

Subject Health Department and Department of Human Services policy bill

Authors Liebling

Analyst Elisabeth Klarqvist (article 1)
Danyell Punelli (article 2)
Sarah Sunderman (article 2)

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Overview

This bill makes policy changes to Department of Health and Department of Human Services programs and activities.

Article 1 modifies Department of Health programs and activities, including review of health care provider major spending commitments, membership of the Rural Health Advisory Committee, the cancer reporting system, vital records, the Safe Drinking Water Act, lead poisoning prevention activities, administration of naloxone in schools, hospital physical plant requirements, hearing aid dispensing, home care surveys, nursing home change of ownership requirements, and technical changes related to nursing home construction projects.

Article 2 contains DHS policy provisions related to behavioral health, aging services, economic assistance, and health care programs.

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- 1 Retrospective review.**

Amends § 62J.17, subd. 5a. Changes the circumstances in which the commissioner of health must provide notice to a health care facility or provider following review of a major spending commitment by the facility or provider, to require notice only when the commissioner determines that the major expenditure was not appropriate. (Under current law the commissioner must provide notice of the commissioner's determination in all cases.)
- 2 Establishment; membership.**

Amends § 144.1481, subd. 1. Increases the size of the Rural Health Advisory Committee at the Health Department from 16 to 21 members. Adds the following

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members: a member of a Tribal nation; a representative of a local public health agency or community health board; a health professional or advocate who works with people with mental illness (under current law one of the consumer members must be an advocate for persons who have a mental illness or developmental disability); a representative of a community organization working with individuals experiencing health disparities; and an individual with expertise in economic development or an employer outside the seven-county metropolitan area. Updates the term for one other member; allows another oral health professional to serve on the advisory committee if a dentist is not available; and requires one of the three consumer members to be from a community experiencing health disparities.

3 Fetal death record and certificate of birth resulting in stillbirth.

Amends § 144.2151. Updates and clarifies processes for establishing fetal death records and requesting certificates of birth resulting in stillbirth.

Subd. 1. Registration. Requires a fetal death record to be established for each fetal death reported to the state registrar according to section 144.222. Strikes language describing an obsolete process, in which a record of birth resulting in stillbirth must be filed with the state registrar if the parents request to have a record of birth resulting in stillbirth prepared.

Subd. 2. Information to parents. Modifies information that must be provided to parents in cases of stillbirth, to require parents to be informed that they may provide a full name or only a last name for the fetal death record, that they may request a certificate of birth resulting in stillbirth and an informational copy of the fetal death record, and that certain parties may correct or amend the fetal death record.

Subd. 3. Responsibilities of state registrar. Strikes language permitting parents to file a record of birth resulting in stillbirth (other language in this section allows a certificate of birth resulting in stillbirth to be requested after a fetal death record is established). Moves responsibilities of the state registrar related to fetal death records and certificates of birth resulting in stillbirth from subdivision 5 to this subdivision and updates these duties to reflect that fetal death records and certificates of birth resulting in stillbirth are vital records.

Subd. 4. Delayed registration. Strikes language that permits parents to request a record of birth resulting in stillbirth (subdivision 3 requires the state registrar to establish a process for requesting certificates of birth resulting in stillbirth). Allows a parent, medical examiner, or coroner to submit a request for a delayed registration of fetal death with evidence to support the request.

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Subd. 5. Responsibilities of state registrar. Strikes this subdivision (updated responsibilities of the state registrar are now in subdivision 3).

4 Fetal death reports and registration.

Amends § 144.222. In subdivision 1, makes technical changes to the requirement that a fetal death must be registered or reported to the state registrar within five days after death, for a fetus of 20 or more weeks of gestation. Strikes subdivision 2, which requires an infant death caused by sudden infant death syndrome to be reported to the state registrar within five days after death (section 144.221, subdivision 1, requires all deaths to be reported to the state registrar within five days after death).

5 Connector.

Adds subd. 2a to § 144.382. Defines connector in the Safe Drinking Water Act as gooseneck, pigtail, and other service line connectors; a connector is a short section of piping that can be bent and used to connect rigid service piping.

