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State of Minnesota

HOUSE OF REPRESENTATIVES

NINETY-THIRD SESSION

H. F. No. 5199

04/02/2024 Authored by Clardy
The bill was read for the first time and referred to the Committee on Health Finance and Policy

1.1 A bill for an act
1.2 relating to health; requiring health plans to develop a maternal mental health
1.3 program; defining terms related to maternal mental health; requiring certain health
1.4 care professionals to ensure that mothers are offered screenings for maternal mental
1.5 health conditions; amending Minnesota Statutes 2022, sections 62A.0411; 62Q.521;
1.6 147.091, subdivision 1; 147A.13, subdivision 1; 256B.69, by adding a subdivision;
1.7 256L.12, by adding a subdivision; Minnesota Statutes 2023 Supplement, section
1.8 148.261, subdivision 1; proposing coding for new law in Minnesota Statutes,
1.9 chapter 145.

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

1.11 Section 1. Minnesota Statutes 2022, section 62A.0411, is amended to read:

1.12 62A.0411 MATERNITY CARE.

1.13 Subdivision 1. Definitions. (a) For the purposes of this section, the following terms have
1.14 the meanings given.

1.15 (b) "Contracting obstetric provider" means a licensed health care professional who is
1.16 contracted to provide services relating to pregnancy, postpartum care, or postpartum
1.17 depression under the enrollee's health plan.

1.18 (c) "Enrollee" means a natural person covered by a health plan and includes an insured,
1.19 policyholder, subscriber, contract holder, member, covered person, or certificate holder.

1.20 (d) "Health plan" means a health plan as defined in section 62Q.01, subdivision 3, and
1.21 a county-based purchasing plan.

1.22 (e) "Health plan company" means a health plan company as defined in section 62Q.01,
1.23 subdivision 4, and a county that elects to purchase medical assistance under section 256B.692.

2.1 (f) "Maternal mental health" means a mental health condition that occurs during
2.2 pregnancy or during the postpartum period and includes but is not limited to postpartum
2.3 depression.

2.4 Subd. 2. Maternity coverage required. (a) Every health plan as defined in section
2.5 62Q.01, subdivision 3, that provides maternity benefits must, consistent with other
2.6 coinsurance, co-payment, deductible, and related contract terms, provide coverage of a
2.7 minimum of 48 hours of inpatient care following a vaginal delivery and a minimum of 96
2.8 hours of inpatient care following a caesarean section for a mother and her newborn. The
2.9 health plan shall not provide any compensation or other nonmedical remuneration to
2.10 encourage a mother and newborn to leave inpatient care before the duration minimums
2.11 specified in this section.

2.12 (b) The health plan must also provide coverage for postdelivery care to a mother and
2.13 her newborn if the duration of inpatient care is less than the minimums provided in this
2.14 section.

2.15 (c) Postdelivery care consists of a minimum of one home visit by a registered nurse.
2.16 Services provided by the registered nurse include, but are not limited to, parent education,
2.17 assistance and training in breast and bottle feeding, and conducting any necessary and
2.18 appropriate clinical tests. The home visit must be conducted within four days following the
2.19 discharge of the mother and her child.

2.20 Subd. 3. Maternal mental health program required. (a) By July 1, 2025, every health
2.21 plan company that provides maternity benefits must develop a maternal mental health
2.22 program designed to promote quality and cost-effective outcomes.

2.23 (b) The maternal mental health program must be developed consistent with sound clinical
2.24 principles and processes and must include quality measures to encourage screening, diagnosis,
2.25 treatment, and referral.

2.26 (c) The maternal mental health program must be designed to improve screening, treatment,
2.27 and referral to maternal mental health services; include coverage for doulas; incentivize
2.28 training opportunities for contracting obstetric providers; and educate enrollees about the
2.29 program.

2.30 (d) The health plan company must provide the maternal mental health program guidelines
2.31 and criteria to relevant medical providers, including all contracting obstetric providers.

3.1 Sec. 2. Minnesota Statutes 2022, section 62Q.521, is amended to read:

3.2 **62Q.521 POSTNATAL CARE.**

3.3 (a) For purposes of this section, "comprehensive postnatal visit" means a visit with a
3.4 health care provider that includes a full assessment of the mother's and infant's physical,
3.5 social, and psychological well-being, including but not limited to: mood and emotional
3.6 well-being; infant care and feeding; sexuality, contraception, and birth spacing; sleep and
3.7 fatigue; physical recovery from birth; chronic disease management; and health maintenance.

