

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

**S.F. No. 70**

(SENATE AUTHORS: MAYE QUADE, Morrison, Port, Wiklund and Dziejdzic)

DATE	D-PG	OFFICIAL STATUS
01/09/2023	110	Introduction and first reading Referred to Health and Human Services
01/19/2023	234	Comm report: To pass and re-referred to Judiciary and Public Safety
	235	Rule 12.10: report of votes in committee
02/06/2023	657a	Comm report: To pass as amended and re-refer to Finance
	658	Rule 12.10: report of votes in committee
02/13/2023	780	Comm report: To pass
	781	Rule 12.10: report of votes in committee
	791	Second reading
	11498	Rule 47, returned to Finance See SF2909, SF2995

1.1 A bill for an act

1.2 relating to health; repealing certain statutes regulating abortion; repealing certain

1.3 sex offenses; repealing certain statutes governing the sale of certain articles and

1.4 information and prohibiting certain advertisements; removing a limitation on the

1.5 performance of abortions at birth centers; striking certain language regarding

1.6 medical assistance coverage of abortion; removing a limitation on MinnesotaCare

1.7 coverage of abortion; making conforming changes; amending Minnesota Statutes

1.8 2022, sections 13.3805, subdivision 1; 144.222, subdivision 1; 144.615, subdivision

1.9 7; 145.411, subdivisions 1, 5; 145.4235, subdivision 2; 148.261, subdivision 1;

1.10 256B.0625, subdivision 16; 256B.692, subdivision 2; 256L.03, subdivision 1;

1.11 518A.39, subdivision 2; 609.269; 617.22; 617.26; repealing Minnesota Statutes

1.12 2022, sections 62Q.145; 144.343, subdivisions 2, 3, 4, 5, 6, 7; 145.1621; 145.411,

1.13 subdivisions 2, 4; 145.412; 145.413, subdivisions 2, 3; 145.4131; 145.4132;

1.14 145.4133; 145.4134; 145.4135; 145.4136; 145.415; 145.416; 145.423; 145.4241;

1.15 145.4242; 145.4243; 145.4244; 145.4245; 145.4246; 145.4247; 145.4248;

1.16 145.4249; 145.925, subdivisions 2, 4; 256B.011; 256B.40; 261.28; 393.07,

1.17 subdivision 11; 609.293, subdivisions 1, 5; 609.34; 609.36; 617.20; 617.201;

1.18 617.202; 617.21; 617.28; 617.29; Minnesota Rules, parts 4615.3600; 9505.0235.

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

1.20 Section 1. Minnesota Statutes 2022, section 13.3805, subdivision 1, is amended to read:

1.21 Subdivision 1. **Health data generally.** (a) **Definitions.** As used in this subdivision:

1.22 (1) "Commissioner" means the commissioner of health.

1.23 (2) "Health data" are data on individuals created, collected, received, or maintained by

1.24 the Department of Health, political subdivisions, or statewide systems relating to the

1.25 identification, description, prevention, and control of disease or as part of an epidemiologic

1.26 investigation the commissioner designates as necessary to analyze, describe, or protect the

1.27 public health.

2.1 (b) **Data on individuals.** (1) Health data are private data on individuals. Notwithstanding  
 2.2 section 13.05, subdivision 9, health data may not be disclosed except as provided in this  
 2.3 subdivision and section 13.04.

2.4 (2) The commissioner or a community health board as defined in section 145A.02,  
 2.5 subdivision 5, may disclose health data to the data subject's physician as necessary to locate  
 2.6 or identify a case, carrier, or suspect case, to establish a diagnosis, to provide treatment, to  
 2.7 identify persons at risk of illness, or to conduct an epidemiologic investigation.

2.8 (3) With the approval of the commissioner, health data may be disclosed to the extent  
 2.9 necessary to assist the commissioner to locate or identify a case, carrier, or suspect case, to  
 2.10 alert persons who may be threatened by illness as evidenced by epidemiologic data, to  
 2.11 control or prevent the spread of serious disease, or to diminish an imminent threat to the  
 2.12 public health.

2.13 ~~(c) **Health summary data.** Summary data derived from data collected under section~~  
 2.14 ~~145.413 may be provided under section 13.05, subdivision 7.~~

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

2.16 Sec. 2. Minnesota Statutes 2022, section 144.222, subdivision 1, is amended to read:

2.17 Subdivision 1. **Fetal death report required.** A fetal death report must be filed within  
 2.18 five days of the death of a fetus for whom 20 or more weeks of gestation have elapsed,  
 2.19 except for abortions defined under section ~~145.4241~~ 145.411, subdivision 5. A fetal death  
 2.20 report must be prepared in a format prescribed by the state registrar and filed in accordance  
 2.21 with Minnesota Rules, parts 4601.0100 to 4601.2600 by:

2.22 (1) a person in charge of an institution or that person's authorized designee if a fetus is  
 2.23 delivered in the institution or en route to the institution;

2.24 (2) a physician, certified nurse midwife, or other licensed medical personnel in attendance  
 2.25 at or immediately after the delivery if a fetus is delivered outside an institution; or

2.26 (3) a parent or other person in charge of the disposition of the remains if a fetal death  
 2.27 occurred without medical attendance at or immediately after the delivery.

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

2.29 Sec. 3. Minnesota Statutes 2022, section 144.615, subdivision 7, is amended to read:

2.30 Subd. 7. **Limitations of services.** (a) The following limitations apply to the services  
 2.31 performed at a birth center:

3.1 (1) surgical procedures must be limited to those normally accomplished during an  
 3.2 uncomplicated birth, including episiotomy and repair; and

3.3 ~~(2) no abortions may be administered; and~~

3.4 ~~(3)~~ (2) no general or regional anesthesia may be administered.

3.5 (b) Notwithstanding paragraph (a), local anesthesia may be administered at a birth center  
 3.6 if the administration of the anesthetic is performed within the scope of practice of a health  
 3.7 care professional.

