CHAPTER 278–H.F.No. 2555

An act relating to state government; implementing changes to the sunset review process and permitting the Sunset Advisory Commission to enter into contracts; requiring a review of the Emergency Medical Services Regulatory Board, Council on Affairs of Chicano/Latino People, Council on Black Minnesotans, Council on Asian-Pacific Minnesotans, Indian Affairs Council, and the Council on Disabilities in 2014; requiring a financial audit of the Council on Black Minnesotans; requiring a review of the sunset process in 2018; changing certain agency requirements; requiring posting of convictions of felonies, gross misdemeanors, malpractice judgements, and disciplinary or corrective actions for a regulated practitioner; requiring a study to establish uniform criminal history background checks for regulated practitioners; requiring a report on conduct constituting grounds for discipline and penalties for failure to report; establishing a work group to evaluate the effectiveness of the Medical Practice Act for certain circumstances; requiring certain other reports; requesting a legislative audit of the Board of Medical Practice; abolishing the Combative Sports Commission and transferring combative sports duties to the commissioner of labor and industry; establishing a Combative Sports Advisory Council; changing provisions for health-related licensing boards; appropriating money; amending Minnesota Statutes 2010, sections 3.922, by adding a subdivision; 3.9223, subdivision 7; 3.9225, subdivision 7; 3.9226, subdivision 7; 147.01, subdivision 4; 147.111, by adding a subdivision; 148.102, by adding a subdivision; 148.261, subdivision 1; 148.263, by adding a subdivision; 148.5194, subdivision 5; 148.6445, subdivision 10; 148B.07, by adding a subdivision; 148C.095, by adding a subdivision; 148E.285, by adding a subdivision; 150A.13, by adding a subdivision; 153.24, by adding a subdivision; 153A.17; 214.06, subdivisions 1, 1a, by adding a subdivision; 214.09, by adding a subdivision; 214.103; 341.21, by adding a subdivision; 341.23; 341.27; 341.271; 341.28, subdivision 1; 341.37; Minnesota Statutes 2011 Supplement, sections 3D.04; 3D.06; 3D.21, subdivisions 2, 4; proposing coding for new law in Minnesota Statutes, chapters 3D; 16B; 214; 341; repealing Minnesota Statutes 2010, sections 138A.01; 138A.02; 138A.03; 138A.04; 138A.05; 138A.06; 341.21, subdivisions 3, 4a; 341.22; 341.24; 341.26; Minnesota Statutes 2011 Supplement, section 3D.21, subdivision 1.

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

ARTICLE 1

SUNSET REVIEW

Section 1. Minnesota Statutes 2011 Supplement, section 3D.04, is amended to read:

3D.04 STAFF; CONTRACTS.
The Legislative Coordinating Commission shall provide staff and administrative services for the commission. The Sunset Advisory Commission may enter into contracts for evaluations of agencies under review.

Sec. 2. Minnesota Statutes 2011 Supplement, section 3D.06, is amended to read:

**3D.06 AGENCY REPORT TO COMMISSION.**

(a) Before September 1 of the odd-numbered year before the year in which a state agency is subject to sunset review, the agency commissioner shall report to the commission:

1. information regarding the application to the agency of the criteria in section 3D.10;
2. a priority-based an outcome-based budget for the agency;
3. an inventory of all boards, commissions, committees, and other entities related to the agency; and
4. any other information that the agency commissioner considers appropriate or that is requested by the commission.

The September 1 deadline in this section does not apply in 2011.

(b) The outcome-based budget required by paragraph (a) must be for each of the agency's activities, as the term activity is used in state budgeting and must:

1. identify the statutory authority for the activity;
2. include one or more performance goals and associated performance measures that measure outcomes, not inputs;
3. discuss the extent to which each performance measure is reliable and verifiable, and can be accurately measured;
4. discuss the extent to which the agency has met each performance measure, and the extent to which the budget devoted to the activity has permitted or prevented the agency from meeting its performance goals;
5. discuss efficiencies that would allow the agency to better meet its goals; and
6. identify agencies at any level of government or private sector entities that provide the same activities, and describe agency interaction with the activities provided by others.

Sec. 3. Minnesota Statutes 2011 Supplement, section 3D.21, subdivision 2, is amended to read:

Subd. 2. **Group 2.** The following agencies are sunset and, except as provided in section 3D.14, expire on June 30, 2014: Department of Health, Department of Human Services, Department of Human Rights, Department of Education, Board of Teaching, Minnesota Office of Higher Education, Emergency Medical Services Regulatory Board, Council on Affairs of Chicano/Latino People, Council on Black Minnesotans, Council on Asian-Pacific Minnesotans, Indian Affairs Council, and all advisory groups associated with these agencies.

Sec. 4. Minnesota Statutes 2011 Supplement, section 3D.21, subdivision 4, is amended to read:
Subd. 4. **Group 4.** The following agencies are sunset and, except as provided in section 3D.14, expire on June 30, 2018: Department of Corrections, Department of Public Safety, Department of Transportation, Peace Officer Standards and Training Board, Capitol Area Architectural and Planning Board, Amateur Sports Commission, all health-related licensing boards listed in section 214.01, Council on Disability, and all advisory groups associated with these agencies.

Sec. 5. **COUNCIL ON BLACK MINNESOTANS.**

The Office of the Legislative Auditor should conduct a financial audit of the Council on Black Minnesotans by December 1, 2013. In its next report to the Sunset Advisory Commission, the Council on Black Minnesotans must respond to any issues raised in this audit and to issues raised in previous audits.

Sec. 6. **REVIEW OF SUNSET PROCESS.**

The Office of the Legislative Auditor is requested to conduct a review of the sunset process in Minnesota Statutes, chapter 3D. The review should be conducted in 2018. The legislative auditor is requested to present the result of the review in a report to the Legislative Audit Commission and Sunset Advisory Commission.

Sec. 7. **REPEALER.**

Minnesota Statutes 2011 Supplement, section 3D.21, subdivision 1, is repealed.

**EFFECTIVE DATE.** This section is effective the day following final enactment.

**ARTICLE 2**

**ADMINISTRATIVE PROCEDURES AND FEES**

Section 1. Minnesota Statutes 2010, section 3.922, is amended by adding a subdivision to read:

Subd. 11. **Report.** The council shall prepare and submit a report to the governor and legislature by November 15 of each year. The report shall summarize the activities of the council since its last report, list receipts and expenditures, identify the major problems and issues confronting American Indian people, make recommendations to address issues, and list the specific objectives that the council seeks to attain during the biennium. The council shall report on outcome measures.

