

1.1 ..... moves to amend H.F. No. 2127, the delete everything amendment  
1.2 (H2127DE1), as follows:

1.3 Page 24, line 7, after "occurs" insert "if the change is reported by the tenth of the month  
1.4 following the month that the change occurred. If the decrease in income is not reported by  
1.5 the tenth of the month following the month that the change occurred, the change in income  
1.6 shall be effective the month following the month that the change is reported"

1.7 Page 25, line 21, delete "CV..." and insert "Executive Order 21-15"

1.8 Page 25, line 24, delete "CV..." and insert "CV.04.A4"

1.9 Page 26, after line 4, insert:

1.10 "Sec. .... 2021 REPORT TO LEGISLATURE ON RUNAWAY AND HOMELESS  
1.11 YOUTH.

1.12 Subdivision 1. Report development. The commissioner of human services is exempt  
1.13 from preparing the report required under Minnesota Statutes, section 256K.45, subdivision  
1.14 2, in 2023 and shall instead update the information in the 2007 legislative report on runaway  
1.15 and homeless youth. In developing the updated report, the commissioner must use existing  
1.16 data, studies, and analysis provided by state, county, and other entities including:

1.17 (1) Minnesota Housing Finance Agency analysis on housing availability;

1.18 (2) Minnesota state plan to end homelessness;

1.19 (3) continuum of care counts of youth experiencing homelessness and assessments as  
1.20 provided by Department of Housing and Urban Development (HUD) required coordinated  
1.21 entry systems;

1.22 (4) biannual Department of Human Services report on the Homeless Youth Act;

1.23 (5) Wilder Research homeless study;

- 2.1 (6) Voices of Youth Count sponsored by Hennepin County; and
- 2.2 (7) privately funded analysis, including:
- 2.3 (i) nine evidence-based principles to support youth in overcoming homelessness;
- 2.4 (ii) return on investment analysis conducted for YouthLink by Foldes Consulting; and
- 2.5 (iii) evaluation of Homeless Youth Act resources conducted by Rainbow Research.

2.6 Subd. 2. **Key elements; due date.** (a) The report must include three key elements where

2.7 significant learning has occurred in the state since the 2007 report, including:

- 2.8 (1) unique causes of youth homelessness;
- 2.9 (2) targeted responses to youth homelessness, including significance of positive youth
- 2.10 development as fundamental to each targeted response; and
- 2.11 (3) recommendations based on existing reports and analysis on what it will take to end
- 2.12 youth homelessness.

2.13 (b) To the extent data is available, the report must include:

- 2.14 (1) general accounting of the federal and philanthropic funds leveraged to support
- 2.15 homeless youth activities;
- 2.16 (2) general accounting of the increase in volunteer responses to support youth
- 2.17 experiencing homelessness; and
- 2.18 (3) data-driven accounting of geographic areas or distinct populations that have gaps in
- 2.19 service or are not yet served by homeless youth responses.

2.20 (c) The commissioner of human services shall consult with and incorporate the expertise

2.21 of community-based providers of homeless youth services and other expert stakeholders to

2.22 complete the report. The commissioner shall submit the report to the chairs and ranking

2.23 minority members of the legislative committees with jurisdiction over youth homelessness

2.24 by December 15, 2022."

2.25 Page 37, line 32, delete "after"

2.26 Page 38, lines 1 and 2, delete the new language

2.27 Page 38, line 12, delete "inform or"

2.28 Page 38, line 15, after "assessment" insert "where the local welfare agency may rely on

2.29 law enforcement data"

2.30 Page 53, line 17, delete "8" and insert "9"

3.1 Page 64, line 27, delete "and was placed at a permanent adoptive placement" and insert  
3.2 "due to adoption"

3.3 Page 64, line 29, delete "is 16 years of age or older," and delete ", and was placed with  
3.4 a relative to"

3.5 Page 64, line 30, delete everything before the semicolon and insert "due to transfer of  
3.6 permanent legal and physical custody to a relative, or tribal equivalent, when the youth was  
3.7 16 years of age or older"

3.8 Page 88, after line 14, insert:

3.9 "Sec. .... Minnesota Statutes 2020, section 260E.20, subdivision 2, is amended to read:

3.10 Subd. 2. **Face-to-face contact.** (a) Upon receipt of a screened in report, the local welfare  
3.11 agency shall conduct a face-to-face contact with the child reported to be maltreated and  
3.12 with the child's primary caregiver sufficient to complete a safety assessment and ensure the  
3.13 immediate safety of the child.

