Minnesota Refugee Health Report 2025

Welcome to the annual Refugee Health County Report. Based on number of arrivals, counties or regions receive individualized reports. The regions include the combined Metro and Central, combined South East and South West, and the combined West Central and North West districts. The state and regional data can provide a comparison for counties.

We encourage counties to use this report as a tool to evaluate the success of the health screening services offered to newly arrived people with humanitarian immigration statuses. These include refugees, derivative and U.S.-granted asylees, parolees, Cuban/Haitian entrants, special immigrant visa (SIV) holders, Amerasians, and certified Victims of Human Trafficking. Throughout this report, these groups are collectively referred to as “refugees”. The Minnesota Department of Health’s Refugee Health Program (RHP) sets the objectives used in these reports to evaluate some key components of our state’s performance. County-specific data can also support planning and development of appropriate public health responses to both immediate and emerging health issues.

Some points to keep in mind with this report:

- The report focuses on the primary refugees who arrived in Minnesota between January 1 and December 31, 2025. Counties and/or clinics submitted domestic refugee health screening results for those who arrived in 2025. Data were reported via the Refugee Health Assessment Form (“pink” form), electronically through eSHARE, or on the Outcome Form. Due to the multi-month treatment regimen for latent tuberculosis infection (LTBI), the findings for objectives 4 and 5 reflect data from 2024 arrivals.
- Primary refugees who were not screened because they moved out of state, moved to an unknown destination, had incorrect contact information, had no insurance coverage options, or died before screening are excluded from the screening rate calculation.

In 2025, there were 545 new primary arrivals with humanitarian immigration statuses to Minnesota; 315 (58%) arrived with a refugee visa, and 167 (31%) as Special Immigrant Visa-holders. The remainder arrived as asylees or certified victims of trafficking. The largest arriving populations in 2025 were from Afghanistan (203 arrivals), Somalia (133 arrivals), Burma (38 arrivals), and Ethiopia (36 arrivals). The majority of 2025 arrivals (N=323, 59%) arrived in January.

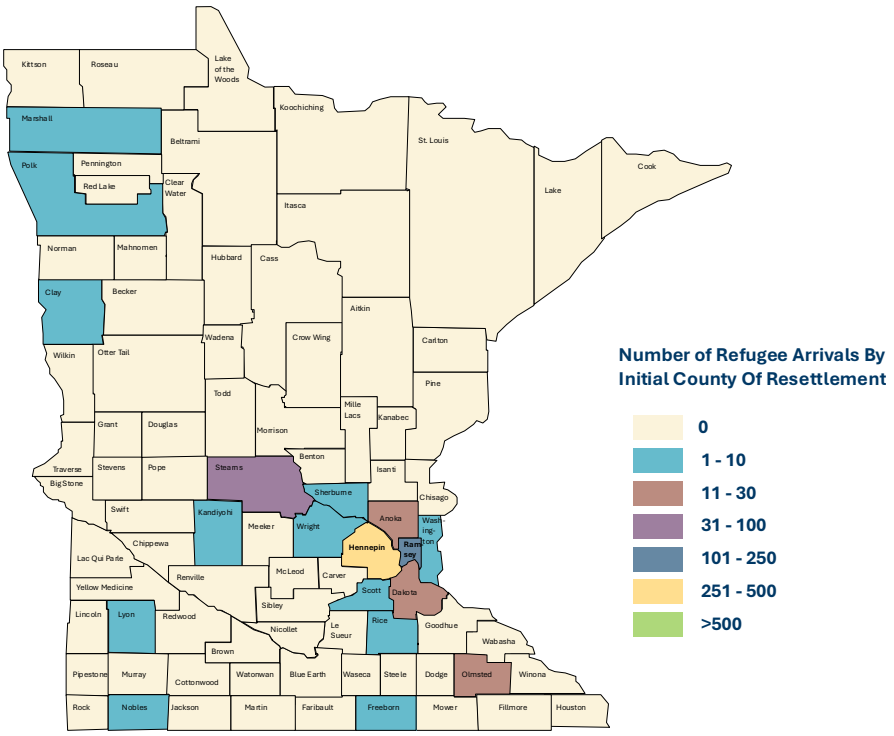
2025 Primary Refugee Arrivals (N=545)

Anoka (28)
Dakota (29)
Hennepin (253)
Ramsey (137)
Stearns (44)

