

## State of Minnesota

## HOUSE OF REPRESENTATIVES

EIGHTY-EIGHTH SESSION

H. F. No. **760**

02/21/2013 Authored by Loeffler  
The bill was read for the first time and referred to the Committee on Health and Human Services Policy  
03/13/2013 Adoption of Report: Pass as Amended and Read Second Time  
04/22/2013 Calendar for the Day  
Read Third Time  
Passed by the House and transmitted to the Senate

1.1 A bill for an act  
1.2 relating to human services; updating outdated terminology; amending Minnesota  
1.3 Statutes 2012, sections 15.44; 124D.57; 127A.45, subdivision 12; 144.651,  
1.4 subdivision 4; 145.88; 146A.11, subdivision 1; 148.512, subdivisions 12,  
1.5 13; 150A.13, subdivision 6; 174.255, subdivision 1; 202A.13; 202A.155;  
1.6 202A.156; 237.036; 237.16, subdivision 9; 240A.04; 240A.06, subdivisions  
1.7 1, 2; 256.01, subdivision 2; 256C.24, subdivision 3; 256C.29; 299C.06;  
1.8 326B.106, subdivisions 9, 11; 473.608, subdivision 22; 589.35, subdivision 1;  
1.9 595.02, subdivision 1; 609.06, subdivision 1; 609.749, subdivision 2; 626.8455,  
1.10 subdivision 1.

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

1.12 Section 1. Minnesota Statutes 2012, section 15.44, is amended to read:

1.13 **15.44 AIDS FOR ~~DISABLED~~ PERSONS WITH DISABILITIES AT STATE**  
1.14 **MEETINGS.**

1.15 After July 1, 1980, a state agency which sponsors, in whole or in part, a meeting  
1.16 or conference for the public or for state employees shall ensure that a physically  
1.17 disabled participant who gives reasonable advance notice to the agency will receive the  
1.18 auxiliary aids necessary for effective participation. Auxiliary aids may include taped  
1.19 or Brailled materials, interpreters or other effective means of making orally delivered  
1.20 material available to participants with hearing impairments who are deaf, deafblind, and  
1.21 hard-of-hearing, and equipment adaptable for use by participants with manual impairments  
1.22 and other similar services and action; however, nothing in this section shall (1) require a  
1.23 state agency to provide attendants, individually prescribed devices, or other devices or  
1.24 services of a personal nature or (2) apply to the Minnesota State Colleges and Universities  
1.25 or the University of Minnesota with respect to classes, seminars or training programs  
1.26 which are offered by them. When sign language interpreters are provided, they shall be

2.1 provided in a manner so that ~~hearing-impaired~~ participants who are deaf, deafblind, and  
 2.2 hard-of-hearing will be able to see their signing clearly. For the purposes of this section,  
 2.3 "physically disabled" has the meaning given in section 326B.103, subdivision 10. For the  
 2.4 purposes of this section, "agency" means any state officer, employee, board, commission,  
 2.5 authority, department or other agency or the executive branch of state government.

2.6 Sec. 2. Minnesota Statutes 2012, section 124D.57, is amended to read:

2.7 **124D.57 HEARING-IMPAIRED EDUCATIONAL SUPPORT SERVICES**  
 2.8 **FOR PEOPLE WHO ARE DEAF, DEAFBLIND, HARD-OF-HEARING.**

2.9 Subdivision 1. **Responsibility of commissioner.** The commissioner shall coordinate  
 2.10 and may pay for support services for ~~hearing-impaired~~ persons who are deaf, deafblind,  
 2.11 and hard-of-hearing to assure access to educational opportunities. Services may be  
 2.12 provided to adult students who are ~~hearing-impaired~~ deaf, deafblind, and hard-of-hearing  
 2.13 and (1) have been denied access to educational opportunities because of the lack of support  
 2.14 services or (2) are presently enrolled or (3) are contemplating enrollment in an educational  
 2.15 program and would benefit from support services. The commissioner shall also be  
 2.16 responsible for conducting in-service training for public and private agencies regarding  
 2.17 the needs of ~~hearing-impaired~~ persons who are deaf, deafblind, and hard-of-hearing in the  
 2.18 adult education system.

2.19 Subd. 2. **Support services.** The commissioner may pay school districts or public or  
 2.20 private community agencies for the following support services:

2.21 (1) interpreter services to provide translation for an individual or a group of students;

2.22 or

2.23 (2) notetaker services to convert spoken language to written language when the  
 2.24 student must maintain visual contact with other persons such as an interpreter or instructor.

2.25 Subd. 3. **Programs included.** Support services may be provided for:

2.26 (1) local school district adult education programs;

2.27 (2) adult technical college programs; and

2.28 (3) avocational education programs sponsored by public or private community  
 2.29 agencies.

2.30 Sec. 3. Minnesota Statutes 2012, section 127A.45, subdivision 12, is amended to read:

2.31 Subd. 12. **Payment percentage for certain aids.** One hundred percent of the aid for  
 2.32 the current fiscal year must be paid for the following aids: reimbursement for enrollment  
 2.33 options transportation, according to sections 124D.03, subdivision 8, 124D.09, subdivision  
 2.34 22, and 124D.10; school lunch aid, according to section 124D.111; and ~~hearing-impaired~~

3.1 support services aid, for persons who are deaf, deafblind, and hard-of-hearing according  
3.2 to section 124D.57.

3.3 Sec. 4. Minnesota Statutes 2012, section 144.651, subdivision 4, is amended to read:

3.4 Subd. 4. **Information about rights.** Patients and residents shall, at admission,  
3.5 be told that there are legal rights for their protection during their stay at the facility  
3.6 or throughout their course of treatment and maintenance in the community and that  
3.7 these are described in an accompanying written statement of the applicable rights and  
3.8 responsibilities set forth in this section. In the case of patients admitted to residential  
3.9 programs as defined in section 253C.01, the written statement shall also describe the  
3.10 right of a person 16 years old or older to request release as provided in section 253B.04,  
3.11 subdivision 2, and shall list the names and telephone numbers of individuals and  
3.12 organizations that provide advocacy and legal services for patients in residential programs.  
3.13 Reasonable accommodations shall be made for ~~those with communication impairments~~  
3.14 people who have communication disabilities and those who speak a language other than  
3.15 English. Current facility policies, inspection findings of state and local health authorities,  
3.16 and further explanation of the written statement of rights shall be available to patients,  
3.17 residents, their guardians or their chosen representatives upon reasonable request to  
3.18 the administrator or other designated staff person, consistent with chapter 13, the Data  
3.19 Practices Act, and section 626.557, relating to vulnerable adults.

3.20 Sec. 5. Minnesota Statutes 2012, section 145.88, is amended to read:

3.21 **145.88 PURPOSE.**

3.22 Federal money received by the Minnesota Department of Health, pursuant to United  
3.23 States Code, title 42, sections 701 to 709, shall be expended to:

3.24 (1) assure access to quality maternal and child health services for mothers and  
3.25 children, especially those of low income and with limited availability to health services  
3.26 and those children at risk of physical, neurological, emotional, and developmental  
3.27 problems arising from chemical abuse by a mother during pregnancy;

3.28 (2) reduce infant mortality and the incidence of preventable diseases and disabling  
3.29 conditions among children;

3.30 (3) reduce the need for inpatient and long-term care services and to otherwise  
3.31 promote the health of mothers and children, especially by providing preventive and  
3.32 primary care services for low-income mothers and children and prenatal, delivery and  
3.33 postpartum care for low-income mothers;

4.1 (4) provide rehabilitative services for blind and disabled children under age 16  
4.2 receiving benefits under title XVI of the Social Security Act; and

4.3 (5) provide and locate medical, surgical, corrective and other service for children  
4.4 ~~who are crippled or who are suffering from conditions that lead to crippling~~ with special  
4.5 health care needs.

4.6 Sec. 6. Minnesota Statutes 2012, section 146A.11, subdivision 1, is amended to read:

4.7 Subdivision 1. **Scope.** (a) All unlicensed complementary and alternative health  
4.8 care practitioners shall provide to each complementary and alternative health care  
4.9 client prior to providing treatment a written copy of the complementary and alternative  
4.10 health care client bill of rights. A copy must also be posted in a prominent location  
4.11 in the office of the unlicensed complementary and alternative health care practitioner.  
4.12 Reasonable accommodations shall be made for those clients who cannot read or who have  
4.13 communication ~~impairments~~ disabilities and those who do not read or speak English. The  
4.14 complementary and alternative health care client bill of rights shall include the following:

4.15 (1) the name, complementary and alternative health care title, business address, and  
4.16 telephone number of the unlicensed complementary and alternative health care practitioner;

4.17 (2) the degrees, training, experience, or other qualifications of the practitioner  
4.18 regarding the complimentary and alternative health care being provided, followed by the  
4.19 following statement in bold print:

4.20 "THE STATE OF MINNESOTA HAS NOT ADOPTED ANY EDUCATIONAL  
4.21 AND TRAINING STANDARDS FOR UNLICENSED COMPLEMENTARY AND  
4.22 ALTERNATIVE HEALTH CARE PRACTITIONERS. THIS STATEMENT OF  
4.23 CREDENTIALS IS FOR INFORMATION PURPOSES ONLY.