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

3.9 Sec. 4. Minnesota Statutes 2022, section 145.411, subdivision 1, is amended to read:

3.10 Subdivision 1. **Terms.** As used in sections 145.411 to ~~145.416~~ 145.414, the terms defined  
 3.11 in this section have the meanings given to them.

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

3.13 Sec. 5. Minnesota Statutes 2022, section 145.411, subdivision 5, is amended to read:

3.14 Subd. 5. **Abortion.** "Abortion" includes an act, procedure or use of any instrument,  
 3.15 medicine or drug which is supplied or prescribed for or administered to ~~a pregnant woman~~  
 3.16 an individual with the intention of terminating, and which results in the termination of,  
 3.17 pregnancy.

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

3.19 Sec. 6. Minnesota Statutes 2022, section 145.4235, subdivision 2, is amended to read:

3.20 Subd. 2. **Eligibility for grants.** (a) The commissioner shall award grants to eligible  
 3.21 applicants under paragraph (c) for the reasonable expenses of alternatives to abortion  
 3.22 programs to support, encourage, and assist women in carrying their pregnancies to term and  
 3.23 caring for their babies after birth by providing information on, referral to, and assistance  
 3.24 with securing necessary services that enable women to carry their pregnancies to term and  
 3.25 care for their babies after birth. Necessary services must include, but are not limited to:

3.26 (1) medical care;

3.27 (2) nutritional services;

3.28 (3) housing assistance;

3.29 (4) adoption services;

4.1 (5) education and employment assistance, including services that support the continuation  
4.2 and completion of high school;

4.3 (6) child care assistance; and

4.4 (7) parenting education and support services.

4.5 An applicant may not provide or assist a woman to obtain adoption services from a provider  
4.6 of adoption services that is not licensed.

4.7 (b) In addition to providing information and referral under paragraph (a), an eligible  
4.8 program may provide one or more of the necessary services under paragraph (a) that assists  
4.9 women in carrying their pregnancies to term. To avoid duplication of efforts, grantees may  
4.10 refer to other public or private programs, rather than provide the care directly, if a woman  
4.11 meets eligibility criteria for the other programs.

4.12 (c) To be eligible for a grant, an agency or organization must:

4.13 (1) be a private, nonprofit organization;

4.14 (2) demonstrate that the program is conducted under appropriate supervision;

4.15 (3) not charge women for services provided under the program;

4.16 (4) provide each pregnant woman counseled with accurate information on the  
4.17 developmental characteristics of babies and of unborn children, ~~including offering the printed~~  
4.18 ~~information described in section 145.4243~~ as determined by the commissioner;

4.19 (5) ensure that its alternatives-to-abortion program's purpose is to assist and encourage  
4.20 women in carrying their pregnancies to term and to maximize their potentials thereafter;

4.21 (6) ensure that none of the money provided is used to encourage or affirmatively counsel  
4.22 a woman to have an abortion not necessary to prevent her death, to provide her an abortion,  
4.23 or to directly refer her to an abortion provider for an abortion. The agency or organization  
4.24 may provide nondirective counseling; and

4.25 (7) have had the alternatives to abortion program in existence for at least one year as of  
4.26 July 1, 2011; or incorporated an alternative to abortion program that has been in existence  
4.27 for at least one year as of July 1, 2011.

4.28 (d) The provisions, words, phrases, and clauses of paragraph (c) are inseverable from  
4.29 this subdivision, and if any provision, word, phrase, or clause of paragraph (c) or its  
4.30 application to any person or circumstance is held invalid, the invalidity applies to all of this  
4.31 subdivision.

5.1 (e) An organization that provides abortions, promotes abortions, or directly refers to an  
5.2 abortion provider for an abortion is ineligible to receive a grant under this program. An  
5.3 affiliate of an organization that provides abortions, promotes abortions, or directly refers  
5.4 to an abortion provider for an abortion is ineligible to receive a grant under this section  
5.5 unless the organizations are separately incorporated and independent from each other. To  
5.6 be independent, the organizations may not share any of the following:

5.7 (1) the same or a similar name;

5.8 (2) medical facilities or nonmedical facilities, including but not limited to, business  
5.9 offices, treatment rooms, consultation rooms, examination rooms, and waiting rooms;

5.10 (3) expenses;

5.11 (4) employee wages or salaries; or

5.12 (5) equipment or supplies, including but not limited to, computers, telephone systems,  
5.13 telecommunications equipment, and office supplies.

5.14 (f) An organization that receives a grant under this section and that is affiliated with an  
5.15 organization that provides abortion services must maintain financial records that demonstrate  
5.16 strict compliance with this subdivision and that demonstrate that its independent affiliate  
5.17 that provides abortion services receives no direct or indirect economic or marketing benefit  
5.18 from the grant under this section.

5.19 (g) The commissioner shall approve any information provided by a grantee on the health  
5.20 risks associated with abortions to ensure that the information is medically accurate.

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

5.22 Sec. 7. Minnesota Statutes 2022, section 148.261, subdivision 1, is amended to read:

5.23 Subdivision 1. **Grounds listed.** The board may deny, revoke, suspend, limit, or condition  
5.24 the license and registration of any person to practice advanced practice, professional, or  
5.25 practical nursing under sections 148.171 to 148.285, or to otherwise discipline a licensee  
5.26 or applicant as described in section 148.262. The following are grounds for disciplinary  
5.27 action:

5.28 (1) Failure to demonstrate the qualifications or satisfy the requirements for a license  
5.29 contained in sections 148.171 to 148.285 or rules of the board. In the case of a person  
5.30 applying for a license, the burden of proof is upon the applicant to demonstrate the  
5.31 qualifications or satisfaction of the requirements.

