03/02/22 REVISOR DTT/MR 22-06839 as introduced

## SENATE STATE OF MINNESOTA NINETY-SECOND SESSION

A bill for an act

S.F. No. 4046

(SENATE AUTHORS: ROSEN and Lang)

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DATE D-PG OFFICIAL STATUS
03/16/2022 5363 Introduction and first reading

Referred to Health and Human Services Finance and Policy 03/23/2022 5576 Chief author stricken, shown as co-author Lang

25/20/22 25.5/6 Chief author stricken, snown Chief author added Rosen

relating to behavioral health; establishing the Task Force on Maternal Health and 1 2 Substance Use Disorder; requiring reports; appropriating money. 1.3 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MINNESOTA: 1.4 Section 1. TASK FORCE ON MATERNAL HEALTH AND SUBSTANCE USE 1.5 DISORDER. 1.6 Subdivision 1. Establishment. The Task Force on Maternal Health and Substance Use 1.7 Disorder is established to develop uniform standards for when a medical professional should 1.8 1.9 or must administer and report the results of a toxicology test for prenatal exposure to a controlled substance and to discuss and evaluate family-focused substance use disorder 1.10 treatment models. 1.11 Subd. 2. **Membership.** (a) The task force consists of the following members: 1.12 (1) two members of the senate, one appointed by the senate majority leader and one 1.13 appointed by the senate minority leader; 1.14 (2) two members of the house of representatives, one appointed by the speaker of the 1.15 house and one appointed by the house minority leader; 1.16 (3) a county attorney appointed by the Minnesota County Attorneys Association; 1.17 (4) a peace officer, as defined in Minnesota Statutes, section 626.84, subdivision 1, 1.18

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paragraph (c), appointed by the Minnesota Sheriffs' Association;

2.1	(5) a physician licensed in Minnesota to practice obstetrics and gynecology, who provides
2.2	care primarily to medical assistance enrollees, appointed by the American College of
2.3	Obstetricians and Gynecologists;
2.4	(6) a physician licensed in Minnesota to practice pediatrics or family medicine, who
2.5	provides care primarily to medical assistance enrollees, appointed by the Minnesota Medical
2.6	Association;
2.7	(7) two representatives of county social services agencies, one from a county outside
2.8	the seven-county metropolitan area and one from a county within the seven-county
2.9	metropolitan area, appointed by the Minnesota Association of County Social Service
2.10	Administrators;
2.11	(8) the commissioner of human services, or a designee;
2.12	(9) one representative from the Board of Social Work;
2.13	(10) two Tribal representatives, appointed by the Indian Child Welfare Advisory Council;
2.14	(11) two members who are African American and who have lived experience with the
2.15	child welfare system and substance use disorder, appointed by the Cultural and Ethnic
2.16	Communities Leadership Council;
2.17	(12) an attorney who represents parents or custodians in cases involving a child in need
2.18	of protection or services, appointed by the governor;
2.19	(13) two members who are licensed substance use disorder treatment providers, appointed
2.20	by the commissioner of human services; and
2.21	(14) two members representing hospitals, appointed by the Minnesota Hospital
2.22	Association.
2.23	(b) Appointments to the task force must be made by October 1, 2022.
2.24	(c) Member compensation and reimbursement for expenses are governed by Minnesota
2.25	Statutes, section 15.059, subdivision 3.
2.26	Subd. 3. Chairs; meetings. (a) The task force shall be cochaired by the task force member
2.27	from the majority party of the house of representatives and the task force member from the
2.28	majority party of the senate. The task force may elect other officers as necessary.
2.29	(b) The cochairpersons shall convene the first meeting of the task force no later than
2.30	October 15, 2022.

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(c) Task force meetings are subject to the Minnesota Open Meeting Law under Minnesota 3.1 Statutes, chapter 13D. 3.2 Subd. 4. Administrative support. The Legislative Coordinating Commission must 3.3 provide administrative support and meeting space for the task force. 3.4 3.5 Subd. 5. Duties; reports. (a) In the first year, the task force shall develop uniform standards for when a toxicology test for prenatal exposure to a controlled substance should 3.6 be administered to a new mother and a newborn infant. The task force must also develop 3.7 uniform standards for required reporting of prenatal exposure to a controlled substance to 3.8 local welfare agencies under Minnesota Statutes, chapter 260E. 3.9 (b) No later than December 1, 2023, the task force must submit a written report to the 3.10 chairs and ranking minority members of the legislative committees and divisions with 3.11 3.12 jurisdiction over human services on the task force's activities and recommendations on the standards developed under paragraph (a). 3.13 (c) In the second year, the task force shall study and evaluate culturally responsive, 3.14 financially sustainable, and effective substance use disorder treatment options that would 3.15 preserve families struggling with substance use disorder whose children are at risk of removal 3.16 from the parent's or custodian's home. The task force shall develop recommended content 3.17 for a request for proposals to establish pilot projects for providing family-centered substance 3.18 use disorder treatment in at least three counties, including one urban county, one suburban 3.19 county, and one rural county. 3.20 (d) No later than December 1, 2024, the task force must submit a written report to the 3.21 chairs and ranking minority members of the legislative committees and divisions with 3.22 jurisdiction over human services on the task force's activities and recommendations developed 3.23 under paragraph (c), including recommended funding for family-centered substance use 3.24 disorder treatment pilot projects and any legislation that may be necessary to establish the 3.25 pilot projects. 3.26 Subd. 6. Expiration. The task force shall expire upon submission of the report required 3.27 under subdivision 5, paragraph (d), or December 1, 2024, whichever is later. 3.28

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**EFFECTIVE DATE.** This section is effective July 1, 2022.

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## 4.1 Sec. 2. APPROPRIATION; TASK FORCE ON MATERNAL HEALTH AND

- 4.2 **SUBSTANCE USE DISORDER.**
- \$..... in fiscal year 2023 is appropriated from the general fund to the Legislative
- 4.4 Coordinating Commission for the Task Force on Maternal Health and Substance Use
- 4.5 Disorder. The base for this appropriation is \$0 in fiscal year 2025 and beyond.

Sec. 2. 4