

bidding process approved or established by the commission, a certificate of need proceeding under section 216B.243 is not required.

(c) A certificate of need proceeding is also not required for an electric power generating plant that has been selected in a bidding process approved or established by the commission, or such other selection process approved by the commission, to satisfy, in whole or in part, the wind power mandate of section 216B.2423 or the biomass mandate of section 216B.2424.

Presented to the governor May 19, 1997

Signed by the governor May 20, 1997, 10:25 a.m.

CHAPTER 199—H.F.No. 257

An act relating to health; establishing licensing requirements for the provision of ambulance service; relocating provisions related to emergency medical services; appropriating money; providing penalties; proposing coding for new law in Minnesota Statutes, chapter 144E; repealing Minnesota Statutes 1996, sections 144.801; 144.802; 144.803; 144.804; and 144.806.

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

EMERGENCY MEDICAL SERVICES REGULATORY BOARD

Section 1. [144E.001] DEFINITIONS.

Subdivision 1. SCOPE. For the purposes of sections 144E.001 to 144E.52, the terms defined in this section have the meanings given them.

Subd. 2. AMBULANCE. "Ambulance" means any vehicle designed or intended for and actually used in providing ambulance service to ill or injured persons or expectant mothers.

Subd. 3. AMBULANCE SERVICE. "Ambulance service" means transportation and treatment which is rendered or offered to be rendered preliminary to or during transportation to, from, or between health care facilities for ill or injured persons or expectant mothers. The term includes all transportation involving the use of a stretcher, unless the person to be transported is not likely to require medical treatment during the course of transport.

Subd. 4. BASE OF OPERATIONS. "Base of operations" means the address at which the physical plant housing ambulances, related equipment, and personnel is located.

Subd. 5. BOARD. "Board" means the emergency medical services regulatory board.

Subd. 6. FIRST RESPONDER. "First responder" means an individual who is registered by the board to perform, at a minimum, basic emergency skills before the arrival

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of a licensed ambulance service, and is a member of an organized service recognized by a local political subdivision whose primary responsibility is to respond to medical emergencies to provide initial medical care before the arrival of a licensed ambulance service.

Subd. 7. LICENSE. "License" means authority granted by the board for the operation of an ambulance service in the state of Minnesota.

Subd. 8. LICENSEE. "Licensee" means a natural person, partnership, association, corporation, or unit of government which possesses an ambulance service license.

Subd. 9. MUNICIPALITY. "Municipality" means any city of any class, however organized, and any town.

Subd. 10. PRIMARY SERVICE AREA. "Primary service area" means the geographic area that can reasonably be served by an ambulance service.

Sec. 2. [144E.05] GENERAL AUTHORITY.

Subdivision 1. GRANTS OR GIFTS. The board may accept grants or gifts of money, property, or services from a person, a public or private entity, or any other source for an emergency medical health purpose within the scope of its statutory authority.

Subd. 2. CONTRACTS. The board may enter into contractual agreements with a person or public or private entity for the provision of statutorily prescribed emergency medical services-related activities by the board. The contract shall specify the services to be provided and the amount and method of reimbursement for the contracted services. Funds generated in a contractual agreement made pursuant to this section are appropriated to the board for purposes of providing the services specified in the contracts.

LIFE SUPPORT TRANSPORTATION SERVICES

Sec. 3. [144E.06] PRIMARY SERVICE AREAS.

The board shall adopt rules defining primary service areas under which the board shall designate each licensed ambulance service as serving a primary service area or areas.

Sec. 4. [144E.07] SUMMARY APPROVAL.

Subdivision 1. ELIMINATING OVERLAP; EXPANSION. An ambulance service may request a change in its primary service area, as established under section 144E.06, to eliminate any overlap in primary service areas or to expand its primary service area to provide service to a contiguous, but undesignated, primary service area. An ambulance service requesting a change in its primary service area must submit a written application to the board on a form provided by the board and must comply with the requirements of this section.

Subd. 2. RETRACTION. An applicant requesting to retract service from a geographic area within its designated primary service area must provide documentation showing that another licensed ambulance service is providing or will provide ambulance coverage within the proposed area of withdrawal.