3.14 (b) The face-to-face contact with the child and primary caregiver shall occur immediately  
3.15 if sexual abuse or substantial child endangerment is alleged and within five calendar days  
3.16 for all other reports. If the alleged offender was not already interviewed as the primary  
3.17 caregiver, the local welfare agency shall also conduct a face-to-face interview with the  
3.18 alleged offender in the early stages of the assessment or investigation. Face-to-face contact  
3.19 with the child and primary caregiver in response to a report alleging sexual abuse or  
3.20 substantial child endangerment may be postponed for no more than five calendar days if  
3.21 the child is residing in a location that is confirmed to restrict contact with the alleged offender  
3.22 as established in guidelines issued by the commissioner, or if the local welfare agency is  
3.23 pursuing a court order for the child's caregiver to produce the child for questioning under  
3.24 section 260E.22, subdivision 5.

3.25 (c) At the initial contact with the alleged offender, the local welfare agency or the agency  
3.26 responsible for assessing or investigating the report must inform the alleged offender of the  
3.27 complaints or allegations made against the individual in a manner consistent with laws  
3.28 protecting the rights of the person who made the report. The interview with the alleged  
3.29 offender may be postponed if it would jeopardize an active law enforcement investigation.

3.30 (d) The local welfare agency or the agency responsible for assessing or investigating  
3.31 the report must provide the alleged offender with an opportunity to make a statement. The  
3.32 alleged offender may submit supporting documentation relevant to the assessment or  
3.33 investigation."

4.1 Page 90, after line 15, insert:

4.2 "Sec. 37. **REVISOR INSTRUCTION.**

4.3 The revisor of statutes shall place the following first grade headnote in chapter 260C  
 4.4 preceding Minnesota Statutes, sections 260C.70 to 260C.714: PLACEMENT OF CHILDREN  
 4.5 IN QUALIFIED RESIDENTIAL TREATMENT."

4.6 Page 117, line 18, delete "paragraphs (e), (f), and (g) are" and insert "paragraph (e) is"

4.7 Page 121, line 20, strike "three" and insert "ten"

4.8 Page 130, line 28, delete "...." and insert "30"

4.9 Page 130, line 32, delete "...." and insert "25"

4.10 Page 131, line 23, delete "calendar"

4.11 Page 133, line 22, delete "45" and insert "25"

4.12 Page 143, line 26, delete "sections 245A.191; and" and insert "section" and delete ",  
 4.13 are" and insert "is"

4.14 Page 157, line 6, delete "upon" and insert "90 days after"

4.15 Page 158, after line 4, insert:

4.16 "Sec. .... Minnesota Statutes 2020, section 256B.097, is amended to read:

4.17 **256B.097 STATE REGIONAL QUALITY ASSURANCE, QUALITY**  
 4.18 **IMPROVEMENT, AND LICENSING SYSTEM AND SYSTEMS IMPROVEMENT**  
 4.19 **FOR MINNESOTANS WHO HAVE DISABILITIES.**

4.20 Subdivision 1. **Scope.** (a) In order to improve the quality of services provided to  
 4.21 Minnesotans with disabilities and to meet the requirements of the federally approved home  
 4.22 and community-based waivers under section 1915c of the Social Security Act, a State  
 4.23 Quality Assurance, Quality Improvement, and Licensing System for Minnesotans receiving  
 4.24 disability services is enacted. This system is a partnership between the Department of Human  
 4.25 Services and the State Quality Council established under subdivision 3.

4.26 (b) This system is a result of the recommendations from the Department of Human  
 4.27 Services' licensing and alternative quality assurance study mandated under Laws 2005, First  
 4.28 Special Session chapter 4, article 7, section 57, and presented to the legislature in February  
 4.29 2007.

4.30 (c) The disability services eligible under this section include:

5.1 (1) the home and community-based services waiver programs for persons with  
5.2 developmental disabilities under section 256B.092, subdivision 4, or section 256B.49,  
5.3 including brain injuries and services for those who qualify for nursing facility level of care  
5.4 or hospital facility level of care and any other services licensed under chapter 245D;

5.5 (2) home care services under section 256B.0651;

5.6 (3) family support grants under section 252.32;

5.7 (4) consumer support grants under section 256.476;

5.8 (5) semi-independent living services under section 252.275; and

5.9 (6) services provided through an intermediate care facility for the developmentally  
5.10 disabled.

