

2023 DHS HHS Budget Bill Index

HHS Article 1: CHILD CARE

BLWG # & Title	Bill Section	Fiscal Impact (Y/N)	Stat. Sec. Amended	Section Description
CF47 Supporting Child Care for Foster Care and Relative Caregivers	1	Y	119.011 subd. 2	Adds language to CCAP definition of “Child care fund applicants” to include relative custodians, successor custodians or guardians, or foster parents.
CF47 Supporting Child Care for Foster Care and Relative Caregivers	2	Y	119.011 subd. 5	Adds language to CCAP definition of “Child care” to include relative custodians, successor custodians or guardians, or foster parents.
CF47 Supporting Child Care for Foster Care and Relative Caregivers	3	Y	119.011 subd. 13	Adds language to CCAP definition of “Family” to include relative custodians, successor custodians or guardians, or foster parents and their spouses
CF46 Administrative Improvements for Providers	4	Y	119B.011 subd. 19a	Moves the process of CCAP provider registration to DHS rather than CCAP agencies.
CF44 Reprioritize BSF	5	Y	119B.03 subd. 4a	Changes language from 2021 session on temporary reprioritization to be permanent priorities with an effective date of July 1, 2023.

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CF46 Administrative Improvements for Providers	6	Y	119B.125 subd. 1	The commissioner, not the county, will authorize a provider. Strikes language that states a legal nonlicensed provider must reauthorized when certain conditions are met. LNL providers do not need to be reauthorized, but there needs to be new background studies.
CF46 Administrative Improvements for Providers	7	Y	119B.125 subd. 1 a	Allows the commissioner (rather than CCAP agencies) to authorize providers, ensure background studies are performed as needed for legal nonlicensed providers. Refers to 245C when necessary, and reformats the language for clarity.
CF46 Administrative Improvements for Providers	8	Y	119B.125 subd. 1b	Specifies the commissioner, rather than the counties, shall collect verification for relevant trainings from providers. Removes outdated language.
CF46 Administrative Improvements for Providers	9	Y	119B.125 subd. 2	<ul style="list-style-type: none"> • The commissioner, rather than counties will review information around persons who cannot be authorized • Removes provisions creating duplicative background studies • Cites background studies statute (245C) when applicable • Technical change to align with program practice
CF46 Administrative Improvements for Providers	10	Y	119B.125 subd. 3	Gives the commissioner authority to deny or revoke a registration, and to later authorize that person if certain conditions are made
CF46 Administrative Improvements for Providers	11	Y	119B.125 subd. 4	The commissioner (rather than counties) may deny registrations when a provider meets the criteria for unsafe care. The commissioner will establish state wide criteria for unsafe care.
CF46	12	Y	119B.125 subd. 6	<ul style="list-style-type: none"> • Clarifies which actions the commissioner may take and which actions a CCAP agency may take

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Administrative Improvements for Providers				<ul style="list-style-type: none"> • DHS will have the sole authority to pursue an administrative disqualification • DHS will be responsible for taking actions against providers such as denying or revoking a registration • CCAP agencies will retain the authority to establish an attendance record overpayment
CF46 Administrative Improvements for Providers	13	Y	119B.125 subd. 7	The commissioner or a county may periodically audit providers for record keeping requirements
CF45 Update Maximum Rates	14	Y	119B.13, subd 1	Changes the CCAP Maximum Rates and Registration Fees to the 75 th Percentile of the most recent Market Rate Survey to be updated every three years. This is effective beginning October 30, 2023.
CF46 Administrative Improvements for Providers	15	Y	119B.13 subd. 6	<ul style="list-style-type: none"> • The commissioner, rather than CCAP agencies, may refuse or revoke a registration. • DHS alone, rather than CCAP agencies, stops payments to providers or refuses to pay bill submitted by providers under certain conditions • DHS assesses whether the standard of proof is met to stop payments, not CCAP agencies • DHS is responsible for all actions relating to a provider's registration
CF46 Administrative Improvements for Providers	16	Y	119B.16 subd. 1c	Clarifies that CCAP agencies will still send notices to providers under some circumstances, such as overpayment notices
CF46 Administrative Improvements for Providers	17	Y	119B.16 subd. 3	DHS is responsible for all actions relating to a provider's registration.
CF46 Administrative Improvements for Providers	18	Y	119B.161 subd. 2	DHS alone must mail written notices when suspending payment or denying/revoking authorization/registration.

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CF46 Administrative Improvements for Providers	19	Y	119B.161 subd. 3	The department alone determines if there is sufficient evidence warranting an administrative action and the department alone may take that action.
CF-52- Supporting the Child Care Industry and Workforce	20	Y	119B.19, subd 7	Amends the statute governing child care resource and referral programs to allow administration of the one-stop regional assistance network to help establish and sustain child care programs, and provide supports to assist economically challenged individuals with beginning a career path in child care.
CF-52- Supporting the Child Care Industry and Workforce	21	Y	Section 119B.27, Subd. 1 - 8	Establishes the Child Care Retention Program, and the requirements to participate, such as remaining in operation and serving a minimum number of children. Requires funds are spent within 6 months, and that programs keep records for six years. It also requires payments are based on FTEs, and requires payments to be increased by 25% for providers receiving CCAP and ELS or located in an equity area.
CF-52- Supporting the Child Care Industry and Workforce	22	Y	119B.28	Establishes a grant program to enable family child care providers to implement shared services alliances.
CF-52- Supporting the Child Care Industry and Workforce	23	Y	119B.29	Provides grants or other supports to child care providers to improve their access to computers, the Internet, online child care management applications and other technology intended to improve business practices.
CF46 Administrative Improvements for Providers	24	Y	254C.04 subd. 1	Adds language to reflect that the commissioner will conduct background studies for legal nonlicensed providers. Updates language to reflect that background study request are submitted in NETStudy 2.0

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CF46 Administrative Improvements for Providers	25	Y	245C.05 subd. 4	Repeals language that allows CCAP agencies to receive background study results for legal nonlicensed providers
CF46 Administrative Improvements for Providers	26	Y	245C.17 subd. 6	Removes language allowing CCAP agencies to receive legal nonlicensed background study results.
CF46 Administrative Improvements for Providers	27	Y	245C.23 subd. 2	Removes language allowing CCAP agencies to receive legal nonlicensed background study results.
CF46 Administrative Improvements for Providers	28	Y	256.046 subd. 3	Removes references to local agencies related to administrative fraud and disqualification hearings. Under this proposal, DHS has sole authority to pursue and issue administrative disqualifications.
CF46 Administrative Improvements for Providers	29	Y	256.983 subd. 5	Add language to clarify that CCAP agencies may make recommendations to DHS to suspend a provider's payment or deny/revoke a provider's authorization/registration. Removes duplicative language that exists elsewhere in statute
CF-52- Supporting the Child Care Industry and Workforce	30	Y	Laws 2021, First Special Session chapter 7, article 14, section 21	Directs department to continue providing child care stabilization grants during transition months from July 1, 2023 through September 30, 2023. It also defines a full-time equivalent as individuals caring for children 32 hours per week and allowing individuals to count as no more than 2 FTEs.

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CF45 Update Maximum Rates	31	Y	Direction to DHS	Adds rider language to specify how additional funds are allocated to CCAP local agencies.
CF47 Supporting Child Care for Foster Care and Relative Caregivers	32	Y	Direction to DHS	Direction to the commissioner on how to allocate additional funds to Basic Sliding Fee.
CF46 Administrative Improvements for Providers	33	Y	254C.11 subd. 3	REPEALER Repeals language that allows county agencies to access criminal history data for legal nonlicensed providers. Language is also outdated as NetStudy 2.0 has been implemented.
CF44 Reprioritize BSF	33	Y	119B.03 subd. 4	REPEALER Repeals language from the previous language with outdated Basic Sliding Fee priorities.

HHS Article 2: CHILD SAFETY AND PERMANENCY

BLWG # & Title	Bill Section	Fiscal Impact (Y/N)	Stat. Sec. Amended	Section Description
CF60 – Suppt After FC	1	Y	**New** 256.4791	Independent Living Skills for Foster Youth Grants. Provides authorization to the commissioner to establish grants to local social services agencies, Tribes, and community-based organizations to provide independent living services to eligible foster youth.
CF60 – Suppt After FC	2	Y	**New** 256.4792	Support Beyond 21 Grant Program. Provides authorization to the commissioner to establish grants to community-based organizations to provide services and financial support to eligible youth.
CF60 – Suppt After FC	3	Y	**New** 256k.47	Minor Connect Grant Program. Provides authorization to the commissioner to establish grants for the development, implementation, and evaluation of services to increase housing stability to eligible youth.
CF58 – FFPSA	4	Y	**New** 260.014	Family First Prevention and Early Intervention Allocations. Provides authorization to the commissioner to establish a program that allocates funds to counties and federally recognized Tribes in Minnesota to support prevention and early intervention services in to support and enhance the Family First Prevention Services Act. Outlines the uses that the allocated funds can be used for. Establishes how payments will be made for this allocation, including base allocation amounts, plan and reporting requirements. Prohibits supplanting existing funds.
CF72 – Sex Trafficking Path	5	Y	260.761, subd. 2	Non-Caregiver Sex Trafficking Response Path. Amends statute to include a new noncaregiver sex trafficking assessment in list of types of actions about which the local social services agency shall notify the Indian child’s tribe. Small grammatical changes throughout.
CF59 – Support for Tribal CW	6	Y	260.786	Child Welfare Staff Allocation for Tribes. Allocates \$80,000 per year to each of Minnesota’s federal recognized tribes that are not in the AICWI for staff to respond to critical staffing needs for CP or CW services.

