

1.1 moves to amend H.F. No. 1064, the first engrossment, as follows:

1.2 Page 1, after line 4, insert:

1.3 "Section 1. Minnesota Statutes 2012, section 145.928, subdivision 3, is amended to read:

1.4 Subd. 3. **Measurable outcomes.** (a) The commissioner, in consultation with the
1.5 community partners listed in subdivision 2, and minority-led organizations, shall establish
1.6 measurable outcomes to achieve the goal specified in subdivision 1 and to determine the
1.7 effectiveness of the grants and other activities funded under this section in reducing health
1.8 disparities in the priority areas identified in subdivision 1. The development of measurable
1.9 outcomes must be completed before any funds are distributed under this section.

1.10 (b) Each grant recipient must demonstrate to the commissioner the process
1.11 implemented to achieve the measured outcomes established pursuant to paragraph (a).

1.12 (c) For purposes of this section, minority-led organizations are by definition part of
1.13 a community that experiences disparate health outcomes, including, but not limited to,
1.14 the Isuroon Project.

1.15 Sec. 2. Minnesota Statutes 2012, section 145.928, subdivision 6, is amended to read:

1.16 Subd. 6. **Process.** (a) The commissioner, in consultation with the community
1.17 partners listed in subdivision 2, and minority-led organizations, shall develop the criteria
1.18 and procedures used to allocate grants under this section. In developing the criteria, the
1.19 commissioner shall establish an administrative cost limit for grant recipients. At the time a
1.20 grant is awarded, the commissioner must provide a grant recipient with information on the
1.21 outcomes established according to subdivision 3.

1.22 (b) A grant recipient must coordinate its activities to reduce health disparities with
1.23 other entities receiving funds under this section that are in the grant recipient's service area.

1.24 (c) The commissioner must award 50 percent of grant funds available under this
1.25 section to minority-led organizations. For grants awarded under this paragraph, up to 30

2.1 percent of each grant must be distributed as advanced payment to grantees for operational
2.2 costs.

2.3 Sec. 3. Minnesota Statutes 2012, section 145.928, is amended by adding a subdivision
2.4 to read:

2.5 Subd. 10a. **Capacity building grants.** The commissioner shall award up to
2.6 20 percent of available funds for grants to organizations led by and comprised of
2.7 members from communities experiencing disparate health outcomes to build capacity
2.8 within communities in order to reduce health disparities for the priority areas listed in
2.9 subdivisions 7 and 8. Eligible organizations must submit proposals to the commissioner.

2.10 Sec. 4. Minnesota Statutes 2012, section 145.928, subdivision 13, is amended to read:

2.11 Subd. 13. **Report.** The commissioner shall submit a biennial report to the legislature
2.12 on the local community projects, tribal government, and community health board
2.13 prevention activities funded under this section. These reports must include information
2.14 on grant recipients, activities that were conducted using grant funds, evaluation data,
2.15 and outcome measures, ~~if available~~. These reports are due by January 15 of every other
2.16 year, beginning in the year 2003.

2.17 Sec. 5. **ELIMINATING HEALTH DISPARITIES GRANTS.**

2.18 Eliminating health disparities grants awarded in 2012, pursuant to Minnesota
2.19 Statutes, section 145.928, are available until expended."

2.20 Renummer the sections in sequence and correct the internal references

2.21 Amend the title accordingly