Metro and Central:
Scott (2)
Sherburne (4)
Washington (6)
Wright (5)

South East and South West:
Freeborn (2)
Lyon (2)
Nobles (1)
Olmsted (12)
Rice (5)

West Central and North West:
Clay (2)
Kandiyohi (3)
Marshall (6)
Polk (4)



In 2025, the RHP was notified of 223 secondary refugees, or refugees who moved to Minnesota after initially resettling in another state. 165 (65%) of these were from Somalia, 30 (13%) from South Sudan, and 28 (13%) from eight other countries. The top counties of residence included Stearns (57 arrivals), Hennepin (52), and Kandiyohi (28).

Individuals with refugee status often decide which community and county to settle in based on family, community ties, access to housing, or employment. Hennepin and Ramsey counties continued to receive the majority of newly arriving refugees to Minnesota in 2024.

Health Screening Indicators

The Refugee Health Program has set these measurable objectives below to evaluate the implementation of the Minnesota Refugee Health Assessment for newly-arrived primary refugees. On the following page, the columns on the right of the chart highlight the health screening indicators specific to your county, showing how effectively these objectives were met. Together with Significant Findings and Trends and Health Status data summary, this report is a snapshot of the newly-arrived primary refugees' demographics and their health needs.

Objective 1. Within 90 days of arrival, 95% of newly arrived refugees who are eligible* will have initiated a health assessment.

Objective 2. Ensure immunizations will be initiated or continued according to the recommended MDH child and adult immunization schedules on 90% of persons provided a health screening.

Objective 3. Ensure evaluation for 100% of refugees arriving with infectious TB disease, non-communicable for travel purposes (Class A) and 95% with non-infectious TB disease (Class B1).

Objective 4. On an ongoing basis, 85% of persons in need of therapy for latent TB infection (LTBI) will have been placed on such therapy.

Objective 5. On an ongoing basis, 70% of persons placed on therapy for latent tuberculosis infection (LTBI) will have completed therapy.

Objective 6. On an ongoing basis, 95% of persons provided a health screening will receive a hepatitis B surface antigen (HBsAg) test.

Objective 7. On an ongoing basis, 90% of adult refugees 18 years and older provided a health screening will receive a hepatitis C antibody test (anti-HCV).

Objective 8. On an ongoing basis, 95% of persons without evidence of pre-departure anthelminthic treatment and provided a health screening will get tested for parasitic infections and/or receive presumptive treatment.

Objective 9. On an ongoing basis, more than 95% of all children ages 16 and younger who receive a health screening will be screened for lead poisoning.

Objective 10. On an ongoing basis, more than 95% of persons provided a health screening will receive a Human Immunodeficiency Virus (HIV) test.

Objective 11. On an ongoing basis, 85% of adult refugees 18 years and older will be screened for mental health using the Minnesota Well-being and Emotions Check (WE-Check) tool.

***Ineligible if:** moved out of state, moved to unknown destination, unable to locate due to invalid contact information, never arrived to county, no insurance, died before screening, or were already connected to care prior to being granted asylum.

Minnesota 2025 Health Screening Indicators

All results are based on domestically completed screenings.

Health Screening Rate

Objective	Measure	Data for Year 2025
Within 90 days of arrival, 95% of newly arrived refugees who are eligible [a] will have initiated a health assessment.	# of newly arrived refugees through R&P [b] to Minnesota who received at least the first visit of their health assessment within 90 days of arrival / # of newly arrived refugees through R&P [b] to Minnesota who were eligible for a screening	**State:** 429/503 (85%)

Immunizations

Objective	Measure	Data for Year 2025
Ensure immunizations will be initiated or continued according to the recommended MDH child and adult immunization schedules on 90% of persons provided a health screening.	# of newly arrived refugees to Minnesota with immunization series initiated or continued / # of newly arrived refugees to Minnesota who received a screening	**State:** 443/491 (90%) [d]

TB Class Evaluations

Objective	Measure	Data for Year 2025
Ensure evaluation for 100% of refugees arriving with infectious TB disease, non-communicable for travel purposes (Class A) and 95% with non-infectious TB disease (Class B1).	# of newly arrived refugees to Minnesota designated as TB Class A or B1 and who are appropriately evaluated / # of newly arrived eligible refugees to Minnesota designated as TB Class A or B1	**State:** 0/0 (n/a) Class A 17/19 (89%) Class B1

