- Sec. 3. Minnesota Statutes 1994, section 340A.411, is amended by adding a subdivision to read:
- Subd. 3. TERMINOLOGY. A political subdivision may not issue a 3.2 percent malt liquor license that includes the term "nonintoxicating liquor."

Sec. 4. INSTRUCTION TO REVISOR.

The revisor of statutes shall change the words "nonintoxicating liquor" wherever they appear in Minnesota Statutes and Minnesota Rules to "3.2 percent malt liquor."

Presented to the governor March 14, 1996

Signed by the governor March 15, 1996, 11:15 a.m.

CHAPTER 324—H.F.No. 2310

An act relating to health; transferring certain authority from the commissioner of health to the emergency medical services regulatory board; adding two members to the emergency medical services regulatory board; adding an exemption to the medical license requirement; specifying effective date of appointments and board actions; amending Minnesota Statutes 1994, section 169.686, subdivision 3; Minnesota Statutes 1995 Supplement, sections 144.8093, subdivision 4; 144E.01, subdivision 1; and 147.09.

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

Section 1. Minnesota Statutes 1995 Supplement, section 144.8093, subdivision 4, is amended to read:

Subd. 4. DISTRIBUTION. Money from the fund shall be distributed according to this subdivision. Ninety-three and one-third percent of the fund shall be distributed annually on a contract for services basis with each of the eight regional emergency medical services systems designated by the board. The systems shall be governed by a body consisting of appointed representatives from each of the counties in that region and shall also include representatives from emergency medical services organizations. The board shall contract with a regional entity only if the contract proposal satisfactorily addresses proposed emergency medical services activities in the following areas: personnel training, transportation coordination, public safety agency cooperation, communications systems maintenance and development, public involvement, health care facilities involvement, and system management. If each of the regional emergency medical services systems submits a satisfactory contract proposal, then this part of the fund shall be distributed evenly among the regions. If one or more of the regions does not contract for the full amount of its even share or if its proposal is unsatisfactory, then the board may reallocate the unused funds to the remaining regions on a pro rata basis. Six and two-thirds percent of the fund shall be used by the commissioner board to support regionwide reporting systems and to provide other regional administration and technical assistance.

Sec. 2. Minnesota Statutes 1995 Supplement, section 144E.01, subdivision 1, is amended to read:

New language is indicated by underline, deletions by strikeout-

- Subdivision 1. **MEMBERSHIP.** (a) The emergency medical services regulatory board consists of the following members, all of whom must work in Minnesota, except for the person listed in clause (14):
- (1) an emergency physician certified by the American board of emergency physicians;
 - (2) a representative of Minnesota hospitals;
 - (3) a representative of fire chiefs;
- (4) a full-time firefighter who serves as a first responder and who is a member of a professional firefighter's union;
 - (5) a volunteer firefighter who serves as a first responder;
- (6) an attendant currently practicing on a licensed ambulance service who is a paramedic or an emergency medical technician;
 - (7) an ambulance director for a licensed ambulance service;
 - (8) a representative of sheriffs;
 - (9) a member of a local board of health to represent community health services;
- (10) two representatives of regional emergency medical services programs, one of whom must be from the metropolitan regional emergency medical services program;
 - (11) a registered nurse currently practicing in a hospital emergency department;
- (12) a pediatrician, certified by the American board of pediatrics, with experience in emergency medical services;
- (13) a family practice physician who is currently involved in emergency medical services; and
 - (14) a public member who resides in Minnesota and is at least 65 years of age; and
 - (15) the commissioners of health and public safety or their designees.
- (b) The governor shall appoint members under paragraph (a). Appointments under clauses (1) to (9) and (11) to (13) are subject to the advice and consent of the senate. In making appointments under clauses (1) to (9) and (11) to (13), the governor shall consider recommendations of the American college of emergency physicians, the Minnesota hospital association, the Minnesota and state fire chief's association, the Minnesota ambulance association, the Minnesota emergency medical services association, the Minnesota state sheriff's association, the association of Minnesota counties, the Minnesota nurses association, and the Minnesota chapter of the academy of pediatrics.
 - (c) No member appointed under paragraph (a) may serve consecutive terms.
- (d) At least seven members appointed under paragraph (a) must reside outside of the seven-county metropolitan area, as defined in section 473.121.
 - Sec. 3. Minnesota Statutes 1995 Supplement, section 147.09, is amended to read: 147.09 **EXEMPTIONS.**

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Section 147.081 does not apply to, control, prevent or restrict the practice, service, or activities of:

