

1.1 Senator moves to amend S.F. No. 3249 as follows:

1.2 Page 10, after line 17, insert:

1.3 "Sec. 7. [245.4903] CULTURAL AND ETHNIC MINORITY INFRASTRUCTURE
1.4 GRANT PROGRAM.

1.5 Subdivision 1. Establishment. The commissioner of human services shall establish a
1.6 cultural and ethnic minority infrastructure grant program to ensure that mental health and
1.7 substance use disorder treatment supports and services are culturally specific and culturally
1.8 responsive to meet the cultural needs of the communities served.

1.9 Subd. 2. Eligible applicants. An eligible applicant is a licensed entity or provider from
1.10 a cultural or ethnic minority population who:

1.11 (1) provides mental health or substance use disorder treatment services and supports to
1.12 individuals from cultural and ethnic minority populations, including individuals who are
1.13 lesbian, gay, bisexual, transgender, or queer, from cultural and ethnic minority populations;

1.14 (2) provides or is qualified and has the capacity to provide clinical supervision and
1.15 support to members of culturally diverse and ethnic minority communities to qualify as
1.16 mental health and substance use disorder treatment providers; or

1.17 (3) has the capacity and experience to provide training for mental health and substance
1.18 use disorder treatment providers on cultural competency and cultural humility.

1.19 Subd. 3. Allowable grant activities. (a) The cultural and ethnic minority infrastructure
1.20 grant program grantees must engage in activities and provide supportive services to ensure
1.21 and increase equitable access to culturally specific and responsive care and to build
1.22 organizational and professional capacity for licensure and certification for the communities
1.23 served. Allowable grant activities include but are not limited to:

1.24 (1) workforce development activities focused on recruiting, supporting, training, and
1.25 supervision activities for mental health and substance use disorder practitioners and
1.26 professionals from diverse racial, cultural, and ethnic communities;

1.27 (2) supporting members of culturally diverse and ethnic minority communities to qualify
1.28 as mental health and substance use disorder professionals, practitioners, clinical supervisors,
1.29 recovery peer specialists, mental health certified peer specialists, and mental health certified
1.30 family peer specialists;

1.31 (3) culturally specific outreach, early intervention, trauma-informed services, and recovery
1.32 support in mental health and substance use disorder services;

2.1 (4) provision of trauma-informed, culturally responsive mental health and substance use
2.2 disorder supports and services for children and families, youth, or adults who are from
2.3 cultural and ethnic minority backgrounds and are uninsured or underinsured;

2.4 (5) mental health and substance use disorder service expansion and infrastructure
2.5 improvement activities, particularly in greater Minnesota;

2.6 (6) training for mental health and substance use disorder treatment providers on cultural
2.7 competency and cultural humility; and

2.8 (7) activities to increase the availability of culturally responsive mental health and
2.9 substance use disorder services for children and families, youth, or adults or to increase the
2.10 availability of substance use disorder services for individuals from cultural and ethnic
2.11 minorities in the state.

2.12 (b) The commissioner must assist grantees with meeting third-party credentialing
2.13 requirements, and grantees must obtain all available third-party reimbursement sources as
2.14 a condition of receiving grant funds. Grantees must serve individuals from cultural and
2.15 ethnic minority communities regardless of health coverage status or ability to pay.

2.16 Subd. 4. **Data collection and outcomes.** Grantees must provide regular data summaries
2.17 to the commissioner for purposes of evaluating the effectiveness of the cultural and ethnic
2.18 minority infrastructure grant program. The commissioner must use identified culturally
2.19 appropriate outcome measures instruments to evaluate outcomes and must evaluate program
2.20 activities by analyzing whether the program:

2.21 (1) increased access to culturally specific services for individuals from cultural and
2.22 ethnic minority communities across the state;

2.23 (2) increased number of individuals from cultural and ethnic minority communities
2.24 served by grantees;

2.25 (3) increased cultural responsiveness and cultural competency of mental health and
2.26 substance use disorder treatment providers;

2.27 (4) increased number of mental health and substance use disorder treatment providers
2.28 and clinical supervisors from cultural and ethnic minority communities;

2.29 (5) increased number of mental health and substance use disorder treatment organizations
2.30 owned, managed, or led by individuals who are Black, Indigenous, or people of color;

2.31 (6) reduced in health disparities through improved clinical and functional outcomes for
2.32 those accessing services; and

3.1 (7) led to an overall increase in culturally specific mental health and substance use
3.2 disorder service availability."

3.3 Page 25, after line 5, insert:

3.4 "Sec. 31. **APPROPRIATION; CULTURAL AND ETHNIC MINORITY**
3.5 **INFRASTRUCTURE GRANT PROGRAM.**

3.6 \$10,000,000 in fiscal year 2023 is appropriated from the general fund to the commissioner
3.7 of human services for the cultural and ethnic minority infrastructure grant program under
3.8 Minnesota Statutes, section 245.4903.

3.9 Sec. 32. **APPROPRIATION; COMMUNITY MENTAL HEALTH PROGRAMS**
3.10 **WORKFORCE RELIEF GRANTS.**

3.11 (a) \$10,000,000 in fiscal year 2023 is appropriated from the general fund to the
3.12 commissioner of human services to administer grants to community mental health programs
3.13 that agree to use at least 90 percent of the grant funds for hiring and retention bonuses to
3.14 hire new employees or retain existing employees, increase employee benefits, and provide
3.15 additional training and supervision.

3.16 (b) For purposes of this section, "community mental health program" means a mental
3.17 health provider, center, clinic, program, or entity that:

3.18 (1) is operating in Minnesota and is:

3.19 (i) providing day treatment programs for children or adults; or

3.20 (ii) serving children with an emotional disorder or adults with mental illness under
3.21 Minnesota Statutes, section 245I.011 or 256B.0671, including through assertive community
3.22 treatment, intensive residential treatment services, adult rehabilitative mental health services,
3.23 crisis services, children's therapeutic services and supports, children's residential services,
3.24 psychiatric residential treatment facilities, outpatient mental health treatment provided by
3.25 mental health professionals, community mental health center services, certified community
3.26 behavioral health clinics, intensive mental health outpatient treatment, day treatment and
3.27 treatment foster care, or targeted case management;

3.28 (2) demonstrates to the commissioner that at least 30 percent of the community mental
3.29 health program's clients are:

3.30 (i) uninsured; or

- 4.1 (ii) enrolled in medical assistance, MinnesotaCare, or another Minnesota health care
4.2 program;
- 4.3 (3) is not providing hospital inpatient services;
- 4.4 (4) provides services to rural or underserved communities;
- 4.5 (5) is not providing hospital outpatient services; and
- 4.6 (6) is not receiving a grant under United States Code, title 42, section 254b.
- 4.7 (c) Grantees must provide documentation of the use of grant funds through an attestation
4.8 form developed by the commissioner and may be subject to post-grant activity audit review
4.9 by the commissioner."
- 4.10 Renumber the sections in sequence and correct the internal references
- 4.11 Amend the title accordingly