

406.25
406.26

ARTICLE 25
HEALTH-RELATED LICENSING BOARDS

272.1
272.2

ARTICLE 8
HEALTH LICENSING BOARDS

272.3 Section 1. Minnesota Statutes 2016, section 13.83, subdivision 2, is amended to read:

272.4 Subd. 2. **Public data.** Unless specifically classified otherwise by state statute or federal
272.5 law, the following data created or collected by a medical examiner or coroner on a deceased
272.6 individual are public: name of the deceased; date of birth; date of death; address; sex; race;
272.7 citizenship; height; weight; hair color; eye color; build; complexion; age, if known, or
272.8 approximate age; identifying marks, scars and amputations; a description of the decedent's
272.9 clothing; marital status; location of death including name of hospital where applicable; name
272.10 of spouse; whether or not the decedent ever served in the armed forces of the United States;
272.11 occupation; business; father's name (also birth name, if different); mother's name (also birth
272.12 name, if different); birthplace; birthplace of parents; cause of death; causes of cause of
272.13 death; whether an autopsy was performed and if so, whether it was conclusive; date and
272.14 place of injury, if applicable, including work place; how injury occurred; whether death
272.15 was caused by accident, suicide, homicide, or was of undetermined cause; certification of
272.16 attendance by physician or advanced practice registered nurse; physician's or advanced
272.17 practice registered nurse's name and address; certification by coroner or medical examiner;
272.18 name and signature of coroner or medical examiner; type of disposition of body; burial
272.19 place name and location, if applicable; date of burial, cremation or removal; funeral home
272.20 name and address; and name of local register or funeral director.

272.21 Sec. 2. Minnesota Statutes 2016, section 144.651, subdivision 21, is amended to read:

272.22 Subd. 21. **Communication privacy.** Patients and residents may associate and
272.23 communicate privately with persons of their choice and enter and, except as provided by
272.24 the Minnesota Commitment Act, leave the facility as they choose. Patients and residents
272.25 shall have access, at their expense, to writing instruments, stationery, and postage. Personal
272.26 mail shall be sent without interference and received unopened unless medically or
272.27 programmatically contraindicated and documented by the physician or advanced practice
272.28 registered nurse in the medical record. There shall be access to a telephone where patients
272.29 and residents can make and receive calls as well as speak privately. Facilities which are
272.30 unable to provide a private area shall make reasonable arrangements to accommodate the
272.31 privacy of patients' or residents' calls. Upon admission to a facility where federal law
272.32 prohibits unauthorized disclosure of patient or resident identifying information to callers
272.33 and visitors, the patient or resident, or the legal guardian or conservator of the patient or
272.34 resident, shall be given the opportunity to authorize disclosure of the patient's or resident's
273.1 presence in the facility to callers and visitors who may seek to communicate with the patient
273.2 or resident. To the extent possible, the legal guardian or conservator of a patient or resident
273.3 shall consider the opinions of the patient or resident regarding the disclosure of the patient's
273.4 or resident's presence in the facility. This right is limited where medically inadvisable, as

273.5 documented by the attending physician or advanced practice registered nurse in a patient's
273.6 or resident's care record. Where programmatically limited by a facility abuse prevention
273.7 plan pursuant to section 626.557, subdivision 14, paragraph (b), this right shall also be
273.8 limited accordingly.

273.9 Sec. 3. Minnesota Statutes 2016, section 144A.26, is amended to read:

273.10 **144A.26 RECIPROCITY WITH OTHER STATES AND EQUIVALENCY OF**
273.11 **HEALTH SERVICES EXECUTIVE.**

273.12 Subdivision 1. **Reciprocity.** The Board of Examiners may issue a nursing home
273.13 administrator's license, without examination, to any person who holds a current license as
273.14 a nursing home administrator from another jurisdiction if the board finds that the standards
273.15 for licensure in the other jurisdiction are at least the substantial equivalent of those prevailing
273.16 in this state and that the applicant is otherwise qualified.

273.17 Subd. 2. **Health services executive license.** The Board of Examiners may issue a health
273.18 services executive license to any person who (1) has been validated by the National
273.19 Association of Long Term Care Administrator Boards as a health services executive, and
273.20 (2) has met the education and practice requirements for the minimum qualifications of a
273.21 nursing home administrator, assisted living administrator, and home and community-based
273.22 service provider. Licensure decisions made by the board under this subdivision are final.

273.23 Sec. 4. Minnesota Statutes 2016, section 144A.4791, subdivision 13, is amended to read:

273.24 Subd. 13. **Request for discontinuation of life-sustaining treatment.** (a) If a client,
273.25 family member, or other caregiver of the client requests that an employee or other agent of
273.26 the home care provider discontinue a life-sustaining treatment, the employee or agent
273.27 receiving the request:

273.28 (1) shall take no action to discontinue the treatment; and

273.29 (2) shall promptly inform the supervisor or other agent of the home care provider of the
273.30 client's request.

273.31 (b) Upon being informed of a request for termination of treatment, the home care provider
273.32 shall promptly:

274.1 (1) inform the client that the request will be made known to the physician or advanced
274.2 practice registered nurse who ordered the client's treatment;

274.3 (2) inform the physician or advanced practice registered nurse of the client's request;
274.4 and

406.27 Section 1. Minnesota Statutes 2017 Supplement, section 147.01, subdivision 7, is amended
406.28 to read:

406.29 Subd. 7. **Physician application and license fees.** (a) The board may charge the following
406.30 nonrefundable application and license fees processed pursuant to sections 147.02, 147.03,
406.31 147.037, 147.0375, and 147.38:

406.32 (1) physician application fee, \$200;

407.1 (2) physician annual registration renewal fee, \$192;

407.2 (3) physician endorsement to other states, \$40;

407.3 (4) physician emeritus license, \$50;

407.4 (5) physician temporary license, \$60;

407.5 (6) physician late fee, \$60;

407.6 (7) duplicate license fee, \$20;

407.7 (8) certification letter fee, \$25;

407.8 (9) education or training program approval fee, \$100;

407.9 (10) report creation and generation fee, \$60 per hour;

407.10 (11) examination administration fee (half day), \$50;

274.5 (3) work with the client and the client's physician or advanced practice registered nurse
274.6 to comply with the provisions of the Health Care Directive Act in chapter 145C.

274.7 (c) This section does not require the home care provider to discontinue treatment, except
274.8 as may be required by law or court order.

274.9 (d) This section does not diminish the rights of clients to control their treatments, refuse
274.10 services, or terminate their relationships with the home care provider.

274.11 (e) This section shall be construed in a manner consistent with chapter 145B or 145C,
274.12 whichever applies, and declarations made by clients under those chapters.

407.11 (12) examination administration fee (full day), \$80; ~~and~~

407.12 (13) fees developed by the Interstate Commission for determining physician qualification
407.13 to register and participate in the interstate medical licensure compact, as established in rules
407.14 authorized in and pursuant to section 147.38, not to exceed \$1,000;

407.15 (14) verification fee, \$25; and

407.16 (15) criminal background check fee, \$32.

407.17 (b) The board may prorate the initial annual license fee. All licensees are required to
407.18 pay the full fee upon license renewal. The revenue generated from the fee must be deposited
407.19 in an account in the state government special revenue fund.

407.20 Sec. 2. Minnesota Statutes 2016, section 147.012, is amended to read:

407.21 **147.012 OVERSIGHT OF ALLIED HEALTH PROFESSIONS.**

407.22 The board has responsibility for the oversight of the following allied health professions:
407.23 physician assistants under chapter 147A; acupuncture practitioners under chapter 147B;
407.24 respiratory care practitioners under chapter 147C; traditional midwives under chapter 147D;
407.25 registered naturopathic doctors under chapter 147E; genetic counselors under chapter 147F;
407.26 and athletic trainers under sections 148.7801 to 148.7815.

408.1 Sec. 3. Minnesota Statutes 2016, section 147.02, is amended by adding a subdivision to
408.2 read:

408.3 Subd. 7. **Additional renewal requirements.** (a) The licensee must maintain a correct
408.4 mailing address with the board for receiving board communications, notices, and licensure
408.5 renewal documents. Placing the license renewal application in first class United States mail,
408.6 addressed to the licensee at the licensee's last known address with postage prepaid, constitutes
408.7 valid service. Failure to receive the renewal documents does not relieve a license holder of
408.8 the obligation to comply with this section.

408.9 (b) The names of licensees who do not return a complete license renewal application,
408.10 the annual license fee, or the late application fee within 30 days shall be removed from the
408.11 list of individuals authorized to practice medicine and surgery during the current renewal
408.12 period. Upon reinstatement of licensure, the licensee's name will be placed on the list of
408.13 individuals authorized to practice medicine and surgery.

408.14 Sec. 4. Minnesota Statutes 2016, section 147A.06, is amended to read:

408.15 **147A.06 CANCELLATION OF LICENSE FOR NONRENEWAL.**

408.16 Subdivision 1. **Cancellation of license.** The board shall not renew, reissue, reinstate, or
408.17 restore a license that has lapsed on or after July 1, 1996, and has not been renewed within
408.18 two annual renewal cycles starting July 1, 1997. A licensee whose license is canceled for
408.19 nonrenewal must obtain a new license by applying for licensure and fulfilling all requirements
408.20 then in existence for an initial license to practice as a physician assistant.

408.21 Subd. 2. **Licensure following lapse of licensed status; transition.** (a) A licensee whose
408.22 license has lapsed under subdivision 1 before January 1, 2019, and who seeks to regain
408.23 licensed status after January 1, 2019, shall be treated as a first-time licensee only for purposes
408.24 of establishing a license renewal schedule, and shall not be subject to the license cycle
408.25 conversion provisions in section 147A.29.

408.26 (b) This subdivision expires July 1, 2021.

408.27 Sec. 5. Minnesota Statutes 2016, section 147A.07, is amended to read:

408.28 **147A.07 RENEWAL.**

408.29 (a) A person who holds a license as a physician assistant shall annually, upon notification
408.30 from the board, renew the license by:

408.31 (1) submitting the appropriate fee as determined by the board;

409.1 (2) completing the appropriate forms; and

409.2 (3) meeting any other requirements of the board.

409.3 (b) A licensee must maintain a correct mailing address with the board for receiving board
409.4 communications, notices, and license renewal documents. Placing the license renewal
409.5 application in first class United States mail, addressed to the licensee at the licensee's last
409.6 known address with postage prepaid, constitutes valid service. Failure to receive the renewal
409.7 documents does not relieve a licensee of the obligation to comply with this section.

409.8 (c) The name of a licensee who does not return a complete license renewal application,
409.9 annual license fee, or late application fee, as applicable, within the time period required by
409.10 this section shall be removed from the list of individuals authorized to practice during the
409.11 current renewal period. If the licensee's license is reinstated, the licensee's name shall be
409.12 placed on the list of individuals authorized to practice.

409.13 Sec. 6. Minnesota Statutes 2017 Supplement, section 147A.28, is amended to read:

409.14 **147A.28 PHYSICIAN ASSISTANT APPLICATION AND LICENSE FEES.**

- 409.15 (a) The board may charge the following nonrefundable fees:
- 409.16 (1) physician assistant application fee, \$120;
- 409.17 (2) physician assistant annual registration renewal fee (prescribing authority), \$135;
- 409.18 (3) physician assistant annual registration renewal fee (no prescribing authority), \$115;
- 409.19 (4) physician assistant temporary registration, \$115;
- 409.20 (5) physician assistant temporary permit, \$60;
- 409.21 (6) physician assistant locum tenens permit, \$25;
- 409.22 (7) physician assistant late fee, \$50;
- 409.23 (8) duplicate license fee, \$20;
- 409.24 (9) certification letter fee, \$25;
- 409.25 (10) education or training program approval fee, \$100; ~~and~~
- 409.26 (11) report creation and generation fee, \$60; per hour;
- 409.27 (12) verification fee, \$25; and
- 409.28 (13) criminal background check fee, \$32.
- 410.1 (b) The board may prorate the initial annual license fee. All licensees are required to
- 410.2 pay the full fee upon license renewal. The revenue generated from the fees must be deposited
- 410.3 in an account in the state government special revenue fund.
- 410.4 Sec. 7. **[147A.29] LICENSE RENEWAL CYCLE CONVERSION.**
- 410.5 Subdivision 1. **Generally.** The license renewal cycle for physician assistant licensees
- 410.6 is converted to an annual cycle where renewal is due on the last day of the licensee's month
- 410.7 of birth. Conversion pursuant to this section begins January 1, 2019. This section governs
- 410.8 license renewal procedures for licensees who were licensed before December 31, 2018. The
- 410.9 conversion renewal cycle is the renewal cycle following the first license renewal after
- 410.10 January 1, 2019. The conversion license period is the license period for the conversion
- 410.11 renewal cycle. The conversion license period is between six and 17 months and ends on the

410.12 last day of the licensee's month of birth in either 2019 or 2020, as described in subdivision
410.13 2.

410.14 Subd. 2. **Conversion of license renewal cycle for current licensees.** For a licensee
410.15 whose license is current as of December 31, 2018, the licensee's conversion license period
410.16 begins on January 1, 2019, and ends on the last day of the licensee's month of birth in 2019,
410.17 except that for licensees whose month of birth is January, February, March, April, May, or
410.18 June, the licensee's renewal cycle ends on the last day of the licensee's month of birth in
410.19 2020.

410.20 Subd. 3. **Conversion of license renewal cycle for noncurrent licensees.** This subdivision
410.21 applies to an individual who was licensed before December 31, 2018, but whose license is
410.22 not current as of December 31, 2018. When the individual first renews the license after
410.23 January 1, 2019, the conversion renewal cycle begins on the date the individual applies for
410.24 renewal and ends on the last day of the licensee's month of birth in the same year, except
410.25 that if the last day of the individual's month of birth is less than six months after the date
410.26 the individual applies for renewal, then the renewal period ends on the last day of the
410.27 individual's month of birth in the following year.

410.28 Subd. 4. **Subsequent renewal cycles.** After the licensee's conversion renewal cycle
410.29 under subdivision 2 or 3, subsequent renewal cycles are annual and begin on the last day
410.30 of the month of the licensee's birth.

410.31 Subd. 5. **Conversion period and fees.** (a) A licensee who holds a license issued before
410.32 January 1, 2019, and who renews that license pursuant to subdivision 2 or 3, shall pay a
410.33 renewal fee as required in this subdivision.

411.1 (b) A licensee shall be charged the annual license fee listed in section 147A.28 for the
411.2 conversion license period.

411.3 (c) For a licensee whose conversion license period is six to 11 months, the first annual
411.4 license fee charged after the conversion license period shall be adjusted to credit the excess
411.5 fee payment made during the conversion license period. The credit is calculated by: (1)
411.6 subtracting the number of months of the licensee's conversion license period from 12; and
411.7 (2) multiplying the result of clause (1) by 1/12 of the annual fee rounded up to the next
411.8 dollar.

411.9 (d) For a licensee whose conversion license period is 12 months, the first annual license
411.10 fee charged after the conversion license period shall not be adjusted.

411.11 (e) For a licensee whose conversion license period is 13 to 17 months, the first annual
411.12 license fee charged after the conversion license period shall be adjusted to add the annual
411.13 license fee payment for the months that were not included in the annual license fee paid for

- 411.14 the conversion license period. The added payment is calculated by: (1) subtracting 12 from
411.15 the number of months of the licensee's conversion license period; and (2) multiplying the
411.16 result of clause (1) by 1/12 of the annual fee rounded up to the next dollar.
- 411.17 (f) For the second and all subsequent license renewals made after the conversion license
411.18 period, the licensee's annual license fee is as listed in section 147A.28.
- 411.19 Subd. 6. **Expiration.** This section expires July 1, 2021.
- 411.20 Sec. 8. Minnesota Statutes 2016, section 147B.02, subdivision 9, is amended to read:
- 411.21 Subd. 9. **Renewal.** (a) To renew a license an applicant must:
- 411.22 (1) annually, or as determined by the board, complete a renewal application on a form
411.23 provided by the board;
- 411.24 (2) submit the renewal fee;
- 411.25 (3) provide documentation of current and active NCCAOM certification; or
- 411.26 (4) if licensed under subdivision 5 or 6, meet the same NCCAOM professional
411.27 development activity requirements as those licensed under subdivision 7.
- 411.28 (b) An applicant shall submit any additional information requested by the board to clarify
411.29 information presented in the renewal application. The information must be submitted within
411.30 30 days after the board's request, or the renewal request is nullified.
- 412.1 (c) An applicant must maintain a correct mailing address with the board for receiving
412.2 board communications, notices, and license renewal documents. Placing the license renewal
412.3 application in first class United States mail, addressed to the applicant at the applicant's last
412.4 known address with postage prepaid, constitutes valid service. Failure to receive the renewal
412.5 documents does not relieve an applicant of the obligation to comply with this section.
- 412.6 (d) The name of an applicant who does not return a complete license renewal application,
412.7 annual license fee, or late application fee, as applicable, within the time period required by
412.8 this section shall be removed from the list of individuals authorized to practice during the
412.9 current renewal period. If the applicant's license is reinstated, the applicant's name shall be
412.10 placed on the list of individuals authorized to practice.
- 412.11 Sec. 9. Minnesota Statutes 2016, section 147B.02, is amended by adding a subdivision to
412.12 read:

412.13 Subd. 12a. Licensure following lapse of licensed status; transition. (a) A licensee
412.14 whose license has lapsed under subdivision 12 before January 1, 2019, and who seeks to
412.15 regain licensed status after January 1, 2019, shall be treated as a first-time licensee only for
412.16 purposes of establishing a license renewal schedule, and shall not be subject to the license
412.17 cycle conversion provisions in section 147B.09.

412.18 (b) This subdivision expires July 1, 2021.