Subd. 3. OVERLAPPING EXPANSION. An applicant requesting to provide service in a geographic area that is within the primary service area of another licensed ambu-

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lance service or services must submit documentation from the service or services whose primary service areas overlap the proposed expansion area, approving the expansion and agreeing to withdraw any service coverage from the proposed expanded area. The application may include documentation from the public safety answering point coordinator or coordinators endorsing the proposed change.

Subd. 4. NO PRIMARY SERVICE. An applicant requesting to provide service in a geographic area where no primary ambulance service has been designated must submit documentation of approval from the ambulance service or services which are contiguous to the proposed expansion area. The application may include documentation from the public safety answering point coordinator or coordinators endorsing the proposed change. If a licensed ambulance service provides evidence of historically providing 911 ambulance coverage to the undesignated area, it is not necessary to provide documentation from the contiguous ambulance service or services approving the change. At a minimum, a 12-month history of primary ambulance coverage must be included with the application.

Subd. 5. REPORTING. The board shall report any approved change to the local public safety answering point coordinator.

Sec. 5. [144E.10] AMBULANCE SERVICE LICENSING.

Subdivision 1. LICENSE REQUIRED. No natural person, partnership, association, corporation, or unit of government may operate an ambulance service within this state unless it possesses a valid license to do so issued by the board. The license shall specify the base of operations, the primary service area, and the type or types of ambulance service for which the licensee is licensed. The licensee shall obtain a new license if it wishes to expand its primary service area, or to provide a new type or types of service. The cost of licenses shall be in an amount prescribed by the board pursuant to section 144E.05. Licenses shall expire and be renewed in accordance with rules adopted by the board.

Subd. 2. REQUIREMENTS FOR NEW LICENSES. The board shall not issue a license authorizing the operation of a new ambulance service, provision of a new type or types of ambulance service by an existing service, or an expanded primary service area for an existing service unless the requirements of this section and sections 144E.16 and 144E.18 are met.

Sec. 6. [144E.11] AMBULANCE SERVICE APPLICATION PROCEDURE.

Subdivision 1. WRITTEN APPLICATION. Each prospective licensee and each present licensee wishing to offer a new type or types of ambulance service or to expand a primary service area shall make written application for a license to the board on a form provided by the board.

Subd. 2. APPLICATION NOTICE. The board shall promptly send notice of the completed application to each county board, community health board, governing body of a regional emergency medical services system designated under section 144E.50, ambulance service, and municipality in the area in which ambulance service would be provided by the applicant. The board shall publish the notice, at the applicant's expense, in the State Register and in a newspaper in the municipality in which the base of operation is or will be located, or if no newspaper is published in the municipality or if the service is or

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would be provided in more than one municipality, in a newspaper published at the county seat of the county or counties in which the service would be provided.

Subd. 3. COMMENTS. Each municipality, county, community health board, governing body of a regional emergency medical services system, ambulance service, and other person wishing to make recommendations concerning the disposition of the application shall make written recommendations or comments opposing the application to the board within 30 days of the publication of notice of the application in the State Register.

Subd. 4. CONTESTED CASE EXEMPTION; PROCEDURE. (a) If no more than five written comments opposing the application have been received by the board under subdivision 3, and the board has determined, after considering the factors listed under subdivision 6, that the proposed service or expansion of primary service area is needed, the applicant shall be exempt from the contested case hearing process under subdivision 5.

(b) An applicant exempted from a contested case hearing under this subdivision shall furnish additional information, as requested by the board, to support its application. The board shall approve the application and grant a license to the applicant within 30 days after final submission of requested information to the board, and upon a determination by the board that the applicant is in compliance with the rules adopted by the board and with the inspection requirements of section 144E.18.

(c) If an applicant does not comply with the inspection requirements under section 144E.18 within one year of the board's approval of its application, the license shall be denied. The one-year time limit applies to any licensing decision made by the board or to any prior licensing decision made by the commissioner of health or an administrative law judge.

(d) If, after considering the factors under subdivision 6, the board determines that the proposed service or expansion of primary service area is not needed, the case shall be treated as a contested case under subdivision 5, paragraphs (c) to (g).

