

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

S.F. No. 1679

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DATE	D-PG	OFFICIAL STATUS
02/16/2023	847	Introduction and first reading Referred to Health and Human Services See SF2995

1.1 A bill for an act

1.2 relating to health and human services; expanding and establishing programs to

1.3 address the health and human services workforce shortage; appropriating money;

1.4 requiring reports; amending Minnesota Statutes 2022, sections 62J.692, subdivisions

1.5 1, 3; 144.1501, subdivisions 2, 3; 144.1506, subdivision 4; 245.4663, subdivision

1.6 4; proposing coding for new law in Minnesota Statutes, chapters 144; 245.

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

1.8 Section 1. Minnesota Statutes 2022, section 62J.692, subdivision 1, is amended to read:

1.9 Subdivision 1. **Definitions.** (a) For purposes of this section, the following definitions

1.10 apply:

1.11 (b) "Accredited clinical training" means the clinical training provided by a medical

1.12 education program that is accredited through an organization recognized by the Department

1.13 of Education, the Centers for Medicare and Medicaid Services, or another national body

1.14 who reviews the accrediting organizations for multiple disciplines and whose standards for

1.15 recognizing accrediting organizations are reviewed and approved by the commissioner of

1.16 health.

1.17 (c) "Commissioner" means the commissioner of health.

1.18 (d) "Clinical medical education program" means the accredited clinical training of

1.19 physicians (medical students and residents), doctor of pharmacy practitioners, doctors of

1.20 chiropractic, dentists, advanced practice registered nurses (clinical nurse specialists, certified

1.21 registered nurse anesthetists, nurse practitioners, and certified nurse midwives), physician

1.22 assistants, dental therapists and advanced dental therapists, psychologists, clinical social

1.23 workers, community paramedics, and community health workers.

2.1 (e) "Sponsoring institution" means a hospital, school, or consortium located in Minnesota
 2.2 that sponsors and maintains primary organizational and financial responsibility for a clinical
 2.3 medical education program in Minnesota and which is accountable to the accrediting body.

2.4 (f) "Teaching institution" means a hospital, medical center, clinic, or other organization
 2.5 that conducts a clinical medical education program in Minnesota.

2.6 (g) "Trainee" means a student or resident involved in a clinical medical education
 2.7 program.

2.8 (h) "Eligible trainee FTE's" means the number of trainees, as measured by full-time
 2.9 equivalent counts, that are at training sites located in Minnesota with currently active medical
 2.10 assistance enrollment status and a National Provider Identification (NPI) number where
 2.11 training occurs ~~in~~ as part of or under the scope of either an inpatient or ambulatory patient
 2.12 care setting and where the training is funded, in part, by patient care revenues. Training that
 2.13 occurs in nursing facility settings is not eligible for funding under this section.

2.14 Sec. 2. Minnesota Statutes 2022, section 62J.692, subdivision 3, is amended to read:

2.15 Subd. 3. **Application process.** (a) A clinical medical education program conducted in
 2.16 Minnesota by a teaching institution to train physicians, doctor of pharmacy practitioners,
 2.17 dentists, chiropractors, physician assistants, dental therapists and advanced dental therapists,
 2.18 psychologists, clinical social workers, community paramedics, or community health workers
 2.19 is eligible for funds under subdivision 4 if the program:

2.20 (1) is funded, in part, by patient care revenues;

2.21 (2) occurs in patient care settings that face increased financial pressure as a result of
 2.22 competition with nonteaching patient care entities; ~~and~~

2.23 (3) includes training hours in settings outside of the hospital or clinic site, as applicable,
 2.24 including but not limited to school, home, and community settings; and

2.25 ~~(3)~~ (4) emphasizes primary care or specialties that are in undersupply in Minnesota.

2.26 (b) A clinical medical education program for advanced practice nursing is eligible for
 2.27 funds under subdivision 4 if the program meets the eligibility requirements in paragraph
 2.28 (a), clauses (1) to (3), and is sponsored by the University of Minnesota Academic Health
 2.29 Center, the Mayo Foundation, or institutions that are part of the Minnesota State Colleges
 2.30 and Universities system or members of the Minnesota Private College Council.