412.19 Sec. 10. Minnesota Statutes 2017 Supplement, section 147B.08, is amended to read:

412.20 **147B.08 FEES.**

412.21 Subd. 4. **Acupuncturist application and license fees.** (a) The board may charge the
412.22 following nonrefundable fees:

412.23 (1) acupuncturist application fee, \$150;

412.24 (2) acupuncturist annual registration renewal fee, \$150;

412.25 (3) acupuncturist temporary registration fee, \$60;

412.26 (4) acupuncturist inactive status fee, \$50;

412.27 (5) acupuncturist late fee, \$50;

412.28 (6) duplicate license fee, \$20;

412.29 (7) certification letter fee, \$25;

412.30 (8) education or training program approval fee, \$100; ~~and~~

413.1 (9) report creation and generation fee, \$60; per hour;

413.2 (10) verification fee, \$25; and

413.3 (11) criminal background check fee, \$32.

413.4 (b) The board may prorate the initial annual license fee. All licensees are required to
413.5 pay the full fee upon license renewal. The revenue generated from the fees must be deposited
413.6 in an account in the state government special revenue fund.

413.7 Sec. 11. **[147B.09] LICENSE RENEWAL CYCLE CONVERSION.**

413.8 Subdivision 1. **Generally.** The license renewal cycle for acupuncture practitioner licensees
413.9 is converted to an annual cycle where renewal is due on the last day of the licensee's month
413.10 of birth. Conversion pursuant to this section begins January 1, 2019. This section governs
413.11 license renewal procedures for licensees who were licensed before December 31, 2018. The
413.12 conversion renewal cycle is the renewal cycle following the first license renewal after
413.13 January 1, 2019. The conversion license period is the license period for the conversion
413.14 renewal cycle. The conversion license period is between six and 17 months and ends on the
413.15 last day of the licensee's month of birth in either 2019 or 2020, as described in subdivision
413.16 2.

413.17 Subd. 2. **Conversion of license renewal cycle for current licensees.** For a licensee
413.18 whose license is current as of December 31, 2018, the licensee's conversion license period
413.19 begins on January 1, 2019, and ends on the last day of the licensee's month of birth in 2019,
413.20 except that for licensees whose month of birth is January, February, March, April, May, or
413.21 June, the licensee's renewal cycle ends on the last day of the licensee's month of birth in
413.22 2020.

413.23 Subd. 3. **Conversion of license renewal cycle for noncurrent licensees.** This subdivision
413.24 applies to an individual who was licensed before December 31, 2018, but whose license is
413.25 not current as of December 31, 2018. When the individual first renews the license after
413.26 January 1, 2019, the conversion renewal cycle begins on the date the individual applies for
413.27 renewal and ends on the last day of the licensee's month of birth in the same year, except
413.28 that if the last day of the individual's month of birth is less than six months after the date
413.29 the individual applies for renewal, then the renewal period ends on the last day of the
413.30 individual's month of birth in the following year.

413.31 Subd. 4. **Subsequent renewal cycles.** After the licensee's conversion renewal cycle
413.32 under subdivision 2 or 3, subsequent renewal cycles are annual and begin on the last day
413.33 of the month of the licensee's birth.

414.1 Subd. 5. **Conversion period and fees.** (a) A licensee who holds a license issued before
414.2 January 1, 2019, and who renews that license pursuant to subdivision 2 or 3, shall pay a
414.3 renewal fee as required in this subdivision.

414.4 (b) A licensee shall be charged the annual license fee listed in section 147B.08 for the
414.5 conversion license period.

414.6 (c) For a licensee whose conversion license period is six to 11 months, the first annual
414.7 license fee charged after the conversion license period shall be adjusted to credit the excess
414.8 fee payment made during the conversion license period. The credit is calculated by: (1)
414.9 subtracting the number of months of the licensee's conversion license period from 12; and

414.10 (2) multiplying the result of clause (1) by 1/12 of the annual fee rounded up to the next
414.11 dollar.

414.12 (d) For a licensee whose conversion license period is 12 months, the first annual license
414.13 fee charged after the conversion license period shall not be adjusted.

414.14 (e) For a licensee whose conversion license period is 13 to 17 months, the first annual
414.15 license fee charged after the conversion license period shall be adjusted to add the annual
414.16 license fee payment for the months that were not included in the annual license fee paid for
414.17 the conversion license period. The added payment is calculated by: (1) subtracting 12 from
414.18 the number of months of the licensee's conversion license period; and (2) multiplying the
414.19 result of clause (1) by 1/12 of the annual fee rounded up to the next dollar.

414.20 (f) For the second and all subsequent license renewals made after the conversion license
414.21 period, the licensee's annual license fee is as listed in section 147B.08.

414.22 Subd. 6. **Expiration.** This section expires July 1, 2021.

414.23 Sec. 12. Minnesota Statutes 2016, section 147C.15, subdivision 7, is amended to read:

414.24 Subd. 7. **Renewal.** (a) To be eligible for license renewal a licensee must:

414.25 (1) annually, or as determined by the board, complete a renewal application on a form
414.26 provided by the board;

414.27 (2) submit the renewal fee;

414.28 (3) provide evidence every two years of a total of 24 hours of continuing education
414.29 approved by the board as described in section 147C.25; and

414.30 (4) submit any additional information requested by the board to clarify information
414.31 presented in the renewal application. The information must be submitted within 30 days
414.32 after the board's request, or the renewal request is nullified.

415.1 (b) Applicants for renewal who have not practiced the equivalent of eight full weeks
415.2 during the past five years must achieve a passing score on retaking the credentialing
415.3 examination.

415.4 (c) A licensee must maintain a correct mailing address with the board for receiving board
415.5 communications, notices, and license renewal documents. Placing the license renewal
415.6 application in first class United States mail, addressed to the licensee at the licensee's last

415.7 known address with postage prepaid, constitutes valid service. Failure to receive the renewal
415.8 documents does not relieve a licensee of the obligation to comply with this section.

415.9 (d) The name of a licensee who does not return a complete license renewal application,
415.10 annual license fee, or late application fee, as applicable, within the time period required by
415.11 this section shall be removed from the list of individuals authorized to practice during the
415.12 current renewal period. If the licensee's license is reinstated, the licensee's name shall be
415.13 placed on the list of individuals authorized to practice.

415.14 Sec. 13. Minnesota Statutes 2016, section 147C.15, is amended by adding a subdivision
415.15 to read:

415.16 Subd. 12a. **Licensure following lapse of licensed status; transition.** (a) A licensee
415.17 whose license has lapsed under subdivision 12 before January 1, 2019, and who seeks to
415.18 regain licensed status after January 1, 2019, shall be treated as a first-time licensee only for
415.19 purposes of establishing a license renewal schedule, and shall not be subject to the license
415.20 cycle conversion provisions in section 147C.45.

415.21 (b) This subdivision expires July 1, 2021.

415.22 Sec. 14. Minnesota Statutes 2017 Supplement, section 147C.40, is amended to read:

415.23 **147C.40 FEES.**

415.24 Subd. 5. **Respiratory therapist application and license fees.** (a) The board may charge
415.25 the following nonrefundable fees:

415.26 (1) respiratory therapist application fee, \$100;

415.27 (2) respiratory therapist annual registration renewal fee, \$90;

415.28 (3) respiratory therapist inactive status fee, \$50;

415.29 (4) respiratory therapist temporary registration fee, \$90;

415.30 (5) respiratory therapist temporary permit, \$60;

416.1 (6) respiratory therapist late fee, \$50;

416.2 (7) duplicate license fee, \$20;

416.3 (8) certification letter fee, \$25;

416.4 (9) education or training program approval fee, \$100; ~~and~~

416.5 (10) report creation and generation fee, \$60- per hour;

416.6 (11) verification fee, \$25; and

416.7 (12) criminal background check fee, \$32.

416.8 (b) The board may prorate the initial annual license fee. All licensees are required to
416.9 pay the full fee upon license renewal. The revenue generated from the fees must be deposited
416.10 in an account in the state government special revenue fund.

416.11 Sec. 15. [147C.45] LICENSE RENEWAL CYCLE CONVERSION.

416.12 Subdivision 1. **Generally.** The license renewal cycle for respiratory care practitioner
416.13 licensees is converted to an annual cycle where renewal is due on the last day of the licensee's
416.14 month of birth. Conversion pursuant to this section begins January 1, 2019. This section
416.15 governs license renewal procedures for licensees who were licensed before December 31,
416.16 2018. The conversion renewal cycle is the renewal cycle following the first license renewal
416.17 after January 1, 2019. The conversion license period is the license period for the conversion
416.18 renewal cycle. The conversion license period is between six and 17 months and ends on the
416.19 last day of the licensee's month of birth in either 2019 or 2020, as described in subdivision
416.20 2.

416.21 Subd. 2. **Conversion of license renewal cycle for current licensees.** For a licensee
416.22 whose license is current as of December 31, 2018, the licensee's conversion license period
416.23 begins on January 1, 2019, and ends on the last day of the licensee's month of birth in 2019,
416.24 except that for licensees whose month of birth is January, February, March, April, May, or
416.25 June, the licensee's renewal cycle ends on the last day of the licensee's month of birth in
416.26 2020.

416.27 Subd. 3. **Conversion of license renewal cycle for noncurrent licensees.** This subdivision
416.28 applies to an individual who was licensed before December 31, 2018, but whose license is
416.29 not current as of December 31, 2018. When the individual first renews the license after
416.30 January 1, 2019, the conversion renewal cycle begins on the date the individual applies for
416.31 renewal and ends on the last day of the licensee's month of birth in the same year, except
416.32 that if the last day of the individual's month of birth is less than six months after the date
417.1 the individual applies for renewal, then the renewal period ends on the last day of the
417.2 individual's month of birth in the following year.

417.3 Subd. 4. **Subsequent renewal cycles.** After the licensee's conversion renewal cycle
417.4 under subdivision 2 or 3, subsequent renewal cycles are annual and begin on the last day
417.5 of the month of the licensee's birth.

417.6 Subd. 5. **Conversion period and fees.** (a) A licensee who holds a license issued before
417.7 January 1, 2019, and who renews that license pursuant to subdivision 2 or 3, shall pay a
417.8 renewal fee as required in this subdivision.

417.9 (b) A licensee shall be charged the annual license fee listed in section 147C.40 for the
417.10 conversion license period.

417.11 (c) For a licensee whose conversion license period is six to 11 months, the first annual
417.12 license fee charged after the conversion license period shall be adjusted to credit the excess
417.13 fee payment made during the conversion license period. The credit is calculated by: (1)
417.14 subtracting the number of months of the licensee's conversion license period from 12; and
417.15 (2) multiplying the result of clause (1) by 1/12 of the annual fee rounded up to the next
417.16 dollar.

417.17 (d) For a licensee whose conversion license period is 12 months, the first annual license
417.18 fee charged after the conversion license period shall not be adjusted.

417.19 (e) For a licensee whose conversion license period is 13 to 17 months, the first annual
417.20 license fee charged after the conversion license period shall be adjusted to add the annual
417.21 license fee payment for the months that were not included in the annual license fee paid for
417.22 the conversion license period. The added payment is calculated by: (1) subtracting 12 from
417.23 the number of months of the licensee's conversion license period; and (2) multiplying the
417.24 result of clause (1) by 1/12 of the annual fee rounded up to the next dollar.

417.25 (f) For the second and all subsequent license renewals made after the conversion license
417.26 period, the licensee's annual license fee is as listed in section 147C.40.

417.27 Subd. 6. **Expiration.** This section expires July 1, 2021.

417.28 Sec. 16. Minnesota Statutes 2016, section 147D.17, subdivision 6, is amended to read:

417.29 Subd. 6. **Renewal.** (a) To be eligible for license renewal, a licensed traditional midwife
417.30 must:

417.31 (1) complete a renewal application on a form provided by the board;

417.32 (2) submit the renewal fee;

- 418.1 (3) provide evidence every three years of a total of 30 hours of continuing education
418.2 approved by the board as described in section 147D.21;
- 418.3 (4) submit evidence of an annual peer review and update of the licensed traditional
418.4 midwife's medical consultation plan; and
- 418.5 (5) submit any additional information requested by the board. The information must be
418.6 submitted within 30 days after the board's request, or the renewal request is nullified.
- 418.7 (b) A licensee must maintain a correct mailing address with the board for receiving board
418.8 communications, notices, and license renewal documents. Placing the license renewal
418.9 application in first class United States mail, addressed to the licensee at the licensee's last
418.10 known address with postage prepaid, constitutes valid service. Failure to receive the renewal
418.11 documents does not relieve a licensee of the obligation to comply with this section.
- 418.12 (c) The name of a licensee who does not return a complete license renewal application,
418.13 annual license fee, or late application fee, as applicable, within the time period required by
418.14 this section shall be removed from the list of individuals authorized to practice during the
418.15 current renewal period. If the licensee's license is reinstated, the licensee's name shall be
418.16 placed on the list of individuals authorized to practice.
- 418.17 Sec. 17. Minnesota Statutes 2016, section 147D.17, is amended by adding a subdivision
418.18 to read:
- 418.19 Subd. 11a. **Licensure following lapse of licensed status; transition.** (a) A licensee
418.20 whose license has lapsed under subdivision 11 before January 1, 2019, and who seeks to
418.21 regain licensed status after January 1, 2019, shall be treated as a first-time licensee only for
418.22 purposes of establishing a license renewal schedule, and shall not be subject to the license
418.23 cycle conversion provisions in section 147D.29.
- 418.24 (b) This subdivision expires July 1, 2021.
- 418.25 Sec. 18. Minnesota Statutes 2016, section 147D.27, is amended by adding a subdivision
418.26 to read:
- 418.27 Subd. 5. **Additional fees.** The board may also charge the following nonrefundable fees:
- 418.28 (1) verification fee, \$25;
- 418.29 (2) certification letter fee, \$25;

418.30 (3) education or training program approval fee, \$100;

418.31 (4) report creation and generation fee, \$60 per hour;

419.1 (5) duplicate license fee, \$20; and

419.2 (6) criminal background check fee, \$32.

419.3 Sec. 19. **[147D.29] LICENSE RENEWAL CYCLE CONVERSION.**

419.4 Subdivision 1. **Generally.** The license renewal cycle for traditional midwife licensees
419.5 is converted to an annual cycle where renewal is due on the last day of the licensee's month
419.6 of birth. Conversion pursuant to this section begins January 1, 2019. This section governs
419.7 license renewal procedures for licensees who were licensed before December 31, 2018. The
419.8 conversion renewal cycle is the renewal cycle following the first license renewal after
419.9 January 1, 2019. The conversion license period is the license period for the conversion
419.10 renewal cycle. The conversion license period is between six and 17 months and ends on the
419.11 last day of the licensee's month of birth in either 2019 or 2020, as described in subdivision
419.12 2.

419.13 Subd. 2. **Conversion of license renewal cycle for current licensees.** For a licensee
419.14 whose license is current as of December 31, 2018, the licensee's conversion license period
419.15 begins on January 1, 2019, and ends on the last day of the licensee's month of birth in 2019,
419.16 except that for licensees whose month of birth is January, February, March, April, May, or
419.17 June, the licensee's renewal cycle ends on the last day of the licensee's month of birth in
419.18 2020.

419.19 Subd. 3. **Conversion of license renewal cycle for noncurrent licensees.** This subdivision
419.20 applies to an individual who was licensed before December 31, 2018, but whose license is
419.21 not current as of December 31, 2018. When the individual first renews the license after
419.22 January 1, 2019, the conversion renewal cycle begins on the date the individual applies for
419.23 renewal and ends on the last day of the licensee's month of birth in the same year, except
419.24 that if the last day of the individual's month of birth is less than six months after the date
419.25 the individual applies for renewal, then the renewal period ends on the last day of the
419.26 individual's month of birth in the following year.

419.27 Subd. 4. **Subsequent renewal cycles.** After the licensee's conversion renewal cycle
419.28 under subdivision 2 or 3, subsequent renewal cycles are annual and begin on the last day
419.29 of the month of the licensee's birth.

419.30 Subd. 5. **Conversion period and fees.** (a) A licensee who holds a license issued before
419.31 January 1, 2019, and who renews that license pursuant to subdivision 2 or 3, shall pay a
419.32 renewal fee as required in this subdivision.

420.1 (b) A licensee shall be charged the annual license fee listed in section 147D.27 for the
420.2 conversion license period.

420.3 (c) For a licensee whose conversion license period is six to 11 months, the first annual
420.4 license fee charged after the conversion license period shall be adjusted to credit the excess
420.5 fee payment made during the conversion license period. The credit is calculated by: (1)
420.6 subtracting the number of months of the licensee's conversion license period from 12; and
420.7 (2) multiplying the result of clause (1) by 1/12 of the annual fee rounded up to the next
420.8 dollar.

420.9 (d) For a licensee whose conversion license period is 12 months, the first annual license
420.10 fee charged after the conversion license period shall not be adjusted.

420.11 (e) For a licensee whose conversion license period is 13 to 17 months, the first annual
420.12 license fee charged after the conversion license period shall be adjusted to add the annual
420.13 license fee payment for the months that were not included in the annual license fee paid for
420.14 the conversion license period. The added payment is calculated by: (1) subtracting 12 from
420.15 the number of months of the licensee's conversion license period; and (2) multiplying the
420.16 result of clause (1) by 1/12 of the annual fee rounded up to the next dollar.

420.17 (f) For the second and all subsequent license renewals made after the conversion license
420.18 period, the licensee's annual license fee is as listed in section 147D.27.

420.19 Subd. 6. **Expiration.** This section expires July 1, 2021.

420.20 Sec. 20. Minnesota Statutes 2016, section 147E.15, subdivision 5, is amended to read:

420.21 Subd. 5. **Renewal.** (a) To be eligible for registration renewal a registrant must:

420.22 (1) annually, or as determined by the board, complete a renewal application on a form
420.23 provided by the board;

420.24 (2) submit the renewal fee;

420.25 (3) provide evidence of a total of 25 hours of continuing education approved by the
420.26 board as described in section 147E.25; and

420.27 (4) submit any additional information requested by the board to clarify information
420.28 presented in the renewal application. The information must be submitted within 30 days
420.29 after the board's request, or the renewal request is nullified.