Sec. 2. Minnesota Statutes 2010, section 3.9223, subdivision 7, is amended to read:

Subd. 7. **Report.** The council shall prepare and distribute submit a report to the governor and legislature by November 15 of each even-numbered year. The report shall summarize the activities of the council since its last report, list receipts and expenditures, identify the major problems and issues confronting Chicano/Latino people, make recommendations to address issues, and list the specific objectives that the council seeks to attain during the next biennium. The council shall report on outcome measures.

Sec. 3. Minnesota Statutes 2010, section 3.9225, subdivision 7, is amended to read:
Subd. 7. **Report.** The council shall prepare and distribute submit a report to the governor and legislature by November 15 of each even-numbered year. The report shall summarize the activities of the council since its last report, list receipts and expenditures, identify the major problems and issues confronting Black people, make recommendations to address issues, and list the specific objectives which the council seeks to attain during the next biennium. The council shall report on outcome measures.

Sec. 4. Minnesota Statutes 2010, section 3.9226, subdivision 7, is amended to read:

Subd. 7. **Report.** The council shall prepare and distribute submit a report to the governor and legislature by November 15 of each even-numbered year. The report shall summarize the activities of the council since its last report, list receipts and expenditures, identify the major problems and issues confronting Asian-Pacific people, make recommendations to address issues, and list the specific objectives that the council seeks to attain during the next biennium. The council shall report on outcome measures.

Sec. 5. **[3D.045] COORDINATION WITH LEGISLATIVE AUDITOR.**

To the extent possible, the commission and the Office of the Legislative Auditor shall align their work so that audits and program evaluations conducted by the Office of the Legislative Auditor can inform the work of the commission. The commission may request the Office of the Legislative Auditor to provide updates on financial audits and program evaluations the Office of the Legislative Auditor has prepared on agencies scheduled for Sunset Advisory Commission review.

Sec. 6. **[3D.065] REPORT ON PERSONNEL.**

By September 1 of the odd-numbered year before the year in which a state agency is subject to sunset review, the commissioner of management and budget must report to the Sunset Advisory Commission on the number of full-time equivalent employees and the salary structure for each agency under review.

Sec. 7. **[16B.371] ASSISTANCE TO SMALL AGENCIES.**

(a) The commissioner may provide administrative support services to small agencies. To promote efficiency and cost-effective use of state resources, and to improve financial controls, the commissioner may require a small agency to receive administrative support services through the Department of Administration or through another agency designated by the commissioner. Services subject to this section include finance, accounting, payroll, purchasing, human resources, and other services designated by the commissioner. The commissioner may determine what constitutes a small agency for purposes of this section. The commissioner, in consultation with the commissioner of management and budget and small agencies, shall evaluate small agencies' needs for administrative support services. If the commissioner provides administrative support services to a small agency, the commissioner must enter into a service level agreement with the agency, specifying the services to be provided and the costs and anticipated outcomes of the services.

(b) The Chicano Latino Affairs Council, the Council on Black Minnesotans, the Council on Asian-Pacific Minnesotans, the Indian Affairs Council, and the Minnesota State Council on Disability must use the services specified in paragraph (a).

(c) The commissioner of administration may assess agencies for services it provides under this section. The amounts assessed are appropriated to the commissioner.
(d) For agencies covered in this section, the commissioner has the authority to require
the agency to comply with applicable state finance, accounting, payroll, purchasing, and
human resources policies. The agencies served retain the ownership and responsibility for
spending decisions and for ongoing implementation of appropriate business operations.

Sec. 8. Minnesota Statutes 2010, section 147.01, subdivision 4, is amended to read:

Subd. 4. Disclosure. Subject to the exceptions listed in this subdivision, all
communications or information received by or disclosed to the board relating to any
person or matter subject to its regulatory jurisdiction are confidential and privileged and
any disciplinary hearing shall be closed to the public.

(a) Upon application of a party in a proceeding before the board under section
147.091, the board shall produce and permit the inspection and copying, by or on behalf of
the moving party, of any designated documents or papers relevant to the proceedings, in
accordance with the provisions of rule 34, Minnesota Rules of Civil Procedure.

(b) If the board takes corrective action or imposes disciplinary measures of any kind,
whether by contested case or by settlement agreement, the name and business address of
the licensee, the nature of the misconduct, and the action taken by the board are public
data. If disciplinary action is taken by settlement agreement, the entire agreement is public
data. The board shall decide disciplinary matters, whether by settlement or by contested
case, by roll call vote. The votes are public data.

(c) The board shall exchange information with other licensing boards, agencies, or
departments within the state, as required under section 214.10, subdivision 8, paragraph
(c), and may release information in the reports required under section 147.02, subdivision
6.

(d) The board shall upon request furnish to a person who made a complaint, or the
alleged victim of a violation of section 147.091, subdivision 1, paragraph (t), or both, a
description of the activities and actions of the board relating to that complaint, a summary
of the results of an investigation of that complaint, and the reasons for actions taken
by the board.

(e) A probable cause hearing held pursuant to section 147.092 shall be closed to the
public, except for the notices of hearing made public by operation of section 147.092.

(f) Findings of fact, conclusions, and recommendations issued by the administrative
law judge, and transcripts of oral arguments before the board pursuant to a contested case
proceeding in which an administrative law judge found a violation of section 147.091,
subdivision 1, paragraph (t), are public data.

**EFFECTIVE DATE.** This section is effective for all corrective action taken on
or after August 1, 2012.

Sec. 9. Minnesota Statutes 2010, section 147.111, is amended by adding a subdivision
to read:

Subd. 10. Failure to report. On or after August 1, 2012, any person, health care
facility, business, or organization that fails to report as required under subdivisions 2 to 6
shall be subject to civil penalties for failing to report as required by law.

**EFFECTIVE DATE.** This section is effective August 1, 2012.
Sec. 10. Minnesota Statutes 2010, section 148.102, is amended by adding a subdivision to read:

Subd. 8. Failure to report. On or after August 1, 2012, any person or insurer that fails to report as required under subdivisions 2 to 4 shall be subject to civil penalties for failing to report as required by law.

EFFECTIVE DATE. This section is effective August 1, 2012.

Sec. 11. Minnesota Statutes 2010, section 148.261, subdivision 1, is amended to read:

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

(18) Violating a rule adopted by the board, an order of the board, or a state or federal law relating to the practice of professional, advanced practice registered, or practical nursing, or a state or federal narcotics or controlled substance law.
(19) Knowingly providing false or misleading information that is directly related to the care of that patient unless done for an accepted therapeutic purpose such as the administration of a placebo.

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

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

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

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

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

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

(22) Practicing outside the specific field of nursing practice for which an advanced practice registered nurse is certified unless the practice is authorized under section 148.284.