5.11 (d) For purposes of this section, the following definitions apply:

5.12 (1) "commissioner" means the commissioner of human services;

5.13 (2) "council" means the State Quality Council under subdivision 3;

5.14 (3) "Quality Assurance Commission" means the commission under section 256B.0951;  
5.15 and

5.16 (4) "system" means the State Quality Assurance, Quality Improvement and Licensing  
5.17 System under this section.

5.18 **Subd. 2. Duties of commissioner of human services.** (a) The commissioner of human  
5.19 services shall establish the State Quality Council under subdivision 3.

5.20 (b) The commissioner shall initially delegate authority to perform licensing functions  
5.21 and activities according to section 245A.16 to a host county in Region 10. The commissioner  
5.22 must not license or reimburse a participating facility, program, or service located in Region  
5.23 10 if the commissioner has received notification from the host county that the facility,  
5.24 program, or service has failed to qualify for licensure.

5.25 (c) The commissioner may conduct random licensing inspections based on outcomes  
5.26 adopted under section 256B.0951, subdivision 3, at facilities or programs, and of services  
5.27 eligible under this section. The role of the random inspections is to verify that the system  
5.28 protects the safety and well-being of persons served and maintains the availability of  
5.29 high-quality services for persons with disabilities.

5.30 (d) The commissioner shall ensure that the federal home and community-based waiver  
5.31 requirements are met and that incidents that may have jeopardized safety and health or

6.1 violated services-related assurances, civil and human rights, and other protections designed  
6.2 to prevent abuse, neglect, and exploitation, are reviewed, investigated, and acted upon in a  
6.3 timely manner.

6.4 (e) The commissioner shall seek a federal waiver by July 1, 2012, to allow intermediate  
6.5 care facilities for persons with developmental disabilities to participate in this system.

6.6 Subd. 3. **State Quality Council.** (a) There is hereby created a State Quality Council  
6.7 which must define regional quality councils, and carry out a community-based,  
6.8 person-directed quality review component, and a comprehensive system for effective incident  
6.9 reporting, investigation, analysis, and follow-up.

6.10 (b) By August 1, 2011, the commissioner of human services shall appoint the members  
6.11 of the initial State Quality Council. Members shall include representatives from the following  
6.12 groups:

6.13 (1) disability service recipients and their family members;

6.14 (2) during the first four years of the State Quality Council, there must be at least three  
6.15 members from the Region 10 stakeholders. As regional quality councils are formed under  
6.16 subdivision 4, each regional quality council shall appoint one member;

6.17 (3) disability service providers;

6.18 (4) disability advocacy groups; and

6.19 (5) county human services agencies and staff from the Department of Human Services  
6.20 and Ombudsman for Mental Health and Developmental Disabilities.

6.21 (c) Members of the council who do not receive a salary or wages from an employer for  
6.22 time spent on council duties may receive a per diem payment when performing council  
6.23 duties and functions.

6.24 (d) The State Quality Council shall:

6.25 (1) assist the Department of Human Services in fulfilling federally mandated obligations  
6.26 by monitoring disability service quality and quality assurance and improvement practices  
6.27 in Minnesota;

6.28 (2) establish state quality improvement priorities with methods for achieving results and  
6.29 provide an annual report to the legislative committees with jurisdiction over policy and  
6.30 funding of disability services on the outcomes, improvement priorities, and activities  
6.31 undertaken by the commission during the previous state fiscal year;

7.1 (3) identify issues pertaining to financial and personal risk that impede Minnesotans  
7.2 with disabilities from optimizing choice of community-based services; and

7.3 (4) recommend to the chairs and ranking minority members of the legislative committees  
7.4 with jurisdiction over human services and civil law by January 15, 2014, statutory and rule  
7.5 changes related to the findings under clause (3) that promote individualized service and  
7.6 housing choices balanced with appropriate individualized protection.

7.7 (e) The State Quality Council, in partnership with the commissioner, shall:

7.8 (1) approve and direct implementation of the community-based, person-directed system  
7.9 established in this section;

7.10 (2) recommend an appropriate method of funding this system, and determine the  
7.11 feasibility of the use of Medicaid, licensing fees, as well as other possible funding options;

7.12 (3) approve measurable outcomes in the areas of health and safety, consumer evaluation,  
7.13 education and training, providers, and systems;

7.14 (4) establish variable licensure periods not to exceed three years based on outcomes  
7.15 achieved; and

7.16 (5) in cooperation with the Quality Assurance Commission, design a transition plan for  
7.17 licensed providers from Region 10 into the alternative licensing system.

