SIXTY-FOURTH LEGISLATIVE DAY

St. Paul, Minnesota, Monday, April 27, 2026

The Senate met at 11:00 a.m. and was called to order by the President.

CALL OF THE SENATE

Senator Murphy imposed a call of the Senate. The Sergeant at Arms was instructed to bring in the absent members.

Prayer was offered by the Chaplain, Bishop Richard Howell, Jr.

The members of the Senate gave the pledge of allegiance to the flag of the United States of America.

The roll was called, and the following Senators were present:

Abeler	Duckworth	Housley	Mann	Putnam
Bahr	Farnsworth	Jasinski	Marty	Rarick
Boldon	Fateh	Johnson Stewart	Mathews	Rasmusson
Carlson	Frentz	Klein	Maye Quade	Rest
Champion	Green	Koran	McEwen	Seeberger
Clark	Gruenhagen	Kreun	Miller	Utke
Coleman	Gustafson	Kunesh	Mohamed	Weber
Cwodzinski	Hauschild	Kupec	Murphy	Wesenberg
Dahms	Hawj	Lang	Oumou Verbeten	Westlin
Dibble	Heintzeman	Latz	Pappas	Westrom
Dornink	Hemmingsen-Jaeger	Lieske	Pha	Wiklund
Draheim	Hoffman	Limmer	Port	Xiong
Drazkowski	Holmstrom	Lucero	Pratt	

The President declared a quorum present.

The reading of the Journal was dispensed with and the Journal, as printed and corrected, was approved.

MESSAGES FROM THE HOUSE

Mr. President:

I have the honor to announce the passage by the House of the following Senate Files, herewith returned:

S.F. No. 3622: A bill for an act relating to real property; making clarifying, technical, and conforming changes to the Minnesota Common Interest Ownership Act; providing for certain

exemptions; providing for number of directors for certain associations; clarifying certain insurance policies; amending Minnesota Statutes 2024, sections 515B.1-102; 515B.1-103; 515B.1-116; 515B.2-101; 515B.2-102; 515B.2-104; 515B.2-105; 515B.2-108; 515B.2-110; 515B.2-1101; 515B.2-113; 515B.2-118; 515B.2-119; 515B.2-121; 515B.2-124; 515B.2-125; 515B.3-102; 515B.3-1041; 515B.3-105; 515B.3-1051; 515B.3-106; 515B.3-107; 515B.3-112; 515B.3-113; 515B.3-1141; 515B.3-1151; 515B.3-116; 515B.4-101; 515B.4-102; 515B.4-1021; 515B.4-103; 515B.4-104; 515B.4-105; 515B.4-106; 515B.4-107; 515B.4-113; 515B.4-116; 515B.4-118; Minnesota Statutes 2025 Supplement, section 515B.3-103; Laws 2024, chapter 96, article 1, section 91, as amended; article 2, section 13, as amended.

S.F. No. 3958: A bill for an act relating to state government; changing the reporting date on the disaster assistance contingency account; amending Minnesota Statutes 2024, section 12.221, subdivision 6.

Patrick Duffy Murphy, Chief Clerk, House of Representatives

Returned April 23, 2026

Mr. President:

I have the honor to announce the passage by the House of the following House Files, herewith transmitted: H.F. Nos. 1606, 3155, 3404, 3766, 3875, 3908, 3970, 4052, 4075, 4188, and 4502.

Patrick Duffy Murphy, Chief Clerk, House of Representatives

Transmitted April 23, 2026

FIRST READING OF HOUSE BILLS

The following bills were read the first time.

H.F. No. 1606: A bill for an act relating to commerce; prohibiting access to nudification technology; proposing coding for new law in Minnesota Statutes, chapter 325E.

Referred to the Committee on Rules and Administration for comparison with S.F. No. 1119, now on General Orders.

H.F. No. 3155: A bill for an act relating to public safety; including gift card fraud in organized retail theft; amending Minnesota Statutes 2024, section 609.522, subdivisions 1, 2.

Referred to the Committee on Rules and Administration for comparison with S.F. No. 3338, now on General Orders.

H.F. No. 3404: A bill for an act relating to public safety; increasing criminal penalty for impersonating a peace officer; establishing the crime of impersonating a peace officer while possessing a firearm; establishing enhanced penalties for committing an offense while impersonating a peace officer; requiring individuals presenting as peace officers to identify themselves as peace officers; establishing criminal penalties; amending Minnesota Statutes 2024, section 609.4751.

Referred to the Committee on Finance.

H.F. No. 3766: A bill for an act relating to travel insurance; providing for the licensing and registration of limited lines travel insurance producers and travel retailers; providing for the sale and regulation of travel insurance; amending Minnesota Statutes 2024, section 60K.383; proposing coding for new law as Minnesota Statutes, chapter 65C.

Referred to the Committee on Taxes.

H.F. No. 3875: A bill for an act relating to judiciary; clarifying publication process for court notices and provisions regarding restitution and conciliation court; clarifying certain notices to public authorities in dissolution cases; modifying expiration of the Supreme Court Council on Child Protection; amending Minnesota Statutes 2024, sections 331A.03, subdivision 1; 518A.44; 611A.04, subdivision 3; Laws 2024, chapter 115, article 12, section 30, subdivisions 6, 7; article 22, section 6; proposing coding for new law in Minnesota Statutes, chapter 484.

Referred to the Committee on Rules and Administration for comparison with S.F. No. 4064, now on General Orders.

H.F. No. 3908: A bill for an act relating to drivers' licenses; modifying ignition interlock program license revocation requirements; classifying driver's license indicators as private data; making technical corrections; amending Minnesota Statutes 2024, sections 13.6905, by adding a subdivision; 171.12, subdivision 7c, by adding a subdivision; Minnesota Statutes 2025 Supplement, sections 171.12, subdivision 7; 171.178, subdivision 5; 171.306, subdivision 1; repealing Minnesota Statutes 2024, section 169A.54, subdivision 6.

Referred to the Committee on Rules and Administration for comparison with S.F. No. 4068, now on General Orders.

H.F. No. 3970: A bill for an act relating to civil law; establishing a remedy to extinguish a joint interest in a contract for deed of a perpetrator of domestic abuse or sexual assault; amending Minnesota Statutes 2024, section 559.21, by adding a subdivision; proposing coding for new law in Minnesota Statutes, chapter 559.

Referred to the Committee on Rules and Administration for comparison with S.F. No. 3907, now on General Orders.

H.F. No. 4052: A bill for an act relating to telecommunications; modifying and clarifying various provisions governing telephone company regulation, facilities and property, pricing plans, service classification, and reporting requirements; amending Minnesota Statutes 2024, sections 237.035; 237.036; 237.069; 237.07, subdivision 1; 237.11; 237.164; 237.626, subdivisions 1, 3; 237.66, by adding subdivisions; 237.70, subdivision 7; 237.762, subdivision 5; repealing Minnesota Statutes 2024, sections 237.065; 237.066; 237.067; 237.071; 237.072; 237.075, subdivisions 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11; 237.14; 237.15; 237.16, subdivision 9; 237.22; 237.231; 237.59, subdivisions 1, 1a, 2, 3, 4, 5, 6, 8, 9, 10; 237.66, subdivisions 1, 1a, 1c, 1d, 2, 2a, 3; 237.75; 237.766; 237.768; 237.772; 237.775.

Referred to the Committee on Rules and Administration for comparison with S.F. No. 4496, now on General Orders.

H.F. No. 4075: A bill for an act relating to public safety; establishing a uniform procedure for imposition, implementation, and oversight of firearm restrictions resulting from certain criminal convictions and judicial orders; amending Minnesota Statutes 2024, sections 260C.201, subdivision 3; 518B.01, subdivisions 6, 14; 609.2242, subdivision 3; 609.749, subdivision 8; 629.715, subdivision 2; Minnesota Statutes 2025 Supplement, sections 260C.141, subdivision 1; 518B.01, subdivision 4; proposing coding for new law in Minnesota Statutes, chapter 518B.

Referred to the Committee on Rules and Administration for comparison with S.F. No. 4294, now on General Orders.

H.F. No. 4188: A bill for an act relating to commerce; modifying various consumer protections for insurance and financial products; prohibiting virtual-currency kiosks; modifying various provisions governing securities broker-dealers and broker-dealers' agents; making technical changes to various provisions governed or administered by the Department of Commerce; modifying and adding provisions governing unclaimed property; providing penalties; amending Minnesota Statutes 2024, sections 46.044, subdivision 1; 48.195; 49.37; 53B.69, subdivision 10; 58.14, subdivisions 3, 4, 5, by adding a subdivision; 58.18, subdivision 4; 58B.02, by adding subdivisions; 58B.03, subdivisions 10, 11; 58B.051; 58B.06, subdivisions 4, 6; 60A.13, subdivisions 1, 6; 72A.061, subdivision 5; 72A.18, subdivision 2, by adding subdivisions; 72A.20, subdivision 2, by adding a subdivision; 80A.50; 80A.69; 80C.12, subdivision 1; 80G.01, subdivision 5a; 325E.21, subdivisions 1b, 2c; 332.32; 345.31, by adding a subdivision; 345.43, by adding a subdivision; Minnesota Statutes 2025 Supplement, sections 58B.02, subdivision 8a; 80A.66; proposing coding for new law in Minnesota Statutes, chapters 53B; 80A; 82B; 82C; 345; repealing Minnesota Statutes 2024, sections 48.158; 53B.69, subdivisions 3b, 3c; 53B.75, subdivisions 1, 2, 3, 4, 5.

Referred to the Committee on Rules and Administration for comparison with S.F. No. 4365.

H.F. No. 4502: A bill for an act relating to financial institutions; establishing a trusted contact program to mitigate financial exploitation and fraud; limiting liability; proposing coding for new law in Minnesota Statutes, chapter 45A.

Referred to the Committee on Rules and Administration for comparison with S.F. No. 4652, now on General Orders.

REPORTS OF COMMITTEES

Senator Murphy moved that the Committee Reports at the Desk be now adopted, with the exception of the reports on S.F. Nos. 5149, 4628, and 3693. The motion prevailed.

Senator Dibble from the Committee on Transportation, to which was referred

S.F. No. 5149: A bill for an act relating to transportation; providing for certain local highway designations; designating a portion of Ramsey County State-Aid Highway 96 as "Master Sergeant Nicole Amor Memorial Highway"; proposing coding for new law in Minnesota Statutes, chapter 160.

Reports the same back with the recommendation that the bill do pass and be re-referred to the Committee on Finance.

Pursuant to Senate Concurrent Resolution No. 6, the bill was referred to the Committee on Rules and Administration.

Senator Xiong from the Committee on State and Local Government, to which was referred

S.F. No. 4628: A bill for an act relating to state government; requiring state agencies to include a summary page in all requests for proposals; amending Minnesota Statutes 2024, section 16B.97, by adding a subdivision.

Reports the same back with the recommendation that the bill be amended as follows:

Delete everything after the enacting clause and insert:

"Section 1. Minnesota Statutes 2024, section 16B.97, subdivision 4, is amended to read:

Subd. 4. **Duties.** (a) The commissioner shall:

(1) create general grants management policies and procedures that are applicable to all executive agencies. The commissioner may approve exceptions to these policies and procedures for particular grant programs. Exceptions shall expire or be renewed after five years. Executive agencies shall retain management of individual grants programs;

(2) provide a central point of contact concerning statewide grants management policies and procedures;

(3) serve as a resource to executive agencies in such areas as training, evaluation, collaboration, and best practices in grants management;

(4) ensure grants management needs are considered in the development, upgrade, and use of statewide administrative systems and leverage existing technology wherever possible;

(5) oversee and approve future professional and technical service contracts and other information technology spending related to executive agency grants management systems and activities;

(6) provide a central point of contact for comments about executive agencies violating statewide grants governance policies and about fraud and waste in grants processes;

(7) forward received comments to the appropriate agency for further action, and may follow up as necessary;

(8) provide a single listing of all available executive agency competitive grant opportunities and resulting grant recipients;

(9) selectively review development and implementation of executive agency grants, policies, and practices; ~~and~~

(10) selectively review executive agency compliance with best practices~~.~~; and

(11) provide a standard template summary page for requests for proposals (RFP) that represent key information about the grant opportunity in a clear and accessible format. The template must

include information regarding the purpose of the program, applicant eligibility, funding availability and award structure, grant administration requirements, and the application process. The summary page does not replace or supersede any specific requirement in the full RFP.

(b) The commissioner may determine that it is cost-effective for agencies to develop and use shared grants management technology systems. This system would be governed under section 16E.01, subdivision 3, paragraph (b)."

Amend the title as follows:

Page 1, line 2, delete everything after "requiring" and insert "the commissioner to provide a standard template summary page"

Page 1, line 3, delete "in all" and insert "for"

Amend the title numbers accordingly

And when so amended the bill do pass.

Pursuant to Senate Concurrent Resolution No. 6, the bill was referred to the Committee on Rules and Administration.

Senator Xiong from the Committee on State and Local Government, to which was referred

S.F. No. 3693: A bill for an act relating to state government; aligning certain benefit rights for legislative leaves of absence from state and local government employment; amending Minnesota Statutes 2024, section 43A.32, by adding a subdivision.

Reports the same back with the recommendation that the bill do pass.

Pursuant to Senate Concurrent Resolution No. 6, the bill was referred to the Committee on Rules and Administration.

Senator Rest from the Committee on Taxes, to which was re-referred

S.F. No. 4749: A bill for an act relating to housing; establishing the Task Force on Housing Taxes and Fees; requiring a report.

Reports the same back with the recommendation that the bill do pass and be re-referred to the Committee on Finance. Report adopted.

Senator Rest from the Committee on Taxes, to which was referred

S.F. No. 5032: A bill for an act relating to taxation; establishing a tax on certain individuals and organizations convicted of and benefiting from fraud; proposing coding for new law in Minnesota Statutes, chapter 295.

Reports the same back with the recommendation that the bill be amended as follows:

Delete everything after the enacting clause and insert:

"Section 1. Minnesota Statutes 2024, section 270B.14, is amended by adding a subdivision to read:

Subd. 25. **Exchange of criminal investigative data between Department of Revenue and Financial Crimes and Fraud Section.** (a) For purposes of this subdivision, "FCFS" means the Financial Crimes and Fraud Section of the Bureau of Criminal Apprehension.

(b) The commissioner may disclose active criminal investigative data as classified under section 270B.03, subdivision 6, to the FCFS. The FCFS may disclose active criminal investigative data concerning tax administration to the commissioner as outlined in section 299C.061, subdivision 6. The commissioner may enter into an agreement with the FCFS outlining procedures to implement the exchange of information under this subdivision, but an agreement may provide for the disclosure of data only to the extent allowed under this subdivision. Disclosure is allowed only for the purpose of and to the extent necessary for tax administration and for the purpose of and to the extent necessary for the FCFS to carry out section 299C.061, subdivision 3.

(c) Data disclosed by the commissioner to the FCFS under this subdivision are classified under section 270B.03, subdivision 6. Data disclosed by the FCFS to the commissioner under section 299C.061, subdivision 6, are classified under section 13.82, subdivision 7.

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

Sec. 2. Minnesota Statutes 2024, section 270B.15, is amended to read:

270B.15 DISCLOSURE TO LEGISLATIVE AUDITOR AND STATE AUDITOR; INSPECTOR GENERAL.

Subdivision 1. **Legislative auditor and state auditor.** (a) Returns and return information must be disclosed to the legislative auditor to the extent necessary for the legislative auditor to carry out sections 3.97 to 3.979.

(b) The commissioner must disclose return information, including the report required under section 289A.12, subdivision 15, to the state auditor to the extent necessary to conduct audits of job opportunity building zones as required under section 469.3201.

Subd. 2. **Inspector general.** Returns and return information must be disclosed to the inspector general, as given meaning in section 15E.10, to the extent necessary for the inspector general to carry out chapter 15E.

EFFECTIVE DATE. This section is effective January 1, 2027, unless the legislature has not established the inspector general as referred to in this section, in which case this section will not be enacted.

Sec. 3. Minnesota Statutes 2024, section 270C.56, subdivision 1, is amended to read:

Subdivision 1. **Liability imposed.** A person who, either singly or jointly with others, has the control of, supervision of, or responsibility for filing returns or reports, paying taxes, or collecting or withholding and remitting taxes and who fails to do so, or a person who is liable under any other

law, is liable for the payment of taxes arising under chapters 295, 296A, 297A, 297F, and 297G, or sections 290.034, 290.92, and 297E.02, and the applicable penalties and interest on those taxes.

EFFECTIVE DATE. This section is effective for convictions of fraud made after December 31, 2025.

Sec. 4. Minnesota Statutes 2024, section 289A.60, subdivision 6, is amended to read:

Subd. 6. **Penalty for failure to file, false or fraudulent return, evasion.** (a) If a person, with intent to evade or defeat a tax or payment of tax, fails to file a return, files a false or fraudulent return, or attempts in any other manner to evade or defeat a tax or payment of tax, there is imposed on the person a penalty equal to 50 percent of the tax, less amounts paid by the person on the basis of the false or fraudulent return, if any, due for the period to which the return related.

(b) If a person files a false or fraudulent return that includes a claim for refund, there is imposed on the person a penalty equal to 50 percent of the portion of any refund claimed that is attributable to fraud. The penalty under this paragraph is in addition to any penalty imposed under paragraph (a) or (c).

(c) If a person receives money, whether reported or not reported on a return, that is due to fraud of a public program as defined in section 290.034, subdivision 1, without regard to whether a conviction resulted, there may be imposed on the person a penalty equal to 100 percent of the amounts received attributable to the fraud. The penalty under this paragraph is in addition to any penalty imposed under paragraph (a) or (b). This penalty must not be assessed on any amounts already assessed under section 290.034. Any amounts collected must be deposited to the tax relief account identified in section 290.034, subdivision 5.

EFFECTIVE DATE. This section is effective for convictions of fraud made after December 31, 2025.

Sec. 5. **[290.034] TAX ON AMOUNTS OBTAINED THROUGH FRAUD.**

Subdivision 1. **Definitions.** (a) For purposes of this section, the following terms have the meanings given.

(b) "First-tier rate" means the lowest rate cited in section 290.06, subdivision 2c, paragraphs (a) to (c).

(c) "Public program" and "fraud" have the meanings given in section 13.357.

(d) "Program fraud amount" means the amount of money acquired directly or indirectly by fraud of a public program that is certified to the commissioner under subdivision 4. This definition excludes refunds for overpayment of taxes.

Subd. 2. **Tax imposed.** (a) A tax equal to 100 percent of the program fraud amount is imposed on any person or organization convicted by a state or federal court of fraud.

(b) The tax under this section applies regardless of any amount of restitution, tax, or penalty imposed on or paid by a person or organization described in paragraph (a).

(c) If multiple persons or organizations are convicted of the same fraud, the liability shall be joint and several on the convicted persons or organizations.

(d) The assessment of this tax under paragraph (a) is considered a jeopardy assessment or jeopardy collection as provided in section 270C.36.

Subd. 3. **Data sharing.** As authorized by section 270B.14, subdivision 25, the commissioner may share with the Financial Crimes and Fraud Section of the Bureau of Criminal Apprehension active investigative data related to enforcement of this section.

Subd. 4. **Agency certification.** (a) After a conviction of a person or organization of fraud of a public program, the agency primarily responsible for administering the public program must certify to the commissioner the name of the person or organization, the name of the public program involved, and the amount of money the court determines the person or organization was responsible for in the conviction, regardless of the restitution amount.

(b) The agency's certification must be in the form and manner prescribed by the commissioner.

(c) An agency's certification to the commissioner is prima facie correct and valid. The person or organization has the burden of establishing its incorrectness or invalidity in any related action or proceeding.

Subd. 5. **Deposit of money.** (a) A tax relief account is established in the special revenue fund. The commissioner must deposit the money collected from the tax imposed under this section to the tax relief account.

(b) The funds will remain in this account until the following:

(1) by December 15 of each year, the commissioner must determine the amount in the tax relief account and determine the amount of a reduction in the first-tier rate for the following taxable year. The determination is based using the most recent November forecast required under section 16A.103;

(2) when there is enough money accumulated in the tax relief account, the commissioner must reduce the first-tier rate for the following taxable year. This reduction must be calculated to approximate the amount currently on deposit in the tax relief fund. The reduction must only be for that taxable year. The threshold for a reduction of the rate must not be below one-tenth of one percent; and

(3) if the rate is reduced for the following taxable year under clause (2), the amounts in the tax relief fund must be deposited in the general fund.

EFFECTIVE DATE. This section is effective for convictions of fraud made after December 31, 2025.

Sec. 6. Minnesota Statutes 2025 Supplement, section 299C.061, subdivision 6, is amended to read:

Subd. 6. **Data sharing authorized.** Notwithstanding chapter 13 or any other statute related to the classification of government data to the contrary, state agencies making a referral under subdivision 4 or 5 shall provide data related to the suspected fraudulent activity to the Section,

including data classified as not public. The Section may share active criminal investigative data concerning insurance fraud with the Department of Commerce and active criminal investigative data concerning tax administration with the Department of Revenue. Data shared by the Section under this subdivision are classified under section 13.82, subdivision 7.

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

Amend the title as follows:

Page 1, line 3, after the semicolon, insert "providing for certain data sharing and disclosure;"

Amend the title numbers accordingly

And when so amended the bill do pass. Amendments adopted. Report adopted.

