells that provide drinking water to infants under one year of age and pregnant
66.31 people; and

66.32 (ii) private wells with the highest level of nitrate contamination; and

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 2025.

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:

67.31 Subd. 5. **Central Office; Health Care**

68.1	Appropriations by Fund		
68.2	General	35,807,000	31,349,000
68.3	Health Care Access	30,668,000	50,168,000

68.4 **(a) Medical assistance and MinnesotaCare**
 68.5 **accessibility improvements.** \$4,000,000 in
 68.6 fiscal year 2024 is from the general fund for
 68.7 interactive voice response upgrades and
 68.8 translation services for medical assistance and
 68.9 MinnesotaCare enrollees with limited English
 68.10 proficiency. This appropriation is available
 68.11 until June 30, 2025.

68.12 **(b) Transforming service delivery.** \$155,000
 68.13 in fiscal year 2024 and \$180,000 in fiscal year
 68.14 2025 are from the general fund for
 68.15 transforming service delivery projects.

68.16 **(c) Improving the Minnesota eligibility**
 68.17 **technology system functionality.** \$1,604,000
 68.18 in fiscal year 2024 and \$711,000 in fiscal year
 68.19 2025 are from the general fund for improving
 68.20 the Minnesota eligibility technology system
 68.21 functionality. The base for this appropriation
 68.22 is \$1,421,000 in fiscal year 2026 and \$0 in
 68.23 fiscal year 2027.

68.24 **(d) Actuarial and economic analyses.**
 68.25 \$2,500,000 is from the health care access fund
 68.26 for actuarial and economic analyses,
 68.27 community engagement, technology, and
 68.28 implementation planning, and to prepare and
 68.29 submit a state innovation waiver under section
 68.30 1332 of the federal Affordable Care Act for a
 68.31 Minnesota public option health care plan. The
 68.32 commissioner is exempt from the requirements
 68.33 of Minnesota Statutes, chapter 16C, when
 68.34 entering into a new contract or amending an
 68.35 existing contract to complete the work. The

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	Subd. 24. Grant Programs; Children and		
69.28	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

70.1 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
70.7 appropriation is available until June 30, 2025.
70.8 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
70.15 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.

70.32 Nothing shall preclude an eligible organization
70.33 receiving funding under this paragraph from

71.1 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
71.5 any eligible organization in the competitive
71.6 processes related to those grant programs
71.7 under 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
71.16 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
71.25 a grant to Youthprise for the homeless youth
71.26 cash stipend pilot project. The grant must be
71.27 used 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
72.3 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 Radies 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	Subd. 29. Grant Programs; Adult Mental Health		
74.21	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

75.1 grant program under Minnesota Statutes,
75.2 section 245.4663.

75.3 **(c) Minnesota State University, Mankato**
75.4 **community behavioral health center.**
75.5 \$750,000 in fiscal year 2024 and \$750,000 in
75.6 fiscal year 2025 are for a grant to the Center
75.7 for Rural Behavioral Health at Minnesota State
75.8 University, Mankato to establish a community
75.9 behavioral health center and training clinic.
75.10 The community behavioral health center must
75.11 provide comprehensive, culturally specific,
75.12 trauma-informed, practice- and
75.13 evidence-based, person- and family-centered
75.14 mental health and substance use disorder
75.15 treatment services in Blue Earth County and
75.16 the surrounding region to individuals of all
75.17 ages, regardless of an individual's ability to
75.18 pay or place of residence. The community
75.19 behavioral health center and training clinic
75.20 must also provide training and workforce
75.21 development opportunities to students enrolled
75.22 in the university's training programs in the
75.23 fields of social work, counseling and student
75.24 personnel, alcohol and drug studies,
75.25 psychology, and nursing. Upon request, the
75.26 commissioner must make information
75.27 regarding the use of this grant funding
75.28 available to the chairs and ranking minority
75.29 members of the legislative committees with
75.30 jurisdiction over behavioral health. This is a
75.31 onetime appropriation and is available until
75.32 June 30, 2027.

75.33 **(d) White Earth Nation; adult mental health**
75.34 **initiative.** \$300,000 in fiscal year 2024 and
75.35 \$300,000 in fiscal year 2025 are for adult

76.1 mental health initiative grants to the White
76.2 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
76.5 are for the mobile crisis grants under
76.6 Minnesota Statutes, ~~section~~ sections 245.4661,
76.7 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.