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CF72 – Sex Trafficking Path	7	Y	260C.007, subd. 14	Non-Caregiver Sex Trafficking Response Path. Amends statute to include sex trafficking in list of conduct towards a child constituting “egregious harm.”
CF60 – Suppt After FC	8	Y	260C.451, **new** subd. 8a	Support Beyond 21 Program. Authorize the responsible social services agency to refer an eligible youth to the Support Beyond 21 program.
CF60 – Suppt After FC	9	Y	260C.451, **new** subd. 8b	Support Beyond 21 Program. Provides authorization to the commissioner to establish the Support Beyond 21 Program to provide financial assistance to eligible youth to ensure their basic needs are met as they transition into adulthood.
CF60 – Suppt After FC	10	Y	260C.452, **new** subd. 6	Independent Living Skills Grants. Provides authorization to the commissioner to establish grants to local social service agencies, tribes, and other community organizations for independent living services to eligible youth.
CF60 – Suppt After FC	11	N	260C.605, subd. 1	Quality Assurance of Recruitment Efforts. Confirms existing agency authority to supervise county social services agencies’ recruitment efforts are subject to supervision by the commissioner to ensure they are individualized to a child’s specific needs.
CF60 – Suppt After FC	12	Y	260C.605, **new** subd. 3	Quality Assurance of Recruitment Efforts. Provides authorization to the commissioner to establish an ongoing quality assurance process for recruitment efforts to ensure they are individualized to a child’s specific needs.
CF60 – Suppt After FC	13	Y	260C.704	Requirements For Qualified Individual’s Assessment of the child for placement in a Qualified Residential Treatment Program Commissioner shall establish a review process for a qualified individual’s assessment.
CF72- Sex Trafficking Path	14	Y	260E.01	Non-Caregiver Sex Trafficking Response Path. Amend subpart (b)(3) to exempt reports of sex trafficking by a noncaregiver sex trafficker; adding a new subpart (b)(5) to include noncaregiver sex trafficking assessment when a report alleges sex trafficking by a noncaregiver; and renumbering subpart (b)(6).
CF72 - Sex Trafficking Path	15	Y	260E.02, subd. 1	Non-Caregiver Sex Trafficking Response Path. Amend subpart (1), establishment of team, to include in the list of membership “representatives of agencies providing specialized services of response for youth who experience sex trafficking or exploitation.

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CF72 – Sex Trafficking Path	16	Y	260E.03	Non-Caregiver Sex Trafficking Response Path. Amend by adding subd. 15a defining “noncaregiver sex trafficker”
CF72 – Sex Trafficking Path	17	Y	260E.03	Non-Caregiver Sex Trafficking Response Path. Amend by adding subd. 15b defining “noncaregiver sex trafficking assessment” to include comprehensive assessment of child safety, risk of subsequent maltreatment, and strengths and needs child and family. No maltreatment determination required but must determine need for services
CF72 – Sex Trafficking Path	18	Y	260E.03, subd. 22	Non-Caregiver Sex Trafficking Response Path. Amend subpart (7) to include sex trafficking in list of conduct defined as “substantial child endangerment”
CF72 – Sex Trafficking Path	19	Y	260E.14, subd. 2	Non-Caregiver Sex Trafficking Response Path. Amend last sentence to include “assessing” or investigating when a child is identified as a victim of sex trafficking
CF72 – Sex Trafficking Path	20	Y	260E.14, subd. 5	Non-Caregiver Sex Trafficking Response Path. Amends statute subpart (b) by organizing into list of two circumstances when law enforcement must coordinate their investigation with the child welfare agency, and adding (2) “a report alleges sex trafficking of a child.”
CF72 – Sex Trafficking Path	21	Y	260E.17, subd. 1	Non-Caregiver Sex Trafficking Response Path. Update subdivision to include noncaregiver sex trafficking assessment throughout, including: <ul style="list-style-type: none"> • Subpart (a): add noncaregiver sex trafficking assessment to list of actions the local welfare agency make take • Subpart (b): add reference to new exception in clause (f) • Subpart (d): add reference to new exception in clause (f) • Add new clause (f): requires that a noncaregiver sex trafficking assessment be conducted when the alleged offender is a noncaregiver sex trafficker Add new clause (g): requires that an investigation be conducted whenever, in the course of a noncaregiver sex trafficking assessment, the local child welfare agency learns that a caregiver is an alleged offender
CF72 – Sex Trafficking Path	22	Y	260E.18	Non-Caregiver Sex Trafficking Response Path. Amends by adding noncaregiver sex trafficking assessment to list of action about which immediate notice must be provided to

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				the Indian child's tribe. And adding noncaregiver sex trafficking assessment to requirements and authority to gather information
CF72 – Sex Trafficking Path	23	Y	260E.20, subd. 2	Non-Caregiver Sex Trafficking Response Path. Amends by adding exception to face-to-face contact requirement for noncaregiver sex trafficking assessments; and removing requirement for informing or interviewing the alleged offender in noncaregiver sex trafficking assessments. (This is key to survivors and stakeholders!)
CF72 – Sex Trafficking Path	24	Y	260E.24, subd. 2	Non-Caregiver Sex Trafficking Response Path. Amends requirements on determinations by adding noncaregiver sex trafficking assessment
CF72 – Sex Trafficking Path	25	Y	260E.24, subd. 7	Non-Caregiver Sex Trafficking Response Path. Amending the subdivision to including noncaregiver sex trafficking assessment in notice of determination to parent or guardian of the child
CF72 – Sex Trafficking Path	26	Y	260E.33, subd.1	Non-Caregiver Sex Trafficking Response Path. Amending the subdivision to include noncaregiver sex trafficking assessment as an action for which administrative reconsideration is not applicable
CF72 – Sex Trafficking Path	27	Y	260E.35, subd. 6	Non-Caregiver Sex Trafficking Response Path. Amending subpart (b) to include noncaregiver sex trafficking assessment cases regarding record retention
CF76 - CRCs	28	Y	Session Law	Community Resource Centers. Provides authorization to the commissioner to establish a grant program supporting community resource centers. Outlines commissioner duties and related infrastructure for supporting community resource centers, minimum community resource center grantee duties, eligibility criteria for grantees, requirements for grantee reporting, and requirements for evaluation of community resource centers. Provides authorization to commissioner to create a community resource center advisory council, and outlines Council membership and duties.
CF60 – Suppt After FC	29	Y	Direction to DHS	Federal Cash Assistance Benefits Preservation for Children in Foster Care. Requires the commissioner to implement a public engagement and research project to plan for

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				preserving income and resources attributed to a child to meet the best interests of the child.

HHS Article 3: CHILD SUPPORT

BLWG # & Title	Bill Section	Fiscal Impact (Y/N)	Stat. Sec. Amended	Section Description
CF53 – Child Suppt Updates	1	Y	518A.31	Allows a lump sum payment for derivative benefits based on obligor’s eligibility for social security or veterans benefits to satisfy child support arrears during the eligibility period, if the payment is received by the obligee.
CF53 – Child Suppt Updates	2	Y	518A.32, Subd. 3	Adds a paragraph to exclude parents who are eligibility for GA and SSI from income imputation by setting a standard that these parents are not voluntarily unemployed/underemployed.
CF53 – Child Suppt Updates	3	Y	518A.32, Subd. 4	Clarifies that MFIP benefits should be treated the same as federally funded TANF benefits for the purpose disallowing income imputation for parents.
CF53 – Child Suppt Updates	4	Y	518A.34	Assures that any excess current VA/SS benefits do not pay back arrears (to be read together with the changes to 518A.31 which would allow lump sums to pay back arrears)
CF53 – Child Suppt Updates	5	Y	518A.41	Makes several changes to calculation of medical support include reworking definitions, setting a standard for affordability, establishing that MA is appropriate coverage if it is in place, setting a 200% of poverty income standard below which a noncustodial parent does not need to contribute towards MA, and allowing administrative suspension of collection of medical support if the custodial parent is failing to pay for coverage as ordered.
CF53 – Child Suppt Updates	6	Y	518A.42, subd. 1	Adds language related to obligor’s ability to pay; any derivative benefits based on obligor eligibility for VA or SS benefits and paid to the obligee, should be deducted prior to the self support reserve.
CF53 – Child Suppt Updates	7	Y	518A.42, subd 3	Clarifies that any MFIP grant (not only those funded by TANF) received by the obligor exempts the obligor from the minimum order.
CF53 – Child Suppt Updates	8	Y	518A.56	Changes eligibility criteria for suspension of driver’s licenses for nonpayment of support. Excludes cases where the obligor does not actually have a driver’s license or when there is no known address for notice. Additionally adds a series of circumstances under which the court or agency may exercise discretion and decline to suspend a license.
CF53 – Child Suppt Updates	9	Y	518A.77	Adds reference to the federal regulation for quadrennial review of the guidelines.