6.1 (2) Employing fraud or deceit in procuring or attempting to procure a permit, license,  
6.2 or registration certificate to practice advanced practice, professional, or practical nursing  
6.3 or attempting to subvert the licensing examination process. Conduct that subverts or attempts  
6.4 to subvert the licensing examination process includes, but is not limited to:

6.5 (i) conduct that violates the security of the examination materials, such as removing  
6.6 examination materials from the examination room or having unauthorized possession of  
6.7 any portion of a future, current, or previously administered licensing examination;

6.8 (ii) conduct that violates the standard of test administration, such as communicating with  
6.9 another examinee during administration of the examination, copying another examinee's  
6.10 answers, permitting another examinee to copy one's answers, or possessing unauthorized  
6.11 materials; or

6.12 (iii) impersonating an examinee or permitting an impersonator to take the examination  
6.13 on one's own behalf.

6.14 (3) Conviction of a felony or gross misdemeanor reasonably related to the practice of  
6.15 professional, advanced practice registered, or practical nursing. Conviction as used in this  
6.16 subdivision includes a conviction of an offense that if committed in this state would be  
6.17 considered a felony or gross misdemeanor without regard to its designation elsewhere, or  
6.18 a criminal proceeding where a finding or verdict of guilt is made or returned but the  
6.19 adjudication of guilt is either withheld or not entered.

6.20 (4) Revocation, suspension, limitation, conditioning, or other disciplinary action against  
6.21 the person's professional or practical nursing license or advanced practice registered nursing  
6.22 credential, in another state, territory, or country; failure to report to the board that charges  
6.23 regarding the person's nursing license or other credential are pending in another state,  
6.24 territory, or country; or having been refused a license or other credential by another state,  
6.25 territory, or country.

6.26 (5) Failure to or inability to perform professional or practical nursing as defined in section  
6.27 148.171, subdivision 14 or 15, with reasonable skill and safety, including failure of a  
6.28 registered nurse to supervise or a licensed practical nurse to monitor adequately the  
6.29 performance of acts by any person working at the nurse's direction.

6.30 (6) Engaging in unprofessional conduct, including, but not limited to, a departure from  
6.31 or failure to conform to board rules of professional or practical nursing practice that interpret  
6.32 the statutory definition of professional or practical nursing as well as provide criteria for  
6.33 violations of the statutes, or, if no rule exists, to the minimal standards of acceptable and  
6.34 prevailing professional or practical nursing practice, or any nursing practice that may create

7.1 unnecessary danger to a patient's life, health, or safety. Actual injury to a patient need not  
7.2 be established under this clause.

7.3 (7) Failure of an advanced practice registered nurse to practice with reasonable skill and  
7.4 safety or departure from or failure to conform to standards of acceptable and prevailing  
7.5 advanced practice registered nursing.

7.6 (8) Delegating or accepting the delegation of a nursing function or a prescribed health  
7.7 care function when the delegation or acceptance could reasonably be expected to result in  
7.8 unsafe or ineffective patient care.

7.9 (9) Actual or potential inability to practice nursing with reasonable skill and safety to  
7.10 patients by reason of illness, use of alcohol, drugs, chemicals, or any other material, or as  
7.11 a result of any mental or physical condition.

7.12 (10) Adjudication as mentally incompetent, mentally ill, a chemically dependent person,  
7.13 or a person dangerous to the public by a court of competent jurisdiction, within or without  
7.14 this state.

7.15 (11) Engaging in any unethical conduct, including, but not limited to, conduct likely to  
7.16 deceive, defraud, or harm the public, or demonstrating a willful or careless disregard for  
7.17 the health, welfare, or safety of a patient. Actual injury need not be established under this  
7.18 clause.

7.19 (12) Engaging in conduct with a patient that is sexual or may reasonably be interpreted  
7.20 by the patient as sexual, or in any verbal behavior that is seductive or sexually demeaning  
7.21 to a patient, or engaging in sexual exploitation of a patient or former patient.

7.22 (13) Obtaining money, property, or services from a patient, other than reasonable fees  
7.23 for services provided to the patient, through the use of undue influence, harassment, duress,  
7.24 deception, or fraud.

7.25 (14) Revealing a privileged communication from or relating to a patient except when  
7.26 otherwise required or permitted by law.

7.27 (15) Engaging in abusive or fraudulent billing practices, including violations of federal  
7.28 Medicare and Medicaid laws or state medical assistance laws.

7.29 (16) Improper management of patient records, including failure to maintain adequate  
7.30 patient records, to comply with a patient's request made pursuant to sections 144.291 to  
7.31 144.298, or to furnish a patient record or report required by law.

8.1 (17) Knowingly aiding, assisting, advising, or allowing an unlicensed person to engage  
8.2 in the unlawful practice of advanced practice, professional, or practical nursing.

8.3 (18) Violating a rule adopted by the board, an order of the board, or a state or federal  
8.4 law relating to the practice of advanced practice, professional, or practical nursing, or a  
8.5 state or federal narcotics or controlled substance law.

8.6 (19) Knowingly providing false or misleading information that is directly related to the  
8.7 care of that patient unless done for an accepted therapeutic purpose such as the administration  
8.8 of a placebo.

8.9 (20) Aiding suicide or aiding attempted suicide in violation of section 609.215 as  
8.10 established by any of the following:

8.11 (i) a copy of the record of criminal conviction or plea of guilty for a felony in violation  
8.12 of section 609.215, subdivision 1 or 2;

8.13 (ii) a copy of the record of a judgment of contempt of court for violating an injunction  
8.14 issued under section 609.215, subdivision 4;

8.15 (iii) a copy of the record of a judgment assessing damages under section 609.215,  
8.16 subdivision 5; or

8.17 (iv) a finding by the board that the person violated section 609.215, subdivision 1 or 2.  
8.18 The board shall investigate any complaint of a violation of section 609.215, subdivision 1  
8.19 or 2.

8.20 (21) Practicing outside the scope of practice authorized by section 148.171, subdivision  
8.21 5, 10, 11, 13, 14, 15, or 21.

8.22 (22) Making a false statement or knowingly providing false information to the board,  
8.23 failing to make reports as required by section 148.263, or failing to cooperate with an  
8.24 investigation of the board as required by section 148.265.

8.25 (23) Engaging in false, fraudulent, deceptive, or misleading advertising.

