

EIGHTIETH DAY

St. Paul, Minnesota, Monday, March 21, 2022

The Senate met at 11:00 a.m. and was called to order by the President.

CALL OF THE SENATE

Senator Benson imposed a call of the Senate. The Sergeant at Arms was instructed to bring in the absent members.

Prayer was offered by the Chaplain, Rev. Phil Shaw.

The members of the Senate gave the pledge of allegiance to the flag of the United States of America.

The roll was called, and the following Senators were present:

Abeler	Draheim	Isaacson	Mathews	Rosen
Anderson	Duckworth	Jasinski	McEwen	Ruud
Bakk	Dziedzic	Johnson	Miller	Senjem
Benson	Eaton	Johnson Stewart	Murphy	Tomassoni
Bigham	Eichorn	Kent	Nelson	Torres Ray
Carlson	Eken	Kiffmeyer	Newman	Utke
Chamberlain	Frentz	Klein	Newton	Weber
Champion	Gazelka	Koran	Osmek	Westrom
Clausen	Goggin	Kunesh	Pappas	Wiger
Coleman	Hawj	Lang	Port	Wiklund
Cwodzinski	Hoffman	Latz	Pratt	
Dahms	Housley	Limmer	Putnam	
Dibble	Howe	López Franzen	Rarick	
Dornink	Ingebrigtsen	Marty	Rest	

Pursuant to Rule 14.1, the President announced the following members intend to vote under Rule 40.7: Eken, Marty, Newman, and Tomassoni.

The President declared a quorum present.

The reading of the Journal was dispensed with and the Journal, as printed and corrected, was approved.

EXECUTIVE AND OFFICIAL COMMUNICATIONS

The following communication was received.

March 9, 2022

The Honorable David J. Osmek
President of the Senate

Dear Senator Osmek:

The following appointments are hereby respectfully submitted to the Senate for confirmation as required by law:

BOARD OF SCHOOL ADMINISTRATORS

Jill Lofald, 6310 Elinor St., Duluth, in the county of Saint Louis, effective March 9, 2022, for a term expiring on January 5, 2026.

Christine Tucci Osorio, 9283 Cambridge Rd., Woodbury, in the county of Washington, effective March 9, 2022, for a term expiring on January 5, 2026.

Scott Wallner, 30095 Lilac Rd., Saint Joseph, in the county of Stearns, effective March 9, 2022, for a term expiring on January 5, 2026

(Referred to the Committee on Education Finance and Policy.)

Sincerely,
Tim Walz, Governor

MESSAGES FROM THE HOUSE

Mr. President:

I have the honor to announce the adoption by the House of the following Senate Concurrent Resolution, herewith returned:

Senate Concurrent Resolution No. 15: A Senate concurrent resolution adopting deadlines for the 2022 regular session.

Patrick D. Murphy, Chief Clerk, House of Representatives

Returned March 17, 2022

Mr. President:

I have the honor to announce the passage by the House of the following Senate File, AS AMENDED by the House, in which amendments the concurrence of the Senate is respectfully requested:

S.F. No. 2876: A bill for an act relating to health and human services; granting the commissioner of human services temporary authority to reinstate waivers and modifications to certain human services programs; granting the commissioner of health temporary emergency authority to grant certain COVID waivers; temporarily modifying the authority of the Emergency Medical Services Regulatory Board; modifying the membership and duties of the task force on eliminating subminimum

wages; exempting certain rate increases from a contingent appropriation requirement; establishing a temporary staffing pool; appropriating money; amending Laws 2021, First Special Session chapter 7, article 16, section 28; article 17, section 14.

Senate File No. 2876 is herewith returned to the Senate.

Patrick D. Murphy, Chief Clerk, House of Representatives

Returned March 17, 2022

CONCURRENCE AND REPASSAGE

Senator Abeler moved that the Senate concur in the amendments by the House to S.F. No. 2876 and that the bill be placed on its repassage as amended. The motion prevailed.

S.F. No. 2876: A bill for an act relating to health and human services; granting the commissioner of human services temporary authority to reinstate waivers and modifications to certain human services programs; granting the commissioner of health temporary emergency authority to grant certain COVID waivers; exempting certain rate increases from a contingent appropriation requirement; establishing a temporary staffing pool; appropriating money; amending Laws 2021, First Special Session chapter 7, article 16, section 28.

S.F. No. 2876 was read the third time, as amended by the House, and placed on its repassage.

The question was taken on the repassage of the bill, as amended.

The roll was called, and there were yeas 65 and nays 1, as follows:

Those who voted in the affirmative were:

Abeler	Dornink	Howe	Limmer	Pratt
Anderson	Draheim	Ingebrigtsen	López Franzen	Putnam
Bakk	Duckworth	Isaacson	Marty	Rarick
Benson	Dziedzic	Jasinski	Mathews	Rest
Bigham	Eaton	Johnson	McEwen	Rosen
Carlson	Eichorn	Johnson Stewart	Miller	Ruud
Chamberlain	Eken	Kent	Murphy	Senjem
Champion	Frentz	Kiffmeyer	Nelson	Tomassoni
Clausen	Gazelka	Klein	Newman	Torres Ray
Coleman	Goggin	Koran	Newton	Weber
Cwodzinski	Hawj	Kunesh	Osmek	Westrom
Dahms	Hoffman	Lang	Pappas	Wiger
Dibble	Housley	Latz	Port	Wiklund

Pursuant to Rule 40, Senator Johnson cast the affirmative vote on behalf of the following Senator: Newman.

Pursuant to Rule 40, Senator Frentz cast the affirmative vote on behalf of the following Senators: Eken and Marty.

Pursuant to Rule 40, Senator Bakk cast the affirmative vote on behalf of the following Senator: Tomassoni.

Those who voted in the negative were:

Utke

So the bill, as amended, was repassed and its title was agreed to.

REPORTS OF COMMITTEES

Senator Miller moved that the Committee Reports at the Desk be now adopted. The motion prevailed.

Senator Utke from the Committee on Health and Human Services Finance and Policy, to which was referred

S.F. No. 3202: A bill for an act relating to health occupations; modifying a requirement for podiatrist licensure; amending Minnesota Statutes 2020, section 153.16, subdivision 1.

Reports the same back with the recommendation that the bill do pass. Report adopted.

Senator Utke from the Committee on Health and Human Services Finance and Policy, to which was referred

S.F. No. 3256: A bill for an act relating to health; modifying requirements for specialty and guest dentist licensure; modifying requirements for display of and procedure for licenses and registration certificates; providing dental therapy licensure by credentials; modifying application and initial fees; providing civil penalties; amending Minnesota Statutes 2020, sections 150A.06, subdivisions 1c, 2c, 6, by adding a subdivision; 150A.09; 150A.091, subdivisions 1, 2, 5, 8, 9, by adding subdivisions; repealing Minnesota Statutes 2020, section 150A.091, subdivisions 3, 15, 17.

Reports the same back with the recommendation that the bill do pass and be re-referred to the Committee on Finance. Report adopted.

Senator Utke from the Committee on Health and Human Services Finance and Policy, to which was referred

S.F. No. 3501: A bill for an act relating to health; adding physician assistants to certain statutes; amending Minnesota Statutes 2020, sections 13.83, subdivision 2; 62A.15, subdivision 4, by adding a subdivision; 62A.3091, subdivision 2; 62D.09, subdivision 1; 62E.06, subdivision 1; 62J.17, subdivision 4a; 62J.48; 62J.823, subdivision 3; 62Q.184, subdivision 1; 62Q.57, subdivision 1; 62Q.73, subdivision 7; 62Q.733, subdivision 3; 62Q.74, subdivision 1; 62S.02, subdivision 5; 62S.08, subdivision 3; 62S.20, subdivision 5b; 62S.21, subdivision 2; 62S.268, subdivision 1; 97B.055, subdivision 3; 97B.106, subdivision 1; 97B.1115; 125A.02, subdivision 1; 144.3345, subdivision 1; 144.3352; 144.34; 144.441, subdivisions 4, 5; 144.442, subdivision 1; 144.4803, subdivisions 1, 4, 10, by adding a subdivision; 144.4806; 144.4807, subdivisions 1, 2, 4, 7; 144.50, subdivision 2; 144.55, subdivisions 2, 6; 144.6501, subdivision 7; 144.651, subdivisions 7, 8, 9, 10, 12, 14, 31, 33; 144.652, subdivision 2; 144.69; 144.7402, subdivision 2; 144.7406, subdivision 2; 144.7407, subdivision 2; 144.7414, subdivision 2; 144.7415, subdivision 2; 144.9502, subdivision 4; 144.966, subdivisions 3, 6; 144A.135; 144A.161, subdivisions 5, 5a, 5e, 5g; 144A.471, subdivision 7; 144A.4791, subdivision 13; 144A.75, subdivisions 3, 6; 144A.752, subdivision 1; 144G.08, by

adding a subdivision; 144G.70, subdivision 7; 145.853, subdivision 5; 145.892, subdivision 3; 145.94, subdivision 2; 145B.13; 145C.02; 145C.05, subdivision 2; 145C.06; 145C.07, subdivision 1; 145C.16; 147A.27, subdivision 1; 148.6438, subdivision 1; 151.01, subdivision 27; 151.19, subdivision 4; 151.21, subdivision 4a; 151.37, subdivision 12; 152.22, subdivision 4; 152.32, subdivision 3; 176.011, subdivision 12a; 245.50, subdivision 5; 245A.143, subdivisions 2, 7, 8; 245A.1435; 245C.02, subdivision 18; 245C.04, subdivision 1; 245D.02, subdivision 11; 245D.22, subdivision 7; 245D.25, subdivision 2; 245F.02, subdivision 13; 245F.09, subdivision 2; 245G.08, subdivisions 2, 3, 5; 245G.21, subdivisions 2, 3; 245H.11; 246.711, subdivision 2; 246.715, subdivision 2; 246.716, subdivision 2; 246.721; 246.722; 251.043, subdivision 1; 253B.02, subdivision 9; 253B.03, subdivisions 4, 6d; 253B.06, subdivision 2; 253B.23, subdivision 4; 254A.08, subdivision 2; 256.9685, subdivisions 1a, 1b, 1c; 256.975, subdivisions 7a, 7b, 11; 256B.055, subdivision 12; 256B.0575, subdivision 1; 256B.0595, subdivision 3; 256B.0622, subdivision 2b; 256B.0625, subdivisions 2, 12, 26, 60a; 256B.0659, subdivisions 2, 4, 8, 27; 256B.0913, subdivision 8; 256B.0949, subdivision 5; 256B.73, subdivision 5; 256R.44; 256R.54, subdivisions 1, 2; 257.63, subdivision 3; 257B.01, subdivisions 3, 9, 10; 257B.06, subdivision 7; 259.24, subdivision 2; 260C.007, subdivision 6; 383A.13, subdivisions 3, 6; 609.341, subdivision 17; Minnesota Statutes 2021 Supplement, sections 62J.23, subdivision 2; 144G.08, subdivision 9; 147.091, subdivision 1; 151.37, subdivision 2; 252A.02, subdivision 12; 252A.04, subdivision 2; 252A.20, subdivision 1; 256B.0625, subdivisions 17, 28a, 49; 256B.0659, subdivision 11; 256B.0947, subdivision 3a; 256B.0949, subdivisions 4, 5a; 256P.01, subdivision 6a; repealing Minnesota Statutes 2020, sections 147A.01, subdivision 23; 151.37, subdivision 2a.

Reports the same back with the recommendation that the bill be amended as follows:

Page 10, line 29, before "nurse" insert "registered" and strike "practitioner"

Page 18, line 32, strike "certified nurse practitioner" and insert "advanced practice registered nurse"

Page 19, line 1, before "nurse" insert "advanced practice registered"

Page 19, line 2, delete "practitioner"

Page 19, line 16, before "physician" insert "licensed"

Page 19, line 17, strike "certified nurse practitioner" and insert "licensed advanced practice registered nurse" and before "chiropractor" insert "licensed"

Page 20, line 2, strike "certified nurse practitioner" and insert "licensed advanced practice registered nurse"

Page 20, line 15, strike "certified nurse practitioner" and insert "licensed advanced practice registered nurse"

Page 67, line 9, after the third comma, insert "physician assistants,"

Page 75, line 11, after the first comma, insert "a" and reinstate the stricken language

Page 75, line 12, delete "or physician assistant,"

Page 75, line 13, strike "an" and insert "a court"

Page 75, line 15, strike "Such" and insert "An" and after "examiner" insert "under section 253B.02, subdivision 7,"

Page 83, line 3, after "Minnesota" insert "by the Board of Medical Practice" and strike "or" and insert a comma and after "physician," insert "or physician assistant," and reinstate the second stricken "or"

Page 83, line 6, delete the new language

Page 83, line 7, delete the new language

Page 121, line 13, strike "certified or"

Page 137, after line 16, insert:

"Sec. 170. REVISOR INSTRUCTION.

The revisor of statutes shall change the term "certified nurse practitioner," "nurse practitioner," or similar terms to "advanced practice registered nurse" wherever the terms appear in Minnesota Statutes and Minnesota Rules. The revisor may make grammatical changes related to the term change."

Renumber the sections in sequence

And when so amended the bill do pass. Amendments adopted. Report adopted.

Senator Utke from the Committee on Health and Human Services Finance and Policy, to which was re-referred

S.F. No. 1257: A bill for an act relating to human services; exempting certain licensed individuals from background studies under chapter 245C; permitting additional authorized fingerprint collection vendors; requiring an authorized on-site fingerprint collection vendor; appropriating money; amending Minnesota Statutes 2020, sections 144.057, subdivision 1; 245C.02, subdivision 4a; 245C.03, subdivision 1; 245C.05, subdivisions 2c, 5; 245C.08, subdivision 1; 245C.32, subdivisions 1a, 1b.

Reports the same back with the recommendation that the bill be amended as follows:

Delete everything after the enacting clause and insert:

"Section 1. Minnesota Statutes 2020, section 144.057, subdivision 1, is amended to read:

Subdivision 1. **Background studies required.** (a) Except as specified in paragraph (b), the commissioner of health shall contract with the commissioner of human services to conduct background studies of:

(1) individuals providing services that have direct contact, as defined under section 245C.02, subdivision 11, with patients and residents in hospitals, boarding care homes, outpatient surgical centers licensed under sections 144.50 to 144.58; nursing homes and home care agencies licensed

under chapter 144A; assisted living facilities and assisted living facilities with dementia care licensed under chapter 144G; and board and lodging establishments that are registered to provide supportive or health supervision services under section 157.17;

(2) individuals specified in section 245C.03, subdivision 1, who perform direct contact services in a nursing home or a home care agency licensed under chapter 144A; an assisted living facility or assisted living facility with dementia care licensed under chapter 144G; or a boarding care home licensed under sections 144.50 to 144.58. If the individual under study resides outside Minnesota, the study must include a check for substantiated findings of maltreatment of adults and children in the individual's state of residence when the information is made available by that state, and must include a check of the National Crime Information Center database;

(3) all other employees in assisted living facilities or assisted living facilities with dementia care licensed under chapter 144G, nursing homes licensed under chapter 144A, and boarding care homes licensed under sections 144.50 to 144.58. A disqualification of an individual in this section shall disqualify the individual from positions allowing direct contact or access to patients or residents receiving services. "Access" means physical access to a client or the client's personal property without continuous, direct supervision as defined in section 245C.02, subdivision 8, when the employee's employment responsibilities do not include providing direct contact services;

(4) individuals employed by a supplemental nursing services agency, as defined under section 144A.70, who are providing services in health care facilities; and

(5) controlling persons of a supplemental nursing services agency, as defined under section 144A.70.

(b) The commissioner of human services is not required to conduct a background study on any individual identified in paragraph (a) if the individual has a valid license issued by a health-related licensing board as defined in section 214.01, subdivision 2, and has completed the criminal background check as required in section 214.075, unless the commissioner of human services has reasonable cause as defined in section 245C.02, subdivision 15, to conduct a background study.

(c) If a facility or program is licensed by the Department of Human Services and subject to the background study provisions of chapter 245C and is also licensed by the Department of Health, the Department of Human Services is solely responsible for the background studies of individuals in the jointly licensed programs.

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

Sec. 2. Minnesota Statutes 2021 Supplement, section 245C.03, subdivision 5a, is amended to read:

Subd. 5a. **Facilities serving children or adults licensed or regulated by the Department of Health.** (a) Except as specified in paragraph (b), the commissioner shall conduct background studies of:

(1) individuals providing services who have direct contact, as defined under section 245C.02, subdivision 11, with patients and residents in hospitals, boarding care homes, outpatient surgical centers licensed under sections 144.50 to 144.58; nursing homes and home care agencies licensed

under chapter 144A; assisted living facilities and assisted living facilities with dementia care licensed under chapter 144G; and board and lodging establishments that are registered to provide supportive or health supervision services under section 157.17;

(2) individuals specified in subdivision 2 who provide direct contact services in a nursing home or a home care agency licensed under chapter 144A; an assisted living facility or assisted living facility with dementia care licensed under chapter 144G; or a boarding care home licensed under sections 144.50 to 144.58. If the individual undergoing a study resides outside of Minnesota, the study must include a check for substantiated findings of maltreatment of adults and children in the individual's state of residence when the state makes the information available;

(3) all other employees in assisted living facilities or assisted living facilities with dementia care licensed under chapter 144G, nursing homes licensed under chapter 144A, and boarding care homes licensed under sections 144.50 to 144.58. A disqualification of an individual in this section shall disqualify the individual from positions allowing direct contact with or access to patients or residents receiving services. "Access" means physical access to a client or the client's personal property without continuous, direct supervision as defined in section 245C.02, subdivision 8, when the employee's employment responsibilities do not include providing direct contact services;

(4) individuals employed by a supplemental nursing services agency, as defined under section 144A.70, who are providing services in health care facilities; and

(5) controlling persons of a supplemental nursing services agency, as defined by section 144A.70.

(b) The commissioner of human services is not required to conduct a background study on any individual identified in paragraph (a) if the individual has a valid license issued by a health-related licensing board as defined in section 214.01, subdivision 2, and has completed the criminal background check as required in section 214.075, unless the commissioner of human services has reasonable cause as defined in section 245C.02, subdivision 15, to conduct a background study.

(c) If a facility or program is licensed by the Department of Human Services and the Department of Health and is subject to the background study provisions of this chapter, the Department of Human Services is solely responsible for the background studies of individuals in the jointly licensed program.

~~(e)~~ (d) The commissioner of health shall review and make decisions regarding reconsideration requests, including whether to grant variances, according to the procedures and criteria in this chapter. The commissioner of health shall inform the requesting individual and the Department of Human Services of the commissioner of health's decision regarding the reconsideration. The commissioner of health's decision to grant or deny a reconsideration of a disqualification is a final administrative agency action.

Sec. 3. Minnesota Statutes 2020, section 245C.31, subdivision 1, is amended to read:

Subdivision 1. **Board determines disciplinary or corrective action.** ~~(a) When the subject of a background study is regulated by a health-related licensing board as defined in chapter 214, and the commissioner determines that the regulated individual is responsible for substantiated maltreatment under section 626.557 or chapter 260E, instead of the commissioner making a decision regarding disqualification, the board shall make a determination whether to impose disciplinary or~~

~~corrective action under chapter 214~~ The commissioner shall inform a health-related licensing board as defined in section 214.01, subdivision 2, if the commissioner determines that an individual who is licensed by the health-related licensing board is responsible for substantiated maltreatment under section 626.557 or chapter 260F. The commissioner shall notify the health-related licensing board in accordance with subdivision 2. The health-related licensing board shall make a determination whether to impose disciplinary or corrective action under chapter 214.

(b) This section does not apply to a background study of an individual regulated by a health-related licensing board if the individual's study is related to child foster care, adult foster care, or family child care licensure.

Sec. 4. Minnesota Statutes 2020, section 245C.31, subdivision 2, is amended to read:

Subd. 2. **Commissioner's notice to board.** (a) The commissioner shall notify ~~the~~ a health-related licensing board:

(1) ~~upon completion of a background study that produces~~ of a record showing that the individual licensed by the board was determined to have been responsible for substantiated maltreatment;

(2) upon the commissioner's completion of an investigation that determined ~~the~~ an individual licensed by the board was responsible for substantiated maltreatment; or

(3) upon receipt from another agency of a finding of substantiated maltreatment for which ~~the~~ an individual licensed by the board was responsible.

(b) The commissioner's notice to the health-related licensing board shall indicate whether the commissioner would have disqualified the individual for the substantiated maltreatment if the individual were not regulated by the board.

(c) The commissioner shall concurrently send the notice under this subdivision to the individual who is the subject of the ~~background study~~ notification.

Sec. 5. Minnesota Statutes 2020, section 245C.31, is amended by adding a subdivision to read:

Subd. 3a. **Data sharing agreements with health-related licensing boards.** The commissioner and each health-related licensing board shall enter into a data sharing agreement in order for each board to provide the commissioner with a quarterly roster list of individuals licensed by the board. The list must include for each licensed individual the individual's name, license number, and the status of the individual's license."

Amend the title as follows:

Page 1, line 3, delete everything after the semicolon

Page 1, delete line 4

Page 1, line 5, delete "money;"

Amend the title numbers accordingly

And when so amended the bill do pass and be re-referred to the Committee on Finance. Amendments adopted. Report adopted.

Senator Ingebrigtsen from the Committee on Environment and Natural Resources Finance, to which was referred

S.F. No. 3751: A bill for an act relating to natural resources; appropriating money for local road wetland replacement program.

Reports the same back with the recommendation that the bill do pass and be re-referred to the Committee on Finance. Report adopted.

Senator Limmer from the Committee on Judiciary and Public Safety Finance and Policy, to which was referred

S.F. No. 3487: A bill for an act relating to public safety; establishing the crime of organized retail theft; providing for the release of certain financial account information to law enforcement; amending certain burglary crimes following trespass notice; establishing a time period for a search warrant on financial institutions; amending Minnesota Statutes 2020, sections 13A.02, subdivisions 1, 2; 609.52, subdivision 3; 609.527, subdivision 1, by adding a subdivision; 609.582, subdivisions 3, 4; 626.15; proposing coding for new law in Minnesota Statutes, chapter 609.

Reports the same back with the recommendation that the bill do pass and be re-referred to the Committee on Civil Law and Data Practices Policy. Report adopted.

Senator Chamberlain from the Committee on Education Finance and Policy, to which was referred

S.F. No. 3052: A bill for an act relating to education finance; requiring school districts to provide access to menstrual products for students; increasing operating capital revenue to fund school district purchases of menstrual products; appropriating money; amending Minnesota Statutes 2020, sections 121A.21; 126C.10, subdivisions 13, 14.

Reports the same back with the recommendation that the bill be amended as follows:

Page 2, after line 19, insert:

"Sec. 3. Minnesota Statutes 2020, section 126C.10, subdivision 13a, is amended to read:

Subd. 13a. **Operating capital levy.** To obtain operating capital revenue, a district may levy an amount not more than the product of its operating capital revenue for the fiscal year times the lesser of one or the ratio of its adjusted net tax capacity per adjusted pupil unit to the operating capital equalizing factor. The operating capital equalizing factor equals ~~\$23,902 for fiscal year 2020, \$23,885 for fiscal year 2021, and \$22,912 for fiscal year 2022 and~~ \$23,145 for fiscal year 2023 and later.

EFFECTIVE DATE. This section is effective for revenue for fiscal year 2023 and later."

Renumber the sections in sequence

Amend the title numbers accordingly

And when so amended the bill do pass and be re-referred to the Committee on Finance. Amendments adopted. Report adopted.