2.31 (c) Applications must be submitted to the commissioner by a sponsoring institution on
 2.32 behalf of an eligible clinical medical education program and must be received by October

3.1 31 of each year for distribution in the following year. An application for funds must contain
3.2 the following information:

3.3 (1) the official name and address of the sponsoring institution and the official name and
3.4 site address of the clinical medical education programs on whose behalf the sponsoring
3.5 institution is applying;

3.6 (2) the name, title, and business address of those persons responsible for administering
3.7 the funds;

3.8 (3) for each clinical medical education program for which funds are being sought; the
3.9 type and specialty orientation of trainees in the program; the name, site address, and medical
3.10 assistance provider number and national provider identification number of each training
3.11 site used in the program; the federal tax identification number of each training site used in
3.12 the program, where available; the total number of trainees at each training site; and the total
3.13 number of eligible trainee FTEs at each site; and

3.14 (4) other supporting information the commissioner deems necessary to determine program
3.15 eligibility based on the criteria in paragraphs (a) and (b) and to ensure the equitable
3.16 distribution of funds.

3.17 (d) An application must include the information specified in clauses (1) to (3) for each
3.18 clinical medical education program on an annual basis for three consecutive years. After
3.19 that time, an application must include the information specified in clauses (1) to (3) when
3.20 requested, at the discretion of the commissioner:

3.21 (1) audited clinical training costs per trainee for each clinical medical education program
3.22 when available or estimates of clinical training costs based on audited financial data;

3.23 (2) a description of current sources of funding for clinical medical education costs,
3.24 including a description and dollar amount of all state and federal financial support, including
3.25 Medicare direct and indirect payments; and

3.26 (3) other revenue received for the purposes of clinical training.

3.27 (e) An applicant that does not provide information requested by the commissioner shall
3.28 not be eligible for funds for the current funding cycle.

3.29 Sec. 3. Minnesota Statutes 2022, section 144.1501, subdivision 2, is amended to read:

3.30 Subd. 2. **Creation of account.** (a) A health professional education loan forgiveness
3.31 program account is established. The commissioner of health shall use money from the
3.32 account to establish a loan forgiveness program:

4.1 (1) for medical residents, mental health professionals, and alcohol and drug counselors
4.2 agreeing to practice in designated rural areas or underserved urban communities or
4.3 specializing in the area of ~~pediatric~~ psychiatry;

4.4 (2) for midlevel practitioners agreeing to practice in designated rural areas or to teach
4.5 at least 12 credit hours, or 720 hours per year in the nursing field in a postsecondary program
4.6 at the undergraduate level or the equivalent at the graduate level;

4.7 (3) for nurses who agree to practice in a Minnesota nursing home; in an intermediate
4.8 care facility for persons with developmental disability; in a hospital if the hospital owns
4.9 and operates a Minnesota nursing home and a minimum of 50 percent of the hours worked
4.10 by the nurse is in the nursing home; ~~a housing with services establishment~~ in an assisted
4.11 living facility as defined in section ~~144D.01~~ 144G.08, subdivision 4 7; or for a home care
4.12 provider as defined in section 144A.43, subdivision 4; or agree to teach at least 12 credit
4.13 hours, or 720 hours per year in the nursing field in a postsecondary program at the
4.14 undergraduate level or the equivalent at the graduate level;

4.15 (4) for other health care technicians agreeing to teach at least 12 credit hours, or 720
4.16 hours per year in their designated field in a postsecondary program at the undergraduate
4.17 level or the equivalent at the graduate level. The commissioner, in consultation with the
4.18 Healthcare Education-Industry Partnership, shall determine the health care fields where the
4.19 need is the greatest, including, but not limited to, respiratory therapy, clinical laboratory
4.20 technology, radiologic technology, and surgical technology;

4.21 (5) for pharmacists, advanced dental therapists, dental therapists, and public health nurses
4.22 who agree to practice in designated rural areas; and

4.23 (6) for dentists agreeing to deliver at least 25 percent of the dentist's yearly patient
4.24 encounters to state public program enrollees or patients receiving sliding fee schedule
4.25 discounts through a formal sliding fee schedule meeting the standards established by the
4.26 United States Department of Health and Human Services under Code of Federal Regulations,
4.27 title 42, section 51, chapter 303.

4.28 (b) Appropriations made to the account do not cancel and are available until expended,
4.29 except that at the end of each biennium, any remaining balance in the account that is not
4.30 committed by contract and not needed to fulfill existing commitments shall cancel to the
4.31 fund.