Subd. 5. CONTESTED CASE; PROCEDURE. (a) If more than five written comments opposing the application are received by the board as specified under subdivision 3, the board shall give the applicant the option of immediately proceeding to a contested case hearing or trying to resolve the objections within 30 days.

(b) If, after considering the factors under subdivision 6, the board determines that the proposed service or expansion of primary service area is not needed, the board shall give the applicant the option of immediately proceeding to a contested case hearing or using up to 30 days to satisfy the board that the proposed service or expansion of primary service area is needed.

(c) The board shall request that the chief administrative law judge appoint an administrative law judge to hold a public hearing in the municipality in which the applicant's base of operation is or will be located:

(1) if more than five opposing comments remain after 30 days;

(2) if, after considering the factors under subdivision 6, the board determines that the proposed service or expansion of primary service area is not needed after 30 days; or

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(3) at the applicant's initial request.

(d) If the applicant's base of operation is located outside of Minnesota, the hearing shall be held at a location within the area in which service would be provided in Minnesota. The public hearing shall be conducted as a contested case hearing under chapter 14. The board shall pay the expenses for the hearing location and the administrative law judge.

(e) The board shall provide notice of the public hearing, at the applicant's expense, in the State Register and in the newspaper or newspapers in which the notice was published under subdivision 2 for two successive weeks at least ten days before the date of the hearing.

(f) The administrative law judge shall:

(1) hold a public hearing as specified in paragraphs (c) and (d);

(2) allow any interested person the opportunity to be heard, to be represented by counsel, and to present oral and written evidence at the public hearing; and

(3) provide a transcript of the hearing at the expense of any individual requesting it.

(g) The administrative law judge shall review and comment upon the application and make written recommendations as to its disposition to the board within 90 days of publication of notice of the hearing in the State Register. In making the recommendations, the administrative law judge shall consider and make written comments as to whether the proposed service or expansion in primary service area is needed, based on consideration of the factors specified in subdivision 6.

Subd. 6. REVIEW CRITERIA. When reviewing an application for licensure, the board and administrative law judge shall consider the following factors:

(1) the relationship of the proposed service or expansion in primary service area to the current community health plan as approved by the commissioner of health under section 145A.12, subdivision 4;

(2) the recommendations or comments of the governing bodies of the counties, municipalities, and regional emergency medical services system designated under section 144E.50 in which the service would be provided;

(3) the deleterious effects on the public health from duplication, if any, of ambulance services that would result from granting the license;

(4) the estimated effect of the proposed service or expansion in primary service area on the public health; and

(5) whether any benefit accruing to the public health would outweigh the costs associated with the proposed service or expansion in primary service area. The administrative law judge shall recommend that the board either grant or deny a license or recommend that a modified license be granted. The reasons for the recommendation shall be set forth in detail. The administrative law judge shall make the recommendations and reasons available to any individual requesting them.

Subd. 7. LICENSING DECISION. After receiving the administrative law judge's report, the board shall approve or deny the application and grant the license within 60

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days if the application is approved, and upon determination by the board, that the applicant is in compliance with the rules adopted by the board and with the inspection requirements of section 144E.18. In approving or denying an application, the board shall consider the administrative law judge's report, the evidence contained in the application, and any hearing record and other applicable evidence. The board's decision shall be based on a consideration of the factors contained in subdivision 6. If the board determines to grant the applicant a license, the applicant must comply with the inspection requirements under 144E.18 within one year of the board's approval of the application or the license will be denied. This one-year time limit applies to any licensing decision by the board or to any prior licensing decision made by the commissioner of health or an administrative law judge.

Subd. 8. **FINAL DECISION.** The board's decision made under subdivision 7 shall be the final administrative decision. Any person aggrieved by the board's decision or action shall be entitled to judicial review in the manner provided in sections 14.63 to 14.69.

Sec. 7. [144E.12] LICENSURE OF AIR AMBULANCE SERVICES.

