

or shall continue to be employed by the Minneapolis housing and redevelopment authority or shall be transferred to employment of the city, as determined by the city council. In the event of transfer of employment to the city of Minneapolis, the city council may transfer the person into the classified service into a position for which the employee is qualified. In any event:

(a) the employee's salary shall not be diminished as a result of implementation of this act;

(b) the employee's job responsibilities shall not be substantially diminished as a result of implementation of this act;

(c) the employee shall not be required to change residence as a result of this legislation; and

(d) the employee shall have the right to apply and be considered for positions with the agency or department on an equal basis with the other employees of the agency or department. Length of service with the Minneapolis housing redevelopment authority shall count on the same basis as length of service is counted for existing employees of the city of Minneapolis.

The director and deputy directors shall be considered employees for the purposes of clauses (c) and (d).

If a person employed as an employee of the agency or as a director or assistant director or as a managerial employee of the department or as an employee of the Minneapolis housing and redevelopment authority is, at the time of agency employment or department employment or Minneapolis housing and redevelopment authority employment, a member of the classified service of the city of Minneapolis, the employee shall be deemed to be on leave of absence during his tenure in the employment, and upon termination of service, shall be returned to his permanent civil service classification. If no vacancy is available in his permanent civil service classification position, seniority shall prevail, and the person most recently certified to the position shall be returned to the permanent civil service classification held by him prior to certification.

Sec. 5. EFFECTIVE DATE.

This act is effective the day after compliance with Minnesota Statutes, section 645.021, subdivision 3, by the Minneapolis city council.

Approved June 1, 1983

CHAPTER 221 — S.F.No. 263

An act relating to insurance; health and accident; providing reimbursement for the services of certain licensed and certified registered nurses on an equal basis with other licensed health professional services; amending Minnesota Statutes 1982, sections 62A.03, subdivision 1; and 62A.15.

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

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

Section 1. Minnesota Statutes 1982, section 62A.03, subdivision 1, is amended to read:

Subdivision 1. **CONDITIONS.** No policy of individual accident and sickness insurance shall may be delivered or issued for delivery to any a person in this state unless the following conditions are met:

(1) **PREMIUM.** The entire money and other considerations therefor are expressed therein.

(2) **TIME EFFECTIVE.** The time at which the insurance takes effect and terminates is expressed therein.

(3) **ONE PERSON.** It purports to insure only one person, except that a policy may insure, originally or by subsequent amendment, upon the application of an adult member of a family ~~who shall be~~ deemed the policyholder, any two or more eligible members of that family, including:

(a) husband,

(b) wife,

(c) dependent children,

(d) any children under a specified age ~~which shall not exceed of~~ 19 years or less, or

(e) any other person dependent upon the policyholder.

(4) **APPEARANCE.** The style, arrangement, and over-all appearance of the policy give no undue prominence to any portion of the text, and ~~unless~~ every printed portion of the text of the policy and of any endorsements or attached papers is plainly printed in light-face type of a style in general use. The type size of which shall must be uniform and not less than ten point with a lower case unspaced alphabet length not less than 120 point. The "text" ~~shall include~~ includes all printed matter except the name and address of the insurer, name or title of the policy, the brief description, if any, the reference to renewal or cancellation by a separate statement, if any, and the captions and subcaptions).

(5) **DESCRIPTION OF POLICY.** The policy, on the first page, ~~shall indicate~~ indicates or ~~refer~~ refers to its provisions for renewal or cancellation either in the brief description, if any, or by a separate statement printed in type not smaller than the type used for captions, or ~~by~~ a separate provision bearing a caption which accurately describes the renewability or cancelability of the policy.

(6) **EXCEPTIONS IN POLICY.** The exceptions and reductions of indemnity are set forth in the policy and, except those which are set forth in section 62A.04, ~~are~~ printed, at the insurer's option, either ~~included~~ with the benefit provision to which they apply, or under an appropriate caption such as "EXCEPTIONS;" or "EXCEPTIONS AND REDUCTIONS;" provided that. However,

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if an exception or reduction specifically applies only to a particular benefit of the policy, a statement of ~~such~~ the exception or reduction ~~shall~~ must be included with the benefit provision to which it applies.

(7) **FORM NUMBER.** Each ~~such~~ form, including riders and endorsements, ~~shall be~~ is identified by a form number in the lower left hand corner of the first page thereof.

(8) **NO INCORPORATION BY REFERENCE.** It contains no provision purporting to make any portion of the charter, rules, constitution, or bylaws of the insurer a part of the policy unless ~~such~~ the portion is set forth in full in the policy, except in the case of the incorporation of, or reference to, a statement of rates ~~or~~, classification of risks, or short rate table filed with the commissioner.

