

State of Minnesota

H. F. No. **4194**

2.1 Sec. 2. **EARLY DENTAL DISEASE PREVENTION PILOT PROGRAM.**

2.2 (a) The commissioner of health shall develop and implement a pilot program to increase
2.3 awareness and encourage early preventive dental disease intervention for infants and toddlers.
2.4 The commissioner shall award grants to five designated communities of color or recent
2.5 immigrants to participate in the pilot program, with at least two designated communities
2.6 located in a nonmetropolitan dental health professional shortage area.

2.7 (b) The commissioner, in consultation with members of the designated communities,
2.8 shall distribute or cause to be distributed the educational materials and information developed
2.9 under Minnesota Statutes, section 144.061, to expectant and new parents within the
2.10 designated communities. The materials and information may be made available at locations
2.11 that include but are not limited to health care providers, community clinics, WIC sites, and
2.12 other relevant sites within the designated communities and may be distributed through a
2.13 variety of communicative means, including oral, visual, audio, and print.

2.14 (c) The commissioner shall work with members of each designated community to ensure
2.15 that the educational materials and information are distributed. The commissioner shall assist
2.16 the designated community with developing strategies, including outreach through ethnic
2.17 radio, webcasts, and local cable programs, and incentives geared toward the ethnic group
2.18 residing in the designated community to encourage and provide early preventive dental
2.19 disease intervention and care for infants and toddlers.

2.20 (d) The commissioner shall develop measurable outcomes, establish a baseline
2.21 measurement, and evaluate performance within each designated community in order to
2.22 measure whether the educational materials, information, strategies, and incentives increased
2.23 the numbers of infants and toddlers receiving early preventive dental disease intervention
2.24 and care.

2.25 (e) By March 15, 2020, the commissioner shall submit a report to the chairs and ranking
2.26 minority members of the legislative committees with jurisdiction over health care. The
2.27 report shall describe:

2.28 (1) the details of the program;

2.29 (2) the communities designated for the program;

2.30 (3) the strategies, including any incentives implemented;

2.31 (4) the outcome measures used; and

2.32 (5) the results of the evaluation for each designated community.

3.1 Sec. 3. **REPORT.**

3.2 By March 15, 2019, the commissioner of health shall submit a report to the chairs and
3.3 ranking minority members of the legislative committees with jurisdiction over health care,
3.4 describing the implementation plan of the statewide school-based dental sealant program
3.5 established under Minnesota Statutes, section 144.0615. The report must provide information
3.6 on the data tools developed, the outcome measures, the number of grants awarded, the
3.7 location of the schools participating in the grants, and the results of the evaluation of the
3.8 program in improving access to sealants for school-aged children in second and sixth grades.

3.9 Sec. 4. **APPROPRIATIONS.**

3.10 (a) \$..... in fiscal year 2019 is appropriated from the general fund to the commissioner
3.11 of health to implement the statewide school-based sealant grant program under Minnesota
3.12 Statutes, section 144.0615.

3.13 (b) \$..... in fiscal year 2019 is appropriated from the general fund to the commissioner
3.14 of health to implement the pilot program to increase awareness and encourage early
3.15 preventive dental disease intervention and care for infants and toddlers.