LTBI

Objective	Measure	Data for Year 2024
85% of persons in need of therapy for latent TB infection (LTBI) will have been placed on such therapy.	# of newly arrived refugees to Minnesota in need of LTBI therapy and placed on such therapy / # of newly arrived refugees to Minnesota in need of LTBI therapy	**State:** 456/600 (76%) [e]
70% of persons placed on therapy for latent tuberculosis infection (LTBI) will have completed therapy.	# of newly arrived refugees to Minnesota in need of LTBI therapy and who have been placed on and completed LTBI therapy / # of newly arrived refugees to Minnesota placed on LTBI therapy	**State:** 413/456 (91%) [e]

Hepatitis B

Objective	Measure	Data for Year 2025
95% of persons provided a health screening will receive a hepatitis B surface antigen (HBsAg) test.	# of newly arrived refugees to Minnesota who received HBsAg test / # of newly arrived refugees to Minnesota who received a screening	**State:** 453/491 (92%)

Hepatitis C

Objective	Measure	Data for Year 2025
At least 90% of adult refugees 18 years and older provided a health screening will receive a hepatitis C antibody test (anti-HCV).	# of newly arrived refugees ages 18+ years old to Minnesota who received anti-HCV test / # of newly arrived refugees ages 18+ years old to Minnesota who received a screening	**State:** 265/278 (95%)

Intestinal Parasites

Objective	Measure	Data for Year 2025
At least 95% of persons without evidence of pre-departure anthelminthic treatment and provided a health screening will get tested for parasitic infection and/or receive presumptive treatment.	# of newly arrived refugees to Minnesota who did not receive pre-departure anthelminthic treatment and were tested for parasitic infections (O&P and/or serology) and/or received presumptive treatment / # of newly arrived refugees to Minnesota who did not receive pre-departure anthelminthic treatment and received a screening	**State:** 143/169 (85%) [f]

Lead Poisoning

Objective	Measure	Data for Year 2025
At least 95% of all children ages 16 and younger who receive a health screening will be screened for lead poisoning.	# of newly arrived refugees to Minnesota who are < 17 years old and screened for lead poisoning / # of newly arrived refugees < 17 years old to Minnesota who received a screening	**State:** 193/208 (93%)

HIV

Objective	Measure	Data for Year 2025
At least 95% of persons provided a health screening will receive a Human Immunodeficiency Virus (HIV) test.	# of newly arrived refugees to Minnesota tested for HIV / # of newly arrived refugees to Minnesota who received a screening	**State:** 459/491 (93%)

Mental Health

Objective	Measure	Data for Year 2025
At least 85% of adult refugees 18 years and older will be screened for mental health using the Well-being and Emotions Check (WE-Check) tool.	# of newly arrived refugees 18+ years old to Minnesota screened for mental health using WE-Check / # of newly arrived refugees 18+ years old to Minnesota who received a screening	**State:** 216/278 (78%) [g]

[a]Newly arrived refugees refers to all newly arrived refugees eligible for refugee health screening in Minnesota.

[b]Arrived through Reception and Placement (R&P) Program, which provides initial resettlement assistance to refugees upon arrival and is administered by non-profit refugee resettlement agencies.

[c]Includes asylees, certified victims of human trafficking, and Welcome Corps arrivals.

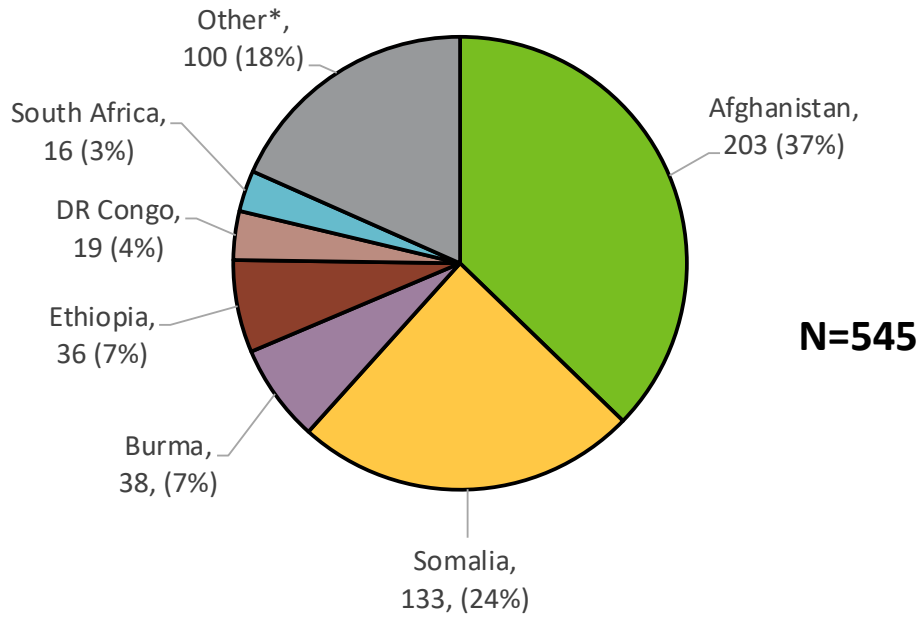
[d]Includes refugees immunized at the screening. Immunizations may have been deferred to primary care but would not be accounted for here.

