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## State of Minnesota

## HOUSE OF REPRESENTATIVES

A bill for an act

relating to health; adding requirements addressing health disparities in minority

populations and identifying health priorities of minority populations; creating

EIGHTY-EIGHTH SESSION

H. F. No. 2131

02/25/2014 Authored by Moran

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

1.4 1.5	a task force; amending Minnesota Statutes 2012, section 145.928, by adding a subdivision; proposing coding for new law in Minnesota Statutes, chapter 62K.
1.6	BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MINNESOTA:
1.7	Section 1. [62K.16] MINORITY OMBUDSPERSON.
1.8	MNsure must establish a minority ombudsperson to work with minority communities
1.9	to assist in navigating MNsure. The minority ombudsperson shall collaborate with the
1.10	councils of color to identify medical clinics that reach minority residents in order to aid
1.11	minority residents in navigating MNsure.
1.12	Sec. 2. Minnesota Statutes 2012, section 145.928, is amended by adding a subdivision
1.13	to read:
1.14	Subd. 7a. Minority run health care professional associations. The commissioner
1.15	shall award grants to minority run health care professional associations to achieve the
1.16	following:
1.17	(1) provide collaborative mental health services to minority residents;
1.18	(2) provide collaborative, holistic, and culturally competent health care services in
1.19	communities with high concentrations of minority residents; and
1.20	(3) collaborate on recruitment, training, and placement of minorities with health
1.21	care providers.

Sec. 3. 1

Sec. 3. <u>HEALTH CARE DISPARITIES TASK FORCE.</u>

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2.1	(a) The commissioner of health shall appoint members to an advisory task force by
2.2	July 1, 2014, to research ways to eradicate health care disparities by increasing diversity
2.3	among medical providers that reflects a representation of current and future predicted
2.4	immigrant populations in the state. The task force shall:
2.5	(1) analyze demographic information of current medical providers;
2.6	(2) compile a database of Educational Commission for Foreign Medical Graduates
2.7	(ECFMG) certified foreign-trained doctors who are residents of the state;
2.8	(3) provide expenditure estimates for integrating foreign-trained doctors into the
2.9	state workforce; and
2.10	(4) identify possible funding sources.
2.11	(b) By December 20, 2014, the task force must submit recommendations to the
2.12	commissioner of health. The commissioner shall report findings and recommendations to
2.13	the legislative committees with jurisdiction over health care by December 31, 2014.
2.14	Sec. 4. HEALTH PRIORITIES OF MINORITY COMMUNITIES TASK FORCE.
2.15	(a) The commissioner of health shall appoint an advisory task force by July 1, 2014,
2.16	to research the current health care needs of minority communities and set priorities for
2.17	meeting those needs. The task force shall:
2.18	(1) review data from medical providers, minority-run health care professional
2.19	associations, and other nonprofit groups serving minority communities; and
2.20	(2) conduct listening sessions with minority community members to determine
2.21	the health care needs of the community.
2.22	(b) By December 20, 2014, the task force must submit recommendations to the
2.23	commissioner of health. The commissioner shall report findings and recommendations to
2.24	the legislative committees with jurisdiction over health care by December 31, 2014.

Sec. 4. 2