ARTICLE 5

Section 1. Minnesota Statutes 2023 Supplement, section 10.65, subdivision 2, is amended to read:

Subd. 2. Definitions. As used in this section, the following terms have the meanings given:

(1) "agency" means the Department of Administration; Department of Agriculture; Department of Children, Youth, and Families; Department of Commerce; Department of Corrections; Department of Education; Department of Employment and Economic Development; Department of Health; Office of Higher Education; Housing Finance Agency; Department of Human Rights; Department of Human Services; Department of Information Technology Services; Department of Iron Range Resources and Rehabilitation; Department of Labor and Industry; Minnesota Management and Budget; Bureau of Mediation Services; Department of Military Affairs; Metropolitan Council; Department of Natural Resources; Pollution Control Agency; Department of Public Safety; Department of Revenue; Department of Transportation; Department of Veterans Affairs; Direct Care and Treatment; Gambling Control Board; Racing Commission; the Minnesota Lottery; the Animal Health Board; and the Board of Water and Soil Resources;

(2) "consultation" means the direct and interactive involvement of the Minnesota Tribal governments in the development of policy on matters that have Tribal implications. Consultation is the proactive, affirmative process of identifying and seeking input from appropriate Tribal governments and considering their interest as a necessary and integral part of the decision-making process. This definition adds to statutorily mandated notification procedures. During a consultation, the burden is on the agency to show that it has made a good faith effort to elicit feedback. Consultation is a formal engagement between agency officials and the governing body or bodies of an individual Minnesota Tribal government that the agency or an individual Tribal government may initiate. Formal meetings or communication between top agency officials and the governing body of a Minnesota Tribal government is a necessary element of consultation;

(3) "in-treats that have Tribal implications" means rules, legislative proposals, policy statements, or other actions that have substantial direct effects on one or more Minnesota Tribal governments, or on the distribution of power and responsibilities between the state and Minnesota Tribal governments;

(4) "Minnesota Tribal governments" means the federally recognized Indian Tribes located in Minnesota including: Bois Forte Band; Fond Du Lac Band; Grand Portage Band; Leech Lake Band; Mille Lacs Band; Red Earth Band; Red Lake Nation; Lower Sioux Indian Community; Prairie Island Indian Community; Shakopee Mdewakanton Sioux Community; and Upper Sioux Community; and

Department of Military Affairs; Metropolitan Council; Department of Natural Resources; Pollution Control Agency; Department of Public Safety; Department of Revenue; Department of Transportation; Department of Veterans Affairs; Direct Care and Treatment; Gambling Control Board; Racing Commission; the Minnesota Lottery; the Animal Health Board; and the Board of Water and Soil Resources;

(2) "consultation" means the direct and interactive involvement of the Minnesota Tribal governments in the development of policy on matters that have Tribal implications. Consultation is the proactive, affirmative process of identifying and seeking input from appropriate Tribal governments and considering their interest as a necessary and integral part of the decision-making process. This definition adds to statutorily mandated notification procedures. During a consultation, the burden is on the agency to show that it has made a good faith effort to elicit feedback. Consultation is a formal engagement between agency officials and the governing body or bodies of an individual Minnesota Tribal government that the agency or an individual Tribal government may initiate. Formal meetings or communication between top agency officials and the governing body of a Minnesota Tribal government is a necessary element of consultation;

(3) "in-treats that have Tribal implications" means rules, legislative proposals, policy statements, or other actions that have substantial direct effects on one or more Minnesota Tribal governments, or on the distribution of power and responsibilities between the state and Minnesota Tribal governments;

(4) "Minnesota Tribal governments" means the federally recognized Indian Tribes located in Minnesota including: Bois Forte Band; Fond Du Lac Band; Grand Portage Band; Leech Lake Band; Mille Lacs Band; White Earth Band; Red Lake Nation; Lower Sioux Indian Community; Prairie Island Indian Community; Shakopee Mdewakanton Sioux Community; and Upper Sioux Community; and

Definitions.
(5) "timely and meaningful" means done or occurring at a favorable or useful time that allows the result of consultation to be included in the agency's decision-making process for a matter that has Tribal implications.

**EFFECTIVE DATE.** This section is effective July 1, 2024.

Sec. 2. Minnesota Statutes 2022, section 13.46, subdivision 1, as amended by Laws 2024, chapter 79, article 9, section 1, and Laws 2024, chapter 80, article 8, section 1, is amended to read:

**Subdivision 1. Definitions.** As used in this section:

(a) "Individual" means an individual according to section 13.02, subdivision 8, but does not include a vendor of services.

(b) "Program" includes all programs for which authority is vested in a component of the welfare system according to statute or federal law, including but not limited to Native American Tribe programs that provide a service component of the welfare system, the Minnesota family investment program, medical assistance, general assistance, general assistance medical care formerly codified in chapter 256D, the child care assistance program, and child support collections.

(c) "Welfare system" includes the Department of Human Services; the Department of Direct Care and Treatment; the Department of Children, Youth, and Families; local social services agencies; county welfare agencies; county veteran services agencies; county housing agencies; private licensing agencies; the public authority responsible for child support enforcement; human services boards; community mental health center boards, state hospitals, state nursing homes, the ombudsman for mental health and developmental disabilities; Native American Tribes to the extent a Tribe provides a service component of the welfare system; and persons, agencies, institutions, organizations, and other entities under contract to any of the above agencies to the extent specified in the contract.

(d) "Mental health data" means data on individual clients and patients of community mental health centers, established under section 245.62, mental health divisions of counties and other providers under contract to deliver mental health services, Department of Direct Care and Treatment mental health services, or the ombudsman for mental health and developmental disabilities.

(e) "Fugitive felon" means a person who has been convicted of a felony and who has escaped from confinement or violated the terms of probation or parole for that offense.

(f) "Private licensing agency" means an agency licensed by the commissioner of children, youth, and families under chapter 142B to perform the duties under section 142B.30.

**EFFECTIVE DATE.** This section is effective July 1, 2024.
Sec. 3. Minnesota Statutes 2023 Supplement, section 13.46, subdivision 2, as amended

by Laws 2024, chapter 80, article 8, section 2, is amended to read:

Subd. 2. General. (a) Data on individuals collected, maintained, used, or disseminated by the welfare system are private data on individuals, and shall not be disclosed except:

(1) according to section 13.05;
(2) according to court order;
(3) according to a statute specifically authorizing access to the private data;
(4) to an agent of the welfare system and an investigator acting on behalf of a county, the state, or the federal government, including a law enforcement, person or attorney in the investigation or prosecution of a criminal, civil, or administrative proceeding relating to the administration of a program;
(5) to personnel of the welfare system who require the data to verify an individual's identity; determine eligibility, amount of assistance, and the need to provide services to an individual or family across programs; coordinate services for an individual or family;
(6) to administer federal funds or programs;
(7) between personnel of the welfare system in the same program;
(8) to the Department of Revenue to assess parental contribution amounts for purposes of section 252.27, subdivision 2a, administer and evaluate tax refund or tax credit programs and to identify individuals who may benefit from these programs, and prepare the databases for reports required under section 270C.13 and Laws 2008, chapter 366, article 17, section 6. The following information may be disclosed under this paragraph: an individual's and their dependent's names, dates of birth, Social Security or individual taxpayer identification numbers, income, addresses, and other data as required, upon request by the Department of Revenue. Disclosures by the commissioner of revenue to the commissioner of human services for the purposes described in this clause are governed by section 270B.14.

6. The following information may be disclosed under this paragraph: an individual's and their dependent's names, dates of birth, Social Security or individual taxpayer identification numbers, income, addresses, and other data as required, upon request by the Department of Revenue. Disclosures by the commissioner of revenue to the commissioner of human services for the purposes described in this clause are governed by section 270B.14.

70.13 (9) between the Department of Human Services; the Department of Employment and Economic Development; the Department of Children, Youth, and Families; Direct Care and Treatment; and, when applicable, the Department of Education, for the following purposes:

(i) to monitor the eligibility of the data subject for unemployment benefits, for any employment or training program administered, supervised, or certified by that agency;
(ii) to administer any rehabilitation program or child care assistance program, whether alone or in conjunction with the welfare system;

(iii) to monitor and evaluate the Minnesota family investment program or the child care assistance program by exchanging data on recipients and former recipients of Supplemental Nutrition Assistance Program (SNAP) benefits, cash assistance under chapter 256, 256D, 256J, or 256K, child care assistance under chapter 19B, medical programs under chapter 256B or 256L; and

(iv) to analyze public assistance employment services and program utilization, cost, effectiveness, and outcomes as implemented under the authority established in Title II, Sections 201-204 of the Ticket to Work and Work Incentives Improvement Act of 1999.

Health records governed by sections 144.291 to 144.298 and "protected health information" as defined in Code of Federal Regulations, title 45, parts 160-164, including health care claims utilization information, must not be exchanged under this clause;

(10) to appropriate parties in connection with an emergency if knowledge of the information is necessary to protect the health or safety of the individual or other individuals or persons;

(11) data maintained by residential programs as defined in section 245A.02 may be disclosed to the protection and advocacy system established in this state according to Part C of Public Law 98-527 to protect the legal and human rights of persons with developmental disabilities or other related conditions who live in residential facilities for these persons if the protection and advocacy system receives a complaint by or on behalf of that person and the person does not have a legal guardian or the state or a designee of the state is the legal guardian of the person;

(12) to the county medical examiner or the county coroner for identifying or locating relatives or friends of a deceased person;

(13) data on a child support obligor who makes payments to the public agency may be disclosed to the Minnesota Office of Higher Education to the extent necessary to determine eligibility under section 136A.121, subdivision 2, clause (5);

(14) participant Social Security or individual taxpayer identification numbers and names collected by the telephone assistance program may be disclosed to the Department of Revenue to conduct an electronic data match with the property tax refund database to determine eligibility under section 237.70, subdivision 4a;

(15) the current address of a Minnesota family investment program participant may be disclosed to law enforcement officers who provide the name of the participant and notify the agency that:

(i) the participant:

(ii) to administer any rehabilitation program or child care assistance program, whether alone or in conjunction with the welfare system;

(iii) to monitor and evaluate the Minnesota family investment program or the child care assistance program by exchanging data on recipients and former recipients of Supplemental Nutrition Assistance Program (SNAP) benefits, cash assistance under chapter 256, 256D, 256J, or 256K, child care assistance under chapter 19B, medical programs under chapter 256B or 256L; and

(iv) to analyze public assistance employment services and program utilization, cost, effectiveness, and outcomes as implemented under the authority established in Title II, Sections 201-204 of the Ticket to Work and Work Incentives Improvement Act of 1999.

Health records governed by sections 144.291 to 144.298 and "protected health information" as defined in Code of Federal Regulations, title 45, parts 160-164, including health care claims utilization information, must not be exchanged under this clause;

(10) to appropriate parties in connection with an emergency if knowledge of the information is necessary to protect the health or safety of the individual or other individuals or persons;

(11) data maintained by residential programs as defined in section 245A.02 may be disclosed to the protection and advocacy system established in this state according to Part C of Public Law 98-527 to protect the legal and human rights of persons with developmental disabilities or other related conditions who live in residential facilities for these persons if the protection and advocacy system receives a complaint by or on behalf of that person and the person does not have a legal guardian or the state or a designee of the state is the legal guardian of the person;

(12) to the county medical examiner or the county coroner for identifying or locating relatives or friends of a deceased person;

(13) data on a child support obligor who makes payments to the public agency may be disclosed to the Minnesota Office of Higher Education to the extent necessary to determine eligibility under section 136A.121, subdivision 2, clause (5);

(14) participant Social Security or individual taxpayer identification numbers and names collected by the telephone assistance program may be disclosed to the Department of Revenue to conduct an electronic data match with the property tax refund database to determine eligibility under section 237.70, subdivision 4a;

(15) the current address of a Minnesota family investment program participant may be disclosed to law enforcement officers who provide the name of the participant and notify the agency that:

(i) the participant:
(A) is a fugitive felon fleeing to avoid prosecution, or custody or confinement after conviction, for a crime or attempt to commit a crime that is a felony under the laws of the jurisdiction from which the individual is fleeing; or

(B) is violating a condition of probation or parole imposed under state or federal law;

(ii) the location or apprehension of the felon is within the law enforcement officer's official duties; and

(iii) the request is made in writing and in the proper exercise of those duties;

(16) the current address of a recipient of general assistance may be disclosed to probation officers and corrections agents who are supervising the recipient and to law enforcement officers who are investigating the recipient in connection with a felony level offense;

(ii) locating or apprehending the member is within the officer's official duties; and

(iii) the request is made in writing and in the proper exercise of those duties;

(17) information obtained from a SNAP applicant or recipient households may be disclosed to local, state, or federal law enforcement officials, upon their written request, for the purpose of investigating an alleged violation of the Food and Nutrition Act, according to Code of Federal Regulations, title 7, section 272.1(c);