7.18 (f) The State Quality Council shall notify the commissioner of human services that a  
7.19 facility, program, or service has been reviewed by quality assurance team members under  
7.20 subdivision 4, paragraph (b), clause (13), and qualifies for a license.

7.21 (g) The State Quality Council, in partnership with the commissioner, shall establish an  
7.22 ongoing review process for the system. The review shall take into account the comprehensive  
7.23 nature of the system which is designed to evaluate the broad spectrum of licensed and  
7.24 unlicensed entities that provide services to persons with disabilities. The review shall address  
7.25 efficiencies and effectiveness of the system.

7.26 (h) The State Quality Council may recommend to the commissioner certain variances  
7.27 from the standards governing licensure of programs for persons with disabilities in order  
7.28 to improve the quality of services so long as the recommended variances do not adversely  
7.29 affect the health or safety of persons being served or compromise the qualifications of staff  
7.30 to provide services.

7.31 (i) The safety standards, rights, or procedural protections referenced under subdivision  
7.32 2, paragraph (c), shall not be varied. The State Quality Council may make recommendations

8.1 to the commissioner or to the legislature in the report required under paragraph (c) regarding  
8.2 alternatives or modifications to the safety standards, rights, or procedural protections  
8.3 referenced under subdivision 2, paragraph (c).

8.4 (j) The State Quality Council may hire staff to perform the duties assigned in this  
8.5 subdivision.

8.6 Subd. 4. **Regional quality councils.** (a) The commissioner shall establish, as selected  
8.7 by the State Quality Council, regional quality councils of key stakeholders, including regional  
8.8 representatives of:

8.9 (1) disability service recipients and their family members;

8.10 (2) disability service providers;

8.11 (3) disability advocacy groups; and

8.12 (4) county human services agencies and staff from the Department of Human Services  
8.13 and Ombudsman for Mental Health and Developmental Disabilities.

8.14 (b) Each regional quality council shall:

8.15 (1) direct and monitor the community-based, person-directed quality assurance system  
8.16 in this section;

8.17 (2) approve a training program for quality assurance team members under clause (13);

8.18 (3) review summary reports from quality assurance team reviews and make  
8.19 recommendations to the State Quality Council regarding program licensure;

8.20 (4) make recommendations to the State Quality Council regarding the system;

8.21 (5) resolve complaints between the quality assurance teams, counties, providers, persons  
8.22 receiving services, their families, and legal representatives;

8.23 (6) analyze and review quality outcomes and critical incident data reporting incidents  
8.24 of life safety concerns immediately to the Department of Human Services licensing division;

8.25 (7) provide information and training programs for persons with disabilities and their  
8.26 families and legal representatives on service options and quality expectations;

8.27 (8) disseminate information and resources developed to other regional quality councils;

8.28 (9) respond to state-level priorities;

8.29 (10) establish regional priorities for quality improvement;

9.1 (11) submit an annual report to the State Quality Council on the status, outcomes,  
9.2 improvement priorities, and activities in the region;

9.3 (12) choose a representative to participate on the State Quality Council and assume other  
9.4 responsibilities consistent with the priorities of the State Quality Council; and

9.5 (13) recruit, train, and assign duties to members of quality assurance teams, taking into  
9.6 account the size of the service provider, the number of services to be reviewed, the skills  
9.7 necessary for the team members to complete the process, and ensure that no team member  
9.8 has a financial, personal, or family relationship with the facility, program, or service being  
9.9 reviewed or with anyone served at the facility, program, or service. Quality assurance teams  
9.10 must be comprised of county staff, persons receiving services or the person's families, legal  
9.11 representatives, members of advocacy organizations, providers, and other involved  
9.12 community members. Team members must complete the training program approved by the  
9.13 regional quality council and must demonstrate performance-based competency. Team  
9.14 members may be paid a per diem and reimbursed for expenses related to their participation  
9.15 in the quality assurance process.

9.16 (c) The commissioner shall monitor the safety standards, rights, and procedural  
9.17 protections for the monitoring of psychotropic medications and those identified under  
9.18 sections 245.825; 245.91 to 245.97; 245A.09, subdivision 2, paragraph (c), clauses (2) and  
9.19 (5); 245A.12; 245A.13; 252.41, subdivision 9; 256B.092, subdivision 1b, clause (7); and  
9.20 626.557; and chapter 260E.

9.21 (d) The regional quality councils may hire staff to perform the duties assigned in this  
9.22 subdivision.

9.23 (e) The regional quality councils may charge fees for their services.