HHS Article 4: ECONOMIC ASSISTANCE

BLWG # & Title	Bill Section	Fiscal Impact (Y/N)	Stat. Sec. Amended	Section Description
CF-68 Supporting Working Minnesotans	1	Y	119B.025, subd. 4	Clarifies that the cross-reference for reporting requirements for families participating in CCAP as 256P.07, subd. 6 in the uniformity statute. These reporting requirements do not change from current practice for CCAP. This is effective March 1, 2025.
CF-68 Supporting Working Minnesotans	2	Y	256D.03	Adds a subdivision to the “Responsibility to Provide General Assistance” section that requires local agencies to determine eligibility and calculate benefit amounts for General Assistance according to 256P. This is effective March 1, 2025.
CF-68 Supporting Working Minnesotans	3	Y	256D.63, subd. 2	Removes language that prohibits MFIP households from aligning with SNAP reporting requirements that state that “households required to report periodically shall not be required to report more often than one time every six months.” This is effective March 1, 2025.
CF-63 Food Security for Minnesota Families	4	Y	256D.65	Codifies new SNAP outreach language.
CF-63 Food Security for Minnesota Families	5	N	256E.34, subd. 4	Allows Minnesota Food Shelf Program funding to be used to purchase personal hygiene products including but not limited to diapers and toilet paper.

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CF-63 Food Security for Minnesota Families	6	Y	256E.341	Establishes American Indian Food Sovereignty Program.
CF-64 Building Assets for Minnesota Families	7	N	256E.35, subd. 1	Adds “emergencies” to the list of items that families can save towards as part of the Family Assets for Independence in Minnesota (FAIM) program.
CF-64 Building Assets for Minnesota Families	8	N	256E.35, subd. 2	Amends the definition of “fiduciary organization” for the Family Assets for Independence in Minnesota (FAIM) program
CF-64 Building Assets for Minnesota Families	9	N	256E.35, subd. 3	Adds language to allow a portion of funds to be expended on evaluation of FAIM.
CF-64 Building Assets for Minnesota Families	10	N	256E.35, subd. 4a	Adds “credit building” to the types of financial education that a financial coach must provide to Family Assets for Independence in Minnesota (FAIM) program participants. Adds “saving for emergencies” and “saving for a child’s education” to the list of asset-specific training that a financial coach must provide to Family Assets for Independence in Minnesota (FAIM) program participants.
CF-64	11	Y	256E.35, subd. 6	Increases the lifetime match limit from \$6,000 to \$12,000 for Family Assets for Independence in Minnesota (FAIM) program participants.

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Building Assets for Minnesota Families				
CF-64 Building Assets for Minnesota Families	12	N	256E.35, subd. 7	Adds “the amount of contributions to Minnesota 529 savings plans and emergency savings accounts” to the list of items that must be reported to DHS.
CF-68 Supporting Working Minnesotans	13	Y	256I.03, subd. 13	Amends the definition of “prospective budgeting” in the housing support statute to be consistent with the definition in the uniformity statute (256P.01, subd. 9). This is the definition that will be shared by housing support, general assistance, and MFIP. This is effective March 1, 2025.
CF-68 Supporting Working Minnesotans	14	Y	256I.06, subd. 6	Amends the reporting statute for housing support to align it with the reporting requirements in the uniformity statute (256P.07). It also aligns the housing support statute with the 6-month reporting requirements in the new 6-month reporting uniformity statute (256P.10). This is effective March 1, 2025.
CF-68 Supporting Working Minnesotans	15	Y	256I.06	Adds a subdivision to the “Payment Methods” section of the Housing Support statute for when to terminate assistance. This language aligns with the new 6-month reporting uniformity statute (256P.10). This is effective March 1, 2025.
CF-68 Supporting Working Minnesotans	16	Y	256I.06, subd. 8	Removes language about when an increase in income or a decrease in income is effective for housing support households. These circumstances are covered in the new prospective budgeting of benefits uniformity statute (256P.09). This is effective March 1, 2025.

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CF-68 Supporting Working Minnesotans	17	Y	256J.08, subd. 71	Amends the definition of “prospective budgeting” in the MFIP statute to be consistent with the definition in the uniformity statute (256P.01, subd. 9), that states “Prospective budgeting means estimating the amount of monthly income that an assistance unit will have in the payment month.” This is the definition that will be shared by housing support, general assistance, and MFIP. This is effective March 1, 2025.
CF-68 Supporting Working Minnesotans	18	Y	256J.08, subd. 79	Amends the definition for “recurring income” in the MFIP statute to remove references to “retrospective budgeting” since this form of budgeting will no longer be used under this proposal. This is effective March 1, 2025.
CF-68 Supporting Working Minnesotans	19	Y	256J.21, subd. 3	Clarifies that the initial income test for MFIP is for a six month period and that the MFIP assistance payment will be based on prospective budgeting as outlined in the new prospective budgeting of benefits uniformity statute (256P.09). This is effective March 1, 2025.
CF-68 Supporting Working Minnesotans	20	Y	256J.21, subd. 4	Removes references to a “monthly income test” in the MFIP statute and aligns MFIP eligibility with prospective budgeting. Removes a section of MFIP statute that requires local agencies to suspend MFIP assistance payments when a household’s monthly income is greater than the MFIP transitional standard. This is effective March 1, 2025.
CF-68 Supporting Working Minnesotans	21	Y	256J.33, subd. 1	Removes references to “payment month”, “in a calendar month”, and “retrospective budgeting” in the MFIP statute on determination of eligibility and replaces “retrospective” with “prospective” since MFIP will no longer be using retrospective budgeting and MFIP eligibility will be calculated for a 6-month period rather than on a monthly basis under this proposal. Removes a reference to section of MFIP statute on treatment of lump sums (256J.37, subd. 10) since that subdivision is being removed as a result of this proposal. Lump sums will be treated as assets rather than income (same as SNAP). Clarifies that an MFIP assistance unit is not eligible when their countable income equals or exceeds the MFIP standard of need or the family wage level for the assistance unit. Everything in this section is

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				effective March 1, 2025 except removing the reference to lump sums. That change is effective July 1, 2024.
CF-68 Supporting Working Minnesotans	22	Y	256J.33, subd. 2	Removes references to “month” and “retrospective budgeting” in the MFIP statute on prospective eligibility and replaces “retrospective” with “prospective” since MFIP will no longer be using retrospective budgeting and MFIP eligibility will be calculated for a 6-month period rather than on a monthly basis under this proposal. This is effective March 1, 2025.
CF-68 Supporting Working Minnesotans	23	Y	256J.37, subd. 3	Removes reference to “monthly” in the MFIP statute on earned income of wage, salary, and contractual employees since the income test will be calculated for a 6-month period rather than on a monthly basis under this proposal. This is effective March 1, 2025.
CF-68 Supporting Working Minnesotans	24	Y	256J.37, subd. 3a	Amends the reference to the section of statute that will budget the value of HUD subsidies received by MFIP households to 256P.09 (new prospective budgeting of benefits section in the uniformity statute). This is effective March 1, 2025.
CF-68 Supporting Working Minnesotans	25	Y	256J.95, subd. 19	Amends the reference to the new section of statute that governs prospective budgeting of benefits (256P.09) since the current reference is being repealed as a result of this proposal. This is effective March 1, 2025.
CF-68 Supporting Working Minnesotans	26	Y	256P.01	Adds a subdivision with the definition of “prospective budgeting” to the uniformity statute definitions. This is the definition that will be shared by housing support, general assistance, and MFIP. This is effective March 1, 2025.