(18) the address, Social Security or individual taxpayer identification number, and, if available, photograph of any member of a household receiving SNAP benefits shall be made available, on request, to a local, state, or federal law enforcement officer if the officer furnishes the agency with the name of the member and notifies the agency that:

(i) the member:

(A) is fleeing to avoid prosecution, or custody or confinement after conviction, for a crime or attempt to commit a crime that is a felony in the jurisdiction the member is fleeing;

(B) is violating a condition of probation or parole imposed under state or federal law;

or

(C) has information that is necessary for the officer to conduct an official duty related to conduct described in subitem (A) or (B);

(ii) locating or apprehending the member is within the officer's official duties; and

(iii) the request is made in writing and in the proper exercise of the officer's official duty;

(19) the current address of a recipient of Minnesota family investment program, general assistance, or SNAP benefits may be disclosed to law enforcement officers who, in writing, provide the name of the recipient and notify the agency that the recipient is a person required to register under section 243.166, but is not residing at the address at which the recipient is registered under section 243.166;

(ii) locating or apprehending the member is within the officer's official duties; and

(iii) the request is made in writing and in the proper exercise of the officer's official duty;

(20) certain information regarding child support obligors who are in arrears may be made public according to section 518A.74;
(21) data on child support payments made by a child support obligor and data on the
distribution of those payments excluding identifying information on obligees may be
disclosed to all obligees to whom the obligor owes support, and data on the enforcement
actions undertaken by the public authority, the status of those actions, and data on the income
of the obligor or obligee may be disclosed to the other party;

(22) data in the work reporting system may be disclosed under section 256.998,
subdivision 7;

(23) to the Department of Education for the purpose of matching Department of Education
student data with public assistance data to determine students eligible for free and
reduced-price meals, meal supplements, and free milk according to United States Code,
title 42, sections 1758, 1761, 1766, 176aa, 1772, and 1773; to allocate federal and state
funds that are distributed based on income of the student's family; and to verify receipt of
energy assistance for the telephone assistance plan;

(24) the current address and telephone number of program recipients and emergency
contacts may be released to the commissioner of health or a community health board as
defined in section 145A.02, subdivision 5, when the commissioner or community health
board has reason to believe that a program recipient is a disease case, carrier, suspect case,
or at risk of illness, and the data are necessary to locate the person;

(25) to other state agencies, statewide systems, and political subdivisions of this state,
including the attorney general, and agencies of other states, interstate information networks,
federal agencies, and other entities as required by federal regulation or law for the
administration of the child support enforcement program;

(26) to personnel of public assistance programs as defined in section 256.741, for access
to the child support system database for the purpose of administration, including monitoring
and evaluation of those public assistance programs;

(27) to monitor and evaluate the Minnesota family investment program by exchanging
data between the Departments of Human Services; Children, Youth, and Families; and
Education, on recipients and former recipients of SNAP benefits, cash assistance under
chapter 256, 256D, 256D, or 256K, child care assistance under chapter 119B, medical
programs under chapter 256B or 256L, or a medical program formerly codified under chapter
256D;

(28) to evaluate child support program performance and to identify and prevent fraud
in the child support program by exchanging data between the Department of Human Services;
Department of Children, Youth, and Families; Department of Revenue under section 270B.14,
subdivision 1, paragraphs (a) and (b), without regard to the limitation of use in paragraph
(c), Department of Health; Department of Employment and Economic Development; and
other state agencies as is reasonably necessary to perform these functions;

(21) data on child support payments made by a child support obligor and data on the
distribution of those payments excluding identifying information on obligees may be
disclosed to all obligees to whom the obligor owes support, and data on the enforcement
actions undertaken by the public authority, the status of those actions, and data on the income
of the obligor or obligee may be disclosed to the other party;

(22) data in the work reporting system may be disclosed under section 256.998,
subdivision 7;

(23) to the Department of Education for the purpose of matching Department of Education
student data with public assistance data to determine students eligible for free and
reduced-price meals, meal supplements, and free milk according to United States Code,
title 42, sections 1758, 1761, 1766, 176aa, 1772, and 1773; to allocate federal and state
funds that are distributed based on income of the student's family; and to verify receipt of
energy assistance for the telephone assistance plan;

(24) the current address and telephone number of program recipients and emergency
contacts may be released to the commissioner of health or a community health board as
defined in section 145A.02, subdivision 5, when the commissioner or community health
board has reason to believe that a program recipient is a disease case, carrier, suspect case,
or at risk of illness, and the data are necessary to locate the person;

(25) to other state agencies, statewide systems, and political subdivisions of this state,
including the attorney general, and agencies of other states, interstate information networks,
federal agencies, and other entities as required by federal regulation or law for the
administration of the child support enforcement program;

(26) to personnel of public assistance programs as defined in section 256.741, for access
to the child support system database for the purpose of administration, including monitoring
and evaluation of those public assistance programs;

(27) to monitor and evaluate the Minnesota family investment program by exchanging
data between the Departments of Human Services; Children, Youth, and Families; and
Education, on recipients and former recipients of SNAP benefits, cash assistance under
chapter 256, 256D, 256D, or 256K, child care assistance under chapter 119B, medical
programs under chapter 256B or 256L, or a medical program formerly codified under chapter
256D;

(28) to evaluate child support program performance and to identify and prevent fraud
in the child support program by exchanging data between the Department of Human Services;
Department of Children, Youth, and Families; Department of Revenue under section 270B.14,
subdivision 1, paragraphs (a) and (b), without regard to the limitation of use in paragraph
(c), Department of Health; Department of Employment and Economic Development; and
other state agencies as is reasonably necessary to perform these functions;
(29) counties and the Department of Children, Youth, and Families operating child care
73.25 assistance programs under chapter 119B may disseminate data on program participants,
73.26 applicants, and providers to the commissioner of education;
73.27
(30) child support data on the child, the parents, and relatives of the child may be
73.28 disclosed to agencies administering programs under titles IV-B and IV-E of the Social
73.29 Security Act, as authorized by federal law;
73.30
(31) to a health care provider governed by sections 144.291 to 144.298, to the extent
73.31 necessary to coordinate services;
73.32
(32) to the chief administrative officer of a school to coordinate services for a student
73.4 and family; data that may be disclosed under this clause are limited to name, date of birth,
73.3 gender, and address;
73.4
(33) to county correctional agencies to the extent necessary to coordinate services and
73.34 diversion programs; data that may be disclosed under this clause are limited to name, client
73.3 demographics, program, case status, and county worker information; or
73.4
(34) between the Department of Human Services and the Metropolitan Council for the
73.5 following purposes:
73.6
(i) to coordinate special transportation service provided under section 473.386 with
73.7 services for people with disabilities and elderly individuals funded by or through the
73.8 Department of Human Services; and
73.9
(ii) to provide for reimbursement of special transportation service provided under section
73.10 473.386.
73.11
The data that may be shared under this clause are limited to the individual's first, last, and
73.12 middle names; date of birth; residential address; and program eligibility status with expiration
73.13 date for the purposes of informing the other party of program eligibility.
73.14
(b) Information on persons who have been treated for substance use disorder may only
73.15 be disclosed according to the requirements of Code of Federal Regulations, title 42, sections
73.16 2.1 to 2.67.
73.17
(c) Data provided to law enforcement agencies under paragraph (a), clause (15), (16),
73.18 (17), or (18), or paragraph (b), are investigative data and are confidential or protected
73.19 nonpublic while the investigation is active. The data are private after the investigation
73.20 becomes inactive under section 13.82, subdivision 7, clause (a) or (b).
73.21
(d) Mental health data shall be treated as provided in subdivisions 7, 8, and 9, but are
73.22 not subject to the access provisions of subdivision 10, paragraph (b).
73.23 For the purposes of this subdivision, a request will be deemed to be made in writing if
73.24 made through a computer interface system.
73.25
(29) counties and the Department of Children, Youth, and Families operating child care
78.9 assistance programs under chapter 119B may disseminate data on program participants,
78.10 applicants, and providers to the commissioner of education;
78.11
(30) child support data on the child, the parents, and relatives of the child may be
78.12 disclosed to agencies administering programs under titles IV-B and IV-E of the Social
78.13 Security Act, as authorized by federal law;
78.14
(31) to a health care provider governed by sections 144.291 to 144.298, to the extent
78.16 necessary to coordinate services;
78.17
(32) to the chief administrative officer of a school to coordinate services for a student
78.18 and family; data that may be disclosed under this clause are limited to name, date of birth,
78.19 gender, and address;
78.20
(33) to county correctional agencies to the extent necessary to coordinate services and
78.21 diversion programs; data that may be disclosed under this clause are limited to name, client
78.22 demographics, program, case status, and county worker information; or
78.23
(34) between the Department of Human Services and the Metropolitan Council for the
78.24 following purposes:
78.25
(i) to coordinate special transportation service provided under section 473.386 with
78.26 services for people with disabilities and elderly individuals funded by or through the
78.27 Department of Human Services; and
78.28
(ii) to provide for reimbursement of special transportation service provided under section
78.29 473.386.
78.30
The data that may be shared under this clause are limited to the individual's first, last, and
78.31 middle names; date of birth; residential address; and program eligibility status with expiration
78.32 date for the purposes of informing the other party of program eligibility.
78.33
(b) Information on persons who have been treated for substance use disorder may only
78.34 be disclosed according to the requirements of Code of Federal Regulations, title 42, sections
78.35 2.1 to 2.67.
78.36
(c) Data provided to law enforcement agencies under paragraph (a), clause (15), (16),
78.37 (17), or (18), or paragraph (b), are investigative data and are confidential or protected
78.38 nonpublic while the investigation is active. The data are private after the investigation
78.39 becomes inactive under section 13.82, subdivision 7, clause (a) or (b).
78.40
(d) Mental health data shall be treated as provided in subdivisions 7, 8, and 9, but are
78.41 not subject to the access provisions of subdivision 10, paragraph (b).
78.42 For the purposes of this subdivision, a request will be deemed to be made in writing if
78.43 made through a computer interface system.
EFFECTIVE DATE, This section is effective July 1, 2024.

Sec. 4. Minnesota Statutes 2022, section 13.46, subdivision 10, as amended by Laws 2024, chapter 79, article 9, section 2, is amended to read:

Subd. 10. Responsible authority. (a) Notwithstanding any other provision of this chapter to the contrary, the responsible authority for each component of the welfare system listed in subdivision 1, clause (c), shall be as follows:

(1) the responsible authority for the Department of Human Services is the commissioner of human services;

(2) the responsible authority of a county welfare agency is the director of the county welfare agency;

(3) the responsible authority for a local social services agency, human services board, or community mental health center board is the chair of the board;

(4) the responsible authority of any person, agency, institution, organization, or other entity under contract to any of the components of the welfare system listed in subdivision 1, clause (c), is the person specified in the contract;

(5) the responsible authority of the public authority for child support enforcement is the head of the public authority for child support enforcement;

(6) the responsible authority for county veteran services is the county veterans service officer pursuant to section 197.603, subdivision 2; and

(7) the responsible authority for the Department of Direct Care and Treatment is the chief executive officer of Direct Care and Treatment executive board.

(b) A responsible authority shall allow another responsible authority in the welfare system access to data classified as not public data when access is necessary for the administration and management of programs, or as authorized or required by statute or federal law.

EFFECTIVE DATE, This section is effective July 1, 2024.