Senator Marty from the Committee on Finance, to which was re-referred

S.F. No. 4612: A bill for an act relating to state government; modifying provisions relating to the Departments of Health, Human Services, and Children, Youth, and Families; making changes for federal compliance; establishing work or community engagement requirements; providing for pharmacy dispensing reimbursements; modifying reimbursement rates for mental health services; modifying mental health provider credentialing requirements; modifying the county share for Supplemental Nutrition Assistance Program costs; modernizing child care and family child care licensing; modifying the Minnesota African American Family Preservation and Child Welfare Disproportionality Act; establishing a committee, legislative commission, and advisory task force; establishing a hospital stabilization program; requiring reports; authorizing rulemaking; requiring transfer; appropriating money; amending Minnesota Statutes 2024, sections 16A.103, by adding a subdivision; 62Q.096; 62U.04, subdivision 13, by adding a subdivision; 142D.21, subdivision 3; 142F.05, by adding subdivisions; 144.1222, subdivision 4, by adding a subdivision; 144.1501, subdivision 2; 144.1503, subdivision 7; 144.1505, subdivisions 1, 2, 3; 144.1507, subdivisions 1, 2, 4, by adding a subdivision; 144.1911, subdivisions 1, 5, 6; 145A.14, subdivision 2a; 151.741, subdivision 4; 245.4711, subdivision 5; 245.4881, subdivision 5; 245A.211, subdivision 1; 245I.02, by adding a subdivision; 256.01, by adding a subdivision; 256.017, subdivision 2; 256B.04, subdivision 27; 256B.056, subdivisions 1, 2a, 7, 7a; 256B.0561, subdivision 2; 256B.06, subdivision 4; 256B.0625, by adding a subdivision; 256B.076, subdivision 1, by adding subdivisions; 256B.094, subdivisions 2, 3, 6, 7; 256B.75; 256B.76, subdivision 2; 256L.04, subdivision 14; 260.63, subdivision 10; 260.64, subdivision 2; 260.67, subdivision 2; 260.68, subdivision 2; 260.69, subdivision 1; 260.693, subdivision 2; 295.52, subdivision 8; Minnesota Statutes 2025 Supplement, sections 142A.03, subdivision 2; 144.125, subdivision 1; 151.741, subdivision 5; 245A.07, subdivision 3; 245C.02, subdivision 15a; 245C.05, subdivision 5; 256.043, subdivision 3; 256.9657, subdivision 2b; 256.969, subdivision 2f; 256B.0625, subdivision 20; 256B.0924, subdivision 6; 256B.1973, subdivision 9; 256B.69, subdivision 6d; 256B.761, by adding a subdivision; 260.691, subdivision 1; 260.692, subdivisions 1, 2, 3; Laws 2024, chapter 117, sections 21; 22; Laws 2024, chapter 127, article 67, section 7; proposing coding for new law in Minnesota Statutes, chapters 103I; 142D; 144; 245A; 256; 256B; 260; proposing coding for new law as Minnesota Statutes, chapters 142H; 142I; repealing Minnesota Statutes 2024, sections 142B.01, subdivisions 11, 12, 13, 25, 26, 27; 142B.41, subdivisions 4, 6, 7, 8, 10, 11, 12, 13; 142B.54, subdivisions 1, 2, 3; 142B.62; 142B.65, subdivisions 1, 2, 3, 4, 5, 6, 7, 10; 142B.66, subdivisions 1, 2, 4, 5; 142B.70, subdivisions 1, 2, 3,

4, 5, 6, 9, 10, 11, 12; 142B.71; 142B.72; 142B.74; 142B.75; 142B.76; 142B.77; 151.741, subdivisions 2, 3, 6; 256B.0625, subdivision 38; 256B.198; 260.63, subdivision 9; Minnesota Statutes 2025 Supplement, sections 142B.41, subdivision 9; 142B.65, subdivisions 8, 9; 142B.66, subdivision 3; 142B.70, subdivisions 7, 8; Minnesota Rules, parts 9502.0300; 9502.0315; 9502.0325; 9502.0335; 9502.0341; 9502.0345; 9502.0355; 9502.0365; 9502.0367; 9502.0375; 9502.0395; 9502.0405; 9502.0415; 9502.0425; 9502.0435; 9502.0445; 9503.0005; 9503.0010; 9503.0015; 9503.0030; 9503.0031; 9503.0032; 9503.0033; 9503.0034; 9503.0040; 9503.0045; 9503.0050; 9503.0055; 9503.0060; 9503.0065; 9503.0070; 9503.0075; 9503.0080; 9503.0085; 9503.0090; 9503.0095; 9503.0100; 9503.0105; 9503.0110; 9503.0115; 9503.0120; 9503.0125; 9503.0130; 9503.0140; 9503.0145; 9503.0150; 9503.0155; 9503.0170.

Reports the same back with the recommendation that the bill be amended as follows:

Page 26, after line 10, insert:

"Sec. 6. Minnesota Statutes 2025 Supplement, section 256B.0625, subdivision 8, is amended to read:

Subd. 8. **Physical therapy.** (a) Medical assistance covers physical therapy and related services. Specialized maintenance therapy is covered for recipients age 20 and under.

(b) Services provided by a physical therapy assistant shall be reimbursed at the same rate as services performed by a physical therapist when the services of the physical therapy assistant are provided under the direction of a physical therapist who is on the premises. Services provided by a physical therapy assistant that are provided under the direction of a physical therapist who is not on the premises shall be reimbursed at 65 percent of the physical therapist rate.

(c) Payment for physical therapy and related services is limited to 14 visits per year unless prior authorization of a greater number of visits is obtained. This paragraph expires upon the effective date of paragraph (d).

(d) Effective January 1, 2027, or upon federal approval, whichever is later, payment for physical therapy and related services is limited to the following number of visits per year unless prior authorization of a greater number of visits is obtained:

(1) for children following an inpatient or outpatient hospital-based surgery, 30 visits; and

(2) for all other recipients, 14 visits.

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

Page 31, after line 18, insert:

"Section 1. Minnesota Statutes 2024, section 245.462, is amended by adding a subdivision to read:

Subd. 2a. **Case management contact.** "Case management contact" means interactive communication conducted either in person, by interactive video that meets the requirements of section 256B.0625, subdivision 20b, or by telephone with the client; client's parent; legal guardian,

guardian ad litem, or attorney for clients that are children or youth under 19 years of age; or client's attorney for clients that are adults 19 years of age or older."

Page 31, line 24, delete "At a minimum," and after "contact" insert "in every calendar month"

Page 31, line 27, delete "required"

Page 32, line 6, delete "At a minimum," and after "one" insert "case management" and delete "during" and insert "in"

Page 32, line 7, delete everything after "month"

Page 32, line 8, delete everything before "with"

Page 34, delete section 5

Page 41, line 26, before the period insert "or for another insurance affordability program"

Page 41, line 32, delete "one"

Page 42, line 11, after "ranking" insert "minority" and before "committees" insert "legislative"

Page 42, line 20, after "ranking" insert "minority"

Page 42, line 21, before "committees" insert "legislative"

Page 47, line 20, after "must" insert "document"

Page 47, line 23, after "family" insert "members"

Page 50, line 26, delete "case management client's" and insert "recipient's"

Page 51, line 19, after "determined" insert "in the joint governance agreement"

Page 51, line 24, delete "forms of"

Page 51, line 31, delete "A county has 60 days to appeal a final rate." and before the comma insert "determined by the commissioner under paragraph (b)"

Page 51, line 33, delete "(1)"

Page 51, line 34, delete the comma and delete "(2)"

Page 52, line 2, delete "Medicaid" and insert "medical assistance"

Page 52, line 11, after "for" insert "targeted"

Page 52, line 21, after "agreement" insert a period and delete "that" and insert "The joint governance agreement"

Page 53, delete line 19

Page 54, delete line 15

Page 59, delete section 24

Page 60, delete section 25

Page 61, lines 22, 25, and 27, delete "directed"

Page 61, line 23, delete "shall" and insert "must" and after "provide" insert ", exclusively using state funds," and delete "directed"

Page 62, line 8, delete "directed"

Page 62, delete lines 11 and 12

Page 62, line 13, delete "(e)" and insert "(d)" and delete "shall" and insert "must" and delete "directed"

Page 62, line 17, delete "(f)" and insert "(e)" and delete everything after "on" and insert "July 1, 2027."

Page 62, delete line 18

Page 63, line 1, delete everything after "that"

Page 63, delete line 2

Page 63, line 3, delete everything before "the"

Page 63, line 5, delete "equal to" and insert "at least"

Page 63, line 7, after the second "of" insert "at least"

Page 63, line 10, delete everything after "that"

Page 63, delete line 11

Page 63, line 12, delete everything before "the"

Page 63, after line 33, insert:

"**EFFECTIVE DATE.** This section is effective January 1, 2027."

Page 64, delete section 4 and insert:

"Sec. 4. **REPEALER.**

(a) Minnesota Statutes 2024, section 256B.0625, subdivision 38, is repealed.

(b) Minnesota Statutes 2025 Supplement, section 256B.69, subdivision 6i, is repealed.

Page 77, after line 2, insert:

"Sec. 9. **DIRECTION TO COMMISSIONER OF CHILDREN, YOUTH, AND FAMILIES; CRISIS NURSERY LICENSING.**

The commissioner of children, youth, and families must develop a licensing framework for crisis nurseries. The framework must include pathways for organizations to become licensed crisis nurseries, a definition for crisis nurseries, background study and training requirements, and ways to reduce redundancy and resolve conflicting requirements between Minnesota Rules, parts 2960.0510 to 2960.0530, 2960.3000 to 2960.3100, and chapter 9502, and Minnesota Statutes, chapter 142B. In developing the framework, the commissioner must work with stakeholders seeking to develop a crisis nursery license. By January 15, 2028, the commissioner must submit a report to the chairs and ranking minority members of the legislative committees with jurisdiction over children, youth, and families licensing. The report must contain an overview of the licensing framework, a detailed explanation of the framework, and proposed legislation to make any statutory changes that are needed to implement the new license for crisis nurseries."

Page 78, line 17, after "families" insert "or the commissioner's designated representative, including county agencies and private agencies"

Page 145, line 6, after "families" insert "or the commissioner's designated representative, including county agencies and private agencies"

Page 150, line 19, after "C3" insert a comma and delete the second "or" and after "C4" insert ", or C5"

Page 150, line 20, delete "C3 or" and after "C4" insert "or C5" and delete the second "or" and after "C2" insert ", or C3"

Page 157, line 5, delete "C" and insert "C1"

Page 157, line 6, delete "C1" and insert "C2"

Page 157, line 7, delete "C2" and insert "C3"

Page 157, line 8, delete "C3" and insert "C4"

Page 157, line 9, delete "C4" and insert "C5"

Page 158, line 1, delete "C4" and insert "C5" and delete "class C4" and insert "class C5"

Page 159, line 17, delete "C4" and insert "C5"

Page 159, line 18, delete "C4" and insert "C5"

Page 160, line 12, delete "C4" and insert "C5"

Page 199, line 8, after "of" insert "a"

Page 199, line 9, after "upon" insert "the commissioner's"

Page 209, line 20, delete ", in consultation with the commissioner of health,"

Page 209, line 21, delete "November" and insert "February" and delete "a" and insert "the"

Page 209, line 22, before the period, insert "prepared by the commissioner of health under section 144.5913" and delete everything after the period

Page 209, delete lines 23 to 26

Page 210, line 9, delete "at least one of"

Page 210, delete lines 10 and 11 and insert:

"(i) critical access hospital or rural emergency hospital; or

(ii) medical disproportionate share hospital with less than 75 days of cash on hand."

Page 210, line 20, after "methodologies" insert "using a cost to charge methodology as defined in the Minnesota Health Care Cost Information System" and delete "$5,000" and insert "$2,000"

Page 211, line 14, after "total" insert "among qualifying hospitals"

Page 211, line 29, delete "Accountability" and insert "Reporting" and delete everything after "(a)" and insert "A qualifying hospital receiving payment under this section must submit to the commissioner any information necessary to evaluate the appropriate use of funds. Such information must include, at minimum, by June 30, 2027, a detailed analysis of how the funds were used to preserve regional and local access to essential health care services, including emergency care, inpatient hospital care, maternal care and obstetrical services, behavioral and mental health care, and primary care and clinic services."

Page 211, delete lines 30 to 32

Page 212, delete lines 1 to 14 and insert:

"(b) A qualifying hospital receiving payment under this section must submit to the commissioner, by June 30, 2027, an organizational chart presenting the identities of and interrelationships among affiliated entities within the hospital system. No subsidiary of an entity specified on the chart need be shown if the equity or membership interest of the subsidiary held by the entity is less than ten percent of the subsidiary. As to each entity specified in the chart, the qualifying hospital must indicate the type of organization and the state of domicile."

Page 212, line 22, delete everything before "The" and insert "(d)"

Renumber the subdivisions in sequence

Page 214, after line 29, insert:

"Sec. 4. **[144.5913] REPORT ON FINANCIAL STABILITY OF HOSPITALS.**

The commissioner of health must prepare and submit to the commissioner of management and budget, to be delivered with each February forecast under section 16A.103, a report on the financial stability of Minnesota's hospitals. The report must consider the core financial metrics of hospitals;

expenses and staffing data; revenue, including payer mix; utilization data; financial liquidity and a balance sheet analysis; and other data determined by the commissioners. The report must include information about financially distressed hospitals, and whether any hospitals in Minnesota are determined to be financially distressed."

Page 219, delete section 6

Page 220, before line 3, insert:

"ARTICLE 10

HEALTH PLAN REGULATORY ALIGNMENT

Section 1. Minnesota Statutes 2024, section 60A.50, subdivision 3, is amended to read:

Subd. 3. **Commissioner.** "Commissioner" means the commissioner of commerce ~~or the commissioner of health, whichever commissioner otherwise regulates the health organization~~.

EFFECTIVE DATE. This section is effective July 1, 2027.

Sec. 2. Minnesota Statutes 2024, section 60A.951, subdivision 3, is amended to read:

Subd. 3. **Commissioner.** "Commissioner" means the commissioner of commerce ~~for insurers regulated by the commissioner of commerce, and means the commissioner of health for insurers regulated by the commissioner of health~~.

EFFECTIVE DATE. This section is effective July 1, 2027.

Sec. 3. Minnesota Statutes 2024, section 60A.985, subdivision 8, is amended to read:

Subd. 8. **Licensee.** "Licensee" means any person licensed, authorized to operate, or registered, or required to be licensed, authorized, or registered by the Department of Commerce ~~or the Department of Health~~ under chapters 59A to 62M, 62Q to 62V, and 64B to 79A.

EFFECTIVE DATE. This section is effective July 1, 2027.

Sec. 4. Minnesota Statutes 2024, section 60A.9853, subdivision 1, is amended to read:

Subdivision 1. **Notification to the commissioner.** Each licensee shall notify the commissioner of commerce ~~or commissioner of health, whichever commissioner otherwise regulates the licensee,~~ without unreasonable delay but in no event later than five business days from a determination that a cybersecurity event has occurred when either of the following criteria has been met:

(1) this state is the licensee's state of domicile, in the case of an insurer, or this state is the licensee's home state, in the case of a producer, as those terms are defined in chapter 60K and the cybersecurity event has a reasonable likelihood of materially harming:

(i) any consumer residing in this state; or

(ii) any part of the normal operations of the licensee; or

(2) the licensee reasonably believes that the nonpublic information involved is of 250 or more consumers residing in this state and that is either of the following:

(i) a cybersecurity event impacting the licensee of which notice is required to be provided to any government body, self-regulatory agency, or any other supervisory body pursuant to any state or federal law; or

(ii) a cybersecurity event that has a reasonable likelihood of materially harming:

(A) any consumer residing in this state; or

(B) any part of the normal operations of the licensee.

EFFECTIVE DATE. This section is effective July 1, 2027.

Sec. 5. Minnesota Statutes 2024, section 60A.9854, is amended to read:

60A.9854 POWER OF COMMISSIONER.

(a) The commissioner of commerce ~~or commissioner of health, whichever commissioner otherwise regulates the licensee, shall have~~ has power to examine and investigate into the affairs of any licensee to determine whether the licensee has been or is engaged in any conduct in violation of sections 60A.985 to 60A.9857. This power is in addition to the powers which the commissioner has under section 60A.031. Any such investigation or examination shall be conducted pursuant to section 60A.031.

(b) Whenever the commissioner of commerce ~~or commissioner of health~~ has reason to believe that a licensee has been or is engaged in conduct in this state which violates sections 60A.985 to 60A.9857, the commissioner of commerce ~~or commissioner of health~~ may take action that is necessary or appropriate to enforce those sections.

EFFECTIVE DATE. This section is effective July 1, 2027.

Sec. 6. Minnesota Statutes 2024, section 60B.03, subdivision 2, is amended to read:

Subd. 2. **Commissioner.** "Commissioner" means the commissioner of commerce ~~of the state of Minnesota~~ and, in that commissioner's absence or disability, a deputy or other person duly designated to act in that commissioner's place. ~~In the context of rehabilitation or liquidation of a health maintenance organization, "commissioner" means the commissioner of health of the state of Minnesota and, in that commissioner's absence or disability, a deputy or other person duly designated to act in that commissioner's place.~~

EFFECTIVE DATE. This section is effective July 1, 2027.

Sec. 7. Minnesota Statutes 2024, section 60G.01, subdivision 2, is amended to read:

Subd. 2. **Commissioner.** "Commissioner" means the commissioner of commerce~~, except that "commissioner" means the commissioner of health for administrative supervision of health maintenance organizations~~.

EFFECTIVE DATE. This section is effective July 1, 2027.

Sec. 8. Minnesota Statutes 2024, section 60G.01, subdivision 4, is amended to read:

Subd. 4. **Department.** "Department" means the Department of Commerce~~, except that "department" means the Department of Health for administrative supervision of health maintenance organizations~~.

EFFECTIVE DATE. This section is effective July 1, 2027.

Sec. 9. Minnesota Statutes 2024, section 62A.02, subdivision 8, is amended to read:

Subd. 8. **Filing by health carriers for purposes of complying with the certification requirements of MNsure.** No qualified health plan shall be offered through MNsure until its form and the premium rates pertaining to the form have been approved by the commissioner of commerce ~~or health, as appropriate,~~ and the health plan has been determined to comply with the certification requirements of MNsure in accordance with an agreement between the commissioners of commerce and health and MNsure.

EFFECTIVE DATE. This section is effective July 1, 2027.

Sec. 10. Minnesota Statutes 2024, section 62A.021, subdivision 1, is amended to read:

Subdivision 1. **Loss ratio standards.** (a) Notwithstanding section 62A.02, subdivision 3, relating to loss ratios, and except as otherwise authorized by section 62A.02, subdivision 3a, for individual policies or certificates, health care policies or certificates shall not be delivered or issued for delivery to an individual or to a small employer as defined in section 62L.02, unless the policies or certificates can be expected, as estimated for the entire period for which rates are computed to provide coverage, to return to Minnesota policyholders and certificate holders in the form of aggregate benefits not including anticipated refunds or credits, provided under the policies or certificates, (1) at least 75 percent of the aggregate amount of premiums earned in the case of policies issued in the small employer market, as defined in section 62L.02, subdivision 27, calculated on an aggregate basis; and (2) at least 65 percent of the aggregate amount of premiums earned in the case of each policy form or certificate form issued in the individual market; calculated on the basis of incurred claims experience or incurred health care expenses where coverage is provided by a health maintenance organization on a service rather than reimbursement basis and earned premiums for the period and according to accepted actuarial principles and practices. Assessments by the reinsurance association created in chapter 62L and all types of taxes, surcharges, or assessments created by Laws 1992, chapter 549, or created on or after April 23, 1992, are included in the calculation of incurred claims experience or incurred health care expenses. The applicable percentage for policies and certificates issued in the small employer market, as defined in section 62L.02, increases by one percentage point on July 1 of each year, beginning on July 1, 1994, until an 82 percent loss ratio is reached on July 1, 2000. The applicable percentage for policy forms and certificate forms issued in the individual market increases by one percentage point on July 1 of each year, beginning on July 1, 1994, until a 72 percent loss ratio is reached on July 1, 2000. A health carrier that enters a market after July 1, 1993, does not start at the beginning of the phase-in schedule and must instead comply with the loss ratio requirements applicable to other health carriers in that market for each time period. Premiums earned and claims incurred in markets other than the small employer and individual markets are not relevant for purposes of this section.

(b) All filings of rates and rating schedules shall demonstrate that actual expected claims in relation to premiums comply with the requirements of this section when combined with actual experience to date. Filings of rate revisions shall also demonstrate that the anticipated loss ratio over the entire future period for which the revised rates are computed to provide coverage can be expected to meet the appropriate loss ratio standards, and aggregate loss ratio from inception of the policy form or certificate form shall equal or exceed the appropriate loss ratio standards.

(c) A health carrier that issues health care policies and certificates to individuals or to small employers, as defined in section 62L.02, in this state shall file annually its rates, rating schedule, and supporting documentation including ratios of incurred losses to earned premiums by policy form or certificate form duration for approval by the commissioner according to the filing requirements and procedures prescribed by the commissioner. The supporting documentation shall also demonstrate in accordance with actuarial standards of practice using reasonable assumptions that the appropriate loss ratio standards can be expected to be met over the entire period for which rates are computed. The demonstration shall exclude active life reserves. If the data submitted does not confirm that the health carrier has satisfied the loss ratio requirements of this section, the commissioner shall notify the health carrier in writing of the deficiency. The health carrier shall have 30 days from the date of the commissioner's notice to file amended rates that comply with this section. If the health carrier fails to file amended rates within the prescribed time, the commissioner shall order that the health carrier's filed rates for the nonconforming policy form or certificate form be reduced to an amount that would have resulted in a loss ratio that complied with this section had it been in effect for the reporting period of the supplement. The health carrier's failure to file amended rates within the specified time or the issuance of the commissioner's order amending the rates does not preclude the health carrier from filing an amendment of its rates at a later time. The commissioner shall annually make the submitted data available to the public at a cost not to exceed the cost of copying. The data must be compiled in a form useful for consumers who wish to compare premium charges and loss ratios.

(d) Each sale of a policy or certificate that does not comply with the loss ratio requirements of this section is an unfair or deceptive act or practice in the business of insurance and is subject to the penalties in sections 72A.17 to 72A.32.

(e)(1) For purposes of this section, health care policies issued as a result of solicitations of individuals through the mail or mass media advertising, including both print and broadcast advertising, shall be treated as individual policies.

(2) For purposes of this section, (i) "health care policy" or "health care certificate" is a health plan as defined in section 62A.011; and (ii) "health carrier" has the meaning given in section 62A.011 and includes all health carriers delivering or issuing for delivery health care policies or certificates in this state or offering these policies or certificates to residents of this state.

(f) The loss ratio phase-in as described in paragraph (a) does not apply to individual policies and small employer policies issued by a health plan company that is assessed less than three percent of the total annual amount assessed by the Minnesota Comprehensive Health Association. These policies must meet a 68 percent loss ratio for individual policies, a 71 percent loss ratio for small employer policies with fewer than ten employees, and a 75 percent loss ratio for all other small employer policies.

