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State of Minnesota  
**HOUSE OF REPRESENTATIVES**

EIGHTY-NINTH SESSION

**H. F. No. 1677**

03/10/2015 Authored by Albright

The bill was read for the first time and referred to the Committee on Transportation Policy and Finance

03/17/2015 Adoption of Report: Amended and re-referred to the Committee on Government Operations and Elections Policy

1.1 A bill for an act  
1.2 relating to human services; providing for human services policy modifications;  
1.3 authorizing the use of unmarked vehicles; modifying requirements for  
1.4 background study expenses; modifying cost of care requirements for persons  
1.5 committed by tribal courts; requiring compliance with the Minnesota Indian  
1.6 Family Preservation Act; requiring documentation of nonemergency medical  
1.7 transportation services; continuing a council; authorizing rulemaking; amending  
1.8 Minnesota Statutes 2014, sections 168.012, subdivision 1; 245C.10, by adding  
1.9 a subdivision; 253B.212, subdivision 2, by adding a subdivision; 256B.0625,  
1.10 by adding a subdivision; 260C.168; 471.346; proposing coding for new law in  
1.11 Minnesota Statutes, chapter 256.

1.12 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MINNESOTA:

1.13 Section 1. Minnesota Statutes 2014, section 168.012, subdivision 1, is amended to read:

1.14 Subdivision 1. **Vehicles exempt from tax, fees, or plate display.** (a) The following  
1.15 vehicles are exempt from the provisions of this chapter requiring payment of tax and  
1.16 registration fees, except as provided in subdivision 1c:

1.17 (1) vehicles owned and used solely in the transaction of official business by the  
1.18 federal government, the state, or any political subdivision;

1.19 (2) vehicles owned and used exclusively by educational institutions and used solely  
1.20 in the transportation of pupils to and from those institutions;

1.21 (3) vehicles used solely in driver education programs at nonpublic high schools;

1.22 (4) vehicles owned by nonprofit charities and used exclusively to transport disabled  
1.23 persons for charitable, religious, or educational purposes;

1.24 (5) vehicles owned by nonprofit charities and used exclusively for disaster response  
1.25 and related activities;

2.1 (6) vehicles owned by ambulance services licensed under section 144E.10 that  
2.2 are equipped and specifically intended for emergency response or providing ambulance  
2.3 services; and

2.4 (7) vehicles owned by a commercial driving school licensed under section 171.34,  
2.5 or an employee of a commercial driving school licensed under section 171.34, and the  
2.6 vehicle is used exclusively for driver education and training.

2.7 (b) Provided the general appearance of the vehicle is unmistakable, the following  
2.8 vehicles are not required to register or display number plates:

2.9 (1) vehicles owned by the federal government;

2.10 (2) fire apparatuses, including fire-suppression support vehicles, owned or leased by  
2.11 the state or a political subdivision;

2.12 (3) police patrols owned or leased by the state or a political subdivision; and

2.13 (4) ambulances owned or leased by the state or a political subdivision.

2.14 (c) Unmarked vehicles used in general police work, liquor investigations, or arson  
2.15 investigations, and passenger automobiles, pickup trucks, and buses owned or operated by  
2.16 the Department of Corrections or by conservation officers of the Division of Enforcement  
2.17 and Field Service of the Department of Natural Resources, must be registered and must  
2.18 display appropriate license number plates, furnished by the registrar at cost. Original and  
2.19 renewal applications for these license plates authorized for use in general police work and  
2.20 for use by the Department of Corrections or by conservation officers must be accompanied  
2.21 by a certification signed by the appropriate chief of police if issued to a police vehicle,  
2.22 the appropriate sheriff if issued to a sheriff's vehicle, the commissioner of corrections if  
2.23 issued to a Department of Corrections vehicle, or the appropriate officer in charge if  
2.24 issued to a vehicle of any other law enforcement agency. The certification must be on a  
2.25 form prescribed by the commissioner and state that the vehicle will be used exclusively  
2.26 for a purpose authorized by this section.