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CF-64 Building Assets for Minnesota Families	27	N	256P.02, subd. 2	Amends the list of items that are considered “personal property” (assets) for programs under chapter 256P (DWP, MFIP, CCAP, GA, MSA, and Housing Support) to exclude Individual Development Accounts and Family Assets for Independence in Minnesota (FAIM) accounts.
CF-64 Building Assets for Minnesota Families	28	N	256P.02	Adds a subdivision to “Personal Property Limitations” section of chapter 256P to exclude Individual Development Accounts and Family Assets for Independence in Minnesota (FAIM) accounts from counting as personal property/assets.
CF-68 Supporting Working Minnesotans	29	Y	256P.04, subd. 4	Removes “nonrecurring income” from the list of items that need to be verified at application. Programs using prospective budgeting will not ask people to report nonrecurring income. If it is a significant amount, it will show up as an asset and will count if it puts an assistance unit over the asset limit. This is effective July 1, 2024.
CF-68 Supporting Working Minnesotans	30	Y	256P.04, subd. 8	Aligns verification requirements for 6-month reporting with the recertification verification requirements. This is effective March 1, 2025.
CF-68 Supporting Working Minnesotans	31	Y	256P.06, subd. 3	Removes “nonrecurring income” from the list of income sources that must be included in determining the income of an assistance unit. Programs using prospective budgeting will not ask people to report nonrecurring income. If it is a significant amount, it will show up as an asset and will count if it puts an assistance unit over the asset limit. This is effective July 1, 2024.
CF-68	32	Y	256P.07, subd. 1	Clarifies that participants who receive SSI and qualify for MSA or housing support are exempt from reporting income under this chapter. This is effective March 1, 2025.

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Supporting Working Minnesotans				
CF-68 Supporting Working Minnesotans	33	Y	256P.07	Adds a subdivision to clarify that CCAP participants are exempt from the entire section except for the CCAP-specific reporting requirements. This maintains current practice for CCAP. This is effective March 1, 2025.
CF-68 Supporting Working Minnesotans	34	Y	256P.07, subd. 2	Clarifies that all program participants (except CCAP) must report changes during the application period or by the tenth of the month following the month the change occurred. This is effective March 1, 2025.
CF-68 Supporting Working Minnesotans	35	Y	256P.07, subd. 3	Defines what circumstances must be reported when they change. This list is being pared down from 12 to 7. Everything in this section is effective March 1, 2025 except removing the reference to receipt of a lump sum payment. That change is effective July 1, 2024.
CF-68 Supporting Working Minnesotans	36	Y	256P.07, subd. 4	Adds “an individual in the household who is 18 or 19 years of age attending high school who graduates or drops out of school” to the list of MFIP-specific change reporting items. MFIP needs to know this because it would change the family composition and may make the family ineligible if they do not have any other children. This is effective March 1, 2025.
CF-68 Supporting Working Minnesotans	37	Y	256P.07, subd. 6	Maintains CCAP-specific reporting items. This maintains current practice for CCAP. This is effective March 1, 2025.

BLWG # & Title	Bill Section	Fiscal Impact (Y/N)	Stat. Sec. Amended	Section Description
CF-68 Supporting Working Minnesotans	38	Y	256P.07, subd. 7	Maintains MSA-specific reporting items. This maintains current practice for MSA. This is effective March 1, 2025.
CF-68 Supporting Working Minnesotans	39	Y	256P.07	Adds a subdivision for housing support-specific reporting items. This is effective March 1, 2025.
CF-68 Supporting Working Minnesotans	40	Y	256P.07	Adds a subdivision for General Assistance-specific reporting items. This is effective March 1, 2025.
CF-68 Supporting Working Minnesotans	41	Y	256P.09	Adds new prospective budgeting of benefits section to the uniformity statute. This is effective March 1, 2025.
CF-68 Supporting Working Minnesotans	42	Y	256P.10	Adds new 6-month reporting section to the uniformity statute. This is effective March 1, 2025.
CF-63	43	Y		Capital for Emergency Food Distribution Facilities - \$19,000,000 in FY24 is for improving and expanding the infrastructure of food shelf facilities across the state, including adding freezer or cooler space and dry storage space, improving the safety and sanitation of existing food

BLWG # & Title	Bill Section	Fiscal Impact (Y/N)	Stat. Sec. Amended	Section Description
Food Security for Minnesota Families				shelves, and addressing deferred maintenance or other facility needs of existing food shelves.
CF-68 Supporting Working Minnesotans & CF-63 Food Security for Minnesota Families	44	Y	256.9864, 256J.08, subds. 10, 53, 61, 62, 81, and 83; 256J.30, subds. 5, 7, and 8; 256J.33, subds. 3, 4, and 5; 256J.34, subds. 1, 2, 3, and 4; and 256J.37, subd. 10; 256.8799	Repeals statutes made obsolete by other changes; repeals obsolete SNAP statute.

HHS Article 5: ADDRESSING DEEP POVERTY

BLWG # & Title	Bill Section	Fiscal Impact (Y/N)	Stat. Sec. Amended	Section Description
BH-41: Addressing Deep Poverty	1	Y	256D.01, subd. 1a	Requires the General Assistance community assistance rate to align with the Minnesota Family Investment Program (MFIP) one-person transitional assistance standard.
BH-41: Addressing Deep Poverty	2	Y	256D.024, subd. 1	Makes it optional for counties and tribes to conduct random drug testing of people on General Assistance and convicted of felony drug offenses. Requires counties provide information about SUD programs.
BH-41: Addressing Deep Poverty	3	Y	256D.06 subd. 5	Extends the number of days to apply for other sources of benefits when applying for General Assistance or Housing Support.
BH-41: Addressing Deep Poverty	4	Y	256I.03, subd. 7	Modifies countable income for people on housing support who are living in community settings and have any type of unearned income so that they pay 30% of their income toward their housing support obligation.
BH-41: Addressing Deep Poverty	5	Y	256J.26, subd. 1	Makes it optional for counties and tribes to conduct random drug testing of people on SNAP and convicted of felony drug offenses. Requires counties provide information about SUD programs.
BH-41: Addressing Deep Poverty	6	Y	256P.01, adding subd. 5a	Adds lived-experience engagement definition in economic assistance program eligibility and verification.
BH-41: Addressing Deep Poverty	7	Y	256P.02, subd. 2	Modifies personal property limitations to include cash not excluded from lived-experience engagement.
BH-41: Addressing Deep Poverty	8	Y	256D.024, adding subd. 4	Clarifies health and Human services recipient engagement income definition in economic assistance program eligibility and verification.

BLWG # & Title	Bill Section	Fiscal Impact (Y/N)	Stat. Sec. Amended	Section Description
BH-41: Addressing Deep Poverty	9	Y	256P.06, subd. 3	Excludes tribal per capita payments from income inclusions.
BH-41: Addressing Deep Poverty	10	Y	256P.06, adding subd. 4	Adds recipient engagement income in economic assistance program eligibility and verification.
BH-41: Addressing Deep Poverty	11	Y	609B.425, Subd. 2	Makes it optional for counties and tribes to conduct random drug testing of people on General Assistance and Minnesota Supplemental Aid who are convicted of felony drug offenses. Requires counties provide information about SUD programs.
BH-41: Addressing Deep Poverty	12	Y	609B.435, subd. 2	Makes it optional for counties and tribes to conduct random drug testing of people on MFIP and who are convicted of felony drug offenses. Requires counties provide information about SUD programs.

HHS Article 6: HOUSING AND HOMELESSNESS

BLWG # & Title	Bill Section	Fiscal Impact (Y/N)	Stat. Sec. Amended	Section Description
CF-62 Addressing Homelessness for Minnesota Adults, Youth, and Families	1	N	145.4716, subd. 3	Adds a cross reference to the new DHS Safe Harbor Shelter and Housing statute (256K.47) in the MDH Safe Harbor for Sexually Exploited Youth statute to ensure that youth 24 years of age or younger are eligible for shelter, housing beds, and services provided by DHS to sexually exploited youth and youth at risk of sexual exploitation.
BH-44: Reducing Recidivism	2	Y	256I.04, subd. 1	Allows three-month presumptive eligibility for people exiting a minnesota correctional facility that are deemed by the correctional facility to meet criteria related to establishing a certified disability or disabling condition and that lack a nighttime residence. People who meet this eligibility category do not have countable income for the three-month period.
CF-62 Addressing Homelessness for Minnesota Adults, Youth, and Families	3	N	256K.45, subd. 3	Amends the Homeless Youth Act section of statute related to “street and community outreach and drop-in program” to include specialized services for “youth at risk of discrimination based on sexual orientation or gender identity.”
CF-62 Addressing Homelessness for Minnesota Adults, Youth, and Families	4	N	256K.45, subd. 7	Revises the statute governing Homeless Youth Act Provider Repair and Improvement grants, which were approved by the legislature during the 2022 session, to permit more providers to apply and give more flexibility to the types of projects funded. Removes the restriction that grantees cannot receive grant funds for two consecutive years.

BLWG # & Title	Bill Section	Fiscal Impact (Y/N)	Stat. Sec. Amended	Section Description
CF-62 Addressing Homelessness for Minnesota Adults, Youth, and Families	5	N	256K.47	Codifies the Safe Harbor Shelter and Housing grant program in statute. Currently, language for the program, which has permanent base funding, only exists in session law.
BH-40: Advancing Independence & Housing Stability: Improvements to Housing Stabilization Services	6	Y	Laws 2021, First Special Session chapter 7, article 17, section 5, subd. 1	Removes the expiration date for transitional housing costs under MA housing stabilization services and requires that eligible individuals are those that are transitioning from and institution or provider-controlled setting into their own home.
BH-40: Advancing Independence & Housing Stability: Improvements to Housing Stabilization Services	7	Y		Adds a biennial inflationary update to housing stabilization services rates on the consumer price index.