Except for submission of a written application to the board on a form provided by the board, an application to provide air ambulance service shall be exempt from the provisions of section 144E.11. A license issued pursuant to this section need not designate a primary service area. No license shall be issued under this section unless the board determines that the applicant complies with sections 144E.10, 144E.11, subdivision 1, 144E.16, and 144E.18 and the requirements of applicable federal and state statutes and rules governing aviation operations within the state.

Sec. 8. [144E.13] TEMPORARY LICENSE.

The board may issue a temporary license when a primary service area would be derived of ambulance service. The temporary license shall expire when an applicant has been issued a regular license under this section. The temporary license shall be valid no more than six months from date of issuance. A temporary licensee must provide evidence that the licensee will meet the requirements of section 144E.16 and the rules adopted under this chapter.

Sec. 9. [144E.14] TRANSFER OF LICENSE OR OWNERSHIP.

A license, or the ownership of a licensed ambulance service, may be transferred only upon approval of the board, based upon a finding that the proposed licensee or proposed new owner of a licensed ambulance service meets or will meet the requirements of section 144E.16. If the proposed transfer would result in an addition of a new base of operations, expansion of the service's primary service area, or provision of a new type or types of ambulance service, the board shall require the prospective licensee or owner to comply with section 144E.11. The board may approve the license or ownership transfer prior to completion of the application process described in section 144E.11 upon obtaining written assurances from the proposed licensee or proposed new owner that no expansion of the service's primary service area or provision of a new type or types of ambulance service will occur during the processing of the application. If requesting a transfer of its base of operations, an applicant must comply with the requirements of section 144E.15.

Sec. 10. [144E.15] RELOCATION OF BASE OF OPERATIONS.

To relocate the base of operations to another municipality or township within its primary service area, a licensee must provide written notification to the board prior to relo-

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cating. The board shall review the proposal to determine if relocation would adversely affect service coverage within the primary service area. The applicant must furnish any additional information requested by the board to support its proposed transfer. If the board does not approve the relocation proposal, the licensee must comply with the application requirements for a new license under section 144E.11.

Sec. 11. [144E.16] AMBULANCE SERVICE REQUIREMENTS.

Subdivision 1. DRIVERS AND ATTENDANTS. No publicly or privately owned basic ambulance service shall be operated in the state unless its drivers and attendants possess a current emergency care course certificate authorized by rules adopted by the board according to chapter 14. Until August 1, 1997, a licensee may substitute a person currently certified by the American Red Cross in advanced first aid and emergency care or a person who has successfully completed the United States Department of Transportation first responder curriculum, and who has also been trained to use basic life support equipment as required by rules adopted by the board under subdivision 4 for one of the persons on a basic ambulance, provided that person will function as the driver while transporting a patient. The board may grant a variance to allow a licensed ambulance service to use attendants certified by the American Red Cross in advanced first aid and emergency care and, until August 1, 1997, to use attendants who have successfully completed the United States Department of Transportation first responder curriculum, and who have been trained to use basic life support equipment as required by rules adopted by the board under subdivision 4, in order to ensure 24-hour emergency ambulance coverage.

Subd. 2. EQUIPMENT AND STAFF. (a) Every ambulance offering ambulance service shall be equipped as required by the board and carry at least the minimal equipment necessary for the type of service to be provided as determined by standards adopted by the board pursuant to subdivision 3.

(b) Each ambulance service shall offer service 24 hours per day every day of the year, unless otherwise authorized by the board.

(c) Each ambulance while transporting a patient shall be staffed by at least a driver and an attendant, according to subdivision 1. An ambulance service may substitute for the attendant a physician, osteopath, registered nurse, or physician's assistant who is qualified by training to use appropriate equipment in the ambulance. Advanced life support procedures including, but not limited to, intravenous fluid administration, drug administration, endotracheal intubation, cardioversion, defibrillation, and intravenous access may be performed by the physician, osteopath, registered nurse, or physician's assistant who has appropriate training and authorization, and who provides all of the equipment and supplies not normally carried on basic ambulances.

Subd. 3. DENIAL OF SERVICE PROHIBITED. An ambulance service shall not deny emergency ambulance service to any person needing emergency ambulance service because of inability to pay or due to source of payment for services if the need develops within the licensee's primary service area. Transport for the patient may be limited to the closest appropriate emergency medical facility.