2.27 (d) Unmarked vehicles used by the Departments of Revenue and Labor and Industry,  
2.28 fraud unit, in conducting seizures or criminal investigations must be registered and must  
2.29 display passenger vehicle classification license number plates, furnished at cost by the  
2.30 registrar. Original and renewal applications for these passenger vehicle license plates  
2.31 must be accompanied by a certification signed by the commissioner of revenue or the  
2.32 commissioner of labor and industry. The certification must be on a form prescribed by  
2.33 the commissioner and state that the vehicles will be used exclusively for the purposes  
2.34 authorized by this section.

2.35 (e) Unmarked vehicles used by the Division of Disease Prevention and Control of the  
2.36 Department of Health must be registered and must display passenger vehicle classification

3.1 license number plates. These plates must be furnished at cost by the registrar. Original  
3.2 and renewal applications for these passenger vehicle license plates must be accompanied  
3.3 by a certification signed by the commissioner of health. The certification must be on a  
3.4 form prescribed by the commissioner and state that the vehicles will be used exclusively  
3.5 for the official duties of the Division of Disease Prevention and Control.

3.6 (f) Unmarked vehicles used by staff of the Gambling Control Board in gambling  
3.7 investigations and reviews must be registered and must display passenger vehicle  
3.8 classification license number plates. These plates must be furnished at cost by the  
3.9 registrar. Original and renewal applications for these passenger vehicle license plates must  
3.10 be accompanied by a certification signed by the board chair. The certification must be on a  
3.11 form prescribed by the commissioner and state that the vehicles will be used exclusively  
3.12 for the official duties of the Gambling Control Board.

3.13 (g) Unmarked vehicles used in general investigation, surveillance, supervision, and  
3.14 monitoring by the Department of Human Services' Office of Special Investigations' staff;  
3.15 the Minnesota sex offender program's executive director and the executive director's  
3.16 staff; and the Office of Inspector General's staff, including, but not limited to, county  
3.17 fraud prevention investigators, must be registered and must display passenger vehicle  
3.18 classification license number plates, furnished by the registrar at cost. Original and  
3.19 renewal applications for passenger vehicle license plates must be accompanied by a  
3.20 certification signed by the commissioner of human services. The certification must be on a  
3.21 form prescribed by the commissioner and state that the vehicles must be used exclusively  
3.22 for the official duties of the Office of Special Investigations' staff; the Minnesota sex  
3.23 offender program's executive director and the executive director's staff; and the Office  
3.24 of the Inspector General's staff, including, but not limited to, contract and county fraud  
3.25 prevention investigators.

3.26 (h) Each state hospital and institution for persons who are mentally ill and  
3.27 developmentally disabled may have one vehicle without the required identification on  
3.28 the sides of the vehicle. The vehicle must be registered and must display passenger  
3.29 vehicle classification license number plates. These plates must be furnished at cost by the  
3.30 registrar. Original and renewal applications for these passenger vehicle license plates must  
3.31 be accompanied by a certification signed by the hospital administrator. The certification  
3.32 must be on a form prescribed by the commissioner and state that the vehicles will be used  
3.33 exclusively for the official duties of the state hospital or institution.

3.34 (i) Each county social service agency may have vehicles used for child and  
3.35 vulnerable adult protective services without the required identification on the sides of the  
3.36 vehicle. The vehicles must be registered and must display passenger vehicle classification

4.1 license number plates. These plates must be furnished at cost by the registrar. Original  
4.2 and renewal applications for these passenger vehicle license plates must be accompanied  
4.3 by a certification signed by the agency administrator. The certification must be on a form  
4.4 prescribed by the commissioner and state that the vehicles will be used exclusively for the  
4.5 official duties of the social service agency.

4.6 (j) Unmarked vehicles used in general investigation, surveillance, supervision, and  
4.7 monitoring by tobacco inspector staff of the Department of Human Services' Alcohol and  
4.8 Drug Abuse Division for the purposes of tobacco inspections, investigations, and reviews  
4.9 must be registered and must display passenger vehicle classification license number  
4.10 plates, furnished at cost by the registrar. Original and renewal applications for passenger  
4.11 vehicle license plates must be accompanied by a certification signed by the commissioner  
4.12 of human services. The certification must be on a form prescribed by the commissioner  
4.13 and state that the vehicles will be used exclusively by tobacco inspector staff for the  
4.14 duties specified in this paragraph.