[e]Based on 2024 data which reflects the most recent completion date for 9-month treatment protocol. Excludes Ukrainian Humanitarian parolees and Cuban/Haitian Entrants.

[f]465/491 (95%) of those screened, regardless of overseas treatment history, were evaluated for eosinophilia through a complete blood count. Twenty-three (5%) had an elevated eosinophilia count.

[g]Of those not screened using WE-Check, 41/62 (66%) adults were screened for mental health using a different mental health screening tool (i.e. PHQ-2 or 9, RHS-15).

Number of Primary Arrivals◊ to Minnesota 01/01/2025 through 12/31/2025



"Other" includes South Sudan (15), Liberia (14), Cameroon (12), Venezuela (11), Eritrea (7), Nicaragua (7), Syria (7), Belarus (5), Sudan (4), Azerbaijan (3), Guatemala (3), Angola (2), Armenia (2), Djibouti (2), Mexico (2), China (1), Dominican Republic (1), Ghana (1), and Haiti (1)

◊ **Primary arrival** is a refugee who is residing in the state listed as the initial point of destination with the United States Citizenship and Immigration Services. Refugees are free to move from state to state, but sponsors, resettlement agencies, and state refugee programs are generally designed to serve only newly arrived primary refugees to the state. Excludes Ukrainian Humanitarian Parolees and Cuban/Haitian Entrants.

Screening Rate

- *State Indicator Objective 1 (to initiate screening within 90 days of arrival):*
  Of the 545 new primary refugee arrivals to Minnesota, 503 were eligible for a health screening and 429 (85%) were screened within 90 days.
- *Overall screening rate:*
  Of the 503 eligible for a health screening, 491 (98%) were screened.

Outcome for Those Not Screened

- Among those eligible for a screening: 6 refused screening, 4 were screened but no results were reported, and contact failed for 2.
- Among those ineligible for a screening: 20 could not be located, 11 did not have insurance, and 10 moved out of Minnesota, 1 was already connected to healthcare.

Flat Free Reimbursement¥

- Three refugees received full flat fee reimbursement in Minnesota.

¥ Federal funds used to cover screening costs for those without insurance

Health Status of New Refugees, Minnesota, 2025

Health Condition	No. infected among screened (%)
TB infection*	77/464 (17%)
Hepatitis B infection**	6/453 (1%)
Hepatitis C antibody	4/450 (1%)
Parasitic infection***	114/403 (28%)
Syphilis infection	3/403 (1%)
HIV infection	1/459 (<1%)
Elevated Blood Lead****	35/193 (18%)
Positive Mental Health Screening*****	20/257 (8%)

Total number of health screenings: $N_{Minnesota}$=491 (98% of 503 eligible refugees)

* Persons with LTBI (QFT+ or ≥ 10mm induration w/ normal CXR) or suspect/active TB disease

