

care. The commissioner of public welfare may establish a schedule of contributions to be made by the spouse of a nursing home resident to the cost of care and shall seek a waiver from federal regulations which establish the amount required to be contributed by either spouse when one spouse is a nursing home resident; and

(11) (13) Who has applied or agrees to apply all proceeds received or receivable by him or his spouse from automobile accident coverage and private health care coverage to the costs of medical care for himself, his spouse, and children. The state agency may require from any applicant or recipient of medical assistance the assignment of any rights accruing under private health care coverage. Any rights or amounts so assigned shall be applied against the cost of medical care paid for under this chapter. Any assignment shall not be effective as to benefits paid or provided under automobile accident coverage and private health care coverage prior to receipt of the assignment by the person or organization providing the benefits.

Sec. 7. [259.405] TRANSFER OF FUNDS.

The commissioner of public welfare is authorized to transfer funds from the dependent or neglected ward account into the subsidized adoption account when a deficit in the subsidized adoption program occurs. The amount of the transfer shall not exceed 50 percent of the dependent or neglected ward account.

Sec. 8. EFFECTIVE DATE.

Sections 1 to 7 are effective the day following final enactment.

Approved March 22, 1982

CHAPTER 554 — H.F.No. 1698

An act relating to public welfare; delaying the duty of the commissioner of administration to sell certain land and buildings; amending Laws 1981, Chapter 360, Article I, Section 2, Subdivision 5.

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

Section 1. Laws 1981, Chapter 360, Article I, Section 2, Subdivision 5, is amended to read:

Subd. 5. Mental Health	146,855,000	146,157,300
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The commissioner of public welfare may fill up to 120 human services technician positions in the state hospitals in addition to the approved complement specified in this sub-

Changes or additions are indicated by underline, deletions by ~~strikeout~~.

division for the purpose of alleviating recruitment delays in direct patient care, as salary savings become available to fund the positions.

The commissioner of public welfare shall not reduce the number of human services technician positions in the state hospital system.

As the hospital population decreases, the supportive staff complement shall be reduced in direct proportion.

The amounts that may be expended from this appropriation for each activity are as follows:

Program Offices

Mentally Ill

\$ 5,117,000 \$ 7,836,800

Mentally Retarded

\$ 1,733,400 \$ 2,512,700

The commissioner of public welfare may fund up to 200 families for the mentally retarded family subsidy program.

This appropriation contains \$12,000 each year for the brain-injured persons program. The commissioner of public welfare shall contract with an approved vendor to pay the costs of services provided to brain-injured persons. The commissioner shall contract with a neurosurgeon who is independent of the approved vendor to evaluate, initially and on or about March 1, 1982, each person for whom services are provided under this appropriation to ascertain the person's current stage of neurological development and prognosis for improvement. The neurosurgeon shall send a written report of each evaluation to the commissioner. For the purposes of this appropriation, "approved vendor" means the Institutes for the Achievement of Human Potential.

Chemically Dependent

\$ 1,922,500 \$ 1,929,600

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Any federal money received in excess of the estimates shown in the 1981 budget document shall reduce the state appropriation available by a like dollar amount, unless otherwise directed by the governor, after he has consulted with the legislative advisory commission.

State Hospitals

Approved Complement -

By June 30, 1983 - 5485

Current Expense

\$14,449,000 \$15,450,300

Salaries

\$107,955,500 \$104,662,100

Repairs and Betterments

\$ 1,400,100

Special Equipment

\$ 521,700

Notwithstanding the provisions of Minnesota Statutes 1980, Sections 246.50 to 246.53, the commissioner of public welfare shall determine what part of the cost of care for state hospital treatment a patient or his relatives are able to pay. In no case, shall a patient or his relatives, unless they reside outside the state, be ordered to pay more than ten percent of the cost of care.

By July 1, 1981, the chemical dependency and surgical units at Rochester state hospital shall be closed. The remaining units at Rochester state hospital shall be closed no later than June 30, 1982.

Beginning January 1, 1983, best efforts shall be made by the department of administration to sell the buildings and adjoining land ~~within one year from the date of closure~~, after the commissioner of public welfare has certified to the commissioner of administration pursuant to provisions of Minnesota Statutes, Section 94.09, Subdivision 2, that

the state hospital campus is no longer needed by the department of public welfare. Notwithstanding any other law to the contrary, a portion or all of the buildings and the adjacent lands can be sold to anyone. Receipts from rentals of Rochester state hospital property shall be deposited in the general fund and are appropriated to the commissioner of administration for maintenance of the land and buildings of that campus.