5.1 Sec. 4. Minnesota Statutes 2022, section 144.1501, subdivision 3, is amended to read:

5.2 Subd. 3. **Eligibility.** (a) To be eligible to participate in the loan forgiveness program, an
5.3 individual must:

5.4 (1) be a medical or dental resident; be a licensed pharmacist; or be enrolled in a training
5.5 or education program or obtaining required supervision hours to become a dentist, dental
5.6 therapist, advanced dental therapist, mental health professional, alcohol and drug counselor,
5.7 pharmacist, public health nurse, midlevel practitioner, registered nurse, or a licensed practical
5.8 nurse. The commissioner may also consider applications submitted by graduates in eligible
5.9 professions who are licensed and in practice; and

5.10 (2) submit an application to the commissioner of health.

5.11 (b) An applicant selected to participate must sign a contract to agree to serve a minimum
5.12 three-year full-time service obligation according to subdivision 2, which shall begin no later
5.13 than March 31 following completion of required training, with the exception of a nurse,
5.14 who must agree to serve a minimum two-year full-time service obligation according to
5.15 subdivision 2, which shall begin no later than March 31 following completion of required
5.16 training.

5.17 Sec. 5. Minnesota Statutes 2022, section 144.1506, subdivision 4, is amended to read:

5.18 Subd. 4. **Consideration of expansion grant applications.** The commissioner shall
5.19 review each application to determine whether or not the residency program application is
5.20 complete and whether the proposed new residency program and any new residency slots
5.21 are eligible for a grant. The commissioner shall award grants to support up to six family
5.22 medicine, general internal medicine, or general pediatrics residents; ~~four~~ five psychiatry
5.23 residents; two geriatrics residents; and two general surgery residents. If insufficient
5.24 applications are received from any eligible specialty, funds may be redistributed to
5.25 applications from other eligible specialties.

5.26 Sec. 6. **[144.1507] PEDIATRIC PRIMARY CARE MENTAL HEALTH TRAINING;**
5.27 **GRANT PROGRAM.**

5.28 Subdivision 1. **Establishment.** The commissioner of health shall award grants for the
5.29 development of child mental health training programs that are located in outpatient primary
5.30 care clinics. To be eligible for a grant, a training program must:

5.31 (1) focus on the training of pediatric primary care providers working with
5.32 multidisciplinary mental health teams;

6.1 (2) provide training on conducting comprehensive clinical mental health assessments
6.2 and potential pharmacological therapy;

6.3 (3) provide psychiatric consultation to pediatric primary care providers during their
6.4 outpatient pediatric primary care experiences;

6.5 (4) emphasize longitudinal care for patients with behavioral health needs; and

6.6 (5) develop partnerships with community resources.

6.7 Subd. 2. **Child mental health training grant program.** (a) Child mental health training
6.8 grants may be awarded to eligible primary care training programs to plan and implement
6.9 new programs or expand existing programs in child mental health training.

6.10 (b) Funds may be spent to cover the costs of:

6.11 (1) planning related to implementing or expanding child mental health training in an
6.12 outpatient primary care clinic setting;

6.13 (2) training site improvements, fees, equipment, and supplies required for implementation
6.14 of the training programs; and

6.15 (3) supporting clinical training in the outpatient primary clinic sites.

6.16 Subd. 3. **Applications for child mental health training grants.** Eligible primary care
6.17 training programs seeking a grant shall apply to the commissioner. Applications must include
6.18 the location of the training; a description of the training program, including all costs
6.19 associated with the training program; all sources of funds for the training program; detailed
6.20 uses of all funds for the training program; the results expected; and a plan to maintain the
6.21 training program after the grant period. The applicant must describe achievable objectives
6.22 and a timetable for the training program.

6.23 Subd. 4. **Consideration of child mental health training grant applications.** The
6.24 commissioner shall review each application to determine whether the application meets the
6.25 stated goals of the grant and shall award grants to support up to four training program
6.26 proposals.

6.27 Subd. 5. **Program oversight.** During the grant period, the commissioner may require
6.28 and collect from grantees any information necessary to evaluate the training program.

7.1 Sec. 7. **[144.1511] MENTAL HEALTH CULTURAL COMMUNITY CONTINUING**
7.2 **EDUCATION GRANT PROGRAM.**

7.3 The mental health cultural community continuing education grant program is established
7.4 in the Department of Health to provide grants for the continuing education necessary for
7.5 social workers, marriage and family therapists, psychologists, and professional clinical
7.6 counselors to become supervisors for individuals pursuing licensure in mental health
7.7 professions. The commissioner must consult with the relevant mental health licensing boards
7.8 in creating the program. To be eligible for a grant under this section, a social worker, marriage
7.9 and family therapist, psychologist, or professional clinical counselor must:

7.10 (1) be a member of communities of color or an underrepresented community as defined
7.11 in section 148E.010, subdivision 20; and

7.12 (2) work for a community mental health provider and agree to deliver at least 25 percent
7.13 of their yearly patient encounters to state public program enrollees or patients receiving
7.14 sliding fee schedule discounts through a formal sliding fee schedule meeting the standards
7.15 established by the United States Department of Health and Human Services under Code of
7.16 Federal Regulations, title 42, section 51c.303.

