I	HF2047	FIRST ENGROSSMENT	REVISOR	SGS		H2047-1
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	N	HOUSE (OF REPRESEN	TATIVI h. f	ES '. No.	2047
03/02/2017 03/13/2017 03/16/2017	The bill was read for the first time and referred to the Committee on Health and Human Services Reform 03/13/2017 Adoption of Report: Amended and re-referred to the Committee on Health and Human Services Finance					

05/10/2017	Adoption of Report. Placed on the General Register
	Read for the Second Time
05/10/2017	Calendar for the Day
	Read for the Third Time
	Passed by the House and transmitted to the Senate
05/17/2017	Passed by the Senate and returned to the House
	Presented to Governor
05/20/2017	Governor Approval

1.1	A bill for an act
1.2 1.3	relating to health; requiring the commissioner of health to develop a comprehensive strategic plan to end HIV/AIDS.
1.4	BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MINNESOTA:
1.5	Section 1. COMPREHENSIVE PLAN TO END HIV/AIDS.
1.6	(a) The commissioner of health, in coordination with the commissioner of human services,
1.7	and in consultation with community stakeholders, shall develop a strategic statewide
1.8	comprehensive plan that establishes a set of priorities and actions to address the state's HIV
1.9	epidemic by reducing the number of newly infected individuals; ensuring that individuals
1.10	living with HIV have access to quality, life-extending care regardless of race, gender, sexual
1.11	orientation, or socioeconomic circumstances; and ensuring the coordination of a statewide
1.12	response to reach the ultimate goal of the elimination of HIV in Minnesota. The
1.13	commissioner, after consulting with stakeholders, may implement this section utilizing
1.14	existing efforts. The commissioner must develop the plan using existing resources available
1.15	for this purpose.
1.16	(b) The plan must identify strategies that are consistent with the National HIV/AIDS
1.17	Strategy plan, that reflect the scientific developments in HIV medical care and prevention
1.18	that have occurred, and that work toward the elimination of HIV. The plan must:
1.19	(1) determine the appropriate level of testing, care, and services necessary to achieve
1.20	the goal of the elimination of HIV, beginning with meeting the following outcomes:
1.21	(i) reduce the number of new diagnoses by at least 75 percent;

1

	HF2047 FIRST ENGROSSMENT	REVISOR	SGS	H2047-1
2.1	(ii) increase the percentage of i	ndividuals living with	HIV who know the	eir serostatus to
2.2	at least 90 percent;			
2.3	(iii) increase the percentage of	individuals living with	HIV who are rece	iving HIV
2.4	treatment to at least 90 percent; an	nd		
2.5	(iv) increase the percentage of	individuals living with	HIV who are vira	lly suppressed
2.6	to at least 90 percent;			
2.7	(2) provide recommendations	for the optimal allocation	on and alignment o	f existing state
2.8	and federal funding in order to achi	eve the greatest impact a	and ensure a coordin	nated statewide
2.9	effort; and			
2.10	(3) provide recommendations	for evaluating new and	enhanced interven	tions and an
2.11	estimate of additional resources no	eeded to provide these	interventions.	
2.12	(c) The commissioner shall sub	omit the comprehensive	plan and recomme	endations to the
2.13	chairs and ranking minority memb	pers of the legislative co	ommittees with jur	isdiction over

2.14 <u>health and human services policy and finance by February 1, 2018.</u>