Senator Chamberlain from the Committee on Education Finance and Policy, to which was referred

S.F. No. 3956: A bill for an act relating to education; modifying lead testing and remediation requirements in schools; modifying long-term facilities revenue; requiring a report; appropriating money; amending Minnesota Statutes 2020, sections 121A.335; 123B.595, subdivisions 1, 2, 7, 8, 8a, 9.

Reports the same back with the recommendation that the bill do pass and be re-referred to the Committee on Health and Human Services Finance and Policy. Report adopted.

Senator Chamberlain from the Committee on Education Finance and Policy, to which was referred

S.F. No. 495: A bill for an act relating to education; prohibiting construction of schools near former landfills; requiring notice by schools located near former landfills; amending Minnesota Statutes 2020, section 123B.51, by adding a subdivision.

Reports the same back with the recommendation that the bill be amended as follows:

Page 1, line 10, delete "2021-2022" and insert "2022-2023"

Page 2, line 31, delete "2021" and insert "2022"

And when so amended the bill do pass and be re-referred to the Committee on Environment and Natural Resources Finance. Amendments adopted. Report adopted.

Senator Chamberlain from the Committee on Education Finance and Policy, to which was referred

S.F. No. 3745: A bill for an act relating to education; allowing a school board and nonpublic school to enter into an agreement for nonpublic school student transportation; amending Minnesota Statutes 2020, section 123B.86, subdivision 3.

Reports the same back with the recommendation that the bill do pass. Report adopted.

Senator Tomassoni from the Committee on Higher Education Finance and Policy, to which was referred

S.F. No. 3818: A bill for an act relating to education; establishing a youth skill path program for employment-based training; proposing coding for new law in Minnesota Statutes, chapter 124D.

Reports the same back with the recommendation that the bill be amended as follows:

Delete everything after the enacting clause and insert:

"Section 1. [124D.351] SKILLS PATH PROGRAM.

Subdivision 1. **Purpose.** The purpose of the skills path program is to provide students with clear pathways from high school to careers in skilled work and the trades and create opportunities for students to enter postsecondary programs and employment-based training in high school.

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

(b) "Career and technical education dual credit program" means a postsecondary career or technical education course under section 124D.09, subdivision 5; a secondary course that has a current articulation agreement for postsecondary credit hours with a participating institution; or a youth skills training program that awards postsecondary credit to students.

(c) "Eligible student" means a student who is in grade 11 or 12, or is age 16 or older, and is enrolled in a public school, an American Indian-controlled tribal contract or grant school eligible for aid under section 124D.83, a nonpublic school, is a homeschool student, is in an approved adult high school diploma program, or has obtained a high school equivalency diploma from the commissioner of education.

(d) "Employment-based training" means a registered apprenticeship or apprenticeship readiness program, a dual-training program, a workforce training program at an opportunities industrialization center, or other work-based learning programs in which the student has paid employment.

Subd. 3. **Eligible institutions.** (a) A public school, an American Indian-controlled tribal contract or grant school eligible for aid under section 124D.83, or nonpublic school is eligible to apply for a skills path program designation.

(b) A Minnesota state college or university, an institution licensed or registered as a postsecondary institution by the Office of Higher Education, or an institution exempt from the provisions of sections 136A.61 to 136A.71, or 136A.822 to 136A.834, as approved by the Office of Higher Education may partner with an institution in paragraph (a) to provide a postsecondary options enrollment career and technical education course for eligible students in a skills path program.

(c) An eligible institution may work in partnership with one or more postsecondary programs designed in paragraph (b) to create a two-year program that incorporates secondary and postsecondary credit along with employment-based training to award an associate degree in skilled occupations.

Subd. 4. **Skills path programs.** The commissioner of higher education must develop an application in consultation with the commissioners of education and labor and industry for programs that provide students with clear pathways from high school to careers in skilled work and the trades to be designated as skills path programs. Skills path programs must include career connected learning options, career and technical education dual credit program options, and employment-based training opportunities to be eligible for this designation. Applicants must demonstrate how skills path programs will be marketed to students and what other local partners and employers are involved in developing career pathway opportunities. Skills path programs may be identified in skilled

occupations and the trades, including manufacturing, construction, health care services, information technology, agriculture, transportation, childcare, law enforcement, and other related industries.

Subd. 5. **Interaction with education finance.** For the purpose of computing state aids for the school district, students participating in the skills path programs under this section shall be counted in the average daily membership of the school district.

Subd. 6. **Academic credit.** A school district may grant academic credit for skills path programs under this section in accordance with local requirements.

Subd. 7. **Grant applications.** (a) The commissioner of higher education shall award grants up to \$50,000 per grant to eight eligible institutions annually for skills path programs that align career and technical education dual credit program options with employment-based training opportunities. Applications must demonstrate how grant funding will provide students with clear pathways from high school to postsecondary training that lead to careers in skilled work and the trades.

(b) An eligible institution awarded a grant under this section must use the grant award for any of the following implementation and coordination activities:

(1) marketing efforts to students about skills path program opportunities;

(2) coordinating academic, vocational, and occupational learning, school-based and work-based learning, and secondary and postsecondary education for participants in the program; and

(3) any other implementation or coordination activity that the commissioner may direct or permit the eligible institution to perform.

(c) Grant awards may not be used to pay the wages of a student directly or indirectly.

(d) The following information must be included in the grant application:

(1) the identity of each public school, American Indian-controlled tribal contract or grant school eligible for aid under section 124D.83, nonpublic school, homeschool, or adult basic education program that is a participant in the skills path program;

(2) the identity of each registered apprenticeship program or apprenticeship readiness program, dual-training program, workforce training program at an opportunities industrialization center, or other work-based learning program in which the student has the opportunity for paid employment that is a participant in the skills path program;

(3) the identity of each postsecondary institution, intermediate school district, public agency, nonprofit organization, union, career and technical education consortium, or workforce development authority that is a participant in the skills path program;

(4) the identity of any employers participating in the skills path program;

(5) a description of any career connected learning components;

(6) a description of the career and technical education dual credit program options;

(7) a description of any postsecondary education components in the skills path program;

(8) a description of employment-based training opportunities; and

(9) applicable career planning information.

Subd. 8. **Skills path scholarships.** Beginning with the 2023-2024 academic year, an eligible student enrolled in a skills path program may apply to the Office of Higher Education on a form prescribed by the commissioner to receive reimbursement of tuition, books, required tools, and other approved expenses required for participation in the program. Financial aid from other state student aid programs must be applied prior to the skills path scholarship.

Sec. 2. SKILLS PATH PROGRAM; APPROPRIATION.

(a) \$400,000 is appropriated in fiscal year 2023 from the general fund to the commissioner of higher education to administer skills path grants under Minnesota Statutes, section 124D.351. The base for fiscal years 2024 and later is \$400,000.

(b) \$100,000 is appropriated in fiscal year 2023 from the general fund to the commissioner of higher education to administer skills path scholarships under Minnesota Statutes, section 124D.351, subdivision 8. The base for fiscal years 2024 and later is \$100,000."

And when so amended the bill do pass and be re-referred to the Committee on Education Finance and Policy. Amendments adopted. Report adopted.

Senator Mathews from the Committee on Civil Law and Data Practices Policy, to which was referred

H.F. No. 3249: A bill for an act relating to state government; modifying various provisions governing or administered by the secretary of state; amending Minnesota Statutes 2020, sections 5B.02; 5B.05; 5B.10, subdivision 1; 13.045, subdivisions 1, 2, 3, 4a.

Reports the same back with the recommendation that the bill do pass. Report adopted.

Senator Draheim from the Committee on Housing Finance and Policy, to which was referred

S.F. No. 3897: A bill for an act relating to housing; establishing a first-generation homebuyers down payment assistance fund under the administration of a central community development financial institution; requiring a report; appropriating money.

Reports the same back with the recommendation that the bill be re-referred to the Committee on Civil Law and Data Practices Policy without recommendation. Report adopted.

Senator Draheim from the Committee on Housing Finance and Policy, to which was referred

S.F. No. 3259: A bill for an act relating to local and metropolitan government; modifying provisions related to local land use and building permits for the Legalizing Affordable Housing Act;

amending Minnesota Statutes 2020, sections 15.99, subdivisions 1, 2; 326B.145; 326B.153, by adding a subdivision; 394.24, subdivision 1; 462.355, subdivision 4; 462.357, subdivisions 1, 2, by adding a subdivision; 462.358, subdivisions 2a, 2b; 473.254, subdivision 2; 473.517, subdivision 3; 473.858, subdivision 1; 473.859, subdivision 2; 473.865, subdivisions 2, 3; proposing coding for new law in Minnesota Statutes, chapters 394; 435; 462; 513; proposing coding for new law as Minnesota Statutes, chapter 462E; repealing Laws 2017, First Special Session chapter 3, article 3, section 126; Laws 2018, chapter 214, article 2, section 46.

Reports the same back with the recommendation that the bill be amended as follows:

Delete everything after the enacting clause and insert:

"ARTICLE 1

PLANNING AND ZONING

Section 1. Minnesota Statutes 2020, section 462.352, subdivision 5, is amended to read:

Subd. 5. **Comprehensive municipal plan.** (a) "Comprehensive municipal plan" means a compilation of policy statements, goals, standards, and maps for guiding the physical, social and economic development, both private and public, of the municipality and its environs, and may include, but is not limited to, the following: statements of policies, goals, standards, a land use plan, including proposed densities for development, a community facilities plan, a transportation plan, and recommendations for plan execution. A comprehensive plan represents the planning agency's recommendations for the future development of the community.

(b) As part of the comprehensive municipal plan, municipalities are encouraged to enact public policy to facilitate the development of unsubsidized affordable housing. These policies may include but are not limited to the municipal plan authorizing smaller lot sizes for single-family homes, allowing the construction of two-family homes through townhouses on lots that would otherwise be zoned exclusively for single-family homes, and allowing for mixed-use development.

ARTICLE 2

LIMITING REGULATIONS ON RESIDENTIAL DEVELOPMENT

Section 1. Minnesota Statutes 2020, section 326B.106, is amended by adding a subdivision to read:

Subd. 1a. **Payback requirement; residential energy code.** Notwithstanding subdivision 1, paragraph (d), the commissioner may not adopt a new residential energy code or amendments to an existing residential energy code unless the commissioner has determined that any increased cost to residential construction or remodeling per unit due to implementation of the proposed changes will be offset within five years by savings resulting from the change. This subdivision does not apply to residential energy code changes necessary to protect the immediate health, safety, and welfare of the public.

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

Sec. 2. Minnesota Statutes 2020, section 462.357, subdivision 1, is amended to read:

Subdivision 1. **Authority for zoning.** For the purpose of promoting the public health, safety, morals, and general welfare, a municipality may by ordinance regulate on the earth's surface, in the air space above the surface, and in subsurface areas, the location, height, width, bulk, type of foundation, number of stories, size of buildings and other structures, the percentage of lot which may be occupied, the size of yards and other open spaces, the density and distribution of population, the uses of buildings and structures for trade, industry, residence, recreation, public activities, or other purposes, and the uses of land for trade, industry, residence, recreation, agriculture, forestry, soil conservation, water supply conservation, conservation of shorelands, as defined in sections 103F.201 to 103F.221, access to direct sunlight for solar energy systems as defined in section 216C.06, flood control or other purposes, and may establish standards and procedures regulating such uses. To accomplish these purposes, official controls may include provision for purchase of development rights by the governing body in the form of conservation easements under chapter 84C in areas where the governing body considers preservation desirable and the transfer of development rights from those areas to areas the governing body considers more appropriate for development. No regulation may prohibit earth sheltered construction as defined in section 216C.06, subdivision 14, relocated residential buildings, ~~or~~ manufactured homes built in conformance with sections 327.31 to 327.35, or modular buildings for residential use built in conformance with Minnesota Rules, chapter 1361, that comply with all other zoning ordinances promulgated pursuant to this section. The regulations may divide the surface, above surface, and subsurface areas of the municipality into districts or zones of suitable numbers, shape, and area. The regulations shall be uniform for each class or kind of buildings, structures, or land and for each class or kind of use throughout such district, but the regulations in one district may differ from those in other districts. The ordinance embodying these regulations shall be known as the zoning ordinance and shall consist of text and maps. A city may by ordinance extend the application of its zoning regulations to unincorporated territory located within two miles of its limits in any direction, but not in a county or town which has adopted zoning regulations; provided that where two or more noncontiguous municipalities have boundaries less than four miles apart, each is authorized to control the zoning of land on its side of a line equidistant between the two noncontiguous municipalities unless a town or county in the affected area has adopted zoning regulations. Any city may thereafter enforce such regulations in the area to the same extent as if such property were situated within its corporate limits, until the county or town board adopts a comprehensive zoning regulation which includes the area.

Sec. 3. **[462.3575] LIMITING REGULATIONS ON RESIDENTIAL DEVELOPMENT.**

Subdivision 1. **Application.** This section applies to official controls adopted under sections 462.357, 462.358, and 462.3595.

Subd. 2. **Planned unit development.** (a) A municipality shall not require a planned unit development agreement in lieu of a proposed residential development if the proposed residential development complies with the existing city zoning ordinances or subdivision regulation, or qualifies as a conditional use.

(b) A planned unit development agreement must be made available to the public by posting the agreement on the website of the municipality at least seven days prior to the governing body's review of the agreement. If the municipality does not have a website, a copy of the planned unit development agreement must be available for review at the city hall building of the municipality. If the agreement

is approved by the governing body, the agreement cannot be modified unless all parties to the agreement concur.

Subd. 3. **Limitation on aesthetic mandates.** A municipality shall not condition approval of a building permit, subdivision development, or planned unit development on the use of specific materials, design, or other aesthetic conditions that are not required by the State Building Code under chapter 326B.

Subd. 4. **Limitation on square footage.** A municipality shall not impose a minimum square footage requirement.

Subd. 5. **Exception.** This section shall not apply to a proposed residential development that is to be developed by the municipality itself.

Sec. 4. **RESIDENTIAL BUILDING CODE.**

Notwithstanding Minnesota Statutes, section 326B.106, subdivision 1, paragraph (c), the commissioner of labor and industry may not adopt a new residential building code or amendments to the existing residential building code prior to January 1, 2026, unless approved by law. This section shall not apply to building code changes necessary to protect the immediate health, safety, and welfare of the public.

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

ARTICLE 3

MUNICIPAL DEDICATION FEES

Section 1. Minnesota Statutes 2020, section 462.358, subdivision 2b, is amended to read:

Subd. 2b. **Dedication.** (a) The regulations may require that a reasonable portion of the buildable land, as defined by municipal ordinance, of any proposed subdivision be dedicated to the public or preserved for public use as streets, roads, sewers, electric, gas, and water facilities, storm water drainage and holding areas or ponds and similar utilities and improvements, parks, recreational facilities as defined in section 471.191, playgrounds, trails, wetlands, or open space. The requirement must be imposed by ordinance or under the procedures established in section 462.353, subdivision 4a.

(b) If a municipality adopts the ordinance or proceeds under section 462.353, subdivision 4a, as required by paragraph (a), the municipality must adopt a capital improvement budget and have a parks and open space plan or have a parks, trails, and open space component in its comprehensive plan subject to the terms and conditions in this paragraph and paragraphs (c) to (i).

(c) The municipality may choose to accept a cash fee as set by ordinance from the applicant for some or all of the new lots created in the subdivision, based on the average fair market value of the unplatted land for which park fees have not already been paid that is, no later than at the time of final approval or under the city's adopted comprehensive plan, to be served by municipal sanitary sewer and water service or community septic and private well as authorized by state law. For purposes of redevelopment on developed land, the municipality may choose to accept a cash fee based on

fair market value of the land no later than the time of final approval. "Fair market value" means the value of the land as determined by the municipality annually based on tax valuation or other relevant data. If the municipality's calculation of valuation is objected to by the applicant, then the value shall be as negotiated between the municipality and the applicant, or based on the market value as determined by the municipality based on an independent appraisal of land in a same or similar land use category.

(d) In establishing the portion to be dedicated or preserved or the cash fee, the regulations shall give due consideration to the open space, recreational, or common areas and facilities open to the public that the applicant proposes to reserve for the subdivision.

(e) The municipality must reasonably determine that it will need to acquire that portion of land for the purposes stated in this subdivision as a result of approval of the subdivision.

(f) Cash payments received must be placed by the municipality in a special fund to be used only for the purposes for which the money was obtained. The municipality must maintain records detailing the purposes for which the money was obtained and the manner in which it was spent to further those purposes. The records must be readily available to the applicant upon request.

(g) Cash payments received must be used only for the acquisition and development or improvement of parks, recreational facilities, playgrounds, trails, wetlands, or open space based on the approved park systems plan. Cash payments must not be used for ongoing operation or maintenance of parks, recreational facilities, playgrounds, trails, wetlands, or open space. The municipality must maintain records demonstrating the manner in which each cash payment was used.

(h) The municipality must not deny the approval of a subdivision based solely on an inadequate supply of parks, open spaces, trails, or recreational facilities within the municipality.

(i) Previously subdivided property from which a park dedication has been received, being resubdivided with the same number of lots, is exempt from park dedication requirements. If, as a result of resubdividing the property, the number of lots is increased, then the park dedication or per-lot cash fee must apply only to the net increase of lots.

ARTICLE 4

BUILDING PERMIT DEADLINES

Section 1. Minnesota Statutes 2020, section 15.99, subdivision 1, is amended to read:

Subdivision 1. **Definitions.** (a) For purposes of this section, the following terms shall have the meanings given.

(b) "Agency" means a department, agency, board, commission, or other group in the executive branch of state government; a statutory or home rule charter city, county, town, or school district; any metropolitan agency or regional entity; and any other political subdivision of the state.

(c) "Request" means a written application for a building permit or a written application related to zoning, septic systems, watershed district review, soil and water conservation district review, or

the expansion of the metropolitan urban service area, for a permit, license, or other governmental approval of an action. A request must be submitted in writing to the agency on an application form provided by the agency, if one exists. The agency may reject as incomplete a request not on a form of the agency if the request does not include information required by the agency. A request not on a form of the agency must clearly identify on the first page the specific permit, license, or other governmental approval being sought. No request shall be deemed made if not in compliance with this paragraph.

(d) "Applicant" means a person submitting a request under this section. An applicant may designate a person to act on the applicant's behalf regarding a request under this section and any action taken by or notice given to the applicant's designee related to the request shall be deemed taken by or given to the applicant.

Sec. 2. Minnesota Statutes 2020, section 15.99, subdivision 2, is amended to read:

Subd. 2. **Deadline for response.** (a) Except as otherwise provided in this section, section 462.358, subdivision 3b, or 473.175, or chapter 505, and notwithstanding any other law to the contrary, an agency must approve or deny within 60 days a written request for a building permit or a written request relating to zoning, septic systems, watershed district review, soil and water conservation district review, or expansion of the metropolitan urban service area for a permit, license, or other governmental approval of an action. Failure of an agency to deny a request within 60 days is approval of the request. If an agency denies the request, it must state in writing the reasons for the denial at the time that it denies the request.

(b) When a vote on a resolution or properly made motion to approve a request fails for any reason, the failure shall constitute a denial of the request provided that those voting against the motion state on the record the reasons why they oppose the request. A denial of a request because of a failure to approve a resolution or motion does not preclude an immediate submission of a same or similar request.

(c) Except as provided in paragraph (b), if an agency, other than a multimember governing body, denies the request, it must state in writing the reasons for the denial at the time that it denies the request. If a multimember governing body denies a request, it must state the reasons for denial on the record and provide the applicant in writing a statement of the reasons for the denial. If the written statement is not adopted at the same time as the denial, it must be adopted at the next meeting following the denial of the request but before the expiration of the time allowed for making a decision under this section. The written statement must be consistent with the reasons stated in the record at the time of the denial. The written statement must be provided to the applicant upon adoption.

ARTICLE 5

BUILDING PERMIT FEES

Section 1. Minnesota Statutes 2020, section 326B.153, is amended by adding a subdivision to read:

Subd. 5. Valuation. The commissioner shall establish a cost per square foot valuation of new one- and two-family, townhouse, and accessory utility buildings for the purpose of setting building permit fees by municipalities."

Amend the title numbers accordingly

And when so amended the bill do pass and be re-referred to the Committee on Local Government Policy. Amendments adopted. Report adopted.

Senator Newman from the Committee on Transportation Finance and Policy, to which was re-referred

S.F. No. 2647: A bill for an act relating to transportation; amending membership of the local road improvement program advisory committee; amending Minnesota Statutes 2020, section 174.52, subdivision 3.

Reports the same back with the recommendation that the bill do pass. Report adopted.

Senator Abeler from the Committee on Human Services Reform Finance and Policy, to which was referred

S.F. No. 4013: A bill for an act relating to state government; modifying provisions governing child care assistance, economic assistance, behavioral health, health care, and health insurance access; making forecast adjustments; requiring reports; transferring money; making technical and conforming changes; allocating funds for a specific purpose; establishing certain grants; appropriating money; amending Minnesota Statutes 2020, sections 62N.25, subdivision 5; 62Q.1055; 62Q.47; 119B.011, subdivisions 2, 5, 13, 15, 19b; 119B.02, subdivisions 1, 2; 119B.025, subdivision 4; 119B.03, subdivisions 3, 9, 10; 119B.035, subdivisions 1, 2, 4, 5; 119B.08, subdivision 3; 119B.11, subdivision 1; 119B.15; 119B.19, subdivision 7; 119B.24; 169A.70, subdivisions 3, 4; 245.4889, by adding a subdivision; 245.713, subdivision 2; 245F.03; 245G.05, subdivision 2; 245G.22, subdivision 2; 254A.19, subdivisions 1, 3, by adding subdivisions; 254B.01, subdivision 5, by adding subdivisions; 254B.03, subdivisions 1, 5; 254B.04, subdivision 2a, by adding subdivisions; 256.017, subdivision 9; 256.042, subdivisions 1, 2, 5; 256B.055, subdivision 17; 256B.056, subdivision 7; 256B.0625, subdivision 28b; 256B.0941, by adding a subdivision; 256B.0946, subdivision 7; 256B.0949, subdivision 15; 256D.03, by adding a subdivision; 256D.0516, subdivision 2; 256D.06, subdivisions 1, 2, 5; 256D.09, subdivision 2a; 256E.35, subdivisions 1, 2, 4a, 6; 256I.03, subdivision 13; 256I.06, subdivisions 6, 10; 256I.09; 256J.08, subdivisions 71, 79; 256J.21, subdivision 4; 256J.33, subdivision 2; 256J.37, subdivisions 3, 3a; 256J.95, subdivision 19; 256K.45, subdivision 3; 256L.04, subdivisions 1c, 7a, 10, by adding a subdivision; 256L.07, subdivision 1; 256L.12, subdivision 8; 256P.01, by adding a subdivision; 256P.02, by adding a subdivision; 256P.07, subdivisions 1, 2, 3, 4, 6, 7, by adding subdivisions; 256P.08, subdivision 2; 260B.157, subdivisions 1, 3; 260E.20, subdivision 1; 299A.299, subdivision 1; Minnesota Statutes 2021 Supplement, sections 119B.13, subdivision 1; 245.4889, subdivision 1; 254A.03, subdivision 3; 254A.19, subdivision 4; 254B.03, subdivision 2; 254B.04, subdivision 1; 254B.05, subdivisions 4, 5; 256.042, subdivision 4; 256B.0946, subdivisions 1, 1a, 2, 3, 4, 6; 256I.06, subdivision 8; 256J.21, subdivision 3; 256J.33, subdivision 1; 256L.03, subdivision 2; 256L.07, subdivision 2; 256L.15, subdivision 2; 256P.02, subdivisions 1a, 2; 256P.04, subdivisions 4, 8; 256P.06, subdivision 3; 260C.157, subdivision 3; Laws 2021, First Special Session chapter 7, article 17, sections 1, subdivision 2; 11; 12; proposing

coding for new law in Minnesota Statutes, chapters 119B; 245; 256P; repealing Minnesota Statutes 2020, sections 119B.03, subdivisions 1, 2, 4, 5, 6a, 6b, 8; 169A.70, subdivision 6; 245G.22, subdivision 19; 254A.02, subdivision 8a; 254A.16, subdivision 6; 254A.19, subdivisions 1a, 2; 254B.04, subdivisions 2b, 2c; 254B.041, subdivision 2; 256J.08, subdivisions 10, 61, 62, 81, 83; 256J.30, subdivisions 5, 7; 256J.33, subdivisions 3, 5; 256J.34, subdivisions 1, 2, 3, 4; 256J.37, subdivision 10; Minnesota Statutes 2021 Supplement, sections 119B.03, subdivisions 4a, 6; 254A.19, subdivision 5; 256J.08, subdivision 53; 256J.30, subdivision 8; 256J.33, subdivision 4; Minnesota Rules, parts 9530.7000, subparts 1, 2, 5, 6, 7, 8, 9, 10, 11, 13, 14, 15, 17a, 19, 20, 21; 9530.7005; 9530.7010; 9530.7012; 9530.7015, subparts 1, 2a, 4, 5, 6; 9530.7020, subparts 1, 1a, 2; 9530.7021; 9530.7022, subpart 1; 9530.7025; 9530.7030, subpart 1.

