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State of Minnesota

HOUSE OF REPRESENTATIVES

NINETY-FOURTH SESSION

H. F. No. 4446

03/18/2026 Authored by Johnson, P.; Witte and Stier
The bill was read for the first time and referred to the Committee on Public Safety Finance and Policy

1.1 A bill for an act
1.2 relating to public safety; expanding eligibility for survivor benefits to include when
1.3 a public safety officer dies in the line of duty from an exposure-related cancer;
1.4 amending Minnesota Statutes 2024, section 299A.41, subdivision 3, by adding
1.5 subdivisions; proposing coding for new law in Minnesota Statutes, chapter 299A.

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

1.7 Section 1. Minnesota Statutes 2024, section 299A.41, is amended by adding a subdivision
1.8 to read:

1.9 Subd. 1a. Carcinogen. "Carcinogen" means an agent that is: (1) classified by the
1.10 International Agency for Research on Cancer under Group 1 or Group 2A; and (2) reasonably
1.11 linked to an exposure-related cancer.

1.12 Sec. 2. Minnesota Statutes 2024, section 299A.41, is amended by adding a subdivision to
1.13 read:

1.14 Subd. 2a. Exposure-related cancer. "Exposure-related cancer" means:

1.15 (1) bladder cancer;

1.16 (2) brain cancer;

1.17 (3) breast cancer;

1.18 (4) cervical cancer;

1.19 (5) colon cancer;

1.20 (6) colorectal cancer;

1.21 (7) esophageal cancer;

- 2.1 (8) kidney cancer;
- 2.2 (9) leukemia;
- 2.3 (10) lung cancer;
- 2.4 (11) malignant melanoma;
- 2.5 (12) mesothelioma;
- 2.6 (13) multiple myeloma;
- 2.7 (14) non-Hodgkin lymphoma;
- 2.8 (15) ovarian cancer;
- 2.9 (16) prostate cancer;
- 2.10 (17) skin cancer;
- 2.11 (18) stomach cancer;
- 2.12 (19) testicular cancer;
- 2.13 (20) thyroid cancer; and
- 2.14 (21) any form of cancer added to this definition pursuant to an update in accordance
- 2.15 with section 299A.412.

2.16 Sec. 3. Minnesota Statutes 2024, section 299A.41, subdivision 3, is amended to read:

2.17 Subd. 3. **Killed in the line of duty.** (a) "Killed in the line of duty" does not include

2.18 deaths from natural causes, except as provided in this subdivision. In the case of a public

2.19 safety officer, killed in the line of duty includes the death of a public safety officer caused

2.20 by accidental means while the public safety officer is acting in the course and scope of

2.21 duties as a public safety officer. Killed in the line of duty also means if a public safety officer

2.22 dies as the direct and proximate result of a heart attack, stroke, or vascular rupture, that

2.23 officer shall be presumed to have died as the direct and proximate result of a personal injury

2.24 sustained in the line of duty if:

2.25 (1) that officer, while on duty:

2.26 (i) engaged in a situation, and that engagement involved nonroutine stressful or strenuous

2.27 physical law enforcement, fire suppression, rescue, hazardous material response, emergency

2.28 medical services, prison security, disaster relief, or other emergency response activity; or

2.29 (ii) participated in a training exercise, and that participation involved nonroutine stressful

2.30 or strenuous physical activity;

3.1 (2) that officer died as a result of a heart attack, stroke, or vascular rupture suffered:

3.2 (i) while engaging or participating under clause (1);

3.3 (ii) while still on duty after engaging or participating under clause (1); or

3.4 (iii) not later than 24 hours after engaging or participating under clause (1); and

3.5 (3) the presumption is not overcome by competent medical evidence to the contrary.

3.6 (b) "Killed in the line of duty" ~~also means that the officer~~ includes an officer who died
3.7 due to suicide:

3.8 (1) secondary to a diagnosis of posttraumatic stress disorder as described in the most
3.9 recent edition of the Diagnostic and Statistical Manual of Mental Disorders published by
3.10 the American Psychiatric Association; or

3.11 (2) within 45 days of the end of exposure, while on duty, to a traumatic event.