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

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

(25) Failure to inform the board of the person's certification status as a nurse anesthetist, nurse-midwife, nurse practitioner, or clinical nurse specialist.

(26) Engaging in clinical nurse specialist practice, nurse-midwife practice, nurse practitioner practice, or registered nurse anesthetist practice without current certification by a national nurse certification organization acceptable to the board, except during the period between completion of an advanced practice registered nurse course of study and certification, not to exceed six months or as authorized by the board.

(27) Engaging in conduct that is prohibited under section 145.412.

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

Sec. 12. Minnesota Statutes 2010, section 148.263, is amended by adding a subdivision to read:

Subd. 7. Failure to report. On or after August 1, 2012, any person, institution, insurer, or organization that fails to report as required under subdivisions 2 to 5 shall be subject to civil penalties for failing to report as required by law.

**EFFECTIVE DATE.** This section is effective August 1, 2012.

Sec. 13. Minnesota Statutes 2010, section 148.5194, subdivision 5, is amended to read:
Subd. 5. **Nonrefundable Use of fees.** All fees are nonrefundable. The commissioner shall only use fees collected under this section for the purposes of administering this chapter. The legislature must not transfer money generated by these fees from the state government special revenue fund to the general fund. Surcharges collected by the commissioner of health under section 16E.22 are not subject to this subdivision.

Sec. 14. Minnesota Statutes 2010, section 148.6445, subdivision 10, is amended to read:

Subd. 10. **Nonrefundable Use of fees.** All fees are nonrefundable. The commissioner shall only use fees collected under this section for the purposes of administering this chapter. The legislature must not transfer money generated by these fees from the state government special revenue fund to the general fund. Surcharges collected by the commissioner of health under section 16E.22 are not subject to this subdivision.

Sec. 15. Minnesota Statutes 2010, section 148B.07, is amended by adding a subdivision to read:

Subd. 10. **Failure to report.** On or after August 1, 2012, any person, institution, insurer, or organization that fails to report as required under subdivisions 2 to 6 shall be subject to civil penalties for failing to report as required by law.

**EFFECTIVE DATE.** This section is effective August 1, 2012.

Sec. 16. Minnesota Statutes 2010, section 148C.095, is amended by adding a subdivision to read:

Subd. 8. **Failure to report.** On or after August 1, 2012, any person, institution, insurer, or organization that fails to report as required under subdivisions 2 to 5 shall be subject to civil penalties for failing to report as required by law.

**EFFECTIVE DATE.** This section is effective August 1, 2012.

Sec. 17. Minnesota Statutes 2010, section 148E.285, is amended by adding a subdivision to read:

Subd. 4. **Failure to report.** On or after August 1, 2012, any person, institution, or organization that fails to report as required under subdivisions 1 and 2 shall be subject to civil penalties for failing to report as required by law.

**EFFECTIVE DATE.** This section is effective August 1, 2012.

Sec. 18. Minnesota Statutes 2010, section 150A.13, is amended by adding a subdivision to read:

Subd. 10. **Failure to report.** On or after August 1, 2012, any person, institution, insurer, or organization that fails to report as required under subdivisions 2 to 6 shall be subject to civil penalties for failing to report as required by law.

**EFFECTIVE DATE.** This section is effective August 1, 2012.

Sec. 19. Minnesota Statutes 2010, section 153.24, is amended by adding a subdivision to read:
Subd. 8. **Failure to report.** On or after August 1, 2012, any person, institution, or insurer that fails to report as required under subdivisions 2 to 5 shall be subject to civil penalties for failing to report as required by law.

**EFFECTIVE DATE.** This section is effective August 1, 2012.

Sec. 20. Minnesota Statutes 2010, section 153A.17, is amended to read:

**153A.17 EXPENSES; FEES.**

(a) The expenses for administering the certification requirements, including the complaint handling system for hearing aid dispensers in sections 153A.14 and 153A.15, and the Consumer Information Center under section 153A.18, must be paid from initial application and examination fees, renewal fees, penalties, and fines. The commissioner shall only use fees collected under this section for the purposes of administering this chapter. The legislature must not transfer money generated by these fees from the state government special revenue fund to the general fund. Surcharges collected by the commissioner of health under section 16E.22 are not subject to this paragraph.

(b) The fees are as follows:

(1) the initial and annual renewal certification application fee is $600;

(2) the initial examination fee for the written portion is $500, and for each time it is taken, thereafter;

(3) the initial examination fee for the practical portion is $1,200, and $600 for each time it is taken, thereafter; for individuals meeting the requirements of section 148.515, subdivision 2, the fee for the practical portion of the hearing instrument dispensing examination is $250 each time it is taken;

(4) the trainee application fee is $200;

(5) the penalty fee for late submission of a renewal application is $200; and

(6) the fee for verification of certification to other jurisdictions or entities is $25.

(c) The commissioner may prorate the certification fee for new applicants based on the number of quarters remaining in the annual certification period.

(d) All fees are nonrefundable. All fees, penalties, and fines received must be deposited in the state government special revenue fund.

(e) Beginning July 1, 2009, until June 30, 2016, a surcharge of $100 shall be paid at the time of initial certification application or renewal to recover the commissioner's accumulated direct expenditures for administering the requirements of this chapter.

Sec. 21. Minnesota Statutes 2010, section 214.06, subdivision 1, is amended to read:

Subdivision 1. **Fee adjustment Fees to recover expenditures.** Notwithstanding any law to the contrary, the commissioner of health as authorized by section 214.13, all health-related licensing boards and all non-health-related licensing boards shall by rule, with the approval of the commissioner of management and budget, adjust, as needed, any fee which the commissioner of health or the board is empowered to assess. The commissioner of health as authorized by section 214.13 and all health-related licensing boards and non-health-related licensing boards shall propose or adjust any fee according to section 16A.1283. As provided in section 16A.1285, the adjustment fees shall be
an amount sufficient so that the total fees collected by each board will be based on anticipated expenditures, including expenditures for the programs authorized by sections 214.10, 214.103, 214.11, 214.17 to 214.24, 214.28 to 214.37, and 214.40, except that a health-related licensing board may have anticipated expenditures in excess of anticipated revenues in a biennium by using accumulated surplus revenues from fees collected by that board in previous bienniums. A health-related licensing board may accumulate up to one year of operating funds, and then shall propose a fee reduction according to section 16A.1283. A health-related licensing board shall not spend more money than the amount appropriated by the legislature for a biennium. For members of an occupation registered after July 1, 1984, by the commissioner of health under the provisions of section 214.13, the fee established must include an amount necessary to recover, over a five-year period, the commissioner's direct expenditures for adoption of the rules providing for registration of members of the occupation. All fees received shall be deposited in the state treasury.