Reports the same back with the recommendation that the bill be amended as follows:

Page 2, line 18, delete the second comma and insert a period and strike "who are" and insert "Applicants must be"

Page 2, after line 20, insert:

"EFFECTIVE DATE. This section is effective August 7, 2023."

Page 2, after line 29, insert:

"EFFECTIVE DATE. This section is effective August 7, 2023."

Page 3, after line 21, insert:

"EFFECTIVE DATE. This section is effective August 7, 2023."

Page 3, after line 29, insert:

"EFFECTIVE DATE. This section is effective July 10, 2023."

Page 4, after line 18, insert:

"EFFECTIVE DATE. This section is effective July 10, 2023."

Page 4, after line 34, insert:

"EFFECTIVE DATE. This section is effective July 10, 2023."

Page 5, after line 7, insert:

"EFFECTIVE DATE. This section is effective July 10, 2023."

Page 5, after line 32, insert:

"EFFECTIVE DATE. This section is effective July 10, 2023."

Page 6, after line 6, insert:

"EFFECTIVE DATE. This section is effective July 10, 2023."

Page 6, after line 18, insert:

"EFFECTIVE DATE. This section is effective July 10, 2023."

Page 6, after line 27, insert:

"EFFECTIVE DATE. This section is effective July 10, 2023."

Page 7, after line 9, insert:

"EFFECTIVE DATE. This section is effective July 10, 2023."

Page 7, after line 15, insert:

"EFFECTIVE DATE. This section is effective July 10, 2023."

Page 8, after line 17, insert:

"EFFECTIVE DATE. This section is effective July 10, 2023."

Page 9, after line 4, insert:

"EFFECTIVE DATE. This section is effective July 10, 2023."

Page 11, after line 7, insert:

"EFFECTIVE DATE. This section is effective July 10, 2023."

Page 12, after line 16, insert:

"EFFECTIVE DATE. This section is effective July 10, 2023."

Page 14, after line 6, insert:

"Sec. 23. DIRECTION TO THE COMMISSIONER OF HUMAN SERVICES; CHILD CARE AND DEVELOPMENT FUND ALLOCATION."

The commissioner of human services shall allocate \$75,364,000 in fiscal year 2023 from the child care and development fund for rate and registration fee increases under Minnesota Statutes, section 119B.13, subdivision 1, paragraphs (a) and (j). This is a onetime allocation."

Page 14, after line 11, insert:

"EFFECTIVE DATE. This section is effective July 10, 2023."

Page 14, before line 12, insert:

"ARTICLE 2

CHILD WELFARE

Section 1. Minnesota Statutes 2020, section 260C.451, subdivision 8, is amended to read:

Subd. 8. **Notice of termination of foster care.** When a child in foster care between the ages of 18 and 21 ceases to meet one of the eligibility criteria of subdivision 3a, the responsible social services agency shall give the child written notice that foster care will terminate 30 days from the date the notice is sent. The child or the child's guardian ad litem may file a motion asking the court to review the agency's determination within 15 days of receiving the notice. The agency shall work with the child to prepare for the child's transition out of foster care and provide the personalized transition plan required to be developed under section 260C.452, subdivision 4, to the court if the motion is filed. The child shall not be discharged from foster care until the motion is heard. ~~The agency shall work with the child to transition out of foster care as required under section 260C.203, paragraph (d), clause (2).~~ The written notice of termination of benefits shall be on a form prescribed by the commissioner and shall also give notice of the right to have the agency's determination reviewed by the court in the proceeding where the court conducts the reviews required under section 260C.203, 260C.317, or 260C.515, subdivision 5 or 6. A copy of the termination notice shall be sent to the child and the child's attorney, if any, the foster care provider, the child's guardian ad litem, and the court. The agency is not responsible for paying foster care benefits for any period of time after the child actually leaves foster care.

Sec. 2. Minnesota Statutes 2020, section 260C.451, is amended by adding a subdivision to read:

Subd. 8a. **Transition planning.** For a youth who will be discharged from foster care at 18 years of age or older, the responsible social services agency must develop a personalized transition plan as directed by the youth during the 180-day period immediately prior to the expected date of discharge according to section 260C.452, subdivision 4. The personalized transition plan shall include the support beyond 21 program under subdivision 8b for eligible youth. This plan may be shared with a contracted agency providing case management services under section 260C.452 with the youth's consent.

Sec. 3. Minnesota Statutes 2020, section 260C.451, is amended by adding a subdivision to read:

Subd. 8b. **Support beyond 21 program.** For a youth who was eligible for extended foster care under subdivision 3 and is discharged at age 21, the responsible social services agency must ensure the youth is referred to the support beyond 21 program. The support beyond 21 program provides one additional year of financial support for housing and basic needs to assist youth aging out of extended foster care at age 21. A youth receiving benefits under the support beyond 21 program is also eligible for the successful transition to adulthood program for additional support under section 260C.452. A youth who transitions to residential services under sections 256B.092 and 256B.49 is not eligible for the support beyond 21 program."

Page 15, after line 25, insert:

"**EFFECTIVE DATE.** This section is effective March 1, 2024."

Page 15, after line 29, insert:

"**EFFECTIVE DATE.** This section is effective March 1, 2024."

Page 16, after line 7, insert:

"**EFFECTIVE DATE.** This section is effective March 1, 2024."

Page 16, line 11, after "between" insert "the countable income"

Page 16, line 12, delete "income"

Page 18, after line 4, insert:

"EFFECTIVE DATE. This section is effective July 1, 2022."

Page 19, after line 23, insert:

"EFFECTIVE DATE. This section is effective July 1, 2022."

Page 20, after line 1, insert:

"EFFECTIVE DATE. This section is effective July 1, 2022."

Page 20, after line 23, insert:

"EFFECTIVE DATE. This section is effective July 1, 2022."

Page 20, before line 24, insert:

"Sec. 12. Minnesota Statutes 2020, section 256E.36, subdivision 1, is amended to read:

Subdivision 1. **Definitions.** (a) The definitions in this subdivision apply to this section.

(b) "Commissioner" means the commissioner of human services.

(c) "Eligible organization" means a local governmental unit, federally recognized Tribal Nation, or nonprofit organization providing or seeking to provide emergency services for homeless persons.

(d) "Emergency services" means:

- (1) providing emergency shelter for homeless persons; and
- (2) assisting homeless persons in obtaining essential services, including:
 - (i) access to permanent housing;
 - (ii) medical and psychological help;
 - (iii) employment counseling and job placement;
 - (iv) substance abuse treatment;
 - (v) financial assistance available from other programs;
 - (vi) emergency child care;
 - (vii) transportation; and
 - (viii) other services needed to stabilize housing.

EFFECTIVE DATE. This section is effective July 1, 2022.

Sec. 13. **[256E.361] EMERGENCY SHELTER FACILITIES GRANTS.**

Subdivision 1. **Definitions.** (a) For the purposes of this section, the terms defined in this subdivision have the meanings given.

(b) "Commissioner" means the commissioner of human services.

(c) "Eligible organization" means a local governmental unit, federally recognized Tribal Nation, or nonprofit organization seeking to acquire, construct, renovate, furnish, or equip facilities for emergency homeless shelters for individuals and families experiencing homelessness.

(d) "Emergency services" has the meaning given in section 256E.36, subdivision 1, paragraph (d).

(e) "Emergency shelter facility" or "facility" means a facility that provides a safe, sanitary, accessible, and suitable emergency shelter for individuals and families experiencing homelessness, regardless of whether the facility provides emergency shelter for emergency services during the day, overnight, or both.

Subd. 2. **Program established; purpose.** An emergency shelter facilities grant program is established to help eligible organizations acquire, construct, renovate, furnish, or equip emergency shelter facilities for individuals and families experiencing homelessness. The program shall be administered by the commissioner.

Subd. 3. **Distribution of grants.** The commissioner must make grants with the purpose of ensuring that emergency shelter facilities are available to meet the needs of individuals and families experiencing homelessness statewide.

Subd. 4. **Applications.** An eligible organization may apply to the commissioner for a grant to acquire, construct, renovate, furnish, or equip an emergency shelter facility providing or seeking to provide emergency services for individuals and families experiencing homelessness. The commissioner shall use a competitive request for proposal process to identify potential projects and eligible organizations on a statewide basis.

Subd. 5. **Criteria for grant awards.** The commissioner shall award grants based on the following criteria:

(1) whether the application is for a grant to acquire, construct, renovate, furnish, or equip an emergency shelter facility for individuals and families experiencing homelessness;

(2) evidence of the applicant's need for state assistance and the need for the particular facility to be funded; and

(3) the applicant's long-range plans for future funding if the need continues to exist for the emergency services provided at the facility.

Subd. 6. **Availability of appropriations.** Appropriations under this section are available for a four-year period that begins on July 1 of the fiscal year in which the appropriation occurs. Unspent funds at the end of the four-year period shall cancel back to the general fund."

Page 20, after line 27, insert:

"**EFFECTIVE DATE.** This section is effective March 1, 2024."

Page 21, after line 7, insert:

"**EFFECTIVE DATE.** This section is effective March 1, 2024."

Page 21, after line 24, insert:

"**EFFECTIVE DATE.** This section is effective March 1, 2024."

Page 21, after line 31, insert:

"**EFFECTIVE DATE.** This section is effective July 1, 2022."

Page 22, after line 15, insert:

"**EFFECTIVE DATE.** This section is effective March 1, 2024."

Page 22, after line 21, insert:

"**EFFECTIVE DATE.** This section is effective March 1, 2024."

Page 23, after line 12, insert:

"**EFFECTIVE DATE.** This section is effective March 1, 2024."

Page 24, after line 8, insert:

"**EFFECTIVE DATE.** This section is effective March 1, 2024."

Page 24, after line 27, insert:

"**EFFECTIVE DATE.** This section is effective March 1, 2024, except that the amendment to paragraph (b) striking "10" and inserting "9" is effective July 1, 2023."

Page 25, after line 2, insert:

"**EFFECTIVE DATE.** This section is effective March 1, 2024."

Page 25, after line 8, insert:

"**EFFECTIVE DATE.** This section is effective March 1, 2024."

Page 25, after line 29, insert:

"**EFFECTIVE DATE.** This section is effective March 1, 2024."

Page 26, after line 8, insert:

"EFFECTIVE DATE. This section is effective March 1, 2024."

Page 26, after line 30, insert:

"EFFECTIVE DATE. This section is effective July 1, 2022."

Page 27, after line 4, insert:

"EFFECTIVE DATE. This section is effective March 1, 2024."

Page 27, after line 11, insert:

"EFFECTIVE DATE. This section is effective July 1, 2022."

Page 27, after line 21, insert:

"EFFECTIVE DATE. This section is effective July 1, 2022."

Page 27, after line 28, insert:

"EFFECTIVE DATE. This section is effective July 1, 2022."

Page 28, after line 23, insert:

"EFFECTIVE DATE. This section is effective July 1, 2023."

Page 28, after line 30, insert:

"EFFECTIVE DATE. This section is effective March 1, 2024."

Page 30, after line 10, insert:

"EFFECTIVE DATE. This section is effective July 1, 2023."

Page 30, after line 15, insert:

"EFFECTIVE DATE. This section is effective March 1, 2024."

Page 30, after line 20, insert:

"EFFECTIVE DATE. This section is effective March 1, 2024."

Page 30, after line 30, insert:

"EFFECTIVE DATE. This section is effective March 1, 2024."

Page 32, after line 23, insert:

"EFFECTIVE DATE. This section is effective March 1, 2024, except that the amendment striking clause (6) is effective July 1, 2023."

Page 33, after line 2, insert:

"EFFECTIVE DATE. This section is effective March 1, 2024."

Page 33, after line 19, insert:

"EFFECTIVE DATE. This section is effective March 1, 2024."

Page 34, after line 2, insert:

"EFFECTIVE DATE. This section is effective March 1, 2024."

Page 34, after line 17, insert:

"EFFECTIVE DATE. This section is effective March 1, 2024."

Page 34, after line 27, insert:

"EFFECTIVE DATE. This section is effective March 1, 2024."

Page 35, after line 17, insert:

"EFFECTIVE DATE. This section is effective July 1, 2022."

Page 36, after line 11, insert:

"EFFECTIVE DATE. This section is effective March 1, 2024."

Page 36, before line 12, insert:

"Sec. 47. [256P.10] SIX-MONTH REPORTING.

Subdivision 1. **Exempted programs.** Assistance units that qualify for child care assistance programs under chapter 119B, assistance units that qualify for Minnesota supplemental aid under chapter 256D, and assistance units that qualify for housing support under chapter 256I and also receive Supplemental Security Income are exempt from this section.

Subd. 2. **Reporting.** (a) Every six months, an assistance unit that qualifies for the Minnesota family investment program under chapter 256J, an assistance unit that qualifies for general assistance under chapter 256D with an earned income of \$100 per month or greater, or an assistance unit that qualifies for housing support under chapter 256I with an earned income of \$100 per month or greater is subject to six-month reviews. The initial reporting period may be shorter than six months in order to align with other programs' reporting periods.

(b) An assistance unit that qualifies for the Minnesota family investment program or an assistance unit that qualifies for general assistance with an earned income of \$100 per month or greater must complete household report forms as required by the commissioner for redetermination of benefits.

(c) An assistance unit that qualifies for housing support with an earned income of \$100 per month or greater must complete household report forms as prescribed by the commissioner to provide information about earned income.

(d) An assistance unit that qualifies for housing support and also receives assistance through the Minnesota family investment program shall be subject to requirements of this section for purposes of the Minnesota family investment program but not for housing support.

(e) An assistance unit covered by this section must submit a household report form in compliance with the provisions in section 256P.04, subdivision 11.

(f) An assistance unit covered by this section may choose to report changes under this section at any time.

Subd. 3. **When to terminate assistance.** (a) An agency must terminate benefits when the assistance unit fails to submit the household report form before the end of the six-month review period as described in subdivision 2, paragraph (a). If the assistance unit submits the household report form within 30 days of the termination of benefits and remains eligible, benefits must be reinstated and made available retroactively for the full benefit month.

(b) When an assistance unit is determined to be ineligible for assistance according to this section and chapter 256D, 256I, or 256J, the commissioner must terminate assistance."

Page 36, delete lines 20 to 24

Page 36, after line 30, insert:

"**EFFECTIVE DATE.** This section is effective March 1, 2024, except the repeal of Minnesota Statutes 2020, sections 256J.08, subdivision 62, and 256J.37, subdivision 10, and Minnesota Statutes 2021 Supplement, section 256J.08, subdivision 53, is effective July 1, 2023."

Page 51, after line 23, insert:

"Sec. 17. Minnesota Statutes 2020, section 245G.22, subdivision 15, is amended to read:

~~Subd. 15. **Nonmedication treatment services; documentation.** (a) The program must offer at least 50 consecutive minutes of individual or group therapy treatment services as defined in section 245G.07, subdivision 1, paragraph (a), clause (1), per week, for the first ten weeks following the day of service initiation, and at least 50 consecutive minutes per month thereafter. As clinically appropriate, the program may offer these services cumulatively and not consecutively in increments of no less than 15 minutes over the required time period, and for a total of 60 minutes of treatment services over the time period, and must document the reason for providing services cumulatively in the client's record. The program may offer additional levels of service when deemed clinically necessary.~~

~~(b) (a) Notwithstanding the requirements of comprehensive assessments in section 245G.05, the assessment must be completed within 21 days from the day of service initiation.~~

~~(e) (b) Notwithstanding the requirements of individual treatment plans set forth in section 245G.06:~~

~~(1) treatment plan contents for a maintenance client are not required to include goals the client must reach to complete treatment and have services terminated;~~

(2) treatment plans for a client in a taper or detox status must include goals the client must reach to complete treatment and have services terminated; and

(3) for the ten weeks following the day of service initiation for all new admissions, readmissions, and transfers, a weekly treatment plan review must be documented once the treatment plan is completed. Subsequently, the counselor must document treatment plan reviews in the six dimensions at least once monthly or, when clinical need warrants, more frequently."

Page 52, strike lines 1 to 4

Page 52, line 31, strike "home county" and insert "county of residence"

Page 53, line 3, delete "provide" and insert "facilitate"

Page 54, line 4, after the period, insert "An eligible vendor of a comprehensive assessment must provide information, in a format provided by the commissioner, on medical assistance and the behavioral health fund to individuals seeking an assessment."

Page 60, after line 9, insert:

"Sec. 24. Minnesota Statutes 2020, section 254B.03, subdivision 4, is amended to read:

Subd. 4. **Division of costs.** (a) Except for services provided by a county under section 254B.09, subdivision 1, or services provided under section 256B.69, the county shall, out of local money, pay the state for 22.95 percent of the cost of chemical dependency services, except for those services provided to persons enrolled in medical assistance under chapter 256B and room and board services under section 254B.05, subdivision 5, paragraph (b), clause ~~(12)~~ (11). Counties may use the indigent hospitalization levy for treatment and hospital payments made under this section.

(b) 22.95 percent of any state collections from private or third-party pay, less 15 percent for the cost of payment and collections, must be distributed to the county that paid for a portion of the treatment under this section."

Page 60, after line 16, delete section 39 and insert:

"Sec. 26. Minnesota Statutes 2021 Supplement, section 254B.04, subdivision 1, is amended to read:

Subdivision 1. **Client eligibility.** (a) Persons eligible for benefits under Code of Federal Regulations, title 25, part 20, who meet the income standards of section 256B.056, subdivision 4, and are not enrolled in medical assistance, are entitled to behavioral health fund services. State money appropriated for this paragraph must be placed in a separate account established for this purpose.

(b) Persons with dependent children who are determined to be in need of chemical dependency treatment pursuant to an assessment under section 260E.20, subdivision 1, or a case plan under section 260C.201, subdivision 6, or 260C.212, shall be assisted by the local agency to access needed treatment services. Treatment services must be appropriate for the individual or family, which may include long-term care treatment or treatment in a facility that allows the dependent children to stay in the treatment facility. The county shall pay for out-of-home placement costs, if applicable.

(c) Notwithstanding paragraph (a), persons enrolled in medical assistance are eligible for room and board services under section 254B.05, subdivision 5, paragraph (b), clause ~~(12)~~ (11).

(d) A client is eligible to have substance use disorder treatment paid for with funds from the behavioral health fund if:

(1) the client is eligible for MFIP as determined under chapter 256J;

(2) the client is eligible for medical assistance as determined under Minnesota Rules, parts 9505.0010 to 9505.0150;

(3) the client is eligible for general assistance, general assistance medical care, or work readiness as determined under Minnesota Rules, parts 9500.1200 to 9500.1272; or

(4) the client's income is within current household size and income guidelines for entitled persons, as defined in this subdivision and subdivision 7.

(e) Clients who meet the financial eligibility requirement in paragraph (a) and who have a third-party payment source are eligible for the behavioral health fund if the third-party payment source pays less than 100 percent of the cost of treatment services for eligible clients.

(f) A client is ineligible to have substance use disorder treatment services paid for by the behavioral health fund if the client:

(1) has an income that exceeds current household size and income guidelines for entitled persons, as defined in this subdivision and subdivision 7; or

(2) has an available third-party payment source that will pay the total cost of the client's treatment.

(g) A client who is disenrolled from a state prepaid health plan during a treatment episode is eligible for continued treatment service paid for by the behavioral health fund until the treatment episode is completed or the client is re-enrolled in a state prepaid health plan if the client:

(1) continues to be enrolled in MinnesotaCare, medical assistance, or general assistance medical care; or

(2) is eligible according to paragraphs (a) and (b) and is determined eligible by a local agency under this section.

(h) If a county commits a client under chapter 253B to a regional treatment center for substance use disorder services and the client is ineligible for the behavioral health fund, the county is responsible for payment to the regional treatment center according to section 254B.05, subdivision 4.

EFFECTIVE DATE. This section is effective July 1, 2022."

Page 69, strike lines 19 and 20

Renumber the clauses in sequence

Page 73, line 12, delete "and"

Page 73, line 15, delete the period and insert "; and"

Page 73, after line 15, insert:

"(8) consult with relevant stakeholders, including lead agencies and municipalities, to review and provide recommendations for necessary revisions to required reporting to ensure the reporting reflects measures of progress in addressing the harms of the opioid epidemic."

Page 73, line 17, after "or" insert "may select"

Page 74, line 5, delete "28" and insert "30"

Page 75, after line 11, insert:

"(13) two members representing the urban American Indian population;"

Renumber the clauses in sequence

Page 75, line 22, before the period, insert "and that at least one-half of the members have lived experience with opiate addiction"

Page 77, line 25, delete everything after the period

Page 77, delete lines 26 to 28 and insert:

"The report must include data and measurable outcomes on expenditures funded with opioid settlement funds, as identified by the commissioner, including details on services drawn from the categories of approved uses, as identified in agreements between the state of Minnesota, the Association of Minnesota Counties, and the League of Minnesota Cities. Minimum reporting requirements must include:

(1) contact information;

(2) information on funded services and programs; and

(3) target populations for each funded service and program.

(e) In reporting data and outcomes under paragraph (d), municipalities should include information on the use of evidence-based and culturally relevant services, to the extent feasible.

(f) Reporting requirements for municipal projects using \$25,000 or more of settlement funds in a calendar year must also include:

(1) a brief qualitative description of successes or challenges; and

(2) results using process and quality measures."

Page 77, line 29, delete "(e)" and insert "(g)"

Page 77, after line 30, insert:

"Sec. 54. Minnesota Statutes 2021 Supplement, section 256B.0759, subdivision 4, is amended to read:

Subd. 4. Provider payment rates. (a) Payment rates for participating providers must be increased for services provided to medical assistance enrollees. To receive a rate increase, participating providers must meet demonstration project requirements and provide evidence of formal referral arrangements with providers delivering step-up or step-down levels of care. Providers that have enrolled in the demonstration project but have not met the provider standards under subdivision 3 as of July 1, 2022, are not eligible for a rate increase under this subdivision until the date that the provider meets the provider standards in subdivision 3. Services provided from July 1, 2022, to the date that the provider meets the provider standards under subdivision 3 shall be reimbursed at rates according to section 254B.05, subdivision 5, paragraph (b). Rate increases paid under this subdivision to a provider for services provided between July 1, 2021, and July 1, 2022, are not subject to recoupment when the provider is taking meaningful steps to meet demonstration project requirements that are not otherwise required by law, and the provider provides documentation to the commissioner, upon request, of the steps being taken.