8.26 (24) Failure to inform the board of the person's certification or recertification status as  
8.27 a certified registered nurse anesthetist, certified nurse-midwife, certified nurse practitioner,  
8.28 or certified clinical nurse specialist.

8.29 (25) Engaging in clinical nurse specialist practice, nurse-midwife practice, nurse  
8.30 practitioner practice, or registered nurse anesthetist practice without a license and current  
8.31 certification or recertification by a national nurse certification organization acceptable to  
8.32 the board.



9.1 ~~(26) Engaging in conduct that is prohibited under section 145.412.~~

9.2 ~~(27)~~ (26) Failing to report employment to the board as required by section 148.211,  
9.3 subdivision 2a, or knowingly aiding, assisting, advising, or allowing a person to fail to report  
9.4 as required by section 148.211, subdivision 2a.

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

9.6 Sec. 8. Minnesota Statutes 2022, section 256B.0625, subdivision 16, is amended to read:

9.7 Subd. 16. **Abortion services.** Medical assistance covers abortion services, ~~but only if~~  
9.8 ~~one of the following conditions is met:~~ determined to be medically necessary by the treating  
9.9 provider and delivered in accordance with all applicable Minnesota laws.

9.10 ~~(a) The abortion is a medical necessity. "Medical necessity" means (1) the signed written~~  
9.11 ~~statement of two physicians indicating the abortion is medically necessary to prevent the~~  
9.12 ~~death of the mother, and (2) the patient has given her consent to the abortion in writing~~  
9.13 ~~unless the patient is physically or legally incapable of providing informed consent to the~~  
9.14 ~~procedure, in which case consent will be given as otherwise provided by law;~~

9.15 ~~(b) The pregnancy is the result of criminal sexual conduct as defined in section 609.342,~~  
9.16 ~~subdivision 1, clauses (a), (b), (c)(i) and (ii), and (e), and subdivision 1a, clauses (a), (b),~~  
9.17 ~~(c)(i) and (ii), and (d), and the incident is reported within 48 hours after the incident occurs~~  
9.18 ~~to a valid law enforcement agency for investigation, unless the victim is physically unable~~  
9.19 ~~to report the criminal sexual conduct, in which case the report shall be made within 48 hours~~  
9.20 ~~after the victim becomes physically able to report the criminal sexual conduct; or~~

9.21 ~~(c) The pregnancy is the result of incest, but only if the incident and relative are reported~~  
9.22 ~~to a valid law enforcement agency for investigation prior to the abortion.~~

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

9.24 Sec. 9. Minnesota Statutes 2022, section 256B.692, subdivision 2, is amended to read:

9.25 Subd. 2. **Duties of commissioner of health.** (a) Notwithstanding chapters 62D and 62N,  
9.26 a county that elects to purchase medical assistance in return for a fixed sum without regard  
9.27 to the frequency or extent of services furnished to any particular enrollee is not required to  
9.28 obtain a certificate of authority under chapter 62D or 62N. The county board of  
9.29 commissioners is the governing body of a county-based purchasing program. In a multicounty  
9.30 arrangement, the governing body is a joint powers board established under section 471.59.

10.1 (b) A county that elects to purchase medical assistance services under this section must  
10.2 satisfy the commissioner of health that the requirements for assurance of consumer protection,  
10.3 provider protection, and fiscal solvency of chapter 62D, applicable to health maintenance  
10.4 organizations will be met according to the following schedule:

10.5 (1) for a county-based purchasing plan approved on or before June 30, 2008, the plan  
10.6 must have in reserve:

10.7 (i) at least 50 percent of the minimum amount required under chapter 62D as of January  
10.8 1, 2010;

10.9 (ii) at least 75 percent of the minimum amount required under chapter 62D as of January  
10.10 1, 2011;

10.11 (iii) at least 87.5 percent of the minimum amount required under chapter 62D as of  
10.12 January 1, 2012; and

10.13 (iv) at least 100 percent of the minimum amount required under chapter 62D as of January  
10.14 1, 2013; and

10.15 (2) for a county-based purchasing plan first approved after June 30, 2008, the plan must  
10.16 have in reserve:

10.17 (i) at least 50 percent of the minimum amount required under chapter 62D at the time  
10.18 the plan begins enrolling enrollees;

10.19 (ii) at least 75 percent of the minimum amount required under chapter 62D after the first  
10.20 full calendar year;

10.21 (iii) at least 87.5 percent of the minimum amount required under chapter 62D after the  
10.22 second full calendar year; and

10.23 (iv) at least 100 percent of the minimum amount required under chapter 62D after the  
10.24 third full calendar year.

10.25 (c) Until a plan is required to have reserves equaling at least 100 percent of the minimum  
10.26 amount required under chapter 62D, the plan may demonstrate its ability to cover any losses  
10.27 by satisfying the requirements of chapter 62N. A county-based purchasing plan must also  
10.28 assure the commissioner of health that the requirements of sections 62J.041; 62J.48; 62J.71  
10.29 to 62J.73; all applicable provisions of chapter 62Q, including sections 62Q.075; 62Q.1055;  
10.30 62Q.106; 62Q.12; 62Q.135; 62Q.14; ~~62Q.145~~; 62Q.19; 62Q.23, paragraph (c); 62Q.43;  
10.31 62Q.47; 62Q.50; 62Q.52 to 62Q.56; 62Q.58; 62Q.68 to 62Q.72; and 72A.201 will be met.

11.1 (d) All enforcement and rulemaking powers available under chapters 62D, 62J, 62N,  
 11.2 and 62Q are hereby granted to the commissioner of health with respect to counties that  
 11.3 purchase medical assistance services under this section.

11.4 (e) The commissioner, in consultation with county government, shall develop  
 11.5 administrative and financial reporting requirements for county-based purchasing programs  
 11.6 relating to sections 62D.041, 62D.042, 62D.045, 62D.08, 62N.28, 62N.29, and 62N.31,  
 11.7 and other sections as necessary, that are specific to county administrative, accounting, and  
 11.8 reporting systems and consistent with other statutory requirements of counties.