Sec. 22. Minnesota Statutes 2010, section 214.06, subdivision 1a, is amended to read:

Subd. 1a. Health occupations licensing account. (a) Fees received by the commissioner of health or health-related licensing boards must be credited to the health occupations licensing account in the state government special revenue fund. The commissioner of management and budget shall ensure that the revenues and expenditures of each health-related licensing board are tracked separately in the health occupations licensing account.

(b) The fees collected must be used only by the boards identified in section 214.01, subdivision 2, and only for the purposes of the programs they administer. The legislature must not transfer money generated by these fees from the state government special revenue fund to the general fund. Surcharges collected by a health-related licensing board under section 16E.22 are not subject to this subdivision.

Sec. 23. Minnesota Statutes 2010, section 214.06, is amended by adding a subdivision to read:

Subd. 1b. Health-related licensing boards; surcharges. When a health-related licensing board imposes a surcharge, the surcharge must not be incorporated as a fee increase, but must be made as a separate assessment to be paid by the individuals regulated by the board.

Sec. 24. [214.072] HEALTH-RELATED LICENSING BOARDS: WEB SITE.

(a) Each health-related licensing board, as defined in section 214.01, subdivision 2, and the commissioner of health, as the regulator for occupational therapy practitioners, speech-language pathologists, audiologists, and hearing instrument dispensers, are required to post on its public Web site the name and business address of each regulated individual who has:

(1) a conviction of a felony or gross misdemeanor occurring on or after July 1, 2013, in any state or jurisdiction;

(2) a malpractice judgment occurring on or after July 1, 2013, against the regulated individual in any state or jurisdiction. Information describing judgments shall be developed by the boards and the commissioner, shall be stated in plain English, and shall ensure the public understands the context of actions involving licensees; or
(3) any disciplinary or corrective action or restriction of privileges taken against the individual’s license by the commissioner or a state licensing board in this state or in any other state or jurisdiction. The Web site shall identify the basis for disciplinary action, the type of disciplinary action taken, and whether the action was taken by the commissioner or a licensing board in this or another state or the federal government. This clause shall not include any action or restriction imposed through an agreement with a regulated individual and the health professionals services program under sections 214.31 to 214.37.

(b) The information described in this section shall be posted for new licensees issued a license on or after July 1, 2013, and for current licensees upon license renewal occurring on or after July 1, 2013.

**EFFECTIVE DATE.** This section is effective July 1, 2013.

Sec. 25. [214.073] HEALTH-RELATED LICENSING BOARDS; AUTHORITY.

Each health-related licensing board, as defined in section 214.01, subdivision 2, and the commissioner of health, as the regulator for occupational therapy practitioners, speech-language pathologists, audiologists, and hearing instrument dispensers, shall require an applicant on or after August 1, 2012, to provide the individual’s primary business address at the time of initial application and all subsequent renewals.

**EFFECTIVE DATE.** This section is effective the day following final enactment.

Sec. 26. REPORT: HEALTH-RELATED LICENSING BOARD AND COMMISSIONER OF HEALTH BACKGROUND CHECKS.

The health-related licensing boards and the commissioner of health shall jointly study and make recommendations for establishing uniform criminal history background check requirements applicable to applicants and regulated individuals under their jurisdiction. The study must include procedures for conducting background checks, payment of costs, circumstances under which federal background checks are to be conducted, and the standard to be applied to determine whether a criminal record may disqualify an individual from licensure or a regulated occupation. By January 15, 2013, the boards and the commissioner shall submit a report and draft legislation to the chair and ranking minority member of the senate and house of representatives committees with jurisdiction over health and human services and data practices issues.

Sec. 27. HEALTH-RELATED LICENSING BOARDS REPORTING OBLIGATIONS.

(a) By January 15, 2013, the health-related boards and the commissioner of health, as the regulator for occupational therapy practitioners, speech-language pathologists, audiologists, and hearing instrument dispensers, shall jointly study and submit draft legislation to the Sunset Commission and the chairs and ranking minority members of the legislative committees with jurisdiction over health and human services developing consistent reporting requirements that require institutions, professional societies, other licensed professionals, courts, insurers, and other entities to report conduct constituting grounds for disciplinary action to the respective regulatory entity. The study and draft legislation shall include a self-reporting requirement that requires the licensed individual to report to the respective regulatory entity any action that would require a report to be
filed by another specified entity. The study and draft legislation shall also include penalties that may be imposed for failure to report.

(b) Health-related boards with existing statutory reporting obligations shall participate to ensure that the existing reporting requirements are consistent with the recommended requirements and draft legislation.

Sec. 28. SUNSET ADVISORY COMMISSION; DEPARTMENT OF HEALTH REVIEW.

The Sunset Advisory Commission review of the Department of Health in 2013 and 2014 must include an analysis of the extent to which health occupations should be licensed by the Department of Health, and which occupations should be licensed by licensing boards.

Sec. 29. REPORT; INVESTIGATIONS FOR HEALTH-RELATED LICENSING BOARDS.

The health-related licensing boards and the attorney general shall review and make recommendations to the legislature by January 15, 2013, on the respective roles of the boards and the attorney general in conducting investigations of licensees of the health-related licensing boards.

Sec. 30. REPORT; INFORMATION SYSTEMS FOR LICENSING BOARDS.

The commissioner of administration, in conjunction with the health-related licensing boards identified in Minnesota Statutes, section 214.01, and the Office of Enterprise Technology utilizing business rules from the health licensing boards shall report to the legislature by January 15, 2013, the best system for providing electronic licensing, disciplinary, regulatory, and investigative services for the health-related licensing boards. Any costs incurred in preparing this report must be paid from surcharges collected under Minnesota Statutes, section 16E.22.

Sec. 31. REPORT; HEALTH-RELATED LICENSING BOARD FEES.

Each health-related licensing board, as defined in section 214.01, subdivision 2, and the commissioner of health, as the regulator for occupational therapy practitioners, speech-language pathologists, audiologists, and hearing instrument dispensers, shall report to the chair and lead minority member of the senate and house of representatives committees with jurisdiction over health and human services finance by January 15, 2013, on the degree to which fees imposed comply with Minnesota Statutes, sections 214.055 and 214.06, for the health-related licensing boards or Minnesota Statutes, section 144.122, for the commissioner of health. If a board determines that its fees are expected to produce more revenue than needed to recover expenditures during a five-year period, the board must propose reductions in those fees according to section 16A.1283.

Sec. 32. REPORTS; ADMINISTRATIVE SUPPORT SERVICES.

(a) The commissioner of administration shall report to the legislature by January 15, 2013, on use of the SMART program by executive branch agencies.

