

1.1 moves to amend H.F. No. 1152 as follows:

1.2 Delete everything after the enacting clause and insert:

1.3 "Section 1. **WORKING GROUP ON PREVENTING INFECTIOUS DISEASE**
1.4 **AMONG HOME CARE AGENCY EMPLOYEES.**

1.5 (a) The commissioner of health shall convene a working group to review the current
1.6 federal and state regulatory and safety processes in place which impact vaccination rates
1.7 among employees of Minnesota's licensed-only home care providers for hepatitis B and
1.8 influenza, and screening for tuberculosis. The purpose of the working group is to develop
1.9 and recommend methods to reduce the costs of vaccinating and screening home care
1.10 employees and to enable licensed home care agencies to more efficiently meet the state's
1.11 infection control requirements and public health objectives.

1.12 (b) The working group shall consider and report on the costs, risks, and benefits
1.13 of the following options:

1.14 (1) a contract between the commissioner and a third party entity to provide these
1.15 services to all licensed home care agencies;

1.16 (2) funding for local public health boards in select regions to perform necessary
1.17 vaccinations for this workforce;

1.18 (3) home care providers obtaining stock supplies of tuberculin, hepatitis B vaccine,
1.19 and influenza vaccine, and providing this service directly to the provider's workforce; and

1.20 (4) no change in law or policy.

1.21 (c) The review must consider the extent to which changes to Minnesota Statutes or
1.22 Minnesota Rules are necessary to achieve this purposes.

1.23 (d) Membership shall include:

1.24 (1) the commissioner of health;

1.25 (2) the commissioner of human services;

1.26 (3) a representative selected by the Minnesota Board of Nursing;

1.27 (4) a representative selected by the Minnesota Board of Pharmacy;

- 2.1 (5) a representative selected by the Minnesota Board of Medicine;
2.2 (6) two representatives selected by associations representing licensed home care
2.3 providers;
2.4 (7) a Minnesota Occupational Safety and Health Administration representative;
2.5 (8) a representative of a statewide medical association;
2.6 (9) a representative of a statewide nursing association;
2.7 (10) a representative of a statewide public health association; and
2.8 (11) other interested stakeholders that the commissioner deems necessary for the
2.9 working group.

2.10 (e) The commissioner shall report the results of the working group to the legislative
2.11 committees in the house of representatives and the senate with jurisdiction over health
2.12 and human services by February 15, 2016.

2.13 (f) The working group sunsets 60 days after the commissioner submits the report
2.14 required under paragraph (e).

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

2.16 Sec. 2. **APPROPRIATION.**

2.17 \$..... in fiscal year 2016 is appropriated from the general fund to the commissioner
2.18 of health for the working group on infectious disease prevention among home care agency
2.19 employees. This is a onetime appropriation."