(b) The commissioner may temporarily suspend payments to the provider according to section 256B.04, subdivision 21, paragraph (d), if the provider does not meet the requirements in paragraph (a). Payments withheld from the provider must be made once the commissioner determines that the requirements in paragraph (a) are met.

(c) For substance use disorder services under section 254B.05, subdivision 5, paragraph (b), clause ~~(8)~~ (7), provided on or after July 1, 2020, payment rates must be increased by 25 percent over the rates in effect on December 31, 2019.

(d) For substance use disorder services under section 254B.05, subdivision 5, paragraph (b), clauses (1), and (6), and ~~(7)~~, and adolescent treatment programs that are licensed as outpatient treatment programs according to sections 245G.01 to 245G.18, provided on or after January 1, 2021, payment rates must be increased by 20 percent over the rates in effect on December 31, 2020.

(e) Effective January 1, 2021, and contingent on annual federal approval, managed care plans and county-based purchasing plans must reimburse providers of the substance use disorder services meeting the criteria described in paragraph (a) who are employed by or under contract with the plan an amount that is at least equal to the fee-for-service base rate payment for the substance use disorder services described in paragraphs (c) and (d). The commissioner must monitor the effect of this requirement on the rate of access to substance use disorder services and residential substance use disorder rates. Capitation rates paid to managed care organizations and county-based purchasing plans must reflect the impact of this requirement. This paragraph expires if federal approval is not received at any time as required under this paragraph.

(f) Effective July 1, 2021, contracts between managed care plans and county-based purchasing plans and providers to whom paragraph (e) applies must allow recovery of payments from those providers if, for any contract year, federal approval for the provisions of paragraph (e) is not received, and capitation rates are adjusted as a result. Payment recoveries must not exceed the amount equal to any decrease in rates that results from this provision."

Page 79, line 8, after "and" insert "has one of the following"

Page 85, after line 15, insert:

"Sec. 64. Minnesota Statutes 2021 Supplement, section 256B.0947, subdivision 2, is amended to read:

Subd. 2. **Definitions.** For purposes of this section, the following terms have the meanings given them.

(a) "Intensive nonresidential rehabilitative mental health services" means child rehabilitative mental health services as defined in section 256B.0943, except that these services are provided by a multidisciplinary staff using a total team approach consistent with assertive community treatment, as adapted for youth, and are directed to recipients who are eight years of age or older and under ~~26~~ 21 years of age who require intensive services to prevent admission to an inpatient psychiatric hospital or placement in a residential treatment facility or who require intensive services to step down from inpatient or residential care to community-based care.

(b) "Co-occurring mental illness and substance use disorder" means a dual diagnosis of at least one form of mental illness and at least one substance use disorder. Substance use disorders include alcohol or drug abuse or dependence, excluding nicotine use.

(c) "Standard diagnostic assessment" means the assessment described in section 245I.10, subdivision 6.

(d) "Medication education services" means services provided individually or in groups, which focus on:

(1) educating the client and client's family or significant nonfamilial supporters about mental illness and symptoms;

(2) the role and effects of medications in treating symptoms of mental illness; and

(3) the side effects of medications.

Medication education is coordinated with medication management services and does not duplicate it. Medication education services are provided by physicians, pharmacists, or registered nurses with certification in psychiatric and mental health care.

(e) "Mental health professional" means a staff person who is qualified according to section 245I.04, subdivision 2.

(f) "Provider agency" means a for-profit or nonprofit organization established to administer an assertive community treatment for youth team.

(g) "Substance use disorders" means one or more of the disorders defined in the diagnostic and statistical manual of mental disorders, current edition.

(h) "Transition services" means:

- (1) activities, materials, consultation, and coordination that ensures continuity of the client's care in advance of and in preparation for the client's move from one stage of care or life to another by maintaining contact with the client and assisting the client to establish provider relationships;
- (2) providing the client with knowledge and skills needed posttransition;
- (3) establishing communication between sending and receiving entities;
- (4) supporting a client's request for service authorization and enrollment; and
- (5) establishing and enforcing procedures and schedules.

A youth's transition from the children's mental health system and services to the adult mental health system and services and return to the client's home and entry or re-entry into community-based mental health services following discharge from an out-of-home placement or inpatient hospital stay.

(i) "Treatment team" means all staff who provide services to recipients under this section.

(j) "Family peer specialist" means a staff person who is qualified under section 256B.0616.

Sec. 65. Minnesota Statutes 2021 Supplement, section 256B.0947, subdivision 3, is amended to read:

Subd. 3. **Client eligibility.** An eligible recipient is an individual who:

- (1) is eight years of age or older and under ~~26~~ 21 years of age;
- (2) is diagnosed with a serious mental illness or co-occurring mental illness and substance use disorder, for which intensive nonresidential rehabilitative mental health services are needed;
- (3) has received a level of care assessment as defined in section 245I.02, subdivision 19, that indicates a need for intensive integrated intervention without 24-hour medical monitoring and a need for extensive collaboration among multiple providers;
- (4) has received a functional assessment as defined in section 245I.02, subdivision 17, that indicates functional impairment and a history of difficulty in functioning safely and successfully in the community, school, home, or job; or who is likely to need services from the adult mental health system during adulthood; and
- (5) has had a recent standard diagnostic assessment that documents that intensive nonresidential rehabilitative mental health services are medically necessary to ameliorate identified symptoms and functional impairments and to achieve individual transition goals.

Sec. 66. Minnesota Statutes 2021 Supplement, section 256B.0947, subdivision 5, is amended to read:

Subd. 5. **Standards for intensive nonresidential rehabilitative providers.** (a) Services must meet the standards in this section and chapter 245I as required in section 245I.011, subdivision 5.

(b) The treatment team must have specialized training in providing services to the specific age group of youth that the team serves. An individual treatment team must serve youth who are: (1) at least eight years of age or older and under 16 years of age, or (2) at least 14 years of age or older and under ~~26~~ 21 years of age.

(c) The treatment team for intensive nonresidential rehabilitative mental health services comprises both permanently employed core team members and client-specific team members as follows:

(1) Based on professional qualifications and client needs, clinically qualified core team members are assigned on a rotating basis as the client's lead worker to coordinate a client's care. The core team must comprise at least four full-time equivalent direct care staff and must minimally include:

(i) a mental health professional who serves as team leader to provide administrative direction and treatment supervision to the team;

(ii) an advanced-practice registered nurse with certification in psychiatric or mental health care or a board-certified child and adolescent psychiatrist, either of which must be credentialed to prescribe medications;

(iii) a licensed alcohol and drug counselor who is also trained in mental health interventions; and

(iv) a mental health certified peer specialist who is qualified according to section 245I.04, subdivision 10, and is also a former children's mental health consumer.

(2) The core team may also include any of the following:

(i) additional mental health professionals;

(ii) a vocational specialist;

(iii) an educational specialist with knowledge and experience working with youth regarding special education requirements and goals, special education plans, and coordination of educational activities with health care activities;

(iv) a child and adolescent psychiatrist who may be retained on a consultant basis;

(v) a clinical trainee qualified according to section 245I.04, subdivision 6;

(vi) a mental health practitioner qualified according to section 245I.04, subdivision 4;

(vii) a case management service provider, as defined in section 245.4871, subdivision 4;

(viii) a housing access specialist; and

(ix) a family peer specialist as defined in subdivision 2, paragraph (j).

(3) A treatment team may include, in addition to those in clause (1) or (2), ad hoc members not employed by the team who consult on a specific client and who must accept overall clinical direction from the treatment team for the duration of the client's placement with the treatment team and must

be paid by the provider agency at the rate for a typical session by that provider with that client or at a rate negotiated with the client-specific member. Client-specific treatment team members may include:

- (i) the mental health professional treating the client prior to placement with the treatment team;
 - (ii) the client's current substance use counselor, if applicable;
 - (iii) a lead member of the client's individualized education program team or school-based mental health provider, if applicable;
 - (iv) a representative from the client's health care home or primary care clinic, as needed to ensure integration of medical and behavioral health care;
 - (v) the client's probation officer or other juvenile justice representative, if applicable; and
 - (vi) the client's current vocational or employment counselor, if applicable.
- (d) The treatment supervisor shall be an active member of the treatment team and shall function as a practicing clinician at least on a part-time basis. The treatment team shall meet with the treatment supervisor at least weekly to discuss recipients' progress and make rapid adjustments to meet recipients' needs. The team meeting must include client-specific case reviews and general treatment discussions among team members. Client-specific case reviews and planning must be documented in the individual client's treatment record.
- (e) The staffing ratio must not exceed ten clients to one full-time equivalent treatment team position.
- (f) The treatment team shall serve no more than 80 clients at any one time. Should local demand exceed the team's capacity, an additional team must be established rather than exceed this limit.
- (g) Nonclinical staff shall have prompt access in person or by telephone to a mental health practitioner, clinical trainee, or mental health professional. The provider shall have the capacity to promptly and appropriately respond to emergent needs and make any necessary staffing adjustments to ensure the health and safety of clients.
- (h) The intensive nonresidential rehabilitative mental health services provider shall participate in evaluation of the assertive community treatment for youth (Youth ACT) model as conducted by the commissioner, including the collection and reporting of data and the reporting of performance measures as specified by contract with the commissioner.
- (i) A regional treatment team may serve multiple counties."

Page 97, after line 25, insert:

"Sec. 78. DIRECTION TO THE COMMISSIONER; BEHAVIORAL HEALTH FUND ALLOCATION.

The commissioner of human services, in consultation with counties and Tribal Nations, must make recommendations on an updated allocation to local agencies from funds allocated under

Minnesota Statutes, section 254B.02, subdivision 5. The commissioner must submit the recommendations to the chairs and ranking minority members of the legislative committees with jurisdiction over health and human services finance and policy by January 1, 2024."

Page 98, after line 18, insert:

"Sec. 2. Minnesota Statutes 2020, section 256B.056, subdivision 3, is amended to read:

Subd. 3. **Asset limitations for certain individuals.** (a) To be eligible for medical assistance, a person must not individually own more than \$3,000 in assets, or if a member of a household with two family members, husband and wife, or parent and child, the household must not own more than \$6,000 in assets, plus \$200 for each additional legal dependent. In addition to these maximum amounts, an eligible individual or family may accrue interest on these amounts, but they must be reduced to the maximum at the time of an eligibility redetermination. The accumulation of the clothing and personal needs allowance according to section 256B.35 must also be reduced to the maximum at the time of the eligibility redetermination. The value of assets that are not considered in determining eligibility for medical assistance is the value of those assets excluded under the Supplemental Security Income program for aged, blind, and disabled persons, with the following exceptions:

- (1) household goods and personal effects are not considered;
- (2) capital and operating assets of a trade or business that the local agency determines are necessary to the person's ability to earn an income are not considered;
- (3) motor vehicles are excluded to the same extent excluded by the Supplemental Security Income program;
- (4) assets designated as burial expenses are excluded to the same extent excluded by the Supplemental Security Income program. Burial expenses funded by annuity contracts or life insurance policies must irrevocably designate the individual's estate as contingent beneficiary to the extent proceeds are not used for payment of selected burial expenses;
- (5) for a person who no longer qualifies as an employed person with a disability due to loss of earnings, assets allowed while eligible for medical assistance under section 256B.057, subdivision 9, are not considered for 12 months, beginning with the first month of ineligibility as an employed person with a disability, to the extent that the person's total assets remain within the allowed limits of section 256B.057, subdivision 9, paragraph (d);
- (6) a designated employment incentives asset account is disregarded when determining eligibility for medical assistance for a person age 65 years or older under section 256B.055, subdivision 7. An employment incentives asset account must only be designated by a person who has been enrolled in medical assistance under section 256B.057, subdivision 9, for a 24-consecutive-month period. A designated employment incentives asset account contains qualified assets owned by the person and the person's spouse in the last month of enrollment in medical assistance under section 256B.057, subdivision 9. Qualified assets include retirement and pension accounts, medical expense accounts, and up to \$17,000 of the person's other nonexcluded assets. An employment incentives asset account is no longer designated when a person loses medical assistance eligibility for a calendar month or more before turning age 65. A person who loses medical assistance eligibility before age 65 can

establish a new designated employment incentives asset account by establishing a new 24-consecutive-month period of enrollment under section 256B.057, subdivision 9. The income of a spouse of a person enrolled in medical assistance under section 256B.057, subdivision 9, during each of the 24 consecutive months before the person's 65th birthday must be disregarded when determining eligibility for medical assistance under section 256B.055, subdivision 7. Persons eligible under this clause are not subject to the provisions in section 256B.059; ~~and~~

(7) effective July 1, 2009, certain assets owned by American Indians are excluded as required by section 5006 of the American Recovery and Reinvestment Act of 2009, Public Law 111-5. For purposes of this clause, an American Indian is any person who meets the definition of Indian according to Code of Federal Regulations, title 42, section 447.50-; and

(8) for individuals who were enrolled in medical assistance during the COVID-19 federal public health emergency declared by the United States Secretary of Health and Human Services and who are subject to the asset limits established by this subdivision, assets in excess of the limits shall be disregarded until 95 days after the individual's first renewal occurring after the expiration of the COVID-19 federal public health emergency declared by the United States Secretary of Health and Human Services.

(b) No asset limit shall apply to persons eligible under section 256B.055, subdivision 15.

EFFECTIVE DATE. This section is effective July 1, 2022, or upon federal approval, whichever is later. The commissioner of human services shall notify the revisor of statutes when federal approval is obtained."

Page 99, line 14, delete "2023" and insert "2024"

Page 99, after line 16, insert:

"Sec. 5. Minnesota Statutes 2021 Supplement, section 256B.0625, subdivision 30, is amended to read:

Subd. 30. **Other clinic services.** (a) Medical assistance covers rural health clinic services, federally qualified health center services, nonprofit community health clinic services, and public health clinic services. Rural health clinic services and federally qualified health center services mean services defined in United States Code, title 42, section 1396d(a)(2)(B) and (C). Payment for rural health clinic and federally qualified health center services shall be made according to applicable federal law and regulation.

(b) A federally qualified health center (FQHC) that is beginning initial operation shall submit an estimate of budgeted costs and visits for the initial reporting period in the form and detail required by the commissioner. An FQHC that is already in operation shall submit an initial report using actual costs and visits for the initial reporting period. Within 90 days of the end of its reporting period, an FQHC shall submit, in the form and detail required by the commissioner, a report of its operations, including allowable costs actually incurred for the period and the actual number of visits for services furnished during the period, and other information required by the commissioner. FQHCs that file Medicare cost reports shall provide the commissioner with a copy of the most recent Medicare cost report filed with the Medicare program intermediary for the reporting year which support the costs claimed on their cost report to the state.

(c) In order to continue cost-based payment under the medical assistance program according to paragraphs (a) and (b), an FQHC or rural health clinic must apply for designation as an essential community provider within six months of final adoption of rules by the Department of Health according to section 62Q.19, subdivision 7. For those FQHCs and rural health clinics that have applied for essential community provider status within the six-month time prescribed, medical assistance payments will continue to be made according to paragraphs (a) and (b) for the first three years after application. For FQHCs and rural health clinics that either do not apply within the time specified above or who have had essential community provider status for three years, medical assistance payments for health services provided by these entities shall be according to the same rates and conditions applicable to the same service provided by health care providers that are not FQHCs or rural health clinics.

(d) Effective July 1, 1999, the provisions of paragraph (c) requiring an FQHC or a rural health clinic to make application for an essential community provider designation in order to have cost-based payments made according to paragraphs (a) and (b) no longer apply.

(e) Effective January 1, 2000, payments made according to paragraphs (a) and (b) shall be limited to the cost phase-out schedule of the Balanced Budget Act of 1997.

(f) Effective January 1, 2001, through December 31, 2020, each FQHC and rural health clinic may elect to be paid either under the prospective payment system established in United States Code, title 42, section 1396a(aa), or under an alternative payment methodology consistent with the requirements of United States Code, title 42, section 1396a(aa), and approved by the Centers for Medicare and Medicaid Services. The alternative payment methodology shall be 100 percent of cost as determined according to Medicare cost principles.

(g) Effective for services provided on or after January 1, 2021, all claims for payment of clinic services provided by FQHCs and rural health clinics shall be paid by the commissioner, according to an annual election by the FQHC or rural health clinic, under the current prospective payment system described in paragraph (f) or the alternative payment methodology described in paragraph (l).

(h) For purposes of this section, "nonprofit community clinic" is a clinic that:

(1) has nonprofit status as specified in chapter 317A;

(2) has tax exempt status as provided in Internal Revenue Code, section 501(c)(3);

(3) is established to provide health services to low-income population groups, uninsured, high-risk and special needs populations, underserved and other special needs populations;

(4) employs professional staff at least one-half of which are familiar with the cultural background of their clients;

(5) charges for services on a sliding fee scale designed to provide assistance to low-income clients based on current poverty income guidelines and family size; and

(6) does not restrict access or services because of a client's financial limitations or public assistance status and provides no-cost care as needed.

(i) Effective for services provided on or after January 1, 2015, all claims for payment of clinic services provided by FQHCs and rural health clinics shall be paid by the commissioner. the commissioner shall determine the most feasible method for paying claims from the following options:

(1) FQHCs and rural health clinics submit claims directly to the commissioner for payment, and the commissioner provides claims information for recipients enrolled in a managed care or county-based purchasing plan to the plan, on a regular basis; or

(2) FQHCs and rural health clinics submit claims for recipients enrolled in a managed care or county-based purchasing plan to the plan, and those claims are submitted by the plan to the commissioner for payment to the clinic.

(j) For clinic services provided prior to January 1, 2015, the commissioner shall calculate and pay monthly the proposed managed care supplemental payments to clinics, and clinics shall conduct a timely review of the payment calculation data in order to finalize all supplemental payments in accordance with federal law. Any issues arising from a clinic's review must be reported to the commissioner by January 1, 2017. Upon final agreement between the commissioner and a clinic on issues identified under this subdivision, and in accordance with United States Code, title 42, section 1396a(bb), no supplemental payments for managed care plan or county-based purchasing plan claims for services provided prior to January 1, 2015, shall be made after June 30, 2017. If the commissioner and clinics are unable to resolve issues under this subdivision, the parties shall submit the dispute to the arbitration process under section 14.57.

(k) The commissioner shall seek a federal waiver, authorized under section 1115 of the Social Security Act, to obtain federal financial participation at the 100 percent federal matching percentage available to facilities of the Indian Health Service or tribal organization in accordance with section 1905(b) of the Social Security Act for expenditures made to organizations dually certified under Title V of the Indian Health Care Improvement Act, Public Law 94-437, and as a federally qualified health center under paragraph (a) that provides services to American Indian and Alaskan Native individuals eligible for services under this subdivision.

(l) All claims for payment of clinic services provided by FQHCs and rural health clinics, that have elected to be paid under this paragraph, shall be paid by the commissioner according to the following requirements:

(1) the commissioner shall establish a single medical and single dental organization encounter rate for each FQHC and rural health clinic when applicable;

(2) each FQHC and rural health clinic is eligible for same day reimbursement of one medical and one dental organization encounter rate if eligible medical and dental visits are provided on the same day;

(3) the commissioner shall reimburse FQHCs and rural health clinics, in accordance with current applicable Medicare cost principles, their allowable costs, including direct patient care costs and patient-related support services. Nonallowable costs include, but are not limited to:

(i) general social services and administrative costs;

(ii) retail pharmacy;

- (iii) patient incentives, food, housing assistance, and utility assistance;
- (iv) external lab and x-ray;
- (v) navigation services;
- (vi) health care taxes;
- (vii) advertising, public relations, and marketing;
- (viii) office entertainment costs, food, alcohol, and gifts;
- (ix) contributions and donations;
- (x) bad debts or losses on awards or contracts;
- (xi) fines, penalties, damages, or other settlements;
- (xii) fund-raising, investment management, and associated administrative costs;
- (xiii) research and associated administrative costs;
- (xiv) nonpaid workers;
- (xv) lobbying;
- (xvi) scholarships and student aid; and
- (xvii) nonmedical assistance covered services;

(4) the commissioner shall review the list of nonallowable costs in the years between the rebasing process established in clause (5), in consultation with the Minnesota Association of Community Health Centers, FQHCs, and rural health clinics. The commissioner shall publish the list and any updates in the Minnesota health care programs provider manual;

(5) the initial applicable base year organization encounter rates for FQHCs and rural health clinics shall be computed for services delivered on or after January 1, 2021, and:

(i) must be determined using each FQHC's and rural health clinic's Medicare cost reports from 2017 and 2018;

(ii) must be according to current applicable Medicare cost principles as applicable to FQHCs and rural health clinics without the application of productivity screens and upper payment limits or the Medicare prospective payment system FQHC aggregate mean upper payment limit;

(iii) must be subsequently rebased every two years thereafter using the Medicare cost reports that are three and four years prior to the rebasing year. Years in which organizational cost or claims volume is reduced or altered due to a pandemic, disease, or other public health emergency shall not be used as part of a base year when the base year includes more than one year. The commissioner may use the Medicare cost reports of a year unaffected by a pandemic, disease, or other public health

emergency, or previous two consecutive years, inflated to the base year as established under item (iv);

(iv) must be inflated to the base year using the inflation factor described in clause (6); and

(v) the commissioner must provide for a 60-day appeals process under section 14.57;

(6) the commissioner shall annually inflate the applicable organization encounter rates for FQHCs and rural health clinics from the base year payment rate to the effective date by using the CMS FQHC Market Basket inflator established under United States Code, title 42, section 1395m(o), less productivity;

(7) FQHCs and rural health clinics that have elected the alternative payment methodology under this paragraph shall submit all necessary documentation required by the commissioner to compute the rebased organization encounter rates no later than six months following the date the applicable Medicare cost reports are due to the Centers for Medicare and Medicaid Services;

(8) the commissioner shall reimburse FQHCs and rural health clinics an additional amount relative to their medical and dental organization encounter rates that is attributable to the tax required to be paid according to section 295.52, if applicable;

(9) FQHCs and rural health clinics may submit change of scope requests to the commissioner if the change of scope would result in an increase or decrease of 2.5 percent or higher in the medical or dental organization encounter rate currently received by the FQHC or rural health clinic;

(10) for FQHCs and rural health clinics seeking a change in scope with the commissioner under clause (9) that requires the approval of the scope change by the federal Health Resources Services Administration:

(i) FQHCs and rural health clinics shall submit the change of scope request, including the start date of services, to the commissioner within seven business days of submission of the scope change to the federal Health Resources Services Administration;

(ii) the commissioner shall establish the effective date of the payment change as the federal Health Resources Services Administration date of approval of the FQHC's or rural health clinic's scope change request, or the effective start date of services, whichever is later; and

(iii) within 45 days of one year after the effective date established in item (ii), the commissioner shall conduct a retroactive review to determine if the actual costs established under clause (3) or encounters result in an increase or decrease of 2.5 percent or higher in the medical or dental organization encounter rate, and if this is the case, the commissioner shall revise the rate accordingly and shall adjust payments retrospectively to the effective date established in item (ii);

(11) for change of scope requests that do not require federal Health Resources Services Administration approval, the FQHC and rural health clinic shall submit the request to the commissioner before implementing the change, and the effective date of the change is the date the commissioner received the FQHC's or rural health clinic's request, or the effective start date of the service, whichever is later. The commissioner shall provide a response to the FQHC's or rural health clinic's request within 45 days of submission and provide a final approval within 120 days of

submission. This timeline may be waived at the mutual agreement of the commissioner and the FQHC or rural health clinic if more information is needed to evaluate the request;

(12) the commissioner, when establishing organization encounter rates for new FQHCs and rural health clinics, shall consider the patient caseload of existing FQHCs and rural health clinics in a 60-mile radius for organizations established outside of the seven-county metropolitan area, and in a 30-mile radius for organizations in the seven-county metropolitan area. If this information is not available, the commissioner may use Medicare cost reports or audited financial statements to establish base rates;

(13) the commissioner shall establish a quality measures workgroup that includes representatives from the Minnesota Association of Community Health Centers, FQHCs, and rural health clinics, to evaluate clinical and nonclinical measures; and

(14) the commissioner shall not disallow or reduce costs that are related to an FQHC's or rural health clinic's participation in health care educational programs to the extent that the costs are not accounted for in the alternative payment methodology encounter rate established in this paragraph.