420.30 (b) A registrant must maintain a correct mailing address with the board for receiving
420.31 board communications, notices, and registration renewal documents. Placing the registration
420.32 renewal application in first class United States mail, addressed to the registrant at the
421.1 registrant's last known address with postage prepaid, constitutes valid service. Failure to
421.2 receive the renewal documents does not relieve a registrant of the obligation to comply with
421.3 this section.

421.4 (c) The name of a registrant who does not return a complete registration renewal
421.5 application, annual registration fee, or late application fee, as applicable, within the time
421.6 period required by this section shall be removed from the list of individuals authorized to
421.7 practice during the current renewal period. If the registrant's registration is reinstated, the
421.8 registrant's name shall be placed on the list of individuals authorized to practice.

421.9 Sec. 21. Minnesota Statutes 2016, section 147E.15, is amended by adding a subdivision
421.10 to read:

421.11 Subd. 10a. **Registration following lapse of registered status; transition.** (a) A registrant
421.12 whose registration has lapsed under subdivision 10 before January 1, 2019, and who seeks
421.13 to regain registered status after January 1, 2019, shall be treated as a first-time registrant
421.14 only for purposes of establishing a registration renewal schedule, and shall not be subject
421.15 to the registration cycle conversion provisions in section 147E.45.

421.16 (b) This subdivision expires July 1, 2021.

421.17 Sec. 22. Minnesota Statutes 2016, section 147E.40, subdivision 1, is amended to read:

421.18 Subdivision 1. **Fees.** Fees are as follows:

421.19 (1) registration application fee, \$200;

421.20 (2) renewal fee, \$150;

421.21 (3) late fee, \$75;

421.22 (4) inactive status fee, \$50; and

421.23 (5) temporary permit fee, \$25.

421.24 (6) emeritus registration fee, \$50;

421.25 (7) duplicate license fee, \$20;

421.26 (8) certification letter fee, \$25;

421.27 (9) verification fee, \$25;

421.28 (10) education or training program approval fee, \$100; and

421.29 (11) report creation and generation fee, \$60 per hour.

422.1 Sec. 23. **[147E.45] REGISTRATION RENEWAL CYCLE CONVERSION.**

422.2 Subdivision 1. **Generally.** The registration renewal cycle for registered naturopathic
422.3 doctors is converted to an annual cycle where renewal is due on the last day of the registrant's
422.4 month of birth. Conversion pursuant to this section begins January 1, 2019. This section
422.5 governs registration renewal procedures for registrants who were registered before December
422.6 31, 2018. The conversion renewal cycle is the renewal cycle following the first registration
422.7 renewal after January 1, 2019. The conversion registration period is the registration period
422.8 for the conversion renewal cycle. The conversion registration period is between six and 17
422.9 months and ends on the last day of the registrant's month of birth in either 2019 or 2020, as
422.10 described in subdivision 2.

422.11 Subd. 2. **Conversion of registration renewal cycle for current registrants.** For a
422.12 registrant whose registration is current as of December 31, 2018, the registrant's conversion
422.13 registration period begins on January 1, 2019, and ends on the last day of the registrant's
422.14 month of birth in 2019, except that for registrants whose month of birth is January, February,
422.15 March, April, May, or June, the registrant's renewal cycle ends on the last day of the
422.16 registrant's month of birth in 2020.

422.17 Subd. 3. **Conversion of registration renewal cycle for noncurrent registrants.** This
422.18 subdivision applies to an individual who was registered before December 31, 2018, but
422.19 whose registration is not current as of December 31, 2018. When the individual first renews
422.20 the registration after January 1, 2019, the conversion renewal cycle begins on the date the
422.21 individual applies for renewal and ends on the last day of the registrant's month of birth in
422.22 the same year, except that if the last day of the individual's month of birth is less than six
422.23 months after the date the individual applies for renewal, then the renewal period ends on
422.24 the last day of the individual's month of birth in the following year.

- 422.25 Subd. 4. **Subsequent renewal cycles.** After the registrant's conversion renewal cycle
422.26 under subdivision 2 or 3, subsequent renewal cycles are annual and begin on the last day
422.27 of the month of the registrant's birth.
- 422.28 Subd. 5. **Conversion period and fees.** (a) A registrant who holds a registration issued
422.29 before January 1, 2019, and who renews that registration pursuant to subdivision 2 or 3,
422.30 shall pay a renewal fee as required in this subdivision.
- 422.31 (b) A registrant shall be charged the annual registration fee listed in section 147E.40 for
422.32 the conversion registration period.
- 422.33 (c) For a registrant whose conversion registration period is six to 11 months, the first
422.34 annual registration fee charged after the conversion registration period shall be adjusted to
423.1 credit the excess fee payment made during the conversion registration period. The credit is
423.2 calculated by: (1) subtracting the number of months of the registrant's conversion registration
423.3 period from 12; and (2) multiplying the result of clause (1) by 1/12 of the annual fee rounded
423.4 up to the next dollar.
- 423.5 (d) For a registrant whose conversion registration period is 12 months, the first annual
423.6 registration fee charged after the conversion registration period shall not be adjusted.
- 423.7 (e) For a registrant whose conversion registration period is 13 to 17 months, the first
423.8 annual registration fee charged after the conversion registration period shall be adjusted to
423.9 add the annual registration fee payment for the months that were not included in the annual
423.10 registration fee paid for the conversion registration period. The added payment is calculated
423.11 by: (1) subtracting 12 from the number of months of the registrant's conversion registration
423.12 period; and (2) multiplying the result of clause (1) by 1/12 of the annual fee rounded up to
423.13 the next dollar.
- 423.14 (f) For the second and all subsequent registration renewals made after the conversion
423.15 registration period, the registrant's annual registration fee is as listed in section 147E.40.
- 423.16 Subd. 6. **Expiration.** This section expires July 1, 2021.
- 423.17 Sec. 24. Minnesota Statutes 2016, section 147F.07, subdivision 5, is amended to read:
- 423.18 Subd. 5. **License renewal.** (a) To be eligible for license renewal, a licensed genetic
423.19 counselor must submit to the board:
- 423.20 (1) a renewal application on a form provided by the board;
- 423.21 (2) the renewal fee required under section 147F.17;

423.22 (3) evidence of compliance with the continuing education requirements in section
423.23 147F.11; and

423.24 (4) any additional information requested by the board.

423.25 (b) A licensee must maintain a correct mailing address with the board for receiving board
423.26 communications, notices, and license renewal documents. Placing the license renewal
423.27 application in first class United States mail, addressed to the licensee at the licensee's last
423.28 known address with postage prepaid, constitutes valid service. Failure to receive the renewal
423.29 documents does not relieve a licensee of the obligation to comply with this section.

423.30 (c) The name of a licensee who does not return a complete license renewal application,
423.31 annual license fee, or late application fee, as applicable, within the time period required by
423.32 this section shall be removed from the list of individuals authorized to practice during the
424.1 current renewal period. If the licensee's license is reinstated, the licensee's name shall be
424.2 placed on the list of individuals authorized to practice.

424.3 Sec. 25. Minnesota Statutes 2016, section 147F.07, is amended by adding a subdivision
424.4 to read:

424.5 Subd. 6. **Licensure following lapse of licensure status for two years or less.** For any
424.6 individual whose licensure status has lapsed for two years or less, to regain licensure status,
424.7 the individual must:

424.8 (1) apply for license renewal according to subdivision 5;

424.9 (2) document compliance with the continuing education requirements of section 147F.11
424.10 since the licensed genetic counselor's initial licensure or last renewal; and

424.11 (3) submit the fees required under section 147F.17 for the period not licensed, including
424.12 the fee for late renewal.

424.13 Sec. 26. Minnesota Statutes 2016, section 147F.07, is amended by adding a subdivision
424.14 to read:

424.15 Subd. 6a. **Licensure following lapse of licensed status; transition.** (a) A licensee whose
424.16 license has lapsed under subdivision 6 before January 1, 2019, and who seeks to regain
424.17 licensed status after January 1, 2019, shall be treated as a first-time licensee only for purposes
424.18 of establishing a license renewal schedule, and shall not be subject to the license cycle
424.19 conversion provisions in section 147F.19.

424.20 (b) This subdivision expires July 1, 2021.

424.21 Sec. 27. Minnesota Statutes 2016, section 147F.17, subdivision 1, is amended to read:

424.22 Subdivision 1. **Fees.** Fees are as follows:

424.23 (1) license application fee, \$200;

424.24 (2) initial licensure and annual renewal, \$150; and

424.25 (3) late fee, \$75;

424.26 (4) temporary license fee, \$60;

424.27 (5) duplicate license fee, \$20;

424.28 (6) certification letter fee, \$25;

424.29 (7) education or training program approval fee, \$100;

425.1 (8) report creation and generation fee, \$60 per hour; and

425.2 (9) criminal background check fee, \$32.

425.3 Sec. 28. **[147F.19] LICENSE RENEWAL CYCLE CONVERSION.**

425.4 Subdivision 1. **Generally.** The license renewal cycle for genetic counselor licensees is
425.5 converted to an annual cycle where renewal is due on the last day of the licensee's month
425.6 of birth. Conversion pursuant to this section begins January 1, 2019. This section governs
425.7 license renewal procedures for licensees who were licensed before December 31, 2018. The
425.8 conversion renewal cycle is the renewal cycle following the first license renewal after
425.9 January 1, 2019. The conversion license period is the license period for the conversion
425.10 renewal cycle. The conversion license period is between six and 17 months and ends on the
425.11 last day of the licensee's month of birth in either 2019 or 2020, as described in subdivision
425.12 2.

425.13 Subd. 2. **Conversion of license renewal cycle for current licensees.** For a licensee
425.14 whose license is current as of December 31, 2018, the licensee's conversion license period
425.15 begins on January 1, 2019, and ends on the last day of the licensee's month of birth in 2019,
425.16 except that for licensees whose month of birth is January, February, March, April, May, or

425.17 June, the licensee's renewal cycle ends on the last day of the licensee's month of birth in
425.18 2020.

425.19 Subd. 3. **Conversion of license renewal cycle for noncurrent licensees.** This subdivision
425.20 applies to an individual who was licensed before December 31, 2018, but whose license is
425.21 not current as of December 31, 2018. When the individual first renews the license after
425.22 January 1, 2019, the conversion renewal cycle begins on the date the individual applies for
425.23 renewal and ends on the last day of the licensee's month of birth in the same year, except
425.24 that if the last day of the individual's month of birth is less than six months after the date
425.25 the individual applies for renewal, then the renewal period ends on the last day of the
425.26 individual's month of birth in the following year.

425.27 Subd. 4. **Subsequent renewal cycles.** After the licensee's conversion renewal cycle
425.28 under subdivision 2 or 3, subsequent renewal cycles are annual and begin on the last day
425.29 of the month of the licensee's birth.

425.30 Subd. 5. **Conversion period and fees.** (a) A licensee who holds a license issued before
425.31 January 1, 2019, and who renews that license pursuant to subdivision 2 or 3, shall pay a
425.32 renewal fee as required in this subdivision.

426.1 (b) A licensee shall be charged the annual license fee listed in section 147F.17 for the
426.2 conversion license period.

426.3 (c) For a licensee whose conversion license period is six to 11 months, the first annual
426.4 license fee charged after the conversion license period shall be adjusted to credit the excess
426.5 fee payment made during the conversion license period. The credit is calculated by: (1)
426.6 subtracting the number of months of the licensee's conversion license period from 12; and
426.7 (2) multiplying the result of clause (1) by 1/12 of the annual fee rounded up to the next
426.8 dollar.

426.9 (d) For a licensee whose conversion license period is 12 months, the first annual license
426.10 fee charged after the conversion license period shall not be adjusted.

426.11 (e) For a licensee whose conversion license period is 13 to 17 months, the first annual
426.12 license fee charged after the conversion license period shall be adjusted to add the annual
426.13 license fee payment for the months that were not included in the annual license fee paid for
426.14 the conversion license period. The added payment is calculated by: (1) subtracting 12 from
426.15 the number of months of the licensee's conversion license period; and (2) multiplying the
426.16 result of clause (1) by 1/12 of the annual fee rounded up to the next dollar.

426.17 (f) For the second and all subsequent license renewals made after the conversion license
426.18 period, the licensee's annual license fee is as listed in section 147F.17.

426.19 Subd. 6. **Expiration.** This section expires July 1, 2021.

274.13 Sec. 5. **[148.2855] NURSE LICENSURE COMPACT.**

274.14 The Nurse Licensure Compact is enacted into law and entered into with all other
274.15 jurisdictions legally joining in it, in the form substantially as follows:

274.16 **ARTICLE I**

274.17 **DEFINITIONS**

274.18 As used in this compact:

274.19 (a) "Adverse action" means any administrative, civil, equitable, or criminal action
274.20 permitted by a state's law that is imposed by a licensing board or other authority against a
274.21 nurse, including actions against an individual's license or multistate licensure privilege such
274.22 as revocation, suspension, probation, monitoring of the licensee, limitation on the licensee's
274.23 practice, or any other encumbrance on licensure affecting a nurse's authorization to practice,
274.24 including issuance of a cease and desist action.

274.25 (b) "Alternative program" means a nondisciplinary monitoring program approved by a
274.26 licensing board.

274.27 (c) "Coordinated licensure information system" means an integrated process for collecting,
274.28 storing, and sharing information on nurse licensure and enforcement activities related to
274.29 nurse licensure laws that is administered by a nonprofit organization composed of and
274.30 controlled by licensing boards.

274.31 (d) "Current significant investigative information" means:

275.1 (1) investigative information that a licensing board, after a preliminary inquiry that
275.2 includes notification and an opportunity for the nurse to respond, if required by state law,
275.3 has reason to believe is not groundless and, if proved true, would indicate more than a minor
275.4 infraction; or

275.5 (2) investigative information that indicates that the nurse represents an immediate threat
275.6 to public health and safety, regardless of whether the nurse has been notified and had an
275.7 opportunity to respond.

- 275.8 (e) "Encumbrance" means a revocation or suspension of, or any limitation on, the full
275.9 and unrestricted practice of nursing imposed by a licensing board.
- 275.10 (f) "Home state" means the party state which is the nurse's primary state of residence.
- 275.11 (g) "Licensing board" means a party state's regulatory body responsible for issuing nurse
275.12 licenses.
- 275.13 (h) "Multistate license" means a license to practice as a registered or a licensed
275.14 practical/vocational nurse (LPN/VN) issued by a home state licensing board that authorizes
275.15 the licensed nurse to practice in all party states under a multistate licensure privilege.
- 275.16 (i) "Multistate licensure privilege" means a legal authorization associated with a multistate
275.17 license permitting the practice of nursing as either a registered nurse (RN) or licensed
275.18 practical/vocational nurse (LPN/VN) in a remote state.
- 275.19 (j) "Nurse" means a registered nurse (RN) or licensed practical/vocational nurse
275.20 (LPN/VN), as those terms are defined by each party state's practice laws.
- 275.21 (k) "Party state" means any state that has adopted this compact.
- 275.22 (l) "Remote state" means a party state, other than the home state.
- 275.23 (m) "Single-state license" means a nurse license issued by a party state that authorizes
275.24 practice only within the issuing state and does not include a multistate licensure privilege
275.25 to practice in any other party state.
- 275.26 (n) "State" means a state, territory, or possession of the United States and the District
275.27 of Columbia.
- 275.28 (o) "State practice laws" means a party state's laws, rules, and regulations that govern
275.29 the practice of nursing, define the scope of nursing practice, and create the methods and
275.30 grounds for imposing discipline. State practice laws do not include requirements necessary
275.31 to obtain and retain a license, except for qualifications or requirements of the home state.