4.24 Under Minnesota law, an unlicensed complementary and alternative health care  
4.25 practitioner may not provide a medical diagnosis or recommend discontinuance of  
4.26 medically prescribed treatments. If a client desires a diagnosis from a licensed physician,  
4.27 chiropractor, or acupuncture practitioner, or services from a physician, chiropractor, nurse,  
4.28 osteopath, physical therapist, dietitian, nutritionist, acupuncture practitioner, athletic  
4.29 trainer, or any other type of health care provider, the client may seek such services at  
4.30 any time.";

4.31 (3) the name, business address, and telephone number of the practitioner's  
4.32 supervisor, if any;

4.33 (4) notice that a complementary and alternative health care client has the right to file a  
4.34 complaint with the practitioner's supervisor, if any, and the procedure for filing complaints;

5.1 (5) the name, address, and telephone number of the office of unlicensed  
5.2 complementary and alternative health care practice and notice that a client may file  
5.3 complaints with the office;

5.4 (6) the practitioner's fees per unit of service, the practitioner's method of billing  
5.5 for such fees, the names of any insurance companies that have agreed to reimburse the  
5.6 practitioner, or health maintenance organizations with whom the practitioner contracts to  
5.7 provide service, whether the practitioner accepts Medicare, medical assistance, or general  
5.8 assistance medical care, and whether the practitioner is willing to accept partial payment,  
5.9 or to waive payment, and in what circumstances;

5.10 (7) a statement that the client has a right to reasonable notice of changes in services  
5.11 or charges;

5.12 (8) a brief summary, in plain language, of the theoretical approach used by the  
5.13 practitioner in providing services to clients;

5.14 (9) notice that the client has a right to complete and current information concerning  
5.15 the practitioner's assessment and recommended service that is to be provided, including  
5.16 the expected duration of the service to be provided;

5.17 (10) a statement that clients may expect courteous treatment and to be free from  
5.18 verbal, physical, or sexual abuse by the practitioner;

5.19 (11) a statement that client records and transactions with the practitioner are  
5.20 confidential, unless release of these records is authorized in writing by the client, or  
5.21 otherwise provided by law;

5.22 (12) a statement of the client's right to be allowed access to records and written  
5.23 information from records in accordance with sections 144.291 to 144.298;

5.24 (13) a statement that other services may be available in the community, including  
5.25 where information concerning services is available;

5.26 (14) a statement that the client has the right to choose freely among available  
5.27 practitioners and to change practitioners after services have begun, within the limits of  
5.28 health insurance, medical assistance, or other health programs;

5.29 (15) a statement that the client has a right to coordinated transfer when there will  
5.30 be a change in the provider of services;

5.31 (16) a statement that the client may refuse services or treatment, unless otherwise  
5.32 provided by law; and

5.33 (17) a statement that the client may assert the client's rights without retaliation.

5.34 (b) This section does not apply to an unlicensed complementary and alternative  
5.35 health care practitioner who is employed by or is a volunteer in a hospital or hospice who  
5.36 provides services to a client in a hospital or under an appropriate hospice plan of care.

6.1 Patients receiving complementary and alternative health care services in an inpatient  
6.2 hospital or under an appropriate hospice plan of care shall have and be made aware of  
6.3 the right to file a complaint with the hospital or hospice provider through which the  
6.4 practitioner is employed or registered as a volunteer.

6.5 Sec. 7. Minnesota Statutes 2012, section 148.512, subdivision 12, is amended to read:

6.6 Subd. 12. **Practice of audiology.** The "practice of audiology" means:

6.7 (1) identification, assessment, and interpretation, diagnosis, rehabilitation, and  
6.8 prevention of hearing disorders;

6.9 (2) conservation of the auditory system function; development and implementation  
6.10 of hearing conservation programs;

6.11 (3) measurement, assessment, and interpretation of auditory and vestibular function;

6.12 (4) selecting, fitting, and dispensing of assistive listening devices, alerting and  
6.13 amplification devices, and systems for personal and public use, including hearing aids and  
6.14 devices, and providing training in their use;

6.15 (5) aural habilitation and rehabilitation and related counseling for ~~hearing-impaired~~  
6.16 individuals who are deaf, deafblind, and hard-of-hearing and their families;

6.17 (6) screening of speech, language, voice, or fluency for the purposes of audiologic  
6.18 evaluation or identification of possible communication disorders; or

6.19 (7) supervision of the functions in clauses (1) to (6).

6.20 The practice of audiology does not include the practice of medicine and surgery,  
6.21 or osteopathic medicine and surgery, or medical diagnosis that is commonly performed  
6.22 by a physician.

6.23 Sec. 8. Minnesota Statutes 2012, section 148.512, subdivision 13, is amended to read:

6.24 Subd. 13. **Practice of speech-language pathology.** The "practice of  
6.25 speech-language pathology" means:

6.26 (1) identification, assessment, and interpretation, diagnosis, habilitation,  
6.27 rehabilitation, treatment and prevention of disorders of speech, articulation, fluency, voice,  
6.28 and language;

6.29 (2) identification, assessment, and interpretation, diagnosis, habilitation, and  
6.30 rehabilitation of disorders of oral-pharyngeal function and related disorders;

6.31 (3) identification, assessment, and interpretation, diagnosis, habilitation, and  
6.32 rehabilitation of communication disorders associated with cognition;

6.33 (4) assessing, selecting, and developing augmentative and alternative communication  
6.34 systems and providing training in their use;

- 7.1 (5) aural habilitation and rehabilitation and related counseling for ~~hearing-impaired~~  
 7.2 individuals who are deaf, deafblind, and hard-of-hearing and their families;  
 7.3 (6) enhancing speech-language proficiency and communication effectiveness;  
 7.4 (7) screening individuals for hearing loss or middle ear pathology for the purposes  
 7.5 of speech-language evaluation or for the identification of possible hearing disorders; or  
 7.6 (8) supervision of the functions in clauses (1) to (7).

7.7 The practice of speech-language pathology does not include the practice of medicine  
 7.8 and surgery, or osteopathic medicine and surgery, or medical diagnosis that is commonly  
 7.9 performed by a physician.

7.10 Sec. 9. Minnesota Statutes 2012, section 150A.13, subdivision 6, is amended to read:

7.11 Subd. 6. **Courts.** The court administrator of district court or any other court of  
 7.12 competent jurisdiction shall report to the board any judgment or other determination of the  
 7.13 court that adjudges or includes a finding that a licensee ~~is mentally ill~~, who has a mental  
 7.14 illness, is mentally incompetent unable to practice with reasonable skill and safety due to a  
 7.15 mental condition, guilty of a felony, guilty of a violation of federal or state narcotics laws  
 7.16 or controlled substances act, or guilty of an abuse or fraud under Medicare or Medicaid; or  
 7.17 that appoints a guardian of the licensee pursuant to sections 524.5-101 to 524.5-502, or  
 7.18 commits a licensee pursuant to chapter 253B.

7.19 Sec. 10. Minnesota Statutes 2012, section 174.255, subdivision 1, is amended to read:

7.20 Subdivision 1. **Accessibility for people with disability.** The commissioner shall  
 7.21 require any paratransit project receiving assistance under section 174.24 that includes the  
 7.22 operation of two or more vehicles other than automobiles or taxis to provide at least one  
 7.23 vehicle that is accessible to disabled individuals and may require additional accessible  
 7.24 vehicles if necessary to serve disabled individuals expected to use the project. A vehicle  
 7.25 is accessible if it is equipped to allow transportation of an individual ~~confined to~~ using a  
 7.26 wheelchair or using an orthopedic device.

7.27 Sec. 11. Minnesota Statutes 2012, section 202A.13, is amended to read:

7.28 **202A.13 COMMITTEES, CONVENTIONS.**

7.29 The rules of each major political party shall provide that for each congressional  
 7.30 district and each county or legislative district a convention shall be held at least once  
 7.31 every state general election year. Each major political party shall also provide for each  
 7.32 congressional district and each county or legislative district an executive committee  
 7.33 consisting of a chair and such other officers as may be necessary. The party rules may

8.1 provide for only one executive committee and one convention where any county and  
8.2 congressional district have the same territorial limits.

8.3 A ~~communicatively impaired~~ delegate or alternate who is deaf, deafblind,  
8.4 or hard-of-hearing who needs interpreter services at a county, legislative district,  
8.5 congressional district, or state convention shall so notify the executive committee of the  
8.6 major political party unit whose convention the delegate or alternate plans to attend.  
8.7 Written notice must be given by certified mail to the executive committee at least 30 days  
8.8 before the convention date. The major political party, not later than 14 days before the  
8.9 convention date, shall secure the services of one or more interpreters if available and shall  
8.10 assume responsibility for the cost of the services. The state central committee of the major  
8.11 political party shall determine the process for reimbursing interpreters.

8.12 A visually impaired delegate or alternate to a county, legislative district,  
8.13 congressional district, or state convention may notify the executive committee of the major  
8.14 political party unit that the delegate or alternate requires convention materials in audio  
8.15 tape, Braille, or large print format. Upon receiving the request, the executive committee  
8.16 shall provide all official written convention materials as soon as they are available, so  
8.17 that the visually impaired individual may have them converted to audio tape, Braille, or  
8.18 large print format, prior to the convention.

8.19 Sec. 12. Minnesota Statutes 2012, section 202A.155, is amended to read:

8.20 **202A.155 INTERPRETER SERVICES; CAUCUS MATERIALS.**

8.21 ~~A communicatively impaired~~ An individual who is deaf, deafblind, or  
8.22 hard-of-hearing who needs interpreter services at a precinct caucus shall so notify the  
8.23 major political party whose caucus the individual plans to attend. Notice must be given by  
8.24 letter or electronic mail to the state office of the major political party before the precinct  
8.25 caucus date. The major political party shall promptly attempt to secure the services of one  
8.26 or more interpreters if available and shall assume responsibility for the cost of the services  
8.27 if provided. The state central committee of the major political party shall determine the  
8.28 process for reimbursing interpreters.

8.29 A visually impaired individual may notify the county or legislative district  
8.30 committee of the major political party whose precinct caucus the individual plans to  
8.31 attend, that the individual requires caucus materials in audio tape, Braille, or large type  
8.32 format. Upon receiving the request, the county or legislative district committee shall  
8.33 provide all official written caucus materials as soon as they are available, so that the  
8.34 visually impaired individual may have them converted to audio tape, Braille, or large  
8.35 print format prior to the precinct caucus.