(g) Notwithstanding paragraphs (a) and (f), the loss ratio shall be 60 percent for a health plan as defined in section 62A.011, offered by an insurance company licensed under chapter 60A that is assessed less than ten percent of the total annual amount assessed by the Minnesota Comprehensive Health Association. For purposes of the percentage calculation of the association's assessments, an insurance company's assessments include those of its affiliates.

(h) The ~~commissioners~~ commissioner of commerce ~~and health shall each~~ must annually issue a public report listing, by health plan company, the actual loss ratios experienced in the individual and small employer markets in this state ~~by the health plan companies that the commissioners respectively regulate. The commissioners shall coordinate release of these reports so as to release them as a joint report or as separate reports issued the same day~~. The report or reports shall be released no later than June 1 for loss ratios experienced for the preceding calendar year. Health plan companies shall provide to the ~~commissioners~~ commissioner any information requested by the ~~commissioners~~ commissioner for purposes of this paragraph.

EFFECTIVE DATE. This section is effective July 1, 2027.

Sec. 11. Minnesota Statutes 2024, section 62A.61, is amended to read:

62A.61 DISCLOSURE OF METHODS USED BY HEALTH CARRIERS TO DETERMINE USUAL AND CUSTOMARY FEES.

(a) A health carrier that bases reimbursement to health care providers upon a usual and customary fee must maintain in its office a copy of a description of the methodology used to calculate fees including at least the following:

(1) the frequency of the determination of usual and customary fees;

(2) a general description of the methodology used to determine usual and customary fees; and

(3) the percentile of usual and customary fees that determines the maximum allowable reimbursement.

(b) A health carrier must provide a copy of the information described in paragraph (a) to the commissioner of health or the commissioner of commerce, upon request.

(c) The ~~commissioner of health or the~~ commissioner of commerce~~, as appropriate,~~ may use ~~to enforce this section~~ any enforcement powers otherwise available to the commissioner with respect to the health carrier to enforce this section. The commissioner of ~~health or~~ commerce~~, as appropriate,~~ may require health carriers to provide the information required under this section and may use any powers granted under other laws relating to the regulation of health carriers to enforce compliance.

(d) For purposes of this section, "health carrier" has the meaning given in section 62A.011.

(e) "Usual and customary" means the normal charge, in the absence of insurance, of the provider for a service or article, but not more than the prevailing charge in the area for like service or article. A "like service" is the same nature and duration, requires the same skill, and is performed by a provider of similar training and experience. A "like article" is one that is identically or substantially equivalent. "Area" means the municipality or, in the case of a large city, a subdivision of the city,

in which the service or article is actually provided or a greater area as is necessary to obtain a representative cross-section of charges for like service or article.

EFFECTIVE DATE. This section is effective July 1, 2027.

Sec. 12. Minnesota Statutes 2024, section 62A.65, subdivision 7, is amended to read:

Subd. 7. **Short-term coverage.** (a) For purposes of this section, "short-term coverage" means an individual health plan that:

(1) is issued to provide coverage for a period of 185 days or less, except that the health plan may permit coverage to continue until the end of a period of hospitalization for a condition for which the covered person was hospitalized on the day that coverage would otherwise have ended;

(2) is nonrenewable, provided that the health carrier may provide coverage for one or more subsequent periods that satisfy clause (1), if the total of the periods of coverage do not exceed a total of 365 days out of any 555-day period, plus any additional days covered as a result of hospitalization on the day that a period of coverage would otherwise have ended;

(3) does not cover any preexisting conditions, including ones that originated during a previous identical policy or contract with the same health carrier where coverage was continuous between the previous and the current policy or contract; and

(4) is available with an immediate effective date without underwriting upon receipt of a completed application indicating eligibility under the health carrier's eligibility requirements, provided that coverage that includes optional benefits may be offered on a basis that does not meet this requirement.

(b) Short-term coverage is not subject to subdivisions 2 and 5. Short-term coverage may exclude as a preexisting condition any injury, illness, or condition for which the covered person had medical treatment, symptoms, or any manifestations before the effective date of the coverage, but dependent children born or placed for adoption during the policy period must not be subject to this provision.

(c) Notwithstanding subdivision 3, and section 62A.021, a health carrier may combine short-term coverage with its most commonly sold individual qualified plan, as defined in section 62E.02, other than short-term coverage, for purposes of complying with the loss ratio requirement.

(d) The 365-day coverage limitation provided in paragraph (a) applies to the total number of days of short-term coverage that covers a person, regardless of the number of policies, contracts, or health carriers that provide the coverage. A written application for short-term coverage must ask the applicant whether the applicant has been covered by short-term coverage by any health carrier within the 555 days immediately preceding the effective date of the coverage being applied for. Short-term coverage issued in violation of the 365-day limitation is valid until the end of its term and does not lose its status as short-term coverage, in spite of the violation. A health carrier that knowingly issues short-term coverage in violation of the 365-day limitation is subject to the administrative penalties otherwise available to the commissioner of commerce ~~or the commissioner of health, as appropriate~~.

EFFECTIVE DATE. This section is effective July 1, 2027.

Sec. 13. Minnesota Statutes 2024, section 62A.65, subdivision 8, is amended to read:

Subd. 8. **Cessation of individual business.** Notwithstanding the provisions of subdivisions 1 to 7, a health carrier may elect to cease doing business in the individual health plan market in this state if it complies with the requirements of this subdivision. For purposes of this section, "cease doing business" means to discontinue issuing new individual health plans and to refuse to renew all of the health carrier's existing individual health plans issued in this state whose terms permit refusal to renew under the circumstances specified in this subdivision. This subdivision does not permit cancellation of an individual health plan, unless the terms of the health plan permit cancellation under the circumstances specified in this subdivision. A health carrier electing to cease doing business in the individual health plan market in this state shall notify the commissioner 180 days prior to the effective date of the cessation. Within 30 days after the termination, the health carrier shall submit to the commissioner a complete list of policyholders that have been terminated. The cessation of business does not include the failure of a health carrier to offer or issue new business in the individual health plan market or continue an existing product line in that market, provided that a health carrier does not terminate, cancel, or fail to renew its current individual health plan business. A health carrier electing to cease doing business in the individual health plan market shall provide 120 days' written notice to each policyholder covered by an individual health plan issued by the health carrier. This notice must also inform each policyholder of the existence of the Minnesota Comprehensive Health Association, the requirements for being accepted, the procedures for applying for coverage, and the telephone numbers at the ~~Department of Health and the~~ Department of Commerce for information about private individual or family health coverage. A health carrier that ceases to write new business in the individual health plan market shall continue to be governed by this section with respect to continuing individual health plan business conducted by the health carrier. A health carrier that ceases to do business in the individual health plan market after July 1, 1994, is prohibited from writing new business in the individual health plan market in this state for a period of five years from the date of notice to the commissioner. This subdivision applies to any health maintenance organization that ceases to do business in the individual health plan market in one service area with respect to that service area only. Nothing in this subdivision prohibits an affiliated health maintenance organization from continuing to do business in the individual health plan market in that same service area. The right to refuse to renew an individual health plan under this subdivision does not apply to individual health plans issued on a guaranteed renewable basis that does not permit refusal to renew under the circumstances specified in this subdivision.

EFFECTIVE DATE. This section is effective July 1, 2027.

Sec. 14. **[62D.015] REGULATORY DUTIES; TRANSFER.**

Subdivision 1. **Transfer and restructuring.** (a) The regulatory oversight with respect to health maintenance organizations transfers from the commissioner of health to the commissioner of commerce on July 1, 2027.

(b) The agency restructuring under this section must be conducted in accordance with sections 15.039 and 43A.045.

Subd. 2. **Succession; employees; liability.** (a) Employees related to the functions assigned to the commissioner of health are transferred to the Department of Commerce 30 days after the date the commissioner of health approves the transfer.

(b) An employee transferred under paragraph (a):

(1) must not have the employee's employment status or job classification altered as a result of the transfer;

(2) if represented by an exclusive representative before the transfer, remains represented by the same exclusive representative after the transfer occurs;

(3) if an applicable collective bargaining agreement with an exclusive representative was effective before the transfer, remains subject to the collective bargaining agreement for the remainder of the agreement's term; and

(4) if employed in a temporary unclassified position, the total length of time that the employee has served in the appointment includes all time served in the appointment at the transferring agency and the time served in the appointment at the department. 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 by the commissioner of management and budget is considered to have been hired through an open competitive selection process after the transfer.

(c) The state must meet and negotiate with the exclusive representatives of transferred employees regarding proposed changes that affect or relate to the transferred employees' terms and conditions of employment to the extent that the proposed changes are not addressed in the applicable collective bargaining agreement.

(d) If the state transfers ownership or control of a department facility, service, or operation to a private or public entity by subcontracting, sale, assignment, lease, or other transfer, the state must require as a written condition of the transfer of ownership or control:

(1) an employee who performs work in the facility, service, or operation must be offered employment with the entity acquiring ownership or control before the entity offers employment to another individual who was not employed by the transferring agency at the time the transfer occurs; and

(2) the entity acquiring ownership or control is prohibited from reducing the transferred employee's wage and benefit standards until the collective bargaining agreement in effect at the time the transfer occurs expires or for a period of two years after the transfer occurs, whichever is longer.

(e) The state of Minnesota and the state's officers or agents are not liable for and are not subject to a cause of action arising from the action or inaction of an entity acquiring ownership or control of a department facility, service, or operation.

EFFECTIVE DATE. This section is effective July 1, 2027.

Sec. 15. Minnesota Statutes 2024, section 62D.08, subdivision 1, is amended to read:

Subdivision 1. **Notice of changes.** A health maintenance organization shall, unless otherwise provided for by rules adopted by the commissioner of ~~health~~ commerce, file notice with the commissioner of ~~health prior to any modification of~~ commerce before modifying the operations or

documents described in the information submitted under section 62D.03, subdivision 4, clauses (a), (b), (e), (f), (g), (i), (j), (l), (m), (n), (o), (p), (q), (r), (s), and (t) ~~of section 62D.03, subdivision 4~~. If the commissioner of ~~health~~ commerce does not disapprove of the filing within 60 days, it shall be deemed approved and may be implemented by the health maintenance organization.

EFFECTIVE DATE. This section is effective July 1, 2027.

Sec. 16. Minnesota Statutes 2024, section 62D.08, subdivision 2, is amended to read:

Subd. 2. **Annual report required.** Every health maintenance organization shall annually, on or before April 1, file a verified report with the commissioner of ~~health~~ commerce covering the preceding calendar year. However, utilization data required under subdivision 3, clause (c), shall be filed on or before July 1.

EFFECTIVE DATE. This section is effective July 1, 2027.

Sec. 17. Minnesota Statutes 2024, section 62D.08, subdivision 3, is amended to read:

Subd. 3. **Report requirements.** ~~Such~~ The report shall be submitted on forms prescribed by the commissioner of ~~health,~~ commerce and shall include:

(a) a financial statement of the organization, including its balance sheet and receipts and disbursements for the preceding year certified by an independent certified public accountant, reflecting at least (1) all prepayment and other payments received for health care services rendered, (2) expenditures to all providers, by classes or groups of providers, and insurance companies or nonprofit health service plan corporations engaged to fulfill obligations arising out of the health maintenance contract, (3) expenditures for capital improvements, or additions thereto, including but not limited to construction, renovation or purchase of facilities and capital equipment, and (4) a supplementary statement of assets, liabilities, premium revenue, and expenditures for risk sharing business under section 62D.04, subdivision 1, on forms prescribed by the commissioner;

(b) the number of new enrollees enrolled during the year, the number of group enrollees and the number of individual enrollees as of the end of the year and the number of enrollees terminated during the year;

(c) a summary of information compiled pursuant to section 62D.04, subdivision 1, clause (c), in such form as may be required by the commissioner of ~~health~~ commerce;

(d) a report of the names and addresses of all persons set forth in section 62D.03, subdivision 4, clause (c), who were associated with the health maintenance organization or the major participating entity during the preceding year, and the amount of wages, expense reimbursements, or other payments to such individuals for services to the health maintenance organization or the major participating entity, as those services relate to the health maintenance organization, including a full disclosure of all financial arrangements during the preceding year required to be disclosed pursuant to section 62D.03, subdivision 4, clause (d);

(e) a separate report addressing health maintenance contracts sold to individuals covered by Medicare, title XVIII of the Social Security Act, as amended, including the information required under section 62D.30, subdivision 6;

(f) data on the number of complaints received and the category of each complaint as defined by the commissioner. The categories must include access, communication and behavior, health plan administration, facilities and environment, coordination of care, and technical competence and appropriateness. The commissioner, in consultation with interested stakeholders, shall define complaint categories to be used by each health maintenance organization by July 1, 2017, and the categories must be used by each health maintenance organization beginning calendar year 2018; and

(g) such other information relating to the performance of the health maintenance organization as is reasonably necessary to enable the commissioner of ~~health~~ commerce to carry out the duties under sections 62D.01 to 62D.30.

EFFECTIVE DATE. This section is effective July 1, 2027.

Sec. 18. Minnesota Statutes 2024, section 62D.08, subdivision 7, is amended to read:

Subd. 7. **Consistent administrative expenses and investment income reporting.** (a) Every health maintenance organization must directly allocate administrative expenses to specific lines of business or products when such information is available. Remaining expenses that cannot be directly allocated must be allocated based on other methods, as recommended by the Advisory Group on Administrative Expenses. Health maintenance organizations must submit this information, including administrative expenses for dental services, using the reporting template provided by the commissioner of ~~health~~ commerce.

(b) Every health maintenance organization must allocate investment income based on cumulative net income over time by business line or product and must submit this information, including investment income for dental services, using the reporting template provided by the commissioner of ~~health~~ commerce.

EFFECTIVE DATE. This section is effective July 1, 2027.

Sec. 19. Minnesota Statutes 2024, section 62D.12, subdivision 1, is amended to read:

Subdivision 1. **False representations.** No health maintenance organization or representative thereof may cause or knowingly permit the use of advertising or solicitation which is untrue or misleading, or any form of evidence of coverage which is deceptive. Each health maintenance organization ~~shall be~~ is subject to sections 72A.17 to 72A.32~~, relating to the regulation of trade practices, except (a) to the extent that the nature of a health maintenance organization renders such sections clearly inappropriate and (b) that enforcement shall be by the commissioner of health and not by the commissioner of commerce~~. Every health maintenance organization ~~shall be~~ is subject to sections 8.31 and 325F.69.

EFFECTIVE DATE. This section is effective July 1, 2027.

Sec. 20. Minnesota Statutes 2024, section 62D.124, subdivision 5, is amended to read:

Subd. 5. **Provider networks.** The ~~commissioner of health, the~~ commissioner of commerce~~,~~ and the commissioner of human services shall merge reporting requirements for health maintenance organizations and county-based purchasing plans related to Minnesota Department of ~~Health~~

Commerce oversight of network adequacy under this section and the provider network list reported to the Department of Human Services under Minnesota Rules, part 4685.2100. The commissioners shall work with health maintenance organizations and county-based purchasing plans to ensure that the report merger is done in a manner that simplifies health maintenance organization and county-based purchasing plan reporting processes.

EFFECTIVE DATE. This section is effective July 1, 2027.

Sec. 21. Minnesota Statutes 2025 Supplement, section 62D.21, is amended to read:

62D.21 FEES.

Every health maintenance organization subject to sections 62D.01 to 62D.30 shall pay to the commissioner of ~~health~~ commerce the following fees:

(1) filing an application for a certificate of authority: $10,000;

(2) filing an amendment to a certificate of authority: $125;

(3) filing each annual report: $400;

(4) filing each quarterly report: $200; and

(5) filing annual plan review documents, amendments to plan documents, and quality plans: $125.

EFFECTIVE DATE. This section is effective July 1, 2027.

Sec. 22. Minnesota Statutes 2025 Supplement, section 62D.211, is amended to read:

62D.211 RENEWAL FEE.

Each health maintenance organization subject to sections 62D.01 to 62D.30 shall submit to the commissioner of ~~health~~ commerce each year before June 15 a certificate of authority renewal fee in the amount of $30,000 each plus 88 cents per person enrolled in the health maintenance organization on December 31 of the preceding year.

EFFECTIVE DATE. This section is effective July 1, 2027.

Sec. 23. **[62D.212] HEALTH MAINTENANCE ORGANIZATION REGULATION ACCOUNT.**

(a) A health maintenance organization regulation account is established as a separate account in the special revenue fund in the state treasury. The commissioner of commerce must credit to the account filing fees and renewal fees collected under sections 62D.21 and 62D.211, appropriations and transfers, and other revenue related to the activities identified in paragraph (b). Earnings, including interest, dividends, other earnings arising from the account's assets, and remaining money from fiscal years occurring before July 1, 2027, must be credited to the account. The commissioner of commerce must manage the account.

(b) Money in the account is appropriated to the commissioner of commerce to administer this chapter and to reimburse the department's costs incurred to administer this section.

EFFECTIVE DATE. This section is effective July 1, 2027.

Sec. 24. Minnesota Statutes 2024, section 62D.221, subdivision 1, is amended to read:

Subdivision 1. **Insurance provisions applicable to health maintenance organizations.** Health maintenance organizations are subject to sections 60A.135, 60A.136, 60A.137, 60A.16, 60A.161, 60D.17, 60D.18, and 60D.20 and must comply with the provisions of these sections applicable to insurers. In applying these sections to health maintenance organizations, "commissioner" means the commissioner of ~~health~~ commerce. Health maintenance organizations are subject to Minnesota Rules, chapter 2720, as applicable to sections 60D.17, 60D.18, and 60D.20, and must comply with the provisions of chapter 2720 applicable to insurers, unless the commissioner of ~~health~~ commerce adopts rules to implement this subdivision.

EFFECTIVE DATE. This section is effective July 1, 2027.

Sec. 25. Minnesota Statutes 2024, section 62D.221, subdivision 2, is amended to read:

Subd. 2. **Statement.** In addition to the conditions in section 60D.17, subdivision 1, subjecting a health maintenance organization to filing requirements, no person other than the issuer shall acquire all or substantially all of the assets of a domestic nonprofit health maintenance organization through any means unless at the time the offer, request, or invitation is made or the agreement is entered into the person has filed with the commissioner and has sent to the health maintenance organization a statement containing the information required in section 60D.17 and the offer, request, invitation, agreement, or acquisition has been approved by the commissioner of ~~health~~ commerce in the manner prescribed in section 60D.17.

EFFECTIVE DATE. This section is effective July 1, 2027.

Sec. 26. Minnesota Statutes 2024, section 62E.11, subdivision 9, is amended to read:

Subd. 9. **Special assessment upon termination of individual health coverage.** (a) Each contributing member that terminates individual health coverage for reasons other than ~~(a)~~ (1) nonpayment of premium; ~~(b)~~ (2) failure to make co-payments; ~~(c)~~ (3) enrollee moving out of the area served; or ~~(d)~~ (4) a materially false statement or misrepresentation by the enrollee in the application for membership; and does not provide or arrange for replacement coverage that meets the requirements of section 62D.121; shall pay a special assessment to the state plan based upon the number of terminated individuals who join the comprehensive health insurance plan as authorized under section 62E.14, subdivisions 1, paragraph (d), and 6. Such a contributing member shall pay the association an amount equal to the average cost of an enrollee in the state plan in the year in which the member terminated enrollees multiplied by the total number of terminated enrollees who enroll in the state plan.

(b) The average cost of an enrollee in the state comprehensive health insurance plan shall be determined by dividing the state plan's total annual losses by the total number of enrollees from that year. This cost will be assessed to the contributing member who has terminated health coverage

before the association makes the annual determination of each contributing member's liability as required under this section.

(c) In the event that the contributing member is terminating health coverage because of a loss of health care providers, the commissioner may review whether or not the special assessment established under this subdivision will have an adverse impact on the contributing member or its enrollees or insureds, including but not limited to causing the contributing member to fall below statutory net worth requirements. If the commissioner determines that the special assessment would have an adverse impact on the contributing member or its enrollees or insureds, the commissioner may adjust the amount of the special assessment, or establish alternative payment arrangements to the state plan. For health maintenance organizations regulated under chapter 62D, the commissioner of ~~health~~ commerce shall make the determination regarding any adjustment in the special assessment ~~and shall transmit that determination to the commissioner of commerce~~.

EFFECTIVE DATE. This section is effective July 1, 2027.

Sec. 27. Minnesota Statutes 2024, section 62E.11, subdivision 13, is amended to read:

Subd. 13. **State funding; effect on premium rates of members.** In approving the premium rates as required in sections 62A.65, subdivision 3; and 62L.08, subdivision 8, the ~~commissioners~~ commissioner of ~~health and~~ commerce shall ensure that any appropriation to reduce the annual assessment made on the contributing members to cover the costs of the Minnesota comprehensive health insurance plan as required under this section is reflected in the premium rates charged by each contributing member.

EFFECTIVE DATE. This section is effective July 1, 2027.

Sec. 28. Minnesota Statutes 2024, section 62J.60, subdivision 5, is amended to read:

Subd. 5. **Annual reporting.** As part of an annual filing made with the commissioner of ~~health or~~ commerce ~~on or after January 1, 2003~~, a group purchaser shall certify compliance with this section and shall submit to the commissioner of ~~health or~~ commerce a copy of the Minnesota uniform health care identification card used by the group purchaser.

EFFECTIVE DATE. This section is effective July 1, 2027.

Sec. 29. Minnesota Statutes 2024, section 62L.02, subdivision 8, is amended to read:

Subd. 8. **Commissioner.** "Commissioner" means the commissioner of commerce ~~for health carriers subject to the jurisdiction of the Department of Commerce or the commissioner of health for health carriers subject to the jurisdiction of the Department of Health, or the relevant commissioner's designated representative. For purposes of sections 62L.13 to 62L.22, "commissioner" means the commissioner of commerce or that commissioner's designated representative~~.

EFFECTIVE DATE. This section is effective July 1, 2027.

Sec. 30. Minnesota Statutes 2024, section 62L.08, subdivision 11, is amended to read:

Subd. 11. **Loss ratio standards.** Notwithstanding section 62A.02, subdivision 3, relating to loss ratios, each policy or contract form used with respect to a health benefit plan offered, or issued

in the small employer market, is subject, beginning July 1, 1993, to section 62A.021. ~~The commissioner of health has, with respect to carriers under that commissioner's jurisdiction, all of the powers of the commissioner of commerce under that section.~~

EFFECTIVE DATE. This section is effective July 1, 2027.