7.17 Sec. 8. **[144.88] MENTAL HEALTH AND SUBSTANCE USE DISORDER**
7.18 **EDUCATION CENTER.**

7.19 Subdivision 1. **Establishment.** The Mental Health and Substance Use Disorder Education
7.20 Center is established in the Department of Health. The purpose of the center is to increase
7.21 the number of professionals, practitioners, and peers working in mental health and substance
7.22 use disorder treatment; increase the diversity of professionals, practitioners, and peers
7.23 working in mental health and substance use disorder treatment; and facilitate a culturally
7.24 informed and responsive mental health and substance use disorder treatment workforce.

7.25 Subd. 2. **Activities.** The Mental Health and Substance Use Disorder Education Center
7.26 must:

7.27 (1) analyze the geographic and demographic availability of licensed professionals in the
7.28 field, identify gaps, and prioritize the need for additional licensed professionals by type,
7.29 location, and demographics;

7.30 (2) create a program that exposes high school and college students to careers in the
7.31 mental health and substance use disorders field;

8.1 (3) create a website for individuals considering becoming a mental health provider that
8.2 clearly labels the steps necessary to achieve licensure and certification in the various mental
8.3 health fields and lists resources and links for more information;

8.4 (4) create a job board for organizations seeking employees to provide mental health and
8.5 substance use disorder treatment, services, and supports;

8.6 (5) track the number of students at the college and graduate level who are graduating
8.7 from programs that could facilitate a career as a mental health or substance use disorder
8.8 treatment practitioner or professional and work with the colleges and universities to support
8.9 the students in obtaining licensure;

8.10 (6) identify barriers to licensure and make recommendations to address the barriers;

8.11 (7) establish learning collaborative partnerships with mental health and substance use
8.12 disorder treatment providers, schools, criminal justice agencies, and others;

8.13 (8) promote and expand loan forgiveness programs, funds for professionals to become
8.14 supervisors, funding to pay for supervision, and funding for pathways to licensure;

8.15 (9) identify barriers to using loan forgiveness programs and develop recommendations
8.16 to address the barriers;

8.17 (10) work to expand Medicaid graduate medical education to other mental health
8.18 professionals;

8.19 (11) identify current sites for internships and practicums and assess the need for additional
8.20 sites;

8.21 (12) develop training for other health care professionals to increase their knowledge
8.22 about mental health and substance use disorders, including but not limited to community
8.23 health workers, pediatricians, primary care physicians, physician assistants, and nurses; and

8.24 (13) support training for integrated mental health and primary care in rural areas.

8.25 Subd. 3. **Reports.** Beginning January 1, 2024, the commissioner of health shall submit
8.26 an annual report to the chairs and ranking minority members of the legislative committees
8.27 with jurisdiction over health summarizing the center's activities and progress in addressing
8.28 the mental health and substance use disorder treatment workforce shortage.

8.29 Sec. 9. Minnesota Statutes 2022, section 245.4663, subdivision 4, is amended to read:

8.30 Subd. 4. **Allowable uses of grant funds.** A mental health provider must use grant funds
8.31 received under this section for one or more of the following:

9.1 (1) to pay for direct supervision hours for interns and clinical trainees, in an amount up
9.2 to \$7,500 per intern or clinical trainee;

9.3 (2) to establish a program to provide supervision to multiple interns or clinical trainees;
9.4 ~~or~~

9.5 (3) to pay licensing application and examination fees for clinical trainees; or

9.6 (4) to provide a weekend training program for workers to become supervisors.

9.7 Sec. 10. [245.4664] MENTAL HEALTH PROFESSIONAL SCHOLARSHIP GRANT
9.8 PROGRAM.

9.9 Subdivision 1. Definitions. (a) For purposes of this section, the following terms have
9.10 the meanings given.

9.11 (b) "Mental health professional" means an individual with a qualification specified in
9.12 section 245I.04, subdivision 2.

9.13 (c) "Underrepresented community" has the meaning given in section 148E.010,
9.14 subdivision 20.