3.8 (b) A health plan must provide coverage for the following:

3.9 (1) a comprehensive postnatal visit with a health care provider not more than three weeks
3.10 from the date of delivery;

3.11 (2) any postnatal visits recommended by a health care provider between three and 11
3.12 weeks from the date of delivery; and

3.13 (3) a comprehensive postnatal visit with a health care provider 12 weeks from the date
3.14 of delivery.

3.15 (c) The requirements of this section are separate from and cannot be met by a visit made
3.16 pursuant to section 62A.0411, subdivision 2.

3.17 Sec. 3. **[145.909] MATERNAL MENTAL HEALTH SCREENINGS.**

3.18 Subdivision 1. **Definitions.** (a) For purposes of this section, the following terms have
3.19 the meanings given.

3.20 (b) "Maternal mental health condition" means a mental health condition that occurs
3.21 during pregnancy or during the postpartum period and includes but is not limited to
3.22 postpartum depression.

3.23 (c) "Health care professional" means any of the following individuals acting within the
3.24 individual's scope of practice:

3.25 (1) physician or surgeon licensed under chapter 147;

3.26 (2) registered naturopathic doctor registered under chapter 147E;

3.27 (3) nurse practitioner or nurse-midwife licensed under chapter 148;

3.28 (4) physician assistant licensed under chapter 147A; or

3.29 (5) traditional midwife licensed under chapter 147D.

4.1 Subd. 2. Maternal mental health screening required. (a) A health care professional
4.2 who provides prenatal or postpartum care for a patient must ensure that the mother is offered
4.3 screening or is appropriately screened for maternal mental health conditions.

4.4 (b) This section does not apply to a health care professional when providing emergency
4.5 care.

4.6 (c) This section does not preclude any licensed or certified provider acting within the
4.7 provider's scope of practice from screening for maternal mental health conditions.

4.8 Sec. 4. Minnesota Statutes 2022, section 147.091, subdivision 1, is amended to read:

4.9 Subdivision 1. **Grounds listed.** The board may refuse to grant a license, may refuse to
4.10 grant registration to perform interstate telehealth services, or may impose disciplinary action
4.11 as described in section 147.141 against any physician. The following conduct is prohibited
4.12 and is grounds for disciplinary action:

4.13 (a) Failure to demonstrate the qualifications or satisfy the requirements for a license
4.14 contained in this chapter or rules of the board. The burden of proof shall be upon the applicant
4.15 to demonstrate such qualifications or satisfaction of such requirements.

4.16 (b) Obtaining a license by fraud or cheating, or attempting to subvert the licensing
4.17 examination process. Conduct which subverts or attempts to subvert the licensing examination
4.18 process includes, but is not limited to: (1) conduct which violates the security of the
4.19 examination materials, such as removing examination materials from the examination room
4.20 or having unauthorized possession of any portion of a future, current, or previously
4.21 administered licensing examination; (2) conduct which violates the standard of test
4.22 administration, such as communicating with another examinee during administration of the
4.23 examination, copying another examinee's answers, permitting another examinee to copy
4.24 one's answers, or possessing unauthorized materials; or (3) impersonating an examinee or
4.25 permitting an impersonator to take the examination on one's own behalf.

4.26 (c) Conviction, during the previous five years, of a felony reasonably related to the
4.27 practice of medicine or osteopathic medicine. Conviction as used in this subdivision shall
4.28 include a conviction of an offense which if committed in this state would be deemed a felony
4.29 without regard to its designation elsewhere, or a criminal proceeding where a finding or
4.30 verdict of guilt is made or returned but the adjudication of guilt is either withheld or not
4.31 entered thereon.

4.32 (d) Revocation, suspension, restriction, limitation, or other disciplinary action against
4.33 the person's medical license in another state or jurisdiction, failure to report to the board

5.1 that charges regarding the person's license have been brought in another state or jurisdiction,
5.2 or having been refused a license by any other state or jurisdiction.

5.3 (e) Advertising which is false or misleading, which violates any rule of the board, or
5.4 which claims without substantiation the positive cure of any disease, or professional
5.5 superiority to or greater skill than that possessed by another physician.