6 Galvanized requiring replacement.

Adds subd. 3a to § 144.382. Defines galvanized requiring replacement in the Safe Drinking Water Act as a galvanized service line that is or was connected to a lead service line, lead status unknown service line, or lead connector.

7 Galvanized service line.

Adds subd. 3b to § 144.382. Defines galvanized service line as a service line made of iron or piping dipped in zinc to prevent corrosion and rusting.

8 Lead connector.

Adds subd. 3c to § 144.382. Defines lead connector in the Safe Drinking Water Act as a connector made of lead.

9 Lead service line.

Adds subd. 3d to § 144.382. Defines lead service line in the Safe Drinking Water Act as a portion of pipe made of lead that connects the water main to the building inlet.

10 Lead status unknown service line or unknown service line.

Adds subd. 3e to § 144.382. Defines lead status unknown service line or unknown service line in the Safe Drinking Water Act as a service line that has not been demonstrated to meet or that does not meet the definition of lead free in the federal Safe Drinking Water Act.

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11 Nonlead service line.

Adds subd. 3f to § 144.382. Defines nonlead service line in the Safe Drinking Water Act as a service line determined through an evidence-based record, method, or technique not to be a lead service line or galvanized service line requiring replacement.

12 Service line.

Adds subd. 4a to § 144.382. Defines service line in the Safe Drinking Water Act as a portion of pipe that connects the water main to the building inlet.

13 Classification of service lines.

Adds § 144.3835. During a lead service line inventory, allows a water system to classify the actual material of the service line instead of classifying it as a nonlead service line. States that it is not required to physically verify a service line's material composition for its lead status to be identified. For a lead service line inventory and lead service line replacement plan, requires a service line to be classified as a lead service line or a galvanized service line requiring replacement if it has a lead connector. Allows a galvanized service line to be classified as a nonlead service line only if it can be documented that it was never connected to a lead service line or lead connector.

14 Standards for licensure.

Amends § 144.55, subd. 3. For new licenses, new construction, change of use, or change of occupancy for which plan review packages are received on or after January 1, 2024, requires a hospital to meet the minimum standards in the 2022 edition of *Guidelines for Design and Construction of Hospitals* from the Facility Guidelines Institute (FGI). Establishes a process for the commissioner of health to update the edition of the guidelines publication with which hospitals must comply, and provides that compliance with the updated edition shall not be sooner than 12 months after publication of a notice in the State Register. Requires hospitals to comply with state and local laws, ordinances, and codes for fire safety, building, and zoning. Strikes language authorizing the commissioner to adopt rules establishing standards for new construction. This section is effective January 1, 2024.

15 Request for variance or waiver.

Amends § 144.6535, subd. 1. Allows a hospital to request a variance or waiver from the standards in the *Guidelines for Design and Construction of Hospitals*, and strikes language authorizing a variance or waiver from Minnesota Rules, chapter 4640 (hospital licensing and operation) or 4645 (hospital construction and equipment). (The standards in the publication are replacing the design and construction standards

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currently found in rules, and the rules are being repealed.) Also makes conforming changes. This section is effective January 1, 2024.

16 Criteria for evaluation.

Amends § 144.6535, subd. 2. Makes changes to conform with the hospital design and construction standards in the *Guidelines for Design and Construction of Hospitals* replacing the standards in rules, which are being repealed. This section is effective January 1, 2024.

17 Effect of alternative measures or conditions.

Amends § 144.6535, subd. 4. Makes changes to conform with the hospital design and construction standards in the *Guidelines for Design and Construction of Hospitals* replacing the standards in rules, which are being repealed. This section is effective January 1, 2024.

18 Classification of data on individuals.

Amends § 144.69. Changes the name of the cancer surveillance system to the cancer reporting system. Allows Health Department employees to interview patients named in cancer reports, or their relatives, after notifying the patient's attending health professional, and allows the cancer reporting system to share certain data in the system with other state and national cancer registries.

Subd. 1. Data collected by the cancer reporting system. Changes the name of the cancer surveillance system to the cancer reporting system. Allows Department of Health employees to interview patients named in cancer reports, or their relatives, after notifying an attending health care provider, rather than after obtaining consent from an attending health care provider as in current law. Requires research protections for patients to be consistent with section 13.04, subd. 2 (the Tennessen warning statute); and with federal rules governing protection of human research subjects.