Sec. 31. Minnesota Statutes 2024, section 62L.09, subdivision 3, is amended to read:

Subd. 3. **Reentry prohibition.** (a) Except as otherwise provided in paragraph (b), a health carrier that ceases to do business in the small employer market after July 1, 1993, is prohibited from writing new business in the small employer market in this state for a period of five years from the date of notice to the commissioner. This subdivision applies to any health maintenance organization that ceases to do business in the small employer market in one service area with respect to that service area only. Nothing in this subdivision prohibits an affiliated health maintenance organization from continuing to do business in the small employer market in that same service area.

(b) The commissioner of commerce ~~or the commissioner of health~~ may permit a health carrier that ceases to do business in the small employer market in this state after July 1, 1993, to begin writing new business in the small employer market if:

(1) since the carrier ceased doing business in the small employer market, legislative action has occurred that has significantly changed the effect on the carrier of its decision to cease doing business in the small employer market; and

(2) the commissioner deems it appropriate.

EFFECTIVE DATE. This section is effective July 1, 2027.

Sec. 32. Minnesota Statutes 2024, section 62L.10, subdivision 4, is amended to read:

Subd. 4. **Review of premium rates.** The commissioner shall regulate premium rates charged or proposed to be charged by all health carriers in the small employer market under section 62A.02. ~~The commissioner of health has, with respect to carriers under that commissioner's jurisdiction, all of the powers of the commissioner of commerce under that section.~~

EFFECTIVE DATE. This section is effective July 1, 2027.

Sec. 33. Minnesota Statutes 2024, section 62L.11, subdivision 2, is amended to read:

Subd. 2. **Enforcement powers.** The ~~commissioners~~ commissioner of ~~health and~~ commerce ~~each~~ has, for purposes of this chapter, all of ~~each~~ the commissioner's ~~respective~~ powers under other chapters that are applicable to ~~their respective~~ the commissioner's duties under this chapter.

EFFECTIVE DATE. This section is effective July 1, 2027.

Sec. 34. Minnesota Statutes 2024, section 62M.11, is amended to read:

62M.11 COMPLAINTS TO COMMERCE ~~OR HEALTH~~.

Notwithstanding the provisions of this chapter, an enrollee may file a complaint regarding an adverse determination directly to the commissioner ~~responsible for regulating the utilization review organization~~ of commerce.

EFFECTIVE DATE. This section is effective July 1, 2027.

Sec. 35. Minnesota Statutes 2024, section 62Q.01, subdivision 2, is amended to read:

Subd. 2. **Commissioner.** "Commissioner" means ~~the commissioner of health for purposes of regulating health maintenance organizations, and community integrated service networks, or~~ the commissioner of commerce for purposes of regulating ~~all other~~ health plan companies. For all other purposes, "commissioner" means the commissioner of health.

EFFECTIVE DATE. This section is effective July 1, 2027.

Sec. 36. Minnesota Statutes 2024, section 62Q.106, is amended to read:

62Q.106 DISPUTE RESOLUTION BY COMMISSIONER.

(a) A complainant may at any time submit a complaint to the ~~appropriate~~ commissioner to investigate. After investigating a complaint, or reviewing a company's decision, the ~~appropriate~~ commissioner may order a remedy as authorized under chapter 45, 60A, or 62D.

(b) In investigating a complaint filed against a health maintenance organization regarding a vulnerable adult, upon request, the commissioner of ~~health~~ commerce must interview at least one family member of the complainant or the subject of the complaint. If the complainant or the subject of the complaint does not want any family members to be interviewed, this information will be included in the investigative file.

EFFECTIVE DATE. This section is effective July 1, 2027.

Sec. 37. Minnesota Statutes 2024, section 62Q.188, subdivision 2, is amended to read:

Subd. 2. **Flexible benefits plan.** Notwithstanding any provision of this chapter, chapter 363A, or any other law to the contrary, a health plan company may offer, sell, issue, and renew a health plan that is a flexible benefits plan under this section if the following requirements are satisfied:

(1) the health plan must be offered in compliance with the laws of this state, except as otherwise permitted in this section;

(2) the health plan must be designed to enable covered persons to better manage costs and coverage options through the use of co-pays, deductibles, and other cost-sharing arrangements;

(3) the health plan may modify or exclude any or all coverages of benefits that would otherwise be required by law, except for maternity benefits and other benefits required under federal law;

(4) each health plan and plan's premiums must be approved by the commissioner of ~~health or~~ commerce, ~~whichever is appropriate under section 62Q.01, subdivision 2,~~ but ~~neither~~ the commissioner may not disapprove a plan on the grounds of a modification or exclusion permitted under clause (3); and

(5) prior to the sale of the health plan, the purchaser must be given a written list of the coverages otherwise required by law that are modified or excluded in the health plan. The list must include a description of each coverage in the list and indicate whether the coverage is modified or excluded. If coverage is modified, the list must describe the modification. The list may, but is not required to, also list any or all coverages otherwise required by law that are included in the health plan and indicate that they are included. The health plan company must require that a copy of this written list be provided, prior to the effective date of the health plan, to each enrollee or employee who is eligible for health coverage under the plan.

EFFECTIVE DATE. This section is effective July 1, 2027.

Sec. 38. Minnesota Statutes 2024, section 62Q.37, subdivision 2, is amended to read:

Subd. 2. **Definitions.** (a) For purposes of this section, the following terms have the meanings given them.

(b) "Commissioner" means the commissioner of ~~health for purposes of regulating health maintenance organizations and community integrated service networks, the commissioner of~~ commerce for purposes of regulating health maintenance organizations and nonprofit health service plan corporations, or the commissioner of human services for the purpose of contracting with managed care organizations serving persons enrolled in programs under chapter 256B or 256L.

(c) "Health plan company" means (1) a nonprofit health service plan corporation operating under chapter 62C; (2) a health maintenance organization operating under chapter 62D; (3) a community integrated service network operating under chapter 62N; or (4) a managed care organization operating under chapter 256B or 256L.

(d) "Nationally recognized independent organization" means (1) an organization that sets specific national standards governing health care quality assurance processes, utilization review, provider credentialing, marketing, and other topics covered by this chapter and other chapters and audits and provides accreditation to those health plan companies that meet those standards. The American Accreditation Health Care Commission (URAC), the National Committee for Quality Assurance (NCQA), the Joint Commission on Accreditation of Healthcare Organizations (JCAHO), and the Accreditation Association for Ambulatory Health Care (AAAHC) are, at a minimum, defined as nationally recognized independent organizations; and (2) the Centers for Medicare and Medicaid Services for purposes of reviews or audits conducted of health plan companies under Part C of Title XVIII of the Social Security Act or under section 1876 of the Social Security Act.

(e) "Performance standard" means those standards relating to quality management and improvement, access and availability of service, utilization review, provider selection, provider credentialing, marketing, member rights and responsibilities, complaints, appeals, grievance systems, enrollee information and materials, enrollment and disenrollment, subcontractual relationships and delegation, confidentiality, continuity and coordination of care, assurance of adequate capacity and services, coverage and authorization of services, practice guidelines, health information systems, and financial solvency.

EFFECTIVE DATE. This section is effective July 1, 2027.

Sec. 39. Minnesota Statutes 2024, section 62Q.47, is amended to read:

62Q.47 ALCOHOLISM, MENTAL HEALTH, AND CHEMICAL DEPENDENCY SERVICES.

(a) All health plans, as defined in section 62Q.01, that provide coverage for alcoholism, mental health, or chemical dependency services, must comply with the requirements of this section.

(b) Cost-sharing requirements and benefit or service limitations for outpatient mental health and outpatient chemical dependency and alcoholism services, except for persons seeking chemical dependency services under section 245G.05, must not place a greater financial burden on the insured or enrollee, or be more restrictive than those requirements and limitations for outpatient medical services.

(c) Cost-sharing requirements and benefit or service limitations for inpatient hospital mental health services, psychiatric residential treatment facility services, and inpatient hospital and residential chemical dependency and alcoholism services, except for persons seeking chemical dependency services under section 245G.05, must not place a greater financial burden on the insured or enrollee, or be more restrictive than those requirements and limitations for inpatient hospital medical services.

(d) A health plan company must not impose an NQTL with respect to mental health and substance use disorders in any classification of benefits unless, under the terms of the health plan as written and in operation, any processes, strategies, evidentiary standards, or other factors used in applying the NQTL to mental health and substance use disorders in the classification are comparable to, and are applied no more stringently than, the processes, strategies, evidentiary standards, or other factors used in applying the NQTL with respect to medical and surgical benefits in the same classification.

(e) All health plans must meet the requirements of the federal Mental Health Parity Act of 1996, Public Law 104-204; Paul Wellstone and Pete Domenici Mental Health Parity and Addiction Equity Act of 2008; the Affordable Care Act; and any amendments to, and federal guidance or regulations issued under, those acts.

(f) The commissioner may require information from health plan companies to confirm that mental health parity is being implemented by the health plan company. Information required may include comparisons between mental health and substance use disorder treatment and other medical conditions, including a comparison of prior authorization requirements, drug formulary design, claim denials, rehabilitation services, and other information the commissioner deems appropriate.

(g) Regardless of the health care provider's professional license, if the service provided is consistent with the provider's scope of practice and the health plan company's credentialing and contracting provisions, mental health therapy visits and medication maintenance visits shall be considered primary care visits for the purpose of applying any enrollee cost-sharing requirements imposed under the enrollee's health plan.

(h) All health plan companies offering health plans that provide coverage for alcoholism, mental health, or chemical dependency benefits shall provide reimbursement for the benefits delivered through the psychiatric Collaborative Care Model, which must include the following Current Procedural Terminology or Healthcare Common Procedure Coding System billing codes:

(1) 99492;

(2) 99493;

(3) 99494;

(4) G2214; and

(5) G0512.

This paragraph does not apply to managed care plans or county-based purchasing plans when the plan provides coverage to public health care program enrollees under chapter 256B or 256L.

(i) The commissioner of commerce shall update the list of codes in paragraph (h) if any alterations or additions to the billing codes for the psychiatric Collaborative Care Model are made.

(j) "Psychiatric Collaborative Care Model" means the evidence-based, integrated behavioral health service delivery method described at Federal Register, volume 81, page 80230, which includes a formal collaborative arrangement among a primary care team consisting of a primary care provider, a care manager, and a psychiatric consultant, and includes but is not limited to the following elements:

(1) care directed by the primary care team;

(2) structured care management;

(3) regular assessments of clinical status using validated tools; and

(4) modification of treatment as appropriate.

(k) By June 1 of each year~~, beginning June 1, 2021~~, the commissioner of commerce~~, in consultation with the commissioner of health,~~ shall submit a report on compliance and oversight to the chairs and ranking minority members of the legislative committees with jurisdiction over health and commerce. The report must:

(1) describe the commissioner's process for reviewing health plan company compliance with United States Code, title 42, section 18031(j), any federal regulations or guidance relating to compliance and oversight, and compliance with this section and section 62Q.53;

(2) identify any enforcement actions taken by either commissioner during the preceding 12-month period regarding compliance with parity for mental health and substance use disorders benefits under state and federal law, summarizing the results of any market conduct examinations. The summary must include: (i) the number of formal enforcement actions taken; (ii) the benefit classifications examined in each enforcement action; and (iii) the subject matter of each enforcement action, including quantitative and nonquantitative treatment limitations;

(3) detail any corrective action taken by either commissioner to ensure health plan company compliance with this section, section 62Q.53, and United States Code, title 42, section 18031(j); and

(4) describe the information provided by either commissioner to the public about alcoholism, mental health, or chemical dependency parity protections under state and federal law.

The report must be written in nontechnical, readily understandable language and must be made available to the public by, among other means as the commissioners find appropriate, posting the report on department websites. Individually identifiable information must be excluded from the report, consistent with state and federal privacy protections.

EFFECTIVE DATE. This section is effective July 1, 2027.

Sec. 40. Minnesota Statutes 2024, section 62Q.51, subdivision 3, is amended to read:

Subd. 3. **Rate approval.** The premium rates and cost sharing requirements for each option must be submitted to ~~the commissioner of health or~~ the commissioner of commerce as required by law. A health plan that includes lower enrollee cost sharing for services provided by network providers than for services provided by out-of-network providers, or lower enrollee cost sharing for services provided with prior authorization or second opinion than for services provided without prior authorization or second opinion, qualifies as a point-of-service option.

EFFECTIVE DATE. This section is effective July 1, 2027.

Sec. 41. Minnesota Statutes 2024, section 62Q.556, subdivision 3, is amended to read:

Subd. 3. **Annual data reporting.** (a) Beginning April 1, 2024, a health plan company must report annually to the commissioner of ~~health~~ commerce:

(1) the total number of claims and total billed and paid amounts for nonparticipating provider services, by service and provider type, submitted to the health plan in the prior calendar year; and

(2) the total number of enrollee complaints received regarding the rights and protections established by the No Surprises Act in the prior calendar year.

(b) The ~~commissioners~~ commissioner of commerce ~~and health~~ shall develop the form and manner for health plan companies to comply with paragraph (a).

EFFECTIVE DATE. This section is effective July 1, 2027.

Sec. 42. Minnesota Statutes 2024, section 62Q.556, subdivision 4, is amended to read:

Subd. 4. **Enforcement.** (a) Any provider or facility, including a health care provider or facility pursuant to section 62A.63, subdivision 2, or 62J.03, subdivision 8, that is subject to the relevant provisions of the No Surprises Act is subject to the requirements of this section and section 62J.811.

(b) The commissioner of commerce ~~or health~~ shall enforce this section.

(c) If a health-related licensing board has cause to believe that a provider has violated this section, it may further investigate and enforce the provisions of this section pursuant to chapter 214.

EFFECTIVE DATE. This section is effective July 1, 2027.

Sec. 43. Minnesota Statutes 2024, section 62Q.69, subdivision 2, is amended to read:

Subd. 2. **Procedures for filing a complaint.** (a) A complainant may submit a complaint to a health plan company either by telephone or in writing. If a complaint is submitted orally and the resolution of the complaint, as determined by the complainant, is partially or wholly adverse to the complainant, or the oral complaint is not resolved to the satisfaction of the complainant, by the health plan company within ten days of receiving the complaint, the health plan company must inform the complainant that the complaint may be submitted in writing. The health plan company must also offer to provide the complainant with any assistance needed to submit a written complaint, including an offer to complete the complaint form for a complaint that was previously submitted orally and promptly mail the completed form to the complainant for the complainant's signature. At the complainant's request, the health plan company must provide the assistance requested by the complainant. The complaint form must include the following information:

(1) the telephone number of the health plan company member services or other departments or persons equipped to advise complainants on complaint resolution;

(2) the address to which the form must be sent;

(3) a description of the health plan company's internal complaint procedure and the applicable time limits; and

(4) the toll-free telephone number of ~~either~~ the commissioner of ~~health or~~ commerce and notification that the complainant has the right to submit the complaint at any time to the ~~appropriate~~ commissioner for investigation.

(b) Upon receipt of a written complaint, the health plan company must notify the complainant within ten business days that the complaint was received, unless the complaint is resolved to the satisfaction of the complainant within the ten business days.

(c) Each health plan company must provide, in the member handbook, subscriber contract, or certification of coverage, a clear and concise description of how to submit a complaint and a statement that, upon request, assistance in submitting a written complaint is available from the health plan company.

EFFECTIVE DATE. This section is effective July 1, 2027.

Sec. 44. Minnesota Statutes 2024, section 62Q.69, subdivision 3, is amended to read:

Subd. 3. **Notification of complaint decisions.** (a) The health plan company must notify the complainant in writing of its decision and the reasons for it as soon as practical but in no case later than 30 days after receipt of a written complaint. If the health plan company cannot make a decision within 30 days due to circumstances outside the control of the health plan company, the health plan company may take up to 14 additional days to notify the complainant of its decision. If the health plan company takes any additional days beyond the initial 30-day period to make its decision, it must inform the complainant, in advance, of the extension and the reasons for the extension.

(b) For group health plans, if the decision is partially or wholly adverse to the complainant, the notification must inform the complainant of the right to appeal the decision to the health plan company's internal appeal process described in section 62Q.70 and the procedure for initiating an appeal.

(c) For individual health plans, if the decision is partially or wholly adverse to the complainant, the notification must inform the complainant of the right to submit the complaint decision to the external review process described in section 62Q.73 and the procedure for initiating the external review process. Notwithstanding the provisions in this subdivision, a health plan company offering individual coverage may instead follow the process for group health plans outlined in paragraph (b).

(d) The notification must also inform the complainant of the right to submit the complaint at any time to ~~either~~ the commissioner of ~~health or~~ commerce for investigation and the toll-free telephone number of the ~~appropriate~~ commissioner.

EFFECTIVE DATE. This section is effective July 1, 2027.

Sec. 45. Minnesota Statutes 2024, section 62Q.71, is amended to read:

62Q.71 NOTICE TO ENROLLEES.

Each health plan company shall provide to enrollees a clear and concise description of its complaint resolution procedure, if applicable under section 62Q.68, subdivision 1, and the procedure used for utilization review as defined under chapter 62M as part of the member handbook, subscriber contract, or certificate of coverage. If the health plan company does not issue a member handbook, the health plan company may provide the description in another written document. The description must specifically inform enrollees:

(1) how to submit a complaint to the health plan company;

(2) if the health plan includes utilization review requirements, how to notify the utilization review organization in a timely manner and how to obtain authorization for health care services;

(3) how to request an appeal either through the procedures described in section 62Q.70, if applicable, or through the procedures described in chapter 62M;

(4) of the right to file a complaint with ~~either~~ the commissioner of ~~health or~~ commerce at any time during the complaint and appeal process;

(5) of the toll-free telephone number of the ~~appropriate~~ commissioner; and

(6) of the right, for individual and group coverage, to obtain an external review under section 62Q.73 and a description of when and how that right may be exercised, including that under most circumstances an enrollee must exhaust the internal complaint or appeal process prior to external review. However, an enrollee may proceed to external review without exhausting the internal complaint or appeal process under the following circumstances:

(i) the health plan company waives the exhaustion requirement;

(ii) the health plan company is considered to have waived the exhaustion requirement by failing to substantially comply with any requirements including, but not limited to, time limits for internal complaints or appeals; or

(iii) the enrollee has applied for an expedited external review at the same time the enrollee has applied for internal review under chapter 62M.

EFFECTIVE DATE. This section is effective July 1, 2027.

Sec. 46. Minnesota Statutes 2024, section 62Q.73, subdivision 3, is amended to read:

Subd. 3. **Right to external review.** (a) Any enrollee or anyone acting on behalf of an enrollee who has received an adverse determination may submit a written request for an external review of the adverse determination, if applicable under section 62Q.68, subdivision 1, or 62M.06, ~~to the commissioner of health if the request involves a health plan company regulated by that commissioner or~~ to the commissioner of commerce ~~if the request involves a health plan company regulated by that commissioner~~. Notification of the enrollee's right to external review must accompany the denial issued by the insurer.

(b) Nothing in this section requires the commissioner of ~~health or~~ commerce to independently investigate an adverse determination referred for independent external review.

(c) If an enrollee requests an external review, the health plan company must participate in the external review. The cost of the external review must be borne by the health plan company.

(d) The enrollee must request external review within six months from the date of the adverse determination.

EFFECTIVE DATE. This section is effective July 1, 2027.

Sec. 47. Minnesota Statutes 2024, section 62Q.73, subdivision 10, is amended to read:

Subd. 10. **Data reporting.** The ~~commissioners~~ commissioner of commerce shall make available to the public, upon request, summary data on the decisions rendered under this section, including the number of reviews heard and decided and the final outcomes. Any data released to the public must not individually identify the enrollee initiating the request for external review.

EFFECTIVE DATE. This section is effective July 1, 2027.

Sec. 48. Minnesota Statutes 2024, section 62Q.81, subdivision 7, is amended to read:

Subd. 7. **Standard plans.** (a) A health plan company that offers individual health plans must ensure that no less than one individual health plan at each level of coverage described in subdivision 1, paragraph (b), clause (3), that the health plan company offers in each geographic rating area the health plan company serves conforms to the standard plan parameters determined by the commissioner under paragraph (e).

(b) An individual health plan offered under this subdivision must be:

(1) clearly and appropriately labeled as standard plans to aid the purchaser in the selection process;

(2) marketed as standard plans and in the same manner as other individual health plans offered by the health plan company; and

(3) offered for purchase to any individual.

(c) This subdivision does not apply to catastrophic plans, grandfathered plans, small group health plans, large group health plans, health savings accounts, qualified high deductible health benefit plans, limited health benefit plans, or short-term limited-duration health insurance policies.

(d) Health plan companies must meet the requirements in this subdivision separately for plans offered through MNsure under chapter 62V and plans offered outside of MNsure.

(e) The commissioner of commerce~~, in consultation with the commissioner of health,~~ must annually determine standard plan parameters, including but not limited to cost-sharing structure and covered benefits, that comprise a standard plan in Minnesota.

(f) Notwithstanding section 62A.65, subdivision 2, a health plan company may discontinue offering a health plan under this subdivision if, three years after the date the plan is initially offered, the plan has fewer than 75 enrollees. A health plan company discontinuing a health plan under this paragraph may discontinue a health plan that has fewer than 75 enrollees if it:

(1) provides notice of the plan's discontinuation in writing, in a form prescribed by the commissioner, to each enrollee of the plan at least 90 calendar days before the date the coverage is discontinued;

(2) offers on a guaranteed issue basis to each enrollee the option to purchase an individual health plan currently being offered by the health plan company for individuals in that geographic rating area. An enrollee who does not select an option shall be automatically enrolled in the individual health plan closest in actuarial value to the enrollee's current plan; and

(3) acts uniformly without regard to any health status-related factor of an enrollee or an enrollee's dependents who may become eligible for coverage.

EFFECTIVE DATE. This section is effective July 1, 2027.