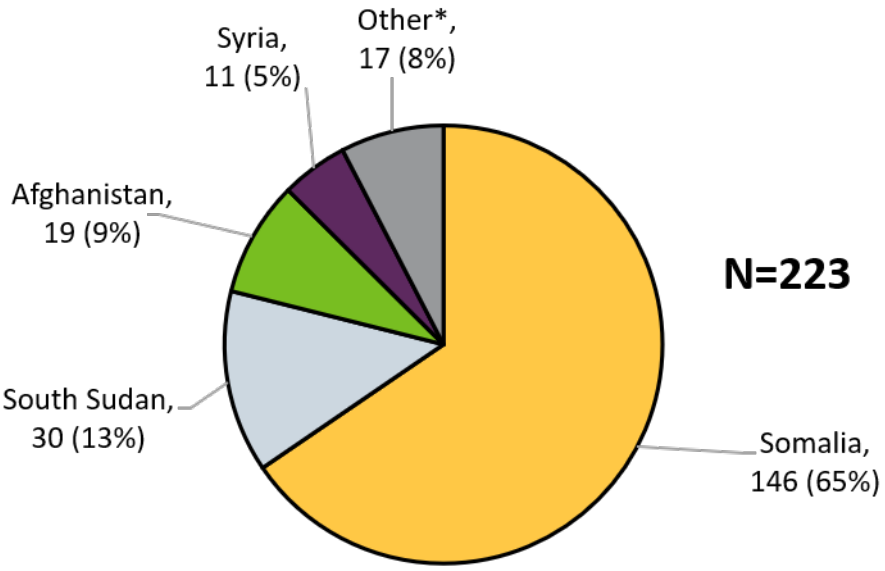
** Positive for Hepatitis B surface antigen (HBsAg)

*** Positive for at least one intestinal parasite infection

****Children <17 years old ($N_{Minnesota}$= 208 screened); Lead Level ≥3.5 ug/dL

*****Adults 18+ years old ($N_{Minnesota}$= 278 screened); Screened positive for mental health concerns using any mental health screening tool(s)

Number of Secondary Arrivals◊ to Minnesota 01/01/2025 through 12/31/2025



"Other includes Iraq (6), Venezuela (6), DR Congo (2), Eritrea (1), Ethiopia (1), and Nicaragua (1).

◊ **Secondary arrival** is a refugee who is no longer residing in the state listed as the initial point of destination with the United States Citizenship and Immigration Services. Refugees are free to move from state to state, but sponsors, resettlement agencies, and state health departments are often designated to serve newly arrived primary refugees to the state.

Counties Reporting Secondary Arrivals

- The counties reporting the largest number of secondary arrivals were Stearns (57 arrivals), Hennepin (52), Kandiyohi (28), Ramsey (20), Blue Earth (18), and Dakota (16).
- Seven counties each reported less than 10 secondary arrivals.

Screening Rate

- Of the 223 secondary arrivals to Minnesota, 116 (52%) were eligible for screening and 107 (92%) of those were screened.
- Among counties reporting ≥10 secondary refugee arrivals, Stearns County screened 27 (100%) of 27 eligible for screening, Hennepin screened 27 (75%) of 36 eligible, and Kandiyohi screened 1 (100%) of 1 eligible, Ramsey screened 10 (100%) of 10 eligible, Blue Earth screened 1 (100%) of 1 eligible, and Dakota screened 16 (100%) of 16 eligible.

Outcome for Those Not Screened

- Among the 107 secondary refugees ineligible for screening: 96 completed screening in another state, 1 died before screening could occur, and 10 had arrived in the U.S. >1 year prior to notification.
- Among the secondary refugees eligible for screening: 9 declined.

Health Status of Secondary Refugees, 2025

Health Condition	No. infected among screened (%)
TB infection*	25/102 (25%)
Hepatitis B infection**	2/93 (2%)
Hepatitis C antibody	1/88 (1%)
Parasitic infection***	19/71 (27%)
Syphilis infection	0/73 (0%)
HIV infection	0/90 (0%)
Elevated Blood Lead****	0/39 (0%)
Positive Mental Health Screening*****	6/52 (12%)

Total number of health screenings: $N_{Secondaries}$=107 (92% of 116 eligible refugees)

* Persons with LTBI (QFT+ or ≥ 10mm induration w/ normal CXR) or suspect/active TB disease

** Positive for Hepatitis B surface antigen (HBsAg)

*** Positive for at least one intestinal parasite infection

****Children <17 years old ($N_{Secondaries}$= 49 screened); Lead Level ≥3.5 ug/dL

*****Adults 18+ years old ($N_{Secondaries}$= 57 screened); Screened positive

Minnesota Department of Health
Refugee Health Program
PO Box 64975
St. Paul, MN 55164-0975
651-201-5414
www.health.state.mn.us/refugee

10/2026

To obtain this information in a different format, call: 651-201-5414.