9.1 Sec. 13. Minnesota Statutes 2012, section 202A.156, is amended to read:

9.2 **202A.156 INTERPRETER SERVICES AND ACCESSIBLE PRECINCT**  
 9.3 **CAUCUS EXEMPTIONS.**

9.4 A major political party is not required to:

9.5 (1) provide an interpreter for a convention or precinct caucus if it has made  
 9.6 documented good faith efforts to locate and assign an interpreter, including contacting an  
 9.7 interpreter referral center or regional service center for the hearing-impaired people who  
 9.8 are deaf, deafblind, and hard-of-hearing, and no interpreters are available; or

9.9 (2) hold a precinct caucus at a place that meets the accessibility standards for  
 9.10 precinct polling places specified in section 204B.16, subdivision 5, if it has made  
 9.11 documented good faith efforts to locate and secure an available accessible site within a  
 9.12 reasonable distance of the precinct, and no accessible site is available.

9.13 Sec. 14. Minnesota Statutes 2012, section 237.036, is amended to read:

9.14 **237.036 COIN-OPERATED OR PUBLIC PAY TELEPHONES.**

9.15 (a) Neither commission approval nor a commission certificate is required to:

9.16 (1) site a coin-operated or public pay telephone in the state; or

9.17 (2) implement changes in service, services offered, rates, or location regarding a  
 9.18 coin-operated or public pay telephone. Registration under section 237.64 is required to  
 9.19 own or operate a coin-operated or public pay telephone in the state.

9.20 (b) This section does not change the authority of other state or local government  
 9.21 entities to regulate aspects of coin-operated or public pay telephone ownership, location,  
 9.22 or operation; however, an entity may not regulate aspects of these services that it did not  
 9.23 regulate prior to May 26, 1999. The commission shall retain the authority delegated to  
 9.24 it under federal and state law to protect the public interest with regard to coin-operated  
 9.25 or public pay telephones.

9.26 (c) Owners and operators of coin-operated or public pay telephones are exempt from  
 9.27 sections 237.06, 237.07, 237.075, 237.09, 237.23, 237.295, and 237.39 and the annual  
 9.28 reporting requirement of section 237.11.

9.29 (d) Owners of coin-operated or public pay telephones shall:

9.30 (1) provide immediate coin-free access, to the extent technically feasible, to 911  
 9.31 emergency service or to another approved emergency service; and

9.32 (2) provide free access to the telecommunications relay service for the  
 9.33 communication-impaired people with communication disabilities.

9.34 (e) Owners of coin-operated or public pay telephones must post at each coin-operated  
 9.35 or public pay telephone location:

10.1 (1) customer service and complaint information, including the name, address, and  
10.2 telephone number of the owner of the coin-operated or public pay telephone and the  
10.3 operator service handling calls from the coin-operated or public pay telephone; a toll-free  
10.4 number of the appropriate telephone company for the resolution of complaints; and the  
10.5 toll-free number of the public utilities commission; and

10.6 (2) a toll-free number at which consumers can obtain pricing information regarding  
10.7 rates, charges, terms, and conditions of local and long-distance calls.

10.8 Sec. 15. Minnesota Statutes 2012, section 237.16, subdivision 9, is amended to read:

10.9 Subd. 9. **Universal service fund.** The commission shall establish and require  
10.10 contributions to a universal service fund, to be supported by all providers of telephone  
10.11 services, whether or not they are telephone companies under section 237.01, including, but  
10.12 not limited to, local telephone companies, independent telephone companies, cooperative  
10.13 telephone companies, municipal telephone companies, telecommunications carriers,  
10.14 radio common carriers, personal communication service providers, and cellular carriers.  
10.15 Services that should be considered for inclusion as universal include, at a minimum,  
10.16 single-party service including access, usage and touch-tone capability; line quality  
10.17 capable of carrying facsimile and data transmissions; equal access; emergency services  
10.18 number capability; statewide telecommunications relay service for ~~the hearing-impaired~~  
10.19 people with hearing loss; and blocking of long-distance toll services. The fund must be  
10.20 administered and distributed in accordance with rules adopted by the commission and  
10.21 designed to preserve the availability of universal service throughout the state. Any state  
10.22 universal service fund must be coordinated with any federal universal service fund and be  
10.23 consistent with section 254(b)(1) to (5) of the federal Telecommunications Act of 1996,  
10.24 Public Law 104-104. The department shall make recommendations to the legislature by  
10.25 January 1, 1996, regarding a plan for contributions to and expenditures from the universal  
10.26 service fund. In particular, the department shall address the following issues:

10.27 (1) what additional services should be included in the basic set of essential telephone  
10.28 services which the state should encourage in its mandate to ensure universal service;

10.29 (2) whether and how expenditures from the fund should be used to ensure citizens  
10.30 access to local government and other public access programming; and

10.31 (3) whether expenditures from the fund should be used to encourage construction  
10.32 of infrastructure for, and access to, advanced services, especially in high-cost areas of  
10.33 the state, and, if the commission determines the fund should be used for this purpose, a  
10.34 plan to accomplish these goals.

11.1 Sec. 16. Minnesota Statutes 2012, section 240A.04, is amended to read:

11.2 **240A.04 PROMOTION AND DEVELOPMENT OF AMATEUR SPORTS.**

11.3 In addition to the powers and duties granted under section 240A.03, the commission  
11.4 may:

11.5 (1) promote the development of Olympic training centers;

11.6 (2) promote physical fitness by promoting participation in sports;

11.7 (3) develop, foster, and coordinate physical fitness services and programs;

11.8 (4) sponsor amateur sport workshops, clinics, and conferences;

11.9 (5) provide recognition for outstanding developments, achievements, and

11.10 contributions to amateur sports;

11.11 (6) stimulate and promote amateur sport research;

11.12 (7) collect, disseminate, and communicate amateur sport information;

11.13 (8) promote amateur sport and physical fitness programs in schools and local

11.14 communities;

11.15 (9) develop programs to promote personal health and physical fitness by participation

11.16 in amateur sports in cooperation with medical, dental, sports medicine, and similar

11.17 professional societies;

11.18 (10) promote the development of recreational amateur sport opportunities

11.19 and activities in the state, including the means of facilitating acquisition, financing,

11.20 construction, and rehabilitation of sports facilities for the holding of amateur sporting

11.21 events;

11.22 (11) promote national and international amateur sport competitions and events;

11.23 (12) sanction or sponsor amateur sport competition;

11.24 (13) take membership in regional or national amateur sports associations or

11.25 organizations; and

11.26 (14) promote the ~~mainstreaming and normalization~~ inclusion of people with physical

11.27 ~~disabilities and visual and hearing impairments,~~ visual impairments, and people who are

11.28 deaf, deafblind, and hard-of-hearing in amateur sports.

11.29 Sec. 17. Minnesota Statutes 2012, section 240A.06, subdivision 1, is amended to read:

11.30 Subdivision 1. **Sponsorship required.** The commission may sponsor and sanction a  
11.31 series of statewide amateur athletic games patterned after the winter and summer Olympic  
11.32 Games, with variations as required by facilities, equipment, and expertise, and as necessary  
11.33 to include people with physical disabilities ~~and visual and hearing impairments,~~ people with  
11.34 vision impairments, and people who are deaf, deafblind, and hard-of-hearing. The games

12.1 may be held annually beginning in 1989, if money and facilities are available, unless the  
12.2 time of the games would conflict with other sporting events as the commission determines.

12.3 Sec. 18. Minnesota Statutes 2012, section 240A.06, subdivision 2, is amended to read:

12.4 Subd. 2. **Limitations.** The games must be designed to encourage the participation  
12.5 of athletes representing a broad range of age groups, skill levels, Minnesota communities,  
12.6 and people with physical disabilities ~~and visual and hearing impairments~~, people with  
12.7 vision impairments, and people who are deaf, deafblind, and hard-of-hearing. Primary  
12.8 participants must be residents of Minnesota. Regional competitions to determine  
12.9 participants in the games may be held throughout the state, and the top qualifiers in each  
12.10 sport or the regional competitions are qualified to participate in the state amateur athletic  
12.11 games. The games must be held at an appropriate site in the state.

12.12 Sec. 19. Minnesota Statutes 2012, section 256.01, subdivision 2, is amended to read:

12.13 Subd. 2. **Specific powers.** Subject to the provisions of section 241.021, subdivision  
12.14 2, the commissioner of human services shall carry out the specific duties in paragraphs (a)  
12.15 through (cc):

12.16 (a) Administer and supervise all forms of public assistance provided for by state law  
12.17 and other welfare activities or services as are vested in the commissioner. Administration  
12.18 and supervision of human services activities or services includes, but is not limited to,  
12.19 assuring timely and accurate distribution of benefits, completeness of service, and quality  
12.20 program management. In addition to administering and supervising human services  
12.21 activities vested by law in the department, the commissioner shall have the authority to:

12.22 (1) require county agency participation in training and technical assistance programs  
12.23 to promote compliance with statutes, rules, federal laws, regulations, and policies  
12.24 governing human services;

12.25 (2) monitor, on an ongoing basis, the performance of county agencies in the  
12.26 operation and administration of human services, enforce compliance with statutes, rules,  
12.27 federal laws, regulations, and policies governing welfare services and promote excellence  
12.28 of administration and program operation;

12.29 (3) develop a quality control program or other monitoring program to review county  
12.30 performance and accuracy of benefit determinations;

12.31 (4) require county agencies to make an adjustment to the public assistance benefits  
12.32 issued to any individual consistent with federal law and regulation and state law and rule  
12.33 and to issue or recover benefits as appropriate;

13.1 (5) delay or deny payment of all or part of the state and federal share of benefits and  
13.2 administrative reimbursement according to the procedures set forth in section 256.017;

13.3 (6) make contracts with and grants to public and private agencies and organizations,  
13.4 both profit and nonprofit, and individuals, using appropriated funds; and

13.5 (7) enter into contractual agreements with federally recognized Indian tribes with  
13.6 a reservation in Minnesota to the extent necessary for the tribe to operate a federally  
13.7 approved family assistance program or any other program under the supervision of the  
13.8 commissioner. The commissioner shall consult with the affected county or counties in  
13.9 the contractual agreement negotiations, if the county or counties wish to be included,  
13.10 in order to avoid the duplication of county and tribal assistance program services. The  
13.11 commissioner may establish necessary accounts for the purposes of receiving and  
13.12 disbursing funds as necessary for the operation of the programs.