9.24 (f) The quality assurance process undertaken by a regional quality council consists of  
9.25 an evaluation by a quality assurance team of the facility, program, or service. The process  
9.26 must include an evaluation of a random sample of persons served. The sample must be  
9.27 representative of each service provided. The sample size must be at least five percent but  
9.28 not less than two persons served. All persons must be given the opportunity to be included  
9.29 in the quality assurance process in addition to those chosen for the random sample.

9.30 (g) A facility, program, or service may contest a licensing decision of the regional quality  
9.31 council as permitted under chapter 245A.

9.32 Subd. 5. **Annual survey of service recipients.** The commissioner, in consultation with  
9.33 the State Quality Council, shall conduct an annual independent statewide survey of service

10.1 recipients, randomly selected, to determine the effectiveness and quality of disability services.  
10.2 The survey must be consistent with the system performance expectations of the Centers for  
10.3 Medicare and Medicaid Services (CMS) Quality Framework. The survey must analyze  
10.4 whether desired outcomes for persons with different demographic, diagnostic, health, and  
10.5 functional needs, who are receiving different types of services in different settings and with  
10.6 different costs, have been achieved. Annual statewide and regional reports of the results  
10.7 must be published and used to assist regions, counties, and providers to plan and measure  
10.8 the impact of quality improvement activities.

10.9 Subd. 6. **Mandated reporters.** Members of the State Quality Council under subdivision  
10.10 3, the regional quality councils under subdivision 4, and quality assurance team members  
10.11 under subdivision 4, paragraph (b), clause (13), are mandated reporters as defined in sections  
10.12 260E.06, subdivision 1, and 626.5572, subdivision 16.

10.13 Subd. 7. **Regional quality councils and systems improvement.** (a) The commissioner  
10.14 of human services shall maintain the regional quality councils initially established under  
10.15 Minnesota Statutes 2020, section 256B.097, subdivision 4. The regional quality councils  
10.16 shall:

10.17 (1) support efforts and initiatives that drive overall systems and social change to promote  
10.18 inclusion of people who have disabilities in the state of Minnesota;

10.19 (2) improve person-centered outcomes in disability services; and

10.20 (3) identify or enhance quality of life indicators for people who have disabilities.

10.21 Subd. 8. **Membership and staff.** (a) Regional quality councils shall be comprised of  
10.22 key stakeholders including, but not limited to:

10.23 (1) individuals who have disabilities;

10.24 (2) family members of people who have disabilities;

10.25 (3) disability service providers;

10.26 (4) disability advocacy groups;

10.27 (5) lead agency staff; and

10.28 (6) staff of state agencies with jurisdiction over special education and disability services.

10.29 (b) Membership in a regional quality council must be representative of the communities  
10.30 in which the council operates, with an emphasis on individuals with lived experience from  
10.31 diverse racial and cultural backgrounds.

11.1 (c) Each regional quality council may hire staff to perform the duties assigned in  
11.2 subdivision 9.

11.3 Subd. 9. Duties. (a) Each regional quality council shall:

11.4 (1) identify issues and barriers that impede Minnesotans who have disabilities from  
11.5 optimizing choice of home and community-based services;

11.6 (2) promote informed-decision making, autonomy, and self-direction;

11.7 (3) analyze and review quality outcomes and critical incident data, reporting incidents  
11.8 of life safety concerns immediately to the Department of Human Services Licensing Division;

11.9 (4) inform a comprehensive system for effective incident reporting, investigation, analysis,  
11.10 and follow-up;

11.11 (5) collaborate on projects and initiatives to advance priorities shared with state agencies,  
11.12 lead agencies, educational institutions, advocacy organizations, community partners, and  
11.13 other entities engaged in disability service improvements;

11.14 (6) establish partnerships and working relationships with individuals and groups in the  
11.15 regions;

11.16 (7) identify and implement regional and statewide quality improvement projects;

11.17 (8) transform systems and drive social change in alignment with the disability rights and  
11.18 disability justice movements as identified by leaders who have disabilities;

11.19 (9) provide information and training programs for persons who have disabilities and  
11.20 their families and legal representatives on formal and informal support options and quality  
11.21 expectations;

11.22 (10) make recommendations to state agencies and other key decision-makers regarding  
11.23 disability services and supports;

11.24 (11) submit every two years a report to committees with jurisdiction over disability  
11.25 services on the status, outcomes, improvement priorities, and activities in the region;

11.26 (12) support people by advocating to resolve complaints between the counties, providers,  
11.27 persons receiving services, and their families and legal representatives; and

11.28 (13) recruit, train, and assign duties to regional quality council teams, including council  
11.29 members, interns, and volunteers, taking into account the skills necessary for the team  
11.30 members to be successful in this work.