Subd. 2. Transfers of information to state cancer registries and federal government agencies. Allows the cancer reporting system to:

- share information on a non-Minnesota resident that contains personal identifiers and is collected by the cancer reporting system with the statewide cancer registry of the nonresident's home state for purposes consistent with Minnesota's cancer reporting system, provided the receiving registry maintains the classification of the information as private; and

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- share information, excluding direct identifiers, collected by the cancer reporting system with the CDC's National Program of Cancer Registries and the National Cancer Institute's cancer registry.

19 Lead hazard reduction.

Amends § 144.9501, subd. 17. Amends the definition of lead hazard reduction in the Lead Poisoning Prevention Act to add swab team services. Also specifies that lead hazard reduction does not include: (1) renovation activity that is primarily intended to repair or restore a structure or dwelling instead of abate or control lead paint hazards; or (2) activities that disturb painted surfaces that total less than 20 square feet on exterior surfaces or less than two square feet in an interior room (an exception similar to the one being added as para. (c) is currently found in the definition of regulated lead work, and that exception is being replaced by the exceptions added to this definition and the definition of renovation).

20 Regulated lead work.

Amends § 144.9501, subd. 26a. Amends the definition of regulated lead work in the Lead Poisoning Prevention Act, to: (1) add lead hazard reduction to the definition; (2) modify who issues lead orders, to allow them to be issued by the commissioner of health in addition to a community health board as in current law; and (3) strike a paragraph listing actions that do not constitute regulated lead work (this exception is being replaced by exceptions being added to the definitions of lead hazard reduction and renovation in this bill).

21 Renovation.

Amends § 144.9501, subd. 26b. Amends the definition of renovation in the Lead Poisoning Prevention Act, to: (1) specify that it means modification made for compensation; and (2) specify that renovation does not include minor repair and maintenance activities or total demolition of a freestanding structure. Defines minor repair and maintenance as activities, other than window replacement or certain demolition activities, that disturb painted surfaces that total less than 20 square feet on exterior surfaces or less than six square feet in an interior room.

22 Compensation.

Adds subd. 33 to § 144.9501. Defines compensation in the Lead Poisoning Prevention Act as money or other mutually agreed upon payment given or received for regulated lead work.

23 Individual.

Adds subd. 34 to § 144.9501. Defines individual in the Lead Poisoning Prevention Act as a natural person.

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24 Licensing, certification, and permitting.

Amends § 144.9505, subd. 1. In para. (d), clarifies that an individual residential property owner who performs regulated lead work on their own residence is exempt from the requirements for licensure and firm certification for regulated lead work (current law allows property owners and relatives to perform any regulated lead work on a property, not just residential property, without being licensed). States this exemption does not apply to renovation performed for compensation, when a child with an elevated blood lead level has been identified in the residence or building, or when the residence is occupied by individuals not related to the property owner.

Strikes para (e), which requires a person that employs individuals to perform regulated lead work outside the person's property to be certified as a certified lead firm and requires an individual who performs certain types of lead work to be employed by a certified lead firm.

25 Certified lead firm.

Amends § 144.9505, subd. 1g. Expands who must be certified as a lead firm, to include a person who performs regulated lead work (other than renovation). (Current law requires a person who employs individuals to perform regulated lead work other than renovation to be certified as a lead firm.) Also strikes language exempting a person from certification if the regulated lead work is performed on the person's own property.

26 Certified renovation firm.

Amends § 144.9505, subd. 1h. Expands who must be certified as a renovation firm, to include a person who performs renovation. (Current law requires a person who employs individuals to perform renovation to be certified as a renovation firm.) Specifies that the renovation work must be performed for compensation, and strikes language exempting a person from certification if the renovation work is performed on the person's own property.

27 Regulated lead work standards and methods.

Amends § 144.9508, subd. 2. In para. (k), requires rules adopted by the commissioner governing renovation of pre-1978 affected properties to be consistent with rules adopted under the federal Toxic Substances Control Act, and strikes language limiting rules adopted by the commissioner to renovation of pre-1978 properties where a child or pregnant female resides.