(b) The administrative services unit of health-related licensing boards shall report to the legislature by January 15, 2013, evaluating use of the units' services by health-related licensing boards.
Sec. 33. **MEDICAL PRACTICE ACT; STUDY.**

(a) The commissioner of health shall convene a working group to evaluate the state's Medical Practice Act to ensure that it effectively protects the safety and well-being of the citizens of the state and allows transparency. In this evaluation, the working group shall consider practice acts in other states, including conduct that may result in disciplinary action.

(b) The working group shall consist of 15 members, comprised and appointed as follows:

1. two members of the Board of Medical Practice appointed by the Board of Medical Practice;
2. two practicing physicians appointed by the Minnesota Medical Association;
3. two medical educators, one representing the University of Minnesota and appointed by the commissioner of health and one representing the Mayo Clinic and appointed by the commissioner of health;
4. two senators, one appointed by the subcommittee on committees, and one appointed by the senate minority leader, and two members of the house of representatives, one appointed by the speaker and one appointed by the house minority leader;
5. the commissioner of health;
6. two consumers appointed by the commissioner of health; and
7. two experts in the field of medical practice appointed by the commissioner of health.

The majority of the working group must be composed of members who have no current or past affiliation with the Board of Medical Practice. For purposes of this section, being licensed by the Board of Medical Practice does not constitute "affiliation."

(c) Compensation for working group members is subject to Minnesota Statutes, section 15.059, subdivision 3, and must be paid from the operating funds of the Board of Medical Practice. The costs incurred by the commissioner of health to convene and support the working group must be paid from the operating funds of the Board of Medical Practice.

(d) The working group must elect a chair from its members.

(e) Meetings of the working group shall be open to the public.

(f) No later than January 1, 2013, the commissioner shall submit the report of the working group and legislation modifying the practice act for consideration during the 2013 legislative session.

(g) The working group expires the day following submission of the report.

**EFFECTIVE DATE.** This section is effective the day following final enactment.

Sec. 34. **BOARD OF MEDICAL PRACTICE REVIEW.**

The legislative auditor is requested to conduct a special investigation of the Minnesota Board of Medical Practice and its implementation of the Medical Practice Act. The legislative auditor is requested to submit the results of the investigation to the Legislative Audit Commission, the Sunset Advisory Commission, and the chairs and
ranking minority members of the senate and house of representatives policy committees having jurisdiction over the board by January 1, 2013.

Sec. 35.  **REPEALER.**

Minnesota Statutes 2010, sections 138A.01; 138A.02; 138A.03; 138A.04; 138A.05; and 138A.06, are repealed effective the day following final enactment.

**ARTICLE 3**

**TRANSFER OF COMBATIVE SPORTS DUTIES**

Section 1.  Minnesota Statutes 2010, section 341.21, is amended by adding a subdivision to read:

Subd. 3a.  **Commissioner.** "Commissioner" means the commissioner of labor and industry.

Sec. 2.  **[341.221] ADVISORY COUNCIL.**

(a) The commissioner must appoint a Combative Sports Advisory Council to advise the commissioner on the administration of duties under this chapter.

(b) The council shall have nine members appointed by the commissioner. One member must be a retired judge of the Minnesota District Court, Minnesota Court of Appeals, Minnesota Supreme Court, the United States District Court for the District of Minnesota, or the Eighth Circuit Court of Appeals. At least four members must have knowledge of the boxing industry. At least four members must have knowledge of the mixed martial arts industry. The commissioner shall make serious efforts to appoint qualified women to serve on the council.

(c) Council members shall serve terms of four years with the terms ending on the first Monday in January.

(d) The council shall annually elect from its membership a chair.

(e) The commissioner shall convene the first meeting of the council by July 1, 2012. The council shall elect a chair at its first meeting. Thereafter, meetings shall be convened by the commissioner, or by the chair with the approval of the commissioner.

(f) For the first appointments to the council, the commissioner shall appoint the members currently serving on the Combative Sports Commission established under section 341.22, to the council. The commissioner shall designate two of the members to serve until the first Monday in January 2013; two members to serve until the first Monday in January 2014; two members to serve until the first Monday in January 2015; and three members to serve until the first Monday in January 2016.

(g) Removal of members, filling of vacancies, and compensation of members shall be as provided in section 15.059.

Sec. 3.  Minnesota Statutes 2010, section 341.23, is amended to read:

**341.23 LIMITATIONS.**
No member of the commission council may directly or indirectly promote a contest, directly or indirectly engage in the managing of a combatant, or have an interest in any manner in the proceeds from a combative sport contest.

Sec. 4. Minnesota Statutes 2010, section 341.27, is amended to read:

**341.27 COMMISSION COMMISSIONER DUTIES.**

The commission commissioner shall:

(1) issue, deny, renew, suspend, or revoke licenses;

(2) make and maintain records of its acts and proceedings including the issuance, denial, renewal, suspension, or revocation of licenses;

(3) keep public records of the commission council open to inspection at all reasonable times;

(4) assist the director in the development of rules to be implemented under this chapter;

(5) conform to the rules adopted under this chapter;

(6) develop policies and procedures for regulating mixed martial arts; and

(7) immediately suspend an individual license for a medical condition, including but not limited to a medical condition resulting from an injury sustained during a match, bout, or contest that has been confirmed by the ringside physician. The medical suspension must be lifted after the commission receives written information from a physician licensed in the home state of the licensee indicating that the combatant may resume competition, and any other information that the commission may by rule require. Medical suspensions are not subject to section 214.10; and

(8) evaluate the performance and compensation of the director, including eligibility for salary increases, in keeping with state procedures.

Sec. 5. Minnesota Statutes 2010, section 341.271, is amended to read:

**341.271 GIFT AUTHORITY.**

The commission commissioner may apply for, receive, and expend in its own name grants and gifts of money consistent with the powers and duties specified in section 341.27. The commission commissioner may accept gifts, bequests, grants, payments for services, and other public and private money to help finance the activities of the commission required under this chapter.

Sec. 6. Minnesota Statutes 2010, section 341.28, subdivision 1, is amended to read:

Subdivision 1. **Regulatory authority; combative sports.** All combative sport contests are subject to this chapter. The commission shall, for every combative sport contest:

(1) direct a commission member to be present, and

(2) direct the attending commission member to make a written report of the contest.

All combative sport contests within this state must be conducted according to the requirements of this chapter.
Sec. 7. Minnesota Statutes 2010, section 341.37, is amended to read:

341.37 APPROPRIATION.

A commission combative sports account is created in the special revenue fund. Money in the account is annually appropriated to the commission commissioner for the purposes of conducting its statutory responsibilities and obligations under this chapter.