12.1 (b) Each regional quality council may engage in quality improvement initiatives related  
 12.2 to, but not limited to:

12.3 (1) the home and community-based services waiver programs for persons with  
 12.4 developmental disabilities under section 256B.092, subdivision 4, or section 256B.49,  
 12.5 including brain injuries and services for those who qualify for nursing facility level of care  
 12.6 or hospital facility level of care and any other services licensed under chapter 245D;

12.7 (2) home care services under section 256B.0651;

12.8 (3) family support grants under section 252.32;

12.9 (4) consumer support grants under section 256.476;

12.10 (5) semi-independent living services under section 252.275; and

12.11 (6) services provided through an intermediate care facility for persons with developmental  
 12.12 disabilities.

12.13 (c) Each regional quality council's work must be informed and directed by the needs  
 12.14 and desires of persons who have disabilities in the region in which the council operates.

12.15 Subd. 10. **Compensation.** (a) A member of a regional quality council who does not  
 12.16 receive a salary or wages from an employer may be paid a per diem and reimbursed for  
 12.17 expenses related to the member's participation in efforts and initiatives as described in  
 12.18 subdivision 9 in the same manner as and in an amount not to exceed the amount authorized  
 12.19 by the commissioner's plan adopted under section 43A.18, subdivision 2.

12.20 (b) The regional quality councils may charge fees for their services.

12.21 **EFFECTIVE DATE.** This section is effective July 1, 2021."

12.22 Page 159, line 23, delete "reconfigure" and insert "allow for the reconfiguration of"

12.23 Page 159, line 24, after "section" insert ", as authorized under section 1915(c) of the  
 12.24 federal Social Security Act,"

12.25 Page 159, line 28, delete "upon" and insert "90 days after"

12.26 Page 195, after line 15, insert:

12.27 "Subd. 9. **Payment rates; collective bargaining.** The commissioner's authority to set  
 12.28 payment rates, including wages and benefits, for the services of individual providers as  
 12.29 defined in section 256B.0711, subdivision 1, paragraph (d), is subject to the state's obligations  
 12.30 to meet and negotiate under chapter 179A, as modified and made applicable to individual  
 12.31 providers under section 179A.54, and to agreements with any exclusive representative of

13.1 individual providers, as authorized by chapter 179A, as modified and made applicable to  
 13.2 individual providers under section 179A.54."

13.3 Page 204, delete section 33 and insert:

13.4 "Sec. 33. **REPEALER.**

13.5 (a) Minnesota Statutes 2020, section 256B.097, subdivisions 1, 2, 3, 4, 5, and 6, are  
 13.6 repealed effective July 1, 2021.

13.7 (b) Minnesota Statutes 2020, sections 256B.0916, subdivisions 2, 3, 4, 5, 8, 11, and 12;  
 13.8 and 256B.49, subdivisions 26 and 27, are repealed effective January 1, 2023, or upon federal  
 13.9 approval, whichever is later. The commissioner of human services shall notify the revisor  
 13.10 of statutes when federal approval is obtained."

13.11 Page 204, line 3, delete "upon" and insert "90 days after"

13.12 Page 251, line 16, after the period, insert "An entity with an adult foster care license  
 13.13 providing residential crisis stabilization is exempt from licensure under section 245I.23."

13.14 Page 252, delete lines 1 and 2

13.15 Page 317, after line 13, insert:

13.16 "Sec. .... **EFFECTIVE DATE.**

13.17 This article is effective July 1, 2022, or upon federal approval, whichever is later. The  
 13.18 commissioner of human services shall notify the revisor of statutes when federal approval  
 13.19 is obtained."

13.20 Page 317, line 20, strike "Clients may be required to pay a fee according to section  
 13.21 245.481."

13.22 Page 317, line 22, delete everything before the second "because"

13.23 Page 317, line 23, delete "the fee" and insert "for services"

13.24 Page 320, line 13, after "245I.23" insert "or an entity with an adult foster care licensing  
 13.25 meeting the standards in this section"

13.26 Page 322, line 3, strike the second "or"

13.27 Page 322, line 4, before the period, insert ", or emergency department"

13.28 Page 327, line 18, delete "at the scene"

13.29 Page 334, after line 16, insert:

14.1 "Sec. .... EFFECTIVE DATE.

14.2 This article is effective July 1, 2022, or upon federal approval, whichever is later. The  
 14.3 commissioner of human services shall notify the revisor of statutes when federal approval  
 14.4 is obtained."