Sec. 5. Minnesota Statutes 2023 Supplement, section 15.01, is amended to read:

15.01 DEPARTMENTS OF THE STATE.

The following agencies are designated as the departments of the state government: the Department of Administration; the Department of Agriculture; the Department of Children, Youth, and Families; the Department of Commerce; the Department of Corrections; the Department of Direct Care and Treatment; the Department of Education; the Department of Employment and Economic Development; the Department of Health; the Department of Human Rights; the Department of Human Services; the Department of Information Technology Services; the Department of Iron Range Resources and Rehabilitation; the Department of Administration; the Department of Agriculture; the Department of Children, Youth, and Families; the Department of Commerce; the Department of Corrections; the Department of Direct Care and Treatment; the Department of Education; the Department of Employment and Economic Development; the Department of Health; the Department of Human Rights; the Department of Human Services; the Department of Information Technology Services; the Department of Iron Range Resources and Rehabilitation; the Department of Administration; the Department of Agriculture; the Department of Children, Youth, and Families; the Department of Commerce; the Department of Corrections; the Department of Direct Care and Treatment; the Department of Education; the Department of Employment and Economic Development; the Department of Health; the Department of Human Rights; the Department of Human Services; the Department of Information Technology Services; the Department of Iron Range Resources and Rehabilitation; the Department of Administration; the Department of Agriculture; the Department of Children, Youth, and Families; the Department of Commerce; the Department of Corrections; the Department of Direct Care and Treatment; the Department of Education; the Department of Employment and Economic Development; the Department of Health; the Department of Human Rights; the Department of Human Services; the Department of Information Technology Services; the Department of Iron Range Resources and Rehabilitation; the Department of Administration; the Department of Agriculture; the Department of Children, Youth, and Families; the Department of Commerce; the Department of Corrections; the Department of Direct Care and Treatment; the Department of Education; the Department of Employment and Economic Development; the Department of Health; the Department of Human Rights; the Department of Human Services; the Department of Information Technology Services; the Department of Iron Range Resources and Rehabilitation; the Department of Administration; the Department of Agriculture; the Department of Children, Youth, and Families; the Department of Commerce; the Department of Corrections; the Department of Direct Care and Treatment; the Department of Education; the Department of Employment and Economic Development; the Department of Health; the Department of Human Rights; the Department of Human Services; the Department of Information Technology Services; the Department of Iron Range Resources and Rehabilitation; the Department of Administration; the Department of Agriculture; the Department of Children, Youth, and Families; the Department of Commerce; the Department of Corrections; the Department of Direct Care and Treatment; the Department of Education; the Department of Employment and Economic Development; the Department of Health; the Department of Human Rights; the Department of Human Services; the Department of Information Technology Services; the Department of Iron Range Resources and Rehabilitation; the Department of Administration; the Department of Agriculture; the Department of Children, Youth, and Families; the Department of Commerce; the Department of Corrections; the Department of Direct Care and Treatment; the Department of Education; the Department of Employment and Economic Development; the Department of Health; the Department of Human Rights; the Department of Human Services; the Department of Information Technology Services; the Department of Iron Range Resources and Rehabilitation; the Department of Administration; the Department of Agriculture; the Department of Children, Youth, and Families; the Department of Commerce; the Department of Corrections; the Department of Direct Care and Treatment; the Department of Education; the Department of Employment and Economic Development; the Department of Health; the Department of Human Rights; the Department of Human Services; the Department of Information Technology Services; the Department of Iron Range Resources and Rehabilitation; the Department of Administration; the Department of Agriculture; the Department of Children, Youth, and Families; the Department of Commerce; the Department of Corrections; the Department of Direct Care and Treatment; the Department of Education; the Department of Employment and Economic Development; the Department of Health; the Department of Human Rights; the Department of Human Services; the Department of Information Technology Services; the Department of Iron Range Resources and Rehabilitation; the Department of Administration; the Department of Agriculture; the Department of Children, Youth, and Families; the Department of Commerce; the Department of Corrections; the Department of Direct Care and Treatment; the Department of Education; the Department of Employment and Economic Development; the Department of Health; the Department of Human Rights; the Department of Human Services; the Department of Information Technology Services; the Department of Iron Range Resources and Rehabilitation; the Department of Administration; the Department of Agriculture; the Department of Children, Youth, and Families; the Department of Commerce; the Department of Corrections; the Department of Direct Care and Treatment; the Department of Education; the Department of Employment and Economic Development; the Department of Health; the Department of Human Rights; the Department of Human Services; the Department of Information Technology Services; the Department of Iron Range Resources and Rehabilitation; the
Department of Labor and Industry; the Department of Management and Budget; the
Department of Military Affairs; the Department of Natural Resources; the Department of
Public Safety; the Department of Revenue; the Department of Transportation; the Department
of Veterans Affairs; and their successor departments.

**EFFECTIVE DATE:** This section is effective July 1, 2024.

Sec. 6. Minnesota Statutes 2023 Supplement, section 15.06, subdivision 1, is amended to
read:

Subdivision 1. **Applicability.** This section applies to the following departments or
agencies: the Departments of Administration; Agriculture; Children, Youth, and Families;
Commerce; Corrections; Direct Care and Treatment; Education; Employment and Economic
Development; Health; Human Rights; Human Services; Labor and Industry; Management
and Budget; Natural Resources; Public Safety; Revenue; Transportation; and Veterans
Affairs; the Housing Finance and Pollution Control Agencies; the Office of Commissioner
of Iron Range Resources and Rehabilitation; the Department of Information Technology
Services; the Bureau of Mediation Services; and their successor departments and agencies.

The heads of the foregoing departments or agencies are "commissioners."

**EFFECTIVE DATE:** This section is effective July 1, 2024.

Sec. 7. Minnesota Statutes 2023 Supplement, section 15A.0815, subdivision 2, is amended
to read:

Subd. 2. **Agency head salaries.** The salary for a position listed in this subdivision shall
be determined by the Compensation Council under section 15A.082. The commissioner of
management and budget must publish the salaries on the department's website. This
subdivision applies to the following positions:

- Commissioner of administration;
- Commissioner of agriculture;
- Commissioner of education;
- Commissioner of children, youth, and families;
- Commissioner of commerce;
- Commissioner of corrections;
- Commissioner of health;
- Commissioner, Minnesota Office of Higher Education;
- Commissioner, Minnesota IT Services;
- Commissioner, Housing Finance Agency;
- Commissioner of human rights;
Commissioner of human services;
Commissioner of labor and industry;
Commissioner of management and budget;
Commissioner of natural resources;
Commissioner, Pollution Control Agency;
Commissioner of public safety;
Commissioner of revenue;
Commissioner of employment and economic development;
Commissioner of transportation;
Commissioner of veterans affairs;
Executive director of the Gambling Control Board;
Executive director of the Minnesota State Lottery;
Commissioner of Iron Range resources and rehabilitation;
Commissioner, Bureau of Mediation Services;
Ombudsman for mental health and developmental disabilities;
Ombudsperson for corrections;
Chair, Metropolitan Council;
Chair, Metropolitan Airports Commission;
School trust lands director;
Executive director of pari-mutuel racing; and
Commissioner, Public Utilities Commission; and
Chief Executive Officer, Direct Care and Treatment.

Sec. 8. Minnesota Statutes 2023 Supplement, section 15A.082, subdivision 1, is amended to read:

Subdivision 1. Creation. A Compensation Council is created each odd-numbered year to establish the compensation of constitutional officers and the heads of state and metropolitan agencies identified in section 15A.0815, and to assist the legislature in establishing the compensation of justices of the supreme court and judges of the court of appeals and district court, and to determine the daily compensation for voting members of the Direct Care and Treatment executive board.
Sec. 8. Minnesota Statutes 2023 Supplement, section 15A.082, subdivision 3, is amended to read:

Subd. 3. Submission of recommendations and determination. (a) By April 1 in each odd-numbered year, the Compensation Council shall submit to the speaker of the house and the president of the senate salary recommendations for justices of the supreme court, and judges of the court of appeals and district court. The recommended salaries take effect on July 1 of that year and July 1 of the subsequent even-numbered year and at whatever interval the council recommends thereafter, unless the legislature by law provides otherwise. The salary recommendations take effect if an appropriation of money to pay the recommended salaries is enacted after the recommendations are submitted and before their effective date. Recommendations may be expressly modified or rejected.

(b) By April 1 in each odd-numbered year, the Compensation Council must prescribe salaries for constitutional officers, and for the agency and metropolitan agency heads identified in section 15A.0815. The prescribed salary for each office must take effect July 1 of that year and July 1 of the subsequent even-numbered year and at whatever interval the council determines thereafter, unless the legislature by law provides otherwise. An appropriation by the legislature to fund the relevant office, branch, or agency of an amount sufficient to pay the salaries prescribed by the council constitutes a prescription by law as provided in the Minnesota Constitution, article V, sections 4 and 5.

(c) By April 1 in each odd-numbered year, the Compensation Council must prescribe the recommended daily compensation for voting members of the Direct Care and Treatment executive board. The recommended daily compensation takes effect on July 1 of that year and July 1 of the subsequent even-numbered year and at whatever interval the council recommends thereafter, unless the legislature by law provides otherwise.

Sec. 9. Minnesota Statutes 2023 Supplement, section 15A.082, subdivision 7, is amended to read:

Subd. 7. No ex parte communications. Members may not have any communication with a constitutional officer, a head of a state agency, a member of the judiciary, or a member of the Direct Care and Treatment executive board during the period after the first meeting is convened under this section and the date the prescribed and recommended salaries and daily compensation are submitted under subdivision 3.

Sec. 10. Minnesota Statutes 2023 Supplement, section 15A.082, subdivision 7, is amended to read:

Subdivision 1. Unclassified positions. Unclassified positions are held by employees who are:

1. chosen by election or appointed to fill an elective office;

Sec. 10. Minnesota Statutes 2023 Supplement, section 43A.08, subdivision 1, is amended to read:

Subdivision 1. Unclassified positions. Unclassified positions are held by employees who are:

1. chosen by election or appointed to fill an elective office;
(2) heads of agencies required by law to be appointed by the governor or other elective
officers, and the executive or administrative heads of departments, bureaus, divisions, and
institutions specifically established by law in the unclassified service;
(3) deputy and assistant agency heads and one confidential secretary in the agencies
listed in subdivision 1a;
(4) the confidential secretary to each of the elective officers of this state and, for the
secretary of state and state auditor, an additional deputy, clerk, or employee;
(5) intermittent help employed by the commissioner of public safety to assist in the
issuance of vehicle licenses;
(6) employees in the offices of the governor and of the lieutenant governor and one
confidential employee for the governor in the Office of the Adjutant General;
(7) employees of the Washington, D.C., office of the state of Minnesota;
(8) employees of the legislature and of legislative committees or commissions; provided
that employees of the Legislative Audit Commission, except for the legislative auditor, the
deputy legislative auditors, and their confidential secretaries, shall be employees in the
classified service;
(9) presidents, vice-presidents, deans, other managers and professionals in academic
and academic support programs, administrative or service faculty, teachers, research
assistants, and student employees eligible under terms of the federal Economic Opportunity
Act work study program in the Perpich Center for Arts Education and the Minnesota State
Colleges and Universities, but not the custodial, clerical, or maintenance employees, or any
professional or managerial employee performing duties in connection with the business
administration of these institutions;
(10) officers and enlisted persons in the National Guard;
(11) attorneys, legal assistants, and three confidential employees appointed by the attorney
genral or employed with the attorney general's authorization;
(12) judges and all employees of the judicial branch, referees, receivers, jurors, and
notaries public, except referees and adjusters employed by the Department of Labor and
Industry;
(13) members of the State Patrol; provided that selection and appointment of State Patrol
troopers must be made in accordance with applicable laws governing the classified service;
(14) examination monitors and intermittent training instructors employed by the
Departments of Management and Budget and Commerce and by professional examining
boards and intermittent staff employed by the technical colleges for the administration of
practical skills tests and for the staging of instructional demonstrations;
(15) student workers;
executive directors or executive secretaries appointed by and reporting to any

policy-making board or commission established by statute;

employees unclassified pursuant to other statutory authority;

intermittent help employed by the commissioner of agriculture to perform duties

relating to pesticides, fertilizer, and seed regulation; and

the administrators and the deputy administrators at the State Academies for the

Deaf and the Blind; and

EFFECTIVE DATE. This section is effective July 1, 2025.

Sec. 12. Minnesota Statutes 2023 Supplement, section 43A.08, subdivision 1a, is amended
to read:

Subd. 1a. Additional unclassified positions. Appointing authorities for the following

agencies may designate additional unclassified positions according to this subdivision: the

Departments of Administration; Agriculture; Children, Youth, and Families; Commerce;

Corrections; Direct Care and Treatment; Education; Employment and Economic

Development; Explore Minnesota Tourism; Management and Budget; Health; Human

Rights; Human Services; Labor and Industry; Natural Resources; Public Safety; Revenue;

Transportation; and Veterans Affairs; the Housing Finance and Pollution Control Agencies;

the State Lottery; the State Board of Investment; the Office of Administrative Hearings; the

Department of Information Technology Services; the Offices of the Attorney General,

Secretary of State, and State Auditor; the Minnesota State Colleges and Universities; the

Minnesota Office of Higher Education; the Perpich Center for Arts Education; Direct Care

and Treatment; and the Minnesota Zoological Board.

A position designated by an appointing authority according to this subdivision must
meet the following standards and criteria:

(1) the designation of the position would not be contrary to other law relating specifically
to that agency;

(2) the person occupying the position would report directly to the agency head or deputy
agency head and would be designated as part of the agency head's management team;

(3) the duties of the position would involve significant discretion and substantial
involvement in the development, interpretation, and implementation of agency policy;

(4) the duties of the position would not require primarily personnel, accounting, or other
technical expertise where continuity in the position would be important;

A position designated by an appointing authority according to this subdivision must
meet the following standards and criteria:

(1) the designation of the position would not be contrary to other law relating specifically
to that agency;

(2) the person occupying the position would report directly to the agency head or deputy
agency head and would be designated as part of the agency head's management team;

(3) the duties of the position would involve significant discretion and substantial
involvement in the development, interpretation, and implementation of agency policy;

(4) the duties of the position would not require primarily personnel, accounting, or other
technical expertise where continuity in the position would be important;
there would be a need for the person occupying the position to be accountable to, loyal to, and compatible with, the governor and the agency head, the employing statutory board or commission, or the employing constitutional officer; and

the position would be at the level of division or bureau director or assistant to the agency head; and

the commissioner has approved the designation as being consistent with the standards and criteria in this subdivision.