HHS Article 7: BEHAVIORAL HEALTH

BLWG # & Title	Bill Section	Fiscal Impact (Y/N)	Stat. Sec. Amended	Section Description
BH-52: Mental Health Crisis and Early Intervention Service Expansion	1	Y	245.4889, subd. 1	Establishes funding for start-up grants and funding for evidence-informed interventions for youth and young adults developing or at risk of emerging mood disorder and public awareness campaign for signs and symptoms.
BH-52: Mental Health Crisis and Early Intervention Service Expansion	2	Y	[245.4904]	Codifies a new grant program to fund Emerging Mood Disorder, including the purpose, grantee program requirements, eligible programs, and outcome measures.
BH-45: Expediting Access to BH Treatment	3	Y	254B.02, subd. 5	Clarifies local agency substance use disorder allocation purpose and holds current allocations constant.
BH-45: Expediting Access to BH Treatment	4	Y	254B.05, subd. 1	Allows hospitals, federally qualified health centers, and rural health clinics to be eligible vendors of comprehensive assessments.
HC-57: Opioid Prescribing Improvement	5	N	256B.0638 , subd. 1	Clarifies the intent of the Opioid Prescribing Improvement Program (OPIP) to include treating clients who receive treatment with opioid analgesics with supportive patient-centered and passionate care.

BLWG # & Title	Bill Section	Fiscal Impact (Y/N)	Stat. Sec. Amended	Section Description
Program (OPIP) Program Modifications				
HC-57: Opioid Prescribing Improvement Program (OPIP) Program Modifications	6	N	256B.0638 , subd. 2	Modifies the definition of “opioid disenrollment standards” to be “opioid sanction standards.”
HC-57: Opioid Prescribing Improvement Program (OPIP) Program Modifications	7	N	256B.0638 , subd. 4	Removes references to disenrollment standards and includes palliative care in the circumstances to which the prescribing protocols do not apply.
HC-57: Opioid Prescribing Improvement Program (OPIP) Program Modifications	8	N	256B.0638 , subd. 5	Clarifies the intent of the OPIP quality improvement program and modifies program requirements as to when a provider no longer must participate in quality improvement or may be held to sanctionable standards.
HC-57: Opioid Prescribing Improvement Program (OPIP)	9	N	[256B.0638, subd. 8]	Establishes sanction standards for the Opioid Prescribing Improvement Program as defined and recommended by the Opioid Prescribing Work Group (OPWG).

BLWG # & Title	Bill Section	Fiscal Impact (Y/N)	Stat. Sec. Amended	Section Description
Program Modifications				
HC-57: Opioid Prescribing Improvement Program (OPIP) Program Modifications	10	N	256B.064, subd. 1a	Establishes that the commissioner may impose sanctions for failure to meet the standards established by the Opioid Prescribing Work Group.
BH-51: Sustaining the Behavioral Health Workforce	11	Y	256B.0941 , adding a new subd. 5	Codifies start-up and capacity building grants for psychiatric residential treatment facilities. Establishes start-up and capacity-building grants for current and prospective PRTF programs who treat and accept individuals with complex support needs.
BH-52: Mental Health Crisis and Early Intervention Service Expansion	12	Y		Establishes a mobile response and stabilization services pilot for crisis response services to reduce hospitalizations and out-of-home services for children, youth, and families. Requires DHS to consult with an expert to formulate measurable outcomes and explore adding a similar mobile crisis response service under the MA state plan.
BH-45: Expediting Access to BH Services	13	Y		Requires DHS to evaluate the need for the SUD local allocation and to propose an updated allocation methodology that aligns with the identified purpose and person-centered outcomes for people with substance use disorders. Allows DHS to contract with a vendor to support the evaluation and actuarial analysis.

HHS Article 8: HEALTH CARE

BLWG # & Title	Bill Section	Fiscal Impact (Y/N)	Stat. Sec. Amended	Section Description
HC-84: Changes to Third Party Liability Requirements	1	N	62A.045	Adds the third party liability requirements of the Consolidated Appropriations Act of 2022 to the requirements that health insurers must comply with.
HC-87: Use of Telehealth in MHCP	2	Y	62A.673, subd. 2	Extends the use of audio-only telehealth to June 30, 2025
HC-85: MHCP Enrollee Error Overpayment Cleanup	3	N	256.0471, subd. 1	Removes the authority for the DHS, counties, and tribes to recover overpayments as a result of client error.
HC-53: Modify Inpatient Hospital Data Inputs due to COVID-19	4	N	256.969, subd. 2b	Clarifies that the base years for rebasing effective July 1, 2023, are calendar years 2018 and 2019 to mitigate impacts of COVID-19 on rebasing.
HC-53: Modify Inpatient Hospital Data Inputs due to COVID-19	5	N	256.969, subd. 9	Modifies the calculation for the DSH factor for HCMC
HC-52: Rate Methodology for Long-Term Acute Care Hospitals	6	N	256.969, subd. 25	Updates the payment rate methodology for long-term acute care hospitals (LTACHs) to ensure these payment rates continue to keep pace with increases in hospital costs.

BLWG # & Title	Bill Section	Fiscal Impact (Y/N)	Stat. Sec. Amended	Section Description
HC-73: MA for Former Foster Care Youth from Other States	7	Y	256B.055, subd. 17	Extends MA medical assistance coverage for a person under 26 years of age who was in foster care on the date of attaining 18 years of age and enrolled in another state's Medicaid program while in foster care in accordance with the SUPPORT Act.
HC-66: Expanding MA Coverage for Kids	8	Y	256B.056, subd. 7	Establishes continuous MA eligibility for up to 72 months for children under age 6 and for a period of 12 months for children ages 6 to 21.
HC-50: Continued Improvements to Access to Oral Health	9	Y	256B.062 5, subd. 9	Expands the adult dental benefit set in MA
HC-48: Drug Formulary Committee Modifications	10	Y	256B.062 5, subd. 13c	Expands the number of provider and consumer seats on the DFC. Removes the expiration date for the committee.
HC-48: Drug Formulary Committee Modifications	11	N	256B.062 5, subd. 13e	Requires that the cost of dispensing survey and report does not expire.
HC-46: Value-Based Arrangements for Drug Purchasing	12	Y	[256B.062 5, subd. 13k]	Allows DHS to enter into value-based drug purchasing arrangements as long as the arrangement provides the same amount or more of a value or discount in the aggregate as would claiming the mandatory federal drug rebate under the Federal Social Security Act, section 1927.

BLWG # & Title	Bill Section	Fiscal Impact (Y/N)	Stat. Sec. Amended	Section Description
HC-77: Remove Doula Supervision Requirements	13	Y	256B.062 5, subd. 28b	Adds language that commissioner shall enroll doula agencies and individual treating doulas to provide direct reimbursement.
HC-81: Supporting Tribal Providers and Payments	14	Y	256B.062 5, subd. 30	Allows enrolled Indian Health Service (IHS) facilities or select tribal health centers to elect to enroll as a tribal Federal Qualified Health Center (FQHC) and directs the Department of Human Services (DHS) to establish an alternative payment methodology for tribal FQHCs in order to comply with the CMS "Four Walls" policy.
HC-47: Elimination of MA Cost-Sharing	15	Y	256B.063 1, subd. 1	Eliminates co-pays and deductibles in MA beginning with services provided on or after January 1, 2024.
HC-54: 24 Month Time Limit for Medical Assistance Supplemental Payment Information	16	N	256B.196, subd. 2	Requires that the information necessary to compute supplemental payments under this section must be received within 24 months of request from DHS in order to receive the payments.
HC-86: Modifying the Withhold Measures for Managed Care Contracts	17	N	256B.69, subd. 5a	Removes the existing statutorily mandated managed care withholds.
HC-83: Newborn Screening Fee	18	Y	256B.76, subd. 1	Provides DHS with additional authority to reimburse providers for MDH newborn screening in outpatient settings. Increases payment rates for family planning and abortion services by 10% effective for services provided on or after January 1, 2024.

BLWG # & Title	Bill Section	Fiscal Impact (Y/N)	Stat. Sec. Amended	Section Description
Increase Technical Fix; HC-45: Rate Increase for Reproductive Health Services				
HC-50: Continued Improvements to Access to Oral Health	19	Y	256B.76, subd. 2	Rebases dental rates to use 2018 charges for services provided on or after January 1, 2024. Sets rebasing to occur every 3 years beginning January 1, 2027.
HC-50: Continued Improvements to Access to Oral Health	20	Y	256B.76, subd. 4	Removes outdated language related to critical access dental provider reimbursement.
HC-65: Increasing Health Care Access for Minnesotans	21	Y	256L.04, subdivision 10	Expands MinnesotaCare coverage to include undocumented children under age 19.
HC-64: Responding to COVID-19 in Minnesota Health Care Programs	22	Y	Laws 2020, First Special Session ch. 7, sec.1, subd. 1, as	Maintains continuous eligibility for MA and MinnesotaCare enrollees to comply with federal guidance until their first renewal following the start of redeterminations.

