Overview

This bill modifies the well sealing fees charged and makes changes to several rural health grant programs operated by the commissioner of health. Section 1 addressed well sealing fees charged. Sections 2 to 5 make changes to the rural hospital planning and transition grant program. Section 6 modifies a section establishing the rural hospital financial assistance grant program. Sections 7 to 9 make changes to the rural community health center grant program. Sections 10 to 15 amend the loan repayment program for health professionals who work in rural or underserved urban areas. Sections 16 to 19 modify the rural physician loan forgiveness program. Sections 20 to 22 amend the rural midlevel practitioner loan forgiveness program, and sections 23 to 24 amend a loan forgiveness program for nurses working in nursing homes or ICFs/MR.

Section

1 Well notification fee. Amends § 103I.208, subd. 1. Specifies that the $20 well sealing fee is $20 per well. However, provides for a single fee of $20 for monitoring wells constructed on a single property, having depths within a 25 foot range, and sealed within 48 hours of the start of construction.

2 Grants authorized. Amends § 144.147, subd. 2. Provides that rural hospital planning and transition grants may be used to cover expenses associated with being designated as a critical access hospital for the Medicare rural hospital flexibility program.

3 Consideration of grants. Amends § 144.147, subd. 3. Clarifies that the commissioner of health, when issuing grants under this section, must take into account the "availability and upgrading" of ambulatory and emergency services, not the "demand" for those services. Additionally, provides that the commissioner must consider the integration of health care services in the community.

4 Allocation of grants. Amends § 144.147, subd. 4. Clarifies that any single rural hospital planning and transition grant to a hospital or group of hospitals applying together may not
exceed $50,000. Allows hospitals to apply for grants each year they are eligible. Makes a clarification to existing law.

5 **Evaluation.** Amends § 144.147, subd. 5. Provides that the commissioner may require quarterly progress reports from grantees.

6 **Sole community hospital financial assistance grants.** Amends § 144.1484, subd. 1. Requires eligible hospitals to submit a budget for using rural hospital financial assistance grant funds. For grants over $30,000, requires hospitals to submit a brief annual work plan including objectives and activities aimed at improving the hospital’s financial viability and service quality. Requires brief semiannual reports to the commissioner on progress toward plan objectives.

7 **Grants.** Amends § 144.1486, subd. 3. Expands the allowable uses for rural community health center grants, to allow them to be used for operating, as well as planning and establishing, community health centers. Strikes existing language specifying other uses for grant funds.

8 **Eligibility requirements.** Amends § 144.1486, subd. 4. Adds Indian tribes to the list of entities eligible for rural community health center grants. Requires grantees to demonstrate that expenses exceed revenues or that they have other extreme needs not met by other sources in order to receive operating expense grants. Repeals various other requirements.

9 **Requirements.** Amends § 144.1486, subd. 8. Makes a conforming change. Repeals various requirements for community health centers. Adds language requiring community health centers to collaborate with their community, offer primary care services that are responsive to community needs and comply with regulatory authorities and health care payers, ensure that no one is denied services because of an inability to pay, and submit brief quarterly reports.

10 **Duties of commissioner of health.** Amends § 144.1488, subd. 1. Makes a technical change.

11 **Eligible loan repayment sites.** Amends § 144.1488, subd. 3. Makes a technical change.

12 **Eligible health professionals.** Amends § 144.1488, subd. 4. Specifies that to be eligible for the loan repayment program for health professionals, applicants must have a current and unrestricted Minnesota license to practice. Modifies eligible providers under this section to conform with federal grant requirements. Specifies that this loan program applies to health professionals in general, not just physicians.

13 **Obligated service.** Amends § 144.1489, subd. 2. Makes a technical change.

14 **Affidavit of service required.** Amends § 144.1489, subd. 4. Modifies when recipients of loans from the loan repayment program for health professionals must submit affidavits of compliance with program requirements.

15 **Procedure for loan repayment.** Amends § 144.1490, subd. 2. Modifies procedures for loan repayments under this section.

16 **Eligibility.** Amends § 144.1494, subd. 2. Makes technical corrections. Modifies service obligation for physicians who have received loan forgiveness in return for agreeing to work in a rural area, to require a minimum of three years of service beginning no later than March following completion of residency. Under current law, participants must serve three of their first five years following residency.

17 **Loan forgiveness.** Amends § 144.1494, subd. 3. Repeals requirements that certain numbers of participants in the rural loan forgiveness program be from specific practice areas (pediatrics, family, and internal medicine). Makes technical correction.

18 **Loan forgiveness; underserved urban communities.** Amends § 144.1494, subd. 5. As with section 21, repeals provisions relating to specific practice area quotas for participants. Repeals a definition of "qualifying educational loans" for this subdivision.

19 **Rules.** Adds subd. 6 to § 144.1494. Grants the commissioner the authority to adopt rules to
implement provisions of the rural loan forgiveness program.

20 **Eligibility.** Amends § 144.1495, subd. 3. Makes technical changes. Modifies service obligation under the rural loan forgiveness program to require a minimum of two years of service beginning no later than March following completion of training. Under current law, participants must serve two of their first four years following graduation.

21 **Loan forgiveness.** Amends § 144.1495, subd. 4. As with section 22, repeals the definition of "qualifying educational loans" for this subdivision.

22 **Rules.** Adds subd. 6 to § 144.1495. Grants the commissioner the authority to adopt rules to implement provisions of the midlevel practitioner loan forgiveness program.

23 **Eligibility.** Amends § 144.1496, subd. 2. Makes technical changes. Modifies service obligation under the loan forgiveness program for nurses in nursing homes or ICFs/MR, to require a minimum of one year of service beginning no later than March following completion of a nursing program or selection into the program. Under current law, participants must serve one of their first two years following program completion.

24 **Rules.** Adds subd. 5 to § 144.1496. Provides that the commissioner may, rather than shall, adopt rules to implement provisions of the loan forgiveness program for nurses in nursing homes or ICFs/MR.