11.9 (f) The commissioner shall collect from a county-based purchasing plan under this  
 11.10 section the following fees:

11.11 (1) fees attributable to the costs of audits and other examinations of plan financial  
 11.12 operations. These fees are subject to the provisions of Minnesota Rules, part 4685.2800,  
 11.13 subpart 1, item F; and

11.14 (2) an annual fee of \$21,500, to be paid by June 15 of each calendar year.

11.15 All fees collected under this paragraph shall be deposited in the state government special  
 11.16 revenue fund.

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

11.18 Sec. 10. Minnesota Statutes 2022, section 256L.03, subdivision 1, is amended to read:

11.19 Subdivision 1. **Covered health services.** (a) "Covered health services" means the health  
 11.20 services reimbursed under chapter 256B, with the exception of special education services,  
 11.21 home care nursing services, adult dental care services other than services covered under  
 11.22 section 256B.0625, subdivision 9, orthodontic services, nonemergency medical transportation  
 11.23 services, personal care assistance and case management services, community first services  
 11.24 and supports under section 256B.85, behavioral health home services under section  
 11.25 256B.0757, housing stabilization services under section 256B.051, and nursing home or  
 11.26 intermediate care facilities services.

11.27 ~~(b) No public funds shall be used for coverage of abortion under MinnesotaCare except~~  
 11.28 ~~where the life of the female would be endangered or substantial and irreversible impairment~~  
 11.29 ~~of a major bodily function would result if the fetus were carried to term; or where the~~  
 11.30 ~~pregnancy is the result of rape or incest.~~

11.31 ~~(e)~~ (b) Covered health services shall be expanded as provided in this section.

12.1 ~~(d)~~ (c) For the purposes of covered health services under this section, "child" means an  
12.2 individual younger than 19 years of age.

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

12.4 Sec. 11. Minnesota Statutes 2022, section 518A.39, subdivision 2, is amended to read:

12.5 Subd. 2. **Modification.** (a) The terms of an order respecting maintenance or support  
12.6 may be modified upon a showing of one or more of the following, any of which makes the  
12.7 terms unreasonable and unfair: (1) substantially increased or decreased gross income of an  
12.8 obligor or obligee; (2) substantially increased or decreased need of an obligor or obligee or  
12.9 the child or children that are the subject of these proceedings; (3) receipt of assistance under  
12.10 the AFDC program formerly codified under sections 256.72 to 256.87 or 256B.01 to ~~256B.40~~  
12.11 256B.39, or chapter 256J or 256K; (4) a change in the cost of living for either party as  
12.12 measured by the federal Bureau of Labor Statistics; (5) extraordinary medical expenses of  
12.13 the child not provided for under section 518A.41; (6) a change in the availability of  
12.14 appropriate health care coverage or a substantial increase or decrease in health care coverage  
12.15 costs; (7) the addition of work-related or education-related child care expenses of the obligee  
12.16 or a substantial increase or decrease in existing work-related or education-related child care  
12.17 expenses; or (8) upon the emancipation of the child, as provided in subdivision 5.

12.18 (b) It is presumed that there has been a substantial change in circumstances under  
12.19 paragraph (a) and the terms of a current support order shall be rebuttably presumed to be  
12.20 unreasonable and unfair if:

12.21 (1) the application of the child support guidelines in section 518A.35, to the current  
12.22 circumstances of the parties results in a calculated court order that is at least 20 percent and  
12.23 at least \$75 per month higher or lower than the current support order or, if the current support  
12.24 order is less than \$75, it results in a calculated court order that is at least 20 percent per  
12.25 month higher or lower;

12.26 (2) the medical support provisions of the order established under section 518A.41 are  
12.27 not enforceable by the public authority or the obligee;

12.28 (3) health coverage ordered under section 518A.41 is not available to the child for whom  
12.29 the order is established by the parent ordered to provide;

12.30 (4) the existing support obligation is in the form of a statement of percentage and not a  
12.31 specific dollar amount;

12.32 (5) the gross income of an obligor or obligee has decreased by at least 20 percent through  
12.33 no fault or choice of the party; or

13.1 (6) a deviation was granted based on the factor in section 518A.43, subdivision 1, clause  
13.2 (4), and the child no longer resides in a foreign country or the factor is otherwise no longer  
13.3 applicable.

13.4 (c) A child support order is not presumptively modifiable solely because an obligor or  
13.5 obligee becomes responsible for the support of an additional nonjoint child, which is born  
13.6 after an existing order. Section 518A.33 shall be considered if other grounds are alleged  
13.7 which allow a modification of support.

13.8 (d) If child support was established by applying a parenting expense adjustment or  
13.9 presumed equal parenting time calculation under previously existing child support guidelines  
13.10 and there is no parenting plan or order from which overnights or overnight equivalents can  
13.11 be determined, there is a rebuttable presumption that the established adjustment or calculation  
13.12 will continue after modification so long as the modification is not based on a change in  
13.13 parenting time. In determining an obligation under previously existing child support  
13.14 guidelines, it is presumed that the court shall:

13.15 (1) if a 12 percent parenting expense adjustment was applied, multiply the obligor's  
13.16 share of the combined basic support obligation calculated under section 518A.34, paragraph  
13.17 (b), clause (5), by 0.88; or

13.18 (2) if the parenting time was presumed equal but the parents' parental incomes for  
13.19 determining child support were not equal:

13.20 (i) multiply the combined basic support obligation under section 518A.34, paragraph  
13.21 (b), clause (5), by 0.75;

13.22 (ii) prorate the amount under item (i) between the parents based on each parent's  
13.23 proportionate share of the combined PICS; and

13.24 (iii) subtract the lower amount from the higher amount.