BLWG # & Title	Bill Section	Fiscal Impact (Y/N)	Stat. Sec. Amended	Section Description
			amended by Laws 2021, First Special Session ch.7, art. 2, sec. 71, and Laws 2022, ch. 98, art.4, sec. 49	
HC-64: Responding to COVID-19 in Minnesota Health Care Programs	23	Y	Laws 2021, First Special Session ch. 7, art. 1, sec. 36	Clarifies that DHS will not collect unpaid premiums during the continuous coverage period and until after an enrollee's first renewal during the redetermination period. Extends the suspension of periodic data matching until 12 months after the resumption of renewals. Establishes a 12 month asset disregard for enrollees subject to an asset limit until their second renewal after redeterminations begin. Provides DHS with flexibility to adjust MA eligibility verification requirements and ensure timely renewal processes during the unwinding period. Sets standards for MA fair hearings during the redetermination period.
HC-87: Use of Telehealth in MHCP	24	Y	Laws 2021, First Special Session ch. 7, art. 6, sec. 26	Extends the use of audio-only telehealth to June 30, 2025.

HHS Article 9: MEDICAL EDUCATION AND RESEARCH COST ACCOUNT

BLWG # & Title	Bill Section	Fiscal Impact (Y/N)	Stat. Sec. Amended	Section Description
HC-78: Preserving Funding for Medical Education and Research Costs	1	N	62J.692, subd. 1	Clarifies the definitions of doctor of pharmacy practitioners and dentists in the definition of “clinical medical education program” to include students and residents
HC-78: Preserving Funding for Medical Education and Research Costs	2	N	62J.692, subd. 3	Modifies the timeline and requirements for applications for MERC funds. Directs MDH to establish a timeline for applications and determine the information necessary to determine program eligibility.
HC-78: Preserving Funding for Medical Education and Research Costs	3	Y	62J.692, subd. 4	Modifies the distribution methodology for payments from the MERC account. Requires that payments under this section are for eligible sites that do not receive the MERC rate factor under 256.969, subdivision 2b, paragraph (k), or 256B.75, paragraph (b). Requires that undistributed funds be returned to the MERC fund and may be used in the subsequent distribution cycle.
HC-78: Preserving Funding for Medical Education and Research Costs	4	N	62J.692, subd. 5	Modifies the requirements for the medical education grant verification reports (GVRs).
HC-78: Preserving	5	Y	62J.692, subd. 8	Requires DHS to seek federal financial participation (FFP) for the reduced amount of MERC revenue dedicated to the FFS payments.

BLWG # & Title	Bill Section	Fiscal Impact (Y/N)	Stat. Sec. Amended	Section Description
Funding for Medical Education and Research Costs				
HC-78: Preserving Funding for Medical Education and Research Costs	6	Y	256.969, subd. 2b	Requires the payment rates for discharges beginning January 1, 2024 for all non-critical access hospitals to include a rate factor specific to each hospital that qualifies it for a MERC distribution. Requires DHS to make a one-time supplemental payment to each hospital in an amount to cover the funding gap for the last six months of 2023.
HC-78: Preserving Funding for Medical Education and Research Costs	7	Y	256B.75	Adjusts the rates paid to critical access hospitals for services delivered on or after January 1, 2024 to include any MERC distributions not included in the rate adjustment under 256.969, subdivision 2b, paragraph (k).
HC-78: Preserving Funding for Medical Education and Research Costs	8	Y	297F.10, subd. 1	Reduces the amount of the cigarette tax that must be credited each year to the MERC account for distribution.
HC-78: Preserving Funding for Medical Education and Research Costs	9	Y	Repealer	Repeals sections 62J.692, subdivisions 4a, 7, and 7a; 137.38, subdivision 1; and 256B.69, subdivision 5c.

HHS Article 10: MINNESOTACARE PUBLIC OPTION

BLWG # & Title	Bill Section	Fiscal Impact (Y/N)	Stat. Sec. Amended	Section Description
HC-76: Increasing Health Insurance Access for Minnesotans	1	N	256L.04, subd. 1c	Clarifies that a person who is considered a qualified individual under section 1312 of the Affordable Care Act and is eligible for enrollment in a qualified health plan with advance payment of the federal premium tax credit may be eligible for the MinnesotaCare buy-in.
HC-76: Increasing Health Insurance Access for Minnesotans	2	Y	256L.04, subd. 7a	Clarifies that adults whose income is greater than the MinnesotaCare income eligibility limits may be eligible for the MinnesotaCare buy-in.
HC-76: Increasing Health Insurance Access for Minnesotans	3	Y	[256L.04, subd. 15]	Establishes eligibility for the MinnesotaCare buy-in. Families and individuals with incomes over 200% FPG must meet all other MinnesotaCare eligibility limits to be eligible for the buy-in, except that families and individuals who are ineligible for MinnesotaCare solely due to having access to employer-sponsored coverage under 256L.07, subd. 2 are eligible for the buy-in. Limits enrollment for the buy-in to MNsure open enrollment or a MNsure special enrollment period.
HC-76: Increasing Health Insurance Access for Minnesotans	4	Y	256L.07, subd. 1	Allows for a MinnesotaCare enrollee who becomes ineligible due to income to continue enrollment under the MinnesotaCare buy-in.

BLWG # & Title	Bill Section	Fiscal Impact (Y/N)	Stat. Sec. Amended	Section Description
HC-76: Increasing Health Insurance Access for Minnesotans	5	Y	256L.15, subd. 2	Directs DHS to follow the modified premium schedule as established by the American Rescue Plan Act (ARPA) and as extended by the Inflation Reduction Act (IRA). Directs DHS to establish a sliding premium scale for individuals eligible for the MinnesotaCare buy-in. Exempts children under 21 from premiums under the MinnesotaCare buy-in.
HC-76: Increasing Health Insurance Access for Minnesotans	6	Y		Directs DHS to continue to administer MinnesotaCare as a basic health program (BHP) and implement a MinnesotaCare buy-in option as of January 1, 2027. Directs DHS to present an implementation plan and any additional legislative changes needed to the legislature by December 15, 2024. Directs DHS to seek any federal waivers necessary to implement, including those necessary to continue to receive federal BHP payments, receive other federal funding for the MinnesotaCare buy-in option, and receive federal payments equal to the value of premium tax credits and cost-sharing reductions that households with incomes greater than 200% FPG would have otherwise received. Requires consultation with Commerce and MNsure and allows DHS to contract for technical and actuarial assistance.

HHS Article 11: TRIBAL ELDER OFFICE

BLWG # & Title	Bill Section	Fiscal Impact (Y/N)	Stat. Sec. Amended	Section Description
AD-72: Tribal Elder Office	1	Y	New	Establishes a Tribal LTC Services and Supports Office into Minnesota Statute.
AD-72: Tribal Elder Office	2	Y	New	Establishes a Tribal LTC Services and Supports Advisory Council into Minnesota Statute.
AD-72: Tribal Elder Office	3	Y	256B.0924 , subd. 5	Updating Minnesota Statute to include Tribal Nations for MA reimbursement for adult targeted case management services (budget neutral).

HHS Article 12: BACKGROUND STUDIES

Proposal # & Title	Bill Section	Fiscal Impact (Y/N)	Stat. Sec. Amended	Section Description
OP-64 Background Studies Fee Changes	1	Y	245C.10, subd. 1d	Allows the commissioner to increase background study fees commensurate with an increase in state Bureau of Criminal Apprehension Fees.
OP-64 Background Studies Fee Changes	2	Y	245C.10, subd. 2	Increases background studies fees for supplemental nursing services agencies from \$42 to \$44.
OP-64 Background Studies Fee Changes	3	Y	245C.10, subd. 3	Increases background studies fees for personal care provider organizations from \$42 to \$44.
OP-64 Background Studies Fee Changes	4	Y	245C.10, subd. 4	Increases background studies fees for temporary personnel agencies, educational agencies, and professional services agencies from \$42 to \$44.
OP-64 Background Studies Fee Changes	5	Y	245C.10, subd. 5	Increases background studies fees for adult foster care and family adult day services from \$42 to \$44.
OP-64 Background Studies Fee Changes	6	Y	245C.10, subd. 6	Increases background studies fees for unlicensed home and community-based waiver providers of service to seniors and individuals with disabilities from \$42 to \$44.
OP-64 Background Studies Fee Changes	7	Y	245C.10, subd. 8	Increases background studies fees for children's therapeutic services and supports providers from \$42 to \$44.
OP-64 Background Studies Fee Changes	8	Y	245C.10, subd. 9	Increases background studies fees for all DHS-licensed programs from \$42 to \$44, except child foster care when the applicant or license holder resides in the home where child foster care services are provided, family child care, child care centers, certified license-