Subd. 4. TYPES OF SERVICES TO BE REGULATED. (a) The board may adopt rules needed to regulate ambulance services in the following areas:

- (1) applications for licensure;

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- (2) personnel qualifications and staffing standards;
- (3) quality of life support treatment;
- (4) restricted treatments and procedures;
- (5) equipment standards;
- (6) ambulance standards;
- (7) communication standards, equipment performance and maintenance, and radio frequency assignments;
- (8) advertising;
- (9) scheduled ambulance services;
- (10) ambulance services in time of disaster;
- (11) basic, intermediate, advanced, and refresher emergency care course programs;
- (12) continuing education requirements;
- (13) trip reports;
- (14) license fees, vehicle fees, and expiration dates; and
- (15) waivers and variances.

(b) These rules shall apply to the following types of ambulance service:

(1) basic ambulance service that provides a level of care to ensure that life-threatening situations and potentially serious injuries can be recognized, patients will be protected from additional hazards, basic treatment to reduce the seriousness of emergency situations will be administered, and patients will be transported to an appropriate medical facility for treatment;

(2) intermediate ambulance service that provides (i) basic ambulance service, and (ii) intravenous infusions or defibrillation or both;

(3) advanced ambulance service that provides (i) basic ambulance service, and (ii) advanced airway management, defibrillation, and administration of intravenous fluids and pharmaceuticals. Vehicles of advanced ambulance service licensees not equipped or staffed at the advanced ambulance service level shall not be identified to the public as capable of providing advanced ambulance service;

(4) specialized ambulance service that provides basic, intermediate, or advanced service as designated by the board, and is restricted by the board to (i) less than 24 hours of every day, (ii) designated segments of the population, or (iii) certain types of medical conditions; and

(5) air ambulance service, that includes fixed-wing and helicopter, and is specialized ambulance service.

Until rules are promulgated, the current provisions of Minnesota Rules shall govern these services.

Subd. 5. LOCAL GOVERNMENT'S POWERS. (a) Local units of government may, with the approval of the board, establish standards for ambulance services which

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impose additional requirements upon such services. Local units of government intending to impose additional requirements shall consider whether any benefit accruing to the public health would outweigh the costs associated with the additional requirements.

(b) Local units of government that desire to impose additional requirements shall, prior to adoption of relevant ordinances, rules, or regulations, furnish the board with a copy of the proposed ordinances, rules, or regulations, along with information that affirmatively substantiates that the proposed ordinances, rules, or regulations: (1) will in no way conflict with the relevant rules of the board; (2) will establish additional requirements tending to protect the public health; (3) will not diminish public access to ambulance services of acceptable quality; and (4) will not interfere with the orderly development of regional systems of emergency medical care.

(c) The board shall base any decision to approve or disapprove local standards upon whether or not the local unit of government in question has affirmatively substantiated that the proposed ordinances, rules, or regulations meet the criteria specified in paragraph (b).

Subd. 6. DRIVERS. An ambulance service vehicle shall be staffed by a driver possessing a current Minnesota driver's license or equivalent and whose driving privileges are not under suspension or revocation by any state. If red lights and siren are used, the driver must also have completed training approved by the board in emergency driving techniques. An ambulance transporting patients must be staffed by at least two persons who are trained according to subdivision 1 or section 144E.25, one of whom may be the driver. A third person serving as driver shall be trained according to this subdivision.

Sec. 12. [144E.30] PENALTIES; DISCIPLINARY ACTION.

Subdivision 1. SUSPENSION; REVOCATION; NONRENEWAL. The board may initiate a contested case hearing upon reasonable notice to suspend, revoke, refuse to renew, or place conditions on the license of a licensee upon finding that the licensee has violated a provision of this chapter or rules adopted under this chapter, or has ceased to provide the service for which the licensee is licensed. The board may initiate a contested case hearing upon reasonable notice to suspend, revoke, refuse to renew, or place conditions on the credential of a person credentialed by the board upon finding that the person credentialed by the board has violated sections 144E.06 to 144E.30 or rules adopted thereunder. The board may also initiate a contested case hearing upon reasonable notice to suspend, revoke, refuse to renew, or place conditions on a training program approved by the board upon finding that the training program has violated sections 144E.06 to 144E.30, or rules adopted thereunder.