EFFECTIVE DATE. This section is effective July 1, 2024.

Sec. 13. Minnesota Statutes 2022, section 145.61, subdivision 5, is amended to read:

Subd. 5. Review organization. "Review organization" means a nonprofit organization acting according to clause (l), a committee as defined under section 144E.32, subdivision 2, or a committee whose membership is limited to professionals, administrative staff, and consumer directors, except where otherwise provided for by state or federal law, and which is established by one or more of the following: a hospital, a clinic, a nursing home, an ambulance service or first responder service regulated under chapter 144E, one or more state or local associations of professionals, an organization of professionals from a particular area or medical institution, a health maintenance organization as defined in chapter 62D, a community integrated service network as defined in chapter 62N, a nonprofit health service plan corporation as defined in chapter 62C, a preferred provider organization, a professional standards review organization established pursuant to United States Code, title 42, section 1320c-1 et seq., a medical review agent established to meet the requirements of section 1320c-1 et seq., a medical review agent established to meet the requirements of section 256B.04, subdivision 15, the Department of Human Services, Direct Care and Treatment, or a nonprofit corporation that owns, operates, or is established by one or more of the above referenced entities, to gather and review information relating to the care and treatment of patients for the purposes of:

(a) evaluating and improving the quality of health care;

(b) reducing morbidity or mortality;

(c) obtaining and disseminating statistics and information relative to the treatment and prevention of diseases, illness and injuries;

(d) developing and disseminating guidelines showing the norms of health care in the area or medical institution or in the entity or organization that established the review organization;

(e) developing and publishing guidelines designed to keep within reasonable bounds the cost of health care;

(f) developing and publishing guidelines designed to improve the safety of care provided to individuals;

Subd. 6. Review organization. "Review organization" means a nonprofit organization acting according to clause (l), a committee as defined under section 144E.32, subdivision 2, or a committee whose membership is limited to professionals, administrative staff, and consumer directors, except where otherwise provided for by state or federal law, and which is established by one or more of the following: a hospital, a clinic, a nursing home, an ambulance service or first responder service regulated under chapter 144E, one or more state or local associations of professionals, an organization of professionals from a particular area or medical institution, a health maintenance organization as defined in chapter 62D, a community integrated service network as defined in chapter 62N, a nonprofit health service plan corporation as defined in chapter 62C, a preferred provider organization, a professional standards review organization established pursuant to United States Code, title 42, section 1320c-1 et seq., a medical review agent established to meet the requirements of section 1320c-1 et seq., a medical review agent established to meet the requirements of section 256B.04, subdivision 15, the Department of Human Services, Direct Care and Treatment, or a nonprofit corporation that owns, operates, or is established by one or more of the above referenced entities, to gather and review information relating to the care and treatment of patients for the purposes of:

(a) evaluating and improving the quality of health care;

(b) reducing morbidity or mortality;

(c) obtaining and disseminating statistics and information relative to the treatment and prevention of diseases, illness and injuries;

(d) developing and disseminating guidelines showing the norms of health care in the area or medical institution or in the entity or organization that established the review organization;

(e) developing and publishing guidelines designed to keep within reasonable bounds the cost of health care;

(f) developing and publishing guidelines designed to improve the safety of care provided to individuals;

This section is effective July 1, 2024.
(g) reviewing the safety, quality, or cost of health care services provided to enrollees of health maintenance organizations, community integrated service networks, health service plans, preferred provider organizations, and insurance companies;

(h) acting as a professional standards review organization pursuant to United States Code, title 42, section 1320c-1 et seq.;

(i) determining whether a professional shall be granted staff privileges in a medical institution, membership in a state or local association of professionals, or participating status in a nonprofit health service plan corporation, health maintenance organization, community integrated service network, preferred provider organization, or insurance company, or whether a professional's staff privileges, membership, or participation status should be limited, suspended or revoked;

(j) reviewing, ruling on, or advising on controversies, disputes or questions between:

(1) health insurance carriers, nonprofit health service plan corporations, health maintenance organizations, community integrated service networks, self-insurers and their insureds, subscribers, enrollees, or other covered persons;

(2) professional licensing boards and health providers licensed by them;

(3) professionals and their patients concerning diagnosis, treatment or care, or the charges thereof; or fees therefor;

(4) professionals and health insurance carriers, nonprofit health service plan corporations, health maintenance organizations, community integrated service networks, or self-insurers concerning a charge or fee for health care services provided to an insured, subscriber, enrollee, or other covered person;

(5) professionals or their patients and the federal, state, or local government, or agencies thereof;

(k) providing underwriting assistance in connection with professional liability insurance coverage applied for or obtained by dentists, or providing assistance to underwriters in evaluating claims against dentists;

(l) acting as a medical review agent under section 256B.04, subdivision 15;

(m) providing recommendations on the medical necessity of a health service, or the relevant prevailing community standard for a health service;

(n) providing quality assurance as required by United States Code, title 42, sections 1396r(b)(1)(b) and 1395f-3(b)(1)(b) of the Social Security Act;

(o) providing information to group purchasers of health care services when that information was originally generated within the review organization for a purpose specified by this subdivision;
Defining a health care facility that is not operated by state-operated services, including information about patient care and treatment, and the state-operated services governing body to develop standards for treatment and care of patients in state-operated service programs;

4.11 (4) develop and oversee a continuing education program for members of the medical staff; and

4.12 (5) participate and cooperate in the development and maintenance of a quality assurance program for state-operated services that assures that residents receive continuous quality inpatient, outpatient, and postdischarge care.

4.16 EFFECTIVE DATE. This section is effective July 1, 2024.

84.23 Subd. 2. Definitions; risk assessment and management. (a) As used in this section:

84.24 (1) "appropriate and necessary medical and other records" includes patient medical records and the patient's ongoing care, treatment, or placement in a community-based treatment facility or a health care facility that is not operated by state-operated services, including information describing the level of risk posed by a patient when the patient enters the facility;

84.25 (p) providing information to other, affiliated or nonaffiliated review organizations, when that information was originally generated within the review organization for a purpose specified by this subdivision, and as long as that information will further the purposes of a review organization as specified by this subdivision; or

84.28 (q) participating in a standardized incident reporting system, including Internet-based applications, to share information for the purpose of identifying and analyzing trends in medical error and iatrogenic injury.

EFFECTIVE DATE. This section is effective July 1, 2024.

Sec. 14. Minnesota Statutes 2022, section 246.13, subdivision 2, as amended by Laws 2024, chapter 79, article 1, section 6, is amended to read:

84.25 (p) providing information to other, affiliated or nonaffiliated review organizations, when that information was originally generated within the review organization for a purpose specified by this subdivision, and as long as that information will further the purposes of a review organization as specified by this subdivision; or

84.28 (q) participating in a standardized incident reporting system, including Internet-based applications, to share information for the purpose of identifying and analyzing trends in medical error and iatrogenic injury.

EFFECTIVE DATE. This section is effective July 1, 2024.

Sec. 15. Minnesota Statutes 2022, section 246.13, subdivision 2, as amended by Laws 2024, chapter 79, article 2, section 4, is amended to read:

84.19 Subd. 2. Definitions; risk assessment and management. (a) As used in this section:

84.20 (1) "appropriate and necessary medical and other records" includes patient medical records and other protected health information as defined by Code of Federal Regulations, title 45, section 164.501, relating to a patient in a state-operated services facility including but not limited to the patient's treatment plan and abuse prevention plan pertinent to the patient's ongoing care, treatment, or placement in a community-based treatment facility or a health care facility that is not operated by state-operated services, including information describing the level of risk posed by a patient when the patient enters the facility;
(2) "community-based treatment" means the community support services listed in section 253B.02, subdivision 4b;
(3) "criminal history data" means data maintained or used by the Departments of Corrections and Public Safety and by the supervisory authorities listed in section 13.84, subdivision 1, that relate to an individual's criminal history or propensity for violence, including data in the:
(i) Corrections Offender Management System (COMS);
(ii) Statewide Supervision System (S3);
(iii) Bureau of Criminal Apprehension criminal history data as defined in section 13.87;
(iv) Integrated Search Service as defined in section 13.873; and
(v) Predatory Offender Registration (POR) system;
(4) "designated agency" means the agency defined in section 253B.02, subdivision 5;
(5) "law enforcement agency" means the law enforcement agency having primary jurisdiction over the location where the offender expects to reside upon release;
(6) "predatory offender" and "offender" mean a person who is required to register as a predatory offender under section 243.166; and
(7) "treatment facility" means a facility as defined in section 253B.02, subdivision 19.
(b) To promote public safety and for the purposes and subject to the requirements of this paragraph, the executive board or the executive board's designee shall have access to, and may review and disclose, medical and criminal history data as provided by this section, as necessary to comply with Minnesota Rules, part 1205.0400, to:
(1) determine whether a patient is required under state law to register as a predatory offender according to section 243.166;
(2) facilitate and expedite the responsibilities of the special review board and end-of-confinement review committees by corrections institutions and state treatment facilities; and
(3) prepare, amend, or revise the abuse prevention plans required under section 626.557, subdivision 14, and individual patient treatment plans required under section 253B.03, subdivision 7;
(4) facilitate the custody, supervision, and transport of individuals transferred between the Department of Corrections and the Department of Direct Care and Treatment; and
(5) effectively monitor and supervise individuals who are under the authority of the Department of Corrections, the Department of Direct Care and Treatment, and the supervisory authorities listed in section 13.84, subdivision 1.

To promote public safety and for the purposes and subject to the requirements of this paragraph, the executive board or the executive board's designee shall have access to, and may review and disclose, medical and criminal history data as provided by this section, as necessary to comply with Minnesota Rules, part 1205.0400, to:
(1) determine whether a patient is required under state law to register as a predatory offender according to section 243.166;
(2) facilitate and expedite the responsibilities of the special review board and end-of-confinement review committees by corrections institutions and state treatment facilities; and
(3) prepare, amend, or revise the abuse prevention plans required under section 626.557, subdivision 14, and individual patient treatment plans required under section 253B.03, subdivision 7;
(4) facilitate the custody, supervision, and transport of individuals transferred between the Department of Corrections and the Department of Direct Care and Treatment; and
(5) effectively monitor and supervise individuals who are under the authority of the Department of Corrections, the Department of Direct Care and Treatment, and the supervisory authorities listed in section 13.84, subdivision 1.
(c) The state-operated services treatment facility or a designee must make a good faith effort to obtain written authorization from the patient before releasing information from the patient's medical record.

(d) If the patient refuses or is unable to give informed consent to authorize the release of information required under this subdivision, the chief executive officer for state-operated facilities or a designee shall provide the appropriate and necessary medical and other records.

The chief executive officer or a designee shall comply with the minimum necessary privacy requirements.

(e) The executive board may have access to the National Crime Information Center (NCIC) database through the Department of Public Safety in support of the public safety functions described in paragraph (b).

**EFFECTIVE DATE:** This section is effective July 1, 2024.

Sec. 17. Minnesota Statutes 2022, section 246.36, as amended by Laws 2024, chapter 79, article 1, section 11, is amended to read:

246.36 ACCEPTANCE OF VOLUNTARY, UNCOMPENSATED SERVICES.

The executive board is hereby authorized with the approval of the governor to enter into reciprocal agreements with duly authorized authorities of any other another state or states regarding the mutual exchange, return, and transportation of persons with a mental illness or developmental disability who are within the confines of one state but have legal residence or legal settlement for the purposes of relief in another state. Such agreements Any agreement entered into under this subdivision must not contain provisions conflicting any provision that conflicts with any law of this state law.

**EFFECTIVE DATE:** This section is effective July 1, 2024.

Sec. 16. Minnesota Statutes 2022, section 246.234, as amended by Laws 2024, chapter 79, article 1, section 11, is amended to read:

246.234 RECIPROCAL EXCHANGE OF CERTAIN PERSONS.

The executive board is hereby authorized with the approval of the governor to enter into reciprocal agreements with duly authorized authorities of any other another state or states for state-operated facilities through the Department of Administration.

The volunteer agencies, organizations, or persons shall have authority to enter into contracts or agreements to provide services to residents of state or states other than this state for the purposes of relief in another state. Such agreements Any agreement entered into under this subdivision must not contain provisions conflicting any provision that conflicts with any law of this state law.

**EFFECTIVE DATE:** This section is effective July 1, 2024.

Sec. 15. Minnesota Statutes 2022, section 246.234, as amended by Laws 2024, chapter 79, article 1, section 11, is amended to read:

246.234 RECIPROCAL EXCHANGE OF CERTAIN PERSONS.

The executive board is hereby authorized with the approval of the governor to enter into reciprocal agreements with duly authorized authorities of any other another state or states regarding the mutual exchange, return, and transportation of persons with a mental illness or developmental disability who are within the confines of one state but have legal residence or legal settlement for the purposes of relief in another state. Such agreements Any agreement entered into under this subdivision must not contain provisions conflicting any provision that conflicts with any law of this state law.