Proposal # & Title	Bill Section	Fiscal Impact (Y/N)	Stat. Sec. Amended	Section Description
				exempt child care centers, and legal non-licensed child care authorized under chapter 119B.
OP-64 Background Studies Fee Changes	9	Y	245C.10, subd. 9a	Increases background studies fees for family child care, certified license-exempt child care centers, licensed child care centers, and legal non-licensed child care providers from \$40 to \$44. Increases background study fees for minors completing studies for legal non-licensed child care providers, family child care, or licensed foster care homes from \$42 to \$44.
OP-64 Background Studies Fee Changes	10	Y	245C.10, subd. 10	Increases background studies fees for community first services and supports organizations from \$42 to \$44.
OP-64 Background Studies Fee Changes	11	Y	245C.10, subd. 11	Increases background studies fees for providers of housing support from \$42 to \$44.
OP-64 Background Studies Fee Changes	12	Y	245C.10, subd. 12	Increases background studies fees for child protection workers or social services staff having responsibility for child protective duties from \$42 to \$44.
OP-64 Background Studies Fee Changes	13	Y	245C.10, subd. 13	Increases background studies fees for providers of special transportation service from \$42 to \$44.
OP-64 Background Studies Fee Changes	14	Y	245C.10, subd. 14	Increases background studies fees for licensed children's residential facilities from \$51 to \$53.
OP-64 Background Studies Fee Changes	15	Y	245C.10, subd. 16	Increases background studies fees for providers of housing support services from \$42 to \$44.
OP-64 Background Studies Fee Changes	16	Y	245C.10, subd. 17	Increases background studies fees for early intensive developmental and behavioral intervention providers from \$42 to \$44.

Proposal # & Title	Bill Section	Fiscal Impact (Y/N)	Stat. Sec. Amended	Section Description
OP-64 Background Studies Fee Changes	17	Y	245C.10, subd. 20	Increases background studies fees initiated by the Professional Educators Licensing Standards Board from \$51 to \$53.
OP-64 Background Studies Fee Changes	18	Y	245C.10, subd. 21	Increases background studies fees initiated by the Board of School Administrators from \$51 to \$53.
OP-64 Background Studies Fee Changes	19	Y	245C.10, [new] subd. 22	Adds to statute the ability to recover the costs of Tribal Background Studies for adoption and child foster care. [Associated with a General Fund request to cover the cost of Tribal background studies.]
OP-64 Background Studies Fee Changes	20	N	245C.32, subd. 2	Allows the commissioner to use NETStudy 2.0 to share background study documentation electronically with entities and individuals who are the subject of a background study.
OP-61 New Chapter for MSOP Studies245J	21-49			Chapter 245J language- will be repealed in author's amendment
	50		Repealer	Repeals 1) the definition of public law background study, 2) the public law background studies section of statute, which is used for the Minnesota Sex Offender Program, and 3) variances for public law background studies.

HHS Article 13: LICENSING

Proposal # & Title	Bill Section	Fiscal Impact (Y/N)	Stat. Sec. Amended	Section Description
OP-51 FFAID Program Integrity Enhancement	1	Y	245.095	Provides tools for protecting public funds by allowing DHS to take action if DHS receives information regarding investigations, suspected fraud or disqualifications by another state or federal agency. Language further outlines appeal rights and clarifies the scope of this amendment.
OP-81 Streamlining BH Regulation	2	N	[245.7351]	Purpose and establishment of certified community behavioral health clinic model. <i>Effective 7/1/23 contingent on federal approval.</i>
OP-81 Streamlining BH Regulation	3	N	[245.7352]	Defines the following terms for sections [245.7351-245.736]: approval, care coordination, CCBHC, clinical responsibility, commissioner, comprehensive evaluation, crisis services, cultural and linguistic competence, designated collaborating organization, DCO agreement, face to face, functional assessment, financial responsibility, grievances, initial evaluation, initial eval equivalents, integrated treatment plan, limited English proficiency, outpatient WM, preliminary screening and risk assessment, preliminary treatment plan, needs assessment, scope of services, and state-sanctioned crisis services. <i>Effective 7/1/23 contingent on federal approval.</i>
OP-81 Streamlining BH Regulation	4	N	[245.7353]	Requires DHS to establish state certification process for CCBHCs according to federal and state requirements without service area limitations. Outlines requirements for certifications and licensure, certification schedule, variance authority, notice/opportunity for correction, county letter of support, decertification, and 223 demonstration requirements. <i>Effective 7/1/23 contingent on federal approval.</i>
OP-81 Streamlining BH Regulation	5	N	[245.7354]	Outlines governance structure requirements for CCBHCs. Eligible providers must be nonprofit or authorized to operate under local government or Indian Health Services or Tribal. Requires CCBHCs to collaborate with Indian Health Services, Tribes, or Urban Indian Tribes in clinic geographic area. Specifies board member requirements. <i>Effective 7/1/23 or upon federal approval.</i>
OP-81 Streamlining BH Regulation	6	N	[245.7355]	Requires minimum staffing requirements for CCBHCs, including licensed mental health professionals, LADCs, culturally & linguistically trained to meet needs of diverse patient

Proposal # & Title	Bill Section	Fiscal Impact (Y/N)	Stat. Sec. Amended	Section Description
				population and people with disabilities. Specifies requirements related to management team, medication management, alcohol and drug counselors, and peer services. <i>Effective 7/1/23 or upon federal approval.</i>
OP-81 Streamlining BH Regulation	7	N	[245.7356]	Specifies training plan and requirements for CCBHC, including training on veteran's issues, risk assessment, suicide prevention/response, and family/peer roles. <i>Effective 7/1/23 or upon federal approval.</i>
OP-81 Streamlining BH Regulation	8	N	[245.7357]	Requires CCBHCs ensure clinic services are available accessible to people of all ages and genders and that crisis management services are available 24 hours per day. Requires a safe and clean space, accessible hours of operations for populations served, access to people with limited English proficiency, culturally and linguistically appropriate screening tools, and interpretation/translation services. Specifies slide fee scale, accommodation, cultural services, and needs assessment requirements. <i>Effective 7/1/23 or upon federal approval.</i>
OP-81 Streamlining BH Regulation	9	N	[245.7358]	Specifies required CCBHC services provided directly or contracted. Requires care coordination, outreach, initial evaluation and comprehensive evaluation components, integrated treatment plan. <i>Effective 7/1/23 or upon federal approval.</i>
OP-81 Streamlining BH Regulation	10	N	[245.7359]	Requires CCBHCs to use evidence-based practices, appropriate for each patient's phase of life and development. Requires DHS to issue a list of required evidence-based practices and allows DHS to update the list to reflect new research and medical services. <i>Effective 7/1/23 or upon federal approval.</i>
OP-81 Streamlining BH Regulation	11	N	[245.736]	Outlines requirements for designated collaborating organizations, including a formal agreement, provider standards, maintaining responsibility for care coordination and clinical/financial responsibility. Specifies timeline for DCO agreement submission and the required components of agreements. <i>Effective 7/1/23 or upon federal approval.</i>
OP-79 Family Child Care Continuous Licenses	12	Y	245A.02, Subd. 2	Changes definition of annual for family child care licensing requirements from 12-month period dependent on license effective date to each calendar year.

Proposal # & Title	Bill Section	Fiscal Impact (Y/N)	Stat. Sec. Amended	Section Description
OP-72 Licensing Systems Transformation	13	Y	245A.04, Subd. 1	Requires applicants and license holders to use the provider licensing and reporting hub, once it is implemented.
OP-76 Critical Resources for Licensing	14	Y	245A.04, Subd. 7	Allows the commissioner to choose not to revoke a license affiliated with a license holder or controlling individual that had a license revoked within the past 5 years if the individual is operating the program in substantial compliance and continued operation is in the best interests of the community served. Similarly, allows the commissioner to issue a new license in response to an applicant, license holder, or controlling individual that had an application denied in the past 2 years or license revoked in the past 5 years. Outlines the considerations for determining whether a program's operation would be in the best interests of the community served.
OP-72 Licensing Systems Transformation	15	Y	245A.04, Subd. 7a	Requires license holders to enter and update their information in the provider licensing and reporting hub, once it is implemented.
OP-72 Licensing Systems Transformation	16	Y	245A.05	Allows notice of an application denial to be issued through the provider licensing and reporting hub. Allows an applicant to appeal a denial through the hub.
OP-72 Licensing Systems Transformation	17	Y	245A.055, Subd. 2	Allows the commissioner to notify a license holder of closure through the provider licensing and reporting hub and allows a provider to submit a request for reconsideration through the hub. Requires a license holder's request for reconsideration to be submitted through the provider licensing and reporting hub, once it is implemented.
OP-72 Licensing Systems Transformation	18	Y	245A.06, Subd. 1	Allows the commissioner to issue a correction order and conditional license through the provider licensing and reporting hub, once it is implemented.
OP-72 Licensing Systems Transformation	19	Y	245A.06, Subd. 2	Allows a provider to submit a request for reconsideration of a correction order through the provider licensing and reporting hub. Requires a license holder's request for