Subd. 2. TEMPORARY SUSPENSION. (a) In addition to any other remedy provided by law, the board may temporarily suspend the license of a licensee, credential of a person, or approval of a training program after conducting a preliminary inquiry to determine if the board believes that the licensee, person, or training program has violated a statute or rule that the board is empowered to enforce and that the continued provision of service by the licensee, person, or training program would create an imminent risk to public health or harm to others.

(b) The order prohibiting the licensee, person credentialed by the board, or training program approved by the board from providing ambulance service, medical care, or

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training shall give notice of the right to a hearing pursuant to this subdivision and shall state the reasons for the entry of the order.

(c) Service of the order is effective when the order is served on the licensee, person credentialed by the board, or representative of the training program personally or by certified mail, which is complete upon receipt, refusal, or return for nondelivery to the most recent address provided to the board for the licensee, person, or training program.

(d) At the time the board issues a temporary suspension order, the board shall schedule a hearing to be held before a group of its members designated by the board which shall begin no later than 60 days after issuance of the temporary suspension order or within 15 working days of the date of the board's receipt of a request for hearing by a licensee, person credentialed by the board, or training program approved by the board on the sole issue of whether there is a reasonable basis to continue, modify, or lift the temporary suspension. This hearing is not subject to chapter 14. Evidence presented by the board, licensee, person credentialed by the board, or training program approved by the board must be in the form of an affidavit. The licensee, the person credentialed by the board, a representative of the training program, or a counsel of record may appear for oral argument.

(e) Within five working days of the hearing, the board shall issue its order and, if the suspension is continued, schedule a contested case hearing within 30 days of the issuance of the order. The administrative law judge shall issue a report and recommendation within 30 days after the closing of the contested case hearing record. The board shall issue a final order within 30 days after receipt of the administrative law judge's report.

Subd. 3. COOPERATION DURING INVESTIGATION. A licensee, person credentialed by the board, training program approved by the board, or agent of one who is the subject of an investigation or who is questioned in connection with an investigation by or on behalf of the board shall cooperate fully with the investigation. Cooperation includes responding fully and promptly to any question raised by or on behalf of the board relating to the subject of the investigation, executing all releases requested by the board, providing copies of ambulance service records, as reasonably requested by the board to assist it in its investigation, and appearing at conferences or hearings scheduled by the board. The board shall pay reasonable costs for copies requested.

Subd. 4. INJUNCTIVE RELIEF. In addition to any other remedy provided by law, the board may bring an action for injunctive relief in the district court in Hennepin county or, at the board's discretion, in the district court in the county in which a violation of any statute, rule, or order that the board is empowered to enforce or issue, has occurred, to enjoin the violation.

Subd. 5. SUBPOENA POWER. The board may, as part of an investigation to determine whether a serious public health threat exists, issue subpoenas to require the attendance and testimony of witnesses and production of books, records, correspondence, and other information relevant to any matter involved in the investigation. The board or the board's designee may administer oaths to witnesses or take their affirmation. The subpoenas may be served upon any person named therein anywhere in the state by any person authorized to serve subpoenas or other processes in civil actions of the district courts. If a person to whom a subpoena is issued does not comply with the subpoena, the board may apply to the district court in any district and the court shall order the person to com-

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ply with the subpoena. Failure to obey the order of the court may be punished by the court as contempt of court. No person may be compelled to disclose privileged information as described in section 595.02, subdivision 1. All information pertaining to individual medical records obtained under this section shall be considered health data under section 13.38. All other information is considered public data unless otherwise protected under the Minnesota data practices act or other specific law. The fees for the service of a subpoena must be paid in the same manner as prescribed by law for service of process used out of a district court. Subpoenaed witnesses must receive the same fees and mileage as in civil actions.