14.5 Page 361, delete section 46

14.6 Page 371, delete section 51

14.7 Page 404, line 31, delete "The"

14.8 Page 404, line 32, delete the new language and insert "In addition to the policies and  
 14.9 procedures required by section 245I.03, the provider must establish, enforce, and maintain  
 14.10 the policies and procedures for clinical oversight of services by a "

14.11 Page 404, line 33, after "is" insert "a psychologist" and strike everything after "level"

14.12 Page 405, line 1, strike the first "psychiatrist" and strike "eligible for board certification"  
 14.13 and insert "qualified according to section 245I.04, subdivision 2, clause (4)"

14.14 Page 405, after line 32, insert:

14.15 "(k) The commissioner may require the provider to annually attest, on forms that the  
 14.16 commissioner provides, to meeting the requirements in this subdivision."

14.17 Page 405, after line 32, insert:

14.18 "EFFECTIVE DATE. Paragraphs (e), (f), and (k) are effective the day following final  
 14.19 enactment."

14.20 Page 456, after line 20, insert:

14.21 "Sec. .... EFFECTIVE DATE.

14.22 Unless otherwise stated, this article is effective July 1, 2022, or upon federal approval,  
 14.23 whichever is later. The commissioner of human services shall notify the revisor of statutes  
 14.24 when federal approval is obtained."

14.25 Page 458, line 24, delete "8,945,179,000" and insert "8,944,696,000" and delete  
 14.26 "9,427,045,000" and insert "9,423,461,000"

14.27 Page 458, line 27, delete "7,786,587,000" and insert "7,786,104,000" and delete  
 14.28 "8,293,393,000" and insert "8,289,809,000"

14.29 Page 463, line 32, delete "174,084,000" and insert "174,080,000" and delete  
 14.30 "167,528,000" and insert "167,456,000"

15.1 Page 465, line 20, delete "18,435,000" and insert "18,382,000" and delete "18,402,000"  
15.2 and insert "18,407,000"

15.3 Page 466, line 6, delete "25,546,000" and insert "26,005,000" and delete "23,557,000"  
15.4 and insert "23,992,000"

15.5 Page 467, line 10, delete "18,786,000" and insert "18,900,000"

15.6 Page 467, line 27, delete "35,653,000" and insert "35,294,000" and delete "35,223,000"  
15.7 and insert "35,846,000"

15.8 Page 468, line 8, delete "\$200,000" and insert "\$234,000"

15.9 Page 468, line 9, delete "\$118,000" and insert "\$201,000"

15.10 Page 470, line 13, delete "6,058,941,000" and insert "6,058,378,000" and delete  
15.11 "6,561,264,000" and insert "6,557,536,000"

15.12 Page 472, line 10, delete "(1)"

15.13 Page 472, delete lines 17 to 23

15.14 Page 476, after line 7, insert:

15.15 "**(a) Children's Residential Facilities.**  
15.16 \$3,000,000 in fiscal year 2022 and \$3,000,000  
15.17 in fiscal year 2023 are to reimburse counties  
15.18 for a portion of the costs of treatment in  
15.19 children's residential facilities. The  
15.20 commissioner shall distribute the appropriation  
15.21 on an annual basis to counties proportionally  
15.22 based on a methodology developed by the  
15.23 commissioner. Of this appropriation, \$100,000  
15.24 each year is available to the commissioner for  
15.25 administrative expenses."