9.15 Subd. 2. Grant program established. The mental health professional scholarship
9.16 program is established in the Department of Human Services to assist mental health providers
9.17 in funding employee scholarships for master's degree-level education programs in order to
9.18 create a pathway to becoming a mental health professional.

9.19 Subd. 3. Provision of grants. The commissioner of human services shall award grants
9.20 to licensed or certified mental health providers who meet the criteria in subdivision 4 to
9.21 provide tuition reimbursement for master's degree-level programs and certain related costs
9.22 for individuals who have worked for the mental health provider for at least the past two
9.23 years in one or more of the following roles:

9.24 (1) a mental health behavioral aide who meets a qualification in section 245I.04,
9.25 subdivision 16;

9.26 (2) a mental health certified family peer specialist who meets the qualifications in section
9.27 245I.04, subdivision 12;

9.28 (3) a mental health certified peer specialist who meets the qualifications in section
9.29 245I.04, subdivision 10;

9.30 (4) a mental health practitioner who meets a qualification in section 245I.04, subdivision
9.31 4;

10.1 (5) a mental health rehabilitation worker who meets the qualifications in section 245I.04,
10.2 subdivision 14;

10.3 (6) an individual employed in a role in which the individual provides face-to-face client
10.4 services at a mental health center or certified community behavioral health center; or

10.5 (7) a staff person who provides care or services to residents of a residential treatment
10.6 facility.

10.7 Subd. 4. **Eligibility.** In order to be eligible for a grant under this section, a mental health
10.8 provider must:

10.9 (1) primarily provide at least 25 percent of the provider's yearly patient encounters to
10.10 state public program enrollees or patients receiving sliding fee schedule discounts through
10.11 a formal sliding fee schedule meeting the standards established by the United States
10.12 Department of Health and Human Services under Code of Federal Regulations, title 42,
10.13 section 51c.303; or

10.14 (2) primarily serve people from communities of color or underrepresented communities.

10.15 Subd. 5. **Request for proposals.** The commissioner must publish a request for proposals
10.16 in the State Register specifying provider eligibility requirements, criteria for a qualifying
10.17 employee scholarship program, provider selection criteria, documentation required for
10.18 program participation, the maximum award amount, and methods of evaluation. The
10.19 commissioner must publish additional requests for proposals each year in which funding is
10.20 available for this purpose.

10.21 Subd. 6. **Application requirements.** An eligible provider seeking a grant under this
10.22 section must submit an application to the commissioner. An application must contain a
10.23 complete description of the employee scholarship program being proposed by the applicant,
10.24 including the need for the mental health provider to enhance the education of its workforce,
10.25 the process the mental health provider will use to determine which employees will be eligible
10.26 for scholarships, any other funding sources for scholarships, the amount of funding sought
10.27 for the scholarship program, a proposed budget detailing how funds will be spent, and plans
10.28 to retain eligible employees after completion of the education program.

10.29 Subd. 7. **Selection process.** The commissioner shall determine a maximum award amount
10.30 for grants and shall select grant recipients based on the information provided in the grant
10.31 application, including the demonstrated need for the applicant provider to enhance the
10.32 education of its workforce, the proposed process to select employees for scholarships, the
10.33 applicant's proposed budget, and other criteria as determined by the commissioner. The

11.1 commissioner shall give preference to grant applicants who work in rural or culturally
11.2 specific organizations.

11.3 Subd. 8. **Grant agreements.** Notwithstanding any law or rule to the contrary, grant
11.4 money awarded to a grant recipient in a grant agreement does not lapse until the grant
11.5 agreement expires.

11.6 Subd. 9. **Allowable uses of grant funds.** A mental health provider receiving a grant
11.7 under this section must use the grant funds for one or more of the following:

11.8 (1) to provide employees with tuition reimbursement for a master's degree-level program
11.9 in a discipline that will allow the employee to qualify as a mental health professional; or

11.10 (2) for resources and supports, such as child care and transportation, that allow an
11.11 employee to attend a master's degree-level program specified in clause (1).

11.12 Subd. 10. **Reporting requirements.** A mental health provider receiving a grant under
11.13 this section must submit an invoice for reimbursement and a report to the commissioner on
11.14 a schedule determined by the commissioner and using a form supplied by the commissioner.
11.15 The report must include the amount spent on scholarships; the number of employees who
11.16 received scholarships; and, for each scholarship recipient, the recipient's name, current
11.17 position, amount awarded, educational institution attended, name of the educational program,
11.18 and expected or actual program completion date.