Subd. 6. PENALTIES. Any person who violates a provision of sections 144E.06 to 144E.30 is guilty of a misdemeanor. The board may issue fines to ensure compliance with sections 144E.06 to 144E.30 and rules adopted thereunder. The board shall adopt rules to implement a schedule of fines.

Sec. 13. [144E.27] FIRST RESPONDER REGISTRATION.

Subdivision 1. TRAINING PROGRAMS. Curriculum for initial and refresher training programs must meet the current standards of the United States Department of Transportation first responder curriculum or its equivalent as determined by the board.

Subd. 2. REGISTRATION. The board shall register the following persons as first responders:

(1) a person who successfully completes a board-approved initial or refresher first responder training program. Registration under this clause is valid for two years and expires at the end of the month in which the registration was issued; or

(2) a person who is credentialed as a first responder by the National Registry of Emergency Medical Technicians. Registration under this clause expires the same day as the National Registry credential.

Subd. 3. RENEWAL. (a) The board may renew the registration of a first responder who:

(1) successfully completes a board-approved refresher course; and

(2) submits a completed renewal application to the board before the registration expiration date.

(b) The board may renew the lapsed registration of a first responder who:

(1) successfully completes a board-approved refresher course; and

(2) submits a completed renewal application to the board within 12 months after the registration expiration date.

Subd. 4. EXPIRATION. A first responder registration issued by the board or the commissioner of health before August 1, 1997, expires in 1999 at the end of the month in which it was issued.

Sec. 14. INSTRUCTION TO REVISOR.

(a) The revisor of statutes shall renumber each section of Minnesota Statutes specified in column A with the number set forth in column B. The revisor shall also make necessary cross-reference changes consistent with the renumbering.

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<u>Column A</u>	<u>Column B</u>
<u>144.807</u>	<u>144E.17</u>
<u>144.808</u>	<u>144E.18</u>
<u>144.809</u>	<u>144E.25</u>
<u>144.8091</u>	<u>144E.35</u>
<u>144.8093</u>	<u>144E.50</u>
<u>144.8095</u>	<u>144E.52</u>
<u>144C.01</u>	<u>144E.40</u>
<u>144C.02</u>	<u>144E.41</u>
<u>144C.03</u>	<u>144E.42</u>
<u>144C.05</u>	<u>144E.43</u>
<u>144C.06</u>	<u>144E.44</u>
<u>144C.07</u>	<u>144E.45</u>
<u>144C.08</u>	<u>144E.46</u>
<u>144C.09</u>	<u>144E.47</u>
<u>144C.10</u>	<u>144E.48</u>

(b) In each section of Minnesota Statutes referred to in column A, the revisor of statutes shall delete the reference in column B and insert the reference in column C.

<u>Column A</u>	<u>Column B</u>	<u>Column C</u>
<u>62J.25</u>	<u>144.801, subd. 4</u>	<u>144E.001, subd. 3</u>
<u>62J.48</u>	<u>144.802</u>	<u>144E.10</u>
<u>116.76, subd. 9</u>	<u>144.802</u>	<u>144E.10</u>
<u>144.761, subd. 4</u>	<u>144.801 to 144.8091</u>	<u>144E.001 to 144E.35</u>
<u>144.761, subd. 5</u>	<u>144.801 to 144.8091</u>	<u>144E.001 to 144E.35</u>
<u>144.807, subd. 1</u>	<u>144.801 to 144.806</u>	<u>144E.001 to 144E.16</u>
<u>144.808</u>	<u>144.801 to 144.804</u>	<u>144E.001 to 144E.16</u>
<u>144.809</u>	<u>144.804, subd. 7</u>	<u>144E.16, subd. 6</u>
<u>144.8091</u>	<u>144.804</u>	<u>144E.16</u>
<u>144C.02</u>	<u>144.804</u>	<u>144E.16</u>
<u>145A.02</u>	<u>144.804</u>	<u>144E.16</u>
<u>147A.09</u>	<u>144.804</u>	<u>144E.16</u>
<u>168.012, subd. 1</u>	<u>144.802</u>	<u>144E.10</u>
<u>174.29, subd. 1</u>	<u>144.801, subd. 4</u>	<u>144E.001, subd. 3</u>
<u>174.315, subd. 1</u>	<u>144.801, subd. 4</u>	<u>144E.001, subd. 3</u>
<u>297A.25, subd. 44</u>	<u>144.802</u>	<u>144E.10</u>
<u>297B.03</u>	<u>144.802</u>	<u>144E.10</u>
<u>353.64</u>	<u>144.804, subd. 3</u>	<u>144E.16, subd. 4</u>
<u>383B.221, subd. 2</u>	<u>144.801 to 144.8091</u>	<u>144E.001 to 144E.35</u>
<u>609.7495, subd. 1</u>	<u>144.801</u>	<u>144E.001</u>