76.14 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	State Government		
76.19	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**
77.3 **and evaluation.** \$971,000 in fiscal year 2024
77.4 and \$971,000 in fiscal year 2025 are from the
77.5 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
77.8 fiscal year 2025 are for a noncompetitive grant
77.9 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
77.16 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
77.24 under Minnesota Statutes, section 144.0528.
77.25 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
77.31 general fund for public health emergency
77.32 preparedness and response, the sustainability
77.33 of the strategic stockpile, and COVID-19
77.34 pandemic response transition. The base for

78.1 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
78.8 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

79.1 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
79.5 of a statewide provider directory. The general
79.6 fund base for this appropriation is \$855,000
79.7 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
79.32 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.

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

83.1 Statutes, section 144.1501, subdivision 2,
 83.2 paragraph (a), clause (7).

83.3 (2) \$66,000 in fiscal year 2024 and \$66,000
 83.4 in fiscal year 2025 are from the general fund
 83.5 for loan forgiveness under Minnesota Statutes,
 83.6 section 144.1501, for eligible nurses who have
 83.7 agreed to teach in accordance with Minnesota
 83.8 Statutes, section 144.1501, subdivision 2,
 83.9 paragraph (a), clause (3).

83.10 (3) \$545,000 in fiscal year 2024 and \$879,000
 83.11 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 ~~144.7058~~ 144.566; to continue prevention of
 83.16 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
 83.23 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
 83.27 \$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
 83.31 appropriation is \$520,000 in fiscal year 2026
 83.32 and \$0 in fiscal year 2027. Any appropriation
 83.33 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

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
88.2 \$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,
88.6 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
88.9 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
88.21 \$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
88.31 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	State Government		
89.14	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

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

92.1 ~~appropriation and is available until June 30,~~
 92.2 ~~2029.~~

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
 92.26 may be transferred within and between the Department of Human Services and Department
 92.27 of Children, Youth, and Families 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
 92.30 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:

93.2 **Sec. 10. USE OF APPROPRIATION; LOAN FORGIVENESS ADMINISTRATION.**

93.3 The commissioner of health may also use the appropriation in ~~S.F. No. 2995, article 20,~~
 93.4 ~~section 3, subdivision 2, paragraph (w), clause (3), if enacted during 2023 regular legislative~~
 93.5 ~~session,~~ Laws 2023, chapter 70, article 20, section 3, subdivision 2, paragraph (w), clause
 93.6 (3), for administering sections 2 to 5.

93.7 **Sec. 19. REDUCTIONS IN APPROPRIATIONS, CANCELLATIONS, AND**
 93.8 **REAPPROPRIATIONS.**

93.9 Subdivision 1. Central Office Adjustments. (a) The general fund appropriation in Laws
 93.10 2023, chapter 70, article 20, section 2, subdivision 7, for fiscal year 2024 is reduced by
 93.11 \$136,000 and that amount cancels to the general fund.

93.12 (b) \$136,000 in fiscal year 2025 is appropriated from the general fund to the commissioner
 93.13 of human services for behavioral health, deaf and hard of hearing, and housing services
 93.14 administration costs. This appropriation is available until June 30, 2027.

93.15 (c) The general fund appropriation in Laws 2023, chapter 70, article 20, section 2,
 93.16 subdivision 5, paragraph (a), for fiscal year 2024 is reduced by \$3,216,000, and that amount
 93.17 cancels to the general fund.

93.18 (d) \$3,216,000 in fiscal year 2025 is appropriated from the general fund to the
 93.19 commissioner of human services for interactive voice response upgrades and translation
 93.20 services for medical assistance and MinnesotaCare enrollees with limited English proficiency.
 93.21 This appropriation is available until June 30, 2027.

93.22 (e) The TANF appropriations in Laws 2023, chapter 70, article 20, section 3, are reduced
 93.23 by \$1,090,000 for fiscal year 2024 and \$1,194,000 for fiscal year 2025, and those amounts
 93.24 cancel to the TANF fund.

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.

93.28 Subd. 2. Family Assets for Independence in Minnesota. (a) The general fund
 93.29 appropriation in Laws 2023, chapter 70, article 20, section 2, subdivision 22, paragraph (o),
 93.30 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.**

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.

95.1 Sec. 21. **REPEALER.**

95.2 Laws 2023, chapter 70, article 20, section 2, subdivision 31, as amended by Laws 2023,

95.3 chapter 75, section 12, is repealed.

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.

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

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.

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.