Sec. 49. **REVISOR INSTRUCTION.**

(a) Except as otherwise provided in this act, the revisor of statutes shall substitute the term "commissioner of commerce" for the term "commissioner of health" wherever the term appears in (1) Minnesota Statutes, chapters 62D, except section 62D.02, subdivision 12; 62L; and 62Q, except sections 62Q.19 and 62Q.33; (2) Minnesota Statutes, sections 60B.15, 60B.191, 60B.20, 62K.09, 62K.10, 62K.105, 62K.12, 62K.13, 62K.14, 62W.05, 256B.69, and 256B.692; (3) Minnesota Rules, chapters 4685, 2740, 4688; and (4) Minnesota Rules, part 9510.2020, subparts 3 and 8, item C. The revisor shall also make any necessary grammatical changes to verbs or other words to conform with this substitution.

(b) The revisor of statutes shall remove the term "commissioner of health" wherever the term appears in Minnesota Rules, chapter 2730.

EFFECTIVE DATE. This section is effective July 1, 2027.

ARTICLE 11

GAS RESOURCE DEVELOPMENT

Section 1. Minnesota Statutes 2024, section 103I.001, is amended to read:

103I.001 LEGISLATIVE INTENT.

This chapter is intended to protect the health and general welfare by providing a means for the ~~development and~~ protection of the natural resource of groundwater in an orderly, healthful, and reasonable manner.

Sec. 2. Minnesota Statutes 2024, section 103I.005, subdivision 9, is amended to read:

Subd. 9. **Exploratory boring.** "Exploratory boring" means a surface drilling done to explore or prospect for ~~oil, natural~~ gas, apatite, diamonds, graphite, gemstones, kaolin clay, and metallic minerals, including iron, copper, zinc, lead, gold, silver, titanium, vanadium, nickel, cadmium, molybdenum, chromium, manganese, cobalt, zirconium, beryllium, thorium, uranium, aluminum, platinum, palladium, radium, tantalum, tin, and niobium~~, and a drilling or boring for petroleum~~.

Sec. 3. Minnesota Statutes 2024, section 103I.005, is amended by adding a subdivision to read:

Subd. 10a. **Gas.** "Gas" includes both hydrocarbon and nonhydrocarbon gases.

Sec. 4. Minnesota Statutes 2024, section 103I.005, is amended by adding a subdivision to read:

Subd. 10b. **Gas well.** "Gas well" means an excavation that is constructed to locate, extract, or produce gas.

Sec. 5. Minnesota Statutes 2024, section 103I.005, is amended by adding a subdivision to read:

Subd. 10c. **Gas well contractor.** "Gas well contractor" means a person with a gas well contractor's license issued by the commissioner.

Sec. 6. Minnesota Statutes 2024, section 103I.005, subdivision 21, is amended to read:

Subd. 21. **Well.** "Well" means an excavation that is drilled, cored, bored, washed, driven, dug, jetted, or otherwise constructed if the excavation is intended for the location, diversion, artificial recharge, monitoring, testing, remediation, or acquisition of groundwater. Well includes environmental wells, drive point wells, and dewatering wells. "Well" does not include:

(1) an excavation by backhoe, or otherwise for temporary dewatering of groundwater for nonpotable use during construction, if the depth of the excavation is 25 feet or less;

(2) an excavation made to obtain or prospect for oil, ~~natural~~ gas, minerals, or products of mining or quarrying;

(3) an excavation to insert media to repressure oil or ~~natural~~ gas bearing formations or to store petroleum, ~~natural~~ gas, or other products;

(4) an excavation for nonpotable use for wildfire suppression activities; ~~or~~

(5) borings; or

(6) gas and oil wells.

Sec. 7. Minnesota Statutes 2024, section 103I.601, subdivision 1, is amended to read:

Subdivision 1. **Definitions.** (a) For the purposes of this section, the following words have the meanings given them.

(b) "Data" includes samples and factual noninterpreted data obtained from exploratory borings and samples including analytical results.

(c) "Parcel" means a government section, fractional section, or government lot.

(d) "Samples" means at least a one-quarter portion of all samples from exploratory borings that are customarily collected by the explorer. When the exploratory borings are being done to explore or prospect for kaolin clay, "samples" means a representative sample of at least two cubic inches of material per foot from exploratory borings of the material that is customarily collected by the explorer.

(e) "Encounter gas" means a sustained presence of gas in an exploratory boring for at least 24 hours and in which gas has not dissipated prior to sealing.

Sec. 8. Minnesota Statutes 2024, section 103I.601, is amended by adding a subdivision to read:

Subd. 10. **Exploratory borings encountering gas.** (a) Requirements in this subdivision apply only for exploratory borings encountering gas.

(b) An explorer must notify the commissioners of health and natural resources:

(1) within 24 hours of drilling an exploratory boring encountering gas; and

(2) prior to beginning a permanent sealing of an exploratory boring encountering gas.

(c) An explorer must submit a permanent sealing notification and fee of $125 to the commissioner prior to permanently sealing an exploratory boring encountering gas.

(d) An explorer must begin permanently sealing an exploratory boring encountering gas within ten days of encountering gas.

(e) An exploratory boring encountering gas is exempt from paragraph (d) if the boring is constructed to prevent movement of gas and water within and from one geological formation to another. The boring must be permanently sealed within 90 days after the completion of drilling unless gas is no longer present in the boring.

(f) An exploratory boring encountering gas must be permanently sealed from the bottom of the boring to within two feet of the established ground surface.

(g) A permanent sealing report as required by subdivision 9 must also contain information indicating gas was encountered during construction and at what depth it was encountered.

(h) A person must not use an exploratory boring to extract gas for production.

Sec. 9. Minnesota Statutes 2024, section 103I.601, is amended by adding a subdivision to read:

Subd. 11. **Conversion of a gas well prohibited.** A person must not convert a gas well to any other type of well or boring.

Sec. 10. Minnesota Statutes 2024, section 103I.601, is amended by adding a subdivision to read:

Subd. 12. **Conversion of a well or boring to a gas well.** A person must not convert a well or boring to a gas well, except that an exploratory boring constructed before enactment of section 103I.707 may be converted to a gas well if constructed in accordance with provisions of section 103I.707, except that the outermost casing may be:

(1) ASTM Standard A53;

(2) ASTM Standard A589, Types I, II, and III;

(3) API Specification 5L; or

(4) API Specification 5CT.

Sec. 11. **[103I.706] GAS WELLS.**

Subdivision 1. **Rulemaking authority.** The commissioner of health must adopt rules for gas wells including requirements for drilling, construction, sealing, use, reporting, and rig registration; and for licensing and certifying persons constructing, repairing, and sealing gas wells. In adopting rules under this section, the commissioner must use the expedited procedure in section 14.389. Rules adopted or amended under this authority are exempt from the 18-month time limit under section 14.125. The commissioner must publish notice of intent to adopt expedited rules within 24 months after May 22, 2026.

Subd. 2. **Fees.** (a) License, certification, and registration renewals are not prorated and expire on December 31 of each year.

(b) An applicant must meet the gas well contractor license requirements and fee requirements to construct, repair, or seal a gas well. The fee for a gas well contractor license is $300. The annual renewal fee for a gas well contractor license is $300.

(c) A gas well contractor must designate a certified representative. The certified representative must meet the application and fee requirements. The application fee for a certified representative is $100. The annual renewal fee for a certified representative is $100.

(d) A gas well contractor must meet the registration and fee requirements for rigs used to construct, repair, service, or seal a gas well. The fee to register gas well rigs is $125. The annual renewal fee for gas well rig registration is $125.

(e) If a gas well contractor or certified representative under paragraphs (b) and (c) fails to submit all information required for renewal or submits the application and information after the required renewal date:

(1) the gas well contractor or certified representative must include a late fee of $75; and

(2) the gas well contractor or certified representative may not conduct activities authorized by the gas well contractor's license or certified representative's certification until the renewal application, renewal application fee, and all other information required is submitted.

(f) A gas well contractor must submit a notification for construction of a proposed gas well on a form prescribed by the commissioner, with a fee of $10,000.

(g) A gas well contractor must submit a notification for sealing a gas well on a form prescribed by the commissioner, with a fee of $7,500.

Subd. 3. **Rig registration.** (a) Rigs used to drill, maintain, repair, or seal a gas well, including drilling rigs and workover rigs, must be registered with the commissioner.

(b) A person must file an application to register a rig on a form provided by the commissioner with the fee under subdivision 2, paragraph (d), with the commissioner.

(c) A registration is valid until the date prescribed by the commissioner in the registration.

(d) A person must file an application with the fee under subdivision 2, paragraph (d), to renew the registration by the date prescribed by the commissioner in the registration.

Subd. 4. **Gas well contractor's license.** (a) A person must not construct, repair, or seal a gas well without a gas well contractor's license issued by the commissioner.

(b) A person must file a complete application for a gas well contractor's license on a form provided by the commissioner with the fee under subdivision 2, paragraph (b), with the commissioner. The person applying must meet the qualifications for a gas well contractor license.

(c) A gas well contractor's license is valid until the date prescribed by the commissioner in the license.

(d) A gas well contractor must file a complete application with the fee under subdivision 2, paragraph (b), to renew the license by the date prescribed by the commissioner in the license. A person must not construct, repair, or seal a gas well until a gas well contractor's license is renewed. The commissioner may not renew a license until the renewal fee is paid.

(e) A gas well contractor must include information at the time of renewal that the applicant has met the continuing education requirements established by the commissioner for gas wells.

(f) A gas well contractor must designate a certified representative to supervise and oversee regulated work on gas wells.

(g) A person must file a complete application on a form provided by the commissioner with the fee under subdivision 2, paragraph (c), to qualify as a certified representative.

(h) A certified representative must file an application with the fee under subdivision 2, paragraph (c), to renew the certification by the expiration date prescribed by the commissioner on the certification. A certified representative may not supervise or oversee regulated work on a gas well until the renewal application and application fee are submitted. The commissioner may not review a certification until the renewal fee is paid.

(i) A certified representative must include information at the time of renewal that the applicant has met the continuing education requirements established by the commissioner for gas wells.

(j) The commissioner of natural resources may require a bond, security, or other assurance from a gas well contractor if the commissioner of natural resources has reasonable doubts about the person's financial ability to comply with the requirements of law relating to reclamation of a gas well and the process to restore the land disturbed by a gas well drilling and production operations back to the condition of original state.

(k) The commissioner may suspend or revoke a licensee's license according to section 144.99.

Subd. 5. **Construction notification.** (a) A gas well contractor must not begin drilling or constructing a gas well unless it is included in a valid gas resource development permit issued by the commissioner of natural resources.

(b) The contractor must submit a notification to the commissioner to construct a gas well after receiving permit approval from the commissioner of natural resources and prior to drilling or constructing a gas well. A gas well contractor must file the gas well notification with the fee under subdivision 2, paragraph (f), with the commissioner.

Subd. 6. **Access to drill sites.** (a) The commissioner of health shall have access to gas well sites to inspect gas wells, including the drilling, construction, and sealing of gas wells.

(b) The commissioner of health has enforcement authority according to section 144.99.

Subd. 7. **Emergency notification.** In the event of an occurrence during construction, repair, or sealing of a gas well that has a potential for significant adverse public health or environmental effects, the person drilling or constructing a gas or well must promptly:

(1) take reasonable action to minimize the adverse effects; and

(2) notify the commissioners of health, natural resources, and the Pollution Control Agency immediately by informing the Minnesota Duty Officer.

Subd. 8. **Sealing notification.** (a) A gas well, including an unsuccessful gas well, that is not in use must be sealed by a gas well contractor.

(b) A gas well contractor must file a notification and fee with the commissioner prior to sealing a gas well.

Subd. 9. **Report of work.** Within 60 days after completion or sealing of a gas well, the gas well contractor must submit a verified report to the commissioner on a form prescribed by the commissioner or in a format approved by the commissioner.

Sec. 12. **[103I.707] MORATORIUM ON GAS WELL CONSTRUCTION UNTIL ADOPTION OF RULES.**

Until rules are adopted under section 103I.706, a person shall not drill or construct a gas well or an exploratory boring in this state.

Sec. 13. **[103I.708] OIL WELLS.**

Notwithstanding any provision of chapter 93, or the rules adopted thereunder, to the contrary, a person shall not explore, prospect, or construct an oil well.

Sec. 14. **EFFECTIVE DATE.**

This article is effective the day following final enactment."

Page 221, after line 3, insert:

"Sec. 2. **[62Q.60] COVERAGE OF INFERTILITY TREATMENT.**

Subdivision 1. **Scope.** This section applies, and only applies, to all large group health plans that provide maternity benefits to Minnesota residents.

Subd. 2. **Definitions.** (a) For purposes of this section, the following terms have the meanings given.

(b) "Diagnosis of and treatment for infertility" means procedures and medications:

(1) to diagnose or treat infertility; and

(2) consistent with established, published, or approved medical practices or professional guidelines from the American College of Obstetricians and Gynecologists or the American Society for Reproductive Medicine.

(c) "Infertility" means a disease, condition, or status characterized by:

(1) the failure of a person with a uterus to establish a pregnancy or to carry a pregnancy to live birth after the following duration of unprotected sexual intercourse, regardless of whether a pregnancy resulted in miscarriage during such time:

(i) for a person under the age of 35, 12 months duration; or

(ii) for a person 35 years of age or older, six months duration;

(2) a person's inability to reproduce without medical intervention either as a single individual or with the person's partner; or

(3) a licensed health care provider's determination that a patient is infertile based on the patient's medical, sexual, and reproductive history; age; physical findings; or diagnostic testing.

(d) "Standard fertility preservation services" means procedures that are consistent with the established medical practices or professional guidelines published by the American Society for Reproductive Medicine or the American Society of Clinical Oncology for a person who has a medical condition or is expected to undergo medication therapy, surgery, radiation, chemotherapy, or other medical treatment that is recognized by medical professionals to cause a risk of impairment to fertility.

Subd. 3. **Required coverage.** (a) Health plans must provide comprehensive coverage for:

(1) diagnosis of and treatment for infertility; and

(2) standard fertility preservation services.

(b) Coverage under this section must include unlimited embryo transfers but may impose a limit of four completed oocyte retrievals. Single embryo transfer must be used when medically appropriate and recommended by the treating health care provider.

(c) Coverage for surgical reversal of elective sterilization is not required under this section.

Subd. 4. **Cost-sharing requirements.** A health plan must not impose on the coverage under this section any cost-sharing requirement that is greater than the cost-sharing requirement imposed on maternity coverage under the plan, including but not limited to the following requirements:

(1) co-payment;

(2) deductible; or

(3) coinsurance.

Subd. 5. **Exclusions and limitations.** (a) A health plan must not impose any benefit maximum, waiting period, utilization review, referral requirement, or any other limitation on the coverage under this section, except as provided in subdivision 3, paragraphs (b) and (c), that is not generally applicable to maternity coverage under the health plan.

(b) The prohibition under this subdivision includes but is not limited to any exclusion, limitation, or other restriction on:

(1) fertility medications that are different from those imposed on other prescription medications; and

(2) any fertility services based on an enrollee's participation in fertility services provided by or to a third party.

Subd. 6. **Exception.** Notwithstanding subdivision 1, this section does not apply to the State Employees Group Insurance Program.

EFFECTIVE DATE. This section is effective January 1, 2027, and applies to all large group health plans issued or renewed on or after that date that provide maternity benefits to Minnesota residents.

Sec. 3. Minnesota Statutes 2024, section 62Q.679, is amended to read:

62Q.679 RELIGIOUS OBJECTIONS.

Subdivision 1. **Definitions.** (a) The definitions in this subdivision apply to this section.

(b) "Closely held for-profit entity" means an entity that is not a nonprofit entity, has more than 50 percent of the value of its ownership interest owned directly or indirectly by five or fewer owners, and has no publicly traded ownership interest. For purposes of this paragraph:

(1) ownership interests owned by a corporation, partnership, limited liability company, estate, trust, or similar entity are considered owned by that entity's shareholders, partners, members, or beneficiaries in proportion to their interest held in the corporation, partnership, limited liability company, estate, trust, or similar entity;

(2) ownership interests owned by a nonprofit entity are considered owned by a single owner;

(3) ownership interests owned by all individuals in a family are considered held by a single owner. For purposes of this clause, "family" means brothers and sisters, including half-brothers and half-sisters, a spouse, ancestors, and lineal descendants; and

(4) if an individual or entity holds an option, warrant, or similar right to purchase an ownership interest, the individual or entity is considered to be the owner of those ownership interests.

(c) "Eligible organization" means an organization that opposes covering some or all health benefits under section 62Q.522, 62Q.524, ~~or~~ 62Q.585, or 62Q.60 on account of religious objections and that is:

(1) organized as a nonprofit entity and holds itself out to be religious; or

(2) organized and operates as a closely held for-profit entity, and the organization's owners or highest governing body has adopted, under the organization's applicable rules of governance and consistent with state law, a resolution or similar action establishing that the organization objects to covering some or all health benefits under section 62Q.522, 62Q.524, ~~or~~ 62Q.585, or 62Q.60 on account of the owners' sincerely held religious beliefs.

(d) "Exempt organization" means an organization that is organized and operates as a nonprofit entity and meets the requirements of section 6033(a)(3)(A)(i) or (iii) of the Internal Revenue Code of 1986, as amended.

Subd. 2. **Exemption.** (a) An exempt organization is not required to provide coverage under section 62Q.522, 62Q.524, ~~or~~ 62Q.585, or 62Q.60 if the exempt organization has religious objections to the coverage. An exempt organization that chooses to not provide coverage pursuant to this paragraph must notify employees as part of the hiring process and must notify all employees at least 30 days before:

(1) an employee enrolls in the health plan; or

(2) the effective date of the health plan, whichever occurs first.

(b) If the exempt organization provides partial coverage under section 62Q.522, 62Q.524, ~~or~~ 62Q.585, or 62Q.60, the notice required under paragraph (a) must provide a list of the portions of such coverage which the organization refuses to cover.

Subd. 3. **Accommodation for eligible organizations.** (a) A health plan established or maintained by an eligible organization complies with the coverage requirements of section 62Q.522, 62Q.524, ~~or~~ 62Q.585, or 62Q.60, with respect to the health benefits identified in the notice under this paragraph, if the eligible organization provides notice to any health plan company with which the eligible organization contracts that it is an eligible organization and that the eligible organization has a

religious objection to coverage for all or a subset of the health benefits under section 62Q.522, 62Q.524, ~~or~~ 62Q.585, or 62Q.60.

(b) The notice from an eligible organization to a health plan company under paragraph (a) must include: (1) the name of the eligible organization; (2) a statement that it objects to coverage for some or all of the health benefits under section 62Q.522, 62Q.524, ~~or~~ 62Q.585, or 62Q.60, including a list of the health benefits to which the eligible organization objects, if applicable; and (3) the health plan name. The notice must be executed by a person authorized to provide notice on behalf of the eligible organization.

(c) An eligible organization must provide a copy of the notice under paragraph (a) to prospective employees as part of the hiring process and to all employees at least 30 days before:

(1) an employee enrolls in the health plan; or

(2) the effective date of the health plan, whichever occurs first.

(d) A health plan company that receives a copy of the notice under paragraph (a) with respect to a health plan established or maintained by an eligible organization must, for all future enrollments in the health plan:

(1) expressly exclude coverage for those health benefits identified in the notice under paragraph (a) from the health plan; and

(2) provide separate payments for any health benefits required to be covered under section 62Q.522, 62Q.524, ~~or~~ 62Q.585, or 62Q.60 for enrollees as long as the enrollee remains enrolled in the health plan.

(e) The health plan company must not impose any cost-sharing requirements, including co-pays, deductibles, or coinsurance, or directly or indirectly impose any premium, fee, or other charge for the health benefits under section 62Q.522 on the enrollee. The health plan company must not directly or indirectly impose any premium, fee, or other charge for the health benefits under section 62Q.522, 62Q.524, ~~or~~ 62Q.585, or 62Q.60 on the eligible organization or health plan.

(f) On January 1, 2025, and every year thereafter a health plan company must notify the commissioner, in a manner determined by the commissioner, of the number of eligible organizations granted an accommodation under this subdivision.

EFFECTIVE DATE. This section is effective January 1, 2027."

Page 226, line 30, delete "19,993,000" and insert "25,588,000"

Page 227, line 1, delete "-0-" and insert "34,000" and delete "1,431,000" and insert "1,473,000"

Page 227, line 3, delete "$6,995,000" and insert "$6,969,000" and delete "$7,791,000" and insert "$7,805,000"

Page 227, delete section 6

Page 227, line 14, delete "(417,000)" and insert "5,143,000"

Page 227, line 33, after "program" insert "under Minnesota Statutes, section 256.01, subdivision 2, paragraph (a), clause (6)" and after the period insert "Grants under this subdivision are subject to the grant requirements under Minnesota Statutes, chapter 16B."

Page 228, after line 13, insert:

"Sec. 14. **GRANT ADMINISTRATION COSTS.**

This article appropriates necessary administrative costs. The administrative costs retention requirement under Minnesota Statutes, section 16B.98, subdivision 14, is inapplicable to any appropriation in this article for a grant.

Sec. 15. **EXPIRATION OF UNCODIFIED LANGUAGE.**

All uncodified language contained in this article expires on June 30, 2027, unless a different expiration date is explicit or an appropriation is made available beyond June 30, 2027.

Sec. 16. **APPROPRIATIONS GIVEN EFFECT ONCE.**

If an appropriation, transfer, or cancellation in this article is enacted more than once during the 2026 legislative session, the appropriation, transfer, or cancellation must be given effect once."

Page 228, line 30, delete "65,445,000" and insert "74,017,000"

Page 228, line 35, delete "25,819,000" and insert "11,119,000"

Page 228, after line 35, insert:

"The base is increased by $12,182,000 in fiscal year 2028 and $10,985,000 in fiscal year 2029."

Page 228, before line 36, insert:

"Sec. 4. **OPERATIONS AND ADMINISTRATION; CHILD SAFETY AND PERMANENCY**	**$**	**-0-**	**$**	**1,346,000**

The base is increased by $1,582,000 in fiscal year 2028 and $1,582,000 in fiscal year 2029."

Page 228, after line 37, insert:

"Sec. 6. **OPERATIONS AND ADMINISTRATION; ECONOMIC OPPORTUNITY AND YOUTH SERVICES**	**$**	**-0-**	**$**	**441,000**

This is a onetime appropriation."