Sec. 15. **REPEALER.**

Minnesota Statutes 1996, sections 144.801; 144.802; 144.803; 144.804; and 144.806, are repealed.

New language is indicated by underline, deletions by ~~strikeout~~.

Sec. 16. EFFECTIVE DATE.

Section 2 is effective the day following final enactment.

Presented to the governor May 20, 1997

Signed by the governor May 22, 1997, 11:05 a.m.

CHAPTER 200—H.F.No. 2158

An act relating to the organization and operation of state government; appropriating money for economic development and certain agencies of state government; establishing and modifying certain programs; providing for regulation of certain activities and practices; standardizing certain licensing service fees; establishing and modifying certain fees; modifying housing programs; establishing a task force; providing for a manufactured home park to be a conditional use; requiring reports; modifying definitions; amending Minnesota Statutes 1996, sections 44A.01, subdivision 2; 60A.23, subdivision 8; 60A.71, by adding a subdivision; 60K.06, subdivision 2; 65B.48, subdivision 3; 72B.04, subdivision 10; 79.253, subdivision 1; 79.255, by adding a subdivision; 82.21, subdivision 1; 82B.09, subdivision 1; 115B.03, subdivision 5; 115C.021, by adding a subdivision; 115C.03, subdivision 9; 115C.08, subdivision 4; 115C.09, subdivision 3, and by adding a subdivision; 115C.13; 116J.01, subdivision 5; 116J.552, subdivision 4; 116J.615, subdivision 1; 116L.04, subdivision 1, and by adding a subdivision; 116O.05, by adding a subdivision; 116O.122, subdivision 1; 155A.045, subdivision 1; 176.181, subdivision 2a; 268.38, subdivision 7; 268.672, subdivision 6, and by adding subdivisions; 268.673, subdivisions 3, 4a, and 5; 268.6751, subdivision 1; 268.677, subdivision 1; 268.681; 268.917; 268A.15, subdivisions 2, 6, and by adding subdivisions; 298.22, by adding a subdivision; 326.86, subdivision 1; 394.25, by adding a subdivision; 446A.04, subdivision 5; 446A.081, subdivisions 1, 4, and 9; 446A.12, subdivision 1; 462.357, by adding a subdivision; 462A.05, subdivisions 14d, 30, 39, and by adding a subdivision; 462A.13; 462A.201, subdivision 2; 462A.205; 462A.206, subdivisions 2 and 4; 462A.207, subdivisions 1, 2, 3, 4, and 6; 462A.21, subdivision 12a; and 469.305, subdivision 1; Laws 1997, chapter 85, article 1, section 39, subdivision 4; proposing coding for new law in Minnesota Statutes, chapters 45; 79; 116J; 116L; 268; 366; 462A; and 469; repealing Minnesota Statutes 1996, sections 116J.581; 116J.990, subdivision 7; 268.39; 268.672, subdivision 4; 268.673, subdivision 6; 268.676; 268.677, subdivisions 2 and 3; 268.678; 268.679, subdivision 3; 462A.05, subdivision 20; 462A.206, subdivision 5; and 462A.21, subdivisions 4k, 12, and 14.

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

ARTICLE 1
APPROPRIATIONS
Section 1. ECONOMIC DEVELOPMENT; APPROPRIATIONS.

The sums shown in the columns marked "APPROPRIATIONS" are appropriated from the general fund, or another named fund, to the agencies and for the purposes speci-

New language is indicated by underline, deletions by strikeout.