276.1 ARTICLE II

276.2 GENERAL PROVISIONS AND JURISDICTION

- 276.3 (a) A multistate license to practice registered or licensed practical/vocational nursing
276.4 issued by a home state to a resident in that state will be recognized by each party state as

- 276.5 authorizing a nurse to practice as an RN or as a LPN/VN under a multistate licensure
276.6 privilege in each party state.
- 276.7 (b) A state must implement procedures for considering the criminal history records of
276.8 applicants for initial multistate license or licensure by endorsement. Such procedures shall
276.9 include the submission of fingerprints or other biometric-based information by applicants
276.10 for the purpose of obtaining an applicant's criminal history record information from the
276.11 Federal Bureau of Investigation and the agency responsible for retaining that state's criminal
276.12 records.
- 276.13 (c) Each party state shall require the following for an applicant to obtain or retain a
276.14 multistate license in the home state:
- 276.15 (1) meets the home state's qualifications for licensure or renewal of licensure, as well
276.16 as all other applicable state laws;
- 276.17 (2)(i) has graduated or is eligible to graduate from a licensing board-approved RN or
276.18 LPN/VN prelicensure education program; or
- 276.19 (ii) has graduated from a foreign RN or LPN/VN prelicensure education program that:
- 276.20 (A) has been approved by the authorized accrediting body in the applicable country; and
- 276.21 (B) has been verified by an independent credentials review agency to be comparable to
276.22 a licensing board-approved prelicensure education program;
- 276.23 (3) has, if a graduate of a foreign prelicensure education program not taught in English
276.24 or if English is not the individual's native language, successfully passed an English
276.25 proficiency examination that includes the components of reading, speaking, writing, and
276.26 listening;
- 276.27 (4) has successfully passed an NCLEX-RN or NCLEX-PN Examination or recognized
276.28 predecessor, as applicable;
- 276.29 (5) is eligible for or holds an active, unencumbered license;
- 276.30 (6) has submitted, in connection with an application for initial licensure or licensure by
276.31 endorsement, fingerprints, or other biometric data for the purpose of obtaining criminal
277.1 history record information from the Federal Bureau of Investigation and the agency
277.2 responsible for retaining that state's criminal records;

- 277.3 (7) has not been convicted or found guilty, or has entered into an agreed disposition, of
277.4 a felony offense under applicable state or federal criminal law;
- 277.5 (8) has not been convicted or found guilty, or has entered into an agreed disposition, of
277.6 a misdemeanor offense related to the practice of nursing as determined on a case-by-case
277.7 basis;
- 277.8 (9) is not currently enrolled in an alternative program;
- 277.9 (10) is subject to self-disclosure requirements regarding current participation in an
277.10 alternative program; and
- 277.11 (11) has a valid United States Social Security number.
- 277.12 (d) All party states shall be authorized, in accordance with existing state due process
277.13 law, to take adverse action against a nurse's multistate licensure privilege such as revocation,
277.14 suspension, probation, or any other action that affects a nurse's authorization to practice
277.15 under a multistate licensure privilege, including cease and desist actions. If a party state
277.16 takes such action, it shall promptly notify the administrator of the coordinated licensure
277.17 information system. The administrator of the coordinated licensure information system shall
277.18 promptly notify the home state of any such actions by remote states.
- 277.19 (e) A nurse practicing in a party state must comply with the state practice laws of the
277.20 state in which the client is located at the time service is provided. The practice of nursing
277.21 is not limited to patient care, but shall include all nursing practice as defined by the state
277.22 practice laws of the party state in which the client is located. The practice of nursing in a
277.23 party state under a multistate licensure privilege will subject a nurse to the jurisdiction of
277.24 the licensing board, the courts, and the laws of the party state in which the client is located
277.25 at the time service is provided.
- 277.26 (f) Individuals not residing in a party state shall continue to be able to apply for a party
277.27 state's single-state license as provided under the laws of each party state. However, the
277.28 single-state license granted to these individuals will not be recognized as granting the
277.29 privilege to practice nursing in any other party state. Nothing in this compact shall affect
277.30 the requirements established by a party state for the issuance of a single-state license.
- 277.31 (g) Any nurse holding a home state multistate license, on the effective date of this
277.32 compact, may retain and renew the multistate license issued by the nurse's then-current
277.33 home state, provided that:

278.1 (1) a nurse, who changes primary state of residence after this compact's effective date,
278.2 must meet all applicable paragraph (c) requirements to obtain a multistate license from a
278.3 new home state; or

278.4 (2) a nurse who fails to satisfy the multistate licensure requirements in paragraph (c)
278.5 due to a disqualifying event occurring after this compact's effective date shall be ineligible
278.6 to retain or renew a multistate license, and the nurse's multistate license shall be revoked
278.7 or deactivated in accordance with applicable rules adopted by the Interstate Commission
278.8 of Nurse Licensure Compact Administrators ("Commission").

278.9 ARTICLE III

278.10 APPLICATIONS FOR LICENSURE IN A PARTY STATE

278.11 (a) Upon application for a multistate license, the licensing board in the issuing party
278.12 state shall ascertain, through the coordinated licensure information system, whether the
278.13 applicant has ever held, or is the holder of, a license issued by any other state, whether there
278.14 are any encumbrances on any license or multistate licensure privilege held by the applicant,
278.15 whether any adverse action has been taken against any license or multistate licensure privilege
278.16 held by the applicant, and whether the applicant is currently participating in an alternative
278.17 program.

278.18 (b) A nurse may hold a multistate license, issued by the home state, in only one party
278.19 state at a time.

278.20 (c) If a nurse changes primary state of residence by moving between two party states,
278.21 the nurse must apply for licensure in the new home state, and the multistate license issued
278.22 by the prior home state will be deactivated in accordance with applicable rules adopted by
278.23 the commission:

278.24 (1) the nurse may apply for licensure in advance of a change in primary state of residence;
278.25 and

278.26 (2) a multistate license shall not be issued by the new home state until the nurse provides
278.27 satisfactory evidence of a change in primary state of residence to the new home state and
278.28 satisfies all applicable requirements to obtain a multistate license from the new home state.

278.29 (d) If a nurse changes primary state of residence by moving from a party state to a
278.30 nonparty state, the multistate license issued by the prior home state will convert to a
278.31 single-state license, valid only in the former home state.

279.1 ARTICLE IV

279.2 ADDITIONAL AUTHORITIES INVESTED IN PARTY STATE LICENSING BOARDS

279.3 (a) In addition to the other powers conferred by state law, a licensing board shall have
279.4 the authority to:

279.5 (1) take adverse action against a nurse's multistate licensure privilege to practice within
279.6 that party state;

279.7 (i) only the home state shall have the power to take adverse action against a nurse's
279.8 license issued by the home state; and

279.9 (ii) for purposes of taking adverse action, the home state licensing board shall give the
279.10 same priority and effect to reported conduct received from a remote state as it would if such
279.11 conduct occurred within the home state. In so doing, the home state shall apply its own state
279.12 laws to determine appropriate action;

279.13 (2) issue cease and desist orders or impose an encumbrance on a nurse's authority to
279.14 practice within that party state;

279.15 (3) complete any pending investigations of a nurse who changes primary state of residence
279.16 during the course of such investigations. The licensing board shall also have the authority
279.17 to take appropriate action(s) and shall promptly report the conclusions of such investigations
279.18 to the administrator of the coordinated licensure information system. The administrator of
279.19 the coordinated licensure information system shall promptly notify the new home state of
279.20 any such actions;

279.21 (4) issue subpoenas for both hearings and investigations that require the attendance and
279.22 testimony of witnesses, as well as the production of evidence. Subpoenas issued by a licensing
279.23 board in a party state for the attendance and testimony of witnesses or the production of
279.24 evidence from another party state shall be enforced in the latter state by any court of
279.25 competent jurisdiction, according to the practice and procedure of that court applicable to
279.26 subpoenas issued in proceedings pending before it. The issuing authority shall pay any
279.27 witness fees, travel expenses, mileage, and other fees required by the service statutes of the
279.28 state in which the witnesses or evidence are located;

279.29 (5) obtain and submit, for each nurse licensure applicant, fingerprint, or other
279.30 biometric-based information to the Federal Bureau of Investigation for criminal background
279.31 checks, receive the results of the Federal Bureau of Investigation record search on criminal
279.32 background checks, and use the results in making licensure decisions;

280.1 (6) if otherwise permitted by state law, recover from the affected nurse the costs of
280.2 investigations and disposition of cases resulting from any adverse action taken against that
280.3 nurse; and

280.4 (7) take adverse action based on the factual findings of the remote state, provided that
280.5 the licensing board follows its own procedures for taking such adverse action.

280.6 (b) If adverse action is taken by the home state against a nurse's multistate license, the
280.7 nurse's multistate licensure privilege to practice in all other party states shall be deactivated
280.8 until all encumbrances have been removed from the multistate license. All home state
280.9 disciplinary orders that impose adverse action against a nurse's multistate license shall
280.10 include a statement that the nurse's multistate licensure privilege is deactivated in all party
280.11 states during the pendency of the order.

280.12 (c) Nothing in this compact shall override a party state's decision that participation in
280.13 an alternative program may be used in lieu of adverse action. The home state licensing board
280.14 shall deactivate the multistate licensure privilege under the multistate license of any nurse
280.15 for the duration of the nurse's participation in an alternative program.

280.16 ARTICLE V

280.17 COORDINATED LICENSURE INFORMATION SYSTEM AND EXCHANGE OF
280.18 INFORMATION

280.19 (a) All party states shall participate in a coordinated licensure information system of all
280.20 licensed registered nurses (RNs) and licensed practical/vocational nurses (LPN/VNs). This
280.21 system will include information on the licensure and disciplinary history of each nurse, as
280.22 submitted by party states, to assist in the coordination of nurse licensure and enforcement
280.23 efforts.

280.24 (b) The commission, in consultation with the administrator of the coordinated licensure
280.25 information system, shall formulate necessary and proper procedures for the identification,
280.26 collection, and exchange of information under this compact.

280.27 (c) All licensing boards shall promptly report to the coordinated licensure information
280.28 system any adverse action, any current significant investigative information, denials of
280.29 applications, including the reasons for such denials, and nurse participation in alternative
280.30 programs known to the licensing board, regardless of whether such participation is deemed
280.31 nonpublic or confidential under state law.

281.1 (d) Current significant investigative information and participation in nonpublic or
281.2 confidential alternative programs shall be transmitted through the coordinated licensure
281.3 information system only to party state licensing boards.

281.4 (e) Notwithstanding any other provision of law, all party state licensing boards
281.5 contributing information to the coordinated licensure information system may designate
281.6 information that may not be shared with nonparty states or disclosed to other entities or
281.7 individuals without the express permission of the contributing state.

281.8 (f) Any personally identifiable information obtained from the coordinated licensure
281.9 information system by a party state licensing board shall not be shared with nonparty states
281.10 or disclosed to other entities or individuals except to the extent permitted by the laws of the
281.11 party state contributing the information.

281.12 (g) Any information contributed to the coordinated licensure information system that is
281.13 subsequently required to be expunged by the laws of the party state contributing that
281.14 information shall also be expunged from the coordinated licensure information system.

281.15 (h) The compact administrator of each party state shall furnish a uniform data set to the
281.16 compact administrator of each other party state, which shall include, at a minimum:

281.17 (1) identifying information;

281.18 (2) licensure data;

281.19 (3) information related to alternative program participation; and

281.20 (4) other information that may facilitate the administration of this compact, as determined
281.21 by commission rules.

281.22 (i) The compact administrator of a party state shall provide all investigative documents
281.23 and information requested by another party state.

281.24 ARTICLE VI

281.25 ESTABLISHMENT OF THE INTERSTATE COMMISSION OF NURSE LICENSURE
281.26 COMPACT ADMINISTRATORS

281.27 (a) The party states hereby create and establish a joint public entity known as the Interstate
281.28 Commission of Nurse Licensure Compact Administrators;

- 281.29 (1) the commission is an instrumentality of the party states;
- 281.30 (2) venue is proper, and judicial proceedings by or against the commission shall be
281.31 brought solely and exclusively, in a court of competent jurisdiction where the principal
282.1 office of the commission is located. The commission may waive venue and jurisdictional
282.2 defenses to the extent it adopts or consents to participate in alternative dispute resolution
282.3 proceedings; and
- 282.4 (3) nothing in this compact shall be construed to be a waiver of sovereign immunity.
- 282.5 (b) Membership, voting, and meetings:
- 282.6 (1) each party state shall have and be limited to one administrator. The head of the state
282.7 licensing board or designee shall be the administrator of this compact for each party state.
282.8 Any administrator may be removed or suspended from office as provided by the law of the
282.9 state from which the administrator is appointed. Any vacancy occurring in the commission
282.10 shall be filled in accordance with the laws of the party state in which the vacancy exists;
- 282.11 (2) each administrator shall be entitled to one vote with regard to the promulgation of
282.12 rules and creation of bylaws and shall otherwise have an opportunity to participate in the
282.13 business and affairs of the commission. An administrator shall vote in person or by such
282.14 other means as provided in the bylaws. The bylaws may provide for an administrator's
282.15 participation in meetings by telephone or other means of communication;
- 282.16 (3) the commission shall meet at least once during each calendar year. Additional
282.17 meetings shall be held as set forth in the bylaws or rules of the commission;
- 282.18 (4) all meetings shall be open to the public, and public notice of meetings shall be given
282.19 in the same manner as required under the rulemaking provisions in article VII;
- 282.20 (5) the commission may convene in a closed, nonpublic meeting if the commission must
282.21 discuss;
- 282.22 (i) noncompliance of a party state with its obligations under this compact;
- 282.23 (ii) the employment, compensation, discipline, or other personnel matters, practices, or
282.24 procedures related to specific employees or other matters related to the commission's internal
282.25 personnel practices and procedures;
- 282.26 (iii) current, threatened, or reasonably anticipated litigation;

- 282.27 (iv) negotiation of contracts for the purchase or sale of goods, services, or real estate;
- 282.28 (v) accusing any person of a crime or formally censuring any person;
- 282.29 (vi) disclosure of trade secrets or commercial or financial information that is privileged
282.30 or confidential;
- 283.1 (vii) disclosure of information of a personal nature where disclosure would constitute a
283.2 clearly unwarranted invasion of personal privacy;
- 283.3 (viii) disclosure of investigatory records compiled for law enforcement purposes;
- 283.4 (ix) disclosure of information related to any reports prepared by or on behalf of the
283.5 commission for the purpose of investigation of compliance with this compact; or
- 283.6 (x) matters specifically exempted from disclosure by federal or state statute; and
- 283.7 (6) if a meeting, or portion of a meeting, is closed pursuant to this provision, the
283.8 commission's legal counsel or designee shall certify that the meeting may be closed and
283.9 shall reference each relevant exempting provision. The commission shall keep minutes that
283.10 fully and clearly describe all matters discussed in a meeting and shall provide a full and
283.11 accurate summary of actions taken, and the reasons therefore, including a description of the
283.12 views expressed. All documents considered in connection with an action shall be identified
283.13 in minutes. All minutes and documents of a closed meeting shall remain under seal, subject
283.14 to release by a majority vote of the commission or order of a court of competent jurisdiction.
- 283.15 (c) The commission shall, by a majority vote of the administrators, prescribe bylaws or
283.16 rules to govern its conduct as may be necessary or appropriate to carry out the purposes and
283.17 exercise the powers of this compact, including, but not limited to:
- 283.18 (1) establishing the fiscal year of the commission;
- 283.19 (2) providing reasonable standards and procedures:
- 283.20 (i) for the establishment and meetings of other committees; and
- 283.21 (ii) governing any general or specific delegation of any authority or function of the
283.22 commission;
- 283.23 (3) providing reasonable procedures for calling and conducting meetings of the
283.24 commission, ensuring reasonable advance notice of all meetings and providing an opportunity

- 283.25 for attendance of such meetings by interested parties, with enumerated exceptions designed
283.26 to protect the public's interest, the privacy of individuals, and proprietary information,
283.27 including trade secrets. The commission may meet in closed session only after a majority
283.28 of the administrators vote to close a meeting in whole or in part. As soon as practicable, the
283.29 commission must make public a copy of the vote to close the meeting revealing the vote of
283.30 each administrator, with no proxy votes allowed.
- 283.31 (4) establishing the titles, duties, and authority and reasonable procedures for the election
283.32 of the officers of the commission;
- 284.1 (5) providing reasonable standards and procedures for the establishment of the personnel
284.2 policies and programs of the commission. Notwithstanding any civil service or other similar
284.3 laws of any party state, the bylaws shall exclusively govern the personnel policies and
284.4 programs of the commission; and
- 284.5 (6) providing a mechanism for winding up the operations of the commission and the
284.6 equitable disposition of any surplus funds that may exist after the termination of this compact
284.7 after the payment or reserving of all of its debts and obligations.
- 284.8 (d) The commission shall publish its bylaws and rules, and any amendments thereto, in
284.9 a convenient form on the Web site of the commission.
- 284.10 (e) The commission shall maintain its financial records in accordance with the bylaws.
- 284.11 (f) The commission shall meet and take actions as are consistent with the provisions of
284.12 this compact and the bylaws.
- 284.13 (g) The commission shall have the following powers:
- 284.14 (1) to promulgate uniform rules to facilitate and coordinate implementation and
284.15 administration of this compact. The rules shall have the force and effect of law and shall
284.16 be binding in all party states;
- 284.17 (2) to bring and prosecute legal proceedings or actions in the name of the commission,
284.18 provided that the standing of any licensing board to sue or be sued under applicable law
284.19 shall not be affected;
- 284.20 (3) to purchase and maintain insurance and bonds;
- 284.21 (4) to borrow, accept, or contract for services of personnel, including, but not limited
284.22 to, employees of a party state or nonprofit organizations;

- 284.23 (5) to cooperate with other organizations that administer state compacts related to the
284.24 regulation of nursing, including, but not limited to, sharing administrative or staff expenses,
284.25 office space, or other resources;
- 284.26 (6) to hire employees, elect or appoint officers, fix compensation, define duties, grant
284.27 such individuals appropriate authority to carry out the purposes of this compact, and to
284.28 establish the commission's personnel policies and programs relating to conflicts of interest,
284.29 qualifications of personnel, and other related personnel matters;
- 284.30 (7) to accept any and all appropriate donations, grants, and gifts of money, equipment,
284.31 supplies, materials, and services, and to receive, utilize, and dispose of the same; provided
285.1 that at all times the commission shall avoid any appearance of impropriety or conflict of
285.2 interest;
- 285.3 (8) to lease, purchase, accept appropriate gifts or donations of, or otherwise to own,
285.4 hold, improve, or use any property, whether real, personal, or mixed; provided that at all
285.5 times the commission shall avoid any appearance of impropriety;
- 285.6 (9) to sell, convey, mortgage, pledge, lease, exchange, abandon, or otherwise dispose
285.7 of any property, whether real, personal, or mixed;
- 285.8 (10) to establish a budget and make expenditures;
- 285.9 (11) to borrow money;
- 285.10 (12) to appoint committees, including advisory committees comprised of administrators,
285.11 state nursing regulators, state legislators or their representatives, and consumer
285.12 representatives, and other such interested persons;
- 285.13 (13) to provide and receive information from, and to cooperate with, law enforcement
285.14 agencies;
- 285.15 (14) to adopt and use an official seal; and
- 285.16 (15) to perform such other functions as may be necessary or appropriate to achieve the
285.17 purposes of this Compact consistent with the state regulation of nurse licensure and practice.
- 285.18 (h) Financing of the commission:
- 285.19 (1) the commission shall pay, or provide for the payment of, the reasonable expenses of
285.20 its establishment, organization, and ongoing activities;

285.21 (2) the commission may also levy on and collect an annual assessment from each party
285.22 state to cover the cost of its operations, activities, and staff in its annual budget as approved
285.23 each year. The aggregate annual assessment amount, if any, shall be allocated based upon
285.24 a formula to be determined by the commission, which shall promulgate a rule that is binding
285.25 upon all party states;

285.26 (3) the commission shall not incur obligations of any kind prior to securing the funds
285.27 adequate to meet the same; nor shall the commission pledge the credit of any of the party
285.28 states, except by, and with the authority of, such party state; and

285.29 (4) the commission shall keep accurate accounts of all receipts and disbursements. The
285.30 receipts and disbursements of the commission shall be subject to the audit and accounting
285.31 procedures established under its bylaws. However, all receipts and disbursements of funds
285.32 handled by the commission shall be audited yearly by a certified or licensed public
286.1 accountant, and the report of the audit shall be included in and become part of the annual
286.2 report of the commission.