28 New license required; change of ownership.

Amends § 144A.06, subd. 2. Amends the circumstances that constitute a change of ownership of a nursing home to specify a change of ownership occurs, and the new owner must apply for a new license, if within the past 24 months 50 percent or more

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of the licensee's ownership interest is transferred to multiple persons (in addition to transfers to one different person as in current law), or to multiple different persons (in addition to one person as in current law) who had a less than five percent ownership interest in the facility when the first transaction occurred.

29 Moratorium.

Amends § 144A.071, subd. 2. Provides that all construction projects approved by the commissioner of health under section 144A.073, subdivision 3, after March 1, 2020, as exceptions to the moratorium on nursing home construction, are subject to the fair rental value property rate (instead of a historical property rate that would otherwise apply). Also changes paragraph lettering and clause and item numbering and makes conforming changes. This section is effective retroactively from March 1, 2020.

30 Amendments to approved project.

Amends § 144A.073, subd. 3b. Modifies criteria used by the commissioner of health to approve amendments to the design of construction projects that were previously approved as exceptions to the moratorium, to make the criteria conform with the fair rental value property rate system. Provides that reimbursement for amendments to approved projects is independent of actual construction costs and shall be based on the allowable appraised value of the completed project, and prohibits a project from being amended to reduce its scope. Removes obsolete dates. This section is effective retroactively from March 1, 2020.

31 Survey process.

Amends § 144A.474, subd. 3. In a subdivision governing the survey process for home care providers, strikes a reference in clause (5) to housing with services establishments (which are no longer registered in the state) and instead refers to the establishment where the provider is providing services; and in clause (9) removes requirements that an exit conference occur on-site and that there must be documentation that the exit conference occurred, and requires the exit conference to occur within one business day after the survey.

32 Follow-up surveys.

Amends § 144A.474, subd. 9. In a subdivision governing follow-up surveys, strikes language requiring a follow-up survey to be conducted if the provider has any violations determined to be widespread.

33 Reconsideration.

Amends § 144A.474, subd. 12. In a subdivision governing reconsideration of a correction order issued to a home care provider, requires a request for reconsideration to be received by the commissioner within 15 business days after the

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- home care provider received the correction order, rather than 15 calendar days as in current law.
- 34 **Termination of service plan.**
Amends § 144A.4791, subd. 10. In a subdivision listing information that must be included in the written notice of termination if a home care provider terminates a client's service plan, adds a requirement that the written notice must include a statement that the client may contact the Office of Ombudsman for Long-Term Care for an advocate to assist regarding the termination. Also strikes references to housing with services contracts and housing with services establishment, and instead requires a statement, if applicable, that the termination of home care services does not constitute a notice of termination of any housing contract.
- 35 **Hearing aid.**
Amends § 148.512, subd. 10a. Amends the definition of hearing aid in the statutes governing audiologists, to specify that it is a prescribed aid and that it does not include products that enhance human hearing.
- 36 **Hearing aid dispensing.**
Amends § 148.512, subd. 10b. Amends the definition of hearing aid dispensing in the audiologist statutes to remove from the definition, the acts of recommending a hearing aid and selling hearing aids at retail. Specifies that hearing aid dispensing does not include selling over-the-counter (OTC) hearing aids. Provides this definition applies to assisting with selecting, and with dispensing, prescription hearing aids.
- 37 **Over-the-counter hearing aid or OTC hearing aid.**
Adds subd. 10c to § 148.512. Defines over-the-counter hearing aid or OTC hearing aid in the audiologist statutes by reference to the definition in federal rules.
- 38 **Prescription hearing aid.**
Adds subd. 13a to § 148.512. Defines prescription hearing aid in the audiologist statutes.
- 39 **Over-the-counter hearing aids.**
Adds subd. 4 to § 148.513. Provides that the statutes governing audiologists do not preclude licensed audiologists from dispensing or selling OTC hearing aids.
- 40 **Dispensing audiologist examination requirements.**
Amends § 148.515, subd. 6. Amends audiologist examination and supervision requirements to specify that the examination and supervision requirements must be satisfied to dispense prescription hearing aids.