Page 229, line 7, delete "FOOD" and insert "NUTRITION"

Page 229, after line 28, insert:

"Sec. 11. **GRANT PROGRAMS; CHILD AND COMMUNITY SERVICES GRANTS**	**$**	**-0-**	**$**	**14,085,000**

Subdivision 1. **Minnesota African American Family Preservation and Child Welfare Disproportionality Act**

$14,085,000 in fiscal year 2027 is for counties for child protection grants under Minnesota Statutes, section 256M.41.

Subd. 2. **Base Adjustment**

The general fund base for this section is $13,924,000 in fiscal year 2028 and $13,924,000 in fiscal year 2029."

Page 229, line 30, delete "11,032,000" and insert "18,432,000"

Page 229, line 33, delete "$2,500,000" and insert "$2,300,000"

Page 229, line 35, after "appropriation" insert "and is available until June 30, 2028"

Page 230, line 2, delete "$5,000,000" and insert "$9,900,000"

Page 230, line 6, delete "$2,700,000" and insert "$5,400,000"

Page 232, after line 31, insert:

"Sec. 15. **GRANT ADMINISTRATION COSTS.**

This article appropriates necessary administrative costs. The administrative costs retention requirement under Minnesota Statutes, section 16B.98, subdivision 14, is inapplicable to any appropriation in this article for a grant.

Sec. 16. **EXPIRATION OF UNCODIFIED LANGUAGE.**

All uncodified language contained in this article expires on June 30, 2027, unless a different expiration date is explicit or an appropriation is made available beyond June 30, 2027.

Sec. 17. **APPROPRIATIONS GIVEN EFFECT ONCE.**

If an appropriation, transfer, or cancellation in this article is enacted more than once during the 2026 legislative session, the appropriation, transfer, or cancellation must be given effect once."

Page 233, line 18, delete "233,802,000" and insert "237,605,000"

Page 233, line 21, delete "233,175,000" and insert "236,978,000"

Page 233, line 29, delete "233,175,000" and insert "234,925,000"

Page 233, line 32, after "(a)" insert "**Helping Paws Grant.**"

Page 234, line 8, after "(b)" insert "**Helping Paws; Private Donations.**"

Page 234, line 15, after "(c)" insert "**Crisis Telephone Services.**"

Page 234, line 19, after "(d)" insert "**Hospital Stabilization Program.**"

Page 234, line 27, after "(e)" insert "**Community-Based Safety Net Provider Stabilization Program.**"

Page 235, line 1, after "(f)" insert "**Hennepin Healthcare Stabilization Grant.**"

Page 235, line 10, after "(g)" insert "**Report on Financial Stability of Hospitals.**"

Page 235, after line 13, insert:

"(h) **Hennepin Healthcare Future Structure and Governance Advisory Task Force.** $500,000 in fiscal year 2027 is from the general fund for administration of the Hennepin Healthcare Future Structure and Governance Advisory Task Force. This is a onetime appropriation."

Page 235, line 14, delete "(h)" and insert "(i) **HMO Regulation.**"

Page 235, line 20, delete "(i)" and insert "(j) **All-Payer Claims Data Administration.**"

Page 235, after line 25, insert:

"(k) **Base Adjustment.** The general fund base is reduced by $225,000 in fiscal year 2028 and $225,000 in fiscal year 2029."

Page 235, before line 26, insert:

"Subd. 3. **Health Protection**	-0-	2,053,000

Rulemaking for Gas Wells. $2,053,000 in fiscal year 2027 is for rulemaking activities under Minnesota Statutes, section 103I.706. This is a onetime appropriation and is available until December 31, 2029."

Page 235, line 26, delete "(a)" and delete "paragraph" and insert "paragraphs" and delete ", is" and insert "and (i), are"

Page 235, delete lines 28 to 30 and insert:

"Sec. 3. **GRANT ADMINISTRATION COSTS.**

This article appropriates necessary administrative costs. The administrative costs retention requirement under Minnesota Statutes, section 16B.98, subdivision 14, is inapplicable to any appropriation in this article for a grant.

Sec. 4. **EXPIRATION OF UNCODIFIED LANGUAGE.**

All uncodified language contained in this article expires on June 30, 2027, unless a different expiration date is explicit or an appropriation is made available beyond June 30, 2027.

Sec. 5. **APPROPRIATIONS GIVEN EFFECT ONCE.**

If an appropriation, transfer, or cancellation in this article is enacted more than once during the 2026 legislative session, the appropriation, transfer, or cancellation must be given effect once."

Page 235, line 32, delete "AGENCIES" and insert "AGENCY APPROPRIATIONS"

Page 235, after line 32, insert:

"Section 1. **OTHER AGENCY APPROPRIATIONS.**

The dollar amounts shown in the columns marked "Appropriations" are added to or, if shown in parentheses, are subtracted from the appropriations in Laws 2025, First Special Session chapter 3, articles 23 and 24, from the general fund or any fund named for the purposes specified in this article, to be available for the fiscal year indicated for each purpose. The figures "2026" and "2027" used in this article mean that the appropriations listed under them are available for the fiscal years ending June 30, 2026, or June 30, 2027, respectively. "The first year" is fiscal year 2026. "The second year" is fiscal year 2027. "The biennium" is fiscal years 2026 and 2027.

	APPROPRIATIONS Available for the Year Ending June 30	
	2026	**2027**"

Page 236, line 14, delete "county"

Page 237, line 25, delete "county"

Page 240, after line 12, insert:

"This reduction is for preschool assessment funding."

Page 240, line 32, delete "1,750,000" and insert "-0-"

Page 240, delete line 33

Page 241, line 3, after "2029" insert "for health maintenance organization regulatory activities"

Page 241, line 12, delete "to authorize MNsure"

Page 241, line 13, delete "to use funds" and delete "broader"

Page 241, line 14, delete "supports" and insert "is for"

Page 241, line 17, delete "adjustments" and insert "changes"

Page 241, after line 26, insert:

"Sec. 10. **GRANT ADMINISTRATION COSTS.**

This article appropriates necessary administrative costs. The administrative costs retention requirement under Minnesota Statutes, section 16B.98, subdivision 14, is inapplicable to any appropriation in this article for a grant.

Sec. 11. **EXPIRATION OF UNCODIFIED LANGUAGE.**

All uncodified language contained in this article expires on June 30, 2027, unless a different expiration date is explicit or an appropriation is made available beyond June 30, 2027.

Sec. 12. **APPROPRIATIONS GIVEN EFFECT ONCE.**

If an appropriation, transfer, or cancellation in this article is enacted more than once during the 2026 legislative session, the appropriation, transfer, or cancellation must be given effect once."

Renumber the sections in sequence

Amend the title as follows:

Page 1, line 11, after the second semicolon, insert "transferring regulatory oversight of health maintenance organizations to the commissioner of commerce; requiring coverage of infertility treatment; regulating gas resource development;"

Amend the title numbers accordingly

And when so amended the bill do pass. Amendments adopted. Report adopted.

Senator Murphy from the Committee on Rules and Administration, to which was referred under Senate Concurrent Resolution No. 6, together with the committee report thereon,

S.F. No. 4898: A bill for an act relating to legislature; restricting use of legislative email, telephone numbers, and office space; proposing coding for new law in Minnesota Statutes, chapter 3.

Reports the same back with the recommendation that the provisions of Senate Concurrent Resolution No. 6 be suspended for all further proceedings on S.F. No. 4898 and that the report from the Committee on State and Local Government, shown in the Journal for April 16, 2026, be amended to read:

Delete everything after the enacting clause and insert:

"Section 1. **[3.0555] LEGISLATIVE TECHNOLOGY AND OFFICE SPACE; USE LIMITED.**

Subdivision 1. **Email and telephone.** A member, officer, employee, or intern of the senate or house of representatives is prohibited from establishing a legislative email address for or assigning a legislative telephone number to a person who is not a member, officer, employee, or intern of the senate or house of representatives.

Subd. 2. **Member telephone numbers.** The legislative telephone number assigned by the senate or house of representatives to a member is for the exclusive use of the member and, if authorized by the member, an employee or intern who is assigned to support the member by the member's caucus or legislative body.

Subd. 3. **Office space.** A member, officer, employee, or intern of the senate or house of representatives is prohibited from allowing a contractor or other person who is not a member, officer, employee, or intern to permanently or temporarily office in a space assigned by the commissioner of administration to the senate or house of representatives without prior written notification to the leaders of each caucus in the relevant house.

Subd. 4. **Enforcement.** The senate and house of representatives must adopt rules to implement this section, which must include remedies."

Amend the title accordingly

And when so amended the bill do pass. Amendments adopted. Report adopted.

Senator Murphy from the Committee on Rules and Administration, to which was referred under Senate Concurrent Resolution No. 6, together with the committee report thereon,

S.F. No. 1717: A bill for an act relating to state government; appropriating money for YouLead2025.

Reports the same back with the recommendation that the provisions of Senate Concurrent Resolution No. 6 be suspended for all further proceedings on S.F. No. 1717 and that the report from the Committee on State and Local Government, shown in the Journal for April 23, 2026, be adopted and amended to read:

"the bill be amended and when so amended the bill do pass and be re-referred to the Committee on Finance". Amendments adopted. Report adopted.

Senator Murphy from the Committee on Rules and Administration, to which was referred under Senate Concurrent Resolution No. 6, together with the committee report thereon,

S.F. No. 4073: A bill for an act relating to transportation; designating marked Trunk Highway 610 as Hortman Memorial Highway; amending Minnesota Statutes 2024, section 161.14, by adding a subdivision.

Reports the same back with the recommendation that the provisions of Senate Concurrent Resolution No. 6 be suspended for all further proceedings on S.F. No. 4073 and that the report from

the Committee on Transportation, shown in the Journal for April 20, 2026, be adopted; that committee recommendation being:

"the bill do pass and be re-referred to the Committee on Finance". Report adopted.

Senator Murphy from the Committee on Rules and Administration, to which was re-referred

S.F. No. 3593: A bill for an act relating to state government; proposing an amendment to the Minnesota Constitution, article XI, section 8; modifying the investment, management, and distribution policy for the permanent school fund; amending Minnesota Statutes 2024, sections 11A.16, subdivisions 5, 6; 127A.32.

Reports the same back with the recommendation that the bill do pass. Report adopted.

Senator Marty from the Committee on Finance, to which was re-referred

S.F. No. 3899: A bill for an act relating to state government; renaming the State Office Building after Melissa Hortman; specifying signage cost.

Reports the same back with the recommendation that the bill be amended as follows:

Delete everything after the enacting clause and insert:

"Section 1. Minnesota Statutes 2024, section 161.14, is amended by adding a subdivision to read:

Subd. 111. **Hortman Memorial Highway.** Marked Trunk Highway 610 is designated as "Hortman Memorial Highway." Subject to section 161.139, the commissioner must adopt a suitable design to mark this highway and erect appropriate signs.

Sec. 2. **MELISSA HORTMAN STATE OFFICE BUILDING.**

The state building located at 100 Rev. Dr. Martin Luther King Jr. Blvd. in the city of St. Paul is renamed as the Melissa Hortman State Office Building.

Sec. 3. **KARI DZIEDZIC SENATE BUILDING.**

The Minnesota Senate Building located at 95 University Avenue West in the city of St. Paul is renamed as the Kari Dziedzic Senate Building.

Sec. 4. **SIGNAGE COSTS.**

The commissioner of administration must pay for the cost of modifying or replacing signage as necessary to conform with sections 2 and 3 using general fund appropriations available for operations under Laws 2025, chapter 39, article 1, section 11. The commissioner must not include these costs in determining lease rates for fiscal years 2028 and 2029 or otherwise pass the cost of signage on to tenants of the building in sections 2 and 3.

Sec. 5. **MELISSA AND MARK HORTMAN MEMORIAL STATE PARK WORKING GROUP.**

Subdivision 1. **Melissa and Mark Hortman Memorial State Park working group.** (a) The Melissa and Mark Hortman Memorial State Park working group consists of the following members:

(1) the governor or the governor's designee;

(2) the commissioner of administration or the commissioner's designee;

(3) the commissioner of natural resources or the commissioner's designee;

(4) the chair of the Capitol Area Architectural and Planning Board or the chair's designee;

(5) the executive director of the Minnesota Historical Society or the executive director's designee;

(6) the chairs and ranking minority members of the senate committees with primary jurisdiction over the Department of Administration and Department of Natural Resources or their designees;

(7) the cochairs of the house of representatives committees with primary jurisdiction over the Department of Administration and Department of Natural Resources or their designees; and

(8) the mayor of the city of St. Paul or the mayor's designee.

(b) Appointing authorities must submit their appointments to the executive director of the Legislative Coordinating Commission no later than July 15, 2026.

Subd. 2. **Recommendations.** The working group must make recommendations for the creation of the Melissa and Mark Hortman Memorial State Park within the Capitol Area as defined in Minnesota Statutes, section 15B.02, including:

(1) identifying the roles and responsibilities of the commissioners of administration and natural resources, the Minnesota Historical Society, and the Capitol Area Architectural and Planning Board related to the administration of the park, including assigning the roles and responsibilities for providing educational programming, interpretive services, planning processes for physical changes, and public engagement activities within the park; and

(2) funding recommendations for establishing and maintaining the park and related programming.

Subd. 3. **Chair.** The working group must elect a chair at its first meeting from among its legislative members.

Subd. 4. **Administrative support; meetings.** (a) The Legislative Coordinating Commission must provide administrative support and convene the first meeting by August 15, 2026.

(b) The working group must meet at regular intervals as often as necessary to develop the recommendations under subdivision 2.

Subd. 5. **Per diem; expenses.** Members of the working group serve without pay, except that legislative members may receive per diem from their respective legislative bodies according to the

rules of their respective legislative bodies. All members may be reimbursed for expenses incurred as provided in Minnesota Statutes, section 15.059, subdivision 3.

Subd. 6. **Report.** By February 1, 2027, the working group must submit a written report containing its recommendations to the chairs and ranking minority members of the house of representatives and senate committees with primary jurisdiction over the Department of Administration and the Department of Natural Resources. The report must include draft legislation, if needed, to implement the recommendations of the working group. The working group expires March 15, 2027, or upon submission of the report required by this subdivision, whichever occurs later.

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

Sec. 6. **APPROPRIATION; MELISSA HORTMAN MEMORIAL.**

(a) $800,000 of the appropriation to implement the updated Capitol Mall Design Framework under Laws 2023, chapter 62, article 1, section 11, subdivision 2, as amended by Laws 2025, chapter 39, article 1, section 39, is to design and cast a statue recognizing Melissa Hortman's historic contributions to the state of Minnesota. The statue shall be incorporated into the design of a memorial garden on the State Office Building site by the Department of Administration. Minnesota Rules, part 2400.2703, shall not apply to the activities funded under this section.

(b) Notwithstanding any law or rule to the contrary, the Capitol Area Architectural and Planning Board must select the artist via a competitive process and consult with the immediate family of Melissa Hortman throughout the selection and design approval process. The statue design shall include the likeness of deceased family members of Melissa Hortman.

(c) Any unspent portion of the money under this section remaining after the casting of the statue is available for additional landscaping elements on the memorial garden site.

(d) The money under this section is available until June 30, 2029.

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

Sec. 7. **APPROPRIATION; MELISSA AND MARK HORTMAN MEMORIAL STATE PARK WORKING GROUP.**

$86,000 in fiscal year 2027 is appropriated from the general fund to the Legislative Coordinating Commission for the administrative costs of the Melissa and Mark Hortman Memorial State Park working group in section 5. This is a onetime appropriation.

Sec. 8. **REVISOR INSTRUCTION.**

(a) The revisor of statutes shall replace "State Office Building" with "the Melissa Hortman State Office Building" wherever it appears in Minnesota Statutes and Minnesota Rules.

(b) The revisor of statutes must replace "Minnesota Senate Building" with "the Kari Dziedzic Senate Building" wherever it appears in Minnesota Statutes and Minnesota Rules."

Delete the title and insert:

"A bill for an act relating to state government; designating marked Trunk Highway 610 as Hortman Memorial Highway; renaming state buildings after Melissa Hortman and Kari Dziedzic; establishing a working group for Melissa and Mark Hortman Memorial State Park; requiring a report; appropriating money; amending Minnesota Statutes 2024, section 161.14, by adding a subdivision."

And when so amended the bill do pass. Amendments adopted. Report adopted.

Senator Marty from the Committee on Finance, to which was re-referred

S.F. No. 4511: A bill for an act relating to public safety; prohibiting certain wagers and other activities regarding prediction markets; making certain criminal convictions a disqualification for receiving a lawful gambling license; providing criminal penalties; amending Minnesota Statutes 2024, sections 299L.03, subdivision 12; 609.75, subdivision 3; proposing coding for new law in Minnesota Statutes, chapter 609.

Reports the same back with the recommendation that the bill do pass. Report adopted.

Senator Marty from the Committee on Finance, to which was re-referred

S.F. No. 4474: A bill for an act relating to commerce; prohibiting online sweepstakes games; proposing coding for new law in Minnesota Statutes, chapter 325F.

Reports the same back with the recommendation that the bill do pass. Report adopted.

Senator Marty from the Committee on Finance, to which was re-referred

S.F. No. 4365: A bill for an act relating to commerce; eliminating the Prescription Drug Affordability Advisory Council; modifying various provisions governing nondepository financial institutions, insurance, consumer protection, telecommunications, securities, financial products, and unclaimed property; providing for health plan regulatory alignment; transferring duties and employees; modifying the premium security plan; modifying provisions related to charitable gambling; requiring reports; making technical corrections; appropriating money and making reductions; amending Minnesota Statutes 2024, sections 46.044, subdivision 1; 47.20, subdivision 1; 47.59, subdivision 1; 47.60, subdivision 1; 48.195; 49.37; 52.063, subdivision 3; 52.24, subdivisions 1, 2, by adding a subdivision; 53.04, subdivision 3a; 53B.69, subdivision 10; 53B.74; 53C.09, subdivision 4; 56.002; 56.01; 56.05; 58.06, subdivision 2; 58.14, subdivisions 3, 4, 5, by adding a subdivision; 58.18, subdivision 4; 58B.02, by adding subdivisions; 58B.03, subdivisions 10, 11; 58B.051; 58B.06, subdivisions 4, 6; 60A.07, by adding a subdivision; 60A.085; 60A.13, subdivisions 1, 6; 60A.50, subdivisions 1, 3; 60A.951, subdivision 3; 60A.985, subdivision 8; 60A.9853, subdivision 1; 60A.9854; 60B.03, subdivision 2; 60G.01, subdivisions 2, 4; 60K.383; 62A.02, subdivision 8; 62A.021, subdivision 1; 62A.135, subdivision 1; 62A.46, subdivision 2; 62A.61; 62A.65, subdivisions 7, 8; 62D.08, subdivisions 1, 2, 3, 7, by adding a subdivision; 62D.12, subdivision 1; 62D.124, subdivision 5; 62D.221, subdivisions 1, 2; 62E.11, subdivisions 9, 13; 62E.23, subdivision 1; 62J.40; 62J.60, subdivision 5; 62J.89, subdivisions 1, 2; 62J.90, subdivision 2; 62J.96, by adding a subdivision; 62K.07, subdivision 2; 62L.02, subdivision 8; 62L.08, subdivision 11; 62L.09, subdivision 3; 62L.10, subdivision 4; 62L.11, subdivision 2; 62M.02, by adding a subdivision; 62M.09, subdivision 3; 62M.11; 62Q.01, subdivision 2; 62Q.106; 62Q.188, subdivision 2; 62Q.37,

subdivision 2; 62Q.47; 62Q.51, subdivision 3; 62Q.545; 62Q.556, subdivisions 3, 4; 62Q.69, subdivisions 2, 3; 62Q.71; 62Q.73, subdivisions 3, 10; 62Q.81, subdivision 7; 62U.04, subdivision 13; 62W.06, by adding a subdivision; 65A.27, subdivision 1; 72A.061, subdivision 5; 72A.13, subdivision 1; 72A.18, subdivision 2, by adding subdivisions; 72A.20, subdivision 2, by adding a subdivision; 80A.50; 80C.12, subdivision 1; 80G.01, subdivision 5a; 237.035; 237.036; 237.069; 237.07, subdivision 1; 237.11; 237.164; 237.626, subdivisions 1, 3; 237.66, by adding subdivisions; 237.70, subdivision 7; 237.762, subdivision 5; 239.761, subdivisions 7, 8, 9, 10, 11, 12, 13, 14, 16, 17; 239.77, subdivision 1; 256B.0913, subdivision 4; 296A.01, subdivisions 7, 8, 14, 19, 22, 26, 28, 35; 325E.21, subdivisions 1b, 2c; 325F.79; 325F.791, subdivisions 1, 5; 325F.792, subdivision 2; 332.32; 332.52, subdivision 3; 332A.04, subdivision 1; 332B.04, subdivision 1; 345.31, by adding a subdivision; 345.43, by adding a subdivision; 349.211, subdivision 2b; Minnesota Statutes 2025 Supplement, sections 8.37, subdivisions 3, 5; 41A.09, subdivision 2a; 58B.02, subdivision 8a; 62A.31, subdivision 1u; 62D.21; 62D.211; 62E.23, subdivisions 1a, 2; 80A.66; 239.761, subdivisions 3, 4, 5, 6; 296A.01, subdivisions 20, 23, 24; 297I.20, subdivision 7; proposing coding for new law in Minnesota Statutes, chapters 45A; 48; 52; 53B; 58; 60A; 62A; 62D; 65A; 80A; 82B; 82C; 325E; 325F; 325M; 345; proposing coding for new law as Minnesota Statutes, chapters 59E; 65C; repealing Minnesota Statutes 2024, sections 48.158; 53B.69, subdivisions 3b, 3c; 53B.75, subdivisions 1, 2, 3, 4, 5; 56.08; 62J.86, subdivision 2; 62J.88; 62J.96, subdivision 3; 237.065; 237.066; 237.067; 237.071; 237.072; 237.075, subdivisions 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11; 237.14; 237.15; 237.16, subdivision 9; 237.22; 237.231; 237.59, subdivisions 1, 1a, 2, 3, 4, 5, 6, 8, 9, 10; 237.66, subdivisions 1, 1a, 1c, 1d, 2, 2a, 3; 237.75; 237.766; 237.768; 237.772; 237.775; 332A.02, subdivision 2; 332B.02, subdivision 2.