5.6 (f) Violating a rule promulgated by the board or an order of the board, a state, or federal
5.7 law which relates to the practice of medicine, or in part regulates the practice of medicine
5.8 including without limitation sections 604.201, 609.344, and 609.345, or a state or federal
5.9 narcotics or controlled substance law.

5.10 (g) Engaging in any unethical or improper conduct, including but not limited to:

5.11 (1) conduct likely to deceive or defraud the public;

5.12 (2) conduct likely to harm the public;

5.13 (3) conduct that demonstrates a willful or careless disregard for the health, welfare, or
5.14 safety of a patient;

5.15 (4) medical practice that is professionally incompetent; and

5.16 (5) conduct that may create unnecessary danger to any patient's life, health, or safety,
5.17 in any of which cases, proof of actual injury need not be established.

5.18 (h) Failure to provide proper supervision, including but not limited to supervision of a:

5.19 (1) licensed or unlicensed health care provider; and

5.20 (2) physician under any agreement with the board.

5.21 (i) Aiding or abetting an unlicensed person in the practice of medicine, except that it is
5.22 not a violation of this paragraph for a physician to employ, supervise, or delegate functions
5.23 to a qualified person who may or may not be required to obtain a license or registration to
5.24 provide health services if that person is practicing within the scope of that person's license
5.25 or registration or delegated authority.

5.26 (j) Adjudication by a court of competent jurisdiction, within or outside this state, as:

5.27 (1) mentally incompetent;

5.28 (2) mentally ill;

5.29 (3) developmentally disabled;

5.30 (4) a chemically dependent person;

6.1 (5) a person dangerous to the public;

6.2 (6) a sexually dangerous person; or

6.3 (7) a person who has a sexual psychopathic personality.

6.4 Such adjudication shall automatically suspend a license for the duration of the
6.5 adjudication unless the board orders otherwise.

6.6 (k) Conduct that departs from or fails to conform to the minimal standards of acceptable
6.7 and prevailing medical practice in which case proof of actual injury need not be established.

6.8 (l) Inability to practice medicine with reasonable skill and safety to patients by reason
6.9 of the following, including but not limited to:

6.10 (1) illness;

6.11 (2) intoxication;

6.12 (3) use of drugs, narcotics, chemicals, or any other type of substance;

6.13 (4) mental condition;

6.14 (5) physical condition;

6.15 (6) diminished cognitive ability;

6.16 (7) loss of motor skills; or

6.17 (8) deterioration through the aging process.

6.18 (m) Revealing a privileged communication from or relating to a patient except when
6.19 otherwise required or permitted by law.

6.20 (n) Failure by a doctor of osteopathic medicine to identify the school of healing in the
6.21 professional use of the doctor's name by one of the following terms: osteopathic physician
6.22 and surgeon, doctor of osteopathic medicine, or D.O.

6.23 (o) Improper management of medical records, including failure to maintain adequate
6.24 medical records, to comply with a patient's request made pursuant to sections 144.291 to
6.25 144.298 or to furnish a medical record or report required by law.

6.26 (p) Fee splitting, including without limitation:

6.27 (1) paying, offering to pay, receiving, or agreeing to receive, a commission, rebate, or
6.28 remuneration, directly or indirectly, primarily for the referral of patients or the prescription
6.29 of drugs or devices;

7.1 (2) dividing fees with another physician or a professional corporation, unless the division
7.2 is in proportion to the services provided and the responsibility assumed by each professional
7.3 and the physician has disclosed the terms of the division;

7.4 (3) referring a patient to any health care provider as defined in sections 144.291 to
7.5 144.298 in which the referring physician has a "financial or economic interest," as defined
7.6 in section 144.6521, subdivision 3, unless the physician has disclosed the physician's financial
7.7 or economic interest in accordance with section 144.6521; and

7.8 (4) dispensing for profit any drug or device, unless the physician has disclosed the
7.9 physician's own profit interest.

7.10 The physician must make the disclosures required in this clause in advance and in writing
7.11 to the patient and must include in the disclosure a statement that the patient is free to choose
7.12 a different health care provider. This clause does not apply to the distribution of revenues
7.13 from a partnership, group practice, nonprofit corporation, or professional corporation to its
7.14 partners, shareholders, members, or employees if the revenues consist only of fees for
7.15 services performed by the physician or under a physician's direct supervision, or to the
7.16 division or distribution of prepaid or capitated health care premiums, or fee-for-service
7.17 withhold amounts paid under contracts established under other state law.

