

**SENATE
STATE OF MINNESOTA
NINETY-FOURTH SESSION**

S.F. No. 2124

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DATE	D-PG	OFFICIAL STATUS
03/03/2025	620	Introduction and first reading Referred to Health and Human Services
03/06/2025	676	Author added Champion

14 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MINNESOTA:

1.5 Section 1. APPROPRIATION: EMERGENCY SERVICES PROGRAM.

1.6 \$..... in fiscal year 2026 and \$..... in fiscal year 2027 are appropriated from the general
1.7 fund to the commissioner of human services for emergency services grants under Minnesota
1.8 Statutes, section 256K.49. Any unexpended amount in the first year does not cancel and is
1.9 available in the second year.

1.10 Sec. 2. APPROPRIATION; COUNTY SHELTER AND HOMELESSNESS

1.11 **RESPONSE INNOVATION GRANTS.**

1.12 \$..... in fiscal year 2026 and \$..... in fiscal year 2027 are appropriated from the general
1.13 fund to the commissioner of human services for grants to counties to address the most
1.14 significant gaps in the counties' communities and fund the most effective interventions for
1.15 reducing homelessness that do not receive other public funding, including but not limited
1.16 to low-barrier shelter operations, family shelter, diversion, expanding shelter hours to 24
1.17 hours a day and seven days a week operations, and housing-focused case management for
1.18 people experiencing homelessness. The commissioner must prioritize applications with
1.19 letters of support from a Tribal Nation or indigenous organization. Grantees must monitor
1.20 outcomes and demonstrate the interventions' effectiveness to the commissioner. Grantees
1.21 must also participate in a capacity-building collaborative under section 3.

2.1 **Sec. 3. APPROPRIATION; CAPACITY BUILDING.**

2.2 \$..... in fiscal year 2026 and \$..... in fiscal year 2027 are appropriated from the general
2.3 fund to the commissioner of human services for collaboratives between counties and
2.4 providers to increase access to sustainable funding streams to expand capacity for medical
2.5 assistance-eligible services. The collaboratives under this section would assist in the adoption
2.6 of best practices and distribute toolkits for providers to better access stable funding streams,
2.7 including but not limited to funding from housing support programs; medicaid waiver
2.8 programs; the special supplemental nutrition program for women, infants, and children; and
2.9 adult mental health initiative grants.