

**SENATE  
STATE OF MINNESOTA  
NINETY-THIRD SESSION**

**S.F. No. 5385**

(SENATE AUTHORS: WIKLUND)

DATE	D-PG	OFFICIAL STATUS
04/08/2024	13540	Introduction and first reading Referred to Health and Human Services See HF5237

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 aides, 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.

55.1	Column A	Column B
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	<del>245A.144</del>	<del>142B.47</del>
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.



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

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

61.32	<b><u>Subdivision 1. Total Appropriation.</u></b>	<b><u>\$</u></b>	<b><u>4,967,000</u></b>	<b><u>\$</u></b>	<b><u>27,981,000</u></b>
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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**





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	<b>Subd. 24. Grant Programs; Children and</b>		
69.28	<b>Economic Support Grants</b>	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 Radas 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	<b>Subd. 29. Grant Programs; Adult Mental Health</b>		
74.21	<b>Grants</b>	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.

**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.