7.18 (q) Engaging in abusive or fraudulent billing practices, including violations of the federal
7.19 Medicare and Medicaid laws or state medical assistance laws.

7.20 (r) Becoming addicted or habituated to a drug or intoxicant.

7.21 (s) Inappropriate prescribing of or failure to properly prescribe a drug or device, including
7.22 prescribing a drug or device for other than medically accepted therapeutic or experimental
7.23 or investigative purposes authorized by a state or federal agency.

7.24 (t) Engaging in conduct with a patient which is sexual or may reasonably be interpreted
7.25 by the patient as sexual, or in any verbal behavior which is seductive or sexually demeaning
7.26 to a patient.

7.27 (u) Failure to make reports as required by section 147.111 or to cooperate with an
7.28 investigation of the board as required by section 147.131.

7.29 (v) Knowingly providing false or misleading information that is directly related to the
7.30 care of that patient unless done for an accepted therapeutic purpose such as the administration
7.31 of a placebo.

7.32 (w) Aiding suicide or aiding attempted suicide in violation of section 609.215 as
7.33 established by any of the following:

8.1 (1) a copy of the record of criminal conviction or plea of guilty for a felony in violation
8.2 of section 609.215, subdivision 1 or 2;

8.3 (2) a copy of the record of a judgment of contempt of court for violating an injunction
8.4 issued under section 609.215, subdivision 4;

8.5 (3) a copy of the record of a judgment assessing damages under section 609.215,
8.6 subdivision 5; or

8.7 (4) a finding by the board that the person violated section 609.215, subdivision 1 or 2.

8.8 The board shall investigate any complaint of a violation of section 609.215, subdivision 1
8.9 or 2.

8.10 (x) Practice of a board-regulated profession under lapsed or nonrenewed credentials.

8.11 (y) Failure to repay a state or federally secured student loan in accordance with the
8.12 provisions of the loan.

8.13 (z) Providing interstate telehealth services other than according to section 147.032.

8.14 (aa) Failure to meet all maternal mental health screening requirements under section
8.15 145.909.

8.16 Sec. 5. Minnesota Statutes 2022, section 147A.13, subdivision 1, is amended to read:

8.17 Subdivision 1. **Grounds listed.** The board may refuse to grant licensure or may impose
8.18 disciplinary action as described in this subdivision against any physician assistant. The
8.19 following conduct is prohibited and is grounds for disciplinary action:

8.20 (1) failure to demonstrate the qualifications or satisfy the requirements for licensure
8.21 contained in this chapter or rules of the board. The burden of proof shall be upon the applicant
8.22 to demonstrate such qualifications or satisfaction of such requirements;

8.23 (2) obtaining a license by fraud or cheating, or attempting to subvert the examination
8.24 process. Conduct which subverts or attempts to subvert the examination process includes,
8.25 but is not limited to:

8.26 (i) conduct which violates the security of the examination materials, such as removing
8.27 examination materials from the examination room or having unauthorized possession of
8.28 any portion of a future, current, or previously administered licensing examination;

8.29 (ii) conduct which violates the standard of test administration, such as communicating
8.30 with another examinee during administration of the examination, copying another examinee's

9.1 answers, permitting another examinee to copy one's answers, or possessing unauthorized
9.2 materials; and

9.3 (iii) impersonating an examinee or permitting an impersonator to take the examination
9.4 on one's own behalf;

9.5 (3) conviction, during the previous five years, of a felony reasonably related to the
9.6 practice of physician assistant. Conviction as used in this subdivision includes a conviction
9.7 of an offense which if committed in this state would be deemed a felony without regard to
9.8 its designation elsewhere, or a criminal proceeding where a finding or verdict of guilt is
9.9 made or returned but the adjudication of guilt is either withheld or not entered;

9.10 (4) revocation, suspension, restriction, limitation, or other disciplinary action against
9.11 the person's physician assistant credentials in another state or jurisdiction, failure to report
9.12 to the board that charges regarding the person's credentials have been brought in another
9.13 state or jurisdiction, or having been refused licensure by any other state or jurisdiction;