4.15 (k) All other motor vehicles must be registered and display tax-exempt number  
4.16 plates, furnished by the registrar at cost, except as provided in subdivision 1c. All  
4.17 vehicles required to display tax-exempt number plates must have the name of the state  
4.18 department or political subdivision, nonpublic high school operating a driver education  
4.19 program, licensed commercial driving school, or other qualifying organization or entity,  
4.20 plainly displayed on both sides of the vehicle. This identification must be in a color  
4.21 giving contrast with that of the part of the vehicle on which it is placed and must endure  
4.22 throughout the term of the registration. The identification must not be on a removable  
4.23 plate or placard and must be kept clean and visible at all times; except that a removable  
4.24 plate or placard may be utilized on vehicles leased or loaned to a political subdivision or  
4.25 to a nonpublic high school driver education program.

4.26 Sec. 2. Minnesota Statutes 2014, section 245C.10, is amended by adding a subdivision  
4.27 to read:

4.28 Subd. 1a. **Expenses.** Section 181.645 does not apply to background studies  
4.29 completed under this chapter.

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

4.31 Sec. 3. Minnesota Statutes 2014, section 253B.212, is amended by adding a  
4.32 subdivision to read:

4.33 Subd. 1b. **Cost of care; commitment by tribal court order; any federally**  
4.34 **recognized Indian tribe within the state of Minnesota.** The commissioner of human

5.1 services may contract with and receive payment from the Indian Health Service of the  
 5.2 United States Department of Health and Human Services for the care and treatment of  
 5.3 those members of any federally recognized Indian tribe within the state, who have been  
 5.4 committed by tribal court order to the Indian Health Service for care and treatment of  
 5.5 mental illness, developmental disability, or chemical dependency. The tribe may also  
 5.6 contract directly with the commissioner for treatment of those members of any federally  
 5.7 recognized Indian tribe within the state who have been committed by tribal court order  
 5.8 to the respective tribal Department of Health for care and treatment of mental illness,  
 5.9 developmental disability, or chemical dependency. The contract shall provide that the  
 5.10 Indian Health Service and any federally recognized Indian tribe within the state shall not  
 5.11 transfer any person for admission to a regional center unless the commitment procedure  
 5.12 utilized by the tribal court provided due process protections similar to those afforded  
 5.13 by sections 253B.05 to 253B.10.

5.14 Sec. 4. Minnesota Statutes 2014, section 253B.212, subdivision 2, is amended to read:

5.15 Subd. 2. **Effect given to tribal commitment order.** When, under an agreement  
 5.16 entered into pursuant to subdivisions 1 ~~or~~, 1a, or 1b, the Indian Health Service or the  
 5.17 placing tribe applies to a regional center for admission of a person committed to the  
 5.18 jurisdiction of the health service by the tribal court as a person who is mentally ill,  
 5.19 developmentally disabled, or chemically dependent, the commissioner may treat the  
 5.20 patient with the consent of the Indian Health Service or the placing tribe.

5.21 A person admitted to a regional center pursuant to this section has all the rights  
 5.22 accorded by section 253B.03. In addition, treatment reports, prepared in accordance with  
 5.23 the requirements of section 253B.12, subdivision 1, shall be filed with the Indian Health  
 5.24 Service or the placing tribe within 60 days of commencement of the patient's stay at the  
 5.25 facility. A subsequent treatment report shall be filed with the Indian Health Service or  
 5.26 the placing tribe within six months of the patient's admission to the facility or prior to  
 5.27 discharge, whichever comes first. Provisional discharge or transfer of the patient may be  
 5.28 authorized by the head of the treatment facility only with the consent of the Indian Health  
 5.29 Service or the placing tribe. Discharge from the facility to the Indian Health Service or the  
 5.30 placing tribe may be authorized by the head of the treatment facility after notice to and  
 5.31 consultation with the Indian Health Service or the placing tribe.