(m) Effective July 1, 2022, an enrolled Indian Health Service facility or a Tribal health center operating under a 638 contract or compact may elect to also enroll as a Tribal FQHC. No requirements that otherwise apply to FQHCs covered in this subdivision shall apply to Tribal FQHCs enrolled under this paragraph, except those necessary to comply with federal regulations. The commissioner shall establish an alternative payment method for Tribal FQHCs enrolled under this paragraph that uses the same method and rates applicable to a Tribal facility or health center that does not enroll as a Tribal FQHC.

Sec. 6. Minnesota Statutes 2020, section 256B.0625, subdivision 64, is amended to read:

Subd. 64. Investigational drugs, biological products, devices, and clinical trials. Medical assistance and the early periodic screening, diagnosis, and treatment (EPSDT) program do not cover ~~the costs of any services that are incidental to, associated with, or resulting from the use of~~ investigational drugs, biological products, or devices as defined in section 151.375 or any other treatment that is part of an approved clinical trial as defined in section 62Q.526. Participation of an enrollee in an approved clinical trial does not preclude coverage of medically necessary services covered under this chapter that are not related to the approved clinical trial. Any items purchased or services rendered solely to satisfy data collection and analysis for a clinical trial and not for direct clinical management of the member are not covered.

Sec. 7. **[256B.161] CLIENT ERROR OVERPAYMENT.**

Subdivision 1. Scope. (a) Subject to federal law and regulation, when a local agency or the Department of Human Services determines a person under section 256.98, subdivision 4, is liable for recovery of medical assistance incorrectly paid as a result of client error or when a recipient or former recipient receives medical assistance while an appeal is pending pursuant to section 256.045, subdivision 10, and the recipient or former recipient is later determined to have been ineligible for the medical assistance received or for less medical assistance than was received during the pendency of the appeal, the local agency or the Department of Human Services must:

(1) determine the eligibility months during which medical assistance was incorrectly paid;

(2) redetermine eligibility for the incorrectly paid months using department policies and procedures that were in effect during each eligibility month that was incorrectly paid; and

(3) assess an overpayment against persons liable for recovery under section 256.98, subdivision 4, for the amount of incorrectly paid medical assistance pursuant to section 256.98, subdivision 3.

(b) Notwithstanding section 256.98, subdivision 4, medical assistance incorrectly paid to a recipient as a result of client error when the recipient is under 21 years of age is not recoverable from the recipient or recipient's estate. This section does not prohibit the state agency from:

(1) receiving payment from a trust pursuant to United States Code, title 42, section 1396p(d)(4)(A) or (C), for medical assistance paid on behalf of the trust beneficiary for services received at any age; or

(2) claiming against the designated beneficiary of an Achieving a Better Life Experience (ABLE) account or the ABLE account itself pursuant to Code of Federal Regulations, title 26, section 1.529A-2(o), for the amount of the total medical assistance paid for the designated beneficiary at any age after establishment of the ABLE account.

Subd. 2. **Recovering client error overpayment.** (a) The local agency or the Department of Human Services must not attempt recovery of the overpayment amount pursuant to chapter 270A or section 256.0471 when a person liable for a client error overpayment under section 256.98, subdivision 4, voluntarily repays the overpayment amount or establishes a payment plan in writing with the local agency or the Department of Human Services to repay the overpayment amount within 90 days after receiving the overpayment notice or after resolution of a fair hearing regarding the overpayment under section 256.045, whichever is later. When a liable person agrees to a payment plan in writing with the local agency or the Department of Human Services but has not repaid any amount six months after entering the agreement, the local agency or Department of Human Services must pursue recovery under paragraph (b).

(b) If the liable person does not voluntarily repay the overpayment amount or establish a repayment agreement under paragraph (a), the local agency or the Department of Human Services must attempt recovery of the overpayment amount pursuant to chapter 270A when the overpayment amount is eligible for recovery as a public assistance debt under chapter 270A. For any overpaid amount of solely state-funded medical assistance, the local agency or the Department of Human Services must attempt recovery pursuant to section 256.0471.

Subd. 3. **Writing off client error overpayment.** A local agency or the Department of Human Services must not attempt to recover a client error overpayment of less than \$350, unless the overpayment is for medical assistance received pursuant to section 256.045, subdivision 10, during the pendency of an appeal or unless the recovery is from the recipient's estate or the estate of the recipient's surviving spouse. A local agency or the Department of Human Services may write off any remaining balance of a client error overpayment when the overpayment has not been repaid five years after the effective date of the overpayment and the local agency or the Department of Human Services determines it is no longer cost effective to attempt recovery of the remaining balance.

Sec. 8. Minnesota Statutes 2020, section 256B.76, subdivision 1, is amended to read:

Subdivision 1. **Physician reimbursement.** (a) Effective for services rendered on or after October 1, 1992, the commissioner shall make payments for physician services as follows:

(1) payment for level one Centers for Medicare and Medicaid Services' common procedural coding system codes titled "office and other outpatient services," "preventive medicine new and established patient," "delivery, antepartum, and postpartum care," "critical care," cesarean delivery and pharmacologic management provided to psychiatric patients, and level three codes for enhanced services for prenatal high risk, shall be paid at the lower of (i) submitted charges, or (ii) 25 percent above the rate in effect on June 30, 1992;

(2) payments for all other services shall be paid at the lower of (i) submitted charges, or (ii) 15.4 percent above the rate in effect on June 30, 1992; and

(3) all physician rates shall be converted from the 50th percentile of 1982 to the 50th percentile of 1989, less the percent in aggregate necessary to equal the above increases except that payment rates for home health agency services shall be the rates in effect on September 30, 1992.

(b) Effective for services rendered on or after January 1, 2000, payment rates for physician and professional services shall be increased by three percent over the rates in effect on December 31, 1999, except for home health agency and family planning agency services. The increases in this paragraph shall be implemented January 1, 2000, for managed care.

(c) Effective for services rendered on or after July 1, 2009, payment rates for physician and professional services shall be reduced by five percent, except that for the period July 1, 2009, through June 30, 2010, payment rates shall be reduced by 6.5 percent for the medical assistance and general assistance medical care programs, over the rates in effect on June 30, 2009. This reduction and the reductions in paragraph (d) do not apply to office or other outpatient visits, preventive medicine visits and family planning visits billed by physicians, advanced practice nurses, or physician assistants in a family planning agency or in one of the following primary care practices: general practice, general internal medicine, general pediatrics, general geriatrics, and family medicine. This reduction and the reductions in paragraph (d) do not apply to federally qualified health centers, rural health centers, and Indian health services. Effective October 1, 2009, payments made to managed care plans and county-based purchasing plans under sections 256B.69, 256B.692, and 256L.12 shall reflect the payment reduction described in this paragraph.

(d) Effective for services rendered on or after July 1, 2010, payment rates for physician and professional services shall be reduced an additional seven percent over the five percent reduction in rates described in paragraph (c). This additional reduction does not apply to physical therapy services, occupational therapy services, and speech pathology and related services provided on or after July 1, 2010. This additional reduction does not apply to physician services billed by a psychiatrist or an advanced practice nurse with a specialty in mental health. Effective October 1, 2010, payments made to managed care plans and county-based purchasing plans under sections 256B.69, 256B.692, and 256L.12 shall reflect the payment reduction described in this paragraph.

(e) Effective for services rendered on or after September 1, 2011, through June 30, 2013, payment rates for physician and professional services shall be reduced three percent from the rates in effect on August 31, 2011. This reduction does not apply to physical therapy services, occupational therapy services, and speech pathology and related services.

(f) Effective for services rendered on or after September 1, 2014, payment rates for physician and professional services, including physical therapy, occupational therapy, speech pathology, and mental health services shall be increased by five percent from the rates in effect on August 31, 2014. In calculating this rate increase, the commissioner shall not include in the base rate for August 31, 2014, the rate increase provided under section 256B.76, subdivision 7. This increase does not apply to federally qualified health centers, rural health centers, and Indian health services. Payments made to managed care plans and county-based purchasing plans shall not be adjusted to reflect payments under this paragraph.

(g) Effective for services rendered on or after July 1, 2015, payment rates for physical therapy, occupational therapy, and speech pathology and related services provided by a hospital meeting the criteria specified in section 62Q.19, subdivision 1, paragraph (a), clause (4), shall be increased by 90 percent from the rates in effect on June 30, 2015. Payments made to managed care plans and county-based purchasing plans shall not be adjusted to reflect payments under this paragraph.

(h) Any rates effective before July 1, 2015, do not apply to early intensive developmental and behavioral intervention (EIDBI) benefits described in section 256B.0949.

(i) Medical assistance may reimburse for the cost incurred to pay the Department of Health for metabolic disorder testing of newborns who are medical assistance recipients when the sample is collected outside of an inpatient hospital setting or freestanding birth center setting because the newborn was born outside of a hospital or freestanding birth center or because it is not medically appropriate to collect the sample during the inpatient stay for the birth."

Page 99, after line 32, insert:

"Sec. 10. **[256L.181] CLIENT ERROR OVERPAYMENT.**

Subdivision 1. **Scope.** (a) Subject to federal law and regulation, when a local agency or the Department of Human Services determines a person under section 256.98, subdivision 4, is liable for recovery of medical assistance incorrectly paid as a result of client error or when a recipient or former recipient receives medical assistance while an appeal is pending pursuant to section 256.045, subdivision 10, and the recipient or former recipient is later determined to have been ineligible for the medical assistance received or for less medical assistance than was received during the pendency of the appeal, the local agency or the Department of Human Services must:

- (1) determine the eligibility months during which medical assistance was incorrectly paid;
- (2) redetermine eligibility for the incorrectly paid months using department policies and procedures that were in effect during each eligibility month that was incorrectly paid; and
- (3) assess an overpayment against persons liable for recovery under section 256.98, subdivision 4, for the amount of incorrectly paid medical assistance pursuant to section 256.98, subdivision 3.

(b) Notwithstanding section 256.98, subdivision 4, medical assistance incorrectly paid to a recipient as a result of client error when the recipient is under 21 years of age is not recoverable from the recipient or recipient's estate. This section does not prohibit the state agency from:

(1) receiving payment from a trust pursuant to United States Code, title 42, section 1396p(d)(4)(A) or (C), for medical assistance paid on behalf of the trust beneficiary for services received at any age; or

(2) claiming against the designated beneficiary of an Achieving a Better Life Experience (ABLE) account or the ABLE account itself pursuant to Code of Federal Regulations, title 26, section 1.529A-2(o), for the amount of the total medical assistance paid for the designated beneficiary at any age after establishment of the ABLE account.

Subd. 2. **Recovering client error overpayment.** (a) The local agency or the Department of Human Services must not attempt recovery of the overpayment amount pursuant to chapter 270A or section 256.0471 when a person liable for a client error overpayment under section 256.98, subdivision 4, voluntarily repays the overpayment amount or establishes a payment plan in writing with the local agency or the Department of Human Services to repay the overpayment amount within 90 days after receiving the overpayment notice or after resolution of a fair hearing regarding the overpayment under section 256.045, whichever is later. When a liable person agrees to a payment plan in writing with the local agency or the Department of Human Services but has not repaid any amount six months after entering the agreement, the local agency or Department of Human Services must pursue recovery under paragraph (b).

(b) If the liable person does not voluntarily repay the overpayment amount or establish a repayment agreement under paragraph (a), the local agency or the Department of Human Services must attempt recovery of the overpayment amount pursuant to chapter 270A when the overpayment amount is eligible for recovery as a public assistance debt under chapter 270A. For any overpaid amount of solely state-funded medical assistance, the local agency or the Department of Human Services must attempt recovery pursuant to section 256.0471.

Subd. 3. **Writing off client error overpayment.** A local agency or the Department of Human Services must not attempt to recover a client error overpayment of less than \$350, unless the overpayment is for medical assistance received pursuant to section 256.045, subdivision 10, during the pendency of an appeal or unless the recovery is from the recipient's estate or the estate of the recipient's surviving spouse. A local agency or the Department of Human Services may write off any remaining balance of a client error overpayment when the overpayment has not been repaid five years after the effective date of the overpayment and the local agency or the Department of Human Services determines it is no longer cost effective to attempt recovery of the remaining balance.

Sec. 11. Laws 2015, chapter 71, article 14, section 2, subdivision 5, as amended by Laws 2015, First Special Session chapter 6, section 1, is amended to read:

Subd. 5. Grant Programs

The amounts that may be spent from this appropriation for each purpose are as follows:

(a) Support Services Grants

	Appropriations by Fund	
General	13,133,000	8,715,000

Federal TANF

96,311,000

96,311,000

(b) Basic Sliding Fee Child Care Assistance Grants

48,439,000

51,559,000

Basic Sliding Fee Waiting List Allocation.

Notwithstanding Minnesota Statutes, section 119B.03, \$5,413,000 in fiscal year 2016 is to reduce the basic sliding fee program waiting list as follows:

(1) The calendar year 2016 allocation shall be increased to serve families on the waiting list. To receive funds appropriated for this purpose, a county must have:

(i) a waiting list in the most recent published waiting list month;

(ii) an average of at least ten families on the most recent six months of published waiting list; and

(iii) total expenditures in calendar year 2014 that met or exceeded 80 percent of the county's available final allocation.

(2) Funds shall be distributed proportionately based on the average of the most recent six months of published waiting lists to counties that meet the criteria in clause (1).

(3) Allocations in calendar years 2017 and beyond shall be calculated using the allocation formula in Minnesota Statutes, section 119B.03.

(4) The guaranteed floor for calendar year 2017 shall be based on the revised calendar year 2016 allocation.

Base Level Adjustment. The general fund base is increased by \$810,000 in fiscal year 2018 and increased by \$821,000 in fiscal year 2019.

(c) Child Care Development Grants

1,737,000

1,737,000

(d) Child Support Enforcement Grants

50,000

50,000

(e) Children's Services Grants

Appropriations by Fund		
General	39,015,000	38,665,000
Federal TANF	140,000	140,000

Safe Place for Newborns. \$350,000 from the general fund in fiscal year 2016 is to distribute information on the Safe Place for Newborns law in Minnesota to increase public awareness of the law. This is a onetime appropriation.

Child Protection. \$23,350,000 in fiscal year 2016 and \$23,350,000 in fiscal year 2017 are to address child protection staffing and services under Minnesota Statutes, section 256M.41. \$1,650,000 in fiscal year 2016 and \$1,650,000 in fiscal year 2017 are for child protection grants to address child welfare disparities under Minnesota Statutes, section 256E.28.

Title IV-E Adoption Assistance. Additional federal reimbursement to the state as a result of the Fostering Connections to Success and Increasing Adoptions Act's expanded eligibility for title IV-E adoption assistance is appropriated to the commissioner for postadoption services, including a parent-to-parent support network.

Adoption Assistance Incentive Grants. Federal funds available during fiscal years 2016 and 2017 for adoption incentive grants are appropriated to the commissioner for postadoption services, including a parent-to-parent support network.

(f) Children and Community Service Grants	56,301,000	56,301,000
(g) Children and Economic Support Grants	26,778,000	26,966,000

Mobile Food Shelf Grants. (a) \$1,000,000 in fiscal year 2016 and \$1,000,000 in fiscal year 2017 are for a grant to Hunger Solutions. This is a onetime appropriation and is available until June 30, 2017.

(b) Hunger Solutions shall award grants of up to \$75,000 on a competitive basis. Grant applications must include:

- (1) the location of the project;
- (2) a description of the mobile program, including size and scope;
- (3) evidence regarding the unserved or underserved nature of the community in which the project is to be located;
- (4) evidence of community support for the project;
- (5) the total cost of the project;
- (6) the amount of the grant request and how funds will be used;
- (7) sources of funding or in-kind contributions for the project that will supplement any grant award;
- (8) a commitment to mobile programs by the applicant and an ongoing commitment to maintain the mobile program; and
- (9) any additional information requested by Hunger Solutions.

(c) Priority may be given to applicants who:

- (1) serve underserved areas;
- (2) create a new or expand an existing mobile program;
- (3) serve areas where a high amount of need is identified;
- (4) provide evidence of strong support for the project from citizens and other institutions in the community;
- (5) leverage funding for the project from other private and public sources; and

(6) commit to maintaining the program on a multilayer basis.

Homeless Youth Act. At least \$500,000 of the appropriation for the Homeless Youth Act must be awarded to providers in greater Minnesota, with at least 25 percent of this amount for new applicant providers. The commissioner shall provide outreach and technical assistance to greater Minnesota providers and new providers to encourage responding to the request for proposals.

Stearns County Veterans Housing. \$85,000 in fiscal year 2016 and \$85,000 in fiscal year 2017 are for a grant to Stearns County to provide administrative funding in support of a service provider serving veterans in Stearns County. The administrative funding grant may be used to support group residential housing services, corrections-related services, veteran services, and other social services related to the service provider serving veterans in Stearns County.

Safe Harbor. \$800,000 in fiscal year 2016 and \$800,000 in fiscal year 2017 are from the general fund for emergency shelter and transitional and long-term housing beds for sexually exploited youth and youth at risk of sexual exploitation. Of this appropriation, \$150,000 in fiscal year 2016 and \$150,000 in fiscal year 2017 are from the general fund for statewide youth outreach workers connecting sexually exploited youth and youth at risk of sexual exploitation with shelter and services.

Minnesota Food Assistance Program. Unexpended funds for the Minnesota food assistance program for fiscal year 2016 do not cancel but are available for this purpose in fiscal year 2017.

Base Level Adjustment. The general fund base is decreased by \$816,000 in fiscal year 2018 and is decreased by \$606,000 in fiscal year 2019.

(h) Health Care Grants

	Appropriations by Fund	
General	536,000	2,482,000
Health Care Access	3,341,000	3,465,000

Grants for Periodic Data Matching for Medical Assistance and MinnesotaCare.

Of the general fund appropriation, \$26,000 in fiscal year 2016 and \$1,276,000 in fiscal year 2017 are for grants to counties for costs related to periodic data matching for medical assistance and MinnesotaCare recipients under Minnesota Statutes, section 256B.0561. The commissioner must distribute these grants to counties in proportion to each county's number of cases in the prior year in the affected programs.

Base Level Adjustment. The general fund base is ~~increased by \$1,637,000 in fiscal year 2018 and increased by \$1,229,000 in fiscal year 2019~~ maintained in fiscal years 2020 and 2021.

(i) Other Long-Term Care Grants 1,551,000 3,069,000

Transition Populations. \$1,551,000 in fiscal year 2016 and \$1,725,000 in fiscal year 2017 are for home and community-based services transition grants to assist in providing home and community-based services and treatment for transition populations under Minnesota Statutes, section 256.478.

Base Level Adjustment. The general fund base is increased by \$156,000 in fiscal year 2018 and by \$581,000 in fiscal year 2019.

(j) Aging and Adult Services Grants 28,463,000 28,162,000

Dementia Grants. \$750,000 in fiscal year 2016 and \$750,000 in fiscal year 2017 are for the Minnesota Board on Aging for regional and local dementia grants authorized in Minnesota Statutes, section 256.975, subdivision 11.

(k) Deaf and Hard-of-Hearing Grants 2,225,000 2,375,000

Deaf, Deafblind, and Hard-of-Hearing Grants. \$350,000 in fiscal year 2016 and \$500,000 in fiscal year 2017 are for deaf and hard-of-hearing grants. The funds must be used to increase the number of deafblind Minnesotans receiving services under Minnesota Statutes, section 256C.261, and to provide linguistically and culturally appropriate mental health services to children who are deaf, deafblind, and hard-of-hearing. This is a onetime appropriation.

Base Level Adjustment. The general fund base is decreased by \$500,000 in fiscal year 2018 and by \$500,000 in fiscal year 2019.

(l) **Disabilities Grants** 20,820,000 20,858,000

State Quality Council. \$573,000 in fiscal year 2016 and \$600,000 in fiscal year 2017 are for the State Quality Council to provide technical assistance and monitoring of person-centered outcomes related to inclusive community living and employment. The funding must be used by the State Quality Council to assure a statewide plan for systems change in person-centered planning that will achieve desired outcomes including increased integrated employment and community living.

(m) **Adult Mental Health Grants**

	Appropriations by Fund	
General	69,992,000	71,244,000
Health Care Access	1,575,000	2,473,000
Lottery Prize	1,733,000	1,733,000

Funding Usage. Up to 75 percent of a fiscal year's appropriation for adult mental health grants may be used to fund allocations in that portion of the fiscal year ending December 31.

Culturally Specific Mental Health Services. \$100,000 in fiscal year 2016 is for grants to nonprofit organizations to provide resources and referrals for culturally specific mental health services to Southeast Asian

veterans born before 1965 who do not qualify for services available to veterans formally discharged from the United States armed forces.

Problem Gambling. \$225,000 in fiscal year 2016 and \$225,000 in fiscal year 2017 are from the lottery prize fund for a grant to the state affiliate recognized by the National Council on Problem Gambling. The affiliate must provide services to increase public awareness of problem gambling, education, and training for individuals and organizations providing effective treatment services to problem gamblers and their families, and research related to problem gambling.

Sustainability Grants. \$2,125,000 in fiscal year 2016 and \$2,125,000 in fiscal year 2017 are for sustainability grants under Minnesota Statutes, section 256B.0622, subdivision 11.

Beltrami County Mental Health Services Grant. \$1,000,000 in fiscal year 2016 and \$1,000,000 in fiscal year 2017 are from the general fund for a grant to Beltrami County to fund the planning and development of a comprehensive mental health services program under article 2, section 41, Comprehensive Mental Health Program in Beltrami County. This is a onetime appropriation.

Base Level Adjustment. The general fund base is increased by \$723,000 in fiscal year 2018 and by \$723,000 in fiscal year 2019. The health care access fund base is decreased by \$1,723,000 in fiscal year 2018 and by \$1,723,000 in fiscal year 2019.

(n) **Child Mental Health Grants**

23,386,000

24,313,000

Services and Supports for First Episode Psychosis. \$177,000 in fiscal year 2017 is for grants under Minnesota Statutes, section 245.4889, to mental health providers to pilot evidence-based interventions for youth at risk of developing or experiencing a first

episode of psychosis and for a public awareness campaign on the signs and symptoms of psychosis. The base for these grants is \$236,000 in fiscal year 2018 and \$301,000 in fiscal year 2019.