9.14 (5) advertising which is false or misleading, violates any rule of the board, or claims
9.15 without substantiation the positive cure of any disease or professional superiority to or
9.16 greater skill than that possessed by another physician assistant;

9.17 (6) violating a rule adopted by the board or an order of the board, a state, or federal law
9.18 which relates to the practice of a physician assistant, or in part regulates the practice of a
9.19 physician assistant, including without limitation sections 604.201, 609.344, and 609.345,
9.20 or a state or federal narcotics or controlled substance law;

9.21 (7) engaging in any unethical conduct; conduct likely to deceive, defraud, or harm the
9.22 public, or demonstrating a willful or careless disregard for the health, welfare, or safety of
9.23 a patient; or practice which is professionally incompetent, in that it may create unnecessary
9.24 danger to any patient's life, health, or safety, in any of which cases, proof of actual injury
9.25 need not be established;

9.26 (8) engaging in the practice of medicine beyond what is allowed under this chapter, or
9.27 aiding or abetting an unlicensed person in the practice of medicine;

9.28 (9) adjudication as mentally incompetent, mentally ill or developmentally disabled, or
9.29 as a chemically dependent person, a person dangerous to the public, a sexually dangerous
9.30 person, or a person who has a sexual psychopathic personality by a court of competent
9.31 jurisdiction, within or without this state. Such adjudication shall automatically suspend a
9.32 license for its duration unless the board orders otherwise;

10.1 (10) engaging in unprofessional conduct. Unprofessional conduct includes any departure
10.2 from or the failure to conform to the minimal standards of acceptable and prevailing practice
10.3 in which proceeding actual injury to a patient need not be established;

10.4 (11) inability to practice with reasonable skill and safety to patients by reason of illness,
10.5 drunkenness, use of drugs, narcotics, chemicals, or any other type of material, or as a result
10.6 of any mental or physical condition, including deterioration through the aging process or
10.7 loss of motor skills;

10.8 (12) revealing a privileged communication from or relating to a patient except when
10.9 otherwise required or permitted by law;

10.10 (13) any identification of a physician assistant by the title "Physician" in a patient care
10.11 setting or in a communication directed to the general public;

10.12 (14) improper management of medical records, including failure to maintain adequate
10.13 medical records, to comply with a patient's request made pursuant to sections 144.291 to
10.14 144.298, or to furnish a medical record or report required by law;

10.15 (15) engaging in abusive or fraudulent billing practices, including violations of the
10.16 federal Medicare and Medicaid laws or state medical assistance laws;

10.17 (16) becoming addicted or habituated to a drug or intoxicant;

10.18 (17) prescribing a drug or device for other than medically accepted therapeutic,
10.19 experimental, or investigative purposes authorized by a state or federal agency or referring
10.20 a patient to any health care provider as defined in sections 144.291 to 144.298 for services
10.21 or tests not medically indicated at the time of referral;

10.22 (18) engaging in conduct with a patient which is sexual or may reasonably be interpreted
10.23 by the patient as sexual, or in any verbal behavior which is seductive or sexually demeaning
10.24 to a patient;

10.25 (19) failure to make reports as required by section 147A.14 or to cooperate with an
10.26 investigation of the board as required by section 147A.15, subdivision 3;

10.27 (20) knowingly providing false or misleading information that is directly related to the
10.28 care of that patient unless done for an accepted therapeutic purpose such as the administration
10.29 of a placebo;

10.30 (21) aiding suicide or aiding attempted suicide in violation of section 609.215 as
10.31 established by any of the following:

11.1 (i) a copy of the record of criminal conviction or plea of guilty for a felony in violation
 11.2 of section 609.215, subdivision 1 or 2;

11.3 (ii) a copy of the record of a judgment of contempt of court for violating an injunction
 11.4 issued under section 609.215, subdivision 4;

11.5 (iii) a copy of the record of a judgment assessing damages under section 609.215,
 11.6 subdivision 5; or

11.7 (iv) a finding by the board that the person violated section 609.215, subdivision 1 or 2.
 11.8 The board shall investigate any complaint of a violation of section 609.215, subdivision 1
 11.9 or 2; ~~or~~

11.10 (22) failure to maintain the proof of review document as required under section 147A.09,
 11.11 subdivision 3, or to provide a copy of the document upon request of the board; or

11.12 (23) failure to meet all maternal mental health screening requirements under section
 11.13 145.909.