5.32 Sec. 5. **[256.041] CULTURAL AND ETHNIC COMMUNITIES LEADERSHIP**  
 5.33 **COUNCIL.**

6.1 Subdivision 1. **Establishment; purpose.** There is hereby established the Cultural  
6.2 and Ethnic Communities Leadership Council for the Department of Human Services. The  
6.3 purpose of the council is to advise the commissioner of human services on reducing  
6.4 disparities that affect racial and ethnic groups.

6.5 Subd. 2. **Members.** (a) The council must consist of:

6.6 (1) the chairs and ranking minority members of the committees in the house of  
6.7 representatives and the senate with jurisdiction over human services; and

6.8 (2) no fewer than 15 and no more than 25 members appointed by the commissioner  
6.9 of human services, in consultation with county, tribal, cultural, and ethnic communities;  
6.10 diverse program participants; and parent representatives from these communities.

6.11 (b) In making appointments under this section, the commissioner shall give priority  
6.12 consideration to public members of the legislative councils of color established under  
6.13 chapter 3.

6.14 (c) Members must be appointed to allow for representation of the following groups:

6.15 (1) racial and ethnic minority groups;

6.16 (2) the American Indian community, which must be represented by two members;

6.17 (3) culturally and linguistically specific advocacy groups and service providers;

6.18 (4) human services program participants;

6.19 (5) public and private institutions;

6.20 (6) parents of human services program participants;

6.21 (7) members of the faith community;

6.22 (8) Department of Human Services employees; and

6.23 (9) any other group the commissioner deems appropriate to facilitate the goals  
6.24 and duties of the council.

6.25 Subd. 3. **Guidelines.** The commissioner shall direct the development of guidelines  
6.26 defining the membership of the council; setting out definitions; and developing duties of  
6.27 the commissioner, the council, and council members regarding racial and ethnic disparities  
6.28 reduction. The guidelines must be developed in consultation with:

6.29 (1) the chairs of relevant committees; and

6.30 (2) county, tribal, and cultural communities and program participants from these  
6.31 communities.

6.32 Subd. 4. **Chair.** The commissioner shall appoint a chair.

6.33 Subd. 5. **Terms for first appointees.** The initial members appointed shall serve  
6.34 until January 15, 2016.

7.1 Subd. 6. **Terms.** A term shall be for two years and appointees may be reappointed  
7.2 to serve two additional terms. The commissioner shall make appointments to replace  
7.3 members vacating their positions by January 15 of each year.

7.4 Subd. 7. **Duties of commissioner.** (a) The commissioner of human services or the  
7.5 commissioner's designee shall:

7.6 (1) maintain the council established in this section;

7.7 (2) supervise and coordinate policies for persons from racial, ethnic, cultural,  
7.8 linguistic, and tribal communities who experience disparities in access and outcomes;

7.9 (3) approve compensation to public members of the council as recommended by the  
7.10 council chair;

7.11 (4) identify human services rules or statutes affecting persons from racial, ethnic,  
7.12 cultural, linguistic, and tribal communities that may need to be revised;

7.13 (5) investigate and implement cost-effective models of service delivery such as  
7.14 careful adaptation of clinically proven services that constitute one strategy for increasing the  
7.15 number of culturally relevant services available to currently underserved populations; and

7.16 (6) based on recommendations of the council, review identified department  
7.17 policies that maintain racial, ethnic, cultural, linguistic, and tribal disparities, and make  
7.18 adjustments to ensure those disparities are not perpetuated.

7.19 (b) The commissioner of human services or the commissioner's designee shall  
7.20 consult with the council and receive recommendations from the council when meeting the  
7.21 requirements in this subdivision.