13.25 (e) On a motion for modification of maintenance, including a motion for the extension  
13.26 of the duration of a maintenance award, the court shall apply, in addition to all other relevant  
13.27 factors, the factors for an award of maintenance under section 518.552 that exist at the time  
13.28 of the motion. On a motion for modification of support, the court:

13.29 (1) shall apply section 518A.35, and shall not consider the financial circumstances of  
13.30 each party's spouse, if any; and

13.31 (2) shall not consider compensation received by a party for employment in excess of a  
13.32 40-hour work week, provided that the party demonstrates, and the court finds, that:

- 14.1 (i) the excess employment began after entry of the existing support order;
- 14.2 (ii) the excess employment is voluntary and not a condition of employment;
- 14.3 (iii) the excess employment is in the nature of additional, part-time employment, or  
14.4 overtime employment compensable by the hour or fractions of an hour;
- 14.5 (iv) the party's compensation structure has not been changed for the purpose of affecting  
14.6 a support or maintenance obligation;
- 14.7 (v) in the case of an obligor, current child support payments are at least equal to the  
14.8 guidelines amount based on income not excluded under this clause; and
- 14.9 (vi) in the case of an obligor who is in arrears in child support payments to the obligee,  
14.10 any net income from excess employment must be used to pay the arrearages until the  
14.11 arrearages are paid in full.
- 14.12 (f) A modification of support or maintenance, including interest that accrued pursuant  
14.13 to section 548.091, may be made retroactive only with respect to any period during which  
14.14 the petitioning party has pending a motion for modification but only from the date of service  
14.15 of notice of the motion on the responding party and on the public authority if public assistance  
14.16 is being furnished or the county attorney is the attorney of record, unless the court adopts  
14.17 an alternative effective date under paragraph (l). The court's adoption of an alternative  
14.18 effective date under paragraph (l) shall not be considered a retroactive modification of  
14.19 maintenance or support.
- 14.20 (g) Except for an award of the right of occupancy of the homestead, provided in section  
14.21 518.63, all divisions of real and personal property provided by section 518.58 shall be final,  
14.22 and may be revoked or modified only where the court finds the existence of conditions that  
14.23 justify reopening a judgment under the laws of this state, including motions under section  
14.24 518.145, subdivision 2. The court may impose a lien or charge on the divided property at  
14.25 any time while the property, or subsequently acquired property, is owned by the parties or  
14.26 either of them, for the payment of maintenance or support money, or may sequester the  
14.27 property as is provided by section 518A.71.
- 14.28 (h) The court need not hold an evidentiary hearing on a motion for modification of  
14.29 maintenance or support.
- 14.30 (i) Sections 518.14 and 518A.735 shall govern the award of attorney fees for motions  
14.31 brought under this subdivision.

15.1 (j) An enactment, amendment, or repeal of law constitutes a substantial change in the  
 15.2 circumstances for purposes of modifying a child support order when it meets the standards  
 15.3 for modification in this section.

15.4 (k) On the first modification following implementation of amended child support  
 15.5 guidelines, the modification of basic support may be limited if the amount of the full variance  
 15.6 would create hardship for either the obligor or the obligee. Hardship includes, but is not  
 15.7 limited to, eligibility for assistance under chapter 256J.

15.8 (l) The court may select an alternative effective date for a maintenance or support order  
 15.9 if the parties enter into a binding agreement for an alternative effective date.

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

15.11 Sec. 12. Minnesota Statutes 2022, section 609.269, is amended to read:

15.12 **609.269 EXCEPTION.**

15.13 Sections 609.2661 to 609.268 do not apply to ~~any act described in section 145.412.~~ a  
 15.14 person providing reproductive health care offered, arranged, or furnished:

15.15 (1) for the purpose of terminating a pregnancy; and

15.16 (2) with the consent of the pregnant individual or the pregnant individual's representative,  
 15.17 except in a medical emergency in which consent cannot be obtained.

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

15.19 Sec. 13. Minnesota Statutes 2022, section 617.22, is amended to read:

15.20 **617.22 CONCEALING BIRTH.**

15.21 ~~Every~~ Any person who ~~shall endeavor~~ attempts to conceal the birth of a child by any  
 15.22 disposition of its dead body, ~~whether when~~ when the child died ~~before or~~ after its birth, shall be  
 15.23 guilty of a misdemeanor. ~~Every person who, having been convicted of endeavoring to~~  
 15.24 ~~conceal the stillbirth of any issue, or the death of any issue under the age of two years, shall,~~  
 15.25 ~~subsequent to that conviction, endeavor to conceal any subsequent birth or death, shall be~~  
 15.26 ~~punished by imprisonment for not more than five years.~~ This section does not apply to the  
 15.27 disposition of remains resulting from an abortion or miscarriage.

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

16.1 Sec. 14. Minnesota Statutes 2022, section 617.26, is amended to read:

16.2 **617.26 MAILING AND CARRYING OBSCENE MATTER.**

16.3 Every person who shall deposit or cause to be deposited in any post office in the state,  
 16.4 or place in charge of any express company or other common carrier or person for  
 16.5 transportation, any of the articles or things specified in section ~~617.201~~ or 617.241, or any  
 16.6 circular, book, pamphlet, advertisement or notice relating thereto, with the intent of having  
 16.7 the same conveyed by mail, express, or in any other manner; or who shall knowingly or  
 16.8 willfully receive the same with intent to carry or convey it, or shall knowingly carry or  
 16.9 convey the same by express, or in any other manner except by United States mail, shall be  
 16.10 guilty of a misdemeanor. The provisions of this section ~~and section 617.201~~ shall not be  
 16.11 construed to apply to an article or instrument used by physicians lawfully practicing, or by  
 16.12 their direction or prescription, for the cure or prevention of disease.

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

16.14 Sec. 15. **REPEALER.**

16.15 (a) Minnesota Statutes 2022, sections 62Q.145; 144.343, subdivisions 2, 3, 4, 5, 6, and  
 16.16 7; 145.1621; 145.411, subdivisions 2 and 4; 145.412; 145.413, subdivisions 2 and 3;  
 16.17 145.4131; 145.4132; 145.4133; 145.4134; 145.4135; 145.4136; 145.415; 145.416; 145.423;  
 16.18 145.4241; 145.4242; 145.4243; 145.4244; 145.4245; 145.4246; 145.4247; 145.4248;  
 16.19 145.4249; 145.925, subdivisions 2 and 4; 256B.011; 256B.40; 261.28; 393.07, subdivision  
 16.20 11; 609.293, subdivisions 1 and 5; 609.34; 609.36; 617.20; 617.201; 617.202; 617.21;  
 16.21 617.28; and 617.29, are repealed.