15.26 Page 476, line 8, before "Base" insert "(b) "

15.27 Page 476, line 14, delete "2,809,000" and insert "2,846,000" and delete "2,806,000" and  
15.28 insert "2,845,000"

15.29 Page 476, line 30, delete "\$536,000" and insert "\$573,000"

15.30 Page 476, line 31, delete "\$532,000" and insert "\$571,000"

- 16.1 Page 478, line 32, delete "255,530,000" and insert "258,989,000" and delete
- 16.2 "251,781,000" and insert "251,881,000"
- 16.3 Page 479, line 1, delete "152,494,000" and insert "155,953,000" and delete "150,454,000"
- 16.4 and insert "150,554,000"
- 16.5 Page 479, line 11, delete "114,297,000" and insert "113,697,000"
- 16.6 Page 480, line 32, delete "is" and insert "and \$100,000 in fiscal year 2023 are"
- 16.7 Page 481, line 2, after the period insert "This is a onetime appropriation."
- 16.8 Page 482, delete lines 21 to 27
- 16.9 Reletter the paragraphs in sequence
- 16.10 Page 483, line 18, after the period insert "Of this appropriation, \$19,000 in fiscal year
- 16.11 2022 and \$19,000 in fiscal year 2023 are for the commissioner to use for administration."
- 16.12 Page 484, line 16, delete "\$110,834,000" and insert "110,895,000"
- 16.13 Page 484, line 17, delete "110,787,000" and insert "111,787,000"
- 16.14 Page 484, line 25, delete "26,627,000" and insert "30,686,000" and delete "26,183,000"
- 16.15 and insert "26,283,000"
- 16.16 Page 485, after line 14 insert:
- 16.17 "**(d) Skin Lightening Products Public**
- 16.18 **Awareness and Education Grant Program.**
- 16.19 \$100,000 in fiscal year 2022 and \$100,000 in
- 16.20 fiscal year 2023 are from the general fund for
- 16.21 a skin lightening products public awareness
- 16.22 and education grant program. This is a onetime
- 16.23 appropriation."
- 16.24 Page 485, line 15, delete "(d)" and insert "(e)"
- 16.25 Page 485, line 23, delete "24,797,000" and insert "27,535,000" and delete "24,314,000"
- 16.26 and insert "26,960,000"
- 16.27 Page 485, line 26, delete "24,721,000" and insert "27,459,000" and delete "24,238,000"
- 16.28 and insert "26,884,000"
- 16.29 Page 486, line 2, delete "700,000" and insert "877,000" and delete "698,000" and insert
- 16.30 "875,000"

- 17.1 Page 486, line 3, delete "611,000" and insert "666,000" and delete "611,000" and insert  
17.2 "666,000"
- 17.3 Page 486, line 4, delete "4,223,000" and insert "4,228,000" and delete "3,748,000" and  
17.4 insert "3,753,000"
- 17.5 Page 487, line 23, delete "149,000" and insert "164,000" and delete "149,000" and insert  
17.6 "164,000"
- 17.7 Page 487, line 25, delete "368,000" and insert "693,000" and delete "310,000" and insert  
17.8 "635,000"
- 17.9 Page 487, line 26, delete "395,000" and insert "413,000" and delete "393,000" and insert  
17.10 "410,000"
- 17.11 Page 487, line 27, delete "5,351,000" and insert "5,912,000" and delete "5,351,000" and  
17.12 insert "5,868,000"
- 17.13 Page 487, line 32, delete "5,233,000" and insert "5,345,000" and delete "5,243,000" and  
17.14 insert "5,355,000"
- 17.15 Page 487, line 34, delete "330,000" and insert "456,000" and delete "330,000" and insert  
17.16 "456,000"
- 17.17 Page 487, line 35, delete "191,000" and insert "238,000" and delete "191,000" and insert  
17.18 "238,000"
- 17.19 Page 488, line 1, delete "3,417,000" and insert "4,479,000" and delete "3,454,000" and  
17.20 insert "4,479,000"
- 17.21 Page 488, line 4, delete "3,341,000" and insert "4,403,000" and delete "3,378,000" and  
17.22 insert "4,403,000"
- 17.23 Page 488, line 10, delete "562,000" and insert "564,000"
- 17.24 Page 488, line 12, delete "1,275,000" and insert "1,362,000" and delete "1,273,000" and  
17.25 insert "1,360,000"
- 17.26 Page 488, line 13, delete "1,436,000" and insert "1,561,000" and delete "1,437,000" and  
17.27 insert "1,560,000"
- 17.28 Page 488, line 14, delete "342,000" and insert "363,000" and delete "348,000" and insert  
17.29 "363,000"
- 17.30 Page 488, line 16, delete "3,803,000" and insert "4,453,000"
- 17.31 Page 489, after line 13 insert:

18.1 **"(e) Grants to Regional Emergency Medical**  
 18.2 **Services Programs. \$650,000 in fiscal year**  
 18.3 **2022 is for grants to regional emergency**  
 18.4 **medical services programs, to be distributed**  
 18.5 **among the eight emergency medical services**  
 18.6 **regions according to Minnesota Statutes,**  
 18.7 **section 144E.50."**

18.8 Page 489, before line 24, insert:

18.9 "Sec. 9.**ATTORNEY GENERAL**                    **\$**                    **200,000** **\$**                    **200,000**

18.10 **This appropriation is for costs of expert**  
 18.11 **witnesses and investigations under Minnesota**  
 18.12 **Statutes, sections 62J.844. This is a onetime**  
 18.13 **appropriation."**

18.14 Renumber the sections in sequence and correct the internal references