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41 Temporary licensure.

Amends § 148.5175. Provides that good cause that permits an audiologist's temporary license to be renewed twice includes not being able to take and complete the required practical examination for dispensing prescription hearing aids.

42 Grounds for disciplinary action by commissioner.

Amends § 148.5195, subd. 3. In provisions establishing grounds for disciplinary action against audiologists and hearing instrument dispensers, changes the title from "hearing instrument dispenser" to "hearing aid dispenser" and provides that grounds for disciplinary action apply to prescribing or dispensing prescription hearing aids. Removes references to recommending hearing aids.

43 Membership.

Amends § 148.5196, subd. 1. In a subdivision establishing the Speech-Language Pathologist and Audiologist Advisory Council, modifies a term from "hearing instrument" to "hearing aid;" changes a title from "hearing instrument dispenser" to "hearing aid dispenser;" and requires audiologist members of the advisory council to have experience that includes dispensing prescription hearing aids. Removes a reference to recommending hearing aids.

44 Hearing aid dispensing.

Amends § 148.5197. Modifies provisions governing audiologist and hearing instrument dispenser contracts, use of a license number or certificate number, consumer rights information, and liability, to provide this section governs audiologist and hearing aid dispenser prescribing and dispensing of prescription hearing aids.

45 Restriction on sale of prescription hearing aids.

Amends § 148.5198. Provides the consumer protections in this section apply to audiologists' and certified dispensers' dispensing of prescription hearing aids.

46 Administration of opiate antagonists for drug overdose.

Amends § 151.37, subd. 12. In a subdivision governing whom certain health care professionals may authorize to administer opiate antagonists, allows any personnel employed by or under contract with a charter, public, or private school to be authorized to administer opiate antagonists. (Under current law, only licensed school nurses and certified public health nurses working for a school may be authorized to administer opiate antagonists.) Also specifies that a licensed practical nurse is authorized to possess and administer opiate antagonists in a school setting.

47 Hearing aid.

Amends § 153A.13, subd. 3. In the definition of hearing instrument in the chapter governing hearing instrument dispensers, changes the term defined, from "hearing

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- instrument” to “hearing aid” and refers to the definition of that term in section 148.512, subd. 10a.
- 48 **Hearing aid dispensing.**
Amends § 153A.13, subd. 4. In the definition of hearing instrument dispensing in the chapter governing hearing instrument dispensers, changes the term defined, from “hearing instrument dispensing” to “hearing aid dispensing” and refers to the definition of that term in section 148.512, subd. 10b.
- 49 **Dispenser of hearing aids.**
Amends § 153A.13, subd. 5. In the definition of dispenser of hearing instruments in the chapter governing hearing instrument dispensers, changes the term defined to “dispenser of hearing aids” and provides that these dispensers dispense prescription aids. (This is a version of the professional title used by persons who dispense hearing aids. The title “hearing instrument dispenser” is also used in this chapter and is being changed to “hearing aid dispenser.”)
- 50 **Advisory council.**
Amends § 153A.13, subd. 6. Changes the name of an advisory council from “Minnesota Hearing Instrument Dispenser Advisory Council” to “Minnesota Hearing Aid Dispenser Advisory Council” to conform with other changes in this chapter.
- 51 **ANSI.**
Amends § 153A.13, subd. 7. In the definition of ANSI in the chapter governing hearing instrument dispensers, strikes the existing definition of ANSI and instead refers to the definition of the American National Standard Specification for Audiometers in federal rules.
- 52 **Supervision.**
Amends § 153A.13, subd. 9. In the definition of supervision in the chapter governing hearing instrument dispensers, changes a term and provides that trainees dispense prescription hearing aids.
- 53 **Direct supervision or directly supervised.**
Amends § 153A.13, subd. 10. In the definition of direct supervision or directly supervised in the chapter governing hearing instrument dispensers, changes a term and provides that trainees dispense prescription hearing aids.