Sec. 8. TRANSFER OF DUTIES.

The Combative Sports Commission is abolished. Duties of the commission are transferred to the commissioner of labor and industry. Minnesota Statutes, section 15.039, subdivisions 1 to 6, apply to this transfer. The commissioner of labor and industry may provide that one or more staff of the Combative Sports Commission transfer to the Department of Labor and Industry. No money from the general fund may be used for costs associated with the transfer of functions in this article. The commissioner of labor and industry may charge the combative sports account for indirect costs incurred in other accounts or funds for costs associated with transfer of combative sports functions.

Sec. 9. REVISOR'S INSTRUCTION.

The revisor of statutes shall substitute the term "commissioner" for "commission" in each place the term "commission" appears in Minnesota Statutes, chapter 341.

Sec. 10. REPEALER.

Minnesota Statutes 2010, sections 341.21, subdivisions 3 and 4a; 341.22; 341.24; and 341.26, are repealed.

Sec. 11. EFFECTIVE DATE.

This article is effective July 1, 2012.

ARTICLE 4
HEALTH BOARDS

Section 1. Minnesota Statutes 2010, section 214.09, is amended by adding a subdivision to read:

Subd. 5. Health-related boards. No current member of a health-related licensing board may seek a paid employment position with that board.

Sec. 2. Minnesota Statutes 2010, section 214.103, is amended to read:

214.103 HEALTH-RELATED LICENSING BOARDS; COMPLAINT, INVESTIGATION, AND HEARING.

Subdivision 1. Application. For purposes of this section, "board" means "health-related licensing board" and does not include the non-health-related licensing boards. Nothing in this section supersedes section 214.10, subdivisions 2a, 3, 8, and 9, as they apply to the health-related licensing boards.

Subd. 1a. Notifications and resolution. (a) No more than 14 calendar days after receiving a complaint regarding a licensee, the board shall notify the complainant that
the board has received the complaint and shall provide the complainant with the written
description of the board's complaint process. The board shall periodically, but no less
than every 120 days, notify the complainant of the status of the complaint consistent
with section 13.41.

(b) Except as provided in paragraph (d), no more than 60 calendar days after
receiving a complaint regarding a licensee, the board must notify the licensee that the
board has received a complaint and inform the licensee of:

(1) the substance of the complaint;

(2) the sections of the law that have allegedly been violated;

(3) the sections of the professional rules that have allegedly been violated; and

(4) whether an investigation is being conducted.

(c) The board shall periodically, but no less than every 120 days, notify the licensee
of the status of the complaint consistent with section 13.41.

(d) Paragraphs (b) and (c) do not apply if the board determines that such notice
would compromise the board's investigation and that such notice cannot reasonably be
accomplished within this time.

(e) No more than one year after receiving a complaint regarding a licensee, the
board must resolve or dismiss the complaint unless the board determines that resolving or
dismissing the complaint cannot reasonably be accomplished in this time and is not in
the public interest.

(f) Failure to make notifications or to resolve the complaint within the time
established in this subdivision shall not deprive the board of jurisdiction to complete the
investigation or to take corrective, disciplinary, or other action against the licensee that is
authorized by law. Such a failure by the board shall not be the basis for a licensee's request
for the board to dismiss a complaint, and shall not be considered by an administrative law
judge, the board, or any reviewing court.

Subd. 2. Receipt of complaint. The boards shall receive and resolve complaints
or other communications, whether oral or written, against regulated persons. Before
resolving an oral complaint, the executive director or a board member designated by the
board to review complaints may shall require the complainant to state the complaint in
writing or authorize transcribing the complaint. The executive director or the designated
board member shall determine whether the complaint alleges or implies a violation of
a statute or rule which the board is empowered to enforce. The executive director or
the designated board member may consult with the designee of the attorney general as
to a board's jurisdiction over a complaint. If the executive director or the designated
board member determines that it is necessary, the executive director may seek additional
information to determine whether the complaint is jurisdictional or to clarify the nature
of the allegations by obtaining records or other written material, obtaining a handwriting
sample from the regulated person, clarifying the alleged facts with the complainant, and
requesting a written response from the subject of the complaint.

Subd. 3. Referral to other agencies. The executive director shall forward to
another governmental agency any complaints received by the board which do not relate
to the board's jurisdiction but which relate to matters within the jurisdiction of another
governmental agency. The agency shall advise the executive director of the disposition
of the complaint. A complaint or other information received by another governmental agency relating to a statute or rule which a board is empowered to enforce must be forwarded to the executive director of the board to be processed in accordance with this section. Governmental agencies may coordinate and conduct joint investigations of complaints that involve more than one governmental agency.

Subd. 4. **Role of the attorney general.** The executive director or the designated board member shall forward a complaint and any additional information to the designee of the attorney general when the executive director or the designated board member determines that a complaint is jurisdictional and:

1. requires investigation before the executive director or the designated board member may resolve the complaint;
2. that attempts at resolution for disciplinary action or the initiation of a contested case hearing is appropriate;
3. that an agreement for corrective action is warranted; or
4. that the complaint should be dismissed, consistent with subdivision 8.

Subd. 5. **Investigation by attorney general.** (a) If the executive director or the designated board member determines that investigation is necessary before resolving the complaint, the executive director shall forward the complaint and any additional information to the designee of the attorney general. The designee of the attorney general shall evaluate the communications forwarded and investigate as appropriate.

(b) The designee of the attorney general may also investigate any other complaint forwarded under subdivision 3 when the designee of the attorney general determines that investigation is necessary.

(c) In the process of evaluation and investigation, the designee shall consult with or seek the assistance of the executive director or the designated board member. The designee may also consult with or seek the assistance of other qualified persons who are not members of the board who the designee believes will materially aid in the process of evaluation or investigation.

(d) Upon completion of the investigation, the designee shall forward the investigative report to the executive director with recommendations for further consideration or dismissal.

Subd. 6. **Attempts at resolution.** (a) At any time after receipt of a complaint, the executive director or the designated board member may attempt to resolve the complaint with the regulated person. The available means for resolution include a conference or any other written or oral communication with the regulated person. A conference may be held for the purposes of investigation, negotiation, education, or conciliation. Neither the executive director nor any member of a board's staff shall be a voting member in any attempts at resolutions which may result in disciplinary or corrective action. The results of attempts at resolution with the regulated person may include a recommendation to the board for disciplinary action, an agreement between the executive director or the designated board member and the regulated person for corrective action, or the dismissal of a complaint. If attempts at resolution are not in the public interest or are not satisfactory to the executive director or the designated board member, then the executive director or the designated board member may initiate a contested case hearing may be initiated.
(1) The designee of the attorney general shall represent the board in all attempts at resolution which the executive director or the designated board member anticipate may result in disciplinary action. A stipulation between the executive director or the designated board member and the regulated person shall be presented to the board for the board's consideration. An approved stipulation and resulting order shall become public data.