**EFFECTIVE DATE:** This section is effective July 1, 2024.

Sec. 16. Minnesota Statutes 2022, section 246.36, as amended by Laws 2024, chapter 79, article 1, section 14, is amended to read:

246.36 ACCEPTANCE OF VOLUNTARY, UNCOMPENSATED SERVICES.

For the purpose of carrying out a duty, the executive board shall have authority to may accept uncompensated and voluntary services and as may enter into contracts or agreements with private or public agencies, organizations, or persons for uncompensated and voluntary services as the executive board deems practicable. Uncompensated and voluntary services do not include services mandated by licensure and certification requirements for health care facilities.

The volunteer agencies, organizations, or persons who provide services to residents of state facilities operated under the authority of the executive board are not subject to the procurement requirements of chapters 16A and 16C. The agencies, organizations, or persons may purchase supplies, services, and equipment to be used in providing services to residents of state facilities through the Department of Administration.

For the purpose of carrying out a duty, the executive board shall have authority to may accept uncompensated and voluntary services and as may enter into contracts or agreements with private or public agencies, organizations, or persons for uncompensated and voluntary services as the executive board deems practicable. Uncompensated and voluntary services do not include services mandated by licensure and certification requirements for health care facilities. The volunteer agencies, organizations, or persons who provide services to residents of state facilities operated under the authority of the executive board are not subject to the procurement requirements of chapters 16A and 16C. The agencies, organizations, or persons may purchase supplies, services, and equipment to be used in providing services to residents of state facilities through the Department of Administration.
246C.01 TITLE. The Department of Human Services as state agency.

246C.02 DEPARTMENT OF DIRECT CARE AND TREATMENT; ESTABLISHMENT. Subdivision 1. Establishment. The Department of Direct Care and Treatment is created as an agency headed by an executive board. An executive board shall head the Department of Direct Care and Treatment.

Subd. 2. Mission. (a) The executive board shall develop and maintain direct care and treatment services in accordance with applicable law, including chapters 245, 246, 246B, 246D, 248, 252, 253B, 253C, 253D, 254A, 254B, and 256. Direct Care and Treatment shall provide direct care and treatment services in coordination with the commissioner of human services, counties, and other vendors. (b) The executive board shall provide direct care and treatment services in coordination with the commissioner of human services, counties, and other vendors.

Subd. 3. Direct care and treatment services. Direct Care and Treatment services shall provide direct care and treatment services that include specialized inpatient programs at secure treatment facilities, community preparation services, regional treatment centers, enterprise services, consultative services, aftercare services, community-based services and programs, transition services, nursing home services, and other services consistent with the mission of the Department of Direct Care and Treatment and state law, including this chapter and chapters 245, 246, 246B, 252, 253, 253B, 253C, 253D, 254A, 254B, and 256. Direct Care and Treatment shall provide direct care and treatment services in coordination with the commissioner of human services, counties, and other vendors.

Subd. 4. Statewide services. (a) The administrative structure of state-operated services must be statewide in character. (b) The state-operated services staff may deliver services at any location throughout the state.

Subd. 5. Department of Human Services as state agency. The commissioner of human services continues to constitute the "state agency" as defined by the Social Security Act of the United States and the laws of this state for all purposes relating to mental health and mental hygiene.

This chapter may be cited as the "Department of Direct Care and Treatment Act."
EFFECTIVE DATE. This section is effective July 1, 2024.

Sec. 20. Minnesota Statutes 2023 Supplement, section 246C.04, as amended by Laws 2024, chapter 79, article 1, section 21, is amended to read:

Subdivision 1. Transfer of duties. (a) Section 15.039 applies to the transfer of duties and responsibilities from the Department of Human Services to Direct Care and Treatment required by this chapter.

(b) The commissioner of administration, with the governor's approval, shall issue reorganization orders under section 16B.37 as necessary to carry out the transfer of duties required by section 246C.04 this chapter. The provision of section 16B.37, subdivision 1, stating that transfers under section 16B.37 may only be to an agency that has existed for at least one year does not apply to transfers to an agency created by this chapter.

(c) The initial salary for the health systems chief executive officer of the Department of Direct Care and Treatment is the same as the salary for the health systems chief executive officer of direct care and treatment at the Department of Human Services immediately before July 1, 2024.

Subd. 2. Transfer of custody of civilly committed persons. The commissioner of human services shall continue to exercise all authority and responsibility for and retain custody of persons subject to civil commitment under chapter 253B or 253D until July 1, 2025. Effective July 1, 2025, custody of persons subject to civil commitment under chapter 253B or 253D and in the custody of the commissioner of human services as of that date is hereby transferred to the executive board without any further act or proceeding. Authority and responsibility for the commitment of such persons is transferred to the executive board July 1, 2025.

Subd. 3. Control of direct care and treatment. The commissioner of human services shall continue to exercise all authorities and responsibilities under this chapter and chapters 13, 245, 246, 246A, 252, 253, 253B, 253C, 253D, 254A, 254B, and 256, with reference to any state-operated service, program, or facility subject to transfer under this act until July 1, 2025. Effective July 1, 2025, the powers and duties vested in or imposed upon the commissioner of human services with reference to any state-operated service, program, or facility subject to transfer under this act until July 1, 2025, is hereby changed with and has the exclusive power of administration and management of all state hospitals for persons with a developmental disability, mental illness, or substance use disorder. Effective July 1, 2025, the executive board has the power and authority to determine all matters relating to the development of all of the foregoing institutions and of such other institutions vested in the executive board. Effective July 1, 2025, the powers, functions, and authority vested in the commissioner of human services relative to such state institutions
Subd. 4. Appropriations. There is hereby appropriated to such persons or institutions as are entitled to such sums as are provided for in this section, from the fund or account in the state treasury to which the money was credited, an amount sufficient to make such payment.

EFFECTIVE DATE. This section is effective July 1, 2024.

Sec. 21. Minnesota Statutes 2023 Supplement, section 246C.05, as amended by Laws 2024, chapter 79, article 1, section 22, is amended to read:

246C.05 EMPLOYEE PROTECTIONS FOR ESTABLISHING THE NEW DEPARTMENT OF DIRECT CARE AND TREATMENT.

(a) Personnel whose duties relate to the functions assigned to the executive board in section 246C.04 who are transferred to the Department of Direct Care and Treatment effective 30 days after approval by the commissioner of management and budget.

(b) Before the executive board is appointed, personnel whose duties relate to the functions in this section chapter may be transferred beginning July 1, 2024, with 30 days' notice from the commissioner of management and budget.

(c) The following protections shall apply to employees who are transferred from the Department of Human Services to the Department of Direct Care and Treatment:

(1) No transferred employee other than the chief executive officer shall have their employment status and job classification altered as a result of the transfer.

(2) Transferred employees who were represented by an exclusive representative prior to the transfer shall continue to be represented by the same exclusive representative after the transfer.

(3) The applicable collective bargaining agreements with exclusive representatives shall continue in full force and effect for such transferred employees after the transfer.

(4) The state shall have the obligation to meet and negotiate with the exclusive representatives of the transferred employees about any proposed changes affecting or relating to the transferred employees' terms and conditions of employment to the extent such changes are not addressed in the applicable collective bargaining agreement.

(5) When an employee in a temporary unclassified position is transferred to the Department of Direct Care and Treatment, the total length of time that the employee has served in the appointment shall include all time served in the appointment at the transferring agency and the time served in the appointment at the Department of Direct Care and Treatment. An employee in a temporary unclassified position who was hired by a transferring agency through an open competitive selection process in accordance with a policy enacted

are hereby transferred to the executive board according to this chapter and applicable state law.

Subd. 4. Appropriations. There is hereby appropriated to such persons or institutions as are entitled to such sums as are provided for in this section, from the fund or account in the state treasury to which the money was credited, an amount sufficient to make such payment.

EFFECTIVE DATE. This section is effective July 1, 2024.
by Minnesota Management and Budget shall be considered to have been hired through such process after the transfer.

(6) In the event that the state transfers ownership or control of any of the facilities, services, or operations of the Department of Direct Care and Treatment to another entity, whether private or public, by subcontracting, sale, assignment, lease, or other transfer, the state shall require as a written condition of such transfer of ownership or control the following provisions:

(i) Employees who perform work in transferred facilities, services, or operations must be offered employment with the entity acquiring ownership or control before the entity offers employment to any individual who was not employed by the transferring agency at the time of the transfer.

(ii) The wage and benefit standards of such transferred employees must not be reduced by the entity acquiring ownership or control through the expiration of the collective bargaining agreement in effect at the time of the transfer or for a period of two years after the transfer, whichever is longer.

(d) There is no liability on the part of, and no cause of action arises against, the state of Minnesota or its officers or agents for any action or inaction of any entity acquiring ownership or control of any facilities, services, or operations of the Department of Direct Care and Treatment other than the chief executive officer must be made by written order and filed with the secretary of state. Only the chief executive officer shall have the powers and duties of the executive board as specified in section 246C.08.

This section is effective July 1, 2024.

EFFECTIVE DATE.

(6) In the event that the state transfers ownership or control of any of the facilities, services, or operations of the Department of Direct Care and Treatment to another entity, whether private or public, by subcontracting, sale, assignment, lease, or other transfer, the state shall require as a written condition of such transfer of ownership or control the following provisions:

(i) Employees who perform work in transferred facilities, services, or operations must be offered employment with the entity acquiring ownership or control before the entity offers employment to any individual who was not employed by the transferring agency at the time of the transfer.

(ii) The wage and benefit standards of such transferred employees must not be reduced by the entity acquiring ownership or control through the expiration of the collective bargaining agreement in effect at the time of the transfer or for a period of two years after the transfer, whichever is longer.

(d) There is no liability on the part of, and no cause of action arises against, the state of Minnesota or its officers or agents for any action or inaction of any entity acquiring ownership or control of any facilities, services, or operations of the Department of Direct Care and Treatment.

This section expires upon the completion of the transfer of duties to the executive board under section 246C.03 this chapter. The commissioner of human services shall notify the revisor of statutes when the transfer of duties is complete.

EFFECTIVE DATE. This section is effective July 1, 2024.

Subdivision 1. Generally; (a) The executive board must operate the agency according to this chapter and applicable state and federal law. The overall management and control of the agency is vested in the executive board in accordance with this chapter.

(b) The executive board may delegate duties imposed by this chapter and under applicable state and federal law as deemed appropriate by the board and in accordance with this chapter.

Any delegation of a specified statutory duty or power to an employee of Direct Care and Treatment other than the chief executive officer must be made by written order and filed with the secretary of state. Only the chief executive officer shall have the powers and duties of the executive board as specified in section 246C.08.
Subd. 2. **Principles.** The executive board, in undertaking its duties and responsibilities and within Direct Care and Treatment resources, shall act according to the following principles:

1. Prevent the waste or unnecessary spending of public money;
2. Use innovative fiscal and human resource practices to manage the state's resources and operate the agency as efficiently as possible;
3. Coordinate Direct Care and Treatment activities wherever appropriate with the activities of other governmental agencies;
4. Use technology where appropriate to increase agency productivity, improve customer service, and increase public access to information about government, and increase public participation in the business of government; and
5. Utilize constructive and cooperative labor management practices to the extent otherwise required by chapter 43A or 179A.

