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1.1 Senator Rosen from the Committee on Finance, to which was re-referred

S.F. No. 2876: A bill for an act relating to human services; allowing the commissioner
of human services to reinstate waivers and modifications to certain human services programs;
modifying the membership and duties of the task force on eliminating subminimum wages;
modifying disproportionate share rate adjustments for certain customized living services;
permitting temporary remote delivery of qualified professional services; amending Minnesota
Statutes 2021 Supplement, section 256S.205; Laws 2021, First Special Session chapter 7,
article 17, section 14.

- 1.9 Reports the same back with the recommendation that the bill be amended as follows:
- 1.10 Page 1, delete section 1 and insert:
- "Section 1. Laws 2021, First Special Session chapter 7, article 16, section 28, is amended
 to read:
- 1.13 Sec. 28. CONTINGENT APPROPRIATIONS.

1.14 Any appropriation in this act for a purpose included in Minnesota's initial state spending

- 1.15 plan as described in guidance issued by the Centers for Medicare and Medicaid Services
- 1.16 for implementation of section 9817 of the federal American Rescue Plan Act of 2021 is
- 1.17 contingent upon approval of that purpose by the Centers for Medicare and Medicaid Services,
- 1.18 except for the rate increases specified in article 11, sections 12 and 19. This section expires
- 1.19 June 30, 2024.
- 1.20 **EFFECTIVE DATE.** This section is effective the day following final enactment."
- 1.21 Page 7, before line 14, insert:

1.22 "Sec. 3. EMERGENCY MEDICAL SERVICES REGULATORY BOARD

1.23 **TEMPORARY AUTHORITY.**

- 1.24 (a) Notwithstanding Minnesota Statutes, section 144E.266, the Emergency Medical
- 1.25 Services Regulatory Board may temporarily suspend any of the requirements of Minnesota
- 1.26 Statutes, sections 144E.10; 144E.101, subdivisions 1, 2, 3, 6, 7, 8, 9, 10, 11, and 13;
- 1.27 <u>144E.103; 144E.12; 144E.121; 144E.123; 144E.127; and 144E.15. Any requirements</u>
- 1.28 suspended under this section remain suspended until the earlier of the following:
- 1.29 (1) the board reinstates the requirement; or
- 1.30 (2) June 30, 2023.
- 1.31 (b) Upon adoption by the board of an internal operating procedure authorizing the
- 1.32 executive director to do so, the executive director may immediately temporarily suspend
- 1.33 requirements listed in paragraph (a) for no longer than 72 hours.

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2.1	(c) This section expires June 30, 2023.
2.2	(d) No later than 48 hours after suspending a requirement under this section, the executive
2.3	director of the Emergency Medical Services Regulatory Board must provide written notice
2.4	to the chairs and ranking minority members of the legislative committees with jurisdiction
2.5	over the Emergency Medical Services Regulatory Board.
2.6	EFFECTIVE DATE. This section is effective the day following final enactment.
2.7	Sec. 4. COMMISSIONER OF HEALTH; TEMPORARY EMERGENCY
2.8	AUTHORITY.
2.9	Subdivision 1. Temporary emergency authority granted. The commissioner of health
2.10	is granted temporary emergency authority as described in and limited by this section. The
2.11	temporary emergency authority granted to the commissioner may only be used to grant
2.12	individual or blanket state waivers.
2.13	Subd. 2. Individual or blanket waivers permitted. Temporary individual or blanket
2.14	waivers may be granted to waive requirements in the following statutes provided a granted
2.15	waiver does not adversely affect resident or patient care or quality of the services:
2.16	(1) Minnesota Statutes, chapter 144, for hospitals relating to hospital construction
2.17	moratorium or bed capacity restrictions, except that no individual or blanket waiver may
2.18	be granted that will result in construction or other physical alterations of a hospital that
2.19	cannot be removed at the expiration of the waiver; and
2.20	(2) Minnesota Statutes, chapters 144 and 144A, for nursing homes relating to bed
2.21	moratorium, bed capacity, layaway and nonlayaway beds, and the notice timeline
2.22	requirements for residents who are transferred or discharged as a response to COVID-19.
2.23	Subd. 3. Notice. (a) No later than 48 hours after an individual wavier or blanket waiver
2.24	under this section goes into effect, the commissioner must provide written notice of the
2.25	waiver to the appropriate ombudsman, if any, and to the chairs and ranking minority members
2.26	of the legislative committees with jurisdiction over the Department of Health.
2.27	(b) A waiver issued or granted under this section must be posted on the Department of
2.28	Health's website within 48 hours after being issued or granted and must include a
2.29	plain-language description of the waiver.
2.30	Subd. 4. Expiration of waivers. Any waiver granted by this section expires on June 30,
2.31	2022. This subdivision does not apply to nursing home transfer and discharge waivers if
2.32	necessary federal approval is not obtained prior to June 30, 2022.

