

**SENATE
STATE OF MINNESOTA
NINETY-THIRD SESSION**

S.F. No. 4236

(SENATE AUTHORS: PHA, Gustafson, Utke, Kupec and Duckworth)

DATE
02/26/2024

D-PG

Introduction and first reading
Referred to Health and Human Services

OFFICIAL STATUS

1.1 A bill for an act
1.2 relating to health; requiring the commissioner of health to establish a telehealth
1.3 pilot project for school districts; requiring a report; appropriating money.

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

1.5 Section 1. **TELEHEALTH PILOT PROJECT.**

1.6 Subdivision 1. Establishment. The commissioner of health shall establish a pilot project
1.7 to determine whether the availability of telehealth services in schools increases student
1.8 access to health care services. The commissioner shall contract with a school-connected
1.9 telehealth provider to provide, for the 2024-2025 school year, telehealth services to students
1.10 in participating school districts. The commissioner shall issue a request for proposals to
1.11 select the telehealth provider and school districts. In selecting school districts for the pilot
1.12 project, the commissioner shall consider geographic and cultural diversity.

1.13 Subd. 2. Provider requirements. In order to be considered for selection as the telehealth
1.14 provider, an applicant must:

1.15 (1) have experience in providing telehealth services in educational settings, and at the
1.16 time of application be providing access to telehealth services to at least 50,000 students;

1.17 (2) have experience in providing culturally competent pediatric care;

1.18 (3) demonstrate the ability to provide high-quality physical and behavioral health services
1.19 and care coordination through telehealth;

1.20 (4) demonstrate the ability to establish an adequate network of Minnesota-based telehealth
1.21 providers to provide services under the pilot project;

2.1 (5) have a technology platform for the provision and coordination of telehealth services
2.2 that will be made available to participating school districts;

2.3 (6) have the ability to bill health carriers and government health care programs, including
2.4 but not limited to medical assistance and MinnesotaCare;

2.5 (7) agree to provide telehealth services free of charge to students who are uninsured,
2.6 and to waive, or reimburse students for, all cost-sharing incurred for telehealth services
2.7 received through the pilot project, in order to reduce barriers to access; and

2.8 (8) agree to cooperate with the commissioner and school districts in evaluating the pilot
2.9 project, and to share information necessary for the evaluation.

2.10 Subd. 3. **School district requirements.** School districts selected by the commissioner
2.11 to participate in the pilot project must:

2.12 (1) make telehealth services available through the pilot project to all students within the
2.13 district; and

2.14 (2) cooperate with the commissioner and provider in evaluating the pilot project.

2.15 Subd. 4. **Evaluation; reports.** The commissioner, in cooperation with participating
2.16 school districts, shall evaluate the extent to which the pilot project increased student access
2.17 to health care services. The commissioner shall report the results of the evaluation to the
2.18 chairs and ranking minority members of the legislative committees with jurisdiction over
2.19 education finance and policy and health finance and policy, submitting an interim report
2.20 by January 1, 2025, and a final report by December 15, 2025. The commissioner shall
2.21 include in the final report a recommendation on whether the pilot project should be continued
2.22 and expanded to other school districts in the state.

2.23 Sec. 2. **APPROPRIATION; TELEHEALTH PILOT PROJECT.**

2.24 \$..... in fiscal year 2025 is appropriated from the general fund to the commissioner of
2.25 health to implement and evaluate the telehealth pilot project under section 1. This
2.26 appropriation does not cancel and is available until December 31, 2025.