Subd. 3. **Powers and duties.** (a) The executive board has the power and duty to:

1. Set the overall strategic direction for Direct Care and Treatment, ensuring that Direct Care and Treatment delivers exceptional care and supports the well-being of all individuals served by Direct Care and Treatment;
2. Establish policies and procedures to govern the operation of the facilities, programs, and services under the direct authority of Direct Care and Treatment;
3. Employ personnel and delegate duties and responsibilities to personnel as deemed appropriate by the executive board, subject to chapters 43A and 179A and in accordance with this chapter;
4. Review and approve the operating budget proposal for Direct Care and Treatment;
5. Accept and use gifts, grants, or contributions from any nonstate source or refuse to accept any gift, grant, or contribution if acceptance would not be in the best interest of the state;
6. Deposit all money received as gifts, grants, or contributions pursuant to section 246C.091, subdivision 1;
7. Expire or use any gift, grant, or contribution as nearly in accordance with the conditions of the gift, grant, or contribution identified by the donor for a certain institution or purpose, compatible with the best interests of the individuals under the jurisdiction of the executive board and of the state;
8. Accept and use gifts, grants, or contributions from any nonstate source or refuse to accept any gift, grant, or contribution if acceptance would not be in the best interest of the state;
9. Deposit all money received as gifts, grants, or contributions pursuant to section 246C.091, subdivision 1;
10. Use technology where appropriate to increase agency productivity, improve customer service, and increase public access to information about government, and increase public participation in the business of government; and
11. Utilize constructive and cooperative labor management practices to the extent otherwise required by chapter 43A or 179A.
(8) comply with all conditions and requirements necessary to receive federal aid or block
grants with respect to the establishment, construction, maintenance, equipment, or operation
of adequate facilities and services consistent with the mission of Direct Care and Treatment;
(9) enter into information-sharing agreements with federal and state agencies and other
entities, provided the agreements include adequate protections with respect to the
confidentiality and integrity of the information to be shared and comply with all applicable
state and federal laws, regulations, and rules;
(10) enter into interagency or service level agreements with a state department listed in
section 15.01; a multimember state agency described in section 15.012, paragraph (a); or
the Department of Information Technology Services;
(11) enter into contractual agreements with federally recognized Indian Tribes with a
reservation in Minnesota;
(12) enter into contracts with public and private agencies, private and nonprofit
organizations, and individuals using appropriated money;
(13) establish and maintain any administrative units reasonably necessary for the
performance of administrative functions common to all programs or divisions of Direct
Care and Treatment;
(14) authorize the method of payment to or from Direct Care and Treatment as part of
programs administered by Direct Care and Treatment, including authorization of the receipt
or disbursement of money held by Direct Care and Treatment in a fiduciary capacity as part
of the programs administered by Direct Care and Treatment;
(15) inform Tribal Nations and county agencies, on a timely basis, of changes in statute, rule, federal law, regulation, and policy necessary to Tribal or county agency administration
of Direct Care and Treatment programs and services;
(16) report to the legislature on the performance of Direct Care and Treatment operations
and the accomplishment of Direct Care and Treatment goals in its biennial budget in
accordance with section 16A.10, subdivision 1;
(17) recommend to the legislature appropriate changes in law necessary to carry out the
principles and improve the performance of Direct Care and Treatment;
and
(b) The specific enumeration of powers and duties as set forth in this section shall not
be construed as a limitation upon the general transfer of Direct Care and Treatment facilities,
programs, and services from the Department of Human Services to Direct Care and Treatment
under this chapter.

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Subd. 4. Powers and duties vested exclusively in the chair of the executive board. The chair of the executive board has exclusive and solely independent authority to exercise the executive board’s powers and duties under sections 253B.18, 253B.19, 253D.23, and 253D.28 that involve any person subject to civil commitment under chapter 253B or 253D as a person who has a mental illness and is dangerous to the public, as a sexually dangerous person, or as a sexual psychopathic personality.

Subd. 5. Creation of bylaws. The board may establish bylaws governing its operations and the operations of Direct Care and Treatment in accordance with this chapter.

Subd. 4. Creation of bylaws. The board may establish bylaws governing its operations and the operations of Direct Care and Treatment in accordance with this chapter.

Subd. 5. Advisory committee. (a) The executive board shall establish an advisory committee to provide state legislators, counties, union representatives, the National Alliance on Mental Illness Minnesota, people being served by direct care and treatment programs, and other stakeholders the opportunity to advise the executive board regarding the operation of Direct Care and Treatment. The legislative members of the advisory committee must be appointed as follows: (1) one member appointed by the speaker of the house of representatives; (2) one member appointed by the minority leader of the house of representatives; and (3) two members appointed by the senate committee on committees, one member representing the majority caucus and one member representing the minority caucus.

(b) The executive board shall regularly consult with the advisory committee.

(c) The advisory committee under this subdivision expires December 31, 2027.

EFFECTIVE DATE. This section is effective July 1, 2024.

Sec. 22. [246C.08] CHIEF EXECUTIVE OFFICER; SERVICE; DUTIES.

Subdivision 1. Service. The Direct Care and Treatment chief executive officer is appointed by the governor with the advice and consent of the senate and serves at the pleasure of the governor.

Subdivision 1. Service. The Direct Care and Treatment chief executive officer is appointed by the executive board and serves at the pleasure of the executive board, with the advice and consent of the senate.

Subd. 2. Powers and duties. (a) The chief executive officer shall serve as chair of the executive board. The chief executive officer is responsible for the administrative and operational management of the agency in accordance with this chapter.

(b) The chief executive officer shall have all the powers of the executive board unless the executive board directs otherwise. The chief executive officer shall have the authority to speak for the executive board and Direct Care and Treatment within and outside the agency.

(b) The chief executive officer shall have all the powers of the executive board unless the executive board directs otherwise. The chief executive officer shall have the authority to speak for the executive board and Direct Care and Treatment within and outside the agency.
(c) In the event that a vacancy occurs for any reason within the chief executive officer
position, the executive medical director appointed under section 246.018 shall immediately
become the temporary chief executive officer until the governor appoints a new chief
executive officer. During this period, the executive medical director shall have all the powers
and authority delegated to the chief executive officer by the board and specified in this
chapter except those specified in section 246C.07, subdivision 4. During this period, the
governor has the exclusive and solely independent authority to exercise the powers and
duties specified under section 246C.07, subdivision 4.

EFFECTIVE DATE. This section is effective July 1, 2024.

Sec. 24. [246C.091] DIRECT CARE AND TREATMENT ACCOUNTS.

Subd. 1. Gifts, grants, and contributions account. (a) A gifts, grants, and
contributions account is created in the special revenue fund in the state treasury. All money
received by the executive board as a gift, grant, or contribution must be deposited in the
gifts, grants, and contributions account. Beginning July 1, 2025, except as provided in
paragraph (b), money in the account is annually appropriated to the Direct Care and
Treatment executive board to accomplish the purposes of this chapter. Gifts, grants, or
contributions received by the executive board exceeding current agency needs must be
invested by the State Board of Investment in accordance with section 11A.25. Disbursements
from the gifts, grants, and contributions account must be made in the manner provided for
the issuance of other state payments.

(b) If the gift or contribution is designated for a certain person, institution, or purpose,
the Direct Care and Treatment executive board must use the gift or contribution as specified
in accordance with the conditions of the gift or contribution if compatible with the best
interests of the person and the state. If a gift or contribution is accepted for the use and
benefit of a person with a developmental disability, including those within a state hospital,
research relating to persons with a developmental disability must be considered an appropriate
use of the gift or contribution. Such money must not be used for any structures or installations
which by their nature would require state expenditures for their operation or maintenance
without specific legislative enactment.

Subd. 2. Facilities management account. A facilities management account is created
in accordance with the conditions of the gift or contribution if compatible with the best
interests of the person and the state. If a gift or contribution is accepted for the use and
benefit of a person with a developmental disability, including those within a state hospital,
research relating to persons with a developmental disability must be considered an appropriate
use of the gift or contribution. Such money must not be used for any structures or installations
which by their nature would require state expenditures for their operation or maintenance
without specific legislative enactment.

Subd. 3. Direct Care and Treatment systems account. (a) The Direct Care and
Treatment systems account is created in the special revenue fund of the state treasury.
Beginning July 1, 2025, money in the account is appropriated to the Direct Care and

EFFECTIVE DATE. This section is effective July 1, 2024.

Sec. 23. [246C.091] DIRECT CARE AND TREATMENT ACCOUNTS.

Subd. 1. Gifts, grants, and contributions account. (a) A gifts, grants, and
contributions account is created in the special revenue fund in the state treasury. All money
received by the executive board as a gift, grant, or contribution must be deposited in the
gifts, grants, and contributions account. Beginning July 1, 2025, except as provided in
paragraph (b), money in the account is annually appropriated to the Direct Care and
Treatment executive board to accomplish the purposes of this chapter. Gifts, grants, or
contributions received by the executive board exceeding current agency needs must be
invested by the State Board of Investment in accordance with section 11A.25. Disbursements
from the gifts, grants, and contributions account must be made in the manner provided for
the issuance of other state payments.

(b) If the gift or contribution is designated for a certain person, institution, or purpose,
the Direct Care and Treatment executive board must use the gift or contribution as specified
in accordance with the conditions of the gift or contribution if compatible with the best
interests of the person and the state. If a gift or contribution is accepted for the use and
benefit of a person with a developmental disability, including those within a state hospital,
research relating to persons with a developmental disability must be considered an appropriate
use of the gift or contribution. Such money must not be used for any structures or installations
which by their nature would require state expenditures for their operation or maintenance
without specific legislative enactment.
Treatment executive board and may be used for security systems and information technology projects, services, and support under the control of the executive board.

(b) The commissioner of human services shall transfer all money allocated to the Direct Care and Treatment systems projects under section 256.014 to the Direct Care and Treatment systems account by June 30, 2026.

Subd. 4. Cemetery maintenance account. The cemetery maintenance account is created in the special revenue fund of the state treasury. Money in the account is appropriated to the executive board for the maintenance of cemeteries under control of the executive board.

Money allocated to Direct Care and Treatment cemeteries may be transferred to this account.

EFFECTIVE DATE. This section is effective July 1, 2024.

Sec. 25. Minnesota Statutes 2022, section 256.89, is amended to read:

256.89 SOCIAL WELFARE FUND ESTABLISHED.

Except as otherwise expressly provided, all moneys and funds held by the commissioner of human services, the Direct Care and Treatment executive board, and the local social services agencies of the several counties in trust or for the benefit of children with a disability and children who are dependent, neglected, or delinquent, children born to mothers who were not married to the children's fathers at the times of the conception nor at the births of the children, persons determined to have developmental disability, mental illness, or substance use disorder, or other wards or beneficiaries, under any law, shall be kept in a single fund to be known as the "social welfare fund" which shall be deposited at interest, held, or disbursed as provided in sections 256.89 to 256.92.

EFFECTIVE DATE. This section is effective July 1, 2024.

Sec. 26. Minnesota Statutes 2022, section 256.89, is amended to read:

256.89 FUND DEPOSITED IN STATE TREASURY.

The social welfare fund and all accretions thereto shall be deposited in the state treasury, as a separate and distinct fund, to the credit of the commissioner of human services and the Direct Care and Treatment executive board as trustees for the beneficiaries thereof. The commissioner of management and budget shall be responsible only to the commissioner of human services and the Direct Care and Treatment executive board for the sum total of the fund, and shall have no duties nor direct obligations toward the beneficiaries thereof individually. Subject to the applicable rules of the commissioner of human services or the Direct Care and Treatment executive board, money so received by the local social services agency may be deposited by the executive secretary of the local social services agency in a local bank carrying federal deposit insurance, designated by the local social services agency for this purpose. The amount of such deposit in each such bank at any one time shall not exceed the amount protected by federal deposit insurance.

Subd. 4. Cemetery maintenance account. The cemetery maintenance account is created in the special revenue fund of the state treasury. Money in the account is appropriated to the executive board for the maintenance of cemeteries under control of the executive board.

Money allocated to Direct Care and Treatment cemeteries may be transferred to this account.

EFFECTIVE DATE. This section is effective July 1, 2024.

Sec. 24. Minnesota Statutes 2022, section 256.88, is amended to read:

256.88 SOCIAL WELFARE FUND ESTABLISHED.

Except as otherwise expressly provided, all moneys and funds held by the commissioner of human services, the Direct Care and Treatment executive board, and the local social services agencies of the several counties in trust or for the benefit of children with a disability and children who are dependent, neglected, or delinquent, children born to mothers who were not married to the children's fathers at the times of the conception nor at the births of the children, persons determined to have developmental disability, mental illness, or substance use disorder, or other wards or beneficiaries, under any law, shall be kept in a single fund to be known as the "social welfare fund" which shall be deposited at interest, held, or disbursed as provided in sections 256.89 to 256.92.

EFFECTIVE DATE. This section is effective July 1, 2024.

Sec. 25. Minnesota Statutes 2022, section 256.89, is amended to read:

256.89 FUND DEPOSITED IN STATE TREASURY.

The social welfare fund and all accretions thereto shall be deposited in the state treasury, as a separate and distinct fund, to the credit of the commissioner of human services and the Direct Care and Treatment executive board as trustees for the beneficiaries thereof. The commissioner of management and budget shall be responsible only to the commissioner of human services and the Direct Care and Treatment executive board for the sum total of the fund, and shall have no duties nor direct obligations toward the beneficiaries thereof individually. Subject to the applicable rules of the commissioner of human services or the Direct Care and Treatment executive board, money so received by the local social services agency may be deposited by the executive secretary of the local social services agency in a local bank carrying federal deposit insurance, designated by the local social services agency for this purpose. The amount of such deposit in each such bank at any one time shall not exceed the amount protected by federal deposit insurance.
EFFECTIVE DATE. This section is effective July 1, 2024.