16.22 (b) Minnesota Rules, parts 4615.3600; and 9505.0235, are repealed.

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



No active language found for: 62Q.145

**144.343 PREGNANCY, VENEREAL DISEASE, ALCOHOL OR DRUG ABUSE, ABORTION.**

Subd. 2. **Notification concerning abortion.** Notwithstanding the provisions of section 13.02, subdivision 8, no abortion operation shall be performed upon an unemancipated minor or upon a woman for whom a guardian has been appointed pursuant to sections 524.5-101 to 524.5-502 because of a finding of incapacity, until at least 48 hours after written notice of the pending operation has been delivered in the manner specified in subdivisions 2 to 4.

(a) The notice shall be addressed to the parent at the usual place of abode of the parent and delivered personally to the parent by the physician or an agent.

(b) In lieu of the delivery required by paragraph (a), notice shall be made by certified mail addressed to the parent at the usual place of abode of the parent with return receipt requested and restricted delivery to the addressee which means postal employee can only deliver the mail to the authorized addressee. Time of delivery shall be deemed to occur at 12 o'clock noon on the next day on which regular mail delivery takes place, subsequent to mailing.

Subd. 3. **Parent, abortion; definitions.** (a) For purposes of this section, "parent" means both parents of the pregnant woman if they are both living, one parent of the pregnant woman if only one is living or if the second one cannot be located through reasonably diligent effort, or the guardian or conservator if the pregnant woman has one.

(b) For purposes of this section, "abortion" means the use of any means to terminate the pregnancy of a woman known to be pregnant with knowledge that the termination with those means will, with reasonable likelihood, cause the death of the fetus and "fetus" means any individual human organism from fertilization until birth.

Subd. 4. **Limitations.** No notice shall be required under this section if:

(1) the attending physician certifies in the pregnant woman's medical record that the abortion is necessary to prevent the woman's death and there is insufficient time to provide the required notice; or

(2) the abortion is authorized in writing by the person or persons who are entitled to notice; or

(3) the pregnant minor woman declares that she is a victim of sexual abuse, neglect, or physical abuse as defined in chapter 260E. Notice of that declaration shall be made to the proper authorities as provided in section 260E.06.

Subd. 5. **Penalty.** Performance of an abortion in violation of this section shall be a misdemeanor and shall be grounds for a civil action by a person wrongfully denied notification. A person shall not be held liable under this section if the person establishes by written evidence that the person relied upon evidence sufficient to convince a careful and prudent person that the representations of the pregnant woman regarding information necessary to comply with this section are bona fide and true, or if the person has attempted with reasonable diligence to deliver notice, but has been unable to do so.

Subd. 6. **Substitute notification provisions.** If subdivision 2 of this law is ever temporarily or permanently restrained or enjoined by judicial order, subdivision 2 shall be enforced as though the following paragraph were incorporated as paragraph (c) of that subdivision; provided, however, that if such temporary or permanent restraining order or injunction is ever stayed or dissolved, or otherwise ceases to have effect, subdivision 2 shall have full force and effect, without being modified by the addition of the following substitute paragraph which shall have no force or effect until or unless an injunction or restraining order is again in effect.

(c)(1) If such a pregnant woman elects not to allow the notification of one or both of her parents or guardian or conservator, any judge of a court of competent jurisdiction shall, upon petition, or motion, and after an appropriate hearing, authorize a physician to perform the abortion if said judge determines that the pregnant woman is mature and capable of giving informed consent to the proposed abortion. If said judge determines that the pregnant woman is not mature, or if the pregnant woman does not claim to be mature, the judge shall determine whether the performance of an abortion upon her without notification of her parents, guardian, or conservator would be in her best interests and shall authorize a physician to perform the abortion without such notification if said judge concludes that the pregnant woman's best interests would be served thereby.

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(2) Such a pregnant woman may participate in proceedings in the court on her own behalf, and the court may appoint a guardian ad litem for her. The court shall, however, advise her that she has a right to court appointed counsel, and shall, upon her request, provide her with such counsel.

(3) Proceedings in the court under this section shall be confidential and shall be given such precedence over other pending matters so that the court may reach a decision promptly and without delay so as to serve the best interests of the pregnant woman. A judge of the court who conducts proceedings under this section shall make in writing specific factual findings and legal conclusions supporting the decision and shall order a record of the evidence to be maintained including the judge's own findings and conclusions.

(4) An expedited confidential appeal shall be available to any such pregnant woman for whom the court denies an order authorizing an abortion without notification. An order authorizing an abortion without notification shall not be subject to appeal. No filing fees shall be required of any such pregnant woman at either the trial or the appellate level. Access to the trial court for the purposes of such a petition or motion, and access to the appellate courts for purposes of making an appeal from denial of the same, shall be afforded such a pregnant woman 24 hours a day, seven days a week.

Subd. 7. **Severability.** If any provision, word, phrase or clause of this section or the application thereof to any person or circumstance shall be held invalid, such invalidity shall not affect the provisions, words, phrases, clauses or application of this section which can be given effect without the invalid provision, word, phrase, clause, or application, and to this end the provisions, words, phrases, and clauses of this section are declared to be severable.

**145.1621 DISPOSITION OF ABORTED OR MISCARRIED FETUSES.**

Subdivision 1. **Purpose.** The purpose of this section is to protect the public health and welfare by providing for the dignified and sanitary disposition of the remains of aborted or miscarried human fetuses in a uniform manner and to declare violations of this section to be a public nuisance.