- (1) A person who is a commissioned medical officer of, a member of, or employed by, the armed forces of the United States, the United States Public Health Service, the Veterans Administration, any federal institution or any federal agency while engaged in the performance of official duties within this state, if the person is licensed elsewhere.
 - (2) A licensed physician from a state or country who is in actual consultation here.
- (3) A licensed or registered physician who treats the physician's home state patients or other participating patients while the physicians and those patients are participating together in outdoor recreation in this state as defined by section 86A.03, subdivision 3. A physician shall first register with the board on a form developed by the board for that purpose. The board shall not be required to promulgate the contents of that form by rule. No fee shall be charged for this registration.
- (4) A student practicing under the direct supervision of a preceptor while the student is enrolled in and regularly attending a recognized medical school.
- (5) A student who is in continuing training and performing the duties of an intern or resident or engaged in postgraduate work considered by the board to be the equivalent of an internship or residency in any hospital or institution approved for training by the board, provided the student has a residency permit issued by the board under section 147.0391.
- (6) A person employed in a scientific, sanitary, or teaching capacity by the state university, the department of children, families, and learning, or by any public or private school, college, or other bona fide educational institution, or the state department of health, whose duties are entirely of a public health or educational character, while engaged in such duties.
 - (7) Physician's assistants registered in this state.
- (8) A doctor of osteopathy duly licensed by the state board of osteopathy under Minnesota Statutes 1961, sections 148.11 to 148.16, prior to May 1, 1963, who has not been granted a license to practice medicine in accordance with this chapter provided that the doctor confines activities within the scope of the license.
- (9) Any person licensed by a health related licensing board, as defined in section 214.01, subdivision 2, or registered by the commissioner of health pursuant to section 214.13, including psychological practitioners with respect to the use of hypnosis; provided that the person confines activities within the scope of the license.
- (10) A person who practices ritual circumcision pursuant to the requirements or tenets of any established religion.
- (11) A Christian Scientist or other person who endeavors to prevent or cure disease or suffering exclusively by mental or spiritual means or by prayer.
- (12) A physician licensed to practice medicine in another state who is in this state for the sole purpose of providing medical services at a competitive athletic event. The physician may practice medicine only on participants in the athletic event. A physician shall first register with the board on a form developed by the board for that purpose. The board

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shall not be required to adopt the contents of the form by rule. The physician shall provide evidence satisfactory to the board of a current unrestricted license in another state. The board shall charge a fee of \$50 for the registration.

- (13) A psychologist licensed under section 148.91 or a social worker licensed under section 148B.21 who uses or supervises the use of a penile or vaginal plethysmograph in assessing and treating individuals suspected of engaging in aberrant sexual behavior and sex offenders.
- (14) Any person issued a training course certificate or credentialed by the emergency medical services regulatory board established in chapter 144E, provided the person confines activities within the scope of training at the certified or credentialed level.
 - Sec. 4. Minnesota Statutes 1994, section 169.686, subdivision 3, is amended to read:
- Subd. 3. APPROPRIATION; SPECIAL ACCOUNT. The fines collected for a violation of subdivision 1 must be deposited in the state treasury and credited to a special account to be known as the emergency medical services relief account. Ninety percent of the money in the account shall be distributed to the eight regional emergency medical services systems designated by the commissioner emergency medical services regulatory board under section 144.8093, for personnel education and training, equipment and vehicle purchases, and operational expenses of emergency life support transportation services. The board of directors of each emergency medical services region shall establish criteria for funding. Ten percent of the money in the account shall be distributed to the commissioner of public safety for the expenses of traffic safety educational programs conducted by state patrol troopers.

Sec. 5. APPOINTMENTS; BOARD ACTION.

The governor shall appoint the members of the emergency medical services regulatory board under Minnesota Statutes, section 144E.01, no later than April 1, 1996. The board may begin meeting, may appoint an executive director, and may take other action necessary to prepare for the transition of emergency medical services—related authority.

Sec. 6. REVISOR INSTRUCTION.

The revisor of statutes shall change the terms "commissioner of health," "commissioner," or similar terms to "emergency medical services regulatory board" or similar terms in Minnesota Rules to reflect the intent of the legislature to transfer certain functions from the commissioner of health to the emergency medical services regulatory board in the manner provided in Laws 1995, chapter 207, article 9.

Sec. 7. EFFECTIVE DATE.

Sections 1, 4, and 6 are effective July 1, 1996. Sections 2, 3, and 5 are effective the day following final enactment.

Presented to the governor March 14, 1996

Signed by the governor March 15, 1996, 11:18 a.m.

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