Proposal # & Title	Bill Section	Fiscal Impact (Y/N)	Stat. Sec. Amended	Section Description
				reconsideration of a correction order to be submitted through the hub, once it is implemented.
OP-72 Licensing Systems Transformation	20	Y	245A.06, Subd. 4	Allows a license holder to be notified of a conditional license through the provider licensing and reporting hub. Allows the license holder to request reconsideration of the conditional license through the hub.
OP-76 Critical Resources for Licensing	21	Y	245A.07, Subd. 2b	Creates a process for an immediate suspension to be issued to a licensed residential program with a delayed effective date of up to 30 days, to allow service recipients to be transitioned to a new provider and not experience a sudden service interruption.
OP-76 Critical Resources for Licensing	22	Y	245A.07, Subd. 2c	Outlines process for issuing an immediate suspension when a license holder operates multiple service sites under a single license. Requires the suspension order to be specific to the service site(s). Outlines the process for issuing an immediate suspension when a license holder operates multiple programs, each under their own license but held by the same license holder. Requires suspensions to be specific to the license and not apply to any other license a license holder may have if those other programs are operating in substantial compliance.
OP-72 Licensing Systems Transformation	23	Y	245A.07, Subd. 3	Allows a license suspension, revocation, or fine to be issued through the provider licensing and reporting hub. Allows the license holder to appeal a suspension, revocation, or fine through the hub.
OP-76 Critical Resources for Licensing	24	Y	245A.10, Subd. 6	Technical amendment that clarifies that the commissioner may not reissue a license to a license or certification holder until the annual license or certification fee is paid. This requirement is currently codified in 245A.04, subd. 7(d)(4), but it more directly aligns with the provisions related to license fees in section 245A.10.
OP-76 Critical Resources for Licensing	25	Y	245A.10, Subd. 9	Establishes that the commissioner shall not reissue a license or certification if the license holder has any outstanding debts related to a licensing fine or settlement agreement for which payment is delinquent. This requirement is currently codified in 245A.04, subd. 7(d)(4), but it more directly aligns with the provisions related to license fees in section 245A.10.

Proposal # & Title	Bill Section	Fiscal Impact (Y/N)	Stat. Sec. Amended	Section Description
OP-72 Licensing Systems Transformation	26	Y	245A.16, Subd. 10	Requires county licensing staff to use the provider licensing and reporting hub once it is implemented. This mirrors similar language in the 2023 DHS policy bill for county licensing staff to use ELICI.
OP-79 Family Child Care Continuous Licenses	27	Y	245A.50, Subd. 3	Removes requirement for first aid training for family child care to be retaken before anniversary date of license effective date and replaces with requirement to not let the training expire.
OP-79 Family Child Care Continuous Licenses	28	Y	245A.50, Subd. 4	Removes requirement for pediatric cardiopulmonary resuscitation training for family child care to be retaken before anniversary date of license effective date and replaces with requirement to not let the training expire.
OP-79 Family Child Care Continuous Licenses	29	Y	245A.50, Subd. 5	Removes requirement for every two year sudden unexpected infant death reduction and abusive head trauma training for family child care to be retaken before anniversary date of license effective date. Training must be retaken by end of second calendar year.
OP-79 Family Child Care Continuous Licenses	30	Y	245A.50, Subd. 6	Removes requirement for every five year child passenger restraint for family child care to be retaken before anniversary date of license effective date. Training must be retaken by end of fifth calendar year.
OP-79 Family Child Care Continuous Licenses	31	Y	245A.50, Subd. 9	Removes requirement for every five year health safety trainings for family child care to be retaken before anniversary date of license effective date. Training must be retaken by end of fifth calendar year. Removes requirement for every three year family child care substitute training to be retaken before anniversary date of license effective date. Training must be retaken by end of third calendar year.
OP-72 Licensing Systems Transformation	32	Y	245H.01, Subd. 3	Removes the ability to have more than one designated certified child care center operator or program operator. This will ease the development of the provider licensing and reporting hub.
OP-72 Licensing Systems Transformation	33	Y	245H.01, Subd. 4a	Establishes a definition for “certification holder contact person” to provide a clear point of contact and ease development of the provider licensing and reporting hub. *Note: DHS has decided to change this term to “authorized agent” and make edits to the definition. This is included in the author’s amendment.

Proposal # & Title	Bill Section	Fiscal Impact (Y/N)	Stat. Sec. Amended	Section Description
OP-72 Licensing Systems Transformation	34	Y	245H.03, Subd. 2	Requires certified child care center applicants to use the provider licensing and reporting hub, once it is implemented.
OP-72 Licensing Systems Transformation	35	Y	245H.03, Subd. 3	Clarifies that a denial order for an incomplete application for a certified child care center that is issued through the provider licensing and reporting hub is received on the date it is issued in the hub. <i>*Note: DHS has decided to remove the inserted language and instead address this in the next subdivision, 245H.03, subd. 4. This is included in the author's amendment.</i>
OP-72 Licensing Systems Transformation	36	Y	245H.03, Subd. 4	Allows a request for reconsideration of a certified child care center certification denial to be submitted through the provider licensing and reporting hub.
OP-72 Licensing Systems Transformation	37	Y	245H.06, Subd. 1	Allows the commissioner to issue a correction order to a certified child care center applicant or certification holder through the provider licensing and reporting hub, once it is implemented.
OP-72 Licensing Systems Transformation	38	Y	245H.06, Subd. 2	Allows a certified child care center to request reconsideration of a correction order through the provide licensing and reporting hub. Requires a license holder's request for reconsideration of a correction order to be submitted through the provider licensing and reporting hub, once it is implemented.
OP-72 Licensing Systems Transformation	39	Y	245H.07, Subd. 1	Allows the commissioner to issue a notice of decertification for a certified child care center through the provider licensing and reporting hub.
OP-72 Licensing Systems Transformation	40	Y	245H.07, Subd. 2	Allows a certified child care center certification holder to request reconsideration of a decertification through the provider licensing and reporting hub.

Proposal # & Title	Bill Section	Fiscal Impact (Y/N)	Stat. Sec. Amended	Section Description
OP-72 Licensing Systems Transformation	41	Y	245I.20, Subd. 10	Requires certified mental health clinic applicants to use the provider licensing and reporting hub, once it is implemented. Allows the provider licensing and reporting hub to be used to issue a notice of application denial and to submit an appeal of a denial.
OP-72 Licensing Systems Transformation	42	Y	245I.20, Subd. 13	Allows a correction order to be issued to a certified mental health clinic applicant or certification holder through the provider licensing and reporting hub. Allows a request for reconsideration of a correction order to be submitted through the provider licensing and reporting hub.
OP-72 Licensing Systems Transformation	43	Y	245I.20, Subd. 14	Allows the commissioner to issue a notice of decertification for a certified mental health clinic through the provider licensing and reporting hub. Allows a certified mental health clinic certification holder to request reconsideration of a decertification through the provider licensing and reporting hub.
OP-72 Licensing Systems Transformation	44	Y	245I.20, Subd. 16	Requires certified mental health clinic certification holders to enter and update their information in the provider licensing and reporting hub, once it is implemented.
OP-81 Streamlining BH Regulation	45	N	256B.0625 , subd. 5m	Updates cross-references; modifies CCBHC rebasing from once every three years to once every two years; specifies that payment for designated collaborating organization services is included in the CCBHC daily bundled rate; requires that CCBHC pay DCO based on contractual service rates.
OP-72 Licensing Systems Transformation	46	Y	260E.09	Allows mandated reporters that have access to the provider licensing and reporting hub to submit a Maltreatment of Minors Act report through the hub, without needing to make an oral report.
OP-72 Licensing Systems Transformation	47	Y	270B.14	Allows the Commissioner of Revenue to share data information with the DHS Commissioner to verify the income and tax identification information for applicants and license/certification holders. This supports program integrity.

Proposal # & Title	Bill Section	Fiscal Impact (Y/N)	Stat. Sec. Amended	Section Description
OP-81 Transition USS Certification to Licensure	48	Y	Session Law	Directs the commissioner to transition several mental health services from certification under Minnesota Statutes, chapters 245 and 256B, to licensure under Minnesota Statutes, chapter 245A, according to the Mental Health Uniform Service Standards in Minnesota Statutes, chapter 245I
OP-82 Modernize Adult Residential Mental Health Rule	49	Y	Session Law	Directs the commissioner of human services to consult with stakeholders to determine changes and update residential adult mental health program licensing requirements in Minnesota Rules, parts 9520.0500 to 9520.0670.

HHS Article 14: FORECAST ADJUSTMENTS

HHS Article 15: APPROPRIATIONS