

Health Legislative Report Sunsets

2023 REPORT TO THE LEGISLATURE

February 15, 2023

2023 Minnesota Department of Health Legislative Reports Sunsets

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Executive Summary

This report fulfills a requirement of <u>Laws of Minnesota</u>, <u>2021</u>, <u>Chapter 30</u>, <u>Article 3</u>, <u>Section 10</u>. This provision creates a sunset for most of the recurring reports the Department of Health is required to submit. The provision requires MDH to submit a report each year which lists all report mandates set to expire that year. This report includes the list of legislative reports expiring under Chapter 30 in 2023.

Legislation

Laws of Minnesota, 2021, Chapter 30, Article 3, Section 10

- Sec. 10. Minnesota Statutes 2020, section 144.05, is amended by adding a subdivision to read:
- Subd. 7. Expiration of report mandates.
- (a) If the submission of a report by the commissioner of health to the legislature is mandated by statute and the enabling legislation does not include a date for the submission of a final report, the mandate to submit the report shall expire in accordance with this section.
- (b) If the mandate requires the submission of an annual report and the mandate was enacted before January 1, 2021, the mandate shall expire on January 1, 2023. If the mandate requires the submission of a biennial or less frequent report and the mandate was enacted before January 1, 2021, the mandate shall expire on January 1, 2024.
- (c) Any reporting mandate enacted on or after January 1, 2021 shall expire three years after the date of enactment if the mandate requires the submission of an annual report and shall expire five years after the date of enactment if the mandate requires the submission of a biennial or less frequent report, unless the enacting legislation provides for a different expiration date.
- (d) The commissioner shall submit a list to the chairs and ranking minority members of the legislative committee with jurisdiction over health by February 15 of each year, beginning February 15, 2022, of all reports set to expire during the following calendar year in accordance with this section.

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

Legislative Report Mandates to Expire January 1, 2024

Per Laws of Minnesota 2021, Ch. 30, Art.3, Sec. 10 the following reports are set to expire January 1, 2024. If no legislative action is taken the final report(s) under these mandates will be submitted in calendar year 2023. Staff in the relevant MDH policy areas have reviewed this list of reports and have determined that these mandates expire after 2023 per Chapter 30.

Cancer in Minnesota

Citation

Laws of Minnesota 1987 Chapter 403 Article 2 Section 10 Subdivision 2

Description

The commissioner of health shall prepare and transmit to the governor and to members of the legislature a biennial report on the incidence of cancer in Minnesota and a compilation of summaries and reports from special studies and investigations performed to determine the potential public health significance of an increase in cancer incidence, together with any findings and recommendations. The first report shall be delivered by February 1989, with subsequent reports due in February of each of the following odd-numbered years.

Community Clinic Grant Program

Citation

Laws of Minnesota 2001, 1st Spec. Sess. Chapter 9 Article 1 Section 48 Subdivision 4

Description

The commissioner of health shall evaluate the overall effectiveness of the grant program. The commissioner shall collect progress reports to evaluate the grant program from the eligible community clinics receiving grants. Every two years, as part of this evaluation, the commissioner shall report to the legislature on the needs of community clinics and provide any recommendations for adding or changing eligible activities.

Eliminating Health Disparities

Citation

Laws of Minnesota 2001 Chapter 9 Article 1 Section 48 Subdivision 13

Description

The commissioner shall submit a biennial report to the legislature on the local community projects, tribal government, and community health board prevention activities funded under

this section. These reports must include information on grant recipients, activities that were conducted using grant funds, evaluation data, and outcome measures, if available. These reports are due by January 15 of every other year, beginning in the year 2003.

Environmental Public Health Tracking & Biomonitoring

Citation

Laws of Minnesota 2007 Chapter 57 Article 1 Section 144 Subdivision 2

Description

The commissioner shall submit a biennial report to the chairs and ranking members of the committees with jurisdiction over environment and health by January 15, beginning January 15, 2009, on the status of the biomonitoring program and any recommendations for improvement.

Family Home Visiting Program

Citation

Laws of Minnesota 2001, 1st Spec. Sess. Chapter 9 Article 1 Section 53 Subdivision 8

Description

By January 15, 2002, and January 15 of each even-numbered year thereafter, the commissioner shall submit a report to the legislature on the family home visiting programs and on the results of the evaluations.

Health Information Exchange Oversight

Citation

Minnesota Statutes, Section 62J.498, Subd. 2, paragraph (a)

Description

Provide a biennial report on the status of health information exchange services that includes recommendations on actions necessary to ensure that health information exchange services are adequate to meet the needs of Minnesota citizens and providers statewide.