286.3 (i) Qualified immunity, defense, and indemnification:

286.4 (1) the administrators, officers, executive director, employees, and representatives of
286.5 the commission shall be immune from suit and liability, either personally or in their official
286.6 capacity, for any claim for damage to or loss of property or personal injury or other civil
286.7 liability caused by or arising out of any actual or alleged act, error, or omission that occurred,
286.8 or that the person against whom the claim is made had a reasonable basis for believing
286.9 occurred, within the scope of commission employment, duties, or responsibilities; provided
286.10 that nothing in this paragraph shall be construed to protect any such person from suit or
286.11 liability for any damage, loss, injury, or liability caused by the intentional, willful, or wanton
286.12 misconduct of that person;

286.13 (2) the commission shall defend any administrator, officer, executive director, employee,
286.14 or representative of the commission in any civil action seeking to impose liability arising
286.15 out of any actual or alleged act, error, or omission that occurred within the scope of
286.16 commission employment, duties, or responsibilities, or that the person against whom the
286.17 claim is made had a reasonable basis for believing occurred within the scope of commission
286.18 employment, duties, or responsibilities; provided that nothing herein shall be construed to
286.19 prohibit that person from retaining his or her own counsel; and provided further that the
286.20 actual or alleged act, error, or omission did not result from that person's intentional, willful,
286.21 or wanton misconduct; and

286.22 (3) the commission shall indemnify and hold harmless any administrator, officer,
286.23 executive director, employee, or representative of the commission for the amount of any
286.24 settlement or judgment obtained against that person arising out of any actual or alleged act,

286.25 error, or omission that occurred within the scope of commission employment, duties, or
286.26 responsibilities, or that such person had a reasonable basis for believing occurred within
286.27 the scope of commission employment, duties, or responsibilities, provided that the actual
286.28 or alleged act, error, or omission did not result from the intentional, willful, or wanton
286.29 misconduct of that person.

286.30 ARTICLE VII

286.31 RULEMAKING

286.32 (a) The commission shall exercise its rulemaking powers pursuant to the criteria set
286.33 forth in this article and the rules adopted thereunder. Rules and amendments shall become
287.1 binding as of the date specified in each rule or amendment and shall have the same force
287.2 and effect as provisions of this compact.

287.3 (b) Rules or amendments to the rules shall be adopted at a regular or special meeting of
287.4 the commission.

287.5 (c) Prior to promulgation and adoption of a final rule or rules by the commission, and
287.6 at least 60 days in advance of the meeting at which the rule will be considered and voted
287.7 upon, the commission shall file a notice of proposed rulemaking:

287.8 (1) on the Web site of the commission; and

287.9 (2) on the Web site of each licensing board or the publication in which state would
287.10 otherwise publish proposed rules.

287.11 (d) The notice of proposed rulemaking shall include:

287.12 (1) the proposed time, date, and location of the meeting in which the rule will be
287.13 considered and voted upon;

287.14 (2) the text of the proposed rule or amendment, and the reason for the proposed rule;

287.15 (3) a request for comments on the proposed rule from any interested person; and

287.16 (4) the manner in which interested persons may submit notice to the commission of their
287.17 intention to attend the public hearing and any written comments.

- 287.18 (e) Prior to adoption of a proposed rule, the commission shall allow persons to submit
287.19 written data, facts, opinions, and arguments, which shall be made available to the public.
- 287.20 (f) The commission shall grant an opportunity for a public hearing before it adopts a
287.21 rule or amendment.
- 287.22 (g) The commission shall publish the place, time, and date of the scheduled public
287.23 hearing.
- 287.24 (1) hearings shall be conducted in a manner providing each person who wishes to
287.25 comment a fair and reasonable opportunity to comment orally or in writing. All hearings
287.26 will be recorded, and a copy will be made available upon request; and
- 287.27 (2) nothing in this section shall be construed as requiring a separate hearing on each
287.28 rule. Rules may be grouped for the convenience of the commission at hearings required by
287.29 this section.
- 287.30 (h) If no one appears at the public hearing, the commission may proceed with
287.31 promulgation of the proposed rule.
- 288.1 (i) Following the scheduled hearing date, or by the close of business on the scheduled
288.2 hearing date if the hearing was not held, the commission shall consider all written and oral
288.3 comments received.
- 288.4 (j) The commission shall, by majority vote of all administrators, take final action on the
288.5 proposed rule and shall determine the effective date of the rule, if any, based on the
288.6 rulemaking record and the full text of the rule.
- 288.7 (k) Upon determination that an emergency exists, the commission may consider and
288.8 adopt an emergency rule without prior notice, opportunity for comment or hearing, provided
288.9 that the usual rulemaking procedures provided in this compact and in this section shall be
288.10 retroactively applied to the rule as soon as reasonably possible, in no event later than 90
288.11 days after the effective date of the rule. For the purposes of this provision, an emergency
288.12 rule is one that must be adopted immediately in order to:
- 288.13 (1) meet an imminent threat to public health, safety, or welfare;
- 288.14 (2) prevent a loss of commission or party state funds; or
- 288.15 (3) meet a deadline for the promulgation of an administrative rule that is required by
288.16 federal law or rule.

288.17 (l) The commission may direct revisions to a previously adopted rule or amendment for
288.18 purposes of correcting typographical errors, errors in format, errors in consistency, or
288.19 grammatical errors. Public notice of any revisions shall be posted on the Web site of the
288.20 commission. The revision shall be subject to challenge by any person for a period of 30
288.21 days after posting. The revision may be challenged only on grounds that the revision results
288.22 in a material change to a rule. A challenge shall be made in writing, and delivered to the
288.23 commission prior to the end of the notice period. If no challenge is made, the revision will
288.24 take effect without further action. If the revision is challenged, the revision may not take
288.25 effect without the approval of the commission.

288.26 ARTICLE VIII

288.27 OVERSIGHT, DISPUTE RESOLUTION, AND ENFORCEMENT

288.28 (a) Oversight:

288.29 (1) each party state shall enforce this compact and take all actions necessary and
288.30 appropriate to effectuate this compact's purposes and intent; and

288.31 (2) the commission shall be entitled to receive service of process in any proceeding that
288.32 may affect the powers, responsibilities, or actions of the commission, and shall have standing
289.1 to intervene in such a proceeding for all purposes. Failure to provide service of process in
289.2 such proceeding to the commission shall render a judgment or order void as to the
289.3 commission, this compact, or promulgated rules.

289.4 (b) Default, technical assistance, and termination:

289.5 (1) if the commission determines that a party state has defaulted in the performance of
289.6 its obligations or responsibilities under this compact or the promulgated rules, the commission
289.7 shall:

289.8 (i) provide written notice to the defaulting state and other party states of the nature of
289.9 the default, the proposed means of curing the default or any other action to be taken by the
289.10 commission; and

289.11 (ii) provide remedial training and specific technical assistance regarding the default;

289.12 (2) if a state in default fails to cure the default, the defaulting state's membership in this
289.13 compact may be terminated upon an affirmative vote of a majority of the administrators,
289.14 and all rights, privileges, and benefits conferred by this compact may be terminated on the

- 289.15 effective date of termination. A cure of the default does not relieve the offending state of
289.16 obligations or liabilities incurred during the period of default;
- 289.17 (3) termination of membership in this compact shall be imposed only after all other
289.18 means of securing compliance have been exhausted. Notice of intent to suspend or terminate
289.19 shall be given by the commission to the governor of the defaulting state and to the executive
289.20 officer of the defaulting state's licensing board and each of the party states;
- 289.21 (4) a state whose membership in this compact has been terminated is responsible for all
289.22 assessments, obligations, and liabilities incurred through the effective date of termination,
289.23 including obligations that extend beyond the effective date of termination;
- 289.24 (5) the commission shall not bear any costs related to a state that is found to be in default
289.25 or whose membership in this compact has been terminated, unless agreed upon in writing
289.26 between the commission and the defaulting state; and
- 289.27 (6) the defaulting state may appeal the action of the commission by petitioning the U.S.
289.28 District Court for the District of Columbia or the federal district in which the commission
289.29 has its principal offices. The prevailing party shall be awarded all costs of such litigation,
289.30 including reasonable attorneys' fees.
- 289.31 (c) Dispute resolution:
- 290.1 (1) upon request by a party state, the commission shall attempt to resolve disputes related
290.2 to the compact that arise among party states and between party and nonparty states;
- 290.3 (2) the commission shall promulgate a rule providing for both mediation and binding
290.4 dispute resolution for disputes, as appropriate; and
- 290.5 (3) in the event the commission cannot resolve disputes among party states arising under
290.6 this compact:
- 290.7 (i) the party states may submit the issues in dispute to an arbitration panel, which will
290.8 be comprised of individuals appointed by the compact administrator in each of the affected
290.9 party states and an individual mutually agreed upon by the compact administrators of all
290.10 the party states involved in the dispute; and
- 290.11 (ii) the decision of a majority of the arbitrators shall be final and binding.
- 290.12 (d) Enforcement:

290.13 (1) the commission, in the reasonable exercise of its discretion, shall enforce the
290.14 provisions and rules of this compact;

290.15 (2) by majority vote, the commission may initiate legal action in the U.S. District Court
290.16 for the District of Columbia or the federal district in which the commission has its principal
290.17 offices against a party state that is in default to enforce compliance with the provisions of
290.18 this compact and its promulgated rules and bylaws. The relief sought may include both
290.19 injunctive relief and damages. In the event judicial enforcement is necessary, the prevailing
290.20 party shall be awarded all costs of such litigation, including reasonable attorneys' fees; and

290.21 (3) the remedies herein shall not be the exclusive remedies of the commission. The
290.22 commission may pursue any other remedies available under federal or state law.

290.23 ARTICLE IX

290.24 EFFECTIVE DATE, WITHDRAWAL, AND AMENDMENT

290.25 (a) This compact shall become effective and binding on the earlier of the date of
290.26 legislative enactment of this compact into law by no less than 26 states or December 31,
290.27 2018. All party states to this compact, that also were parties to the prior Nurse Licensure
290.28 Compact, superseded by this compact, ("prior compact"), shall be deemed to have withdrawn
290.29 from said prior compact within six months after the effective date of this compact.

290.30 (b) Each party state to this compact shall continue to recognize a nurse's multistate
290.31 licensure privilege to practice in that party state issued under the prior compact until such
290.32 party state has withdrawn from the prior compact.

291.1 (c) Any party state may withdraw from this compact by enacting a statute repealing the
291.2 same. A party state's withdrawal shall not take effect until six months after enactment of
291.3 the repealing statute.

291.4 (d) A party state's withdrawal or termination shall not affect the continuing requirement
291.5 of the withdrawing or terminated state's licensing board to report adverse actions and
291.6 significant investigations occurring prior to the effective date of such withdrawal or
291.7 termination.

291.8 (e) Nothing contained in this compact shall be construed to invalidate or prevent any
291.9 nurse licensure agreement or other cooperative arrangement between a party state and a
291.10 nonparty state that is made in accordance with the other provisions of this compact.

291.11 (f) This compact may be amended by the party states. No amendment to this compact
291.12 shall become effective and binding upon the party states, unless and until it is enacted into
291.13 the laws of all party states.

291.14 (g) Representatives of nonparty states to this compact shall be invited to participate in
291.15 the activities of the commission, on a nonvoting basis, prior to the adoption of this compact
291.16 by all states.

291.17 ARTICLE X

291.18 CONSTRUCTION AND SEVERABILITY

291.19 This compact shall be liberally construed so as to effectuate the purposes thereof. The
291.20 provisions of this compact shall be severable, and if any phrase, clause, sentence, or provision
291.21 of this compact is declared to be contrary to the constitution of any party state or of the
291.22 United States, or if the applicability thereof to any government, agency, person, or
291.23 circumstance is held invalid, the validity of the remainder of this compact and the
291.24 applicability thereof to any government, agency, person, or circumstance shall not be affected
291.25 thereby. If this compact shall be held to be contrary to the constitution of any party state,
291.26 this compact shall remain in full force and effect as to the remaining party states and in full
291.27 force and effect as to the party state affected as to all severable matters.

291.28 **EFFECTIVE DATE.** This section is effective upon implementation of the coordinated
291.29 licensure information system defined in Minnesota Statutes, section 148.2855, article V,
291.30 but no sooner than July 1, 2019.

292.1 Sec. 6. **[148.2856] APPLICATION OF NURSE LICENSURE COMPACT TO**
292.2 **EXISTING LAWS.**

292.3 (a) Section 148.2855 does not relieve employers of nurses from complying with statutorily
292.4 imposed obligations.

292.5 (b) Section 148.2855 does not supersede existing state labor laws.

292.6 (c) For purposes of the Minnesota Government Data Practices Act, chapter 13, an
292.7 individual not licensed as a nurse under sections 148.171 to 148.285 who practices
292.8 professional or practical nursing in Minnesota under the authority of section 148.2855 is
292.9 considered to be a licensee of the board.

- 292.10 (d) Proceedings brought against an individual's multistate privilege shall be adjudicated
292.11 following the procedures listed in sections 14.50 to 14.62 and shall be subject to judicial
292.12 review as provided for in sections 14.63 to 14.69.
- 292.13 (e) The reporting requirements of sections 144.4175, 148.263, 626.52, and 626.557
292.14 apply to individuals not licensed as registered or licensed practical nurses under sections
292.15 148.171 to 148.285 who practice professional or practical nursing in Minnesota under the
292.16 authority of section 148.2855.
- 292.17 (f) The board may take action against an individual's multistate privilege based on the
292.18 grounds listed in section 148.261, subdivision 1, and any other statute authorizing or requiring
292.19 the board to take corrective or disciplinary action.
- 292.20 (g) The board may take all forms of disciplinary action provided for in section 148.262,
292.21 subdivision 1, and corrective action provided for in section 214.103, subdivision 6, against
292.22 an individual's multistate privilege.
- 292.23 (h) The immunity provisions of section 148.264, subdivision 1, apply to individuals who
292.24 practice professional or practical nursing in Minnesota under the authority of section
292.25 148.2855.
- 292.26 (i) The cooperation requirements of section 148.265 apply to individuals who practice
292.27 professional or practical nursing in Minnesota under the authority of section 148.2855.
- 292.28 (j) The provisions of section 148.283 shall not apply to individuals who practice
292.29 professional or practical nursing in Minnesota under the authority of section 148.2855.
- 292.30 (k) Complaints against individuals who practice professional or practical nursing in
292.31 Minnesota under the authority of section 148.2855 shall be handled as provided in sections
292.32 214.10 and 214.103.
- 293.1 **EFFECTIVE DATE.** This section is effective upon implementation of the coordinated
293.2 licensure information system defined in Minnesota Statutes, section 148.2855, article V,
293.3 but no sooner than July 1, 2019.
- 293.4 Sec. 7. **[148.2858] MISCELLANEOUS PROVISIONS.**
- 293.5 (a) For the purposes of section 148.2855, "head of the Nurse Licensing Board" means
293.6 the executive director of the board.
- 293.7 (b) The Board of Nursing shall have the authority to recover from a nurse practicing
293.8 professional or practical nursing in Minnesota under the authority of section 148.2855 the

293.9 costs of investigation and disposition of cases resulting from any adverse action taken against
293.10 the nurse.

293.11 **EFFECTIVE DATE.** This section is effective upon implementation of the coordinated
293.12 licensure information system defined in Minnesota Statutes, section 148.2855, article V,
293.13 but no sooner than July 1, 2019.

293.14 Sec. 8. Minnesota Statutes 2016, section 148.59, is amended to read:

293.15 **148.59 LICENSE RENEWAL; LICENSE AND REGISTRATION FEES.**

293.16 A licensed optometrist shall pay to the state Board of Optometry a fee as set by the board
293.17 in order to renew a license as provided by board rule. No fees shall be refunded. Fees may
293.18 not exceed the following amounts but may be adjusted lower by board direction and are for
293.19 the exclusive use of the board:

293.20 (1) optometry licensure application, \$160;

293.21 (2) optometry annual licensure renewal, ~~\$135~~ \$170;

293.22 (3) optometry late penalty fee, \$75;

293.23 (4) annual license renewal card, \$10;

293.24 (5) continuing education provider application, \$45;

293.25 (6) emeritus registration, \$10;

293.26 (7) endorsement/reciprocity application, \$160;

293.27 (8) replacement of initial license, \$12; and

293.28 (9) license verification, \$50-;

293.29 (10) jurisprudence state examination, \$75;

294.1 (11) Optometric Education Continuing Education data bank registration, \$20; and

294.2 (12) data requests and labels, \$50.

426.20 Sec. 29. Minnesota Statutes 2016, section 148.7815, subdivision 1, is amended to read:

426.21 Subdivision 1. **Fees.** The board shall establish fees as follows:

426.22 (1) application fee, \$50;

426.23 (2) annual registration fee, \$100;

426.24 (3) temporary registration, \$100; and

426.25 (4) temporary permit, \$50;

426.26 (5) late fee, \$15;

426.27 (6) duplicate license fee, \$20;

426.28 (7) certification letter fee, \$25;

426.29 (8) verification fee, \$25;

426.30 (9) education or training program approval fee, \$100; and

427.1 (10) report creation and generation fee, \$60 per hour.

