

field in a postsecondary program at the undergraduate level or the equivalent at the graduate level;

(4) for other health care technicians agreeing to teach at least 12 credit hours, or 720 hours per year in their designated field in a postsecondary program at the undergraduate level or the equivalent at the graduate level. The commissioner, in consultation with the Healthcare Education-Industry Partnership, shall determine the health care fields where the need is the greatest, including, but not limited to, respiratory therapy, clinical laboratory technology, radiologic technology, and surgical technology;

(5) for pharmacists, advanced dental therapists, dental therapists, and public health nurses who agree to practice in designated rural areas; and

(6) for dentists agreeing to deliver at least 25 percent of the dentist's yearly patient encounters to state public program enrollees or patients receiving sliding fee schedule discounts through a formal sliding fee schedule meeting the standards established by the United States Department of Health and Human Services under Code of Federal Regulations, title 42, section 51, chapter 303.

(b) Appropriations made to the account do not cancel and are available until expended, except that at the end of each biennium, any remaining balance in the account that is not committed by contract and not needed to fulfill existing commitments shall cancel to the fund.

Sec. 2. [144A.189] ADMINISTRATION OF MEDICATIONS BY UNLICENSED PERSONNEL.

Subdivision 1. Authorization. The director of nursing services may delegate medication administration to unlicensed personnel according to sections 148.171, subdivision 14, and 148.235, subdivision 10.

Subd. 2. Training. Unlicensed nursing personnel who administer medications in a nursing home must:

(1) have completed a nursing assistant training program approved by the department; and

(2) have completed a standardized medication administration training program for unlicensed personnel in nursing homes, which is offered through a Minnesota postsecondary educational institution that includes, at a minimum, instruction on the following:

(i) the complete procedure of checking the resident's medication record;

3.1 (ii) preparation of the medication for administration;

3.2 (iii) administration of the medication to the resident;

3.3 (iv) assisting residents with self-administration as necessary;

3.4 (v) documentation after administration of the date, time, dosage, and method of
3.5 administration of all medications, or the reason for not administering the medication as
3.6 ordered, and the signature of the nurse or authorized person who administered and observed
3.7 the same; and

3.8 (vi) the type of information regarding medication administration reportable to a nurse.

3.9 Subd. 3. **Documentation of training course.** A nursing home must keep written
3.10 documentation verifying completion of the required course by all unlicensed nursing
3.11 personnel administering medications.

3.12 Subd. 4. **Medication administration.** A person who completes the required training
3.13 course, and has been delegated the responsibility, may administer medication, whether oral,
3.14 suppository, eye drops, ear drops, inhalant, or topical, if:

3.15 (1) the medications are regularly scheduled; and

3.16 (2) in the case of pro re nata (PRN) medications, the administration of the medication
3.17 is authorized by a nurse or reported to a nurse within a time period that is specified by
3.18 nursing home policy prior to the administration.

3.19 Sec. 3. Minnesota Statutes 2016, section 256R.37, is amended to read:

3.20 **256R.37 SCHOLARSHIPS.**

3.21 (a) For the 27-month period beginning October 1, 2015, through December 31, 2017,
3.22 the commissioner shall allow a scholarship per diem of up to 25 cents for each nursing
3.23 facility with no scholarship per diem that is requesting a scholarship per diem to be added
3.24 to the external fixed payment rate to be used:

3.25 (1) for employee scholarships that satisfy the following requirements:

3.26 (i) scholarships are available to all employees who work an average of at least ten hours
3.27 per week at the facility except the administrator, and to reimburse student loan expenses
3.28 for newly hired ~~and recently graduated~~ registered nurses and licensed practical nurses, and
3.29 training expenses for nursing assistants as specified in section 144A.611, subdivisions 2
3.30 and 4, who are newly hired ~~and have graduated within the last 12 months~~; and

(ii) the course of study is expected to lead to career advancement with the facility or in long-term care, including medical care interpreter services and social work; and

(2) to provide job-related training in English as a second language.

(b) All facilities may annually request a rate adjustment under this section by submitting information to the commissioner on a schedule and in a form supplied by the commissioner. The commissioner shall allow a scholarship payment rate equal to the reported and allowable costs divided by resident days.

(c) In calculating the per diem under paragraph (b), the commissioner shall allow costs related to tuition, direct educational expenses, and reasonable costs as defined by the commissioner for child care costs and transportation expenses related to direct educational expenses.

(d) The rate increase under this section is an optional rate add-on that the facility must request from the commissioner in a manner prescribed by the commissioner. The rate increase must be used for scholarships as specified in this section.

(e) For instances in which a rate adjustment will be 15 cents or greater, nursing facilities that close beds during a rate year may request to have their scholarship adjustment under paragraph (b) recalculated by the commissioner for the remainder of the rate year to reflect the reduction in resident days compared to the cost report year.

Sec. 4. **APPROPRIATION; HOME AND COMMUNITY-BASED SERVICES
EMPLOYEE SCHOLARSHIP PROGRAM.**

\$..... in fiscal year 2018 and \$..... in fiscal year 2019 are appropriated from the general fund to the commissioner of health for the home and community-based services employee scholarship program under Minnesota Statutes, section 144.1503. The commissioner may use up to \$50,000 of the annual appropriation for administration.

Sec. 5. **REVISOR'S INSTRUCTION.**

The revisor shall fix cross-references to repealed Minnesota Rules, part 4658.1360, wherever it appears in Minnesota Statutes and Minnesota Rules.

Sec. 6. **REPEALER.**

Minnesota Rules, part 4658.1360, is repealed.

4658.1360 ADMINISTRATION OF MEDICATIONS BY UNLICENSED PERSONNEL.

Subpart 1. **Authorization.** The director of nursing services may delegate medication administration to unlicensed personnel according to Minnesota Statutes, sections 148.171, subdivision 15, and 148.262, subdivision 7.

Subp. 2. **Training.** Unlicensed nursing personnel who administer medications in a nursing home must:

- A. have completed a nursing assistant training program approved by the department; and
- B. have completed a standardized medication administration training program for unlicensed personnel in nursing homes which is offered through a Minnesota postsecondary educational institution that includes, at a minimum, instruction on the following:
 - (1) the complete procedure of checking the resident's medication record;
 - (2) preparation of the medication for administration;
 - (3) administration of the medication to the resident;
 - (4) assisting residents with self-administration as necessary;
 - (5) documentation after administration of the date, time, dosage, and method of administration of all medications, or the reason for not administering the medication as ordered, and the signature of the nurse or authorized person who administered and observed the same; and
 - (6) the type of information regarding medication administration reportable to a nurse.

Subp. 3. **Documentation of training course.** A nursing home must keep written documentation verifying completion of the required course by all unlicensed nursing personnel administering medications.

Subp. 4. **Medication administration.** A person who completes the required training course, and has been delegated the responsibility, may administer medication, whether oral, suppository, eye drops, ear drops, inhalant, or topical, if:

- A. the medications are regularly scheduled; and
- B. in the case of pro re nata (PRN) medications, the administration of the medication is authorized by a nurse or reported to a nurse within a time period that is specified by nursing home policy prior to the administration.