Adverse Childhood Experiences. The base for grants under Minnesota Statutes, section 245.4889, to children's mental health and family services collaboratives for adverse childhood experiences (ACEs) training grants and for an interactive Web site connection to support ACEs in Minnesota is \$363,000 in fiscal year 2018 and \$363,000 in fiscal year 2019.

Funding Usage. Up to 75 percent of a fiscal year's appropriation for child mental health grants may be used to fund allocations in that portion of the fiscal year ending December 31.

Base Level Adjustment. The general fund base is increased by \$422,000 in fiscal year 2018 and is increased by \$487,000 in fiscal year 2019.

(o) Chemical Dependency Treatment Support Grants	1,561,000	1,561,000
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Chemical Dependency Prevention. \$150,000 in fiscal year 2016 and \$150,000 in fiscal year 2017 are for grants to nonprofit organizations to provide chemical dependency prevention programs in secondary schools. When making grants, the commissioner must consider the expertise, prior experience, and outcomes achieved by applicants that have provided prevention programming in secondary education environments. An applicant for the grant funds must provide verification to the commissioner that the applicant has available and will contribute sufficient funds to match the grant given by the commissioner. This is a onetime appropriation.

Fetal Alcohol Syndrome Grants. \$250,000 in fiscal year 2016 and \$250,000 in fiscal

year 2017 are for grants to be administered by the Minnesota Organization on Fetal Alcohol Syndrome to provide comprehensive, gender-specific services to pregnant and parenting women suspected of or known to use or abuse alcohol or other drugs. This appropriation is for grants to no fewer than three eligible recipients. Minnesota Organization on Fetal Alcohol Syndrome must report to the commissioner of human services annually by January 15 on the grants funded by this appropriation. The report must include measurable outcomes for the previous year, including the number of pregnant women served and the number of toxic-free babies born.

Base Level Adjustment. The general fund base is decreased by \$150,000 in fiscal year 2018 and by \$150,000 in fiscal year 2019.

Sec. 12. Laws 2020, First Special Session chapter 7, section 1, subdivision 1, as amended by Laws 2021, First Special Session chapter 7, article 2, section 71, is amended to read:

Subdivision 1. **Waivers and modifications; federal funding extension.** When the peacetime emergency declared by the governor in response to the COVID-19 outbreak expires, is terminated, or is rescinded by the proper authority, the following waivers and modifications to human services programs issued by the commissioner of human services pursuant to Executive Orders 20-11 and 20-12 that are required to comply with federal law may remain in effect for the time period set out in applicable federal law or for the time period set out in any applicable federally approved waiver or state plan amendment, whichever is later:

- (1) CV15: allowing telephone or video visits for waiver programs;
- (2) CV17: preserving health care coverage for Medical Assistance and MinnesotaCare as needed to comply with federal guidance from the Centers for Medicare and Medicaid Services, and until the enrollee's first renewal following the resumption of medical assistance and MinnesotaCare renewals after the end of the COVID-19 public health emergency declared by the United States Secretary of Health and Human Services;
- (3) CV18: implementation of federal changes to the Supplemental Nutrition Assistance Program;
- (4) CV20: eliminating cost-sharing for COVID-19 diagnosis and treatment;
- (5) CV24: allowing telephone or video use for targeted case management visits;
- (6) CV30: expanding telemedicine in health care, mental health, and substance use disorder settings;

- (7) CV37: implementation of federal changes to the Supplemental Nutrition Assistance Program;
- (8) CV39: implementation of federal changes to the Supplemental Nutrition Assistance Program;
- (9) CV42: implementation of federal changes to the Supplemental Nutrition Assistance Program;
- (10) CV43: expanding remote home and community-based waiver services;
- (11) CV44: allowing remote delivery of adult day services;
- (12) CV59: modifying eligibility period for the federally funded Refugee Cash Assistance Program;
- (13) CV60: modifying eligibility period for the federally funded Refugee Social Services Program; and
- (14) CV109: providing 15 percent increase for Minnesota Food Assistance Program and Minnesota Family Investment Program maximum food benefits.

Sec. 13. Laws 2021, First Special Session chapter 7, article 1, section 36, is amended to read:

Sec. 36. **RESPONSE TO COVID-19 PUBLIC HEALTH EMERGENCY.**

(a) Notwithstanding Minnesota Statutes, section 256B.057, subdivision 9, 256L.06, subdivision 3, or any other provision to the contrary, the commissioner shall not collect any unpaid premium for a coverage month ~~that occurred during~~ until the enrollee's first renewal after the resumption of medical assistance renewals following the end of the COVID-19 public health emergency declared by the United States Secretary of Health and Human Services.

(b) Notwithstanding any provision to the contrary, periodic data matching under Minnesota Statutes, section 256B.0561, subdivision 2, may be suspended for up to ~~six~~ 12 months following the last day of resumption of medical assistance and MinnesotaCare renewals after the end of the COVID-19 public health emergency declared by the United States Secretary of Health and Human Services.

(c) Notwithstanding any provision to the contrary, the requirement for the commissioner of human services to issue an annual report on periodic data matching under Minnesota Statutes, section 256B.0561, is suspended for one year following the last day of the COVID-19 public health emergency declared by the United States Secretary of Health and Human Services.

(d) The commissioner of human services shall take necessary actions to comply with federal guidance pertaining to the appropriate redetermination of medical assistance enrollee eligibility following the end of the public health emergency and may waive currently existing Minnesota statutes to the minimum level necessary to achieve federal compliance. All changes implemented shall be reported to the chairs and ranking minority members of the legislative committees with jurisdiction over human services within 90 days."

Page 104, delete section 1 and insert:

"Section 1. Minnesota Statutes 2021 Supplement, section 256B.851, subdivision 5, is amended to read:

Subd. 5. **Payment rates; component values.** (a) The commissioner must use the following component values:

- (1) employee vacation, sick, and training factor, 8.71 percent;
- (2) employer taxes and workers' compensation factor, 11.56 percent;
- (3) employee benefits factor, 12.04 percent;
- (4) client programming and supports factor, 2.30 percent;
- (5) program plan support factor, 7.00 percent;
- (6) general business and administrative expenses factor, 13.25 percent;
- (7) program administration expenses factor, 2.90 percent; and
- (8) absence and utilization factor, 3.90 percent.

(b) For purposes of implementation, the commissioner shall use the following implementation components:

- (1) personal care assistance services and CFSS: ~~75.45~~ 79.5 percent;
- (2) enhanced rate personal care assistance services and enhanced rate CFSS: ~~75.45~~ 79.5 percent; and
- (3) qualified professional services and CFSS worker training and development: ~~75.45~~ 79.5 percent.

EFFECTIVE DATE. This section is effective January 1, 2023, or 60 days following federal approval, whichever is later. The commissioner of human services shall notify the revisor of statutes when federal approval is obtained.

Sec. 2. **WORKFORCE INCENTIVE FUND GRANTS.**

Subdivision 1. Grant program established. The commissioner of human services shall establish grants for behavioral health, housing, disability, and home and community-based older adult providers to assist with recruiting and retaining direct support and frontline workers.

Subd. 2. Definitions. (a) For purposes of this section, the following terms have the meanings given.

(b) "Commissioner" means the commissioner of human services.

(c) "Eligible employer" means a nonprofit organization enrolled in a Minnesota health care program or providing housing services that is:

- (1) a provider of home and community-based services under Minnesota Statutes, chapter 245D;
- (2) an agency provider or financial management service provider under Minnesota Statutes, section 256B.85;
- (3) a home care provider licensed under Minnesota Statutes, sections 144A.43 to 144A.482;
- (4) a facility certified as an intermediate care facility for persons with developmental disabilities;
- (5) a provider of home care services as defined in Minnesota Statutes, section 256B.0651, subdivision 1, paragraph (d);
- (6) an agency as defined in Minnesota Statutes, section 256B.0949, subdivision 2;
- (7) a provider of mental health day treatment services for children or adults;
- (8) a provider of emergency services as defined in Minnesota Statutes, section 256E.36;
- (9) a provider of housing support as defined in Minnesota Statutes, chapter 256I;
- (10) a provider of housing stabilization services as defined in Minnesota Statutes, section 256B.051;
- (11) a provider of transitional housing programs as defined in Minnesota Statutes, section 256E.33;
- (12) a provider of substance use disorder services as defined in Minnesota Statutes, chapter 245G;
- (13) an eligible financial management service provider serving people through consumer-directed community supports under Minnesota Statutes, sections 256B.092 and 256B.49, and chapter 256S, and consumer support grants under Minnesota Statutes, section 256.476;
- (14) a provider of customized living services as defined in Minnesota Statutes, section 256S.02, subdivision 12; or
- (15) a provider who serves children with an emotional disorder or adults with mental illness under Minnesota Statutes, section 245I.011 or 256B.0671, providing services, including:
 - (i) assertive community treatment;
 - (ii) intensive residential treatment services;
 - (iii) adult rehabilitative mental health services;
 - (iv) mobile crisis services;
 - (v) children's therapeutic services and supports;
 - (vi) children's residential services;

(vii) psychiatric residential treatment services;

(viii) outpatient mental health treatment provided by mental health professionals, community mental health center services, or certified community behavioral health clinics; and

(ix) intensive mental health outpatient treatment services.

(d) "Eligible worker" means a worker who earns \$30 per hour or less and has worked in an eligible profession for at least six months. Eligible workers may receive up to \$5,000 annually in payments from the workforce incentive fund.

Subd. 3. **Allowable uses of grant money.** (a) Grantees must use money awarded to provide payments to eligible workers for the following purposes:

(1) retention and incentive payments;

(2) postsecondary loan and tuition payments;

(3) child care costs;

(4) transportation-related costs; and

(5) other costs associated with retaining and recruiting workers, as approved by the commissioner.

(b) The commissioner must develop a grant cycle distribution plan that allows for equitable distribution of funding among eligible employer types. The commissioner's determination of the grant awards and amounts is final and is not subject to appeal.

(c) The commissioner must make efforts to prioritize eligible employers owned by persons who are Black, Indigenous, and People of Color and small- to mid-sized eligible employers.

Subd. 4. **Attestation.** As a condition of obtaining grant payments under this section, an eligible employer must attest and agree to the following:

(1) the employer is an eligible employer;

(2) the total number of eligible employees;

(3) the employer will distribute the entire value of the grant to eligible employees, as allowed under this section;

(4) the employer will create and maintain records under subdivision 6;

(5) the employer will not use the money appropriated under this section for any purpose other than the purposes permitted under this section; and

(6) the entire value of any grant amounts must be distributed to eligible employees identified by the provider.

Subd. 5. **Audits and recoupment.** (a) The commissioner may perform an audit under this section up to six years after the grant is awarded to ensure:

- (1) the grantee used the money solely for the purposes stated in subdivision 3;
- (2) the grantee was truthful when making attestations under subdivision 5; and
- (3) the grantee complied with the conditions of receiving a grant under this section.

(b) If the commissioner determines that a grantee used awarded money for purposes not authorized under this section, the commissioner must treat any amount used for a purpose not authorized under this section as an overpayment. The commissioner must recover any overpayment.

Subd. 6. **Self-directed services workforce.** Grants paid to eligible employees providing services within the covered programs defined in Minnesota Statutes, section 256B.0711, do not constitute a change in a term or condition for individual providers in covered programs and are not subject to the state's obligation to meet and negotiate under Minnesota Statutes, chapter 179A.

Subd. 7. **Grants not to be considered income.** (a) For the purposes of this subdivision, "subtraction" has the meaning given in Minnesota Statutes, section 290.0132, subdivision 1, paragraph (a), and the rules in that subdivision apply for this subdivision. The definitions in Minnesota Statutes, section 290.01, apply to this subdivision.

(b) The amount of grant awards received under this section is a subtraction.

(c) Grant awards under this section are excluded from income, as defined in Minnesota Statutes, sections 290.0674, subdivision 2a, and 290A.03, subdivision 3.

(d) Notwithstanding any law to the contrary, grant awards under this section must not be considered income, assets, or personal property for purposes of determining eligibility or recertifying eligibility for:

- (1) child care assistance programs under Minnesota Statutes, chapter 119B;
- (2) general assistance, Minnesota supplemental aid, and food support under Minnesota Statutes, chapter 256D;
- (3) housing support under Minnesota Statutes, chapter 256I;
- (4) Minnesota family investment program and diversionary work program under Minnesota Statutes, chapter 256J; and
- (5) economic assistance programs under Minnesota Statutes, chapter 256P.

(e) The commissioner of human services must not consider grant awards under this section as income or assets under Minnesota Statutes, section 256B.056, subdivision 1a, paragraph (a); 3; or 3c, or for persons with eligibility determined under Minnesota Statutes, section 256B.057, subdivision 3, 3a, or 3b.

EFFECTIVE DATE. This section is effective July 1, 2022.

Sec. 3. **MENTAL HEALTH PROVIDER SUPERVISION GRANT PROGRAM.**

Subdivision 1. **Definitions.** (a) For purposes of this section, the following terms have the meanings given.

(b) "Mental health professional" means an individual with a qualification specified in Minnesota Statutes, section 245I.04, subdivision 2.

(c) "Underrepresented community" has the meaning given in Minnesota Statutes, section 148E.010, subdivision 20.

Subd. 2. **Grant program established.** The commissioner of human services shall award grants to licensed or certified mental health providers that meet the criteria in subdivision 3 to fund supervision of interns and clinical trainees who are working toward becoming licensed mental health professionals and to subsidize the costs of mental health professional licensing applications and examination fees for clinical trainees.

Subd. 3. **Eligible providers.** In order to be eligible for a grant under this section, a mental health provider must:

(1) provide at least 25 percent of the provider's yearly patient encounters to state public program enrollees or patients receiving sliding fee schedule discounts through a formal sliding fee schedule meeting the standards established by the United States Department of Health and Human Services under Code of Federal Regulations, title 42, section 51c.303; or

(2) primarily serve persons from communities of color or underrepresented communities.

Subd. 4. **Application; grant award.** A mental health provider seeking a grant under this section must apply to the commissioner at a time and in a manner specified by the commissioner. The commissioner shall review each application to determine if the application is complete, the mental health provider is eligible for a grant, and the proposed project is an allowable use of grant funds. The commissioner must determine the grant amount awarded to each grantee.

Subd. 5. **Allowable uses of grant money.** A mental health provider must use grant money received under this section:

(1) to pay for direct supervision hours for interns and clinical trainees in an amount up to \$7,500 per intern or clinical trainee;

(2) to establish a program to provide supervision to multiple interns or clinical trainees; or

(3) to pay mental health professional licensing application and examination fees for clinical trainees.

Subd. 6. **Program oversight.** During the grant period the commissioner may require grant recipients to provide the commissioner with information necessary to evaluate the program.

EFFECTIVE DATE. This section is effective July 1, 2022."

Page 105, line 22, delete "(349,333,000)" and insert "(585,901,000)" and delete "97,064,000" and insert "182,791,000"

Page 105, line 24, delete "(234,016,000)" and insert "(406,629,000)" and delete "120,525,000" and insert "185,395,000"

Page 105, line 26, delete "(25,878,000)" and insert "(86,146,000)" and delete "(18,853,000)" and insert "(11,799,000)"

Page 105, line 27, delete "(89,439,000)" and insert "(93,126,000)" and delete "(4,608,000)" and insert "9,195,000"

Page 105, line 31, delete "72,512,000" and insert "72,106,000" and delete "(593,000)" and insert "(14,397,000)"

Page 105, line 32, delete "(89,439,000)" and insert "(93,126,000)" and delete "(4,608,000)" and insert "9,195,000"

Page 105, line 33, delete "(33,580,000)" and insert "(73,738,000)"

Page 106, line 1, delete "(2,617,000)" and insert "(4,175,000)"

Page 106, line 2, delete "(1,003,000)" and insert "318,000" and delete "268,000" and insert "1,613,000"

Page 106, line 3, delete "(1,151,000)" and insert "(1,994,000)" and delete "4,123,000" and insert "9,257,000"

Page 106, line 4, delete "(4,793,000)" and insert "(9,613,000)" and delete "(6,866,000)" and insert "(4,865,000)"

Page 106, line 5, delete "(25,878,000)" and insert "(86,146,000)" and delete "(18,853,000)" and insert "(11,799,000)"

Page 106, line 10, delete "(180,728,000)" and insert "(348,364,000)" and delete "183,979,000" and insert "292,880,000"

Page 106, line 14, delete "(12,889,000)" and insert "(11,560,000)" and delete "(25,318,000)" and insert "(23,867,000)"

Page 107, line 7, delete "335,000" and insert "22,339,000" and delete "441,150,000" and insert "481,929,000"

Page 107, line 10, delete "335,000" and insert "20,403,000" and delete "352,565,000" and insert "419,583,000"

Page 107, line 11, delete "-0-" and insert "1,963,000" and delete "61,517,000" and insert "61,788,000"

Page 107, line 12, delete "26,529,000" and insert "7,000"

Page 107, line 14, delete "539,000" and insert "551,000"

Page 107, line 17, delete "335,000" and insert "403,000" and delete "93,508,000" and insert "95,527,000"

Page 107, line 18, delete "27,750,000" and insert "27,816,000"

Page 108, line 2, delete "12,188,000" and insert "12,829,000"

Page 108, line 3, delete "9,721,000" and insert "10,227,000"

Page 108, line 5, delete "17,677,000" and insert "17,810,000"

Page 108, line 6, delete "17,667,000" and insert "17,810,000"

Page 108, line 7, delete "6,145,000" and insert "5,621,000"

Page 108, delete lines 8 to 15

Page 108, line 16, delete "(b)"

Page 108, line 17, delete "6,799,000" and insert "6,965,000"

Page 108, line 18, delete "6,012,000" and insert "6,680,000"

Page 108, line 21, delete "907,000" and insert "2,436,000"

Page 108, after line 34, insert:

"(c) Responding to COVID-19 in Minnesota Health Care Programs. \$1,000,000 in fiscal year 2023 is for contract assistance relating to the resumption of eligibility and redetermination processes in Minnesota health care programs after the expiration of the federal public health emergency. Contracts entered into under this section are for emergency acquisition and are not subject to solicitation requirements under Minnesota Statutes, section 16C.10, subdivision 2. This is a onetime appropriation. Money is available until spent."

Page 109, line 1, delete "(c)" and insert "(d)"

Page 109, line 2, delete "836,000" and insert "1,666,000"

Page 109, line 3, delete "836,000" and insert "1,651,000"

Page 109, line 9, delete "4,858,000" and insert "7,119,000"

Page 109, line 11, delete "539,000" and insert "551,000"

Page 109, after line 11, insert:

"SEIU Healthcare Arbitration Award.
\$5,444 in fiscal year 2023 is for arbitration
awards resulting from a SEIU grievance. This
is a onetime appropriation."

Page 109, line 13, delete "6,660,000" and insert "9,460,000"

Page 109, line 14, delete "8,395,000" and insert "10,602,000"

Page 109, line 17, delete "285,000" and insert "5,000"

Page 109, line 18, delete "529,000" and insert "7,000"

Page 109, line 20, delete "101,000" and insert "1,000"

Page 109, delete subdivision 8 and insert:

<u>"Subd. 8. Forecasted Programs; Minnesota</u>		
<u>Supplemental Aid</u>	<u>-0-</u>	<u>1,000</u>

<u>Subd. 9. Forecasted Programs; Housing Supports</u>	<u>-0-</u>	<u>1,000</u> "
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Page 109, line 23, delete "15,116,000" and insert "15,257,000"

Page 109, line 29, delete "(8,571,000)" and insert "7,571,000"

Page 109, after line 30, insert

<u>"Subd. 12. Forecasted Programs; Alternative Care</u>	<u>-0-</u>	<u>161,000</u> "
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Renumber the subdivisions in sequence

Page 110, line 2, delete the second "-0-" and insert "(683,000)"

Page 110, line 4, delete "248,359,000" and insert "240,477,000"

Page 110, line 5, delete "546,442,000" and insert "546,025,000"

Page 110, line 7, delete "31,706,000" and insert "31,703,000"

Page 111, line 11, delete "67,088,000" and insert "66,824,000"

Page 111, line 14, delete "4,040,000" and insert "3,882,000"

Page 113, line 22, delete "47,571,000" and insert "47,440,000"

Page 113, line 23, delete "44,900,000" and insert "44,769,000"

Page 113, line 24, before "**Refugee**" insert "**Grant Program;**"

Page 113, line 33, delete "increased" and delete "5,083,000" and insert "5,111,000"

Page 113, after line 34, insert:

"Subd. 17. Grant Programs; Children and Community Service Grants

-0-

-0-

Base Level Adjustment. The Opiate Epidemic Response Base is increased \$100,000 in fiscal year 2025."

Page 114, line 1, delete "15" and insert "18"

Page 114, line 2, delete "69,099,000" and insert "89,099,000"

Page 115, after line 24, insert:

"(f) Emergency Services Grants. \$54,782,000 in fiscal year 2023 is for emergency services grants under Minnesota Statutes, section 256E.36. This is a onetime appropriation and is available until June 30, 2024. Beginning in fiscal year 2024, the base for emergency services grants under Minnesota Statutes, section 256E.36, shall be increased by \$29,751,000."

Page 115, line 25, delete "(f)" and insert "(g)"

Page 115, line 26, delete "61,541,000" and insert "60,429,000"

Page 115, line 28, delete everything after "Grants"

Page 115, after line 28, insert:

	<u>"Appropriations by Fund</u>	
	<u>2022</u>	<u>2023</u>
<u>General Fund</u>	<u>-0-</u>	<u>4,500,000</u>
<u>Health Care Access</u>	<u>1,936,000</u>	<u>64,000</u> "

Page 115, delete line 29 and insert:

"(a) Grant Funding to Support Urban American Indians in Minnesota Health Care Programs. \$2,500,000 in fiscal year 2023 is for funding to the Indian Health Board of Minneapolis to support continued access to health care coverage through Minnesota health care programs, improve access to quality care, and increase vaccination rates among urban American Indians.

(b) Grants for Navigator Organizations.

(1) \$1,936,000 in fiscal year 2023 is from the health care access fund for grants to organizations with a MNsured grant services navigator assister contract in good standing as of June 30, 2022. The grants to each organization must be in proportion to the number of medical assistance and MinnesotaCare enrollees each organization assisted that resulted in a successful enrollment in the second quarter of fiscal year 2020, as determined by MNsured's navigator payment process. This is a onetime appropriation. Money from this appropriation is available until spent. (2) \$2,000,000 in fiscal year 2023 is from the health care access fund for incentive payments as defined in Minnesota Statutes, section 256.962, subdivision 5. The general fund base for this appropriation is \$1,000,000 in fiscal year 2024 and \$0 in fiscal year 2025. Money from this appropriation is available until spent.

(c) Base level adjustment. The general fund base is increased \$3,750,000 in fiscal year 2024 and \$1,250,000 in fiscal year 2025. The health care access fund base is increased \$1,000,000 in fiscal year 2024, and \$0 in fiscal year 2025."

Page 115, line 30, before "Health" insert "(d)"

Page 116, line 4, delete "115,000,000" and insert "118,000,000"

Page 116, delete lines 5 to 11 and insert:

"Workforce Incentive Fund Grant Program. \$118,000,000 in fiscal year 2023 is to assist disability, housing, substance use, and older adult service providers of public programs to pay for incentive benefits to current and new workers. This is a onetime appropriation and is available until June 30, 2025. Three percent of the total amount of the appropriation may be used to administer the program, which could include contracting with a third-party administrator."