(9) **MEDICAL BENEFITS.** If the policy contains a provision for medical expense benefits, the term "medical benefits" or similar terms as used therein ~~shall include~~ includes treatments by all licensed practitioners of the healing arts unless, subject to the qualifications contained in clause (10), the policy specifically states the practitioners whose services are covered.

(10) **OSTEOPATH, OPTOMETRIST ~~OR~~, CHIROPRACTOR, OR REGISTERED NURSE SERVICES.** With respect to any policy of individual accident and sickness insurance issued or entered into subsequent to August 1, 1974, notwithstanding the provisions of ~~any such~~ the policy, ~~wherever therein there is~~ if it contains a provision providing for reimbursement for any service which is in the lawful scope of practice of a duly licensed osteopath, optometrist ~~or~~, chiropractor, or registered nurse meeting the requirements of section 62A.15, subdivision 3a, the person entitled to benefits or person performing services under ~~such~~ the policy ~~shall be~~ is entitled to reimbursement on an equal basis for ~~such~~ the service, whether the said service is performed by a physician, osteopath, optometrist ~~or~~, chiropractor, or registered nurse meeting the requirements of section 62A.15, subdivision 3a, duly licensed under the laws of this state.

Sec. 2. Minnesota Statutes 1982, section 62A.15, is amended to read:

62A.15 CHIROPRACTIC LICENSED HEALTH PROFESSIONAL SERVICES IN ACCIDENT AND HEALTH AND NONPROFIT HEALTH SERVICE POLICIES.

Subdivision 1. **APPLICABILITY.** The provisions of this section ~~shall~~ apply to all group policies or subscriber contracts providing payment for care in this state, which are issued or renewed after August 1, 1973 for chiropractic services, and after August 1, 1976, for optometric services, and which are issued or renewed after the effective date of this section for services of a registered nurse meeting the requirements of subdivision 3a, by accident and health insurance companies regulated under this chapter, and nonprofit health service plan corporations regulated under chapter 62C.

Subd. 2. **CHIROPRACTIC SERVICES.** All benefits provided by any policy or contract referred to in subdivision 1, relating to expenses incurred for medical treatment or services of a physician ~~shall~~ must also include chiropractic

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treatment and services of a chiropractor to the extent that the chiropractic services and treatment are within the scope of chiropractic licensure.

Subd. 3. **OPTOMETRIC SERVICES.** All benefits provided by any policy or contract referred to in subdivision 1, relating to expenses incurred for medical treatment or services of a physician shall must also include optometric treatment and services of an optometrist to the extent that the optometric services and treatment are within the scope of optometric licensure.

This subdivision is intended to provide equal payment of benefits for optometric treatment and services and is not intended to change or add to the benefits provided for in ~~such~~ those policies or contracts.

Subd. 3a. **NURSING SERVICES.** All benefits provided by a policy or contract referred to in subdivision 1, relating to expenses incurred for medical treatment or services of a duly licensed physician must include services provided by a registered nurse who is licensed pursuant to section 148.171 and who is certified by the profession to engage in advanced nursing practice. "Advanced nursing practice" means the performance of health services by professional nurses who have gained additional knowledge and skills through an organized program of study and clinical experience preparing nurses for advanced practice roles as nurse anesthetists or nurse midwives. The program of study must be beyond the education required for registered nurse licensure and must meet criteria established by the professional nursing organization having authority to certify the registered nurse in advanced nursing practice, and appear on a list established and maintained by the board of nursing through rulemaking.

This subdivision is intended to provide payment of benefits for treatment and services by a licensed registered nurse certified in advanced nursing practice as defined in this subdivision and is not intended to add to the benefits provided for in these policies or contracts.

Subd. 4. **DENIAL OF BENEFITS.** No carrier referred to in subdivision 1 shall may, in the payment of claims to employees in this state, deny benefits payable for services covered by the policy or contract if the services are lawfully performed by a duly licensed chiropractor, licensed optometrist, or a registered nurse meeting the requirements of subdivision 3a.

Approved June 1, 1983

CHAPTER 222 — S.F.No. 267

An act relating to taxation; increasing the amount of reduced valuations required to be maintained as public record; allowing the commissioner discretion in apportioning levies; increasing the amount of reduction in valuation requiring an opportunity for hearing; clarifying the definition of real property for ad valorem purposes; classifying farm rental value data; allowing county auditors to combine legal descriptions over section lines;

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