Human Services Occupations New Occupations Usefulness

Citation

Laws of Minnesota 1984 Chapter 654 Article 5 Section 13 Subdivision 3

Description

Three years after the effective date of the commissioner's rules, the commissioner shall make a report to the legislature on the usefulness of the new occupational group, any problems

encountered in administering the regulation of the group, and any necessary statutory changes recommended to continue, discontinue, or modify the regulation of the group.

Lead Poisoning Prevention

Citation

Laws of Minnesota 1995 Chapter 213 Article 1 Section 11 Subdivision 3

Description

The commissioner shall examine compliance with Minnesota's existing lead standards and rules and report to the legislature biennially, beginning February 15, 1997, including an evaluation of current lead program activities by the state and community health boards, the need for any additional enforcement procedures, recommendations on developing a method to enforce compliance with lead standards, and cost estimates for any proposed enforcement procedure. The report shall also include a summary of lead surveillance data collected by the commissioner.

Minnesota Health Care Market Chartbook

Citation

Laws of Minnesota 1985 Chapter 9 Article 1 Section 11 Subdivision 1

Description

The commissioner of health shall prepare a report every two years concerning the status and operations of the health care markets in Minnesota. The commissioner of health shall transmit the reports to the governor, and to the members of the legislature. The first report must be submitted on January 15, 1987 and succeeding reports on January 15 every two years.

Public Health System Development

Citation

Laws of Minnesota 1994 Chapter 625 Article 7 Section 3 Subdivision 2

Description

The commissioner of health, in consultation with the State Community Health Services Advisory Committee and the commissioner of human services, and representatives of local health departments, county government, a municipal government acting as a community health board, area Indian health services, health care providers, and citizens concerned about public health, shall coordinate the process for defining implementation and financing responsibilities of the local government core public health functions. By January 15, 1997, and by January 15 of each odd-numbered year thereafter, the commissioner shall present to the legislature an updated report and recommendations.

Statewide Health Improvement Program

Citation

Laws of Minnesota 2008 Chapter 358 Article 1 Section 1 Subdivision 5

Description

The commissioner shall submit a biennial report to the legislature on the statewide health improvement program. The report must include information on each grant recipient, including the activities that were conducted by the grantee using grant funds, the grantee's progress toward achieving measurable outcomes, and the data provided to the commissioner by the grantee to measure these outcomes for grant activities. The commissioner shall provide information on grants in which a corrective action plan was required, the types of plan action, and the progress that has been made toward meeting the measurable outcomes. In addition, the commissioner shall provide recommendations on future areas of focus for health improvement. These reports are due by January 15 of every other year, beginning in 2010. In the reports due beginning January 15, 2020, the commissioner shall include a description of the contracts awarded under subdivision 4, paragraph (c), and the monitoring and evaluation systems that were designed and implemented under these contracts.

Suicide Prevention Plan Progress Report

Citation

Laws of Minnesota 2001, 1st Spec. Sess. Chapter 9 Article 1 Section 45 Subdivision 5

Description

The commissioner shall conduct periodic evaluations of the impact of and outcomes from implementation of the state's suicide prevention plan. By July 1, 2002, and July 1 of each even-numbered year thereafter, the commissioner shall report the results of these evaluations to the chairs of the policy and finance committees in the house of representatives and senate with jurisdiction over health and human services issues.

Tobacco Use Prevention

Citation

Laws of Minnesota 1999 Chapter 245 Article 11 Section 5 Subdivision 10

Description

The commissioner of health shall submit a biennial report to the chairs and members of the house of representatives Health and Human Services Finance Committee and the senate Health and Family Security Budget Division on the statewide and local projects and community health board prevention activities funded under this section. These reports must include information on grant recipients, activities that were conducted using grant funds, and evaluation data and outcome measures, if available. These reports are due by January 15 of the odd-numbered years, beginning in 2001.

Vulnerable Adult Maltreatment Statistics

Citation

Laws of Minnesota 2014 Chapter 192 Article 2 Section 1 Subdivision 12b

Description

On a biennial basis, the commissioners of health and human service must jointly report to the legislature and governor information on the number and type of reports of alleged maltreatment involving licensing facilities, trends about types of substantiated maltreatment, efforts to improve the protection of vulnerable adults recommended changes to statutes affecting the protection of vulnerable adults and other requirements outlined in 626.557.

Palliative Care Advisory Council

Citation

Laws of Minnesota, 2017 Section 144.059

Description

On an annual basis, the commissioner of health is required to work with the Palliative Care Advisory Council to publish a report to the MN Legislature. This report provides a summary of work efforts over the year, outline of the work to be undertaken, and highlights concerns for health care for Minnesotans in coming years.