13.13 (b) Inform county agencies, on a timely basis, of changes in statute, rule, federal law,  
13.14 regulation, and policy necessary to county agency administration of the programs.

13.15 (c) Administer and supervise all child welfare activities; promote the enforcement of  
13.16 laws protecting disabled, dependent, neglected and delinquent children, and children born  
13.17 to mothers who were not married to the children's fathers at the times of the conception  
13.18 nor at the births of the children; license and supervise child-caring and child-placing  
13.19 agencies and institutions; supervise the care of children in boarding and foster homes or  
13.20 in private institutions; and generally perform all functions relating to the field of child  
13.21 welfare now vested in the State Board of Control.

13.22 (d) Administer and supervise all noninstitutional service to ~~disabled persons,~~  
13.23 ~~including those who are visually impaired, hearing impaired, or physically impaired~~  
13.24 ~~or otherwise disabled persons with disabilities, including persons who have vision~~  
13.25 impairments, and persons who are deaf, deafblind, and hard-of-hearing or with other  
13.26 disabilities. The commissioner may provide and contract for the care and treatment of  
13.27 qualified indigent children in facilities other than those located and available at state  
13.28 hospitals when it is not feasible to provide the service in state hospitals.

13.29 (e) Assist and actively cooperate with other departments, agencies and institutions,  
13.30 local, state, and federal, by performing services in conformity with the purposes of Laws  
13.31 1939, chapter 431.

13.32 (f) Act as the agent of and cooperate with the federal government in matters of  
13.33 mutual concern relative to and in conformity with the provisions of Laws 1939, chapter  
13.34 431, including the administration of any federal funds granted to the state to aid in the  
13.35 performance of any functions of the commissioner as specified in Laws 1939, chapter 431,  
13.36 and including the promulgation of rules making uniformly available medical care benefits

14.1 to all recipients of public assistance, at such times as the federal government increases its  
14.2 participation in assistance expenditures for medical care to recipients of public assistance,  
14.3 the cost thereof to be borne in the same proportion as are grants of aid to said recipients.

14.4 (g) Establish and maintain any administrative units reasonably necessary for the  
14.5 performance of administrative functions common to all divisions of the department.

14.6 (h) Act as designated guardian of both the estate and the person of all the wards of  
14.7 the state of Minnesota, whether by operation of law or by an order of court, without any  
14.8 further act or proceeding whatever, except as to persons committed as developmentally  
14.9 disabled. For children under the guardianship of the commissioner or a tribe in Minnesota  
14.10 recognized by the Secretary of the Interior whose interests would be best served by  
14.11 adoptive placement, the commissioner may contract with a licensed child-placing agency  
14.12 or a Minnesota tribal social services agency to provide adoption services. A contract  
14.13 with a licensed child-placing agency must be designed to supplement existing county  
14.14 efforts and may not replace existing county programs or tribal social services, unless the  
14.15 replacement is agreed to by the county board and the appropriate exclusive bargaining  
14.16 representative, tribal governing body, or the commissioner has evidence that child  
14.17 placements of the county continue to be substantially below that of other counties. Funds  
14.18 encumbered and obligated under an agreement for a specific child shall remain available  
14.19 until the terms of the agreement are fulfilled or the agreement is terminated.

14.20 (i) Act as coordinating referral and informational center on requests for service for  
14.21 newly arrived immigrants coming to Minnesota.

14.22 (j) The specific enumeration of powers and duties as hereinabove set forth shall in no  
14.23 way be construed to be a limitation upon the general transfer of powers herein contained.

14.24 (k) Establish county, regional, or statewide schedules of maximum fees and charges  
14.25 which may be paid by county agencies for medical, dental, surgical, hospital, nursing and  
14.26 nursing home care and medicine and medical supplies under all programs of medical  
14.27 care provided by the state and for congregate living care under the income maintenance  
14.28 programs.

14.29 (l) Have the authority to conduct and administer experimental projects to test methods  
14.30 and procedures of administering assistance and services to recipients or potential recipients  
14.31 of public welfare. To carry out such experimental projects, it is further provided that the  
14.32 commissioner of human services is authorized to waive the enforcement of existing specific  
14.33 statutory program requirements, rules, and standards in one or more counties. The order  
14.34 establishing the waiver shall provide alternative methods and procedures of administration,  
14.35 shall not be in conflict with the basic purposes, coverage, or benefits provided by law, and  
14.36 in no event shall the duration of a project exceed four years. It is further provided that no

15.1 order establishing an experimental project as authorized by the provisions of this section  
15.2 shall become effective until the following conditions have been met:

15.3 (1) the secretary of health and human services of the United States has agreed, for  
15.4 the same project, to waive state plan requirements relative to statewide uniformity; and

15.5 (2) a comprehensive plan, including estimated project costs, shall be approved by  
15.6 the Legislative Advisory Commission and filed with the commissioner of administration.

15.7 (m) According to federal requirements, establish procedures to be followed by  
15.8 local welfare boards in creating citizen advisory committees, including procedures for  
15.9 selection of committee members.

15.10 (n) Allocate federal fiscal disallowances or sanctions which are based on quality  
15.11 control error rates for the aid to families with dependent children program formerly  
15.12 codified in sections 256.72 to 256.87, medical assistance, or food stamp program in the  
15.13 following manner:

15.14 (1) one-half of the total amount of the disallowance shall be borne by the county  
15.15 boards responsible for administering the programs. For the medical assistance and the  
15.16 AFDC program formerly codified in sections 256.72 to 256.87, disallowances shall be  
15.17 shared by each county board in the same proportion as that county's expenditures for the  
15.18 sanctioned program are to the total of all counties' expenditures for the AFDC program  
15.19 formerly codified in sections 256.72 to 256.87, and medical assistance programs. For the  
15.20 food stamp program, sanctions shall be shared by each county board, with 50 percent of  
15.21 the sanction being distributed to each county in the same proportion as that county's  
15.22 administrative costs for food stamps are to the total of all food stamp administrative costs  
15.23 for all counties, and 50 percent of the sanctions being distributed to each county in the  
15.24 same proportion as that county's value of food stamp benefits issued are to the total of  
15.25 all benefits issued for all counties. Each county shall pay its share of the disallowance  
15.26 to the state of Minnesota. When a county fails to pay the amount due hereunder, the  
15.27 commissioner may deduct the amount from reimbursement otherwise due the county, or  
15.28 the attorney general, upon the request of the commissioner, may institute civil action  
15.29 to recover the amount due; and

15.30 (2) notwithstanding the provisions of clause (1), if the disallowance results from  
15.31 knowing noncompliance by one or more counties with a specific program instruction, and  
15.32 that knowing noncompliance is a matter of official county board record, the commissioner  
15.33 may require payment or recover from the county or counties, in the manner prescribed in  
15.34 clause (1), an amount equal to the portion of the total disallowance which resulted from the  
15.35 noncompliance, and may distribute the balance of the disallowance according to clause (1).

16.1 (o) Develop and implement special projects that maximize reimbursements and  
16.2 result in the recovery of money to the state. For the purpose of recovering state money,  
16.3 the commissioner may enter into contracts with third parties. Any recoveries that result  
16.4 from projects or contracts entered into under this paragraph shall be deposited in the  
16.5 state treasury and credited to a special account until the balance in the account reaches  
16.6 \$1,000,000. When the balance in the account exceeds \$1,000,000, the excess shall be  
16.7 transferred and credited to the general fund. All money in the account is appropriated to  
16.8 the commissioner for the purposes of this paragraph.

16.9 (p) Have the authority to make direct payments to facilities providing shelter  
16.10 to women and their children according to section 256D.05, subdivision 3. Upon  
16.11 the written request of a shelter facility that has been denied payments under section  
16.12 256D.05, subdivision 3, the commissioner shall review all relevant evidence and make  
16.13 a determination within 30 days of the request for review regarding issuance of direct  
16.14 payments to the shelter facility. Failure to act within 30 days shall be considered a  
16.15 determination not to issue direct payments.

16.16 (q) Have the authority to establish and enforce the following county reporting  
16.17 requirements:

16.18 (1) the commissioner shall establish fiscal and statistical reporting requirements  
16.19 necessary to account for the expenditure of funds allocated to counties for human  
16.20 services programs. When establishing financial and statistical reporting requirements, the  
16.21 commissioner shall evaluate all reports, in consultation with the counties, to determine if  
16.22 the reports can be simplified or the number of reports can be reduced;

16.23 (2) the county board shall submit monthly or quarterly reports to the department  
16.24 as required by the commissioner. Monthly reports are due no later than 15 working days  
16.25 after the end of the month. Quarterly reports are due no later than 30 calendar days after  
16.26 the end of the quarter, unless the commissioner determines that the deadline must be  
16.27 shortened to 20 calendar days to avoid jeopardizing compliance with federal deadlines  
16.28 or risking a loss of federal funding. Only reports that are complete, legible, and in the  
16.29 required format shall be accepted by the commissioner;

16.30 (3) if the required reports are not received by the deadlines established in clause (2),  
16.31 the commissioner may delay payments and withhold funds from the county board until  
16.32 the next reporting period. When the report is needed to account for the use of federal  
16.33 funds and the late report results in a reduction in federal funding, the commissioner shall  
16.34 withhold from the county boards with late reports an amount equal to the reduction in  
16.35 federal funding until full federal funding is received;



17.1 (4) a county board that submits reports that are late, illegible, incomplete, or not  
17.2 in the required format for two out of three consecutive reporting periods is considered  
17.3 noncompliant. When a county board is found to be noncompliant, the commissioner  
17.4 shall notify the county board of the reason the county board is considered noncompliant  
17.5 and request that the county board develop a corrective action plan stating how the  
17.6 county board plans to correct the problem. The corrective action plan must be submitted  
17.7 to the commissioner within 45 days after the date the county board received notice  
17.8 of noncompliance;

17.9 (5) the final deadline for fiscal reports or amendments to fiscal reports is one year  
17.10 after the date the report was originally due. If the commissioner does not receive a report  
17.11 by the final deadline, the county board forfeits the funding associated with the report for  
17.12 that reporting period and the county board must repay any funds associated with the  
17.13 report received for that reporting period;

17.14 (6) the commissioner may not delay payments, withhold funds, or require repayment  
17.15 under clause (3) or (5) if the county demonstrates that the commissioner failed to  
17.16 provide appropriate forms, guidelines, and technical assistance to enable the county to  
17.17 comply with the requirements. If the county board disagrees with an action taken by the  
17.18 commissioner under clause (3) or (5), the county board may appeal the action according  
17.19 to sections 14.57 to 14.69; and

17.20 (7) counties subject to withholding of funds under clause (3) or forfeiture or  
17.21 repayment of funds under clause (5) shall not reduce or withhold benefits or services to  
17.22 clients to cover costs incurred due to actions taken by the commissioner under clause  
17.23 (3) or (5).