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- 54 **Indirect supervision or indirectly supervised.**
Amends § 153A.13, subd. 11. In the definition of indirect supervision or indirectly supervised in the chapter governing hearing instrument dispensers, changes a term and provides that trainees dispense prescription hearing aids.
- 55 **Over-the-counter hearing aid or OTC hearing aid.**
Adds subd. 12 to § 153A.13. Defines over-the-counter hearing aid or OTC hearing aid for the chapter governing hearing instrument dispensers.
- 56 **Prescription hearing aid.**
Adds subd. 13 to § 153A.13. Defines prescription hearing aid for the chapter governing hearing instrument dispensers.
- 57 **Application for certificate.**
Amends § 153A.14, subd. 1. In a subdivision governing applications for a certificate as a hearing instrument dispenser, changes terms from “hearing instrument” to “hearing aid” and requires the applicant to provide information on training and experience in testing, fitting, and selling prescription hearing aids.
- 58 **Issuance of certificate.**
Amends § 153A.14, subd. 2. In a subdivision governing issuance of certificates for hearing instrument dispensers, changes a term from “dispensers of hearing instruments” to “dispensers of hearing aids.”
- 59 **Certification by examination.**
Amends § 153A.14, subd. 2h. Requires the examination for certification as a hearing aid dispenser to test applicants on prescription hearing aid selling.
- 60 **Continuing education requirement.**
Amends § 153A.14, subd. 2i. Requires continuing education courses for hearing aid dispensers to be directly related to prescription hearing aid dispensing.
- 61 **Required use of certification number.**
Amends § 153A.14, subd. 2j. Provides the requirement that a hearing aid dispenser uses the dispenser’s certification number on certain sales items, applies to the sale of prescription hearing aids.
- 62 **Dispensing of prescription hearing aids without certificate.**
Amends § 153A.14, subd. 4. Modifies criminal penalties, to make it a gross misdemeanor to dispense a prescription hearing aid without a certificate.

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- 63 **Trainees.**
Amends § 153A.14, subd. 4a. Changes a title, from “hearing instrument dispenser” to “hearing aid dispenser” and provides the authorization for trainees to dispense hearing aids applies to the dispensing of prescription hearing aids.
- 64 **Prescription hearing testing protocol.**
Amends § 153A.14, subd. 4b. Modifies the hearing testing protocol requirements to make them apply to the dispensing of prescription hearing aids. Also corrects a cross-reference to federal rules.
- 65 **Reciprocity.**
Amends § 153A.14, subd. 4c. Modifies a subdivision governing reciprocity to provide it applies to persons who have dispensed prescription hearing aids in other jurisdictions.
- 66 **Prescription hearing aids; enforcement.**
Amends § 153A.14, subd. 4e. Requires certain investigation costs of the Department of Health to be apportioned among professions that dispense prescription hearing aids.
- 67 **Prescription hearing aids to comply with state and federal requirements.**
Amends § 153A.14, subd. 6. Provides the commissioner’s duties to ensure compliance with state and federal requirements apply to requirements governing dispensing of prescription hearing aids.
- 68 **Consumer rights.**
Amends § 153A.14, subd. 9. Changes a title from “hearing instrument dispenser” to “hearing aid dispenser.”
- 69 **Requirement to maintain current information.**
Amends § 153A.14, subd. 11. Modifies information a dispenser must provide the commissioner, to require dispensers to provide information on certain judgements related to dispensing prescription hearing aids and information on whether the dispenser stops dispensing prescription hearing aids.
- 70 **Over-the-counter hearing aids.**
Adds subd. 12 to § 153A.14. Provides that chapter 153A does not preclude certified hearing aid dispensers from dispensing or selling OTC hearing aids.

