1.1	A bill for an act
1.2	relating to health; appropriating money for school-based health clinics.
1.3	BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MINNESOTA:
1.4	Section 1. APPROPRIATION; SCHOOL-BASED HEALTH CLINICS.
1.5	Subdivision 1. Appropriation. \$250,000 in fiscal year 2022 and \$250,000 in fiscal year
1.6	2023 are appropriated from the general fund to the commissioner of health for a grant to
1.7	the Minnesota School-Based Alliance for grants to:
1.8	(1) ensure that entities providing School-Based Health Center services in public schools
1.9	meet and adhere to the basic definition of a School-Based Health Center (SBHC), including
1.10	school-linked programming, and meet and adhere to the basic core competencies of the
1.11	evidence-based, nationally recognized model of safety net health care;
1.12	(2) participate in state interagency dialogue on school-based and linked health care,
1.13	including mental health and behavioral health for school-aged children and youth;
1.14	(3) participate in the planning and funding of interagency health and education equity
1.15	priorities; and
1.16	(4) develop strategic interagency partnerships among education, health, and human
1.17	services stakeholders to strengthen the role of SBHCs as part of existing and emerging
1.18	health and education equity programming efforts.
1.19	Subd. 2. Definitions. (a) For purposes of this section, the following terms have the
1.20	meanings given.

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2.1	(b) "Comprehensive School-Based Health Center" or "School-Based Health Center"
2.2	(SBHC) means a safety net health care delivery model that is in or near a school facility
2.3	and that offers comprehensive medical care including preventative and behavioral health
2.4	services.
2.5	(c) "Sponsoring organizations or sponsoring facilities" means health care providers,
2.6	clinics, outpatient facilities, and nonprofit health care organizations.
2.7	(d) "Minnesota School-Based Health Alliance" means a volunteer run leadership and
2.8	advocacy organization, under the umbrella organization Minnesota Community Care, which
2.9	is the fiscal agent and is a federally qualified health care center.
2.10	Subd. 3. Services provided. Services shall be provided to all students within a school's
2.11	student membership regardless of ability to pay. A SBHC may extend services to students
2.12	from other public schools as well as to associated family members and the community at
2.13	large.
2.14	Subd. 4. SBHC operation. A comprehensive SBHC shall:
2.11	
2.15	(1) be administered by a sponsoring facility in partnership with the school. Sponsoring
2.16	facilities include hospitals, public health departments, community health centers, nonprofit
2.17	health care agencies, foundations, and local academic educational agencies;
2.18	(2) provide primary health services to children and youth through licensed and qualified
2.19	health professionals in accordance with federal, state, and local law;
2.20	(3) when not on school property, have an established relationship to one or more schools
2.21	in the community and operate to serve those school students and the surrounding community
2.22	when applicable and appropriate; and
2.23	(4) collaborate and consult with one or more partnering organizations to more fully
2.24	complement the basic safety net health care services, including the following:
2.25	(i) chronic medical condition management;
2.26	(ii) mental health counseling;
2.27	(iii) acute care for illness or injury;
2.28	(iv) dental care;
2.29	(v) vision care;
2.30	(vi) stress management skills;
2.31	(vii) nutritional counseling;

Section 1.

3.1 (viii) additional	services	that address	social	determinants	of health;	and
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3.2 (ix) emerging services such as mobile health and telehealth.