(2) The designee of the attorney general shall represent the board upon the request of the executive director or the designated board member in all attempts at resolution which the executive director or the designated board member anticipate may result in corrective action. Any agreement between the executive director or the designated board member and the regulated person for corrective action shall be in writing and shall be reviewed by the designee of the attorney general prior to its execution. The agreement for corrective action shall provide for dismissal of the complaint upon successful completion by the regulated person of the corrective action.

(b) Upon receipt of a complaint alleging sexual contact or sexual conduct with a client, the board must forward the complaint to the designee of the attorney general for an investigation. If, after it is investigated, the complaint appears to provide a basis for disciplinary action, the board shall resolve the complaint by disciplinary action or initiate a contested case hearing. Notwithstanding paragraph (a), clause (2), a board may not take corrective action or dismiss a complaint alleging sexual contact or sexual conduct with a client unless, in the opinion of the executive director, the designated board member, and the designee of the attorney general, there is insufficient evidence to justify disciplinary action.

Subd. 7. Contested case hearing. If the executive director or the designated board member determines that attempts at resolution of a complaint are not in the public interest or are not satisfactory to the executive director or the designated board member, the executive director or the designated board member, after consultation with the designee of the attorney general, and the concurrence of a second board member, may initiate a contested case hearing under chapter 14. The designated board member or any board member who was consulted during the course of an investigation may participate at the contested case hearing. A designated or consulted board member may not deliberate or vote in any proceeding before the board pertaining to the case.

Subd. 8. Dismissal and reopening of a complaint. (a) A complaint may not be dismissed without the concurrence of at least two board members and, upon the request of the complainant, a review by a representative of the attorney general's office. The designee of the attorney general must review before dismissal any complaints which allege any violation of chapter 609, any conduct which would be required to be reported under section 626.556 or 626.557, any sexual contact or sexual conduct with a client, any violation of a federal law, any actual or potential inability to practice the regulated profession or occupation by reason of illness, use of alcohol, drugs, chemicals, or any other materials, or as a result of any mental or physical condition, any violation of state medical assistance laws, or any disciplinary action related to credentialing in another jurisdiction or country which was based on the same or related conduct specified in this subdivision.

(b) The board may reopen a dismissed complaint if the board receives newly discovered information that was not available to the board during the initial investigation of the complaint, or if the board receives a new complaint that indicates a pattern of behavior or conduct.
Subd. 9. **Information to complainant.** A board shall furnish to a person who made a complaint a written description of the board's complaint process, and actions of the board relating to the complaint.

Subd. 10. **Prohibited participation by board member.** A board member who has actual bias or a current or former direct financial or professional connection with a regulated person may not vote in board actions relating to the regulated person.

Sec. 3. **[214.108] HEALTH-RELATED LICENSING BOARDS; LICENSEE GUIDANCE.**

A health-related licensing board may offer guidance to current licensees about the application of laws and rules the board is empowered to enforce. This guidance shall not bind any court or other adjudicatory body.

Sec. 4. **[214.109] RECORD KEEPING.**

(a) A board may take administrative action against a regulated person whose records do not meet the standards of professional practice. Action taken under this paragraph shall not be considered disciplinary action.

(b) Records that are fraudulent or could result in patient harm may be handled through disciplinary or other corrective action.

**ARTICLE 5**

**APPROPRIATIONS**

<table>
<thead>
<tr>
<th>APPROPRIATIONS</th>
<th>Available for the Year</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Ending June 30</td>
</tr>
<tr>
<td></td>
<td>2012</td>
</tr>
<tr>
<td>Section 1. <strong>LEGISLATIVE COORDINATING COMMISSION</strong></td>
<td>$</td>
</tr>
<tr>
<td>This appropriation is from the general fund for staff services or professional contract services for the Sunset Advisory Commission.</td>
<td></td>
</tr>
<tr>
<td>The general fund base as established in Laws 2011, First Special Session chapter 10, article 1, section 2, is increased by $139,000 beginning in fiscal year 2014.</td>
<td></td>
</tr>
<tr>
<td>Sec. 2. <strong>BOARD OF BEHAVIORAL HEALTH AND THERAPY</strong></td>
<td>$</td>
</tr>
<tr>
<td>This appropriation is from the state government special revenue fund.</td>
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</tbody>
</table>

Copyright © 2012 by the Office of the Revisor of Statutes, State of Minnesota. All Rights Reserved.
$12,000 is to develop and maintain a process to post required information about convictions, malpractice, and disciplinary or corrective action for the board's members. This is a onetime appropriation.

$1,000 is for database and Web site changes to include business addresses. This is a onetime appropriation.

$1,000 is for notification requirements regarding the status of complaints.

The state government special revenue fund base for ongoing activities in this act is $1,000 in fiscal years 2014 and 2015.

Sec. 3. BOARD OF CHIROPRACTIC EXAMINERS

This appropriation is from the state government special revenue fund.

$12,000 is to develop and maintain a process to post required information about convictions, malpractice, and disciplinary or corrective action for the board's members. This is a onetime appropriation.

$1,000 is for database and Web site changes to include business addresses. This is a onetime appropriation.

$1,000 is for notification requirements regarding the status of complaints.

The state government special revenue fund base for ongoing activities in this act is $1,000 in fiscal years 2014 and 2015.

Sec. 4. BOARD OF DENTISTRY

This appropriation is from the state government special revenue fund.

$30,000 is to develop and maintain a process to post required information about convictions, malpractice, and disciplinary or corrective action for the board's members. This is a onetime appropriation.

$1,000 is for database and Web site changes to include business addresses. This is a onetime appropriation.
$1,000 is for notification requirements regarding the status of complaints.

The state government special revenue fund base for ongoing activities in this act is $1,000 in fiscal years 2014 and 2015.

Sec. 5. BOARD OF DIETETICS AND NUTRITION PRACTICE

This appropriation is from the state government special revenue fund.

$8,000 is to develop and maintain a process to post required information about convictions, malpractice, and disciplinary or corrective action for the board's members. This is a onetime appropriation.

$1,000 is for database and Web site changes to include business addresses. This is a onetime appropriation.

$1,000 is for notification requirements regarding the status of complaints.

The state government special revenue fund base for ongoing activities in this act is $1,000 in fiscal years 2014 and 2015.

Sec. 6. BOARD OF MARRIAGE AND FAMILY THERAPY

This appropriation is from the state government special revenue fund.