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- 71 **Prohibited acts.**
Amends § 153A.15, subd. 1. Changes a title, and provides the grounds for disciplinary action in this subdivision apply to dispensing prescription hearing aids.
- 72 **Enforcement actions.**
Amends § 153A.15, subd. 2. Provides the enforcement actions in this subdivision apply to persons who dispense prescription hearing aids.
- 73 **Penalties.**
Amends § 153A.15, subd. 4. Changes a title.
- 74 **Expenses; fees.**
Amends § 153A.17. Changes a term used. Strikes an obsolete sentence (section 16E.22 has expired).
- 75 **Penalty fees.**
Amends § 153A.175. Changes a title and provides the penalty fee for dispensing without submitting a continuing education report applies to dispensing prescription hearing aids.
- 76 **Consumer information center.**
Amends § 153A.18. Provides the Consumer Information Center must provide information about prescription hearing aids to actual and potential purchasers. Changes a title.
- 77 **Hearing Aid Dispenser Advisory Council.**
Amends § 153A.20. Changes the name of the advisory council from “Hearing Instrument Dispenser Advisory Council” to “Hearing Aid Dispenser Advisory Council”; requires advisory council members to be persons who dispense or use prescription hearing aids; changes a title.
- 78 **Construction project rate adjustments effective October 1, 2006.**
Amends § 256B.434, subd. 4f. Updates cross-references to conform with the technical changes to paragraph lettering and clause and item numbering in section 144A.071, subd. 2.
- 79 **Revisor instruction.**
Directs the revisor of statutes to change the term cancer surveillance system to cancer reporting system in Minnesota Statutes and Minnesota Rules.

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80 Repealer.

Para. (a) repeals the following rules, effective January 1, 2024: Minnesota Rules, parts 4640.1500-4640.6400 (Hospital licensing and operations rules governing lab and x-ray services; accommodations, furnishings, and equipment for care; food service and food sanitation; physical plant; mental and psychiatric hospitals; and chronic disease hospitals); and Minnesota Rules, parts 4645.0300-4645.5200 (hospital construction and equipment rules governing design and construction; facility requirements for general hospitals and for specialized units in general hospitals; facility requirements for chronic disease hospitals; structural work, mechanical work, electrical, elevator, and service facilities requirements for all hospitals; and requirements for plans and specifications for all hospitals).

Para. (b) repeals the following statutes: 144.9505, subd. 3 (requiring the commissioner of health to provide health and safety information on lead abatement and lead hazard reduction to all residential building contractors) and 153A.14, subd. 5 (authorizing the commissioner of health to adopt rules to implement chapter 153A governing hearing aid dispensers).

Article 2: Department of Human Services Policy

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1 Services and programs.

Amends § 245.4661, subd. 9. Removes intensive community rehabilitative mental health services from list of services eligible for adult mental health grants.

2 Mental health crisis services.

Amends § 245.469, subd. 3. Adds reference to crisis response services section. Provides an immediate effective date.

3 Cultural and ethnic minority infrastructure grant program.

Proposes coding for § 245.4907. Codifies the cultural and ethnic minority infrastructure grant program (CEMIG). Requires the commissioner of human services to establish a cultural and ethnic minority infrastructure grant program, to ensure that behavioral health supports and services are culturally specific and culturally responsive.

Outlines grant applicant eligibility and allowable grant activities; requires the commissioner to assist grantees with meeting third-party credentialing requirements; requires grantees to obtain all available third-party reimbursement

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sources; and specifies that grantees must serve individuals from cultural and ethnic minority communities regardless of health coverage or ability to pay for services.

Requires grantees to provide regular data to the commissioner, to evaluate grant program effectiveness; lists evaluation criteria.

Provides an immediate effective date.

4 Mental health certified peer specialist grant program.

Proposes coding for § 245.4906. Codifies the mental health certified peer specialist grant program, to provide funding for mental health certified peer specialist training. Provides information on mental health certified peer specialist services and qualifications. Specifies eligible grant activities and outcome evaluation requirements.

Provides an immediate effective date.

5 Mental health certified family peer specialist grant program.

Proposes coding for § 245.4907. Codifies the mental health certified family peer specialist grant program, to provide funding for mental health certified family peer specialist training. Provides information on mental health certified family peer specialist services and qualifications. Specifies eligible grant activities and outcome evaluation requirements.

Provides an immediate effective date.

6 Projects for assistance in transition from homelessness program.

Proposes coding for § 245.991. Establishes the projects for assistance in transition from homelessness program, to prevent or end homelessness for people with serious mental illness or co-occurring substance use disorder, and meet the commissioner's housing mission statement goals. Lists eligible grant activities, program eligibility requirements, and outcome evaluation requirements; specifies that the commissioner must comply with all federal aid or grant requirements.