Page 116, line 12, delete the second "-0-" and insert "8,200,000"

Page 116, after line 12, insert:

"(a) Electronic Visit Verification (EVV) Stipends. \$6,440,000 in fiscal year 2023 is for onetime stipends of \$200 to bargaining members to offset the potential costs related to people using individual devices to access EVV. \$5,600,000 of the appropriation is for stipends and the remaining 15 percent is for administration of these stipends. This is a onetime appropriation.

(b) Self-Directed Collective Bargaining Agreement; Temporary Rate Increase Memorandum of Understanding. \$1,610,000 in fiscal year 2023 is for onetime stipends for individual providers covered by the SEIU collective bargaining agreement based on the memorandum of understanding related to the temporary rate increase in effect between December 1, 2020, and February 7, 2021. \$1,400,000 of the appropriation is for stipends and the remaining 15 percent is for administration of the stipends. This is a onetime appropriation."

Page 116, line 13, before "**Base**" insert "(c)"

Page 116, line 14, delete "500,000" and insert "805,000"

Page 116, line 15, delete "2,000,000" and insert "2,420,000"

Page 116, line 27, delete "-0-" and insert "20,000,000" and delete "7,927,000" and insert "18,927,000"

Page 117, after line 21, insert:

"(c) Workforce Incentive Fund Grant Program. \$20,000,000 in fiscal year 2022 from the general fund is to provide mental health public program providers the ability to pay for incentive benefits to current and new workers. This is a onetime appropriation and is available until June 30, 2025. Three percent of the total amount of the appropriation may be used to administer the

program, which could include contracting with a third-party administrator.

(d) Cultural and Ethnic Infrastructure Grant Funding. \$5,000,000 in fiscal year 2023 is for increasing cultural and ethnic infrastructure grant funding under Minnesota Statutes, section 245.4661, subdivision 6. This grant funding will be used to alleviate the workforce shortage and will be used to recruit more providers who are Black, Indigenous, and people of color for both mental health and substance use disorder organizations.

(e) Mental Health Provider Grants to Rural and Underserved Communities. \$5,000,000 in fiscal year 2023 is for a grant program to recruit mental health providers in rural areas and underserved communities. This money can be used for reimbursement of supervision costs of interns and clinical trainees, reimbursing staff for master's degree tuition costs in mental health fields, and licensing and exam fees.

(f) Culturally Specific Grants. \$2,000,000 in fiscal year 2023 and \$2,000,000 in fiscal year 2024 are for grants for small to midsize nonprofit organizations who represent and support American Indian, Indigenous, and other communities disproportionately affected by the opiate crisis. These grants utilize traditional healing practices and other culturally congruent and relevant supports to prevent and curb opiate use disorders through housing, treatment, education, aftercare, and other activities as determined by the commissioner. This is a onetime appropriation."

Page 117, line 22, delete "(c)" and insert "(g)"

Page 117, line 23, delete "12,791,000" and insert "23,791,000"

Page 117, line 24, delete "19,916,000" and insert "30,916,000"

Page 117, line 33, delete "2,000,000" and insert "4,000,000"

Page 118, line 25, delete "2,000,000" and insert "4,000,000"

Page 118, line 32, delete "26,000,000" and insert "-0-"

Page 119, line 7, delete "49,500,000" and insert "23,500,000"

Page 119, line 8, delete "49,500,000" and insert "23,500,000"

Renumber the subdivisions in sequence

Page 119, after line 22, insert:

"Sec. 4. Laws 2021, First Special Session chapter 7, article 16, section 2, subdivision 29, is amended to read:

Subd. 29. Grant Programs; Disabilities Grants	31,398,000	31,010,000
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(a) **Training Stipends for Direct Support Services Providers.** \$1,000,000 in fiscal year 2022 is from the general fund for stipends for individual providers of direct support services as defined in Minnesota Statutes, section 256B.0711, subdivision 1. These stipends are available to individual providers who have completed designated voluntary trainings made available through the State-Provider Cooperation Committee formed by the State of Minnesota and the Service Employees International Union Healthcare Minnesota. Any unspent appropriation in fiscal year 2022 is available in fiscal year 2023. This is a onetime appropriation. This appropriation is available only if the labor agreement between the state of Minnesota and the Service Employees International Union Healthcare Minnesota under Minnesota Statutes, section 179A.54, is approved under Minnesota Statutes, section 3.855.

(b) **Parent-to-Parent Peer Support.** \$125,000 in fiscal year 2022 and \$125,000 in fiscal year 2023 are from the general fund for a grant to an alliance member of Parent to Parent USA to support the alliance member's parent-to-parent peer support program for families of children with a disability or special health care need.

(c) **Self-Advocacy Grants.** (1) \$143,000 in fiscal year 2022 and \$143,000 in fiscal year 2023 are from the general fund for a grant under Minnesota Statutes, section 256.477, subdivision 1.

(2) \$105,000 in fiscal year 2022 and \$105,000 in fiscal year 2023 are from the general fund for subgrants under Minnesota Statutes, section 256.477, subdivision 2.

(d) **Minnesota Inclusion Initiative Grants.** \$150,000 in fiscal year 2022 and \$150,000 in fiscal year 2023 are from the general fund for grants under Minnesota Statutes, section 256.4772.

(e) **Grants to Expand Access to Child Care for Children with Disabilities.** \$250,000 in fiscal year 2022 and \$250,000 in fiscal year 2023 are from the general fund for grants to expand access to child care for children with disabilities. Any unspent amount in fiscal year 2022 is available through June 30, 2023. This is a onetime appropriation.

(f) **Parenting with a Disability Pilot Project.** The general fund base includes \$1,000,000 in fiscal year 2024 and \$0 in fiscal year 2025 to implement the parenting with a disability pilot project.

(g) **Base Level Adjustment.** The general fund base is \$29,260,000 in fiscal year 2024 and \$22,260,000 in fiscal year 2025.

Sec. 5. Laws 2021, First Special Session chapter 7, article 16, section 2, subdivision 31, is amended to read:

Subd. 31. Grant Programs; Adult Mental Health Grants

	Appropriations by Fund	
General	98,772,000	98,703,000
Opiate Epidemic Response	2,000,000	2,000,000

(a) **Culturally and Linguistically Appropriate Services Implementation**

Grants. \$2,275,000 in fiscal year 2022 and \$2,206,000 in fiscal year 2023 are from the general fund for grants to disability services, mental health, and substance use disorder treatment providers to implement culturally and linguistically appropriate services standards, according to the implementation and transition plan developed by the commissioner. Any unspent amount in fiscal year 2022 is available through June 30, 2023. The general fund base for this appropriation is \$1,655,000 in fiscal year 2024 and \$0 in fiscal year 2025.

(b) **Base Level Adjustment.** The general fund base is \$93,295,000 in fiscal year 2024 and \$83,324,000 in fiscal year 2025. The opiate epidemic response fund base is \$2,000,000 in fiscal year 2024 and \$0 in fiscal year 2025.

Sec. 6. Laws 2021, First Special Session chapter 7, article 16, section 2, subdivision 33, is amended to read:

Subd. 33. Grant Programs; Chemical Dependency Treatment Support Grants

	Appropriations by Fund	
General	4,273,000	4,274,000
Lottery Prize	1,733,000	1,733,000
Opiate Epidemic Response	500,000	500,000

(a) **Problem Gambling.** \$225,000 in fiscal year 2022 and \$225,000 in fiscal year 2023 are from the lottery prize fund for a grant to the state affiliate recognized by the National Council on Problem Gambling. The affiliate must provide services to increase public awareness of problem gambling, education, training for individuals and organizations providing effective treatment services to problem gamblers and their families, and research related to problem gambling.

(b) **Recovery Community Organization Grants.** \$2,000,000 in fiscal year 2022 and \$2,000,000 in fiscal year 2023 are from the

general fund for grants to recovery community organizations, as defined in Minnesota Statutes, section 254B.01, subdivision 8, to provide for costs and community-based peer recovery support services that are not otherwise eligible for reimbursement under Minnesota Statutes, section 254B.05, as part of the continuum of care for substance use disorders. Any unspent amount in fiscal year 2022 is available through June 30, 2023. The general fund base for this appropriation is \$2,000,000 in fiscal year 2024 and \$0 in fiscal year 2025

(c) **Base Level Adjustment.** The general fund base is \$4,636,000 in fiscal year 2024 and \$2,636,000 in fiscal year 2025. The opiate epidemic response fund base is \$500,000 in fiscal year 2024 and \$0 in fiscal year 2025.

Sec. 7. Laws 2021, First Special Session chapter 7, article 16, section 28, is amended to read:

Sec. 28. **CONTINGENT APPROPRIATIONS.**

Any appropriation in this act for a purpose included in Minnesota's initial state spending plan as described in guidance issued by the Centers for Medicare and Medicaid Services for implementation of section 9817 of the federal American Rescue Plan Act of 2021 is contingent upon approval of that purpose by the Centers for Medicare and Medicaid Services, except for the rate increases specified in article 11, sections 12 and 19. This section expires June 30, 2024.

Sec. 8. Laws 2021, First Special Session chapter 7, article 17, section 3, is amended to read:

Sec. 3. **GRANTS FOR TECHNOLOGY FOR HCBS RECIPIENTS.**

(a) This act includes \$500,000 in fiscal year 2022 and \$2,000,000 in fiscal year 2023 for the commissioner of human services to issue competitive grants to home and community-based service providers. Grants must be used to provide technology assistance, including but not limited to Internet services, to older adults and people with disabilities who do not have access to technology resources necessary to use remote service delivery and telehealth. Any unspent amount in fiscal year 2022 is available through June 30, 2023. The general fund base included in this act for this purpose is \$1,500,000 in fiscal year 2024 and \$0 in fiscal year 2025.

(b) All grant activities must be completed by March 31, 2024.

(c) This section expires June 30, 2024.

Sec. 9. Laws 2021, First Special Session chapter 7, article 17, section 6, is amended to read:

Sec. 6. TRANSITION TO COMMUNITY INITIATIVE.

(a) This act includes \$5,500,000 in fiscal year 2022 and \$5,500,000 in fiscal year 2023 for additional funding for grants awarded under the transition to community initiative described in Minnesota Statutes, section 256.478. Any unspent amount in fiscal year 2022 is available through June 30, 2023. The general fund base in this act for this purpose is \$4,125,000 in fiscal year 2024 and \$0 in fiscal year 2025.

(b) All grant activities must be completed by March 31, 2024.

(c) This section expires June 30, 2024.

Sec. 10. Laws 2021, First Special Session chapter 7, article 17, section 10, is amended to read:

Sec. 10. PROVIDER CAPACITY GRANTS FOR RURAL AND UNDERSERVED COMMUNITIES.

(a) This act includes \$6,000,000 in fiscal year 2022 and \$8,000,000 in fiscal year 2023 for the commissioner to establish a grant program for small provider organizations that provide services to rural or underserved communities with limited home and community-based services provider capacity. The grants are available to build organizational capacity to provide home and community-based services in Minnesota and to build new or expanded infrastructure to access medical assistance reimbursement. Any unspent amount in fiscal year 2022 is available through June 30, 2023. The general fund base in this act for this purpose is \$8,000,000 in fiscal year 2024 and \$0 in fiscal year 2025.

(b) The commissioner shall conduct community engagement, provide technical assistance, and establish a collaborative learning community related to the grants available under this section and work with the commissioner of management and budget and the commissioner of the Department of Administration to mitigate barriers in accessing grant funds. Funding awarded for the community engagement activities described in this paragraph is exempt from state solicitation requirements under Minnesota Statutes, section 16B.97, for activities that occur in fiscal year 2022.

(c) All grant activities must be completed by March 31, 2024.

(d) This section expires June 30, 2024.

Sec. 11. Laws 2021, First Special Session chapter 7, article 17, section 11, is amended to read:

Sec. 11. EXPAND MOBILE CRISIS.

(a) This act includes \$8,000,000 in fiscal year 2022 and \$8,000,000 in fiscal year 2023 for additional funding for grants for adult mobile crisis services under Minnesota Statutes, section 245.4661, subdivision 9, paragraph (b), clause (15). Any unspent amount in fiscal year 2022 is available through June 30, 2023. The general fund base in this act for this purpose is \$4,000,000 in fiscal year 2024 and \$0 in fiscal year 2025.

(b) Beginning April 1, 2024, counties may fund and continue conducting activities funded under this section.

(c) All grant activities must be completed by March 31, 2024.

(d) This section expires June 30, 2024.

Sec. 12. Laws 2021, First Special Session chapter 7, article 17, section 12, is amended to read:

Sec. 12. PSYCHIATRIC RESIDENTIAL TREATMENT FACILITY AND CHILD AND ADOLESCENT MOBILE TRANSITION UNIT.

(a) This act includes \$2,500,000 in fiscal year 2022 and \$2,500,000 in fiscal year 2023 for the commissioner of human services to create children's mental health transition and support teams to facilitate transition back to the community of children from psychiatric residential treatment facilities, and child and adolescent behavioral health hospitals. Any unspent amount in fiscal year 2022 is available through June 30, 2023. The general fund base included in this act for this purpose is \$1,875,000 in fiscal year 2024 and \$0 in fiscal year 2025.

(b) Beginning April 1, 2024, counties may fund and continue conducting activities funded under this section.

(c) This section expires March 31, 2024.

Sec. 13. Laws 2021, First Special Session chapter 7, article 17, section 17, subdivision 3, is amended to read:

Subd. 3. **Respite services for older adults grants.** (a) This act includes \$2,000,000 in fiscal year 2022 and \$2,000,000 in fiscal year 2023 for the commissioner of human services to establish a grant program for respite services for older adults. The commissioner must award grants on a competitive basis to respite service providers. Any unspent amount in fiscal year 2022 is available through June 30, 2023. The general fund base included in this act for this purpose is \$2,000,000 in fiscal year 2024 and \$0 in fiscal year 2025.

(b) All grant activities must be completed by March 31, 2024.

(c) This subdivision expires June 30, 2024."

Renumber the articles and sections in sequence

Amend the title accordingly

And when so amended the bill be re-referred to the Committee on Health and Human Services Finance and Policy without recommendation. Amendments adopted. Report adopted.

Senator Abeler from the Committee on Human Services Reform Finance and Policy, to which was referred

S.F. No. 3816: A bill for an act relating to human services; recodifying long-term care consultation services; amending Minnesota Statutes 2020, sections 144.0724, subdivision 11; 256.975, subdivisions 7a, 7b, 7c, 7d; 256B.051, subdivision 4; 256B.0646; 256B.0659, subdivision 3a; 256B.0911, subdivisions 1, 3c, 3d, 3e, by adding subdivisions; 256B.0913, subdivision 4; 256B.092, subdivisions 1a, 1b; 256B.0922, subdivision 1; 256B.49, subdivisions 12, 13; 256S.02,

subdivisions 15, 20; 256S.06, subdivisions 1, 2; 256S.10, subdivision 2; Minnesota Statutes 2021 Supplement, sections 144.0724, subdivisions 4, 12; 256B.49, subdivision 14; 256B.85, subdivisions 2, 5; 256S.05, subdivision 2; repealing Minnesota Statutes 2020, section 256B.0911, subdivisions 2b, 2c, 3, 3b, 3g, 4d, 4e, 5, 6; Minnesota Statutes 2021 Supplement, section 256B.0911, subdivisions 1a, 3a, 3f.

Reports the same back with the recommendation that the bill be amended as follows:

Page 9, line 12, delete "integrated" and insert "coordinated"

Page 10, line 31, after "representative" insert ", if any,"

Page 21, line 2, after "plan" insert ". The county must document its compliance with the local objectives"

And when so amended the bill do pass. Amendments adopted. Report adopted.

SECOND READING OF SENATE BILLS

S.F. Nos. 3202, 3501, 3745, 2647, and 3816 were read the second time.

SECOND READING OF HOUSE BILLS

H.F. No. 3249 was read the second time.

INTRODUCTION AND FIRST READING OF SENATE BILLS

The following bills were read the first time.

Senator Cwodzinski introduced--

S.F. No. 4127: A bill for an act relating to education finance; creating a third tier of local optional revenue; appropriating money; amending Minnesota Statutes 2021 Supplement, section 126C.10, subdivision 2e.

Referred to the Committee on Education Finance and Policy.

Senator Johnson Stewart introduced--

S.F. No. 4128: A bill for an act relating to capital investment; appropriating money for Opus Public Space in Minnetonka; authorizing the sale and issuance of state bonds.

Referred to the Committee on Capital Investment.

Senator Ingebrigtsen introduced--

S.F. No. 4129: A bill for an act relating to public safety; establishing a certification process for public safety telecommunicators; appropriating money; amending Minnesota Statutes 2020, section 403.02, by adding a subdivision; Minnesota Statutes 2021 Supplement, section 403.11, subdivision

1; proposing coding for new law in Minnesota Statutes, chapter 403; repealing Minnesota Statutes 2020, section 403.02, subdivision 17c.

Referred to the Committee on Judiciary and Public Safety Finance and Policy.

Senator Kiffmeyer introduced--

S.F. No. 4130: A bill for an act relating to elections; making technical and policy changes to provisions related to elections administration; amending Minnesota Statutes 2020, sections 5B.06; 201.061, subdivision 3; 201.071, subdivisions 1, 3, 8; 201.12, subdivision 2; 201.13, subdivision 3; 201.1611, subdivision 1; 202A.16, subdivision 1; 203B.01, by adding a subdivision; 203B.02, by adding a subdivision; 203B.081, subdivisions 1, 2; 203B.11, subdivision 1; 203B.16, subdivision 2; 204B.06, subdivision 4a; 204B.09, subdivision 1; 204B.13, by adding a subdivision; 204B.19, subdivision 6; 204B.21, subdivision 2; 204B.45, subdivisions 1, 2; 204B.46; 204C.15, subdivision 1; 204C.33, subdivision 3; 204D.19, subdivision 2; 204D.22, subdivision 3; 204D.23, subdivision 2; 205.13, subdivision 5; 205A.10, subdivision 5; 205A.12, subdivision 5; 207A.12; 209.021, subdivision 2; 211B.11, subdivision 1; 367.03, subdivision 6; 447.32, subdivision 4; Minnesota Statutes 2021 Supplement, sections 201.225, subdivision 2; 204B.16, subdivision 1.

Referred to the Committee on State Government Finance and Policy and Elections.

Senators Ruud and Hawj introduced--

S.F. No. 4131: A bill for an act relating to natural resources; proposing an amendment to the Minnesota Constitution, article XI, section 14; providing for the renewal of the environment and natural resources trust fund; making changes to the Legislative-Citizen Commission on Minnesota Resources; amending Minnesota Statutes 2020, sections 116P.05, subdivision 1; 349A.08, subdivision 5.

Referred to the Committee on Environment and Natural Resources Policy and Legacy Finance.

Senator Hoffman introduced--

S.F. No. 4132: A bill for an act relating to occupational licensing; creating the Board of Sign Language Interpreters and Translitterators; requiring licensure; authorizing rulemaking; amending Minnesota Statutes 2020, section 546.44, subdivision 1; proposing coding for new law as Minnesota Statutes, chapter 156B.

Referred to the Committee on Human Services Reform Finance and Policy.

Senator Howe introduced--

S.F. No. 4133: A bill for an act relating to motor vehicles; requiring license plates to be issued for the lifetime of the plate holder; allowing the transfer of license plates; amending Minnesota Statutes 2020, sections 168.021, subdivision 2a; 168.10, subdivision 1i; 168.12, subdivisions 2, 2b, 2c, 2d, 2e, 2g; 168.124, subdivision 4; 168.125, subdivision 1c; 168.128, subdivision 2; 169.79, subdivision 7; Minnesota Statutes 2021 Supplement, section 168.12, subdivision 1; repealing Minnesota Statutes 2020, sections 168.121, subdivision 3; 168.123, subdivision 4; 168.1235,

subdivision 4; 168.1253, subdivision 5; 168.1255, subdivision 3; 168.1256, subdivision 3; 168.1282, subdivision 3; 168.129, subdivision 4; 168.1294, subdivision 3; 168.1295, subdivision 4; 168.1296, subdivision 4; 168.1298, subdivision 4; 168.1299, subdivision 3; Minnesota Statutes 2021 Supplement, sections 168.1284, subdivision 3; 168.1285, subdivision 3; 168.1286, subdivision 3.

Referred to the Committee on Transportation Finance and Policy.

Senators Ingebrigtsen, Duckworth, Coleman, and Draheim introduced--

S.F. No. 4134: A bill for an act relating to public safety; appropriating money to enhance the law enforcement program at Alexandria Technical and Community College.

Referred to the Committee on Judiciary and Public Safety Finance and Policy.

Senator Lang introduced--

S.F. No. 4135: A bill for an act relating to animal health; prohibiting new registrations for farmed white-tailed deer; establishing a voluntary farmed white-tailed deer buyout program; appropriating money; amending Minnesota Statutes 2020, section 35.155, subdivision 10.

Referred to the Committee on Agriculture and Rural Development Finance and Policy.

Senator Lang introduced--

S.F. No. 4136: A bill for an act relating to transportation; appropriating money for a study and construction at the intersection of marked Trunk Highway 9 and marked Trunk Highway 23 in the city of New London.

Referred to the Committee on Transportation Finance and Policy.

Senator Weber introduced--

S.F. No. 4137: A bill for an act relating to capital investment; appropriating money for capital improvements related to the Lincoln-Pipestone Rural Water System; authorizing the sale and issuance of state bonds.

Referred to the Committee on Capital Investment.

Senator Weber introduced--

S.F. No. 4138: A bill for an act relating to taxation; county program aid; increasing aid appropriation; amending Minnesota Statutes 2021 Supplement, section 477A.03, subdivision 2b.

Referred to the Committee on Taxes.

Senators Eichorn, Ingebrigtsen, and Lang introduced--

S.F. No. 4139: A bill for an act relating to natural resources; appropriating money for a forest inventory.

Referred to the Committee on Environment and Natural Resources Finance.

Senator Champion introduced--

S.F. No. 4140: A bill for an act relating to human services; establishing the Office of Juvenile Restorative Justice; requiring local steering committees to establish local juvenile restorative justice programs; establishing grants; requiring reports; appropriating money; proposing coding for new law in Minnesota Statutes, chapter 260B.

Referred to the Committee on Judiciary and Public Safety Finance and Policy.

Senator Champion introduced--

S.F. No. 4141: A bill for an act relating to juvenile justice; establishing Task Force on a Coordinated Approach to Juvenile Wellness and Justice; requiring a report; appropriating money.

Referred to the Committee on Judiciary and Public Safety Finance and Policy.

Senator Champion introduced--

S.F. No. 4142: A bill for an act relating to capital investment; appropriating money for a facility to provide career and technical education and job training in renewable energy, energy efficiency, energy storage, electric vehicles, and grid technologies.

Referred to the Committee on Jobs and Economic Growth Finance and Policy.

Senator Senjem introduced--

S.F. No. 4143: A bill for an act relating to capital investment; appropriating money for improvements at the Wasioja Historic District seminary ruins in Dodge County; authorizing the sale and issuance of state bonds.

Referred to the Committee on Capital Investment.

Senators Housley, Senjem, Frenz, Dibble, and Coleman introduced--

S.F. No. 4144: A bill for an act relating to energy; modifying certain utility requirements; prohibiting certain restrictions on the use of residential solar energy systems; amending Minnesota Statutes 2020, sections 216B.164, by adding a subdivision; 515.07; 515B.2-103; 515B.3-102; proposing coding for new law in Minnesota Statutes, chapter 500.

Referred to the Committee on Civil Law and Data Practices Policy.