7.22 Subd. 8. **Duties of council.** The council shall:

7.23 (1) recommend to the commissioner for review identified policies in the Department  
7.24 of Human Services that maintain racial, ethnic, cultural, linguistic, and tribal disparities;

7.25 (2) identify issues regarding disparities by engaging diverse populations in human  
7.26 services programs;

7.27 (3) engage in mutual learning essential for achieving human services parity and  
7.28 optimal wellness for service recipients;

7.29 (4) raise awareness about human services disparities to the legislature and media;

7.30 (5) provide technical assistance and consultation support to counties, private  
7.31 nonprofit agencies, and other service providers to build their capacity to provide equitable  
7.32 human services for persons from racial, ethnic, cultural, linguistic, and tribal communities  
7.33 who experience disparities in access and outcomes;

7.34 (6) provide technical assistance to promote statewide development of culturally  
7.35 and linguistically appropriate, accessible, and cost-effective human services and related  
7.36 policies;

8.1 (7) provide training and outreach to facilitate access to culturally and linguistically  
 8.2 appropriate, accessible, and cost-effective human services to prevent disparities;

8.3 (8) facilitate culturally appropriate and culturally sensitive admissions, continued  
 8.4 services, discharges, and utilization review for human services agencies and institutions;

8.5 (9) form work groups to help carry out the duties of the council that include, but are  
 8.6 not limited to, persons who provide and receive services and representatives of advocacy  
 8.7 groups, and provide the work groups with clear guidelines, standardized parameters, and  
 8.8 tasks for the work groups to accomplish;

8.9 (10) promote information sharing in the human services community and statewide;  
 8.10 and

8.11 (11) by February 15 each year, prepare and submit to the chairs and ranking minority  
 8.12 members of the committees in the house of representatives and the senate with jurisdiction  
 8.13 over human services a report that summarizes the activities of the council, identifies  
 8.14 the major problems and issues confronting racial and ethnic groups in accessing human  
 8.15 services, makes recommendations to address issues, and lists the specific objectives that  
 8.16 the council seeks to attain during the next biennium. The report must also include a list of  
 8.17 programs, groups, and grants used to reduce disparities, and statistically valid reports of  
 8.18 outcomes on the reduction of the disparities.

8.19 Subd. 9. **Duties of council members.** The members of the council shall:

8.20 (1) attend and participate in scheduled meetings and be prepared by reviewing  
 8.21 meeting notes;

8.22 (2) maintain open communication channels with respective constituencies;

8.23 (3) identify and communicate issues and risks that could impact the timely  
 8.24 completion of tasks;

8.25 (4) collaborate on disparity reduction efforts;

8.26 (5) communicate updates of the council's work progress and status on the  
 8.27 Department of Human Services Web site; and

8.28 (6) participate in any activities the council or chair deems appropriate and necessary  
 8.29 to facilitate the goals and duties of the council.

8.30 Subd. 10. **Expiration.** The council expires on June 30, 2020.

8.31 **EFFECTIVE DATE.** This section is effective retroactively from March 15, 2015.

8.32 Sec. 6. Minnesota Statutes 2014, section 256B.0625, is amended by adding a  
 8.33 subdivision to read:

8.34 Subd. 17b. **Documentation required.** (a) As a condition for payment,  
 8.35 nonemergency medical transportation providers must document each occurrence of a

9.1 service provided to a recipient according to this subdivision. Providers must maintain  
9.2 odometer and other records sufficient to distinguish individual trips with specific vehicles  
9.3 and drivers. The documentation may be maintained in an electronic or paper form but  
9.4 must be made available and produced upon request. Program funds paid for transportation  
9.5 that is not documented according to this subdivision shall be recovered by the department.

9.6 (b) A nonemergency medical transportation provider must compile transportation  
9.7 records that meet the following requirements:

9.8 (1) the record must be in English and must be legible according to the standard  
9.9 of a reasonable person;

9.10 (2) the recipient's name must be on each page of the record; and

9.11 (3) each entry in the record must document:

9.12 (i) the date on which the entry is made;

9.13 (ii) the date or dates the service is provided;

9.14 (iii) the printed last name, first name, and middle initial of the driver;

9.15 (iv) the signature of the driver attesting to the following: "I certify that I have  
9.16 accurately reported in this mileage log the miles I actually drove and the dates and times I  
9.17 actually drove them. I understand that misreporting the miles driven and hours worked is  
9.18 fraud for which I could face criminal prosecution or civil proceedings.";