$8,000 is to develop and maintain a process to post required information about convictions, malpractice, and disciplinary or corrective action for the board's members. This is a onetime appropriation.

$1,000 is for database and Web site changes to include business addresses. This is a onetime appropriation.

$1,000 is for notification requirements regarding the status of complaints.

The state government special revenue fund base for ongoing activities in this act is $1,000 in fiscal years 2014 and 2015.

Sec. 7. BOARD OF MEDICAL PRACTICE

This appropriation is from the state government special revenue fund.

$198,000 is for ongoing activities in this act.
This appropriation is from the state government special revenue fund.
$112,000 is for transfer to the commissioner of health to convene and support the working group evaluating the state's Medical Practice Act. This is a onetime appropriation.

$9,000 is for board expenses related to the working group evaluating the Medical Practice Act. This is a onetime appropriation.

$30,000 is to develop and maintain a process to post required information about convictions, malpractice, and disciplinary or corrective action for the board's members. This is a onetime appropriation.

$1,000 is for database and Web site changes to include business addresses. This is a onetime appropriation.

$1,000 is for notification requirements regarding the status of complaints.

$45,000 is for transfer to the Office of the Legislative Auditor to conduct an investigation of the Board of Medical Practice.

The state government special revenue fund base for ongoing activities in this act is $1,000 in fiscal years 2014 and 2015.

Sec. 8. BOARD OF NURSING

This appropriation is from the state government special revenue fund.

$30,000 is to develop and maintain a process to post required information about convictions, malpractice, and disciplinary or corrective action for the board's members. This is a onetime appropriation.

$1,000 is for database and Web site changes to include business addresses. This is a onetime appropriation.

$92,000 is for notification requirements regarding the status of complaints.

The state government special revenue fund base for ongoing activities in this act is $92,000 in fiscal years 2014 and 2015.
Sec. 9. BOARD OF NURSING HOME ADMINISTRATORS

This appropriation is from the state government special revenue fund.

$50,000 is for the administrative services unit for a study to make recommendations for establishing uniform criminal history background check requirements for individuals regulated by the health-related boards. This is a onetime appropriation.

$15,000 is for the administrative services unit to study and submit proposed legislation to require institutions, professional societies, licensed professionals, insurers and other entities, and courts to report conduct constituting grounds for disciplinary action to the respective regulatory entity. This is a onetime appropriation.

$15,000 is for the administrative services unit to review and submit to the legislature recommendations on the respective roles of the health-related boards and the attorney general in conducting investigations of licensees of the health-related boards. This is a onetime appropriation.

$10,000 is for the administrative services unit to evaluate the use of its services by the health-related boards. This is a onetime appropriation.

$8,000 is to develop and maintain a process to post required information about convictions, malpractice, and disciplinary or corrective action for the board's members. This is a onetime appropriation.

$1,000 is for database and Web site changes to include business addresses. This is a onetime appropriation.

$1,000 is for notification requirements regarding the status of complaints.

The state government special revenue fund base for ongoing activities in this act is $1,000 in fiscal years 2014 and 2015.

Sec. 10. BOARD OF OPTOMETRY

$ 10,000
This appropriation is from the state government special revenue fund.

$8,000 is to develop and maintain a process to post required information about convictions, malpractice, and disciplinary or corrective action for the board's members. This is a onetime appropriation.

$1,000 is for database and Web site changes to include business addresses. This is a onetime appropriation.

$1,000 is for notification requirements regarding the status of complaints.

The state government special revenue fund base for ongoing activities in this act is $1,000 in fiscal years 2014 and 2015.

Sec. 11. **BOARD OF PHARMACY**  $  -0-  $  32,000

$30,000 is to develop and maintain a process to post required information about convictions, malpractice, and disciplinary or corrective action for the board's members. This is a onetime appropriation.

$1,000 is for database and Web site changes to include business addresses. This is a onetime appropriation.

$1,000 is for notification requirements regarding the status of complaints.

The state government special revenue fund base for ongoing activities in this act is $1,000 in fiscal years 2014 and 2015.

Sec. 12. **BOARD OF PHYSICAL THERAPY**  $  -0-  $  10,000

This appropriation is from the state government special revenue fund.

$8,000 is to develop and maintain a process to post required information about convictions, malpractice, and disciplinary or corrective action for the board's members. This is a onetime appropriation.

$1,000 is for database and Web site changes to include business addresses. This is a onetime appropriation.
$1,000 is for notification requirements regarding the status of complaints.
The state government special revenue fund base for ongoing activities in this act is $1,000 in fiscal years 2014 and 2015.

Sec. 13. **BOARD OF PODIATRIC MEDICINE** $ 0- $ 10,000

This appropriation is from the state government special revenue fund.
$8,000 is to develop and maintain a process to post required information about convictions, malpractice, and disciplinary or corrective action for the board's members. This is a onetime appropriation.

$1,000 is for database and Web site changes to include business addresses. This is a onetime appropriation.

$1,000 is for notification requirements regarding the status of complaints.
The state government special revenue fund base for ongoing activities in this act is $1,000 in fiscal years 2014 and 2015.

Sec. 14. **BOARD OF PSYCHOLOGY** $ 0- $ 29,000

$27,000 is to develop and maintain a process to post required information about convictions, malpractice, and disciplinary or corrective action for the board's members. This is a onetime appropriation.

$1,000 is for database and Web site changes to include business addresses. This is a onetime appropriation.

$1,000 is for notification requirements regarding the status of complaints.
The state government special revenue fund base for ongoing activities in this act is $1,000 in fiscal years 2014 and 2015.

Sec. 15. **BOARD OF SOCIAL WORK** $ 0- $ 14,000

This appropriation is from the state government special revenue fund.
$12,000 is to develop and maintain a process to post required information about
convictions, malpractice, and disciplinary or corrective action for the board's members. This is a onetime appropriation.

$1,000 is for database and Web site changes to include business addresses. This is a onetime appropriation.

$1,000 is for notification requirements regarding the status of complaints.

The state government special revenue fund base for ongoing activities in this act is $1,000 in fiscal years 2014 and 2015.

**Sec. 16. BOARD OF VETERINARY MEDICINE**

| $ | -0- $ | 10,000 |

This appropriation is from the state government special revenue fund.

$8,000 is to develop and maintain a process to post required information about convictions, malpractice, and disciplinary or corrective action for the board's members. This is a onetime appropriation.

$1,000 is for database and Web site changes to include business addresses. This is a onetime appropriation.

$1,000 is for notification requirements regarding the status of complaints.

The state government special revenue fund base for ongoing activities in this act is $1,000 in fiscal years 2014 and 2015.

Presented to the governor May 1, 2012

Signed by the governor May 4, 2012, 3:20 p.m.