11.14 Sec. 6. Minnesota Statutes 2023 Supplement, section 148.261, subdivision 1, is amended
 11.15 to read:

11.16 Subdivision 1. **Grounds listed.** The board may deny, revoke, suspend, limit, or condition
 11.17 the license and registration of any person to practice advanced practice, professional, or
 11.18 practical nursing under sections 148.171 to 148.285, or to otherwise discipline a licensee
 11.19 or applicant as described in section 148.262. The following are grounds for disciplinary
 11.20 action:

11.21 (1) Failure to demonstrate the qualifications or satisfy the requirements for a license
 11.22 contained in sections 148.171 to 148.285 or rules of the board. In the case of a person
 11.23 applying for a license, the burden of proof is upon the applicant to demonstrate the
 11.24 qualifications or satisfaction of the requirements.

11.25 (2) Employing fraud or deceit in procuring or attempting to procure a permit, license,
 11.26 or registration certificate to practice advanced practice, professional, or practical nursing
 11.27 or attempting to subvert the licensing examination process. Conduct that subverts or attempts
 11.28 to subvert the licensing examination process includes, but is not limited to:

11.29 (i) conduct that violates the security of the examination materials, such as removing
 11.30 examination materials from the examination room or having unauthorized possession of
 11.31 any portion of a future, current, or previously administered licensing examination;

12.1 (ii) conduct that violates the standard of test administration, such as communicating with
12.2 another examinee during administration of the examination, copying another examinee's
12.3 answers, permitting another examinee to copy one's answers, or possessing unauthorized
12.4 materials; or

12.5 (iii) impersonating an examinee or permitting an impersonator to take the examination
12.6 on one's own behalf.

12.7 (3) Conviction of a felony or gross misdemeanor reasonably related to the practice of
12.8 professional, advanced practice registered, or practical nursing. Conviction as used in this
12.9 subdivision includes a conviction of an offense that if committed in this state would be
12.10 considered a felony or gross misdemeanor without regard to its designation elsewhere, or
12.11 a criminal proceeding where a finding or verdict of guilt is made or returned but the
12.12 adjudication of guilt is either withheld or not entered.

12.13 (4) Revocation, suspension, limitation, conditioning, or other disciplinary action against
12.14 the person's professional or practical nursing license or advanced practice registered nursing
12.15 credential, in another state, territory, or country; failure to report to the board that charges
12.16 regarding the person's nursing license or other credential are pending in another state,
12.17 territory, or country; or having been refused a license or other credential by another state,
12.18 territory, or country.

12.19 (5) Failure to or inability to perform professional or practical nursing as defined in section
12.20 148.171, subdivision 14 or 15, with reasonable skill and safety, including failure of a
12.21 registered nurse to supervise or a licensed practical nurse to monitor adequately the
12.22 performance of acts by any person working at the nurse's direction.

12.23 (6) Engaging in unprofessional conduct, including, but not limited to, a departure from
12.24 or failure to conform to board rules of professional or practical nursing practice that interpret
12.25 the statutory definition of professional or practical nursing as well as provide criteria for
12.26 violations of the statutes, or, if no rule exists, to the minimal standards of acceptable and
12.27 prevailing professional or practical nursing practice, or any nursing practice that may create
12.28 unnecessary danger to a patient's life, health, or safety. Actual injury to a patient need not
12.29 be established under this clause.

12.30 (7) Failure of an advanced practice registered nurse to practice with reasonable skill and
12.31 safety or departure from or failure to conform to standards of acceptable and prevailing
12.32 advanced practice registered nursing.

13.1 (8) Delegating or accepting the delegation of a nursing function or a prescribed health
13.2 care function when the delegation or acceptance could reasonably be expected to result in
13.3 unsafe or ineffective patient care.

13.4 (9) Actual or potential inability to practice nursing with reasonable skill and safety to
13.5 patients by reason of illness, use of alcohol, drugs, chemicals, or any other material, or as
13.6 a result of any mental or physical condition.

13.7 (10) Adjudication as mentally incompetent, mentally ill, a chemically dependent person,
13.8 or a person dangerous to the public by a court of competent jurisdiction, within or without
13.9 this state.