Reports the same back with the recommendation that the bill be amended as follows:

Page 2, delete article 1

Page 4, delete article 3

Page 19, delete article 4

Page 57, delete section 1 and insert:

"Section 1. **[60A.071] SUBSTANTIAL ENROLLMENT GROWTH; NOTIFICATION.**

Subdivision 1. **Notice required.** (a) No later than April 15 each year, an insurance company that issues health plans, as defined in section 62A.011, and is licensed under this chapter to offer, sell, or issue a policy of accident and sickness insurance, as defined in section 62A.01, subdivision 1, or that is a nonprofit health service plan corporation operating under chapter 62C must notify the commissioner if, for an insurance company or nonprofit health service plan corporation with at least 25,000 enrollees, the insurance company or nonprofit health service plan corporation:

(1) increases the total number of enrollees, as of April 1 in the current calendar year, by more than 35 percent of the insurance company's or nonprofit health service plan corporation's total number of enrollees for the immediately preceding calendar year; or

(2) increases the total number of enrollees in a specific line of business or product by a percentage that is greater than the percentage of growth threshold established by the commissioner for the specific line of business or product.

(b) For purposes of this section, the number of enrollees must be calculated in a manner consistent with the insurance company or nonprofit health service plan corporation's reported covered lives in the company's National Association of Insurance Commissioners Annual Statement.

Subd. 2. **Additional information.** (a) Upon receiving notice under subdivision 1, the commissioner may request and the insurance company or nonprofit health service plan corporation must provide additional information regarding the insurance company's or nonprofit health service plan corporation's financial readiness to serve the increased enrollment. The additional information requested may include but is not limited to:

(1) the conditions contributing to the insurance company's or nonprofit health service plan corporation's enrollment growth;

(2) a three-year projected statutory balance sheet, income statements, and cash flow statements for the current year and the subsequent two years;

(3) the key assumptions impacting the projections and the sensitivity of the projections to the assumptions; and

(4) a description of anticipated issues associated with the insurance company's or nonprofit health service plan corporation's business, including but not limited to (i) assets, (ii) anticipated business growth and associated surplus strain, (iii) significant change in risk profile, (iv) mix of business, and (v) reinsurance use, if any, in each case.

(b) If the information reported under paragraph (a) raises a concern with respect to an insurance company's or nonprofit health service plan corporation's business on a prospective basis due to anticipated business growth, including but not limited to anticipated business growth, strain on surplus, increased exposure to risk, or an imbalanced mix of business, the commissioner may issue a corrective order specifying corrective actions the commissioner determines are required. A corrective order issued under this paragraph is subject to review under chapter 14.

Sec. 2. Minnesota Statutes 2024, section 60A.50, subdivision 1, is amended to read:

Subdivision 1. **Scope.** For purposes of sections 60A.50 to ~~60A.592~~ 60A.593, the terms in subdivisions 2 to 13 have the meanings given ~~them~~.

Sec. 3. **[60A.593] PROHIBITED ACTIVITIES.**

A domestic health organization that has a total adjusted capital equal to or less than the domestic health organization's company action level RBC is prohibited from, without receiving advance approval from the commissioner: (1) increasing the salary or benefits of an officer or director, or (2) making preferential payment of bonuses, dividends, or other payments the commissioner determines are preferential."

Pages 63 to 64, delete sections 3 and 4 and insert:

"Sec. 5. Minnesota Statutes 2024, section 62D.08, is amended by adding a subdivision to read:

Subd. 8. **Information sharing.** The commissioner of commerce must share nonpublic data submitted by health maintenance organizations under this section with (1) the commissioner of

health and the commissioner of human services, (2) other state and federal regulatory agencies, and (3) the National Association of Insurance Commissioners, if the requesting recipient under clauses (1) to (3) agrees to maintain the data in a manner consistent with the data's classification under chapter 13. The commissioner of commerce may enter into agreements governing the sharing and use of information, provided the agreements are consistent with this subdivision.

Sec. 6. **[62D.085] SUBSTANTIAL ENROLLMENT GROWTH; NOTICE.**

Subdivision 1. **Notice required.** (a) No later than April 15 each year, a health maintenance organization that is operating under this chapter and that has at least 25,000 enrollees must notify the commissioner if the health maintenance organization:

(1) increases the total number of enrollees, as of April 1 in the current calendar year, by more than 35 percent of the health maintenance organization's total number of enrollees for the immediately preceding calendar year; or

(2) increases the total number of enrollees in a specific line of business or product by a percentage that is greater than the percentage of growth threshold established by the commissioner for the specific line of business or product.

(b) For purposes of this section, the number of enrollees must be calculated in a manner consistent with the health maintenance organization's reported covered lives in the company's National Association of Insurance Commissioners Annual Statement.

Subd. 2. **Additional information.** (a) Upon receiving notice under subdivision 1, the commissioner may request and the health maintenance organization must provide additional information regarding the health maintenance organization's financial readiness to serve the increased enrollment. The additional information requested may include but is not limited to:

(1) the conditions contributing to the health maintenance organization's enrollment growth;

(2) a three-year projected statutory balance sheet, income statements, and cash flow statements for the current year and the subsequent two years;

(3) the key assumptions impacting the projections and the sensitivity of the projections to the assumptions; and

(4) a description of anticipated issues associated with the health maintenance organization's business, including but not limited to (i) assets, (ii) anticipated business growth and associated surplus strain, (iii) significant change in risk profile, (iv) mix of business, and (v) reinsurance use, if any, in each case.

(b) If the information reported under paragraph (a) raises a concern with respect to a health maintenance organization's business on a prospective basis due to anticipated business growth, including but not limited to anticipated business growth, strain on surplus, increased exposure to risk, or an imbalanced mix of business, the commissioner may issue a corrective order specifying corrective actions the commissioner determines are required. A corrective order issued under this paragraph is subject to review under chapter 14.

Sec. 7. Minnesota Statutes 2024, section 62J.40, is amended to read:

62J.40 COST CONTAINMENT DATA FROM STATE AGENCIES AND OTHER GOVERNMENTAL UNITS.

(a) All state departments or agencies that administer one or more health care programs shall provide to the commissioner of health any additional data on the health care programs they administer that is requested by the commissioner of health, including data in unaggregated form, for purposes of developing estimates of spending, setting spending limits, and monitoring actual spending. The data must be provided at the times and in the form specified by the commissioner of health.

(b) For purposes of estimating total health care spending as provided in section 62J.301, subdivision 4, clause (c), all local governmental units shall provide expenditure data to the commissioner. The commissioner shall consult with representatives of the affected local government units in establishing definitions, reporting formats, and reporting time frames. As much as possible, the data shall be collected in a manner that ensures that the data collected is consistent with data collected from the private sector and minimizes the reporting burden to local government.

(c) A state agency that purchases health care services, provides oversight over health insurance rates, collects health care taxes, or regulates health care entities must provide to the commissioner nonpublic data the commissioner requests to satisfy statutory duties under sections 62J.301 to 62J.461, 62J.84, 62J.87, 62U.01 to 62U.10, 144.70, 145D.01, and 145D.02, with respect to monitoring the health care market, including but not limited to consolidation, transaction, corporate structure, utilization, quality, spending growth, and prescription drug supply chains.

(d) The commissioner of commerce may request unique or custom data sets from a state agency in a request under paragraph (c). The state agency may charge the commissioner of commerce a fee to provide data sets under paragraph (c) at the same rate the state agency charges another public or private entity for the same data.

(e) Data provided to the commissioner under paragraph (c) retains the data's original classification under chapter 13. Data provided to the commissioner under paragraph (c) may be included in public reports if the data are aggregated and deidentified.

Sec. 8. Minnesota Statutes 2024, section 62K.07, subdivision 2, is amended to read:

Subd. 2. **Prescription drug costs.** (a) Each health carrier that offers a prescription drug benefit in its individual health plans or small group health plans shall include in the applicable rate filing required under section 62A.02 the following information about covered prescription drugs:

(1) the 25 most frequently prescribed drugs in the previous plan year;

(2) the 25 most costly prescription drugs as a portion of the individual health plan's or small group health plan's total annual expenditures in the previous plan year;

(3) the 25 prescription drugs that have caused the greatest increase in total individual health plan or small group health plan spending in the previous plan year;

(4) the projected impact of the cost of prescription drugs on premium rates;

(5) if any health plan offered by the health carrier requires enrollees to pay cost-sharing on any covered prescription drugs including deductibles, co-payments, or coinsurance in an amount that is greater than the amount the enrollee's health plan would pay for the drug absent the applicable enrollee cost-sharing and after accounting for any rebate amount; and

(6) if the health carrier prohibits third-party payments including manufacturer drug discounts or coupons that cover all or a portion of an enrollee's cost-sharing requirements including deductibles, co-payments, or coinsurance from applying toward the enrollee's cost-sharing obligations under the enrollee's health plan.

(b) The commissioner of commerce must share reported data with the commissioner of health and, in consultation with the commissioner of health, shall release a summary of the information reported in paragraph (a) at the same time as the information required under section 62A.02, subdivision 2, paragraph (c)."

Page 72, delete sections 9 and 10 and insert:

"Sec. 13. Minnesota Statutes 2024, section 62U.04, subdivision 13, is amended to read:

Subd. 13. **Expanded access to and use of the all-payer claims data.** (a) The commissioner or the commissioner's designee shall make the data submitted under subdivisions 4, 5, 5a, and 5b, including data classified as private or nonpublic, available to: (1) individuals and organizations engaged in research on, or efforts to effect transformation in, health care outcomes, access, quality, disparities, or spending, provided the use of the data serves a public benefit; and (2) the commissioner of commerce, subject to the data use requirements under subdivision 11, paragraph (b), to perform health insurance oversight duties.

(b) Data made available under this subdivision may not be used to:

(1) create an unfair market advantage for any participant in the health care market in Minnesota, including health plan companies, payers, and providers;

(2) reidentify or attempt to reidentify an individual in the data; or

(3) publicly report contract details between a health plan company and provider and derived from the data.

~~(b)~~ (c) To implement ~~paragraph~~ paragraphs (a) and (b), the commissioner shall:

(1) establish detailed requirements for data access; a process for data users to apply to access and use the data; legally enforceable data use agreements to which data users must consent; a clear and robust oversight process for data access and use, including a data management plan, that ensures compliance with state and federal data privacy laws; agreements for state agencies and the University of Minnesota to ensure proper and efficient use and security of data; and technical assistance for users of the data and for stakeholders;

(2) develop a fee schedule to support the cost of expanded access to and use of the data, provided the fees charged under the schedule do not create a barrier to access or use for those most affected by disparities; and

(3) create a research advisory group to advise the commissioner on applications for data use under this subdivision, including an examination of the rigor of the research approach, the technical capabilities of the proposed user, and the ability of the proposed user to successfully safeguard the data.

Sec. 14. Minnesota Statutes 2024, section 62W.06, is amended by adding a subdivision to read:

Subd. 4. **Data sharing.** Notwithstanding subdivision 2, paragraph (d), the commissioner must provide the data under subdivision 2, paragraph (a), to the commissioner of health. The commissioner of health must maintain data received under this section in a manner consistent with the data's classification under subdivision 2, paragraph (d)."

Page 75, delete sections 1 and 2

Page 84, delete section 9

Page 120, after line 8, insert:

"Sec. 7. Minnesota Statutes 2024, section 53B.74, is amended to read:

53B.74 VIRTUAL CURRENCY BUSINESS ACTIVITIES; ADDITIONAL REQUIREMENTS.

(a) A licensee engaged in virtual currency business activities ~~may include virtual currency in the licensee's calculation of tangible net worth, by measuring the average value of the virtual currency in United States dollar equivalent over the prior six months, excluding control of virtual currency for a person entitled to the protections under section 53B.73.~~ is not required to subtract virtual currency from total assets in the licensee's calculation of tangible net worth if:

(1) the licensee's day-to-day business includes incurring obligations to customers denominated in the virtual currency;

(2) the virtual currency asset has a corresponding liability denominated in the virtual currency;

(3) the virtual currency is unencumbered; and

(4) the virtual currency assets that are not subtracted from total assets are limited to the virtual currency assets that have a corresponding liability denominated in the same virtual currency.

(b) A licensee must maintain, for all virtual-currency business activity with or on behalf of a person five years after the date of the activity, a record of:

(1) each of the licensee's transactions with or on behalf of the person, or for the licensee's account in Minnesota, including:

(i) the identity of the person;

(ii) the form of the transaction;

(iii) the amount, date, and payment instructions given by the person; and

(iv) the account number, name, and United States Postal Service address of the person, and, to the extent feasible, other parties to the transaction;

(2) the aggregate number of transactions and aggregate value of transactions by the licensee with or on behalf of the person and for the licensee's account in this state, expressed in the United States dollar equivalent of the virtual currency for the previous 12 calendar months;

(3) each transaction in which the licensee exchanges one form of virtual currency for money or another form of virtual currency with or on behalf of the person;

(4) a general ledger posted at least monthly that lists all of the licensee's assets, liabilities, capital, income, and expenses;

(5) each business-call report the licensee is required to create or provide to the department or NMLS;

(6) bank statements and bank reconciliation records for the licensee and the name, account number, and United States Postal Service address of each bank the licensee uses to conduct virtual-currency business activity with or on behalf of the person;

(7) a report of any dispute with the person; and

(8) a report of any virtual-currency business activity transaction with or on behalf of a person which the licensee was unable to complete.

(c) A licensee must maintain records required by paragraph (b) in a form that enables the commissioner to determine whether the licensee is in compliance with this chapter, any court order, and law of Minnesota other than this chapter."

Page 131, after line 25, insert:

"Sec. 19. Minnesota Statutes 2024, section 58B.051, is amended to read:

58B.051 REGISTRATION FOR LENDERS.

(a) Beginning January 1, 2025, a lender must register with the commissioner as a lender before providing services in Minnesota. A lender must not offer or make a student loan to a resident of Minnesota without first registering with the commissioner as provided in this section.

(b) A registration application must include:

(1) the lender's name;

(2) the lender's address;

(3) the names of all officers, directors, owners, or other persons in control of an applicant, as defined in section 58B.02, subdivision 6; and

(4) any other information the commissioner requires ~~by rule~~.

(c) Registration issued or renewed expires December 31 of each year. A lender must renew the lender's registration on an annual basis.

(d) The commissioner may adopt and enforce:

(1) registration procedures for lenders, which may include using the Nationwide Multistate Licensing System and Registry;

(2) nonrefundable registration fees for lenders, which may include fees for using the Nationwide Multistate Licensing System and Registry, to be paid directly by the lender;

(3) procedures and nonrefundable fees to renew a lender's registration, which may include fees for the renewed use of Nationwide Multistate Licensing System and Registry, to be paid directly by the lender; and

(4) alternate registration procedures and nonrefundable fees for postsecondary education institutions that offer student loans."

Page 155, after line 18, insert:

"Sec. 50. Minnesota Statutes 2024, section 332.52, subdivision 3, is amended to read:

Subd. 3. **Credit services organization.** (a) "Credit services organization" means any person that, with respect to the extension of credit by others, sells, provides, performs, or represents that the person will sell, provide, or perform, in return for the payment of money or other valuable consideration, any of the following services:

(1) improve a buyer's credit record, history, or rating;

(2) obtain an extension of credit for a buyer; or

(3) provide advice or assistance to a buyer with regard to either clause (1) or (2).

(b) "Credit services organization" does not include:

(1) any person authorized to make loans or extensions of credit under the laws of this state or the United States, if the person is subject to regulation and supervision by this state or the United States or a lender approved by the United States Secretary of Housing and Urban Development for participation in any mortgage insurance program under the National Housing Act, United States Code, title 12, section 1701 et seq.;

(2) any bank, savings bank, or savings and loan institution whose deposits or accounts are eligible for insurance by the Federal Deposit Insurance Corporation or a subsidiary of the bank, savings bank, or savings and loan institution;

(3) any credit union, federal credit union, or out-of-state credit union doing business in this state;

(4) any nonprofit organization exempt from taxation under section 501(c)(3) of the Internal Revenue Code of 1986, as amended through December 31, 1990;

(5) any person ~~licensed as a prorating agency~~ registered as a debt management services provider or debt settlement services provider under the laws of this state, if the person is acting within the course and scope of ~~that license~~ the applicable registration;

(6) any person licensed as a real estate broker by this state if the person is acting within the course and scope of that license;

(7) any person licensed as a collection agency under the laws of this state if the person is acting within the course and scope of that license;

(8) any person licensed to practice law in this state if the person renders services within the course and scope of practice as an attorney;

(9) any broker-dealer registered with the Securities and Exchange Commission or the Commodity Futures Trading Commission if the broker-dealer is acting within the course and scope of that regulation; or

(10) any consumer reporting agency as defined in the federal Fair Credit Reporting Act, United States Code, title 15, sections 1681 to 1681t, as amended through December 31, 1990.

Sec. 51. Minnesota Statutes 2024, section 332A.04, subdivision 1, is amended to read:

Subdivision 1. **Form.** Application for registration to operate as a debt management services provider in this state must be made in writing to the commissioner, under oath, in the form prescribed by the commissioner, and must contain:

(1) the full name of each principal of the entity applying;

(2) the address, which must not be a post office box, and the telephone number and, if applicable, email address, of the applicant;

(3) identification of the trust account required under section 332A.13;

(4) consent to the jurisdiction of the courts of this state;

(5) the name and address of the registered agent authorized to accept service of process on behalf of the applicant or appointment of the commissioner as the applicant's agent for purposes of accepting service of process;

(6) disclosure of:

(i) whether any controlling or affiliated party has ever been convicted of a crime or found civilly liable for an offense involving moral turpitude, including forgery, embezzlement, obtaining money under false pretenses, larceny, extortion, conspiracy to defraud, or any other similar offense or violation, or any violation of a federal or state law or regulation in connection with activities relating to the rendition of debt management services or involving any consumer fraud, false advertising, deceptive trade practices, or similar consumer protection law;

(ii) any judgments, private or public litigation, tax liens, written complaints, administrative actions, or investigations by any government agency against the applicant or any officer, director,

manager, or shareholder owning more than five percent interest in the applicant, unresolved or otherwise, filed or otherwise commenced within the preceding ten years;

(iii) whether the applicant or any person employed by the applicant has had a record of having defaulted in the payment of money collected for others, including the discharge of debts through bankruptcy proceedings; and

(iv) whether the applicant's license or registration to provide debt management services in any other state has ever been revoked or suspended;

(7) a copy of the applicant's standard debt management services agreement that the applicant intends to execute with debtors; and

~~(8) proof of accreditation, unless the applicant was licensed in Minnesota as a debt prorater immediately before August 1, 2007; and~~

~~(9)~~ (8) any other information and material as the commissioner may require.

The commissioner may, for good cause shown, temporarily waive any requirement of this subdivision.

Sec. 52. Minnesota Statutes 2024, section 332B.04, subdivision 1, is amended to read:

Subdivision 1. **Form.** Application for registration to operate as a debt settlement services provider in this state must be made in writing to the commissioner, under oath, in the form prescribed by the commissioner, and must contain:

(1) the full name of each principal of the entity applying;

(2) the address, which must not be a post office box, and the telephone number and, if applicable, email address of the applicant;

(3) consent to the jurisdiction of the courts of this state;

(4) the name and address of the registered agent authorized to accept service of process on behalf of the applicant or appointment of the commissioner as the applicant's agent for purposes of accepting service of process;

(5) disclosure of:

(i) whether any controlling or affiliated party has ever been convicted of a crime or found civilly liable for an offense involving moral turpitude, including forgery, embezzlement, obtaining money under false pretenses, larceny, extortion, conspiracy to defraud, or any other similar offense or violation, or any violation of a federal or state law or regulation in connection with activities relating to the rendition of debt settlement services or involving any consumer fraud, false advertising, deceptive trade practices, or similar consumer protection law;

(ii) any judgments, private or public litigation, tax liens, written complaints, administrative actions, or investigations by any government agency against the applicant or any officer, director,

manager, or shareholder owning more than five percent interest in the applicant, unresolved or otherwise, filed or otherwise commenced within the preceding ten years;

(iii) whether the applicant or any person employed by the applicant has had a record of having defaulted in the payment of money collected for others, including the discharge of debts through bankruptcy proceedings; and

(iv) whether the applicant's license or registration to provide debt settlement services in any other state has ever been revoked or suspended;

(6) a copy of the applicant's standard debt settlement services agreement that the applicant intends to execute with debtors; and

~~(7) proof of accreditation, unless the applicant submits an affidavit attesting that the applicant does not provide credit counseling services; and~~

~~(8)~~ (7) any other information and material as the commissioner may require.

The commissioner may, for good cause shown, temporarily waive any requirement of this subdivision.

Sec. 53. **REPEALER.**

Minnesota Statutes 2024, sections 332A.02, subdivision 2; and 332B.02, subdivision 2, are repealed."

Page 157, line 14, delete "345A.26" and insert "345.41"

Renumber the sections in sequence

Amend the title as follows:

Page 1, line 3, delete "nondepository financial"

Page 1, line 4, delete "institutions,"

Page 1, line 5, delete "providing for health plan regulatory"

Page 1, line 6, delete "alignment; transferring duties and employees;"

Page 1, line 8, delete "appropriating money and making reductions;"

Amend the title numbers accordingly

And when so amended the bill do pass. Amendments adopted. Report adopted.

SECOND READING OF SENATE BILLS

S.F. Nos. 5032, 4612, 4898, 3593, 3899, 4511, 4474, and 4365 were read the second time.

INTRODUCTION AND FIRST READING OF SENATE BILLS

The following bills were read the first time.

Senator Boldon introduced--

S.F. No. 5212: A bill for an act relating to capital investment; appropriating money for the local public housing program; authorizing the sale and issuance of state bonds.

Referred to the Committee on Capital Investment.

Senator Pha introduced--

S.F. No. 5213: A bill for an act relating to capital investment; appropriating money for capital improvement projects in the city of Osseo; canceling an appropriation for a grant to the city of Osseo; authorizing the sale and issuance of state bonds.

Referred to the Committee on Capital Investment.

Senator Kupec introduced--

S.F. No. 5214: A bill for an act relating to health occupations; establishing an interstate licensure compact for athletic trainers; proposing coding for new law in Minnesota Statutes, chapter 148.