17.24 (r) Allocate federal fiscal disallowances or sanctions for audit exceptions when  
17.25 federal fiscal disallowances or sanctions are based on a statewide random sample in direct  
17.26 proportion to each county's claim for that period.

17.27 (s) Be responsible for ensuring the detection, prevention, investigation, and  
17.28 resolution of fraudulent activities or behavior by applicants, recipients, and other  
17.29 participants in the human services programs administered by the department.

17.30 (t) Require county agencies to identify overpayments, establish claims, and utilize  
17.31 all available and cost-beneficial methodologies to collect and recover these overpayments  
17.32 in the human services programs administered by the department.

17.33 (u) Have the authority to administer a drug rebate program for drugs purchased  
17.34 pursuant to the prescription drug program established under section 256.955 after the  
17.35 beneficiary's satisfaction of any deductible established in the program. The commissioner  
17.36 shall require a rebate agreement from all manufacturers of covered drugs as defined in

18.1 section 256B.0625, subdivision 13. Rebate agreements for prescription drugs delivered on  
18.2 or after July 1, 2002, must include rebates for individuals covered under the prescription  
18.3 drug program who are under 65 years of age. For each drug, the amount of the rebate shall  
18.4 be equal to the rebate as defined for purposes of the federal rebate program in United  
18.5 States Code, title 42, section 1396r-8. The manufacturers must provide full payment  
18.6 within 30 days of receipt of the state invoice for the rebate within the terms and conditions  
18.7 used for the federal rebate program established pursuant to section 1927 of title XIX of  
18.8 the Social Security Act. The manufacturers must provide the commissioner with any  
18.9 information necessary to verify the rebate determined per drug. The rebate program shall  
18.10 utilize the terms and conditions used for the federal rebate program established pursuant to  
18.11 section 1927 of title XIX of the Social Security Act.

18.12 (v) Have the authority to administer the federal drug rebate program for drugs  
18.13 purchased under the medical assistance program as allowed by section 1927 of title XIX  
18.14 of the Social Security Act and according to the terms and conditions of section 1927.  
18.15 Rebates shall be collected for all drugs that have been dispensed or administered in an  
18.16 outpatient setting and that are from manufacturers who have signed a rebate agreement  
18.17 with the United States Department of Health and Human Services.

18.18 (w) Have the authority to administer a supplemental drug rebate program for drugs  
18.19 purchased under the medical assistance program. The commissioner may enter into  
18.20 supplemental rebate contracts with pharmaceutical manufacturers and may require prior  
18.21 authorization for drugs that are from manufacturers that have not signed a supplemental  
18.22 rebate contract. Prior authorization of drugs shall be subject to the provisions of section  
18.23 256B.0625, subdivision 13.

18.24 (x) Operate the department's communication systems account established in Laws  
18.25 1993, First Special Session chapter 1, article 1, section 2, subdivision 2, to manage shared  
18.26 communication costs necessary for the operation of the programs the commissioner  
18.27 supervises. A communications account may also be established for each regional  
18.28 treatment center which operates communications systems. Each account must be used  
18.29 to manage shared communication costs necessary for the operations of the programs the  
18.30 commissioner supervises. The commissioner may distribute the costs of operating and  
18.31 maintaining communication systems to participants in a manner that reflects actual usage.  
18.32 Costs may include acquisition, licensing, insurance, maintenance, repair, staff time and  
18.33 other costs as determined by the commissioner. Nonprofit organizations and state, county,  
18.34 and local government agencies involved in the operation of programs the commissioner  
18.35 supervises may participate in the use of the department's communications technology and  
18.36 share in the cost of operation. The commissioner may accept on behalf of the state any

19.1 gift, bequest, devise or personal property of any kind, or money tendered to the state for  
19.2 any lawful purpose pertaining to the communication activities of the department. Any  
19.3 money received for this purpose must be deposited in the department's communication  
19.4 systems accounts. Money collected by the commissioner for the use of communication  
19.5 systems must be deposited in the state communication systems account and is appropriated  
19.6 to the commissioner for purposes of this section.

19.7 (y) Receive any federal matching money that is made available through the medical  
19.8 assistance program for the consumer satisfaction survey. Any federal money received for  
19.9 the survey is appropriated to the commissioner for this purpose. The commissioner may  
19.10 expend the federal money received for the consumer satisfaction survey in either year of  
19.11 the biennium.

19.12 (z) Designate community information and referral call centers and incorporate  
19.13 cost reimbursement claims from the designated community information and referral  
19.14 call centers into the federal cost reimbursement claiming processes of the department  
19.15 according to federal law, rule, and regulations. Existing information and referral centers  
19.16 provided by Greater Twin Cities United Way or existing call centers for which Greater  
19.17 Twin Cities United Way has legal authority to represent, shall be included in these  
19.18 designations upon review by the commissioner and assurance that these services are  
19.19 accredited and in compliance with national standards. Any reimbursement is appropriated  
19.20 to the commissioner and all designated information and referral centers shall receive  
19.21 payments according to normal department schedules established by the commissioner  
19.22 upon final approval of allocation methodologies from the United States Department of  
19.23 Health and Human Services Division of Cost Allocation or other appropriate authorities.

19.24 (aa) Develop recommended standards for foster care homes that address the  
19.25 components of specialized therapeutic services to be provided by foster care homes with  
19.26 those services.

19.27 (bb) Authorize the method of payment to or from the department as part of the  
19.28 human services programs administered by the department. This authorization includes the  
19.29 receipt or disbursement of funds held by the department in a fiduciary capacity as part of  
19.30 the human services programs administered by the department.

19.31 (cc) Have the authority to administer a drug rebate program for drugs purchased for  
19.32 persons eligible for general assistance medical care under section 256D.03, subdivision 3.  
19.33 For manufacturers that agree to participate in the general assistance medical care rebate  
19.34 program, the commissioner shall enter into a rebate agreement for covered drugs as  
19.35 defined in section 256B.0625, subdivisions 13 and 13d. For each drug, the amount of the  
19.36 rebate shall be equal to the rebate as defined for purposes of the federal rebate program in

20.1 United States Code, title 42, section 1396r-8. The manufacturers must provide payment  
 20.2 within the terms and conditions used for the federal rebate program established under  
 20.3 section 1927 of title XIX of the Social Security Act. The rebate program shall utilize  
 20.4 the terms and conditions used for the federal rebate program established under section  
 20.5 1927 of title XIX of the Social Security Act.

20.6 Effective January 1, 2006, drug coverage under general assistance medical care shall  
 20.7 be limited to those prescription drugs that:

20.8 (1) are covered under the medical assistance program as described in section  
 20.9 256B.0625, subdivisions 13 and 13d; and

20.10 (2) are provided by manufacturers that have fully executed general assistance  
 20.11 medical care rebate agreements with the commissioner and comply with such agreements.  
 20.12 Prescription drug coverage under general assistance medical care shall conform to  
 20.13 coverage under the medical assistance program according to section 256B.0625,  
 20.14 subdivisions 13 to 13g.

20.15 The rebate revenues collected under the drug rebate program are deposited in the  
 20.16 general fund.

20.17 Sec. 20. Minnesota Statutes 2012, section 256C.24, subdivision 3, is amended to read:

20.18 Subd. 3. **Advisory committee.** The director of the Deaf and Hard-of-Hearing  
 20.19 Services Division shall appoint an advisory committee of up to nine persons  
 20.20 for each regional service area. Members shall include persons who are deaf,  
 20.21 deafblind, and hard-of-hearing, persons who ~~are communication-impaired~~ have  
 20.22 communication disabilities, parents of children who are deaf and hard-of-hearing,  
 20.23 parents of ~~communication-impaired~~ children who have communication disabilities, and  
 20.24 representatives of county and regional human services, including representatives of  
 20.25 private service providers. At least 50 percent of the members must be deaf or deafblind or  
 20.26 hard-of-hearing or ~~communication-impaired~~ have a communication disability. Committee  
 20.27 members shall serve for a three-year term and shall serve no more than two consecutive  
 20.28 terms. Each advisory committee shall elect a chair. The director of the Deaf and  
 20.29 Hard-of-Hearing Services Division shall assign staff to serve as nonvoting members of  
 20.30 the committee. Members shall not receive a per diem. Otherwise, the compensation,  
 20.31 removal of members, and filling of vacancies on the committee shall be as provided  
 20.32 in section 15.0575.

20.33 Sec. 21. Minnesota Statutes 2012, section 256C.29, is amended to read:

20.34 **256C.29 COMMUNICATIONS DEVICES REQUIRED IN BUS TERMINALS.**

21.1 The operator of a bus terminal in the city of Minneapolis or St. Paul that serves  
21.2 intercity buses, defined in section 168.002, subdivision 4, shall provide, in public areas in  
21.3 the terminal, public pay telephones with telecommunications devices, commonly known  
21.4 as "TDD's," that permit a ~~communication-impaired~~ person who has a communication  
21.5 disability to communicate with others by telephone. The operator shall place signs at  
21.6 strategic locations in and about the terminal indicating where the telephones are available.