9.19 (v) the signature of the recipient attesting to the following: "I certify that I received  
9.20 the reported transportation service.";

9.21 (vi) the description and address of both the origin and destination, and the mileage  
9.22 for the most direct route from the origin to the destination;

9.23 (vii) the mode of transportation in which the service is provided;

9.24 (viii) the license plate number of the vehicle used to transport the recipient;

9.25 (ix) whether the recipient is ambulatory or nonambulatory until the modes under  
9.26 section 256B.0625, subdivision 17, are implemented;

9.27 (x) the time of the pickup and the time of the drop-off with "a.m." and "p.m."  
9.28 designations;

9.29 (xi) the number of medical assistance occupants in the vehicle;

9.30 (xii) the name of the extra attendant when an extra attendant is used to provide  
9.31 special transportation service; and

9.32 (xiii) the electronic source documentation used to calculate driving directions and  
9.33 mileage.

10.1 Sec. 7. Minnesota Statutes 2014, section 260C.168, is amended to read:

10.2 **260C.168 COMPLIANCE WITH INDIAN CHILD WELFARE ACT AND**  
10.3 **MINNESOTA INDIAN FAMILY PRESERVATION ACT.**

10.4 The provisions of this chapter must be construed consistently with the Indian  
10.5 Child Welfare Act of 1978, United States Code, title 25, sections 1901 to 1963, and the  
10.6 Minnesota Indian Family Preservation Act, sections 260.751 to 260.835.

10.7 Sec. 8. Minnesota Statutes 2014, section 471.346, is amended to read:

10.8 **471.346 PUBLICLY OWNED AND LEASED VEHICLES IDENTIFIED.**

10.9 All motor vehicles owned or leased by a statutory or home rule charter city, county,  
10.10 town, school district, metropolitan or regional agency, or other political subdivision,  
10.11 except for unmarked vehicles used in general police and fire work, arson investigations,  
10.12 ~~and~~ Department of Human Services investigations ~~including~~ conducted by central office  
10.13 staff, and county fraud prevention investigations conducted by county or contract fraud  
10.14 prevention investigators, shall have the name of the political subdivision plainly displayed  
10.15 on both sides of the vehicle in letters not less than 2-1/2 inches high and one-half inch wide.  
10.16 The identification must be in a color that contrasts with the color of the part of the vehicle  
10.17 on which it is placed and must remain on and be clean and visible throughout the period of  
10.18 which the vehicle is owned or leased by the political subdivision. The identification must  
10.19 not be on a removable plate or placard except on leased vehicles but the plate or placard  
10.20 must not be removed from a leased vehicle at any time during the term of the lease.

10.21 Sec. 9. **OBSOLETE RULES REGARDING PRIOR AUTHORIZATIONS FOR**  
10.22 **MEDICAL SUPPLIES AND EQUIPMENT.**

10.23 (a) The commissioner of human services shall amend Minnesota Rules, part  
10.24 9505.0310, subpart 3, to remove the following medical supplies and equipment from the  
10.25 list for which prior authorization is required as a condition of medical assistance payment:  
10.26 a nondurable medical supply that costs more than the performance agreement limit;  
10.27 and durable medical equipment, prostheses, and orthoses if the cost of their purchase,  
10.28 projected cumulative rental for the period of the recipient's expected use, or repairs  
10.29 exceeds the performance agreement limit.

10.30 (b) The commissioner of human services shall amend Minnesota Rules, part  
10.31 9505.0365, subpart 3, to remove the requirement that prior authorization for an ambulatory  
10.32 aid is required for an aid that costs in excess of the limits specified in the provider's  
10.33 performance agreement.

11.1           (c) The commissioner may use the good cause exemption in Minnesota Statutes,  
11.2 section 14.388, subdivision 1, clause (3), to adopt rules under this section. Minnesota  
11.3 Statutes, section 14.386, does not apply except as provided in Minnesota Statutes, section  
11.4 14.388.