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State of Minnesota  
HOUSE OF REPRESENTATIVES

EIGHTY-EIGHTH SESSION

H. F. No. 1499

03/13/2013 Authored by Moran and Allen

The bill was read for the first time and referred to the Committee on Health and Human Services Policy

1.1 A bill for an act  
1.2 relating to health; creating culturally targeted tobacco prevention grants;  
1.3 appropriating money; proposing coding for new law in Minnesota Statutes,  
1.4 chapter 144.

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

1.6 Section 1. [144.3965] CULTURALLY TARGETED TOBACCO PREVENTION  
1.7 GRANTS.

1.8 Subdivision 1. State community partnerships plan. The commissioner, in  
1.9 partnership with culturally based community organizations and federally recognized tribal  
1.10 governments in Minnesota that reflect communities that are disproportionately impacted  
1.11 by tobacco, shall develop and implement a comprehensive, coordinated plan to reduce  
1.12 health disparities in tobacco-related illnesses by targeted tobacco control and other related  
1.13 initiatives, including tobacco use prevention and cessation programs.

1.14 Subd. 2. Measurable outcomes. The commissioner, in consultation with the  
1.15 community organizations and councils identified in subdivision 1, shall establish  
1.16 measurable outcomes to determine the effectiveness of the grants receiving funds under  
1.17 this section in reducing tobacco-related illnesses in minority communities.

1.18 Subd. 3. Tobacco prevention grants. (a) The commissioner shall award grants to  
1.19 eligible applicants for local projects and initiatives directed at culturally targeted tobacco  
1.20 control initiatives, including tobacco use prevention and cessation programs aimed at  
1.21 reducing tobacco use and tobacco-related illnesses in the African, African American,  
1.22 Asian, American Indian, and Latino communities, and the gay, lesbian, bisexual, and  
1.23 transgender communities.

2.1 (b) The commissioner must ensure that the applicants demonstrate that the proposed  
2.2 project or initiative:

2.3 (1) is supported by the community in which the applicant serves;

2.4 (2) is designed to coordinate with other community activities related to other health  
2.5 initiatives;

2.6 (3) reflects culturally appropriate approaches by race, ethnicity, and sexual  
2.7 orientation and gender identity;

2.8 (4) incorporates the role of community in influencing behavioral, environmental,  
2.9 and policy changes regarding tobacco use and tobacco-related illnesses; and

2.10 (5) leverages existing community assets including, but not limited to, community  
2.11 health workers, leaders of the communities most impacted by health disparities, and a  
2.12 workforce recognized by leading health authorities for its contributions to reducing health  
2.13 disparities and improving cultural competence.

2.14 (c) Eligible applicants include culturally based community organizations,  
2.15 community health clinics, Indian tribes, and nonprofit organizations; and community  
2.16 health organizations that use community health workers who work in the communities  
2.17 most impacted by tobacco. Applicants must submit proposals to the commissioner. The  
2.18 proposals must specify the strategies to be implemented to target tobacco use among  
2.19 communities of color and the gay, lesbian, bisexual, and transgender communities.  
2.20 Priority shall be given to community organizations that are involved with or located  
2.21 within the targeted communities.

2.22 **Sec. 2. APPROPRIATION.**

2.23 \$..... in fiscal year 2014 and \$..... in fiscal year 2015 are appropriated from the  
2.24 general fund to the commissioner of health for the culturally targeted tobacco prevention  
2.25 grants under Minnesota Statutes, section 144.3965.