11.19 Sec. 11. **[245.4906] YOUTH CARE PROFESSIONAL TRAINING PROGRAM.**

11.20 Subdivision 1. **Establishment.** The youth care professional training program is
11.21 established in the Department of Human Services to provide training and ongoing support
11.22 for direct care staff in children's mental health treatment settings described in section
11.23 256B.0941 and Minnesota Rules, chapter 2960, and day treatment services described in
11.24 section 256B.0943.

11.25 Subd. 2. **Program activities.** (a) The commissioner of human services shall contract
11.26 with a provider to establish curriculum, administration, and implementation.

11.27 (b) Training courses must be based in trauma-informed care and cover:

11.28 (1) Minnesota Rules, chapter 2960;

11.29 (2) maltreatment of minors;

11.30 (3) resident rights;

11.31 (4) emergency procedures;

12.1 (5) policy and procedures for physical holds and de-escalation techniques;

12.2 (6) physical and nonphysical intervention;

12.3 (7) positive behavior supports;

12.4 (8) fundamentals of child and adolescent development;

12.5 (9) mental illness and symptoms of mental illness; and

12.6 (10) cultural responsiveness and family engagement.

12.7 (c) At the completion of the training requirements, a participant and their completion
 12.8 date must be listed in the youth worker professional registry held and maintained by the
 12.9 commissioner of human services.

12.10 (d) Expert stakeholders from children's mental health treatment must be involved in
 12.11 curriculum development.

12.12 **Sec. 12. TRANSFER TO THE HEALTH PROFESSIONAL LOAN FORGIVENESS**
 12.13 **ACCOUNT.**

12.14 \$2,000,000 in fiscal year 2024 is transferred from the general fund to the health
 12.15 professional loan forgiveness account established in Minnesota Statutes, section 144.1501,
 12.16 subdivision 2, to be used for loan forgiveness for eligible mental health professionals.

12.17 **Sec. 13. APPROPRIATION; ADDITIONAL PSYCHIATRY SLOT FOR PRIMARY**
 12.18 **CARE RESIDENCY EXPANSION GRANT PROGRAM.**

12.19 \$..... in fiscal year 2024 and \$..... in fiscal year 2025 are appropriated from the general
 12.20 fund to the commissioner of health to support a fifth psychiatry resident under Minnesota
 12.21 Statutes, section 144.1506.

12.22 **Sec. 14. APPROPRIATIONS; MENTAL HEALTH TRAINING PROGRAMS FOR**
 12.23 **PEDIATRIC PRIMARY CARE PROVIDERS.**

12.24 \$1,000,000 in fiscal year 2024 and \$1,000,000 in fiscal year 2025 are appropriated from
 12.25 the general fund to the commissioner of health for the mental health training programs for
 12.26 pediatric primary care providers under Minnesota Statutes, section 144.1507.

13.1 Sec. 15. **APPROPRIATIONS; MENTAL HEALTH CULTURAL COMMUNITY**
13.2 **CONTINUING EDUCATION GRANT PROGRAM.**

13.3 \$500,000 in fiscal year 2024 and \$500,000 in fiscal year 2025 are appropriated from the
13.4 general fund to the commissioner of health for the mental health cultural community
13.5 continuing education grant program under Minnesota Statutes, section 144.1511.

13.6 Sec. 16. **APPROPRIATIONS; MENTAL HEALTH PROVIDER SUPERVISION**
13.7 **GRANT PROGRAM.**

13.8 \$1,500,000 in fiscal year 2024 and \$1,500,000 in fiscal year 2025 are appropriated from
13.9 the general fund to the commissioner of human services for the mental health provider
13.10 supervision grant program under Minnesota Statutes, section 245.4663.

13.11 Sec. 17. **APPROPRIATION; MENTAL HEALTH PROFESSIONAL SCHOLARSHIP**
13.12 **GRANT PROGRAM.**

13.13 \$..... in fiscal year 2024 and \$..... in fiscal year 2025 are appropriated from the general
13.14 fund to the commissioner of human services for the mental health professional scholarship
13.15 grant program under Minnesota Statutes, section 245.4664.

13.16 Sec. 18. **APPROPRIATIONS; YOUTH CARE PROFESSIONAL TRAINING**
13.17 **PROGRAM.**

13.18 \$..... in fiscal year 2024 and \$..... in fiscal year 2025 are appropriated from the general
13.19 fund to the commissioner of human services to contract with a provider to develop and
13.20 support the youth care professional training program under Minnesota Statutes, section
13.21 245.4906, and for a database to retain information on those who complete training.