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State of Minnesota

HOUSE OF REPRESENTATIVES

NINETIETH SESSION

H. F. No. 2047

03/02/2017 Authored by Franke, Fenton, Kiel, Peterson, Uglem and others
The bill was read for the first time and referred to the Committee on Health and Human Services Reform

1.1 A bill for an act
1.2 relating to health; requiring the commissioner of health to develop a comprehensive
1.3 strategic plan to end HIV/AIDS.

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

1.5 Section 1. COMPREHENSIVE PLAN TO END HIV/AIDS.

1.6 (a) The commissioner of health, in coordination with the commissioner of human services,
1.7 and in consultation with community stakeholders, shall develop a strategic statewide
1.8 comprehensive plan that establishes a set of priorities and actions to address the state's HIV
1.9 epidemic by reducing the number of newly infected individuals; ensuring that individuals
1.10 living with HIV have access to quality, life-extending care regardless of race, gender, sexual
1.11 orientation, or socioeconomic circumstances; and ensuring the coordination of a statewide
1.12 response to reach the ultimate goal of the elimination of HIV in Minnesota.

1.13 (b) The plan must identify strategies that are consistent with the National HIV/AIDS
1.14 Strategy plan, that reflect the scientific developments in HIV medical care and prevention
1.15 that have occurred, and that work toward the elimination of HIV. The plan must:

1.16 (1) determine the appropriate level of testing, care, and services necessary to achieve
1.17 the goal of the elimination of HIV, beginning with meeting the following outcomes:

1.18 (i) reduce the number of new diagnoses by at least 75 percent;

1.19 (ii) increase the percentage of individuals living with HIV who know their serostatus to
1.20 at least 90 percent;

1.21 (iii) increase the percentage of individuals living with HIV who are receiving HIV
1.22 treatment to at least 90 percent; and

- 2.1 (iv) increase the percentage of individuals living with HIV who are virally suppressed
2.2 to at least 90 percent;
- 2.3 (2) provide recommendations for the optimal allocation and alignment of existing state
2.4 and federal funding in order to achieve the greatest impact and ensure a coordinated statewide
2.5 effort; and
- 2.6 (3) provide recommendations for evaluating new and enhanced interventions and an
2.7 estimate of additional resources needed to provide these interventions.
- 2.8 (c) The commissioner shall submit the comprehensive plan and recommendations to the
2.9 chairs and ranking minority members of the legislative committees with jurisdiction over
2.10 health and human services policy and finance by February 1, 2018.