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State of Minnesota

HOUSE OF REPRESENTATIVES

A bill for an act

relating to health; providing for research on health disparities of African-born

NINETY-SECOND SESSION

H. F. No. 4531

03/23/2022	Authored by Hass:

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1.2

Authored by Hassan
The bill was read for the first time and referred to the Committee on Health Finance and Policy

1.3	immigrants; establishing a task force; appropriating money.
1.4	BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MINNESOTA:
1.5	Section 1. HEALTH DISPARITIES EXPERIENCED BY AFRICAN-BORN
1.6	IMMIGRANTS.
1.7	Subdivision 1. Grant. The commissioner of health shall issue a grant to an individual
1.8	or organization to conduct research on health disparities experienced by African-born
1.9	immigrants in Minnesota. The grant recipient must:
1.10	(1) conduct research to identify health disparities experienced by African-born immigrants
1.11	in Minnesota, the causes of those disparities, and barriers experienced by African-born
1.12	immigrants in accessing health care, using data that is public or publicly available and
1.13	disaggregating this data as necessary;
1.14	(2) evaluate existing state agency practices for collecting and disseminating data on
1.15	health disparities and recommend changes to these practices to allow the collection and
1.16	dissemination of data that is disaggregated into more specific racial or ethnic groups; and
1.17	(3) report on the research, evaluation, and recommendations to the commissioner and
1.18	to the task force established under subdivision 2.
1.19	Subd. 2. Task force. (a) The commissioner of health shall establish a task force to
1.20	provide input on the research conducted under subdivision 1, evaluate the results of the
1.21	research, and provide recommendations on further actions to take at the state and local levels
1.22	to address health disparities and barriers to accessing health care experienced by African-born

Section 1.

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2.1	immigrants. The task force must include individuals who are African-born immigrants living
2.2	in Minnesota, representatives of organizations that provide health services and social services
2.3	to African-born immigrants, individuals with knowledge of health disparities, individuals
2.4	with data expertise, and representatives of the Department of Health and the Department
2.5	of Human Services.
2.6	(b) Compensation and reimbursement for expenses for task force members shall be
2.7	governed by Minnesota Statutes, section 15.059, subdivision 6.
2.8	(c) The commissioner of health shall provide administrative support and meeting space
2.9	for the task force.
2.10	(d) Upon completion of the research under subdivision 1 and evaluation of the results,
2.11	the task force may provide a report to the commissioner of health and to the chairs and
2.12	ranking minority members of the legislative committees with jurisdiction over health care
2.13	and data practices:
2.14	(1) providing recommendations for changes to the collection of health data by state
2.15	agencies so that the data collected may be disaggregated to accurately measure health
2.16	disparities experienced by specific racial or ethnic groups in Minnesota; and
2.17	(2) based on the research conducted under subdivision 1, describing the health disparities
2.18	experienced by African-born immigrants in Minnesota, causes of the disparities, and barriers
2.19	to accessing health care, and providing recommendations to address the disparities and
2.20	barriers identified.
2.21	(e) The task force shall expire June 30, 2025.
2.22	Sec. 2. APPROPRIATION; HEALTH DISPARITIES EXPERIENCED BY
2.23	AFRICAN-BORN IMMIGRANTS.
2.24	\$ in fiscal year 2023 is appropriated from the general fund to the commissioner of
2.25	health for research on health disparities experienced by African-born immigrants and for
2.26	the task force on health disparities experienced by African-born immigrants. This
2.27	appropriation is available until June 30, 2025.

Sec. 2. 2