Provides an immediate effective date.

7 Housing with support for adults with serious mental illness program.

Proposes coding for § 245.992. Establishes the housing with support for adults with serious mental illness program, to prevent or end homelessness for people with serious mental illness, increase availability of housing with support, and meet the commissioner's housing mission statement goals. Lists eligible grant activities, program eligibility requirements, and outcome evaluation requirements.

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- Provides an immediate effective date.
- 8 **Authorized uses of grant funds.**
Amends § 256.478, by adding subd. 3. Lists allowable uses of transition to community initiative grant funds.
Provides an immediate effective date.
- 9 **Outcomes.**
Amends § 256.478, by adding subd. 4. Lists program outcomes for the transition to community initiative.
Provides an immediate effective date.
- 10 **Medical assistance room and board rate.**
Amends § 256B.056, by adding subd. 5d. Defines “medical assistance room and board rate” in the chapter of statutes governing medical assistance. This language is moved from section 256I.03, subdivision 6.
- 11 **Medical assistance payment for assertive community treatment and intensive residential treatment services.**
Amends § 256B.0622, subd. 8. Makes technical change related to medical assistance room and board rate.
- 12 **Excluded services.**
Amends § 256B.0946, subd. 6. Makes technical change related to medical assistance room and board rate.
- 13 **Noncovered services.**
Amends § 256B.0947, subd. 7a. Makes technical change related to medical assistance room and board rate.
- 14 **Date of application.**
Amends § 256D.02, by adding subd. 20. Defines “date of application” in the chapter of statutes governing general assistance.
- 15 **Time of payment of assistance.**
Amends § 256D.07. Removes certain general assistance application requirements and requires applications to be submitted according to the chapter of statutes governing economic assistance program eligibility and verification. Modifies the timeline for which the first month’s grant must cover.

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- 16 **Supportive housing.**
Amends § 256I.03, subd. 15. Modifies the definition of “supportive housing” in the chapter of statutes governing housing support to specify supportive housing does not include licensed assisted living facilities.
- 17 **Date of application.**
Amends § 256I.03, by adding subd. 16. Defines “date of application” in the chapter of statutes governing housing support.
- 18 **Date of eligibility.**
Amends § 256I.04, subd. 2. Modifies the date of eligibility for housing assistance to conform to changes in application requirements under the chapter of statutes governing economic assistance eligibility and verification.
- 19 **Filing of application.**
Amends § 256I.06, subd. 3. Modifies application requirements for housing support to conform to changes related to applications in the chapter of statutes governing economic assistance eligibility and verification.
- 20 **Community living infrastructure.**
Amends § 256I.09. Allows the commissioner to award community living infrastructure grants to multi-Tribal collaboratives.
- 21 **Date of application.**
Amends § 256J.08, subd. 21. Modifies the definition of “date of application” in the chapter of statutes governing MFIP to conform to changes related to application requirements in the chapter of statutes governing economic assistance eligibility and verification.
- 22 **Submitting application form.**
Amends § 256J.09, subd. 3. Makes conforming changes to MFIP application requirements to align with changes in the chapter of statutes governing economic assistance eligibility and verification.
- 23 **Submitting application form.**
Amends § 256J.95, subd. 5. Makes conforming changes to DWP application requirements to align with changes in the chapter of statutes governing economic assistance eligibility and verification.

Section Description - Article 2: Department of Human Services Policy

24 Date of application.

Amends § 256P.01, by adding subd. 2b. Defines “date of application” in the chapter of statutes governing economic assistance eligibility and verification.

25 Application submission.

Amends § 256P.04, by adding subd. 1a. Lays out application requirements for programs governed by the economic assistance eligibility and verification chapter of statutes.

26 Revisor instruction.

Instructs the revisor of statutes to: (1) renumber the subdivisions in the statutes containing definitions for the general assistance and housing support programs so that the definitions are in alphabetical order; and (2) correct any cross-references that change as a result of the renumbering.

27 Repealer.

Repeals Minn. Stat. § 256I.03, subd. 6 (medical assistance room and board rate). This language was moved to § 256B.056, subd. 5d.



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