

1.1 Senator moves to amend S.F. No. 1891 as follows:

1.2 Page 3, delete section 2 and insert:

1.3 "Sec. 2. [245.4903] CULTURAL AND ETHNIC MINORITY INFRASTRUCTURE
1.4 GRANT PROGRAM.

1.5 Subdivision 1. Establishment. The commissioner of human services must 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 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 members of those
1.13 populations who identify as lesbian, gay, bisexual, transgender, or queer;

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 so they may
1.16 become qualified 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) Grantees must engage in activities and provide
1.20 supportive services to ensure and increase equitable access to culturally specific and
1.21 responsive care and build organizational and professional capacity for licensure and
1.22 certification for the communities served. Allowable grant activities include but are not
1.23 limited to:

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

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

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

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

2.4 (5) expanding mental health and substance use disorder services, particularly in greater
2.5 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) providing activities that increase the availability of culturally responsive mental
2.9 health and substance use disorder services for children and families, youth, or adults, or
2.10 that increase the availability of substance use disorder services for individuals from cultural
2.11 and ethnic 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.** (a) Grantees must provide monthly data
2.17 summaries to the commissioner for the purposes of evaluating the effectiveness of the grant
2.18 program. The commissioner must evaluate program activities by analyzing whether the
2.19 program:

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

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

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

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

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

2.31 (6) reduced 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 (b) The commissioner must submit the results of the evaluation to the chairs and ranking
3.4 minority members of the legislative committees with jurisdiction over mental health.

3.5 **EFFECTIVE DATE.** This section is effective the day following final enactment."

3.6 Page 6, line 19, delete "245.4907" and insert "245.4903"

3.7 Amend the title accordingly