21.7 Sec. 22. Minnesota Statutes 2012, section 299C.06, is amended to read:

21.8 **299C.06 DIVISION POWERS AND DUTIES; COOPERATION.**

21.9 It shall be the duty of all sheriffs, chiefs of police, prison wardens, superintendents of  
21.10 ~~insane~~ hospitals for persons with mental illnesses, reformatories, and correctional schools,  
21.11 probation and parole officers, school attendance officers, coroners, county attorneys, court  
21.12 clerks, the commissioner of public safety, the commissioner of transportation, and the state  
21.13 fire marshal to furnish to the division statistics and information regarding the number of  
21.14 crimes reported and discovered; arrests made; complaints, informations, and indictments  
21.15 filed, and the disposition made of same; pleas, convictions, acquittals, probations granted  
21.16 or denied; conditional release information; receipts, transfers, and discharges to and from  
21.17 prisons, reformatories, correctional schools, and other institutions; paroles granted and  
21.18 revoked; commutation of sentences and pardons granted and rescinded; and all other data  
21.19 useful in determining the cause and amount of crime in this state and to form a basis for  
21.20 the study of crime, police methods, court procedure, and penal problems. Such statistics  
21.21 and information shall be furnished upon the request of the division and upon such forms  
21.22 as may be prescribed and furnished by it. Unless otherwise required or permitted by the  
21.23 superintendent of the Bureau of Criminal Apprehension, an agency or person furnishing  
21.24 information under this section must utilize a nationally recognized system or standard  
21.25 approved by the Federal Bureau of Investigation for reporting statistics and information.  
21.26 The division shall have the power to inspect and prescribe the form and substance of the  
21.27 records kept by those officials from which the information is so furnished.

21.28 Sec. 23. Minnesota Statutes 2012, section 326B.106, subdivision 9, is amended to read:

21.29 Subd. 9. **Accessibility.** (a) **Public buildings.** The code must provide for making  
21.30 public buildings constructed or remodeled after July 1, 1963, accessible to and usable by  
21.31 persons with disabilities, although this does not require the remodeling of public buildings  
21.32 solely to provide accessibility and usability to persons with disabilities when remodeling  
21.33 would not otherwise be undertaken.

22.1           (b) **Leased space.** No agency of the state may lease space for agency operations  
22.2 in a non-state-owned building unless the building satisfies the requirements of the State  
22.3 Building Code for accessibility by persons with disabilities, or is eligible to display the  
22.4 state symbol of accessibility. This limitation applies to leases of 30 days or more for  
22.5 space of at least 1,000 square feet.

22.6           (c) **Meetings or conferences.** Meetings or conferences for the public or for state  
22.7 employees which are sponsored in whole or in part by a state agency must be held in  
22.8 buildings that meet the State Building Code requirements relating to accessibility for  
22.9 persons with disabilities. This subdivision does not apply to any classes, seminars,  
22.10 or training programs offered by the Minnesota State Colleges and Universities or the  
22.11 University of Minnesota. Meetings or conferences intended for specific individuals none  
22.12 of whom need the accessibility features for persons with disabilities specified in the State  
22.13 Building Code need not comply with this subdivision unless a person with a disability  
22.14 gives reasonable advance notice of an intent to attend the meeting or conference. When  
22.15 sign language interpreters will be provided, meetings or conference sites must be chosen  
22.16 which allow ~~hearing-impaired~~ participants who are deaf or hard-of-hearing to see ~~their~~  
22.17 signing the sign language interpreters clearly.

22.18           (d) **Exemptions.** The commissioner may grant an exemption from the requirements  
22.19 of paragraphs (b) and (c) in advance if an agency has demonstrated that reasonable efforts  
22.20 were made to secure facilities which complied with those requirements and if the selected  
22.21 facilities are the best available for access for persons with disabilities. Exemptions shall  
22.22 be granted using criteria developed by the commissioner in consultation with the Council  
22.23 on Disability.

22.24           (e) **Symbol indicating access.** The wheelchair symbol adopted by Rehabilitation  
22.25 International's Eleventh World Congress is the state symbol indicating buildings, facilities,  
22.26 and grounds which are accessible to and usable by persons with disabilities. In the  
22.27 interests of uniformity, this symbol is the sole symbol for display in or on all public or  
22.28 private buildings, facilities, and grounds which qualify for its use. The secretary of  
22.29 state shall obtain the symbol and keep it on file. No building, facility, or grounds may  
22.30 display the symbol unless it is in compliance with the rules adopted by the commissioner  
22.31 under subdivision 1. Before any rules are proposed for adoption under this paragraph,  
22.32 the commissioner shall consult with the Council on Disability. Rules adopted under this  
22.33 paragraph must be enforced in the same way as other accessibility rules of the State  
22.34 Building Code.

22.35           Sec. 24. Minnesota Statutes 2012, section 326B.106, subdivision 11, is amended to read:

23.1 Subd. 11. **Access for ~~the hearing-impaired~~ people with a hearing loss.** All rooms  
 23.2 in the State Office Building and in the Capitol that are used by the house of representatives  
 23.3 or the senate for legislative hearings, and the public galleries overlooking the house of  
 23.4 representatives and senate chambers, must be fitted with assistive listening devices for ~~the~~  
 23.5 ~~hearing-impaired~~ people with hearing loss. Each hearing room and the public galleries  
 23.6 must have a sufficient number of receivers available so that ~~hearing-impaired~~ members of  
 23.7 the public who have hearing loss may participate in the committee hearings and public  
 23.8 sessions of the house of representatives and senate.

23.9 Sec. 25. Minnesota Statutes 2012, section 473.608, subdivision 22, is amended to read:

23.10 Subd. 22. **TDD phones.** The commission shall provide, in public areas at  
 23.11 the international airport, public pay telephones with telecommunications devices,  
 23.12 commonly known as "TDD's," that permit a ~~communication-impaired~~ person who has  
 23.13 a communication disability to communicate with others by telephone. The commission  
 23.14 shall provide one such telephone on each concourse of the main terminal, one in the main  
 23.15 ticketing area of the main terminal, and one in the Humphrey Terminal. The commission  
 23.16 shall place signs at strategic locations in and about the terminals indicating where the  
 23.17 telephones are available.

23.18 Sec. 26. Minnesota Statutes 2012, section 589.35, subdivision 1, is amended to read:

23.19 Subdivision 1. **Order.** Except as provided in this chapter and chapter 590, a court  
 23.20 requiring the appearance of a person confined in a state correctional facility, ~~mental~~  
 23.21 hospital for persons with mental illnesses, or other institution after criminal conviction,  
 23.22 civil commitment, or under court order, may order the confining institution to release the  
 23.23 person into the temporary custody of the court. The order must specify:

- 23.24 (1) the reason for the person's appearance;
- 23.25 (2) to whom the confined person may be released; and
- 23.26 (3) the date and time of the release.

23.27 Sec. 27. Minnesota Statutes 2012, section 595.02, subdivision 1, is amended to read:

23.28 Subdivision 1. **Competency of witnesses.** Every person of sufficient understanding,  
 23.29 including a party, may testify in any action or proceeding, civil or criminal, in court or  
 23.30 before any person who has authority to receive evidence, except as provided in this  
 23.31 subdivision:

- 23.32 (a) A husband cannot be examined for or against his wife without her consent, nor a  
 23.33 wife for or against her husband without his consent, nor can either, during the marriage or

24.1 afterwards, without the consent of the other, be examined as to any communication made  
24.2 by one to the other during the marriage. This exception does not apply to a civil action or  
24.3 proceeding by one against the other, nor to a criminal action or proceeding for a crime  
24.4 committed by one against the other or against a child of either or against a child under the  
24.5 care of either spouse, nor to a criminal action or proceeding in which one is charged with  
24.6 homicide or an attempt to commit homicide and the date of the marriage of the defendant  
24.7 is subsequent to the date of the offense, nor to an action or proceeding for nonsupport,  
24.8 neglect, dependency, or termination of parental rights.

24.9 (b) An attorney cannot, without the consent of the attorney's client, be examined as  
24.10 to any communication made by the client to the attorney or the attorney's advice given  
24.11 thereon in the course of professional duty; nor can any employee of the attorney be  
24.12 examined as to the communication or advice, without the client's consent.

24.13 (c) A member of the clergy or other minister of any religion shall not, without the  
24.14 consent of the party making the confession, be allowed to disclose a confession made to  
24.15 the member of the clergy or other minister in a professional character, in the course of  
24.16 discipline enjoined by the rules or practice of the religious body to which the member of  
24.17 the clergy or other minister belongs; nor shall a member of the clergy or other minister of  
24.18 any religion be examined as to any communication made to the member of the clergy or  
24.19 other minister by any person seeking religious or spiritual advice, aid, or comfort or advice  
24.20 given thereon in the course of the member of the clergy's or other minister's professional  
24.21 character, without the consent of the person.

24.22 (d) A licensed physician or surgeon, dentist, or chiropractor shall not, without the  
24.23 consent of the patient, be allowed to disclose any information or any opinion based thereon  
24.24 which the professional acquired in attending the patient in a professional capacity, and  
24.25 which was necessary to enable the professional to act in that capacity; after the decease  
24.26 of the patient, in an action to recover insurance benefits, where the insurance has been  
24.27 in existence two years or more, the beneficiaries shall be deemed to be the personal  
24.28 representatives of the deceased person for the purpose of waiving this privilege, and no  
24.29 oral or written waiver of the privilege shall have any binding force or effect except when  
24.30 made upon the trial or examination where the evidence is offered or received.

24.31 (e) A public officer shall not be allowed to disclose communications made to the  
24.32 officer in official confidence when the public interest would suffer by the disclosure.

24.33 (f) Persons of unsound mind and persons intoxicated at the time of their production  
24.34 for examination are not competent witnesses if they lack capacity to remember or to relate  
24.35 truthfully facts respecting which they are examined.