Senators Wiger, Isaacson, Clausen, Cwodzinski, and Kunesh introduced--

S.F. No. 4145: A bill for an act relating to education finance; modifying the growth factor for adult basic education aid; increasing the maximum contact hour rate; appropriating money; amending Minnesota Statutes 2020, section 124D.531, subdivisions 1, 4.

Referred to the Committee on Education Finance and Policy.

Senator Johnson Stewart introduced--

S.F. No. 4146: A bill for an act relating to higher education; appropriating money for land surveying programs.

Referred to the Committee on Higher Education Finance and Policy.

Senators Dornink, Housley, Abeler, Senjem, and Coleman introduced--

S.F. No. 4147: A bill for an act relating to higher education; establishing a grant program for postsecondary students preparing to become licensed peace officers in Minnesota; requiring a report; appropriating money; proposing coding for new law in Minnesota Statutes, chapter 136A.

Referred to the Committee on Higher Education Finance and Policy.

Senator Coleman introduced--

S.F. No. 4148: A bill for an act relating to capital investment; appropriating money for a shooting sports facility in the city of Victoria; authorizing the sale and issuance of state bonds.

Referred to the Committee on Capital Investment.

Senator Benson introduced--

S.F. No. 4149: A bill for an act relating to human services; creating a legislative study group on restructuring the Department of Human Services; requiring a report.

Referred to the Committee on Human Services Reform Finance and Policy.

Senator Wiklund introduced--

S.F. No. 4150: A bill for an act relating to education finance; authorizing a grant for the Beacons School Success program; requiring a report; appropriating money.

Referred to the Committee on Education Finance and Policy.

Senator Wiklund introduced--

S.F. No. 4151: A bill for an act relating to behavioral health; modifying requirements for children's therapeutic services and supports and certified community behavioral health clinics; amending Minnesota Statutes 2020, section 245A.03, subdivision 2; Minnesota Statutes 2021 Supplement, section 256B.0625, subdivision 5m; proposing coding for new law in Minnesota Statutes, chapter 245I; repealing Minnesota Statutes 2020, section 256B.0943, subdivisions 8, 8a, 10, 12, 13; Minnesota Statutes 2021 Supplement, sections 245.735, subdivisions 3, 5, 6; 256B.0943, subdivisions 1, 2, 3, 4, 5, 5a, 6, 7, 9, 11.

Referred to the Committee on Human Services Reform Finance and Policy.

Senators Ruud and Hoffman introduced--

S.F. No. 4152: A bill for an act relating to state lands; modifying duties and powers of the school trust lands director; amending Minnesota Statutes 2020, section 127A.353, subdivision 2; Minnesota Statutes 2021 Supplement, section 127A.353, subdivision 4.

Referred to the Committee on Mining and Forestry Policy.

Senator Weber introduced--

S.F. No. 4153: A bill for an act relating to workforce development; establishing a southwestern Minnesota workforce development scholarship pilot program; appropriating money.

Referred to the Committee on Jobs and Economic Growth Finance and Policy.

Senators Rarick and Bakk introduced--

S.F. No. 4154: A bill for an act relating to higher education; modifying the permanent university fund for mineral research; amending Minnesota Statutes 2020, section 137.022, subdivision 4.

Referred to the Committee on Higher Education Finance and Policy.

Senators Dibble, Dziedzic, Port, Pappas, and Kunesh introduced--

S.F. No. 4155: A bill for an act relating to housing; creating specific notice requirements for evictions due to nonpayment of rent; expanding eligibility for discretionary and mandatory expungements for eviction case court files; prohibiting rental discrimination based on a tenant's receipt of public housing assistance; limiting public access to pending eviction case court actions; amending Minnesota Statutes 2020, sections 363A.09, subdivisions 1, 2, by adding a subdivision; 484.014, subdivisions 2, 3; 504B.135; 504B.321.

Referred to the Committee on Civil Law and Data Practices Policy.

Senators Dibble, Port, Dziedzic, Pappas, and Kunesh introduced--

S.F. No. 4156: A bill for an act relating to judiciary; raising the age at which a child may be permitted to testify outside the courtroom from under 12 to under 18; amending Minnesota Statutes 2020, section 595.02, subdivision 4.

Referred to the Committee on Civil Law and Data Practices Policy.

Senators Murphy, Hawj, Pappas, and Wiklund introduced--

S.F. No. 4157: A bill for an act relating to early childhood; appropriating money for a grant to support savings accounts for children in St. Paul.

Referred to the Committee on Education Finance and Policy.

Senator Chamberlain introduced--

S.F. No. 4158: A bill for an act relating to taxation; property; extending property tax exemption for certain property owned by an Indian tribe; amending Minnesota Statutes 2020, section 272.02, subdivision 98.

Referred to the Committee on Taxes.

Senator Carlson introduced--

S.F. No. 4159: A bill for an act relating to cosmetology; modifying Board of Cosmetologist Examiners provisions; amending Minnesota Statutes 2020, sections 155A.20; 155A.23, subdivisions 8, 11, 18, by adding a subdivision; 155A.25, subdivision 1a; 155A.27, subdivisions 1, 5a, 6, 10, by adding a subdivision; 155A.271, subdivision 1; 155A.29, subdivision 1; 155A.30, subdivisions 2, 3, 4, 11.

Referred to the Committee on State Government Finance and Policy and Elections.

Senator Howe introduced--

S.F. No. 4160: A bill for an act relating to workforce development; appropriating money to the Minnesota Association of Workforce Boards.

Referred to the Committee on Jobs and Economic Growth Finance and Policy.

Senators Eaton and Dziejczak introduced--

S.F. No. 4161: A bill for an act relating to natural resources; increasing per diems for certain boards, councils, and commissions; amending Minnesota Statutes 2020, sections 85.536, subdivision 2; 85A.01, subdivision 1; 89A.03, subdivision 5; 97A.056, subdivision 2; 103B.101, subdivision 2; 114D.30, subdivision 4; 116C.03, subdivision 2a; 116P.05, subdivision 1.

Referred to the Committee on Environment and Natural Resources Policy and Legacy Finance.

Senators Newton, Senjem, Hoffman, and Abeler introduced--

S.F. No. 4162: A bill for an act relating to capital investment; appropriating money for capital improvements at the National Sports Center; authorizing the sale and issuance of state bonds.

Referred to the Committee on Capital Investment.

Senators Mathews and Rarick introduced--

S.F. No. 4163: A bill for an act relating to energy; requiring an advanced nuclear study; requiring a report; appropriating money.

Referred to the Committee on Energy and Utilities Finance and Policy.

Senator Jasinski introduced--

S.F. No. 4164: A bill for an act relating to transportation; specifying limit on use of trunk highway fund for historic state bridge projects; appropriating money; proposing coding for new law in Minnesota Statutes, chapter 161.

Referred to the Committee on Transportation Finance and Policy.

Senator Abeler introduced--

S.F. No. 4165: A bill for an act relating to state government; making human services forecast adjustments; appropriating money.

Referred to the Committee on Human Services Reform Finance and Policy.

Senator Wiklund introduced--

S.F. No. 4166: A bill for an act relating to health; establishing requirements to screen certain hospital patients before discharge for eligibility for health coverage or assistance; amending Minnesota Statutes 2020, section 144.586, by adding a subdivision.

Referred to the Committee on Health and Human Services Finance and Policy.

Senator Wiklund introduced--

S.F. No. 4167: A bill for an act relating to human services; appropriating money for persons experiencing homelessness in Hennepin County.

Referred to the Committee on Human Services Reform Finance and Policy.

Senator Utke introduced--

S.F. No. 4168: A bill for an act relating to capital investment; appropriating money for a new hospital in the city of Mahnommen; authorizing the sale and issuance of state bonds.

Referred to the Committee on Capital Investment.

Senator Utke introduced--

S.F. No. 4169: A bill for an act relating to capital investment; appropriating money for Phase 2 of a multiple-use trail to connect Itasca State Park to the Heartland Trail; authorizing the sale and issuance of state bonds.

Referred to the Committee on Capital Investment.

Senator Dzedzic introduced--

S.F. No. 4170: A bill for an act relating to housing; establishing a grant program administered by the Housing Finance Agency for sprinkler systems in certain residential buildings; appropriating money.

Referred to the Committee on Housing Finance and Policy.

Senators Dzedzic and Dibble introduced--

S.F. No. 4171: A bill for an act relating to taxation; establishing bicycle commuting expense reimbursement credit; amending Minnesota Statutes 2020, section 290.06, subdivision 28.

Referred to the Committee on Taxes.

Senators Dzedzic and Clausen introduced--

S.F. No. 4172: A bill for an act relating to education; individual income; modifying eligibility for the student loan credit; making the credit refundable; amending Minnesota Statutes 2021 Supplement, section 290.0682.

Referred to the Committee on Taxes.

Senator Limmer introduced--

S.F. No. 4173: A bill for an act relating to corrections; providing no charge for phone calls for health care by persons incarcerated in a county jail; amending Minnesota Statutes 2020, section 641.15, subdivision 2.

Referred to the Committee on Judiciary and Public Safety Finance and Policy.

Senator Limmer introduced--

S.F. No. 4174: A bill for an act relating to public safety; requiring release of peace officer recordings from portable recording systems when there is deadly force; amending Minnesota Statutes 2020, section 13.825, subdivision 2.

Referred to the Committee on Civil Law and Data Practices Policy.

Senator Hawj introduced--

S.F. No. 4175: A bill for an act relating to veterans; appropriating money to the commissioner of veterans affairs to provide temporary housing options and outreach activities for homeless veterans and former service members.

Referred to the Committee on Veterans and Military Affairs Finance and Policy.

Senator Howe introduced--

S.F. No. 4176: A bill for an act relating to taxation; sales and use; providing an exemption for construction materials used in the St. Joseph's Jacob Wetterling Community Center; amending Minnesota Statutes 2021 Supplement, section 297A.71, subdivision 52.

Referred to the Committee on Taxes.

Senators Koran, Mathews, Dornink, and Howe introduced--

S.F. No. 4177: A bill for an act relating to business organizations; establishing a Bail Abatement Nonprofit Exclusion (BANE) Act; proposing coding for new law in Minnesota Statutes, chapter 317A.

Referred to the Committee on Civil Law and Data Practices Policy.

Senator Kiffmeyer introduced--

S.F. No. 4178: A bill for an act relating to state government; amending procedures for discipline and discharge of certain state employees; amending Minnesota Statutes 2020, section 43A.33, subdivision 3.

Referred to the Committee on State Government Finance and Policy and Elections.

Senator Kiffmeyer introduced--

S.F. No. 4179: A bill for an act relating to state government; specifying the types of collateral the Executive Council may approve for deposit with the commissioner of management and budget; amending Minnesota Statutes 2020, section 9.031, subdivision 3.

Referred to the Committee on State Government Finance and Policy and Elections.

Senator Kiffmeyer introduced--

S.F. No. 4180: A bill for an act relating to state government; changing trust account requirements; amending Minnesota Statutes 2020, sections 82.75, subdivision 8; 327C.095, subdivisions 12, 13, 16.

Referred to the Committee on Housing Finance and Policy.

Senators Miller, Eichorn, Bigham, Lang, and Rosen introduced--

S.F. No. 4181: A bill for an act relating to veterans affairs; appropriating money for upgrades and enhancements to the Preston, Bemidji, and Montevideo state veterans homes building projects; requiring a report.

Referred to the Committee on Veterans and Military Affairs Finance and Policy.

Senator Kiffmeyer introduced--

S.F. No. 4182: A bill for an act relating to consumer data protection; requiring direct-to-consumer genetic testing companies to provide disclosure notices and obtain consent; proposing coding for new law in Minnesota Statutes, chapter 325F.

Referred to the Committee on Commerce and Consumer Protection Finance and Policy.

Senator Ingebrigtsen introduced--

S.F. No. 4183: A bill for an act relating to health; appropriating money to support local and regional emergency medical services.

Referred to the Committee on Health and Human Services Finance and Policy.

Senator Murphy introduced--

S.F. No. 4184: A bill for an act relating to agriculture; appropriating money for a report on regional and local food systems; requiring a report.

Referred to the Committee on Agriculture and Rural Development Finance and Policy.

Senator Lang introduced--

S.F. No. 4185: A bill for an act relating to veterans; appropriating money for veterans service organizations.

Referred to the Committee on Veterans and Military Affairs Finance and Policy.

Senator Duckworth introduced--

S.F. No. 4186: A bill for an act relating to capital investment; appropriating money for a new aircraft shelter at the Duluth Air National Guard Base; authorizing the sale and issuance of state bonds.

Referred to the Committee on Capital Investment.

Senator Nelson introduced--

S.F. No. 4187: A bill for an act relating to early childhood; making changes to the quality rating improvement system and the early learning scholarships program; amending Minnesota Statutes 2020, section 124D.165, subdivisions 2, 3; Minnesota Statutes 2021 Supplement, section 124D.142, subdivision 2.

Referred to the Committee on Education Finance and Policy.

Senator Nelson introduced--

S.F. No. 4188: A bill for an act relating to health; modifying data collected under the all-payer claims database and uses of this data; requiring the commissioner of health to study and report on systems used by health plan companies and third-party administrators to pay health care providers; amending Minnesota Statutes 2020, sections 62U.04, subdivision 11, by adding a subdivision; 62U.10, subdivision 7; Minnesota Statutes 2021 Supplement, section 62U.04, subdivisions 4, 5.

Referred to the Committee on Commerce and Consumer Protection Finance and Policy.

Senator Nelson introduced--

S.F. No. 4189: A bill for an act relating to human services; establishing a statewide pool to assess certain out-of-home placements; providing grants to certain counties for lost funding; developing Family First Prevention Services Act programming; providing funding for a third-party contract to ensure compliance with Family First Prevention Services Act requirement; providing for Family First Prevention Services Act county funding; appropriating money.

Referred to the Committee on Human Services Reform Finance and Policy.

Senator Champion introduced--

S.F. No. 4190: A bill for an act relating to public safety; appropriating money for prevention services, intervention services, and barrier reduction services relating to youth involved or at risk of becoming involved in the criminal or juvenile justice system; requiring a report.

Referred to the Committee on Judiciary and Public Safety Finance and Policy.

Senator Dahms introduced--

S.F. No. 4191: A bill for an act relating to commerce; modifying provisions governing unfair practices by motor vehicle manufacturers; amending Minnesota Statutes 2020, sections 80E.03, subdivision 4; 80E.13.

Referred to the Committee on Commerce and Consumer Protection Finance and Policy.

Senator Utke introduced--

S.F. No. 4192: A resolution urging the President of the United States to consider the current geopolitical tensions and support policies and take measures to ensure America's long-term energy affordability, security, leadership and progress, including actions that result in the continued operation of existing oil and natural gas pipelines, the construction of new pipelines, and an end to restrictions on developing our nation's onshore and offshore oil and natural gas resources.

Referred to the Committee on Energy and Utilities Finance and Policy.

Senator Coleman introduced--

S.F. No. 4193: A bill for an act relating to transportation; authorizing a county to establish speed limits under certain circumstances; amending Minnesota Statutes 2020, section 169.14, subdivision 5h.

Referred to the Committee on Transportation Finance and Policy.

Senator Dibble introduced--

S.F. No. 4194: A bill for an act relating to public safety; establishing a public safety innovation board; providing for community safety grants; providing for law enforcement grants and policy; requiring reports; appropriating money; amending Minnesota Statutes 2020, sections 214.10, subdivision 10; 626.843, by adding a subdivision; 626.8473, subdivision 3; 626.89, subdivision 17; Laws 2021, First Special Session chapter 11, article 1, section 15, subdivision 3; proposing coding for new law in Minnesota Statutes, chapter 299A.

Referred to the Committee on Judiciary and Public Safety Finance and Policy.

Senator López Franzen introduced--

S.F. No. 4195: A bill for an act relating to public safety; establishing public safety aid for local governments and Tribal governments; providing for grant programs; modifying certain law related to domestic abuse victims; requiring reports; appropriating money; amending Minnesota Statutes 2020, sections 611A.31, subdivision 2, by adding a subdivision; 611A.32, subdivisions 1, 1a, 2, 3; 611A.345; 611A.35; proposing coding for new law in Minnesota Statutes, chapters 299A; 477A.

Referred to the Committee on Judiciary and Public Safety Finance and Policy.

Senator Newman introduced--

S.F. No. 4196: A bill for an act relating to transportation; prohibiting certain expenditures relating to federal funding.

Referred to the Committee on Transportation Finance and Policy.

MOTIONS AND RESOLUTIONS

Senator Rarick moved that the name of Senator Duckworth be added as a co-author to S.F. No. 495. The motion prevailed.

Senator Senjem moved that the name of Senator Dornink be added as a co-author to S.F. No. 1582. The motion prevailed.

Senator Putnam moved that the name of Senator McEwen be added as a co-author to S.F. No. 1598. The motion prevailed.

Senator Kunesh moved that the name of Senator Isaacson be added as a co-author to S.F. No. 1965. The motion prevailed.

Senator Klein moved that the name of Senator Dziezic be added as a co-author to S.F. No. 2545. The motion prevailed.

Senator Jasinski moved that the name of Senator Nelson be added as a co-author to S.F. No. 2622. The motion prevailed.

Senator Jasinski moved that the name of Senator Nelson be added as a co-author to S.F. No. 2624. The motion prevailed.

Senator Duckworth moved that the name of Senator Rosen be added as a co-author to S.F. No. 2678. The motion prevailed.

Senator Rest moved that the names of Senators Pratt and Bakk be added as co-authors to S.F. No. 2959. The motion prevailed.

Senator Rosen moved that the name of Senator Pratt be added as a co-author to S.F. No. 3266. The motion prevailed.

Senator Bigham moved that her name be stricken as chief author, shown as a co-author, and the name of Senator Benson be added as chief author to S.F. No. 3317. The motion prevailed.

Senator Benson moved that the name of Senator Wiklund be added as a co-author to S.F. No. 3317. The motion prevailed.

Senator Hoffman moved that the name of Senator Nelson be added as a co-author to S.F. No. 3416. The motion prevailed.

Senator Clausen moved that the name of Senator Rosen be added as a co-author to S.F. No. 3566. The motion prevailed.

Senator Nelson moved that the name of Senator Putnam be added as a co-author to S.F. No. 3594. The motion prevailed.

Senator Champion moved that the name of Senator Fateh be added as a co-author to S.F. No. 3626. The motion prevailed.

Senator Champion moved that the name of Senator Fateh be added as a co-author to S.F. No. 3627. The motion prevailed.

Senator Nelson moved that the name of Senator Anderson be added as a co-author to S.F. No. 3695. The motion prevailed.

Senator Rest moved that the name of Senator López Franzen be added as a co-author to S.F. No. 3697. The motion prevailed.

Senator Mathews moved that the name of Senator Anderson be added as a co-author to S.F. No. 3715. The motion prevailed.

Senator Housley moved that the name of Senator Newton be added as a co-author to S.F. No. 3730. The motion prevailed.

Senator Champion moved that the name of Senator Kent be added as a co-author to S.F. No. 3789. The motion prevailed.

Senator Duckworth moved that the name of Senator Rosen be added as a co-author to S.F. No. 3823. The motion prevailed.

Senator Nelson moved that the name of Senator Dziejdzic be added as a co-author to S.F. No. 3879. The motion prevailed.

Senator Wiklund moved that the name of Senator Senjem be added as a co-author to S.F. No. 3908. The motion prevailed.

Senator Wiklund moved that the name of Senator Marty be added as a co-author to S.F. No. 3910. The motion prevailed.

Senator Pappas moved that the name of Senator Champion be added as a co-author to S.F. No. 3914. The motion prevailed.

Senator Pappas moved that the name of Senator Champion be added as a co-author to S.F. No. 3916. The motion prevailed.

Senator Duckworth moved that the name of Senator Rosen be added as a co-author to S.F. No. 3940. The motion prevailed.

Senator Chamberlain moved that the name of Senator Wiger be added as a co-author to S.F. No. 3956. The motion prevailed.

Senator Senjem moved that the name of Senator Johnson Stewart be added as a co-author to S.F. No. 4049. The motion prevailed.

Senator Rosen moved that the names of Senators Eaton, Clausen, and Koran be added as co-authors to S.F. No. 4025. The motion prevailed.

Senator Anderson moved that the name of Senator Duckworth be added as a co-author to S.F. No. 4090. The motion prevailed.

Senator Newton moved that the names of Senators Klein and Duckworth be added as co-authors to S.F. No. 4103. The motion prevailed.

Senator Newton moved that the name of Senator Duckworth be added as a co-author to S.F. No. 4104. The motion prevailed.

Senator Coleman moved that the name of Senator Wiklund be added as a co-author to S.F. No. 4109. The motion prevailed.

Senator Dziejdzic moved that the names of Senators Rest and Port be added as co-authors to S.F. No. 4123. The motion prevailed.

Senator Dziejdzic moved that the names of Senators Putnam and Rest be added as co-authors to S.F. No. 4124. The motion prevailed.

Senator Housley moved that S.F. No. 3195 be withdrawn from the Committee on Aging and Long-Term Care Policy and re-referred to the Committee on Human Services Reform Finance and Policy. The motion prevailed.

Senator Anderson introduced --

Senate Resolution No. 110: A Senate resolution congratulating Maverick James Gilson of Montrose, Minnesota, for earning the rank of Eagle Scout.

Referred to the Committee on Rules and Administration.

SPECIAL ORDERS

Pursuant to Rule 26, Senator Miller, Chair of the Committee on Rules and Administration, designated the following bills a Special Orders Calendar to be heard immediately:

H.F. No. 2875.

SPECIAL ORDER

H.F. No. 2875: A bill for an act relating to energy; modifying the Prairie Island Net Zero project; establishing a grant; appropriating money; amending Laws 2020, chapter 118, sections 3, subdivision 3; 5, subdivision 2; Laws 2021, First Special Session chapter 4, article 2, section 3, by adding a subdivision.

H.F. No. 2875 was read the third time and placed on its final passage.

The question was taken on the passage of the bill.

The roll was called, and there were yeas 66 and nays 0, as follows:

Those who voted in the affirmative were:

Abeler	Draheim	Isaacson	Mathews	Rosen
Anderson	Duckworth	Jasinski	McEwen	Ruud
Bakk	Dziedzic	Johnson	Miller	Senjem
Benson	Eaton	Johnson Stewart	Murphy	Tomassoni
Bigham	Eichorn	Kent	Nelson	Torres Ray
Carlson	Eken	Kiffmeyer	Newman	Utke
Chamberlain	Frentz	Klein	Newton	Weber
Champion	Gazelka	Koran	Osmek	Westrom
Clausen	Goggin	Kunesh	Pappas	Wiger
Coleman	Hawj	Lang	Port	Wicklund
Cwodzinski	Hoffman	Latz	Pratt	
Dahms	Housley	Limmer	Putnam	
Dibble	Howe	López Franzen	Rarick	
Dornink	Ingebrigtsen	Marty	Rest	

Pursuant to Rule 40, Senator Johnson cast the affirmative vote on behalf of the following Senator: Newman.

Pursuant to Rule 40, Senator Frentz cast the affirmative vote on behalf of the following Senators: Eken and Marty.

Pursuant to Rule 40, Senator Bakk cast the affirmative vote on behalf of the following Senator: Tomassoni.

So the bill passed and its title was agreed to.

MEMBERS EXCUSED

Senator Fateh was excused from the Session of today.

ADJOURNMENT

Senator Miller moved that the Senate do now adjourn until 12:15 p.m., Wednesday, March 23, 2022. The motion prevailed.

Cal R. Ludeman, Secretary of the Senate