13.10 (11) Engaging in any unethical conduct, including, but not limited to, conduct likely to
13.11 deceive, defraud, or harm the public, or demonstrating a willful or careless disregard for
13.12 the health, welfare, or safety of a patient. Actual injury need not be established under this
13.13 clause.

13.14 (12) Engaging in conduct with a patient that is sexual or may reasonably be interpreted
13.15 by the patient as sexual, or in any verbal behavior that is seductive or sexually demeaning
13.16 to a patient, or engaging in sexual exploitation of a patient or former patient.

13.17 (13) Obtaining money, property, or services from a patient, other than reasonable fees
13.18 for services provided to the patient, through the use of undue influence, harassment, duress,
13.19 deception, or fraud.

13.20 (14) Revealing a privileged communication from or relating to a patient except when
13.21 otherwise required or permitted by law.

13.22 (15) Engaging in abusive or fraudulent billing practices, including violations of federal
13.23 Medicare and Medicaid laws or state medical assistance laws.

13.24 (16) Improper management of patient records, including failure to maintain adequate
13.25 patient records, to comply with a patient's request made pursuant to sections 144.291 to
13.26 144.298, or to furnish a patient record or report required by law.

13.27 (17) Knowingly aiding, assisting, advising, or allowing an unlicensed person to engage
13.28 in the unlawful practice of advanced practice, professional, or practical nursing.

13.29 (18) Violating a rule adopted by the board, an order of the board, or a state or federal
13.30 law relating to the practice of advanced practice, professional, or practical nursing, or a
13.31 state or federal narcotics or controlled substance law.

14.1 (19) Knowingly providing false or misleading information that is directly related to the
14.2 care of that patient unless done for an accepted therapeutic purpose such as the administration
14.3 of a placebo.

14.4 (20) Aiding suicide or aiding attempted suicide in violation of section 609.215 as
14.5 established by any of the following:

14.6 (i) a copy of the record of criminal conviction or plea of guilty for a felony in violation
14.7 of section 609.215, subdivision 1 or 2;

14.8 (ii) a copy of the record of a judgment of contempt of court for violating an injunction
14.9 issued under section 609.215, subdivision 4;

14.10 (iii) a copy of the record of a judgment assessing damages under section 609.215,
14.11 subdivision 5; or

14.12 (iv) a finding by the board that the person violated section 609.215, subdivision 1 or 2.
14.13 The board shall investigate any complaint of a violation of section 609.215, subdivision 1
14.14 or 2.

14.15 (21) Practicing outside the scope of practice authorized by section 148.171, subdivision
14.16 5, 10, 11, 13, 14, 15, or 21.

14.17 (22) Making a false statement or knowingly providing false information to the board,
14.18 failing to make reports as required by section 148.263, or failing to cooperate with an
14.19 investigation of the board as required by section 148.265.

14.20 (23) Engaging in false, fraudulent, deceptive, or misleading advertising.

14.21 (24) Failure to inform the board of the person's certification or recertification status as
14.22 a certified registered nurse anesthetist, certified nurse-midwife, certified nurse practitioner,
14.23 or certified clinical nurse specialist.

14.24 (25) Engaging in clinical nurse specialist practice, nurse-midwife practice, nurse
14.25 practitioner practice, or registered nurse anesthetist practice without a license and current
14.26 certification or recertification by a national nurse certification organization acceptable to
14.27 the board.

14.28 (26) Failing to report employment to the board as required by section 148.211, subdivision
14.29 2a, or knowingly aiding, assisting, advising, or allowing a person to fail to report as required
14.30 by section 148.211, subdivision 2a.

14.31 (27) Failure to meet all maternal mental health screening requirements under section
14.32 145.909.

15.1 Sec. 7. Minnesota Statutes 2022, section 256B.69, is amended by adding a subdivision to
15.2 read:

15.3 Subd. 38. **Maternal mental health program required.** Managed care plans and
15.4 county-based purchasing plans subject to this section must include the maternal mental
15.5 health program required under section 62A.0411.

15.6 Sec. 8. Minnesota Statutes 2022, section 256L.12, is amended by adding a subdivision to
15.7 read:

15.8 Subd. 12. **Maternal mental health program required.** Managed care plans and
15.9 county-based purchasing plans subject to this section must include the maternal mental
15.10 health program required under section 62A.0411.