294.3 Sec. 9. Minnesota Statutes 2016, section 148E.180, is amended to read:

294.4 **148E.180 FEE AMOUNTS.**

294.5 Subdivision 1. **Application fees.** Nonrefundable application fees for licensure ~~are as~~

294.6 ~~follows~~ may not exceed the following amounts but may be adjusted lower by board action:

294.7 (1) for a licensed social worker, ~~\$45~~ \$75;

294.8 (2) for a licensed graduate social worker, ~~\$45~~ \$75;

294.9 (3) for a licensed independent social worker, ~~\$45~~ \$75;

294.10 (4) for a licensed independent clinical social worker, ~~\$45~~ \$75;

294.11 (5) for a temporary license, \$50; and

294.12 (6) for a licensure by endorsement, ~~\$85~~ \$115.

294.13 The fee for criminal background checks is the fee charged by the Bureau of Criminal
294.14 Apprehension. The criminal background check fee must be included with the application
294.15 fee as required according to section 148E.055.

294.16 Subd. 2. **License fees.** Nonrefundable license fees ~~are as follows~~ may not exceed the
294.17 following amounts but may be adjusted lower by board action:

294.18 (1) for a licensed social worker, ~~\$84~~ \$115;

294.19 (2) for a licensed graduate social worker, ~~\$144~~ \$210;

294.20 (3) for a licensed independent social worker, ~~\$216~~ \$305;

294.21 (4) for a licensed independent clinical social worker, ~~\$238.50~~ \$335;

294.22 (5) for an emeritus inactive license, ~~\$43.20~~ \$65;

294.23 (6) for an emeritus active license, one-half of the renewal fee specified in subdivision
294.24 3; and

294.25 (7) for a temporary leave fee, the same as the renewal fee specified in subdivision 3.

294.26 If the licensee's initial license term is less or more than 24 months, the required license
294.27 fees must be prorated proportionately.

295.1 Subd. 3. **Renewal fees.** Nonrefundable renewal fees for licensure ~~are as follows~~ the
295.2 two-year renewal term may not exceed the following amounts but may be adjusted lower
295.3 by board action:

295.4 (1) for a licensed social worker, ~~\$84~~ \$115;

295.5 (2) for a licensed graduate social worker, ~~\$144~~ \$210;

295.6 (3) for a licensed independent social worker, ~~\$216~~ \$305; and

295.7 (4) for a licensed independent clinical social worker, ~~\$238.50~~ \$335.

295.8 Subd. 4. **Continuing education provider fees.** Continuing education provider fees are
295.9 ~~as follows~~ the following nonrefundable amounts:

- 295.10 (1) for a provider who offers programs totaling one to eight clock hours in a one-year
295.11 period according to section 148E.145, \$50;
- 295.12 (2) for a provider who offers programs totaling nine to 16 clock hours in a one-year
295.13 period according to section 148E.145, \$100;
- 295.14 (3) for a provider who offers programs totaling 17 to 32 clock hours in a one-year period
295.15 according to section 148E.145, \$200;
- 295.16 (4) for a provider who offers programs totaling 33 to 48 clock hours in a one-year period
295.17 according to section 148E.145, \$400; and
- 295.18 (5) for a provider who offers programs totaling 49 or more clock hours in a one-year
295.19 period according to section 148E.145, \$600.
- 295.20 Subd. 5. **Late fees.** Late fees are as follows the following nonrefundable amounts:
- 295.21 (1) renewal late fee, one-fourth of the renewal fee specified in subdivision 3;
- 295.22 (2) supervision plan late fee, \$40; and
- 295.23 (3) license late fee, \$100 plus the prorated share of the license fee specified in subdivision
295.24 2 for the number of months during which the individual practiced social work without a
295.25 license.
- 295.26 Subd. 6. **License cards and wall certificates.** (a) The fee for a license card as specified
295.27 in section 148E.095 is \$10.
- 295.28 (b) The fee for a license wall certificate as specified in section 148E.095 is \$30.
- 295.29 Subd. 7. **Reactivation fees.** Reactivation fees are as follows the following nonrefundable
295.30 amounts:
- 296.1 (1) reactivation from a temporary leave or emeritus status, the prorated share of the
296.2 renewal fee specified in subdivision 3; and
- 296.3 (2) reactivation of an expired license, 1-1/2 times the renewal fees specified in subdivision
296.4 3.
- 296.5 Sec. 10. Minnesota Statutes 2016, section 150A.06, subdivision 1a, is amended to read:

296.6 Subd. 1a. **Faculty dentists.** (a) Faculty members of a school of dentistry must be licensed
296.7 in order to practice dentistry as defined in section 150A.05. The board may issue to members
296.8 of the faculty of a school of dentistry a license designated as either a "limited faculty license"
296.9 or a "full faculty license" entitling the holder to practice dentistry within the terms described
296.10 in paragraph (b) or (c). The dean of a school of dentistry and program directors of a
296.11 Minnesota dental hygiene, dental therapy, or dental assisting school accredited by the
296.12 Commission on Dental Accreditation shall certify to the board those members of the school's
296.13 faculty who practice dentistry but are not licensed to practice dentistry in Minnesota. A
296.14 faculty member who practices dentistry as defined in section 150A.05, before beginning
296.15 duties in a school of dentistry ~~or a~~, dental therapy, dental hygiene, or dental assisting school,
296.16 shall apply to the board for a limited or full faculty license. Pursuant to Minnesota Rules,
296.17 chapter 3100, and at the discretion of the board, a limited faculty license must be renewed
296.18 annually and a full faculty license must be renewed biennially. The faculty applicant shall
296.19 pay a nonrefundable fee set by the board for issuing and renewing the faculty license. The
296.20 faculty license is valid during the time the holder remains a member of the faculty of a
296.21 school of dentistry ~~or a~~, dental therapy, dental hygiene, or dental assisting school and subjects
296.22 the holder to this chapter.

296.23 (b) The board may issue to dentist members of the faculty of a Minnesota school of
296.24 dentistry, dental therapy, dental hygiene, or dental assisting accredited by the Commission
296.25 on Dental Accreditation, a license designated as a limited faculty license entitling the holder
296.26 to practice dentistry within the school and its affiliated teaching facilities, but only for the
296.27 purposes of teaching or conducting research. The practice of dentistry at a school facility
296.28 for purposes other than teaching or research is not allowed unless the dentist was a faculty
296.29 member on August 1, 1993.

296.30 (c) The board may issue to dentist members of the faculty of a Minnesota school of
296.31 dentistry, dental therapy, dental hygiene, or dental assisting accredited by the Commission
296.32 on Dental Accreditation a license designated as a full faculty license entitling the holder to
296.33 practice dentistry within the school and its affiliated teaching facilities and elsewhere if the
296.34 holder of the license is employed 50 percent time or more full time by the school in the
297.1 practice of teaching, supervising, or research, and upon successful review by the board of
297.2 the applicant's qualifications as described in subdivisions 1, 1c, and 4 and board rule. The
297.3 board, at its discretion, may waive specific licensing prerequisites.

297.4 Sec. 11. Minnesota Statutes 2016, section 150A.06, is amended by adding a subdivision
297.5 to read:

297.6 Subd. 10. **Emeritus inactive license.** (a) A dental professional licensed under this chapter
297.7 to practice dentistry, dental therapy, dental hygiene, or dental assisting who retires from
297.8 active practice in the state may apply to the board for an emeritus inactive license. An

- 297.9 applicant must apply for an emeritus inactive license on the biennial licensing form or by
297.10 petitioning the board.
- 297.11 (b) The board shall not grant an emeritus inactive license to an applicant who is the
297.12 subject of a disciplinary action resulting in the current suspension, revocation,
297.13 disqualification, condition, or restriction of the applicant's license to practice dentistry,
297.14 dental therapy, dental hygiene, or dental assisting.
- 297.15 (c) An emeritus inactive licensee is prohibited from practicing dentistry, dental therapy,
297.16 dental hygiene, or dental assisting. An emeritus inactive license is a formal recognition of
297.17 completion of the licensee's dental career in good standing.
- 297.18 (d) The board shall charge a onetime fee for issuance of an emeritus inactive license,
297.19 pursuant to section 150A.091.
- 297.20 Sec. 12. Minnesota Statutes 2016, section 150A.06, is amended by adding a subdivision
297.21 to read:
- 297.22 Subd. 11. **Emeritus active license.** (a) A dental professional licensed to practice dentistry,
297.23 dental therapy, dental hygiene, or dental assisting, pursuant to section 150A.05 and Minnesota
297.24 Rules, part 3100.8500, who declares retirement from active practice in the state may apply
297.25 to the board for an emeritus active license. An applicant must apply for an emeritus active
297.26 license on a form as required by the board.
- 297.27 (b) An emeritus active licensee may engage only in pro bono or volunteer practice, paid
297.28 practice not to exceed 240 hours per calendar year for the purpose of providing license
297.29 supervision to meet board requirements, and paid consulting services not to exceed 240
297.30 hours per calendar year.
- 297.31 (c) An emeritus active licensee is prohibited from representing that the licensee is
297.32 authorized to engage in any practice except as provided in paragraph (b). The board may
298.1 take disciplinary or corrective action against an emeritus active licensee as provided in
298.2 section 150A.08.
- 298.3 (d) An emeritus active license must be renewed biennially. The renewal requirements
298.4 for an emeritus active license are:
- 298.5 (1) completion of a renewal form as required by the board;
- 298.6 (2) payment of a renewal fee pursuant to section 150A.091; and

- 298.7 (3) reporting of 25 completed continuing education hours, which must include:
- 298.8 (i) courses in two required CORE areas;
- 298.9 (ii) one hour of credit on infection control;
- 298.10 (iii) for emeritus active licenses in dentistry and dental therapy, at least 15 fundamental
- 298.11 credits and no more than ten elective credits; and
- 298.12 (iv) for emeritus active licenses in dental hygiene and dental assisting, at least seven
- 298.13 fundamental credits and no more than six elective credits.
- 298.14 Sec. 13. Minnesota Statutes 2016, section 150A.091, is amended by adding a subdivision
- 298.15 to read:
- 298.16 Subd. 19. **Emeritus inactive license.** Each applicant shall submit with an application
- 298.17 for an emeritus inactive license a onetime, nonrefundable fee in the amount of \$50.
- 298.18 Sec. 14. Minnesota Statutes 2016, section 150A.091, is amended by adding a subdivision
- 298.19 to read:
- 298.20 Subd. 20. **Emeritus active license.** Each applicant shall submit with an application for
- 298.21 an emeritus inactive license, and each emeritus active licensee shall submit with a renewal
- 298.22 application, a nonrefundable fee as follows:
- 298.23 (1) for an emeritus active license in dentistry, \$212;
- 298.24 (2) for an emeritus active license in dental therapy, \$100;
- 298.25 (3) for an emeritus active license in dental hygiene, \$75; and
- 298.26 (4) for an emeritus active license in dental assisting, \$55.
- 299.1 Sec. 15. Minnesota Statutes 2016, section 151.15, is amended by adding a subdivision to
- 299.2 read:
- 299.3 Subd. 5. **Receipt of emergency prescription orders.** A pharmacist, when that pharmacist
- 299.4 is not present within a licensed pharmacy, may accept a written, verbal, or electronic
- 299.5 prescription drug order from a practitioner only if:

- 299.6 (1) the prescription drug order is for an emergency situation where waiting for the
299.7 licensed pharmacy from which the prescription will be dispensed to open would likely cause
299.8 the patient to experience significant physical harm or discomfort;
- 299.9 (2) the pharmacy from which the prescription drug order will be dispensed is closed for
299.10 business;
- 299.11 (3) the pharmacist has been designated to be on call for the licensed pharmacy that will
299.12 fill the prescription drug order;
- 299.13 (4) in the case of an electronic prescription drug order, the order must be received through
299.14 secure and encrypted electronic means;
- 299.15 (5) the pharmacist takes reasonable precautions to ensure that the prescription drug order
299.16 will be handled in a manner consistent with federal and state statutes regarding the handling
299.17 of protected health information; and
- 299.18 (6) the pharmacy from which the prescription drug order will be dispensed has relevant
299.19 and appropriate policies and procedures in place and makes them available to the board
299.20 upon request.
- 299.21 Sec. 16. Minnesota Statutes 2016, section 151.15, is amended by adding a subdivision to
299.22 read:
- 299.23 Subd. 6. **Processing of emergency prescription orders.** A pharmacist, when that
299.24 pharmacist is not present within a licensed pharmacy, may access a pharmacy prescription
299.25 processing system through secure and encrypted electronic means in order to process an
299.26 emergency prescription accepted pursuant to subdivision 5 only if:
- 299.27 (1) the pharmacy from which the prescription drug order will be dispensed is closed for
299.28 business;
- 299.29 (2) the pharmacist has been designated to be on call for the licensed pharmacy that will
299.30 fill the prescription drug order;
- 299.31 (3) the prescription drug order is for a patient of a long-term care facility or a county
299.32 correctional facility;
- 300.1 (4) the prescription drug order is processed pursuant to this chapter and rules adopted
300.2 under this chapter; and

300.3 (5) the pharmacy from which the prescription drug order will be dispensed has relevant
300.4 and appropriate policies and procedures in place and makes them available to the board
300.5 upon request.

300.6 Sec. 17. Minnesota Statutes 2016, section 151.19, subdivision 1, is amended to read:

300.7 Subdivision 1. **Pharmacy licensure requirements.** (a) No person shall operate a
300.8 pharmacy without first obtaining a license from the board and paying any applicable fee
300.9 specified in section 151.065. The license shall be displayed in a conspicuous place in the
300.10 pharmacy for which it is issued and expires on June 30 following the date of issue. It is
300.11 unlawful for any person to operate a pharmacy unless the license has been issued to the
300.12 person by the board.

300.13 (b) Application for a pharmacy license under this section shall be made in a manner
300.14 specified by the board.

300.15 (c) No license shall be issued or renewed for a pharmacy located within the state unless
300.16 the applicant agrees to operate the pharmacy in a manner prescribed by federal and state
300.17 law and according to rules adopted by the board. No license shall be issued for a pharmacy
300.18 located outside of the state unless the applicant agrees to operate the pharmacy in a manner
300.19 prescribed by federal law and, when dispensing medications for residents of this state, the
300.20 laws of this state, and Minnesota Rules.

300.21 (d) No license shall be issued or renewed for a pharmacy that is required to be licensed
300.22 or registered by the state in which it is physically located unless the applicant supplies the
300.23 board with proof of such licensure or registration.

300.24 (e) The board shall require a separate license for each pharmacy located within the state
300.25 and for each pharmacy located outside of the state at which any portion of the dispensing
300.26 process occurs for drugs dispensed to residents of this state.

300.27 (f) The board shall not issue an initial or renewed license for a pharmacy unless the
300.28 pharmacy passes an inspection conducted by an authorized representative of the board. In
300.29 the case of a pharmacy located outside of the state, the board may require the applicant to
300.30 pay the cost of the inspection, in addition to the license fee in section 151.065, unless the
300.31 applicant furnishes the board with a report, issued by the appropriate regulatory agency of
300.32 the state in which the facility is located, of an inspection that has occurred within the 24
300.33 months immediately preceding receipt of the license application by the board. The board
301.1 may deny licensure unless the applicant submits documentation satisfactory to the board
301.2 that any deficiencies noted in an inspection report have been corrected.

