

1.1 A bill for an act  
1.2 relating to health; establishing a public health response contingency account;  
1.3 authorizing the commissioner of health to use funds from the account for certain  
1.4 purposes; transferring money; proposing coding for new law in Minnesota Statutes,  
1.5 chapter 144.

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

1.7 Section 1. **[144.4199] PUBLIC HEALTH RESPONSE CONTINGENCY ACCOUNT.**

1.8 **Subdivision 1. Public health response contingency account.** A public health response  
1.9 contingency account is created in the special revenue fund in the state treasury. Money in  
1.10 the public health response contingency account does not cancel and is appropriated to the  
1.11 commissioner of health for the purposes specified in subdivision 4, when the determination  
1.12 criteria in subdivision 3 and the requirements in subdivisions 5, paragraph (a), and 7, are  
1.13 satisfied.

1.14 **Subd. 2. Definition.** For purposes of this section, "public health response" means  
1.15 immediate public health activities required to protect the health and safety of the public due  
1.16 to pandemic influenza or an outbreak of a communicable or infectious disease.

1.17 **Subd. 3. Determination criteria.** The commissioner may use money in the public health  
1.18 response contingency account only if:

1.19 (1) the commissioner determines the pandemic influenza or outbreak of a communicable  
1.20 or infectious disease requires a public health response;

1.21 (2) the commissioner determines that the public health response is reasonably expected  
1.22 to require supplies, equipment, personnel, and other resources in excess of the resources

2.1 available for public health response and preparedness activities in the affected jurisdictions;  
2.2 and

2.3 (3) the commissioner has notified the relevant federal agency that the pandemic influenza  
2.4 or communicable or infectious disease:

2.5 (i) is reasonably expected to require the evacuation of the impacted population, relocation  
2.6 of seriously ill or injured persons to temporary care facilities, or the provision of replacement  
2.7 essential community services;

2.8 (ii) poses a probability of a large number of deaths, serious injuries, or long-term  
2.9 disabilities in the affected population;

2.10 (iii) involves widespread exposure to an infectious agent that poses a significant risk of  
2.11 substantial future harm to a large number of people in the affected area; or

2.12 (iv) poses a significant risk of a high rate of morbidity or mortality in the affected  
2.13 population.

2.14 Subd. 4. **Uses of funds.** (a) When the determination criteria in subdivision 3 are satisfied  
2.15 and the commissioner has complied with subdivisions 5, paragraph (a), and 7, the  
2.16 commissioner may use money in the public health response contingency account for the  
2.17 following purposes attributable to a public health response:

2.18 (1) staffing;

2.19 (2) information technology;

2.20 (3) supplies, equipment, and services to protect people in the affected area or population,  
2.21 health care providers, and public safety workers;

2.22 (4) training for and coordination with local public health departments and health care  
2.23 providers;

2.24 (5) communication with and outreach to affected areas or populations;

2.25 (6) to provide a state match for federal assistance obtained for the public health response;

2.26 (7) laboratory testing, including enhancements to laboratory capacity necessary to conduct  
2.27 testing related to the event, and supplies, equipment, shipping, and security;

2.28 (8) the purchase of vaccines, antibiotics, antivirals, and other medical resources to prevent  
2.29 the spread of the pandemic influenza or communicable or infectious disease or to treat  
2.30 related medical conditions;

3.1 (9) reimbursement to community health boards or other local units of government for  
3.2 incurred costs for the goods and services listed in clauses (1) to (8) that are attributable to  
3.3 the public health response;

3.4 (10) reimbursement to health care organizations and health care providers for incurred  
3.5 costs that are attributable to the public health response; and

3.6 (11) funding to support other state agencies for costs incurred by those agencies that are  
3.7 attributable to the public health response.

3.8 (b) Money in the account must not be used to increase the total number of full-time  
3.9 equivalent permanent employees at the Department of Health, unless expressly authorized  
3.10 by law. Money in the account shall be used only for public health response activities to  
3.11 protect the health and safety of the public. Notwithstanding section 16A.285 or any other  
3.12 law, money in the account must not be transferred to another program or another account  
3.13 in the state treasury.

3.14 Subd. 5. **Assistance from other sources.** (a) As a condition of using money in the public  
3.15 health response contingency account, the commissioner must seek any appropriate assistance  
3.16 from other available sources, including the federal government, to assist with costs  
3.17 attributable to the public health response.

3.18 (b) If the commissioner subsequently recovers funds for the public health response from  
3.19 a nonstate source after using funds from the public health response contingency account,  
3.20 the commissioner shall reimburse the public health response contingency account for  
3.21 expenditures already made from the account.

3.22 Subd. 6. **Emergency management authority.** Nothing in this section shall be construed  
3.23 to limit the emergency management authority of the governor or any local or county  
3.24 organization for emergency management under chapter 12 or other law.

3.25 Subd. 7. **Expenditure review.** Prior to authorizing expenditures from the public health  
3.26 response contingency account, the commissioner shall seek review and recommendation  
3.27 from the Legislative Advisory Commission according to the procedures in section 3.3005,  
3.28 subdivision 5, that would otherwise apply if the funds were federal funds.

3.29 Subd. 8. **Report.** By January 15 of each year, the commissioner shall submit a report to  
3.30 the chairs and ranking minority members of the house of representatives Ways and Means  
3.31 Committee, the senate Finance Committee, and the house of representatives and senate  
3.32 committees with jurisdiction over health and human services finance, detailing expenditures  
3.33 made in the previous calendar year from the public health response contingency account.

- 4.1 Sec. 2. **TRANSFER; PUBLIC HEALTH RESPONSE CONTINGENCY ACCOUNT.**
- 4.2 \$5,000,000 in fiscal year 2018 is transferred from the general fund to the commissioner
- 4.3 of health for deposit in the public health response contingency account established in
- 4.4 Minnesota Statutes, section 144.4199.