

CHAPTER 4735
DEPARTMENT OF HEALTH
DISEASE CONTROL; FEES

LOCAL OFFICERS AND COUNTY BOARDS

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4735.0010 [Repealed, 9 SR 2584]

4735.0020 [Repealed, 9 SR 2584]

LOCAL OFFICERS AND COUNTY BOARDS**4735.0100 DEFINITIONS.**

Subpart 1. **Commissioner.** "Commissioner" means the state commissioner of health or authorized officers, employees, or agents of the Minnesota Department of Health.

Subp. 2. **Community health services plan.** "Community health services plan" means plans and plan revisions developed under Minnesota Statutes, section 145A.10, subdivision 10.

Subp. 3. **Board of health.** "Board of health" means the duly authorized administrators, officers, agents, or employees of the county, multicounty, or city board of health organized within the provisions of Minnesota Statutes, sections 145A.09 to 145A.13.

Subp. 4. **Public health emergency.** "Public health emergency" means an unanticipated and temporary condition threatening the health of a specific population such that the resources of one or more local boards of health cannot reasonably be considered adequate to respond to the emergency needs of the affected population.

Subp. 5. **Public health hazard.** "Public health hazard" means the presence of a disease organism or condition in the environment which endangers the health of a specified population.

Statutory Authority: *MS s 144.05; 144.0742; 144.12*

History: *9 SR 2584; L 1987 c 309 s 24*

4735.0110 DUTIES OF COMMISSIONER.

Subpart 1. **General duties.** The state commissioner of health or an authorized officer shall be responsible for the collection and review of disease reports, epidemiologic investigations, and control of disease in all areas of the state.

Subp. 2. **Agreements.** The commissioner may enter into written agreements with local boards of health for the purposes of specifying shared responsibilities for the collection of data and information described in parts 4605.7000 to 4605.7800. The agreement must be made a part of the biennial community health services plan. The agreement shall include but not be limited to:

A. requirements pertaining to data to be collected and disease investigations to be conducted;

B. minimum personnel requirements;

C. duties of the commissioner regarding the provision of technical or other assistance to fulfill the agreement;

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D. specification of means by which the board of health as defined in Minnesota Statutes, section 145A.02, subdivision 2, shall coordinate data collection and other duties of the agreement with related activities of the commissioner or other local boards of health;

E. criteria by which the commissioner will determine that the duties and responsibilities agreed upon are met;

F. procedures for renewal of the agreement; and

G. grounds for termination.

Subp. 3. **Notice to board of health.** The commissioner shall bring to the attention of the board of health any conditions within the jurisdiction of the board of health which represent the potential for a public health hazard.

Subp. 4. **Assistance to board of health.** The commissioner shall provide technical assistance and personnel as he or she determines are available and necessary to answer the requests of the board of health for assistance in the investigation and control of disease.

Subp. 5. **Public health emergency.** In the event of a public health emergency, the commissioner may, after giving reasonable notice to the board of health, suspend all or certain specified terms of the agreement for a period of time sufficient to respond to the public health emergency.

Statutory Authority: *MS s 144.05; 144.0742; 144.12*

History: *9 SR 2584; L 1987 c 309 s 24*

4735.0120 DUTIES OF BOARD OF HEALTH.

Subpart 1. **Board of health request.** The board of health as defined in Minnesota Statutes, section 145A.02, subdivision 2, shall, when the public health hazard exceeds the capacity of the board of health to respond, request assistance from the commissioner for the investigation and control of disease.

Subp. 2. **Duty to report health hazards.** The board of health shall bring to the attention of the commissioner any conditions which represent the potential for a public health hazard.

Statutory Authority: *MS s 144.05; 144.0742; 144.12*

History: *9 SR 2584; L 1987 c 309 s 24*

HOSPITALS, NURSING HOMES, BOARDING CARE HOMES, SUPERVISED LIVING FACILITIES, OUTPATIENT SURGICAL CENTERS; LICENSE FEES

4735.0200 LICENSURE FEES FOR HOSPITALS, NURSING HOMES, BOARDING CARE HOMES, SUPERVISED LIVING FACILITIES, AND OUTPATIENT SURGICAL CENTERS.

In accordance with parts 4655.0300, subpart 2, 4640.0200, subpart 1, 4665.0400, subpart 5, and 4675.0300, subpart 8, each application for an initial or a renewal license to operate a hospital, nursing home, boarding care home, supervised living facility, or an outpatient surgical center shall be accompanied by a fee based upon the formula in this part.

Each separate licensure classification requires a separate base fee. For example, a hospital with boarding care home beds must submit a \$450 base fee for the hospital and a \$50 base fee for the boarding care home plus the appropriate per bed fee for each licensure classification.

The fee schedule applies to all licenses issued on or after July 1, 1983.

Licensure fees for hospitals, nursing homes, boarding care homes, supervised living facilities, and outpatient surgical centers.

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Licensure Classification	Base Fee	Per Bed Fee
Joint Commission on Accreditation of Hospitals		
Accredited hospital	\$450	\$ 0
Nonaccredited hospital	468	29 (including bassinets)
Nursing home	68	16
Boarding Care Home	68	16
Supervised living facility	68	16
Outpatient surgical center	450	0

Statutory Authority: *MS s 14.14 subd 1; 16A.128; L 1981, Third Special Session ch 2 art 1 s 2 subd 4 cl (f)*

4735.5000 [Repealed, L 1999 c 245 art 9 s 66]

4735.5100 [Repealed, L 2000 c 313 s 10]