- 301.3 (g) The board shall not issue an initial or renewed license for a pharmacy located outside
301.4 of the state unless the applicant discloses and certifies;
- 301.5 (1) the location, names, and titles of all principal corporate officers and all pharmacists
301.6 who are involved in dispensing drugs to residents of this state;
- 301.7 (2) that it maintains its records of drugs dispensed to residents of this state so that the
301.8 records are readily retrievable from the records of other drugs dispensed;
- 301.9 (3) that it agrees to cooperate with, and provide information to, the board concerning
301.10 matters related to dispensing drugs to residents of this state;
- 301.11 (4) that, during its regular hours of operation, but no less than six days per week, for a
301.12 minimum of 40 hours per week, a toll-free telephone service is provided to facilitate
301.13 communication between patients in this state and a pharmacist at the pharmacy who has
301.14 access to the patients' records; the toll-free number must be disclosed on the label affixed
301.15 to each container of drugs dispensed to residents of this state; and
- 301.16 (5) that, upon request of a resident of a long-term care facility located in this state, the
301.17 resident's authorized representative, or a contract pharmacy or licensed health care facility
301.18 acting on behalf of the resident, the pharmacy will dispense medications prescribed for the
301.19 resident in unit-dose packaging or, alternatively, comply with section 151.415, subdivision
301.20 5.
- 301.21 (h) This subdivision does not apply to a manufacturer licensed under section 151.252,
301.22 subdivision 1, a wholesale drug distributor licensed under section 151.47, or a third-party
301.23 logistics provider, to the extent the manufacturer, wholesale drug distributor, or third-party
301.24 logistics provider is engaged in the distribution of dialysate or devices necessary to perform
301.25 home peritoneal dialysis on patients with end-stage renal disease, if:
- 301.26 (1) the manufacturer or its agent leases or owns the licensed manufacturing or wholesaling
301.27 facility from which the dialysate or devices will be delivered;
- 301.28 (2) the dialysate is comprised of dextrose or icodextrin and has been approved by the
301.29 United States Food and Drug Administration;
- 301.30 (3) the dialysate is stored and delivered in its original, sealed, and unopened
301.31 manufacturer's packaging;
- 301.32 (4) the dialysate or devices are delivered only upon:

427.2 Sec. 30. Minnesota Statutes 2016, section 214.075, subdivision 1, is amended to read:

427.3 Subdivision 1. **Applications.** (a) ~~By January 1, 2018, Each health-related licensing~~
427.4 board, as defined in section 214.01, subdivision 2, shall require ~~applicants for initial licensure,~~
427.5 ~~licensure by endorsement, or reinstatement or other relicensure after a lapse in licensure,~~
427.6 ~~as defined by the individual health-related licensing boards,~~ the following individuals to
427.7 submit to a criminal history records check of state data completed by the Bureau of Criminal
427.8 Apprehension (BCA) and a national criminal history records check, including a search of
427.9 the records of the Federal Bureau of Investigation (FBI);

302.1 (i) receipt of a physician's order by a Minnesota licensed pharmacy; and
302.2 (ii) the review and processing of the prescription by a pharmacist licensed by the state
302.3 in which the pharmacy is located, who is employed by or under contract to the pharmacy;
302.4 (5) prescriptions, policies, procedures, and records of delivery are maintained by the
302.5 manufacturer for a minimum of three years and are made available to the board upon request;
302.6 and
302.7 (6) the manufacturer or the manufacturer's agent delivers the dialysate or devices directly
302.8 to;
302.9 (i) a patient with end-stage renal disease for whom the prescription was written or the
302.10 patient's designee, for the patient's self-administration of the dialysis therapy; or
302.11 (ii) a health care provider or institution, for administration or delivery of the dialysis
302.12 therapy to a patient with end-stage renal disease for whom the prescription was written.
302.13 Sec. 18. Minnesota Statutes 2016, section 151.46, is amended to read:
302.14 **151.46 PROHIBITED DRUG PURCHASES OR RECEIPT.**
302.15 It is unlawful for any person to knowingly purchase or receive a prescription drug from
302.16 a source other than a person or entity licensed under the laws of the state, except where
302.17 otherwise provided. Licensed wholesale drug distributors other than pharmacies shall not
302.18 dispense or distribute prescription drugs directly to patients except for licensed facilities
302.19 that dispense or distribute home peritoneal dialysis products directly to patients pursuant
302.20 to section 151.19, subdivision 1, paragraph (h). A person violating the provisions of this
302.21 section is guilty of a misdemeanor.
302.22 Sec. 19. Minnesota Statutes 2016, section 214.075, subdivision 1, is amended to read:
302.23 Subdivision 1. **Applications.** (a) ~~By January 1, 2018, Each health-related licensing~~
302.24 board, as defined in section 214.01, subdivision 2, shall require ~~applicants for initial licensure,~~
302.25 ~~licensure by endorsement, or reinstatement or other relicensure after a lapse in licensure,~~
302.26 ~~as defined by the individual health-related licensing boards,~~ the following individuals to
302.27 submit to a criminal history records check of state data completed by the Bureau of Criminal
302.28 Apprehension (BCA) and a national criminal history records check, including a search of
302.29 the records of the Federal Bureau of Investigation (FBI);

427.10 (1) applicants for initial licensure or licensure by endorsement. An applicant is exempt
427.11 from this paragraph if the applicant submitted to a state and national criminal history records
427.12 check as described in this paragraph for a license issued by the same board;

427.13 (2) applicants seeking reinstatement or relicensure, as defined by the individual
427.14 health-related licensing board, if more than one year has elapsed since the applicant's license
427.15 or registration expiration date; or

427.16 (3) licensees applying for eligibility to participate in an interstate licensure compact.

427.17 (b) ~~An applicant must complete a criminal background check if more than one year has~~
427.18 ~~elapsed since the applicant last submitted a background check to the board. An applicant's~~
427.19 ~~criminal background check results are valid for one year from the date the background check~~
427.20 ~~results were received by the board. If more than one year has elapsed since the results were~~
427.21 ~~received by the board, then an applicant who has not completed the licensure, reinstatement,~~
427.22 ~~or relicensure process must complete a new background check.~~

427.23 Sec. 31. Minnesota Statutes 2016, section 214.075, subdivision 4, is amended to read:

427.24 Subd. 4. **Refusal to consent.** (a) The health-related licensing boards shall not issue a
427.25 license to any applicant who refuses to consent to a criminal background check or fails to
427.26 submit fingerprints ~~within 90 days~~ after submission of an application for licensure. Any
427.27 fees paid by the applicant to the board shall be forfeited if the applicant refuses to consent
427.28 to the criminal background check or fails to submit the required fingerprints.

427.29 (b) The failure of a licensee to submit to a criminal background check as provided in
427.30 subdivision 3 is grounds for disciplinary action by the respective health-related licensing
427.31 board.

428.1 Sec. 32. Minnesota Statutes 2016, section 214.075, subdivision 5, is amended to read:

428.2 Subd. 5. **Submission of fingerprints to the Bureau of Criminal Apprehension.** The
428.3 health-related licensing board or designee shall submit applicant or licensee fingerprints to
428.4 the BCA. The BCA shall perform a check for state criminal justice information and shall
428.5 forward the applicant's or licensee's fingerprints to the FBI to perform a check for national
428.6 criminal justice information regarding the applicant or licensee. The BCA shall report to
428.7 the board the results of the state and national criminal ~~justice information~~ history records
428.8 checks.

303.1 (1) applicants for initial licensure or licensure by endorsement. An applicant is exempt
303.2 from this paragraph if the applicant submitted to a state and national criminal history records
303.3 check as described in this paragraph for a license issued by the same board;

303.4 (2) applicants seeking reinstatement or relicensure, as defined by the individual
303.5 health-related licensing board, if more than one year has elapsed since the applicant's license
303.6 or registration expiration date; or

303.7 (3) licensees applying for eligibility to participate in an interstate licensure compact.

303.8 (b) ~~An applicant must complete a criminal background check if more than one year has~~
303.9 ~~elapsed since the applicant last submitted a background check to the board. An applicant's~~
303.10 ~~criminal background check results are valid for one year from the date the background check~~
303.11 ~~results were received by the board. If more than one year has elapsed since the results were~~
303.12 ~~received by the board, then an applicant who has not completed the licensure, reinstatement,~~
303.13 ~~or relicensure process must complete a new background check.~~

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

303.15 Sec. 20. Minnesota Statutes 2016, section 214.075, subdivision 4, is amended to read:

303.16 Subd. 4. **Refusal to consent.** (a) The health-related licensing boards shall not issue a
303.17 license to any applicant who refuses to consent to a criminal background check or fails to
303.18 submit fingerprints ~~within 90 days~~ after submission of an application for licensure. Any
303.19 fees paid by the applicant to the board shall be forfeited if the applicant refuses to consent
303.20 to the criminal background check or fails to submit the required fingerprints.

303.21 (b) The failure of a licensee to submit to a criminal background check as provided in
303.22 subdivision 3 is grounds for disciplinary action by the respective health-related licensing
303.23 board.

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

303.25 Sec. 21. Minnesota Statutes 2016, section 214.075, subdivision 5, is amended to read:

303.26 Subd. 5. **Submission of fingerprints to the Bureau of Criminal Apprehension.** The
303.27 health-related licensing board or designee shall submit applicant or licensee fingerprints to
303.28 the BCA. The BCA shall perform a check for state criminal justice information and shall
303.29 forward the applicant's or licensee's fingerprints to the FBI to perform a check for national
303.30 criminal justice information regarding the applicant or licensee. The BCA shall report to
303.31 the board the results of the state and national criminal ~~justice information~~ history records
303.32 checks.

428.9 Sec. 33. Minnesota Statutes 2016, section 214.075, subdivision 6, is amended to read:

428.10 Subd. 6. **Alternatives to fingerprint-based criminal background checks.** The
428.11 health-related licensing board may require an alternative method of criminal history checks
428.12 for an applicant or licensee who has submitted at least ~~three~~ two sets of fingerprints in
428.13 accordance with this section that have been unreadable by the BCA or the FBI.

428.14 Sec. 34. Minnesota Statutes 2016, section 214.077, is amended to read:

428.15 **214.077 TEMPORARY LICENSE SUSPENSION; IMMINENT RISK OF SERIOUS**
428.16 **HARM.**

428.17 (a) Notwithstanding any provision of a health-related professional practice act, when a
428.18 health-related licensing board receives a complaint regarding a regulated person and has
428.19 probable cause to believe that the regulated person has violated a statute or rule that the
428.20 health-related licensing board is empowered to enforce, and continued practice by the
428.21 regulated person presents an imminent risk of serious harm, the health-related licensing
428.22 board shall issue an order temporarily suspending the regulated person's authority to practice.
428.23 The temporary suspension order shall specify the reason for the suspension, including the
428.24 statute or rule alleged to have been violated. The temporary suspension order shall take
428.25 effect upon personal service on the regulated person or the regulated person's attorney, or
428.26 upon the third calendar day after the order is served by first class mail to the most recent
428.27 address provided to the health-related licensing board for the regulated person or the regulated
428.28 person's attorney.

428.29 (b) The temporary suspension shall remain in effect until the health-related licensing
428.30 board or the commissioner completes an investigation, holds a contested case hearing
428.31 pursuant to the Administrative Procedure Act, and issues a final order in the matter as
428.32 provided for in this section.

429.1 (c) At the time it issues the temporary suspension order, the health-related licensing
429.2 board shall schedule a contested case hearing, on the merits of whether discipline is
429.3 warranted, to be held pursuant to the Administrative Procedure Act. The regulated person
429.4 shall be provided with at least ten days' notice of any contested case hearing held pursuant
429.5 to this section. The contested case hearing shall be scheduled to begin no later than 30 days
429.6 after the effective service of the temporary suspension order.

429.7 (d) The administrative law judge presiding over the contested case hearing shall issue
429.8 a report and recommendation to the health-related licensing board no later than 30 days

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

304.2 Sec. 22. Minnesota Statutes 2016, section 214.075, subdivision 6, is amended to read:

304.3 Subd. 6. **Alternatives to fingerprint-based criminal background checks.** The
304.4 health-related licensing board may require an alternative method of criminal history checks
304.5 for an applicant or licensee who has submitted at least ~~three~~ two sets of fingerprints in
304.6 accordance with this section that have been unreadable by the BCA or the FBI.

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

304.8 Sec. 23. Minnesota Statutes 2016, section 214.077, is amended to read:

304.9 **214.077 TEMPORARY LICENSE SUSPENSION; IMMINENT RISK OF SERIOUS**
304.10 **HARM.**

304.11 (a) Notwithstanding any provision of a health-related professional practice act, when a
304.12 health-related licensing board receives a complaint regarding a regulated person and has
304.13 probable cause to believe that the regulated person has violated a statute or rule that the
304.14 health-related licensing board is empowered to enforce, and continued practice by the
304.15 regulated person presents an imminent risk of serious harm, the health-related licensing
304.16 board shall issue an order temporarily suspending the regulated person's authority to practice.
304.17 The temporary suspension order shall specify the reason for the suspension, including the
304.18 statute or rule alleged to have been violated. The temporary suspension order shall take
304.19 effect upon personal service on the regulated person or the regulated person's attorney, or
304.20 upon the third calendar day after the order is served by first class mail to the most recent
304.21 address provided to the health-related licensing board for the regulated person or the regulated
304.22 person's attorney.

304.23 (b) The temporary suspension shall remain in effect until the health-related licensing
304.24 board or the commissioner completes an investigation, holds a contested case hearing
304.25 pursuant to the Administrative Procedure Act, and issues a final order in the matter as
304.26 provided for in this section.

304.27 (c) At the time it issues the temporary suspension order, the health-related licensing
304.28 board shall schedule a contested case hearing, on the merits of whether discipline is
304.29 warranted, to be held pursuant to the Administrative Procedure Act. The regulated person
304.30 shall be provided with at least ten days' notice of any contested case hearing held pursuant
304.31 to this section. The contested case hearing shall be scheduled to begin no later than 30 days
304.32 after the effective service of the temporary suspension order.

305.1 (d) The administrative law judge presiding over the contested case hearing shall issue
305.2 a report and recommendation to the health-related licensing board no later than 30 days

429.9 after the final day of the contested case hearing. If the administrative law judge's report and
429.10 recommendations are for no action, the health-related licensing board shall issue a final
429.11 order pursuant to sections 14.61 and 14.62 within 30 days of receipt of the administrative
429.12 law judge's report and recommendations. If the administrative law judge's report and
429.13 recommendations are for action, the health-related licensing board shall issue a final order
429.14 pursuant to sections 14.61 and 14.62 within 60 days of receipt of the administrative law
429.15 judge's report and recommendations. Except as provided in paragraph (e), if the health-related
429.16 licensing board has not issued a final order pursuant to sections 14.61 and 14.62 within 30
429.17 days of receipt of the administrative law judge's report and recommendations for no action
429.18 or within 60 days of receipt of the administrative law judge's report and recommendations
429.19 for action, the temporary suspension shall be lifted.

429.20 (e) If the regulated person requests a delay in the contested case proceedings provided
429.21 for in paragraphs (c) and (d) for any reason, the temporary suspension shall remain in effect
429.22 until the health-related licensing board issues a final order pursuant to sections 14.61 and
429.23 14.62.

429.24 (f) This section shall not apply to the Office of Unlicensed Complementary and
429.25 Alternative Health Practice established under section 146A.02. The commissioner of health
429.26 shall conduct temporary suspensions for complementary and alternative health care
429.27 practitioners in accordance with section 146A.09.

429.28 Sec. 35. Minnesota Statutes 2016, section 214.10, subdivision 8, is amended to read:

429.29 Subd. 8. **Special requirements for health-related licensing boards.** In addition to the
429.30 provisions of this section that apply to all examining and licensing boards, the requirements
429.31 in this subdivision apply to all health-related licensing boards, except the Board of Veterinary
429.32 Medicine.

429.33 (a) If the executive director or consulted board member determines that a communication
429.34 received alleges a violation of statute or rule that involves sexual contact with a patient or
430.1 client, the communication shall be forwarded to the designee of the attorney general for an
430.2 investigation of the facts alleged in the communication. If, after an investigation it is the
430.3 opinion of the executive director or consulted board member that there is sufficient evidence
430.4 to justify disciplinary action, the board shall conduct a disciplinary conference or hearing.
430.5 If, after a hearing or disciplinary conference the board determines that misconduct involving
430.6 sexual contact with a patient or client occurred, the board shall take disciplinary action.
430.7 Notwithstanding subdivision 2, a board may not attempt to correct improper activities or
430.8 redress grievances through education, conciliation, and persuasion, unless in the opinion of
430.9 the executive director or consulted board member there is insufficient evidence to justify

305.3 after the final day of the contested case hearing. If the administrative law judge's report and
305.4 recommendations are for no action, the health-related licensing board shall issue a final
305.5 order pursuant to sections 14.61 and 14.62 within 30 days of receipt of the administrative
305.6 law judge's report and recommendations. If the administrative law judge's report and
305.7 recommendations are for action, the health-related licensing board shall issue a final order
305.8 pursuant to sections 14.61 and 14.62 within 60 days of receipt of the administrative law
305.9 judge's report and recommendations. Except as provided in paragraph (e), if the health-related
305.10 licensing board has not issued a final order pursuant to sections 14.61 and 14.62 within 30
305.11 days of receipt of the administrative law judge's report and recommendations for no action
305.12 or within 60 days of receipt of the administrative law judge's report and recommendations
305.13 for action, the temporary suspension shall be lifted.

305.14 (e) If the regulated person requests a delay in the contested case proceedings provided
305.15 for in paragraphs (c) and (d) for any reason, the temporary suspension shall remain in effect
305.16 until the health-related licensing board issues a final order pursuant to sections 14.61 and
305.17 14.62.

305.18 (f) This section shall not apply to the Office of Unlicensed Complementary and
305.19 Alternative Health Practice established under section 146A.02. The commissioner of health
305.20 shall conduct temporary suspensions for complementary and alternative health care
305.21 practitioners in accordance with section 146A.09.

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

305.23 Sec. 24. Minnesota Statutes 2016, section 214.10, subdivision 8, is amended to read:

305.24 Subd. 8. **Special requirements for health-related licensing boards.** In addition to the
305.25 provisions of this section that apply to all examining and licensing boards, the requirements
305.26 in this subdivision apply to all health-related licensing boards, except the Board of Veterinary
305.27 Medicine.

305.28 (a) If the executive director or consulted board member determines that a communication
305.29 received alleges a violation of statute or rule that involves sexual contact with a patient or
305.30 client, the communication shall be forwarded to the designee of the attorney general for an
305.31 investigation of the facts alleged in the communication. If, after an investigation it is the
305.32 opinion of the executive director or consulted board member that there is sufficient evidence
305.33 to justify disciplinary action, the board shall conduct a disciplinary conference or hearing.
305.34 If, after a hearing or disciplinary conference the board determines that misconduct involving
306.1 sexual contact with a patient or client occurred, the board shall take disciplinary action.
306.2 Notwithstanding subdivision 2, a board may not attempt to correct improper activities or
306.3 redress grievances through education, conciliation, and persuasion, unless in the opinion of
306.4 the executive director or consulted board member there is insufficient evidence to justify

430.10 disciplinary action. The board may settle a case by stipulation prior to, or during, a hearing
430.11 if the stipulation provides for disciplinary action.

430.12 (b) A board member who has a direct current or former financial connection or
430.13 professional relationship to a person who is the subject of board disciplinary activities must
430.14 not participate in board activities relating to that case.

430.15 (c) Each health-related licensing board shall establish procedures for exchanging
430.16 information with other Minnesota state boards, agencies, and departments responsible for
430.17 regulating health-related occupations, facilities, and programs, and for coordinating
430.18 investigations involving matters within the jurisdiction of more than one regulatory body.
430.19 The procedures must provide for the forwarding to other regulatory bodies of all information
430.20 and evidence, including the results of investigations, that are relevant to matters within that
430.21 licensing body's regulatory jurisdiction. Each health-related licensing board shall have access
430.22 to any data of the Department of Human Services relating to a person subject to the
430.23 jurisdiction of the licensing board. The data shall have the same classification under chapter
430.24 13, the Minnesota Government Data Practices Act, in the hands of the agency receiving the
430.25 data as it had in the hands of the Department of Human Services.