Referred to the Committee on Health and Human Services.

Senator Carlson introduced--

S.F. No. 5215: A bill for an act relating to corrections; requiring the commissioner of corrections to establish a graduated sanctions grid for technical violations of probation, parole, and supervised release; mandating use of the graduated sanctions grid; limiting revocations for technical violations; requiring a report; proposing coding for new law in Minnesota Statutes, chapter 244.

Referred to the Committee on Judiciary and Public Safety.

Senator Westrom introduced--

S.F. No. 5216: A bill for an act relating to capital investment; appropriating money for bridge replacement in the city of Chokio; authorizing the sale and issuance of state bonds.

Referred to the Committee on Capital Investment.

Senator Mann introduced--

S.F. No. 5217: A bill for an act relating to health insurance; requiring health plans to provide coverage for cancer screenings pursuant to American Cancer Society guidelines; amending Minnesota Statutes 2024, sections 62A.30, subdivision 2; 62Q.50; proposing coding for new law in Minnesota Statutes, chapter 62Q.

Referred to the Committee on Commerce and Consumer Protection.

Senator Dahms introduced--

S.F. No. 5218: A bill for an act relating to education; prohibiting a license processing fee for a lifetime substitute teaching license application; amending Minnesota Statutes 2024, section 122A.21, subdivision 1.

Referred to the Committee on Education Policy.

Senator Rasmusson introduced--

S.F. No. 5219: A bill for an act relating to transportation; taxation; modifying motor vehicle registration tax; amending Minnesota Statutes 2025 Supplement, section 168.013, subdivision 1a.

Referred to the Committee on Transportation.

Senator Rasmusson introduced--

S.F. No. 5220: A bill for an act relating to retirement; Public Employees Retirement Association; modifying provisions relating to the statewide volunteer firefighting plan; amending Minnesota Statutes 2024, sections 353G.01, by adding subdivisions; 353G.02, subdivision 4; 353G.05, subdivisions 1, 1a, 1b, 1d, 3, 5, by adding a subdivision; 353G.07; 353G.075; 353G.08, subdivision 1; 353G.082, subdivision 3; 353G.085; 353G.14, by adding a subdivision; 353G.18, subdivisions 2, 4; 353G.19, by adding a subdivision; Minnesota Statutes 2025 Supplement, sections 353G.01, subdivision 7b; 353G.11, subdivisions 2, 2a; 353G.19, subdivision 2.

Referred to the Committee on State and Local Government.

Senator Lucero introduced--

S.F. No. 5221: A bill for an act relating to consumer data privacy; governing certain geolocation data; providing civil penalties; proposing coding for new law in Minnesota Statutes, chapter 325M.

Referred to the Committee on Commerce and Consumer Protection.

Senators Rarick, Jasinski, Farnsworth, Green, and Dornink introduced--

S.F. No. 5222: A bill for an act relating to transportation; appropriating money for improvements at the Duluth International Airport.

Referred to the Committee on Transportation.

Senator Drazkowski introduced--

S.F. No. 5223: A bill for an act relating to capital investment; appropriating money for improvements to the National Service Park in the city of Plainview; authorizing the sale and issuance of state bonds.

Referred to the Committee on Capital Investment.

Senators Holmstrom, Wesenberg, Lieske, Lucero, and Gruenhagen introduced--

S.F. No. 5224: A bill for an act relating to public safety; expanding the disorderly house crime; amending Minnesota Statutes 2024, section 609.33, subdivision 1, by adding subdivisions.

Referred to the Committee on Judiciary and Public Safety.

Senators Holmstrom, Wesenberg, Lieske, Lucero, and Gruenhagen introduced--

S.F. No. 5225: A bill for an act relating to state government; proposing an amendment to the Minnesota Constitution, article I, by adding a section; recognizing that a preborn child has the right to life.

Referred to the Committee on State and Local Government.

Senators Kreun and Gustafson introduced--

S.F. No. 5226: A bill for an act relating to education; modifying training requirements for school board members; amending Minnesota Statutes 2024, section 123B.09, subdivision 2.

Referred to the Committee on Education Policy.

Senators Oumou Verbeten, Mohamed, and Clark introduced--

S.F. No. 5227: A bill for an act relating to economic security; establishing a prenatal and newborn benefit program to provide financial support to families with newborns; authorizing rulemaking; appropriating money; proposing coding for new law in Minnesota Statutes, chapter 268B.

Referred to the Committee on Jobs and Economic Development.

Senator Koran introduced--

S.F. No. 5228: A bill for an act relating to capital investment; establishing a sustainable construction and demolition waste grant program; appropriating money; authorizing the sale and issuance of state bonds; proposing coding for new law in Minnesota Statutes, chapter 115A.

Referred to the Committee on Capital Investment.

Senators Pappas, Hawj, and Oumou Verbeten introduced--

S.F. No. 5229: A bill for an act relating to taxation; local sales and use; modifying uses of the St. Paul local sales tax; amending Laws 1993, chapter 375, article 9, section 46, subdivision 2b, as added.

Referred to the Committee on Taxes.

Senator Utke introduced--

S.F. No. 5230: A bill for an act relating to human services; delaying implementation of the single dental administrator for the medical assistance program; amending Minnesota Statutes 2024, section 256B.0371, subdivision 4; Minnesota Statutes 2025 Supplement, section 256B.0371, subdivision 3.

Referred to the Committee on Health and Human Services.

Senator Maye Quade introduced--

S.F. No. 5231: A bill for an act relating to taxation; sales and use; repealing the exemption for data centers; repealing the contingent reduction in special education aid appropriations; amending Minnesota Statutes 2024, section 216B.02, by adding a subdivision; Minnesota Statutes 2025 Supplement, sections 216B.02, subdivision 12; 297A.75, subdivisions 1, 2, 3; repealing Minnesota Statutes 2025 Supplement, section 297A.68, subdivision 42; Laws 2025, First Special Session chapter 10, article 7, section 8.

Referred to the Committee on Taxes.

MOTIONS AND RESOLUTIONS

Senator Limmer moved that the name of Senator Gustafson be added as a co-author to S.F. No. 3825. The motion prevailed.

Senator Kupec moved that the name of Senator Utke be added as a co-author to S.F. No. 4263. The motion prevailed.

Senator Hauschild moved that the names of Senators Dibble and Nelson be added as co-authors to S.F. No. 4634. The motion prevailed.

Senator Weber moved that the name of Senator Nelson be added as a co-author to S.F. No. 4749. The motion prevailed.

Senator Port moved that the name of Senator Jasinski be added as a co-author to S.F. No. 4755. The motion prevailed.

Senator Holmstrom moved that the name of Senator Lieske be added as a co-author to S.F. No. 5156. The motion prevailed.

Senator Kunesh moved that the name of Senator Oumou Verbeten be added as a co-author to S.F. No. 5209. The motion prevailed.

SPECIAL ORDERS

Pursuant to Rule 26, Senator Murphy, Chair of the Committee on Rules and Administration, designated the following bills a Special Orders Calendar to be heard immediately:

S.F. Nos. 3432, 3210, and 1714.

SPECIAL ORDER

S.F. No. 3432: A bill for an act relating to public safety; requiring removal of identifying equipment and insignia from emergency vehicles sold to the public; providing for security and protective services of certain state officials; requiring a report; appropriating money; amending Minnesota Statutes 2024, sections 299D.03, subdivision 1; 299E.01, subdivisions 1, 2, 3, 4, by adding a subdivision; Laws 2025, chapter 35, article 1, sections 2; 4; 5; Laws 2025, chapter 39, article 1, section 2; Laws 2025, First Special Session chapter 8, article 1, section 4, subdivision 3; proposing coding for new law in Minnesota Statutes, chapters 169; 299A; 299E.

Senator Lucero moved to amend S.F. No. 3432 as follows (A50):

Page 3, line 22, delete "may" and insert "must"

The motion prevailed. So the amendment was adopted.

Senator Rarick moved to amend S.F. No. 3432 as follows (A11):

Page 15, after line 28, insert:

"ARTICLE 4

SAFE SCHOOLS REVENUE

Section 1. Minnesota Statutes 2024, section 123B.41, is amended by adding a subdivision to read:

Subd. 16. **Safe schools activities.** "Safe schools activities" means the student and staff safety measures authorized in section 126C.44, subdivision 4.

EFFECTIVE DATE. This section is effective July 1, 2026.

Sec. 2. **[123B.442] SCHOOL SAFETY MEASURES.**

(a) Each school year, the commissioner must allot to the school districts or intermediary service areas for the purposes of school safety activities authorized in section 123B.41, subdivision 16, the amount calculated under section 126C.44, subdivision 2e, for distribution to a respective nonpublic school located within that school district.

(b) A nonpublic school receiving funds under this section must annually prepare a report detailing its expenditures of these funds on qualifying school safety activities and provide that report to the school district making the allotment.

EFFECTIVE DATE. This section is effective July 1, 2026.

Sec. 3. Minnesota Statutes 2024, section 123B.61, is amended to read:

123B.61 PURCHASE OF CERTAIN EQUIPMENT.

(a) The board of a district may issue general obligation certificates of indebtedness or capital notes subject to the district debt limits to:

~~(a)~~ (1) purchase vehicles, computers, telephone systems, cable equipment, photocopy and office equipment, technological equipment for instruction, public announcement systems, emergency communications devices, other equipment related to violence prevention and facility security, and other capital equipment having an expected useful life at least as long as the terms of the certificates or notes;

~~(b)~~ (2) purchase computer hardware and software, without regard to its expected useful life, whether bundled with machinery or equipment or unbundled, together with application development services and training related to the use of the computer; and

~~(c)~~ (3) prepay special assessments.

(b) The certificates or notes must be payable in not more than 20 years and must be issued on the terms and in the manner determined by the board. The certificates or notes may be issued by resolution and without the requirement for an election. The certificates or notes are general obligation bonds for purposes of section 126C.55.

(c) A tax levy must be made for the payment of the principal and interest on the certificates or notes, in accordance with section 475.61, as in the case of bonds. The sum of the tax levies under this section and section 123B.62 for each year must not exceed the lesser of the sum of the amount of the district's total operating capital revenue and safe schools revenue or the sum of the district's levy in the general and community service funds excluding the adjustments under this section for the year preceding the year the initial debt service levies are certified.

(d) The district's general fund levy for each year must be reduced by the sum of:

(1) the amount of the tax levies for debt service certified for each year for payment of the principal and interest on the certificates or notes issued under this section as required by section 475.61~~,~~;

(2) the amount of the tax levies for debt service certified for each year for payment of the principal and interest on bonds issued under section 123B.62~~,~~; and

(3) any excess amount in the debt redemption fund used to retire bonds, certificates, or notes issued under this section or section 123B.62 after April 1, 1997, other than amounts used to pay capitalized interest.

(e) If the district's general fund levy is less than the amount of the reduction, the balance shall be deducted first from the district's community service fund levy, and next from the district's general fund or community service fund levies for the following year.

(f) A district using an excess amount in the debt redemption fund to retire the certificates or notes shall report the amount used for this purpose to the commissioner by July 15 of the following fiscal year. A district having an outstanding capital loan under section 126C.69 must not use an excess amount in the debt redemption fund to retire the certificates or notes.

EFFECTIVE DATE. This section is effective July 1, 2026.

Sec. 4. Minnesota Statutes 2024, section 126C.44, is amended to read:

126C.44 SAFE SCHOOLS REVENUE.

Subdivision 1. **Safe schools revenue for school districts.** A school district's safe schools revenue equals the sum of the district's safe schools aid and its safe schools levy.

Subd. 2. **School district safe schools levy.** A school district's safe schools levy equals the sum of $36 times the district's adjusted pupil units for the school year and its intermediate school district safe schools levy under subdivision 3.

Subd. 2b. **Safe schools aid.** (a) For fiscal year 2027 and later, the safe schools aid for a district equals $36 times the district's adjusted pupil units for the school year.

(b) For fiscal year 2027 and later, the cooperative safe schools aid for a school district that is a member of a cooperative unit that enrolls students equals $15 times the district's adjusted pupil units for the school year.

Subd. 2c. **Safe schools revenue allocated to cooperative units.** Revenue raised under this section for cooperative units must be transferred to the intermediate school district or other cooperative unit of which the district is a member and used only for costs associated with safe schools activities authorized under subdivision 4, paragraph (a), clauses (1) to (11). If the district is a member of more than one cooperative unit that enrolls students, the district must designate one cooperative unit to receive cooperative safe schools revenue and report that information to the Department of Education in the form and manner specified by the commissioner.

Subd. 2d. **Safe schools revenue for a charter school.** (a) For fiscal year 2027 and later, safe schools revenue for a charter school equals $36 times the adjusted pupil units for the school year.

(b) The revenue must be reserved and used only for costs associated with safe schools activities authorized under subdivision 4, paragraph (a), clauses (1) to (11), or for building lease expenses not funded by charter school building lease aid that are attributable to facility security enhancements made by the landlord after February 1, 2026.

Subd. 2e. **Safe schools revenue for a nonpublic school.** For fiscal year 2027 and later, safe schools revenue for a nonpublic school equals $36 times the school's enrollment for the previous school year. The aid must be allotted according to section 123B.442.

Subd. 3. **Safe schools revenue for intermediate school districts.** A school district that is a member of an intermediate school district may include in its levy authority under this section the costs associated with safe schools activities authorized under this section for intermediate school district programs. This authority must not exceed the product of $15 and the adjusted pupil units of the member districts. This authority is in addition to any other authority authorized under this section. Revenue raised under this subdivision must be transferred to the intermediate school district.

Subd. 4. **Use of safe schools revenue.** (a) Safe schools revenue must be reserved and used for directly funding the following purposes or for reimbursing the cities and counties who contract with the district for the following purposes:

(1) to pay the costs incurred for the salaries, benefits, and transportation costs of peace officers and sheriffs for liaison in services in the district's schools;

(2) to pay the costs for a drug abuse prevention program as defined in section 609.101, subdivision 3, paragraph (e), in the elementary schools;

(3) to pay the costs for a gang resistance education training curriculum in the district's schools;

(4) to pay the costs for security in the district's schools and on school property;

(5) to pay the costs for other crime prevention, drug abuse, student and staff safety, voluntary opt-in suicide prevention tools, and violence prevention measures taken by the school district;

(6) to pay costs for licensed school counselors, licensed school nurses, licensed school social workers, licensed school psychologists, and licensed alcohol and substance use disorder counselors to help provide early responses to problems;

(7) to pay for facility security enhancements including laminated glass, public announcement systems, emergency communications devices, and equipment and facility modifications related to violence prevention and facility security;

(8) to pay for costs associated with improving the school climate;

(9) to pay costs for colocating and collaborating with mental health professionals who are not district employees or contractors or for school-linked behavioral health services delivered by telemedicine; ~~or~~

(10) to pay for the costs of cybersecurity measures, including updating computer hardware and software, other systems upgrades, and cybersecurity insurance costs~~.~~; or

(11) by board resolution, to transfer money into the debt redemption fund to pay, when due, the amounts needed to meet principal and interest payments on obligations issued under sections 123B.61 and 123B.62 for purposes in clause (8).

(b) For expenditures under paragraph (a), clause (1), the district must initially attempt to contract for services to be provided by peace officers or sheriffs with the police department of each city or the sheriff's department of the county within the district containing the school receiving the services. If a local police department or a county sheriff's department does not wish to provide the necessary services, the district may contract for these services with any other police or sheriff's department located entirely or partially within the school district's boundaries.

EFFECTIVE DATE. This section is effective for state aid for fiscal year 2027 and later.

Sec. 5. **APPROPRIATION; SAFE SCHOOLS REVENUE.**

Subdivision 1. **Department of Education.** The sums indicated in this section are appropriated from the general fund to the Department of Education in the fiscal years designated.

Subd. 2. **Safe schools aid.** For safe schools aid under Minnesota Statutes, section 126C.44:

$ 40,850,000 ..... 2027"

Amend the title accordingly

Senator Latz questioned whether the amendment was germane.

The President ruled that the amendment was not germane.

Senator Rasmusson appealed the decision of the President.

The question was taken on "Shall the decision of the President be the judgment of the Senate?"

The roll was called, and there were yeas 33 and nays 30, as follows:

Those who voted in the affirmative were:

Boldon	Gustafson	Kunesh	Mohamed	Rest
Carlson	Hauschild	Kupec	Murphy	Seeberger
Champion	Hawj	Latz	Oumou Verbeten	Westlin
Clark	Hemmingsen-Jaeger	Mann	Pappas	Wiklund
Cwodzinski	Hoffman	Marty	Pha	Xiong
Dibble	Johnson Stewart	Maye Quade	Port	
Frentz	Klein	McEwen	Putnam	

Pursuant to Rule 40, Senator Hauschild cast the affirmative vote on behalf of the following Senators: Carlson and Mann.

Those who voted in the negative were:

Abeler	Drazkowski	Holmstrom	Lieske	Rarick
Bahr	Duckworth	Housley	Limmer	Rasmusson
Coleman	Farnsworth	Jasinski	Lucero	Utke
Dahms	Green	Koran	Mathews	Weber
Dornink	Gruenhagen	Kreun	Miller	Wesenberg
Draheim	Heintzeman	Lang	Pratt	Westrom

Pursuant to Rule 40, Senator Jasinski cast the negative vote on behalf of the following Senators: Pratt and Wesenberg.

So the decision of the President was sustained.

S.F. No. 3432 was read the third time, as amended, and placed on its final passage.

The question was taken on the passage of the bill, as amended.

The roll was called, and there were yeas 45 and nays 19, as follows:

Those who voted in the affirmative were:

Abeler	Champion	Cwodzinski	Duckworth	Frentz
Boldon	Clark	Dibble	Farnsworth	Gustafson
Carlson	Coleman	Dornink	Fateh	Hauschild

Hawj	Kreun	Marty	Murphy	Putnam
Hemmingsen-Jaeger	Kunesh	Mathews	Oumou Verbeten	Rest
Hoffman	Kupec	Maye Quade	Pappas	Seeberger
Housley	Latz	McEwen	Pha	Westlin
Johnson Stewart	Limmer	Miller	Port	Wiklund
Klein	Mann	Mohamed	Pratt	Xiong

Pursuant to Rule 40, Senator Hauschild cast the affirmative vote on behalf of the following Senators: Carlson, Fateh, Mann, and Port.

Those who voted in the negative were:

Bahr	Green	Jasinski	Lucero	Weber
Dahms	Gruenhagen	Koran	Rarick	Wesenberg
Draheim	Heintzeman	Lang	Rasmusson	Westrom
Drazkowski	Holmstrom	Lieske	Utke	

Pursuant to Rule 40, Senator Jasinski cast the negative vote on behalf of the following Senator: Wesenberg.

So the bill, as amended, was passed and its title was agreed to.

SPECIAL ORDER

S.F. No. 3210: A bill for an act relating to human rights; including disability accommodations as protection from discrimination; amending Minnesota Statutes 2024, section 363A.02, subdivision 1.

S.F. No. 3210 was read the third time and placed on its final passage.

The question was taken on the passage of the bill.

The roll was called, and there were yeas 46 and nays 18, as follows:

Those who voted in the affirmative were:

Abeler	Duckworth	Johnson Stewart	Miller	Seeberger
Boldon	Farnsworth	Klein	Mohamed	Weber
Carlson	Fateh	Kreun	Murphy	Westlin
Champion	Frentz	Kunesh	Oumou Verbeten	Westrom
Clark	Gustafson	Kupec	Pappas	Wiklund
Coleman	Hauschild	Latz	Pha	Xiong
Cwodzinski	Hawj	Mann	Port	
Dibble	Hemmingsen-Jaeger	Marty	Pratt	
Dornink	Hoffman	Maye Quade	Putnam	
Draheim	Housley	McEwen	Rest	

Pursuant to Rule 40, Senator Hauschild cast the affirmative vote on behalf of the following Senators: Carlson, Mann, Murphy, and Port.

Pursuant to Rule 40, Senator Jasinski cast the affirmative vote on behalf of the following Senator: Pratt.

Those who voted in the negative were:

Bahr	Drazkowski	Gruenhagen	Holmstrom	Koran
Dahms	Green	Heintzeman	Jasinski	Lang

Lieske	Lucero	Rarick	Utke
Limmer	Mathews	Rasmusson	Wesenberg

Pursuant to Rule 40, Senator Jasinski cast the negative vote on behalf of the following Senator: Wesenberg.

So the bill passed and its title was agreed to.

SPECIAL ORDER

S.F. No. 1714: A bill for an act relating to state government; requiring payment transparency in public contracts; amending Minnesota Statutes 2024, section 15.72, by adding a subdivision.

S.F. No. 1714 was read the third time and placed on its final passage.

The question was taken on the passage of the bill.

The roll was called, and there were yeas 63 and nays 0, as follows:

Those who voted in the affirmative were:

Abeler	Duckworth	Housley	Mann	Rarick
Bahr	Farnsworth	Jasinski	Marty	Rasmusson
Boldon	Fateh	Johnson Stewart	Mathews	Rest
Carlson	Frentz	Klein	Maye Quade	Seeberger
Champion	Green	Koran	Miller	Utke
Clark	Gruenhagen	Kreun	Mohamed	Weber
Coleman	Gustafson	Kunesh	Murphy	Wesenberg
Cwodzinski	Hauschild	Kupec	Oumou Verbeten	Westlin
Dahms	Hawj	Lang	Pappas	Westrom
Dibble	Heintzeman	Latz	Pha	Wiklund
Dornink	Hemmingsen-Jaeger	Lieske	Port	Xiong
Draheim	Hoffman	Limmer	Pratt	
Drazkowski	Holmstrom	Lucero	Putnam	

Pursuant to Rule 40, Senator Hauschild cast the affirmative vote on behalf of the following Senators: Carlson, Mann, Murphy, and Port.

Pursuant to Rule 40, Senator Jasinski cast the affirmative vote on behalf of the following Senators: Miller, Pratt, and Wesenberg.

So the bill passed and its title was agreed to.

MEMBERS EXCUSED

Senators Howe, Johnson, and Nelson were excused from the Session of today.

ADJOURNMENT

Senator Frentz moved that the Senate do now adjourn until 11:00 a.m., Tuesday, April 28, 2026. The motion prevailed.

Thomas S. Bottern, Secretary of the Senate