

HF264 - 0 - Larry R. Hill Medical Reform Act

Chief Author: **Jessica Hanson**
 Committee: **Public Safety Finance And Policy**
 Date Completed: **2/18/2025 8:21:03 AM**
 Agency: **Corrections Dept**

State Fiscal Impact	Yes	No
Expenditures		X
Fee/Departmental Earnings		X
Tax Revenue		X
Information Technology		X
Local Fiscal Impact		X

This table shows direct impact to state government only. Local government impact, if any, is discussed in the narrative.
 Reductions shown in the parentheses.

State Cost (Savings)		Biennium			Biennium	
Dollars in Thousands		FY2025	FY2026	FY2027	FY2028	FY2029
Total		-	-	-	-	-
Biennial Total				-		-

Full Time Equivalent Positions (FTE)		Biennium			Biennium	
		FY2025	FY2026	FY2027	FY2028	FY2029
Total		-	-	-	-	-

LBO Analyst's Comment

I have reviewed this fiscal note for reasonableness of content and consistency with the LBO's Uniform Standards and Procedures.

LBO Signature: Susan Nelson **Date:** 2/18/2025 8:21:03 AM
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State Cost (Savings) Calculation Details

This table shows direct impact to state government only. Local government impact, if any, is discussed in the narrative. Reductions are shown in parentheses.

*Transfers In/Out and Absorbed Costs are only displayed when reported.

State Cost (Savings) = 1-2		Biennium			Biennium	
Dollars in Thousands		FY2025	FY2026	FY2027	FY2028	FY2029
Total		-	-	-	-	-
Biennial Total				-		-
1 - Expenditures, Absorbed Costs*, Transfers Out*						
Total		-	-	-	-	-
Biennial Total				-		-
2 - Revenues, Transfers In*						
Total		-	-	-	-	-
Biennial Total				-		-

Bill Description

HF264 updates Minnesota Statutes 241.021, also known as the Larry R. Hill Medical Reform Act, in relation to the involuntary administration of medications by requiring that a process be put into place for determining on intake whether a Jarvis Order is in place and ensuring that the order will be followed during confinement or incarceration.

Additionally, the bill creates a new subdivision for 241.021 requiring that correctional facilities provide incarcerated individuals with the same medications prescribed to those individuals prior to their incarceration or confinement, unless a licensed health care professional determines that the medication is no longer needed because the condition the medication was treating has resolved; the incarcerated person no longer wishes to take the medication; or a more effective medication is prescribed that is acceptable to the incarcerated person.

Assumptions

The department assumes that a generic version of a prescription drug can be given to an incarcerated person in replacement of any brand-name drug the person was taking before entering the correctional facility, which is current practice of the agency.

Expenditure and/or Revenue Formula

The department projects that this bill would not have a significant fiscal impact on its operations.

Long-Term Fiscal Considerations

N/A

Local Fiscal Impact

N/A

References/Sources

Department of Corrections staff

Agency Contact:

Agency Fiscal Note Coordinator Signature: Mark Besonen

Date: 2/18/2025 8:17:08 AM

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