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3.1	EFFECTIVE DATE. This section is effective the day following final enactment."
3.2	Page 7, line 20, delete everything after "2023"
3.3	Page 7, delete line 21
3.4	Page 7, line 22, delete everything before the period
3.5	Page 8, after line 14, insert:
3.6	"Sec. 6. CHILD CARE ASSISTANCE PROGRAM PAYMENT DURING
3.7	TEMPORARY CLOSURES FOR HEALTH CONCERNS RELATED TO COVID-19.
3.8	(a) The commissioner of human services may pay child care assistance to a child care
3.9	provider, through June 26, 2022, when:
3.10	(1) children are not attending child care because the child care provider has temporarily
3.11	closed an entire program due to health concerns related to COVID-19; or
3.12	(2) a provider chooses to reduce or not charge fees for non-CCAP families because of
3.13	closed or absent days due to health concerns related to COVID-19.
3.14	(b) Child care assistance payments during temporary closures related to COVID-19 are
3.15	limited to up to eight weeks total per child care provider. A child care provider must report
3.16	any closure to the commissioner of human services prior to submitting a request for payment
3.17	under this section.
3.18	(c) A child care provider that receives a child care assistance payment under this section
3.19	and that charges or charged fees to families because of closed or absent days due to health
3.20	concerns related to COVID-19 shall not collect the amount charged from families for days
3.21	that the provider receives a payment under this section.
3.22	(d) Child care assistance program payments made to a provider for absent or closed days
3.23	are considered income for purposes of applying for a child care stabilization financial
3.24	hardship grant established pursuant to Laws 2021, First Special Session chapter 7, article
3.25	14, section 21, subdivision 4, paragraph (c).
3.26	EFFECTIVE DATE. This section is effective retroactively from November 1, 2021,
3.27	except paragraph (d) is effective the day following final enactment."
3.28	Page 9, delete section 5
3.29	Page 11, delete section 7 and insert:

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4.1	"Sec. 9. APPROPRIATION; TEMPORARY STAFFING POOL.
4.2	\$1,029,000 in fiscal year 2022 is appropriated from the general fund to the commissioner
4.3	of human services for the temporary staffing pool described in this act. This is a onetime
4.4	appropriation and is available until June 30, 2022.
4.5	EFFECTIVE DATE. This section is effective the day following final enactment."
4.6	Page 11, line 14, delete "any other law to the contrary" and insert "Minnesota Statutes,
4.7	chapter 16C" and delete "allocate funding"
4.8	Page 11, line 15, delete "to"
4.9	Page 11, line 16, delete "allocate funding to"
4.10	Page 11, line 17, delete "and may allocate funding for the costs needed"
4.11	Renumber the sections in sequence
4.12	Amend the title as follows:
4.13	Page 1, delete lines 2 to 8 and insert "relating to health and human services; granting
4.14	the commissioner of human services temporary authority to reinstate waivers and
4.15	modifications to certain human services programs; grant the commissioner of health
4.16	temporary emergency authority to grant certain COVID waivers; temporarily modifying
4.17	the authority of the Emergency Medical Services Regulatory Board; modifying the
4.18	membership and duties of the task force on eliminating subminimum wages; exempting
4.19	certain rate increases from a contingent appropriation requirement; establishing a temporary
4.20	staffing pool; appropriating money;"
4.21	Amend the title numbers accordingly

4.22 And when so amended the bill do pass. Amendments adopted. Report adopted.

Julie Rosen

(Committee Chair)

February 15, 2022..... (Date of Committee recommendation)