25.1 (g) A registered nurse, psychologist, consulting psychologist, or licensed social  
25.2 worker engaged in a psychological or social assessment or treatment of an individual  
25.3 at the individual's request shall not, without the consent of the professional's client, be  
25.4 allowed to disclose any information or opinion based thereon which the professional has  
25.5 acquired in attending the client in a professional capacity, and which was necessary to  
25.6 enable the professional to act in that capacity. Nothing in this clause exempts licensed  
25.7 social workers from compliance with the provisions of sections 626.556 and 626.557.

25.8 (h) An interpreter for a person disabled in communication shall not, without the  
25.9 consent of the person, be allowed to disclose any communication if the communication  
25.10 would, if the interpreter were not present, be privileged. For purposes of this section, a  
25.11 "person disabled in communication" means a person who, because of a hearing, speech  
25.12 or other communication disorder, or because of the inability to speak or comprehend the  
25.13 English language, is unable to understand the proceedings in which the person is required  
25.14 to participate. The presence of an interpreter as an aid to communication does not destroy  
25.15 an otherwise existing privilege.

25.16 (i) Licensed chemical dependency counselors shall not disclose information or  
25.17 an opinion based on the information which they acquire from persons consulting them  
25.18 in their professional capacities, and which was necessary to enable them to act in that  
25.19 capacity, except that they may do so:

25.20 (1) when informed consent has been obtained in writing, except in those  
25.21 circumstances in which not to do so would violate the law or would result in clear and  
25.22 imminent danger to the client or others;

25.23 (2) when the communications reveal the contemplation or ongoing commission  
25.24 of a crime; or

25.25 (3) when the consulting person waives the privilege by bringing suit or filing charges  
25.26 against the licensed professional whom that person consulted.

25.27 (j) A parent or the parent's minor child may not be examined as to any communication  
25.28 made in confidence by the minor to the minor's parent. A communication is confidential if  
25.29 made out of the presence of persons not members of the child's immediate family living  
25.30 in the same household. This exception may be waived by express consent to disclosure  
25.31 by a parent entitled to claim the privilege or by the child who made the communication  
25.32 or by failure of the child or parent to object when the contents of a communication are  
25.33 demanded. This exception does not apply to a civil action or proceeding by one spouse  
25.34 against the other or by a parent or child against the other, nor to a proceeding to commit  
25.35 either the child or parent to whom the communication was made or to place the person or  
25.36 property or either under the control of another because of an alleged mental or physical

26.1 condition, nor to a criminal action or proceeding in which the parent is charged with a  
26.2 crime committed against the person or property of the communicating child, the parent's  
26.3 spouse, or a child of either the parent or the parent's spouse, or in which a child is charged  
26.4 with a crime or act of delinquency committed against the person or property of a parent  
26.5 or a child of a parent, nor to an action or proceeding for termination of parental rights,  
26.6 nor any other action or proceeding on a petition alleging child abuse, child neglect,  
26.7 abandonment or nonsupport by a parent.

26.8 (k) Sexual assault counselors may not be allowed to disclose any opinion or  
26.9 information received from or about the victim without the consent of the victim. However,  
26.10 a counselor may be compelled to identify or disclose information in investigations or  
26.11 proceedings related to neglect or termination of parental rights if the court determines good  
26.12 cause exists. In determining whether to compel disclosure, the court shall weigh the public  
26.13 interest and need for disclosure against the effect on the victim, the treatment relationship,  
26.14 and the treatment services if disclosure occurs. Nothing in this clause exempts sexual  
26.15 assault counselors from compliance with the provisions of sections 626.556 and 626.557.

26.16 "Sexual assault counselor" for the purpose of this section means a person who has  
26.17 undergone at least 40 hours of crisis counseling training and works under the direction  
26.18 of a supervisor in a crisis center, whose primary purpose is to render advice, counseling,  
26.19 or assistance to victims of sexual assault.

26.20 (l) A domestic abuse advocate may not be compelled to disclose any opinion or  
26.21 information received from or about the victim without the consent of the victim unless  
26.22 ordered by the court. In determining whether to compel disclosure, the court shall weigh  
26.23 the public interest and need for disclosure against the effect on the victim, the relationship  
26.24 between the victim and domestic abuse advocate, and the services if disclosure occurs.  
26.25 Nothing in this paragraph exempts domestic abuse advocates from compliance with the  
26.26 provisions of sections 626.556 and 626.557.

26.27 For the purposes of this section, "domestic abuse advocate" means an employee or  
26.28 supervised volunteer from a community-based battered women's shelter and domestic  
26.29 abuse program eligible to receive grants under section 611A.32; that provides information,  
26.30 advocacy, crisis intervention, emergency shelter, or support to victims of domestic abuse  
26.31 and who is not employed by or under the direct supervision of a law enforcement agency,  
26.32 a prosecutor's office, or by a city, county, or state agency.

26.33 (m) A person cannot be examined as to any communication or document, including  
26.34 work notes, made or used in the course of or because of mediation pursuant to an  
26.35 agreement to mediate. This does not apply to the parties in the dispute in an application  
26.36 to a court by a party to have a mediated settlement agreement set aside or reformed.

27.1 A communication or document otherwise not privileged does not become privileged  
27.2 because of this paragraph. This paragraph is not intended to limit the privilege accorded  
27.3 to communication during mediation by the common law.

27.4 (n) A child under ten years of age is a competent witness unless the court finds that  
27.5 the child lacks the capacity to remember or to relate truthfully facts respecting which the  
27.6 child is examined. A child describing any act or event may use language appropriate for  
27.7 a child of that age.

27.8 (o) A communication assistant for a telecommunications relay system for  
27.9 ~~communication-impaired~~ persons who have communication disabilities shall not,  
27.10 without the consent of the person making the communication, be allowed to disclose  
27.11 communications made to the communication assistant for the purpose of relaying.

27.12 Sec. 28. Minnesota Statutes 2012, section 609.06, subdivision 1, is amended to read:

27.13 Subdivision 1. **When authorized.** Except as otherwise provided in subdivision 2,  
27.14 reasonable force may be used upon or toward the person of another without the other's  
27.15 consent when the following circumstances exist or the actor reasonably believes them to  
27.16 exist:

27.17 (1) when used by a public officer or one assisting a public officer under the public  
27.18 officer's direction:

27.19 (a) in effecting a lawful arrest; or

27.20 (b) in the execution of legal process; or

27.21 (c) in enforcing an order of the court; or

27.22 (d) in executing any other duty imposed upon the public officer by law; or

27.23 (2) when used by a person not a public officer in arresting another in the cases and in  
27.24 the manner provided by law and delivering the other to an officer competent to receive  
27.25 the other into custody; or

27.26 (3) when used by any person in resisting or aiding another to resist an offense  
27.27 against the person; or

27.28 (4) when used by any person in lawful possession of real or personal property, or  
27.29 by another assisting the person in lawful possession, in resisting a trespass upon or other  
27.30 unlawful interference with such property; or

27.31 (5) when used by any person to prevent the escape, or to retake following the escape,  
27.32 of a person lawfully held on a charge or conviction of a crime; or

27.33 (6) when used by a parent, guardian, teacher, or other lawful custodian of a child or  
27.34 pupil, in the exercise of lawful authority, to restrain or correct such child or pupil; or

28.1 (7) when used by a school employee or school bus driver, in the exercise of lawful  
28.2 authority, to restrain a child or pupil, or to prevent bodily harm or death to another; or

28.3 (8) when used by a common carrier in expelling a passenger who refuses to obey a  
28.4 lawful requirement for the conduct of passengers and reasonable care is exercised with  
28.5 regard to the passenger's personal safety; or

28.6 (9) when used to restrain a person who ~~is mentally ill~~ has a mental illness or ~~mentally~~  
28.7 ~~defective~~ a developmental disability from self-injury or injury to another or when used by  
28.8 one with authority to do so to compel compliance with reasonable requirements for the  
28.9 person's control, conduct, or treatment; or

28.10 (10) when used by a public or private institution providing custody or treatment  
28.11 against one lawfully committed to it to compel compliance with reasonable requirements  
28.12 for the control, conduct, or treatment of the committed person.

28.13 Sec. 29. Minnesota Statutes 2012, section 609.749, subdivision 2, is amended to read:

28.14 Subd. 2. **Stalking crimes.** A person who stalks another by committing any of the  
28.15 following acts is guilty of a gross misdemeanor:

28.16 (1) directly or indirectly, or through third parties, manifests a purpose or intent to  
28.17 injure the person, property, or rights of another by the commission of an unlawful act;

28.18 (2) follows, monitors, or pursues another, whether in person or through any available  
28.19 technological or other means;

28.20 (3) returns to the property of another if the actor is without claim of right to the  
28.21 property or consent of one with authority to consent;

28.22 (4) repeatedly makes telephone calls, sends text messages, or induces a victim to  
28.23 make telephone calls to the actor, whether or not conversation ensues;

28.24 (5) makes or causes the telephone of another repeatedly or continuously to ring;

28.25 (6) repeatedly mails or delivers or causes the delivery by any means, including  
28.26 electronically, of letters, telegrams, messages, packages, through assistive devices for  
28.27 ~~the visually or hearing impaired~~ people with vision impairments or hearing loss, or any  
28.28 communication made through any available technologies or other objects; or

28.29 (7) knowingly makes false allegations against a peace officer concerning the  
28.30 officer's performance of official duties with intent to influence or tamper with the officer's  
28.31 performance of official duties.

28.32 Sec. 30. Minnesota Statutes 2012, section 626.8455, subdivision 1, is amended to read:

28.33 Subdivision 1. **Training course.** The board, in consultation with the Minnesota  
28.34 Institute of Community Policing, shall prepare a training course to instruct peace officers

29.1 in the techniques of community policing. The course must include instruction on at least  
 29.2 the following matters:

29.3 (1) techniques for expanding the training of peace officers to include problem-solving;

29.4 (2) techniques for organizing community members so that they are involved and  
 29.5 trained in community policing activities;

29.6 (3) techniques for relating to diverse communities; and

29.7 (4) techniques for relating to ~~physically or mentally impaired~~ individuals with  
 29.8 physical or mental limitations.