Sec. 27. Minnesota Statutes 2022, section 256.90, is amended to read:

256.90 SOCIAL WELFARE FUND; USE; DISPOSITION; DEPOSITORIES.

The commissioner of human services, in consultation with the Direct Care and Treatment executive board, at least 30 days before the first day of January and the first day of July in each year shall file with the commissioner of management and budget an estimate of the amount of the social welfare fund to be held in the treasury during the succeeding six-month period, subject to current disbursement. Such portion of the remainder thereof as may be at any time designated by the request of the commissioner of human services may be invested by the commissioner of management and budget in bonds in which the permanent trust funds of the state of Minnesota may be invested, upon approval by the State Board of Investment. The portion of such remainder not so invested shall be placed by the commissioner of management and budget at interest for the period of six months, or when directed by the commissioner of human services, for the period of 12 months thereafter at the highest rate of interest obtainable in a bank, or banks, designated by the board of deposit as a suitable depository therefor. All the provisions of law relative to the designation and qualification of depositories of other state funds shall be applicable to sections 256.88 to 256.92, except as herein otherwise provided. Any bond given, or collateral assigned or both, to secure a deposit hereunder may be continuous in character to provide for the repayment of any moneys belonging to the fund theretofore or thereafter at any time deposited in such bank until its designation as such depository is revoked and the security thereof shall be not impaired by any subsequent agreement or understanding as to the rate of interest to be paid upon such deposit, or as to time for its repayment. The amount of money belonging to the fund deposited in any bank, including other state deposits, shall not at any time exceed the amount of the capital stock thereof. In the event of the closing of the bank any sum deposited therein shall immediately become due and payable.

EFFECTIVE DATE. This section is effective July 1, 2024.

Sec. 28. Minnesota Statutes 2022, section 256.91, is amended to read:

256.91 PURPOSES.

From that part of the social welfare fund held in the state treasury subject to disbursement as provided in section 256.90 the commissioner of human services, or the Direct Care and Treatment executive board at any time may pay out such amounts as the commissioner or executive board deems proper for the support, maintenance, or other legal benefit of any of the children with a disability and children who are dependent, neglected, or delinquent, children born to mothers who were not married to the children's fathers at the times of the conception or at the births of the children, persons with developmental disability, substance use disorder, or mental illness, or other wards or persons entitled thereto, not exceeding in the aggregate to or for any person the principal amount previously received for the benefit thereof.
of the person, together with the increase in it from an equitable apportionment of interest
realized from the social welfare fund.

When any such person dies or is finally discharged from the guardianship, care, custody,
and control of the commissioner of human services or the Direct Care and Treatment
executive board, the amount then remaining subject to use for the benefit of the person shall
be paid as soon as may be from the social welfare fund to the persons thereto entitled by
law.

EFFECTIVE DATE. This section is effective July 1, 2024.

Sec. 29. Laws 2023, chapter 61, article 8, section 1, the effective date, is amended to read:

This section is effective July 1, 2024.

256.92 COMMISSIONER OF HUMAN SERVICES AND DIRECT CARE AND
TREATMENT, ACCOUNTS.

It shall be the duty of the commissioner of human services, the Direct Care and Treatment
executive board, and the local social services agencies of the several counties of this state
to cause to be deposited with the commissioner of management and budget all moneys and
funds in their possession or under their control and designated by section 256.91 as and for
the social welfare fund; and all such moneys and funds shall be so deposited in the state
treasury as soon as received. The commissioner of human services, in consultation with the
Direct Care and Treatment executive board, shall keep books of account or other records
showing separately the principal amount received and deposited in the social welfare fund
for the benefit of any person, together with the name of such person, and the name and
address, if known to the commissioner of human services or the Direct Care and Treatment
executive board, of the person from whom such money was received; and, at least once
every two years, the amount of interest, if any, which the money has earned in the social
welfare fund shall be apportioned thereto and posted in the books of account or records to
the credit of such beneficiary.

The provisions of sections 256.88 to 256.92 shall not apply to any fund or money now
or hereafter deposited or otherwise disposed of pursuant to the lawful orders, decrees,
judgments, or other directions of any district court having jurisdiction thereof.

EFFECTIVE DATE. This section is effective July 1, 2024.

Sec. 30. Laws 2023, chapter 61, article 8, section 1, the effective date, is amended to read:

EFFECTIVE DATE. This section is effective January 1, 2025.

Sec. 31. Laws 2023, chapter 61, article 8, section 2, the effective date, is amended to read:

EFFECTIVE DATE. This section is effective January 1, 2025.

Sec. 32. Laws 2023, chapter 61, article 8, section 3, the effective date, is amended to read:

EFFECTIVE DATE. This section is effective January 1, 2025.

of the person, together with the increase in it from an equitable apportionment of interest
realized from the social welfare fund.

When any such person dies or is finally discharged from the guardianship, care, custody,
and control of the commissioner of human services or the Direct Care and Treatment
executive board, the amount then remaining subject to use for the benefit of the person shall
be paid as soon as may be from the social welfare fund to the persons thereto entitled by
law.

EFFECTIVE DATE. This section is effective July 1, 2024.

Sec. 28. Minnesota Statutes 2022, section 256.92, is amended to read:

This section is effective July 1, 2024.

256.92 COMMISSIONER OF HUMAN SERVICES AND DIRECT CARE AND
TREATMENT, ACCOUNTS.

It shall be the duty of the commissioner of human services, the Direct Care and Treatment
executive board, and the local social services agencies of the several counties of this state
to cause to be deposited with the commissioner of management and budget all moneys and
funds in their possession or under their control and designated by section 256.91 as and for
the social welfare fund; and all such moneys and funds shall be so deposited in the state
treasury as soon as received. The commissioner of human services, in consultation with the
Direct Care and Treatment executive board, shall keep books of account or other records
showing separately the principal amount received and deposited in the social welfare fund
for the benefit of any person, together with the name of such person, and the name and
address, if known to the commissioner of human services or the Direct Care and Treatment
executive board, of the person from whom such money was received; and, at least once
every two years, the amount of interest, if any, which the money has earned in the social
welfare fund shall be apportioned thereto and posted in the books of account or records to
the credit of such beneficiary.

The provisions of sections 256.88 to 256.92 shall not apply to any fund or money now
or hereafter deposited or otherwise disposed of pursuant to the lawful orders, decrees,
judgments, or other directions of any district court having jurisdiction thereof.

EFFECTIVE DATE. This section is effective July 1, 2024.

Sec. 27. Laws 2023, chapter 61, article 8, section 3, the effective date, is amended to read:

EFFECTIVE DATE. This section is effective January 1, 2025.

Sec. 26. Laws 2023, chapter 61, article 8, section 2, the effective date, is amended to read:

EFFECTIVE DATE. This section is effective January 1, 2025.

Sec. 25. Laws 2023, chapter 61, article 8, section 1, the effective date, is amended to read:

EFFECTIVE DATE. This section is effective January 1, 2025.

Sec. 24. Laws 2023, chapter 61, article 8, section 1, the effective date, is amended to read:

EFFECTIVE DATE. This section is effective January 1, 2025.
Sec. 32. Laws 2023, chapter 61, article 8, section 8, the effective date, is amended to read:

**EFFECTIVE DATE.** This section is effective January 1, 2024.

Sec. 34. Laws 2024, chapter 79, article 1, section 18, is amended to read:

**EFFECTIVE DATE.** This section is effective January 1, 2024.

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EFFECTIVE DATE. This section is effective July 1, 2024.

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EFFECTIVE DATE. This section is effective July 1, 2024.
Sec. 34. Laws 2024, chapter 79, article 1, section 23, is amended to read: commissioner of human services and the chief executive officer
(1) one member appointed by the Association of Counties; and
The executive board shall consist of no more than five members, all appointed by the governor. (a) The Direct Care and Treatment executive board consists of ten members with eight voting members and two nonvoting members. The eight voting members must include six members appointed by the governor with the advice and consent of the senate in accordance with paragraph (b), the chief executive officer, and the commissioner of human services or a designee. The two nonvoting members must be appointed in accordance with paragraph (c). Section 15.0597 applies to all executive board appointments except for the commissioner of human services and the chief executive officer.

(b) The executive board voting members appointed by the governor other than the commissioner of human services and the chief executive officer must meet the following qualifications:
(1) one member must be a licensed physician who is a psychiatrist or has experience in serving behavioral health patients;
(2) two members must have experience serving on a hospital or nonprofit board; and
(3) three members must have experience working: (i) as a public labor union representative (ii) in the delivery of behavioral health services or care coordination or in traditional healing practices; (iii) as a licensed health care professional; (iv) within health care administration; or (v) with residential services.
(c) The executive board nonvoting members must be appointed as follows:
(1) one member appointed by the Association of Counties; and
(2) one member who has an active role as a union representative representing staff at Direct Care and Treatment appointed by joint representatives of the following unions:
American Federation of State and Municipal Employees (AFSCME); Minnesota Association of Professional Employees (MAPE); Minnesota Nurses Association (MNA); Middle Management Association (MMA); and State Residential Schools Education Association (SRSEA).
(d) Membership on the board must include representation from outside the seven-county metropolitan area, as defined in section 473.121, subdivision 2.
(e) A voting member of the executive board must not be or must not have been within one year prior to appointment: (1) an employee of Direct Care and Treatment; (2) an employee of a county, including a county commissioner; (3) an active employee or

Sec. 23.

Subdivision 1. Establishment. The Direct Care and Treatment executive board of the Department of Direct Care and Treatment is established.

Subd. 2. Membership of the executive board. The executive board shall consist of no more than five members, all appointed by the governor. (a) The Direct Care and Treatment executive board consists of nine members with seven voting members and two nonvoting members. The seven voting members must include six members appointed by the governor with the advice and consent of the senate in accordance with paragraph (b) and the commissioner of human services or a designee. The two nonvoting members must be appointed in accordance with paragraph (c). Section 15.0597 applies to all executive board appointments except for the commissioner of human services.

(b) The executive board voting members appointed by the governor must meet the following qualifications:
(1) one member must be a licensed physician who is a psychiatrist or has experience in serving behavioral health patients;
(2) two members must have experience serving on a hospital or nonprofit board; and
(3) three members must have experience working: (i) in the delivery of behavioral health services or care coordination or in traditional healing practices; (ii) as a licensed health care professional; (iii) within health care administration; or (iv) with residential services.
(c) The executive board nonvoting members must be appointed as follows:
(1) one member appointed by the Association of Counties; and
(2) one member who has an active role as a union representative representing staff at Direct Care and Treatment appointed by joint representatives of the following unions:
American Federation of State, County and Municipal Employees (AFSCME); Minnesota Association of Professional Employees (MAPE); Minnesota Nurses Association (MNA); Middle Management Association (MMA); and State Residential Schools Education Association (SRSEA).
(d) Membership on the board must include representation from outside the seven-county metropolitan area, as defined in section 473.121, subdivision 2.
(e) A voting member of the executive board must not be or must not have been within one year prior to appointment: (1) an employee of Direct Care and Treatment; (2) an employee of a county, including a county commissioner; (3) an active employee or
representative of a labor union that represents employees of Direct Care and Treatment; or

(4) a member of the state legislature. This paragraph does not apply to the nonvoting members, the chief executive officer, or the commissioner of human services or designee.

Subd. 3. Qualifications of members. An executive board member must:

(1) be a representative, delivering behavioral health services or care coordination, or working as a licensed health care provider in an allied health profession or in health care administration.

(2) Except as otherwise provided for in this section, the membership terms and removal and filling of vacancies for the executive board are governed by section 15.0575.

Subd. 4. Accepting contributions or gifts. Compensation. (a) The executive board has the power and authority to accept, on behalf of the board, contributions and gifts of money and personal property for the use and benefit of the residents of the public institutions under the executive board’s control. All money and securities received must be deposited in the state treasury subject to the order of the executive board.

(b) Except as otherwise provided for in this section, the membership terms and removal and filling of vacancies for the executive board are governed by section 15.0575.

(c) The commissioner of management and budget must publish the daily compensation for executive board activities. Nonvoting members of the executive board may receive expenses in the same manner and amount as authorized by the commissioner’s plan adopted under section 43A.18, subdivision 2. Voting members who, as a result of time spent attending board meetings, incur child care expenses that would not otherwise have been incurred may be reimbursed for those expenses upon board authorization.

(4) a member of the state legislature. This paragraph does not apply to the nonvoting members, the chief executive officer, or the commissioner of human services or designee.

Subd. 3. Qualifications of members. An executive board member must:

(1) be a representative, delivering behavioral health services or care coordination, or working as a licensed health care provider in an allied health profession or in health care administration.

(2) Except as otherwise provided for in this section, the membership terms and removal and filling of vacancies for the executive board are governed by section 15.0575.

(d) Voting members of the executive board must adopt internal standards prescribing what constitutes a day spent on board activities for the purposes of making payments authorized under paragraph (b).

Subd. 4. Accepting contributions or gifts. Compensation. (a) The executive board has the power and authority to accept, on behalf of the board, contributions and gifts of money and personal property for the use and benefit of the residents of the public institutions under the executive board’s control. All money and securities received must be deposited in the state treasury subject to the order of the executive board.

(b) Except as otherwise provided for in this section, the membership terms and removal and filling of vacancies for the executive board are governed by section 15.0575.

(4) a member of the state legislature. This paragraph does not apply to the nonvoting members, the chief executive officer, or the commissioner of human services or designee.