3.12 (c) Killed in the line of duty includes an officer who died from an exposure-related
3.13 cancer that was a result of exposure to a carcinogen when:

3.14 (1) the exposure occurred while the public safety officer was acting in the course and
3.15 scope of duties as a public safety officer;

3.16 (2) the public safety officer began serving as a public safety officer not fewer than five
3.17 years before the date of the public safety officer's diagnosis of exposure-related cancer;

3.18 (3) the public safety officer was diagnosed with exposure-related cancer not more than
3.19 15 years after the public safety officer's last date of active service as a public safety officer;
3.20 and

3.21 (4) the exposure-related cancer directly and proximately results in the death of the public
3.22 safety officer.

3.23 (d) The presumption under paragraph (c) shall not apply if competent medical evidence
3.24 establishes that the exposure of the public safety officer to the carcinogen was not a
3.25 substantial contributing factor in the death of the public safety officer.

3.26 **Sec. 4. [299A.412] UPDATES TO COVERED EXPOSURE-RELATED CANCERS.**

3.27 **Subdivision 1. Commissioner review; updates.** (a) From time to time but not less than
3.28 once every three years, the commissioner shall:

3.29 (1) review the definition of exposure-related cancer in section 299A.41, subdivision 2a;
3.30 and

4.1 (2) if appropriate, update the definition in accordance with this paragraph by rule.

4.2 (b) The commissioner shall make an update under paragraph (a) when the commissioner
 4.3 finds an update to be appropriate based on competent medical evidence of significant risk
 4.4 to public safety officers of developing the form of exposure-related cancer that is the subject
 4.5 of the update from engagement in the officer's public safety activities.

4.6 (c) The competent medical evidence described in paragraph (b) may include
 4.7 recommendations, risk assessments, and scientific studies by:

4.8 (1) the National Institute for Occupational Safety and Health;

4.9 (2) the National Toxicology Program;

4.10 (3) the National Academies of Sciences, Engineering, and Medicine; or

4.11 (4) the International Agency for Research on Cancer.

4.12 **Subd. 2. Petitions to add to the list of exposure-related cancers.** (a) Any person may
 4.13 petition the commissioner to add a form of cancer to the definition of exposure-related
 4.14 cancer in section 299A.41, subdivision 2a.

4.15 (b) A petition shall provide information to demonstrate that there is sufficient competent
 4.16 medical evidence of significant risk to public safety officers of developing the cancer from
 4.17 engagement in the officer's public safety activities.

4.18 (c) Not later than 180 days after receipt of a petition under paragraph (b), the
 4.19 commissioner shall refer the petition to appropriate medical experts for review; analysis,
 4.20 including risk assessment and scientific study; and recommendation.

4.21 (d) The commissioner shall consider each recommendation under paragraph (c) and
 4.22 promptly take appropriate action in connection with the recommendation pursuant to
 4.23 subdivision 1.

4.24 (e) Not later than 30 days after taking any substantive action in connection with a
 4.25 recommendation under paragraph (d), the commissioner shall notify the chairs and ranking
 4.26 minority members of the house of representatives and senate committees with jurisdiction
 4.27 over public safety policy and finance.

4.28 **Sec. 5. [299A.413] EXPOSURE-RELATED CANCER CLAIMS.**

4.29 (a) An individual may file a claim that is predicated upon a public safety officer's line
 4.30 of duty death that is the direct and proximate result of an exposure-related cancer if the
 4.31 death occurred on or after January 1, 2020.

5.1 (b) Notwithstanding any law to the contrary, a person eligible to file a claim for an
5.2 exposure-related cancer line of duty death of a public safety officer that occurred after
5.3 January 1, 2020, but before final enactment of this act, has three years from the date of final
5.4 enactment of this act to file the claim.