29.9 The course also must include training on child development issues to enable officers  
 29.10 to respond appropriately to perceived child protection situations. The board shall update  
 29.11 the training course periodically as it deems appropriate.

29.12 **Sec. 31. FUNDING.**

29.13 Everything in this article shall be administered within the limits of available  
 29.14 appropriations.

29.15 **Sec. 32. REVISOR'S INSTRUCTION.**

29.16 To implement the amendments in sections 1 to 30 in each part of Minnesota  
 29.17 Rules referred to in column A, the revisor of statutes shall delete the word or phrase in  
 29.18 column B and insert the word or phrase in column C. The revisor shall also make related  
 29.19 grammatical changes and changes in headnotes.

29.20	<u>Column A</u>	<u>Column B</u>	<u>Column C</u>
29.21	<u>2400.2615</u>	<u>ramps for handicapped access</u>	<u>accessible ramps for a person</u>
29.22			<u>with a mobility impairment</u>
29.23	<u>2911.0200, subpart 2</u>	<u>determined to be mentally</u>	<u>with a mental illness or a</u>
29.24		<u>deficient</u>	<u>developmental disability</u>
29.25	<u>5223.0360, subpart 7</u>	<u>wheelchair bound</u>	<u>must use a wheelchair</u>
29.26	<u>6700.1600</u>	<u>mentally incompetent</u>	<u>lacking the capacity to serve</u>
29.27			<u>as a peace officer</u>
29.28	<u>7410.4740</u>	<u>a hearing impaired applicant</u>	<u>an applicant who is deaf,</u>
29.29			<u>deafblind, or hard-of-hearing</u>
29.30	<u>7411.0620, subpart 6</u>	<u>hearing impaired students</u>	<u>students who are deaf,</u>
29.31			<u>deafblind, or hard-of-hearing</u>
29.32	<u>7811.0550, subpart 3</u>	<u>speech-impaired,</u>	<u>customers who are deaf,</u>
29.33		<u>hearing-impaired</u>	<u>deafblind, hard-of-hearing, or</u>
29.34			<u>who have a speech disability</u>
29.35	<u>7811.1000</u>	<u>hearing-impaired programs</u>	<u>programs for people with</u>
29.36			<u>hearing loss</u>
29.37	<u>7812.0550, subpart 3</u>	<u>speech-impaired,</u>	<u>customers who are deaf,</u>
29.38		<u>hearing-impaired</u>	<u>deafblind, hard-of-hearing, or</u>
29.39			<u>who have a speech disability</u>

30.1	<u>7812.1000</u>	<u>hearing-impaired programs</u>	<u>programs for people who have</u>
30.2			<u>hearing loss</u>
30.3	<u>8775.0100, subpart 3</u>	<u>communication-impaired</u>	<u>person who has a</u>
30.4		<u>person</u>	<u>communication disability</u>
30.5	<u>8775.0100, subpart 5</u>	<u>communication-impaired</u>	<u>Minnesota</u>
30.6		<u>persons</u>	
30.7	<u>8775.0100, subpart 6</u>	<u>communication-impaired</u>	<u>person with a communication</u>
30.8		<u>person</u>	<u>disability</u>
30.9	<u>8775.0100, subpart 7</u>	<u>communication-impaired</u>	<u>person with a communication</u>
30.10		<u>person</u>	<u>disability</u>
30.11	<u>8775.0100, subpart 7</u>	<u>deaf and blind,</u>	<u>deafblind or hard-of-hearing,</u>
30.12		<u>hard-of-hearing, mobility</u>	<u>to have a mobility impairment,</u>
30.13		<u>impaired, or speech impaired</u>	<u>or to have a speech disability</u>
30.14	<u>8775.0100, subpart 8</u>	<u>impairment</u>	<u>loss</u>
30.15	<u>8775.0100, subpart 8</u>	<u>manual communication</u>	<u>sign language</u>
30.16	<u>8775.0100, subpart 9</u>	<u>Deaf and blind</u>	<u>Deafblind</u>
30.17	<u>8775.0100, subpart 12</u>	<u>impairment resulting in a</u>	<u>loss resulting in a functional</u>
30.18		<u>functional loss</u>	<u>limitation</u>
30.19	<u>8775.0100, subpart 12</u>	<u>the impairment</u>	<u>hearing loss</u>
30.20	<u>8775.0100, subpart 14</u>	<u>communication-impaired</u>	<u>person with a communication</u>
30.21		<u>person or for a household with</u>	<u>disability or for a household</u>
30.22		<u>a communication-impaired</u>	<u>with a person who has a</u>
30.23		<u>person living alone</u>	<u>communication disability</u>
30.24			<u>living alone</u>
30.25	<u>8775.0100, subpart 15</u>	<u>communication-impaired</u>	<u>person with a communication</u>
30.26		<u>person</u>	<u>disability</u>
30.27	<u>8775.0100, subpart 16a</u>	<u>mobility impaired</u>	<u>mobility impairment</u>
30.28	<u>8775.0100, subpart 16a</u>	<u>mobility-impaired person</u>	<u>person with a mobility</u>
30.29			<u>impairment</u>
30.30	<u>8775.0100, subpart 19</u>	<u>impairment</u>	<u>disability</u>
30.31	<u>8775.0100, subpart 20</u>	<u>impaired</u>	<u>disability</u>
30.32	<u>8775.0100, subpart 20</u>	<u>impairment</u>	<u>disability</u>
30.33	<u>8775.0200</u>	<u>communication-impaired</u>	<u>persons with a communication</u>
30.34		<u>persons for improving</u>	<u>disability for improving access</u>
30.35		<u>access to telephone</u>	<u>to telephone communications</u>
30.36		<u>communications services</u>	<u>services for persons who have</u>
30.37		<u>for communication-impaired</u>	<u>a communication disability</u>
30.38		<u>persons</u>	
30.39	<u>8775.0300, subpart 2</u>	<u>deaf and hard-of-hearing</u>	<u>people who are deaf and</u>
30.40		<u>people</u>	<u>hard-of-hearing</u>
30.41	<u>8775.0300, subpart 2</u>	<u>communication impairment</u>	<u>hearing loss or communication</u>
30.42			<u>disability</u>
30.43	<u>8775.0300, subpart 3</u>	<u>communication-impaired</u>	<u>person with a communication</u>
30.44		<u>person</u>	<u>disability</u>
30.45	<u>8775.0300, subpart 4</u>	<u>be a communication-impaired</u>	<u>have a communication</u>
30.46		<u>person</u>	<u>disability</u>
30.47	<u>8775.0300, subpart 4</u>	<u>deaf and blind</u>	<u>deafblind</u>

31.1	<u>8775.0400, subpart 2a</u>	<u>eligible speech- and</u>	<u>persons with speech</u>
31.2		<u>mobility-impaired persons</u>	<u>disabilities or mobility</u>
31.3			<u>impairments</u>
31.4	<u>8775.0400, subpart 3</u>	<u>speech-impaired persons</u>	<u>persons with speech</u>
31.5			<u>disabilities</u>
31.6	<u>8775.0400, subpart 3a</u>	<u>mobility-impaired persons</u>	<u>persons with mobility</u>
31.7			<u>impairments</u>
31.8	<u>8775.0400, subpart 5</u>	<u>communication-impaired</u>	<u>persons with a communication</u>
31.9		<u>persons</u>	<u>disability</u>
31.10	<u>8775.0500, subpart 1</u>	<u>communication-impaired</u>	<u>person</u>
31.11		<u>person</u>	
31.12	<u>8775.0500, subpart 2</u>	<u>communication-impaired</u>	<u>person</u>
31.13		<u>person</u>	
31.14	<u>8775.0500, subpart 2</u>	<u>deaf and blind</u>	<u>deafblind</u>
31.15	<u>8775.0500, subpart 3</u>	<u>communication-impaired</u>	<u>person with a communication</u>
31.16		<u>person with various</u>	<u>disability</u>
31.17		<u>communication impairments</u>	
31.18	<u>8775.0500, subpart 4</u>	<u>communication-impaired</u>	<u>person</u>
31.19		<u>person</u>	
31.20	<u>8775.0500, subpart 5</u>	<u>communication-impaired</u>	<u>person who has mobility</u>
31.21		<u>person who is mobility</u>	<u>impairment that makes</u>
31.22		<u>impaired</u>	<u>it difficult to use</u>
31.23			<u>telecommunications</u>
31.24			<u>equipment</u>
31.25	<u>8775.0500, subpart 6</u>	<u>communication-impaired</u>	<u>person who has a</u>
31.26		<u>person who is speech and</u>	<u>speech disability or</u>
31.27		<u>mobility impaired</u>	<u>mobility impairment</u>
31.28			<u>that makes it difficult to</u>
31.29			<u>use telecommunications</u>
31.30			<u>equipment</u>
31.31	<u>8840.5100, subpart 12</u>	<u>visual, speech, and hearing</u>	<u>vision impairments, speech</u>
31.32		<u>impairments</u>	<u>disabilities, hearing loss</u>
31.33	<u>8840.5910, subpart 5, item</u>	<u>vision and hearing</u>	<u>vision impairments and</u>
31.34	<u>A</u>	<u>impairments</u>	<u>hearing loss</u>
31.35	<u>9505.0140, subpart 1</u>	<u>hearing-impaired person</u>	<u>person who is deaf, deafblind,</u>
31.36			<u>or hard-of-hearing</u>
31.37	<u>9530.6615, subpart 1</u>	<u>the hearing impaired</u>	<u>people who are deaf,</u>
31.38			<u>deafblind, and hard-of-hearing</u>
31.39	<u>9555.5605, subpart 2</u>	<u>confined to a wheelchair</u>	<u>using a wheelchair</u>