Prior to the closure date for each unit, the commissioner of public welfare shall arrange for the orderly transfer of all affected patients. The commissioner shall, to the extent possible, provide at least 60 days notice of transfer and allow patients and their parents, spouse or guardian, and the appropriate county agency input regarding the institution or community placement to which the patient is to be transferred.

Effective immediately, the commissioner of employee relations shall monitor the orderly reassignment of affected employees of the state hospital pursuant to authority vested in him by Minnesota Statutes, Section 246.60. The commissioners of public welfare and employee relations shall provide training or other assistance as necessary for employees to aid in this transition. Direct care positions shall be transferred to other state hospitals in the same proportion as patients are transferred. Early retirement shall be encouraged where possible, with full protection for retirement benefits. Notwithstanding any other law an employee who waives his right to transfer to a hospital other than Rochester state hospital or other state employment shall be entitled to severance pay in the amount equal to five percent of the employee's base salary or wage, not to exceed \$500, multiplied by the number of years of state service, but in no case shall the total amount exceed \$5,000.

Quarterly progress reports must be submitted by the commissioner of public welfare to the legislative advisory commission and must include information with respect to the following:

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- (a) Employee negotiations;
- (b) Community placement of affected patients;
- (c) Admissions figures; and
- (d) Any other activities affecting closure.

Any savings in excess of the \$7,000,000 projected to result from the closure of the hospital may be directed by the commissioner of public welfare into funding for community facilities for mentally ill, chemically dependent, and mentally retarded persons.

Nursing Homes Approved Complement -

By June 30, 1983 - 617

Current Expense

\$ 1,710,700 \$ 1,888,200

Salaries

\$11,238,300 \$11,298,000

Repairs and Betterments

\$ 146,500

Special Equipment

\$ 68,300

Mental Health Support

\$ 592,000 \$ 579,600

Any unexpended balance remaining in the first year for special equipment and repairs and betterments does not cancel but is available for the second year of the biennium.

The information for the budgets for the nursing homes and hospitals shall be submitted to the 1983 legislature on an individual institution basis.

Positions and administrative money may be transferred between the various activities within each subdivision in this section.

Work activity centers in state hospitals shall make available up to 25 percent of their capacity for community referrals. The

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community referrals will be funded by the division of vocational rehabilitation, will provide sheltered work and work activity, and will be certified under Minnesota Statutes, Chapter 129A.

Sec. 2. EFFECTIVE DATE.

This act is effective the day following final enactment.

Approved March 22, 1982

CHAPTER 555 — S.F.No. 1706

An act relating to insurance; modifying the definitions of insolvent insurer and a covered claim for purposes of the insurance guaranty association act; authorizing separate accounts for certain pension plans; broadening continuation and conversion privileges of survivors and former spouses; amending Minnesota Statutes 1980, Sections 62A.145; 62A.146; 62C.142; and 62D.101; Minnesota Statutes 1981 Supplement, Sections 60C.03, Subdivision 8; 60C.09, Subdivision 1; and 61A.282, Subdivision 2; 62A.21, Subdivisions 2a and 2b; proposing new law coded in Minnesota Statutes, Chapter 61A.

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

Section 1. Minnesota Statutes 1981 Supplement, Section 60C.03, Subdivision 8, is amended to read:

Subd. 8. "Insolvent insurer" means an insurer licensed to transact insurance in this state, either at the time the policy was issued, or when the insured event occurred, and against whom an order of liquidation with a finding of insolvency has been entered after ~~August 1, 1981~~ April 30, 1979 by a court of competent jurisdiction, in the insurer's state of domicile or of this state, under the provisions of chapter 60B, and which order of liquidation has not been stayed or been the subject of a writ of supersedeas or other comparable order.

Sec. 2. Minnesota Statutes 1981 Supplement, Section 60C.09, Subdivision 1, is amended to read:

Subdivision 1. **DEFINITION.** A covered claim is any unpaid claim, including one for unearned premium, which:

(a) Arises out of and is within the coverage of an insurance policy issued by a member insurer if ~~such~~ the insurer becomes an insolvent insurer after ~~August 1, 1981~~ April 30, 1979;

(b) Arises out of a class of business which is not excepted from the scope of Laws 1971, Chapter 145 by section 60C.02; and

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