Subd. 2. **Definition; remains of a human fetus.** For the purposes of this section, the term "remains of a human fetus" means the remains of the dead offspring of a human being that has reached a stage of development so that there are cartilaginous structures, fetal or skeletal parts after an abortion or miscarriage, whether or not the remains have been obtained by induced, spontaneous, or accidental means.

Subd. 3. **Regulation of disposal.** Remains of a human fetus resulting from an abortion or miscarriage, induced or occurring accidentally or spontaneously at a hospital, clinic, or medical facility must be deposited or disposed of in this state only at the place and in the manner provided by this section or, if not possible, as directed by the commissioner of health.

Subd. 4. **Disposition; tests.** Hospitals, clinics, and medical facilities in which abortions are induced or occur spontaneously or accidentally and laboratories to which the remains of human fetuses are delivered must provide for the disposal of the remains by cremation, interment by burial, or in a manner directed by the commissioner of health. The hospital, clinic, medical facility, or laboratory may complete laboratory tests necessary for the health of the woman or her future offspring or for purposes of a criminal investigation or determination of parentage prior to disposing of the remains.

Subd. 5. **Violation; penalty.** Failure to comply with this section constitutes a public nuisance. A person, firm, or corporation failing to comply with this section is guilty of a misdemeanor.

Subd. 6. **Exclusions.** To comply with this section, a religious service or ceremony is not required as part of the disposition of the remains of a human fetus, and no discussion of the method of disposition is required with the woman obtaining an induced abortion.

**145.411 REGULATION OF ABORTIONS; DEFINITIONS.**

No active language found for: 145.411.2

No active language found for: 145.411.4

No active language found for: 145.412

No active language found for: 145.413.2

No active language found for: 145.413.3

**145.4131 RECORDING AND REPORTING ABORTION DATA.**

Subdivision 1. **Forms.** (a) Within 90 days of July 1, 1998, the commissioner shall prepare a reporting form for use by physicians or facilities performing abortions. A copy of this section shall be attached to the form. A physician or facility performing an abortion shall obtain a form from the commissioner.

(b) The form shall require the following information:

(1) the number of abortions performed by the physician in the previous calendar year, reported by month;

(2) the method used for each abortion;

(3) the approximate gestational age expressed in one of the following increments:

(i) less than nine weeks;

(ii) nine to ten weeks;

(iii) 11 to 12 weeks;

(iv) 13 to 15 weeks;

(v) 16 to 20 weeks;

(vi) 21 to 24 weeks;

(vii) 25 to 30 weeks;

(viii) 31 to 36 weeks; or

(ix) 37 weeks to term;

(4) the age of the woman at the time the abortion was performed;

(5) complications, if any, for each abortion and for the aftermath of each abortion. Space for a description of any complications shall be available on the form;

(6) the medical specialty of the physician performing the abortion; and

(7) if the abortion was performed via telehealth, the facility code for the patient and the facility code for the physician.

Subd. 2. **Submission.** A physician performing an abortion or a facility at which an abortion is performed shall complete and submit the form to the commissioner no later than September 30 for abortions performed in the previous calendar year. The annual report to the commissioner shall include the methods used to dispose of fetal tissue and remains.

Subd. 3. **Additional reporting.** Nothing in this section shall be construed to preclude the voluntary or required submission of other reports or forms regarding abortions.

No active language found for: 145.4132

No active language found for: 145.4133

**145.4134 COMMISSIONER'S PUBLIC REPORT.**

(a) By December 31 of each year, the commissioner shall issue a public report providing statistics for the previous calendar year compiled from the data submitted under sections 145.4131 to 145.4133 and sections 145.4241 to 145.4249. Each report shall provide the statistics for all previous calendar years, adjusted to reflect any additional information from late or corrected reports. The commissioner shall ensure that none of the information included in the public reports can reasonably lead to identification of an individual having performed or having had an abortion. All data included on the forms under section 145.4131 must be included in the public report, except that the commissioner shall maintain as confidential, data which alone or in combination may constitute information from which an individual having performed or having had an abortion may be identified using epidemiologic principles.

(b) The commissioner may, by rules adopted under chapter 14, alter the submission dates established under section 145.4131 for administrative convenience, fiscal savings, or other valid reason, provided that physicians or facilities submit the required information once each year and the commissioner issues a report once each year.

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No active language found for: 145.4135

No active language found for: 145.4136

No active language found for: 145.415

No active language found for: 145.416

**145.423 RECOGNITION OF INFANT WHO IS BORN ALIVE.**

Subdivision 1. **Recognition; care.** An infant who is born alive shall be fully recognized as a human person, and accorded immediate protection under the law. All reasonable measures consistent with good medical practice, including the compilation of appropriate medical records, shall be taken by the responsible medical personnel to care for the infant who is born alive.

No active language found for: 145.4241

No active language found for: 145.4242

No active language found for: 145.4243

No active language found for: 145.4244

No active language found for: 145.4245

No active language found for: 145.4246

No active language found for: 145.4247

No active language found for: 145.4248

No active language found for: 145.4249

**145.925 SEXUAL AND REPRODUCTIVE HEALTH SERVICES GRANTS.**

No active language found for: 145.925.2

Subd. 4. **Parental notification.** Except as provided in sections 144.341 and 144.342, any person employed to provide family planning services who is paid in whole or in part from funds provided under this section who advises an abortion or sterilization to any unemancipated minor shall, following such a recommendation, so notify the parent or guardian of the reasons for such an action.

No active language found for: 256B.011

No active language found for: 256B.40

No active language found for: 261.28

**393.07 POWERS AND DUTIES.**

No active language found for: 393.07.11

No active language found for: 609.293.1

No active language found for: 609.293.5

No active language found for: 609.34

No active language found for: 609.36

No active language found for: 617.20

No active language found for: 617.201

No active language found for: 617.202

No active language found for: 617.21

No active language found for: 617.28

No active language found for: 617.29

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**4615.3600** [Repealed, L 2023 c 70 art 4 s 113]

**9505.0235** [Repealed, L 2023 c 70 art 1 s 43]