Subd. 3. Qualifications of members. An executive board member must:

(1) be a representative, delivering behavioral health services or care coordination, or working as a licensed health care provider in an allied health profession or in health care administration.

(2) Except as otherwise provided for in this section, the membership terms and removal and filling of vacancies for the executive board are governed by section 15.0575.

(d) Voting members of the executive board must adopt internal standards prescribing what constitutes a day spent on board activities for the purposes of making payments authorized under paragraph (b).
(e) All other requirements under section 15.0575, subdivision 3, apply to the compensation of executive board members.

(f) This subdivision does not apply to the chief executive officer or the commissioner of human services or the commissioner's designee.

Subd. 5. Federal aid or block grants (Chair; officers). The executive board may comply with all conditions and requirements necessary to receive federal aid or block grants with respect to the establishment, construction, maintenance, equipment, or operation of adequate facilities and services consistent with the mission of the Department of Direct Care and Treatment. (a) The chief executive officer shall serve as the chair.

(b) The executive board must elect officers from among the voting membership appointed by the governor. The elected officers shall serve for one year.

Subd. 6. Operation of a communication systems account (Terms). (a) The executive board may operate a communication systems account established in Laws 1993, First Special Session chapter 1, article 1, section 2, subdivision 2, to manage shared communication costs necessary for the operation of the regional treatment centers the executive board supervises. Except for the commissioner of human services and the chief executive officer, executive board members must not serve more than two consecutive terms unless service beyond two consecutive terms is approved by the majority of voting members.

The chief executive officer and the commissioner of human services or the designee shall serve until replaced by the governor.

(b) Each account must be used to manage shared communication costs necessary for the operations of the regional treatment centers the executive board supervises. The executive board may distribute the costs of operating and maintaining communication systems to participants in a manner that reflects actual usage. Costs may include acquisition, licensing, insurance, maintenance, repair, staff time, and other costs as determined by the executive board. An executive board member may resign at any time by giving written notice to the executive board.

(c) Nonprofit organizations and state, county, and local government agencies involved in the operation of regional treatment centers the executive board supervises may participate in the use of the executive board’s communication technology and share in the cost of operation. The initial term of the member appointed under subdivision 2, paragraph (b), clause (1), is two years. The initial term of the members appointed under subdivision 2, paragraph (b), clause (2), is three years. The initial term of the members appointed under subdivision 2, paragraph (b), clause (3), is three years. The initial term of the members appointed under subdivision 2, paragraph (b), clause (4), is three years. The initial term of the members appointed under subdivision 2, paragraph (b), clause (5), is three years.
subdivision 2, paragraph (b), clause (3), and the members appointed under subdivision 2, paragraph (c), is four years.

(d) The executive board may accept on behalf of the state any gift, bequest, devise, personal property of any kind, or money tendered to the state for any lawful purpose pertaining to the communication activity under this section. Any money received for this purpose must be deposited into the executive board's communication systems account. Money collected by the executive board for the use of communication systems must be deposited into the state communication systems account and is appropriated to the executive board for purposes of this section. After the initial term, the term length of all appointed executive board members is four years.

Subd. 7. Conflicts of interest. Executive board members must recuse themselves from discussion of and voting on an official matter if the executive board member has a conflict of interest. A conflict of interest means an association, including a financial or personal association, that has the potential to bias or have the appearance of biasing an executive board member's decision in matters related to Direct Care and Treatment or the conduct of activities under this chapter.

Subd. 8. Meetings. The executive board must meet at least four times per fiscal year at a place and time determined by the executive board.

Subd. 9. Quorum. A majority of the voting members of the executive board constitutes a quorum. The affirmative vote of a majority of the voting members of the executive board is necessary and sufficient for action taken by the executive board.

Subd. 10. Immunity; indemnification. (a) Members of the executive board are immune from civil liability for any act or omission occurring within the scope of their duties under this chapter.

(b) When performing executive board duties or actions, members of the executive board are employees of the state for purposes of indemnification under section 3.736, subdivision 2, paragraph (b), clause (3), and the members appointed under subdivision 2, paragraph (c), is four years.

Subd. 11. Rulemaking. (a) The executive board is authorized to adopt, amend, and repeal rules in accordance with chapter 14, under the executive board's authority to implement this chapter or any responsibilities of Direct Care and Treatment specified in state law.

(b) Until July 1, 2030, the executive board may adopt rules using the expedited rulemaking process in section 14.389.

(c) All orders, rules, delegations, permits, and other privileges issued or granted by the Department of Human Services with respect to any function of Direct Care and Treatment and in effect at the time of the establishment of Direct Care and Treatment shall continue in effect as if such establishment had not occurred. The executive board may amend or repeal rules in accordance with section 15.039, all orders, rules, delegations, permits, and other privileges issued or granted by the Department of Human Services with respect to any function of Direct Care and Treatment and in effect at the time of the establishment of Direct Care and Treatment shall continue in effect as if such establishment had not occurred. The
repeal rules applicable to Direct Care and Treatment that were established by the Department of Human Services in accordance with chapter 14.

EFFECTIVE DATE. This section is effective July 1, 2024.

Sec. 36. Laws 2024, chapter 79, article 1, section 24, is amended to read:
Subdivision 1. Maintenance of forensic services. (a) The executive board shall create and maintain forensic services programs.
(b) The executive board must provide forensic services in coordination with counties and other vendors.
(c) Forensic services must include specialized inpatient programs at secure treatment facilities, consultive services, aftercare services, community-based services and programs, transition services, nursing home services, or other services consistent with the mission of the Department of Direct Care and Treatment.
(d) The executive board shall may adopt rules to carry out the provision of this section and to govern the operation of the services and programs under the direct administrative authority of the executive board.

EFFECTIVE DATE. This section is effective July 1, 2024.

Sec. 37. Laws 2024, chapter 79, article 1, section 25, subdivision 3, is amended to read:
Subd. 3. Comprehensive system of services. The establishment of state-operated, community-based programs must be within the context of a comprehensive definition of the role of state-operated services in the state. The role of state-operated services must be defined within the context of a comprehensive system of services for persons with developmental disability.

EFFECTIVE DATE. This section is effective July 1, 2024.

The revisor of statutes shall renumber each provision of Minnesota Statutes listed in column A as amended in this act to the number listed in column B.

<table>
<thead>
<tr>
<th>Column A</th>
<th>Column B</th>
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<tbody>
<tr>
<td>245.036</td>
<td>246C.16, subdivision 1</td>
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<tr>
<td>245.037</td>
<td>246C.16, subdivision 2</td>
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executive board may amend or repeal rules applicable to Direct Care and Treatment that were established by the Department of Human Services in accordance with chapter 14.

(d) The executive board must not adopt rules that go into effect or enforce rules prior to July 1, 2025.

EFFECTIVE DATE. This section is effective July 1, 2024.

Sec. 35. Laws 2024, chapter 79, article 1, section 24, is amended to read:
Sec. 24. 246C.10 FORENSIC SERVICES.
Subdivision 1. Maintenance of forensic services. (a) The executive board shall create and maintain forensic services programs.
(b) The executive board must provide forensic services in coordination with counties and other vendors.
(c) Forensic services must include specialized inpatient programs at secure treatment facilities, consultive services, aftercare services, community-based services and programs, transition services, nursing home services, or other services consistent with the mission of the Department of Direct Care and Treatment.
(d) The executive board shall may adopt rules to carry out the provision of this section and to govern the operation of the services and programs under the direct administrative authority of the executive board.

EFFECTIVE DATE. This section is effective July 1, 2024.

Sec. 36. Laws 2024, chapter 79, article 1, section 25, subdivision 3, is amended to read:
Subd. 3. Comprehensive system of services. The establishment of state-operated, community-based programs must be within the context of a comprehensive definition of the role of state-operated services in the state. The role of state-operated services must be defined within the context of a comprehensive system of services for persons with developmental disability.

EFFECTIVE DATE. This section is effective July 1, 2024.

Sec. 37. Laws 2024, chapter 79, article 10, section 1, is amended to read:
Section 1. REVISOR INSTRUCTION.
The revisor of statutes shall renumber each provision of Minnesota Statutes listed in column A as amended in this act to the number listed in column B.

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Sec. 38. Laws 2024, chapter 79, article 10, section 6, is amended to read:

authority and responsibilities for Direct Care and Treatment are transferred to the executive board in accordance with Minnesota Statutes, section 246C.04.

Subd. 1. (a) The initial appointments of the members of the Direct Care and Treatment executive board under Minnesota Statutes, section 246C.06, must be made by January 1, 2025.
(b) Prior to the first Compensation Council determination of the daily compensation rate for voting members of the executive board under Minnesota Statutes, section 246C.06, subdivision 4, paragraph (b), voting members of the executive board must be paid the per diem rate provided for in Minnesota Statutes, section 15.0575, subdivision 3, paragraph (a).
(c) The executive board is exempt from Minnesota Statutes, section 13D.01, until the authority and responsibilities for Direct Care and Treatment are transferred to the executive board in accordance with Minnesota Statutes, section 246C.04.

Subd. 2. Prior to the first Compensation Council determination under Minnesota Statutes, section 15A.082, of the salary of the chief executive officer, the salary of the chief executive officer must equal the amount paid to the chief executive officer of the direct care and treatment division of the Department of Human Services as of June 30, 2025.
(b) Prior to the first Compensation Council determination under Minnesota Statutes, section 246C.07, the chief executive officer of the direct care and treatment division of the Department of Human Services holding that position at the time the initial appointment is made by the board. The initial appointment of the chief executive officer must be made by the executive board by July 1, 2025. The initial appointment of the chief executive officer is subject to confirmation by the senate.

Subd. 3. Commissioner of human services to consult. In preparing the budget estimates required under Minnesota Statutes, section 16A.10, for the direct care and treatment division for the 2026-2027 biennial budget and any legislative proposals for the 2025 legislative session that involve direct care and treatment operations, the commissioner of human services must consult with the chief executive officer designee and the Direct Care and Treatment Executive Board and Chief Executive Officer.
executive board before submitting the budget estimates or legislative proposals. If the executive board is not appointed by the date the budget estimates must be submitted to the commissioner of management and budget, the commissioner of human services must provide the executive board with a summary of the budget estimates that were submitted.

**EFFECTIVE DATE.** This section is effective July 1, 2024.

The revisor of statutes, in consultation with the House Research Department; the Office of Senate Counsel, Research, and Fiscal Analysis; the Department of Human Services; and other Minnesota Statutes, chapter 246C. The revisor may make technical and other necessary changes to sentence structure to preserve the meaning of the text.

**EFFECTIVE DATE.** This section is effective July 1, 2024.

The revisor of statutes shall change the term "Department of Human Services" to "Direct Care and Treatment" wherever the term appears in respect to the governmental entity with programmatic direction and fiscal control over state-operated services, programs, or facilities under Minnesota Statutes, chapter 246C. The revisor may make technical and other necessary changes to sentence structure to preserve the meaning of the text.

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

The revisor of statutes shall change the term "Department of Direct Care and Treatment" to "Direct Care and Treatment" wherever the term appears in respect to the governmental entity with programmatic direction and fiscal control over state-operated services, programs, or facilities under Minnesota Statutes, chapter 246C. The revisor may make technical and other necessary changes to sentence structure to preserve the meaning of the text.

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

The revisor of statutes, in consultation with the House Research Department; the Office of Senate Counsel, Research, and Fiscal Analysis; the Department of Human Services; and Direct Care and Treatment, shall make necessary cross-reference changes to conform with statutory changes made by other law in the 2024 regular legislative session.

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

(a) Minnesota Statutes 2022, section 246.41, is repealed.

(b) Minnesota Statutes 2023 Supplement, section 246C.03, is repealed.

**EFFECTIVE DATE.** This section is effective July 1, 2024.

budget estimates or legislative proposals. If the executive board is not appointed by the date the budget estimates must be submitted to the commissioner of management and budget, the commissioner of human services must provide the executive board with a summary of the budget estimates that were submitted.

**EFFECTIVE DATE.** This section is effective July 1, 2024.

The revisor of statutes, in consultation with the House Research Department; the Office of Senate Counsel, Research, and Fiscal Analysis; the Department of Human Services; and other Minnesota Statutes, chapter 246C. The revisor may make technical and other necessary changes to sentence structure to preserve the meaning of the text.

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The revisor of statutes shall change the term "Department of Human Services" to "Direct Care and Treatment" wherever the term appears in respect to the governmental entity with programmatic direction and fiscal control over state-operated services, programs, or facilities under Minnesota Statutes, chapter 246C. The revisor may make technical and other necessary changes to sentence structure to preserve the meaning of the text.

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

The revisor of statutes, in consultation with the House Research Department; the Office of Senate Counsel, Research, and Fiscal Analysis; the Department of Human Services; and Direct Care and Treatment, shall make necessary cross-reference changes to conform with statutory changes made by other law in the 2024 regular legislative session.

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