430.26 (d) Each health-related licensing board shall establish procedures for exchanging
430.27 information with other states regarding disciplinary actions against licensees. The procedures
430.28 must provide for the collection of information from other states about disciplinary actions
430.29 taken against persons who are licensed to practice in Minnesota or who have applied to be
430.30 licensed in this state and the dissemination of information to other states regarding
430.31 disciplinary actions taken in Minnesota. In addition to any authority in chapter 13 permitting
430.32 the dissemination of data, the board may, in its discretion, disseminate data to other states
430.33 regardless of its classification under chapter 13. Criminal history record information shall
430.34 not be exchanged. Before transferring any data that is not public, the board shall obtain
430.35 reasonable assurances from the receiving state that the data will not be made public.

306.5 disciplinary action. The board may settle a case by stipulation prior to, or during, a hearing
306.6 if the stipulation provides for disciplinary action.

306.7 (b) A board member who has a direct current or former financial connection or
306.8 professional relationship to a person who is the subject of board disciplinary activities must
306.9 not participate in board activities relating to that case.

306.10 (c) Each health-related licensing board shall establish procedures for exchanging
306.11 information with other Minnesota state boards, agencies, and departments responsible for
306.12 regulating health-related occupations, facilities, and programs, and for coordinating
306.13 investigations involving matters within the jurisdiction of more than one regulatory body.
306.14 The procedures must provide for the forwarding to other regulatory bodies of all information
306.15 and evidence, including the results of investigations, that are relevant to matters within that
306.16 licensing body's regulatory jurisdiction. Each health-related licensing board shall have access
306.17 to any data of the Department of Human Services relating to a person subject to the
306.18 jurisdiction of the licensing board. The data shall have the same classification under chapter
306.19 13, the Minnesota Government Data Practices Act, in the hands of the agency receiving the
306.20 data as it had in the hands of the Department of Human Services.

306.21 (d) Each health-related licensing board shall establish procedures for exchanging
306.22 information with other states regarding disciplinary actions against licensees. The procedures
306.23 must provide for the collection of information from other states about disciplinary actions
306.24 taken against persons who are licensed to practice in Minnesota or who have applied to be
306.25 licensed in this state and the dissemination of information to other states regarding
306.26 disciplinary actions taken in Minnesota. In addition to any authority in chapter 13 permitting
306.27 the dissemination of data, the board may, in its discretion, disseminate data to other states
306.28 regardless of its classification under chapter 13. Criminal history record information shall
306.29 not be exchanged. Before transferring any data that is not public, the board shall obtain
306.30 reasonable assurances from the receiving state that the data will not be made public.

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

307.1 Sec. 25. Minnesota Statutes 2016, section 214.12, is amended by adding a subdivision to
307.2 read:

307.3 Subd. 6. **Opioid and controlled substances prescribing.** (a) The Board of Medical
307.4 Practice, the Board of Nursing, the Board of Dentistry, the Board of Optometry, and the
307.5 Board of Podiatric Medicine shall require that licensees with the authority to prescribe
307.6 controlled substances obtain at least two hours of continuing education credit on best practices
307.7 in prescribing opioids and controlled substances, as part of the continuing education
307.8 requirements for licensure renewal. Licensees shall not be required to complete more than
307.9 two credit hours of continuing education on best practices in prescribing opioids and

307.10 controlled substances before this subdivision expires. Continuing education credit on best
307.11 practices in prescribing opioids and controlled substances must meet board requirements.

307.12 (b) This subdivision expires January 1, 2023.

307.13 **EFFECTIVE DATE.** This section is effective January 1, 2019.

307.14 Sec. 26. Minnesota Statutes 2017 Supplement, section 245G.22, subdivision 2, is amended
307.15 to read:

307.16 Subd. 2. **Definitions.** (a) For purposes of this section, the terms defined in this subdivision
307.17 have the meanings given them.

307.18 (b) "Diversion" means the use of a medication for the treatment of opioid addiction being
307.19 diverted from intended use of the medication.

307.20 (c) "Guest dose" means administration of a medication used for the treatment of opioid
307.21 addiction to a person who is not a client of the program that is administering or dispensing
307.22 the medication.

307.23 (d) "Medical director" means a physician licensed to practice medicine in the jurisdiction
307.24 that the opioid treatment program is located who assumes responsibility for administering
307.25 all medical services performed by the program, either by performing the services directly
307.26 or by delegating specific responsibility to (1) authorized program physicians and; (2)
307.27 advanced practice registered nurses, when approved by variance by the State Opioid
307.28 Treatment Authority under section 254A.03 and the federal Substance Abuse and Mental
307.29 Health Services Administration; or (3) health care professionals functioning under the
307.30 medical director's direct supervision.

307.31 (e) "Medication used for the treatment of opioid use disorder" means a medication
307.32 approved by the Food and Drug Administration for the treatment of opioid use disorder.

308.1 (f) "Minnesota health care programs" has the meaning given in section 256B.0636.

308.2 (g) "Opioid treatment program" has the meaning given in Code of Federal Regulations,
308.3 title 42, section 8.12, and includes programs licensed under this chapter.

308.4 (h) "Placing authority" has the meaning given in Minnesota Rules, part 9530.6605,
308.5 subpart 21a.

308.6 (i) "Unsupervised use" means the use of a medication for the treatment of opioid use
308.7 disorder dispensed for use by a client outside of the program setting.

308.8 Sec. 27. Minnesota Statutes 2016, section 256.975, subdivision 7b, is amended to read:

308.9 Subd. 7b. **Exemptions and emergency admissions.** (a) Exemptions from the federal
308.10 screening requirements outlined in subdivision 7a, paragraphs (b) and (c), are limited to:

308.11 (1) a person who, having entered an acute care facility from a certified nursing facility,
308.12 is returning to a certified nursing facility; or

308.13 (2) a person transferring from one certified nursing facility in Minnesota to another
308.14 certified nursing facility in Minnesota.

308.15 (b) Persons who are exempt from preadmission screening for purposes of level of care
308.16 determination include:

308.17 (1) persons described in paragraph (a);

308.18 (2) an individual who has a contractual right to have nursing facility care paid for
308.19 indefinitely by the Veterans Administration;

308.20 (3) an individual enrolled in a demonstration project under section 256B.69, subdivision
308.21 8, at the time of application to a nursing facility; and

308.22 (4) an individual currently being served under the alternative care program or under a
308.23 home and community-based services waiver authorized under section 1915(c) of the federal
308.24 Social Security Act.

308.25 (c) Persons admitted to a Medicaid-certified nursing facility from the community on an
308.26 emergency basis as described in paragraph (d) or from an acute care facility on a nonworking
308.27 day must be screened the first working day after admission.

308.28 (d) Emergency admission to a nursing facility prior to screening is permitted when all
308.29 of the following conditions are met:

308.30 (1) a person is admitted from the community to a certified nursing or certified boarding
308.31 care facility during Senior LinkAge Line nonworking hours;

309.1 (2) a physician or advanced practice registered nurse has determined that delaying
309.2 admission until preadmission screening is completed would adversely affect the person's
309.3 health and safety;

309.4 (3) there is a recent precipitating event that precludes the client from living safely in the
309.5 community, such as sustaining an injury, sudden onset of acute illness, or a caregiver's
309.6 inability to continue to provide care;

309.7 (4) the attending physician or advanced practice registered nurse has authorized the
309.8 emergency placement and has documented the reason that the emergency placement is
309.9 recommended; and

309.10 (5) the Senior LinkAge Line is contacted on the first working day following the
309.11 emergency admission.

309.12 Transfer of a patient from an acute care hospital to a nursing facility is not considered
309.13 an emergency except for a person who has received hospital services in the following
309.14 situations: hospital admission for observation, care in an emergency room without hospital
309.15 admission, or following hospital 24-hour bed care and from whom admission is being sought
309.16 on a nonworking day.

309.17 (e) A nursing facility must provide written information to all persons admitted regarding
309.18 the person's right to request and receive long-term care consultation services as defined in
309.19 section 256B.0911, subdivision 1a. The information must be provided prior to the person's
309.20 discharge from the facility and in a format specified by the commissioner.

309.21 Sec. 28. Minnesota Statutes 2016, section 256B.0575, subdivision 1, is amended to read:

309.22 Subdivision 1. **Income deductions.** When an institutionalized person is determined
309.23 eligible for medical assistance, the income that exceeds the deductions in paragraphs (a)
309.24 and (b) must be applied to the cost of institutional care.

309.25 (a) The following amounts must be deducted from the institutionalized person's income
309.26 in the following order:

309.27 (1) the personal needs allowance under section 256B.35 or, for a veteran who does not
309.28 have a spouse or child, or a surviving spouse of a veteran having no child, the amount of
309.29 an improved pension received from the veteran's administration not exceeding \$90 per
309.30 month;

309.31 (2) the personal allowance for disabled individuals under section 256B.36;

310.1 (3) if the institutionalized person has a legally appointed guardian or conservator, five
310.2 percent of the recipient's gross monthly income up to \$100 as reimbursement for guardianship
310.3 or conservatorship services;

- 310.4 (4) a monthly income allowance determined under section 256B.058, subdivision 2, but
310.5 only to the extent income of the institutionalized spouse is made available to the community
310.6 spouse;
- 310.7 (5) a monthly allowance for children under age 18 which, together with the net income
310.8 of the children, would provide income equal to the medical assistance standard for families
310.9 and children according to section 256B.056, subdivision 4, for a family size that includes
310.10 only the minor children. This deduction applies only if the children do not live with the
310.11 community spouse and only to the extent that the deduction is not included in the personal
310.12 needs allowance under section 256B.35, subdivision 1, as child support garnished under a
310.13 court order;
- 310.14 (6) a monthly family allowance for other family members, equal to one-third of the
310.15 difference between 122 percent of the federal poverty guidelines and the monthly income
310.16 for that family member;
- 310.17 (7) reparations payments made by the Federal Republic of Germany and reparations
310.18 payments made by the Netherlands for victims of Nazi persecution between 1940 and 1945;
- 310.19 (8) all other exclusions from income for institutionalized persons as mandated by federal
310.20 law; and
- 310.21 (9) amounts for reasonable expenses, as specified in subdivision 2, incurred for necessary
310.22 medical or remedial care for the institutionalized person that are recognized under state law,
310.23 not medical assistance covered expenses, and not subject to payment by a third party.
- 310.24 For purposes of clause (6), "other family member" means a person who resides with the
310.25 community spouse and who is a minor or dependent child, dependent parent, or dependent
310.26 sibling of either spouse. "Dependent" means a person who could be claimed as a dependent
310.27 for federal income tax purposes under the Internal Revenue Code.
- 310.28 (b) Income shall be allocated to an institutionalized person for a period of up to three
310.29 calendar months, in an amount equal to the medical assistance standard for a family size of
310.30 one if:
- 310.31 (1) a physician or advanced practice registered nurse certifies that the person is expected
310.32 to reside in the long-term care facility for three calendar months or less;
- 310.33 (2) if the person has expenses of maintaining a residence in the community; and
- 311.1 (3) if one of the following circumstances apply:

- 311.2 (i) the person was not living together with a spouse or a family member as defined in
311.3 paragraph (a) when the person entered a long-term care facility; or
- 311.4 (ii) the person and the person's spouse become institutionalized on the same date, in
311.5 which case the allocation shall be applied to the income of one of the spouses.
- 311.6 For purposes of this paragraph, a person is determined to be residing in a licensed nursing
311.7 home, regional treatment center, or medical institution if the person is expected to remain
311.8 for a period of one full calendar month or more.
- 311.9 Sec. 29. Minnesota Statutes 2016, section 256B.0595, subdivision 3, is amended to read:
- 311.10 Subd. 3. **Homestead exception to transfer prohibition.** (a) An institutionalized person
311.11 is not ineligible for long-term care services due to a transfer of assets for less than fair market
311.12 value if the asset transferred was a homestead and:
- 311.13 (1) title to the homestead was transferred to the individual's:
- 311.14 (i) spouse;
- 311.15 (ii) child who is under age 21;
- 311.16 (iii) blind or permanently and totally disabled child as defined in the Supplemental
311.17 Security Income program;
- 311.18 (iv) sibling who has equity interest in the home and who was residing in the home for
311.19 a period of at least one year immediately before the date of the individual's admission to
311.20 the facility; or
- 311.21 (v) son or daughter who was residing in the individual's home for a period of at least
311.22 two years immediately before the date the individual became an institutionalized person,
311.23 and who provided care to the individual that, as certified by the individual's attending
311.24 physician or advanced practice registered nurse, permitted the individual to reside at home
311.25 rather than receive care in an institution or facility;
- 311.26 (2) a satisfactory showing is made that the individual intended to dispose of the homestead
311.27 at fair market value or for other valuable consideration; or
- 311.28 (3) the local agency grants a waiver of a penalty resulting from a transfer for less than
311.29 fair market value because denial of eligibility would cause undue hardship for the individual,
311.30 based on imminent threat to the individual's health and well-being. Whenever an applicant
311.31 or recipient is denied eligibility because of a transfer for less than fair market value, the

312.1 local agency shall notify the applicant or recipient that the applicant or recipient may request
312.2 a waiver of the penalty if the denial of eligibility will cause undue hardship. With the written
312.3 consent of the individual or the personal representative of the individual, a long-term care
312.4 facility in which an individual is residing may file an undue hardship waiver request, on
312.5 behalf of the individual who is denied eligibility for long-term care services on or after July
312.6 1, 2006, due to a period of ineligibility resulting from a transfer on or after February 8,
312.7 2006. In evaluating a waiver, the local agency shall take into account whether the individual
312.8 was the victim of financial exploitation, whether the individual has made reasonable efforts
312.9 to recover the transferred property or resource, and other factors relevant to a determination
312.10 of hardship. If the local agency does not approve a hardship waiver, the local agency shall
312.11 issue a written notice to the individual stating the reasons for the denial and the process for
312.12 appealing the local agency's decision.

312.13 (b) When a waiver is granted under paragraph (a), clause (3), a cause of action exists
312.14 against the person to whom the homestead was transferred for that portion of long-term
312.15 care services provided within:

312.16 (1) 30 months of a transfer made on or before August 10, 1993;

312.17 (2) 60 months if the homestead was transferred after August 10, 1993, to a trust or portion
312.18 of a trust that is considered a transfer of assets under federal law;

312.19 (3) 36 months if transferred in any other manner after August 10, 1993, but prior to
312.20 February 8, 2006; or

312.21 (4) 60 months if the homestead was transferred on or after February 8, 2006,

312.22 or the amount of the uncompensated transfer, whichever is less, together with the costs
312.23 incurred due to the action.

312.24 Sec. 30. Minnesota Statutes 2016, section 256B.0625, subdivision 2, is amended to read:

312.25 Subd. 2. **Skilled and intermediate nursing care.** (a) Medical assistance covers skilled
312.26 nursing home services and services of intermediate care facilities, including training and
312.27 habilitation services, as defined in section 252.41, subdivision 3, for persons with
312.28 developmental disabilities who are residing in intermediate care facilities for persons with
312.29 developmental disabilities. Medical assistance must not be used to pay the costs of nursing
312.30 care provided to a patient in a swing bed as defined in section 144.562, unless (1) the facility
312.31 in which the swing bed is located is eligible as a sole community provider, as defined in
312.32 Code of Federal Regulations, title 42, section 412.92, or the facility is a public hospital
312.33 owned by a governmental entity with 15 or fewer licensed acute care beds; (2) the Centers
313.1 for Medicare and Medicaid Services approves the necessary state plan amendments; (3) the

313.2 patient was screened as provided by law; (4) the patient no longer requires acute care
313.3 services; and (5) no nursing home beds are available within 25 miles of the facility. The
313.4 commissioner shall exempt a facility from compliance with the sole community provider
313.5 requirement in clause (1) if, as of January 1, 2004, the facility had an agreement with the
313.6 commissioner to provide medical assistance swing bed services.

313.7 (b) Medical assistance also covers up to ten days of nursing care provided to a patient
313.8 in a swing bed if: (1) the patient's physician or advanced practice registered nurse certifies
313.9 that the patient has a terminal illness or condition that is likely to result in death within 30
313.10 days and that moving the patient would not be in the best interests of the patient and patient's
313.11 family; (2) no open nursing home beds are available within 25 miles of the facility; and (3)
313.12 no open beds are available in any Medicare hospice program within 50 miles of the facility.
313.13 The daily medical assistance payment for nursing care for the patient in the swing bed is
313.14 the statewide average medical assistance skilled nursing care per diem as computed annually
313.15 by the commissioner on July 1 of each year.

313.16 Sec. 31. Minnesota Statutes 2016, section 259.24, subdivision 2, is amended to read:

313.17 Subd. 2. **Parents, guardian.** If an unmarried parent who consents to the adoption of a
313.18 child is under 18 years of age, the consent of the minor parent's parents or guardian, if any,
313.19 also shall be required; if either or both the parents are disqualified for any of the reasons
313.20 enumerated in subdivision 1, the consent of such parent shall be waived, and the consent
313.21 of the guardian only shall be sufficient; and, if there be neither parent nor guardian qualified
313.22 to give such consent, the consent may be given by the commissioner. The agency overseeing
313.23 the adoption proceedings shall ensure that the minor parent is offered the opportunity to
313.24 consult with an attorney, a member of the clergy ~~or~~, a physician, or an advanced practice
313.25 registered nurse before consenting to adoption of the child. The advice or opinion of the
313.26 attorney, clergy member ~~or~~, physician, or advanced practice registered nurse shall not be
313.27 binding on the minor parent. If the minor parent cannot afford the cost of consulting with
313.28 an attorney, a member of the clergy ~~or~~, a physician, or an advanced practice registered nurse,
313.29 the county shall bear that cost.

313.30 Sec. 32. Minnesota Statutes 2017 Supplement, section 260C.007, subdivision 6, is amended
313.31 to read:

313.32 Subd. 6. **Child in need of protection or services.** "Child in need of protection or
313.33 services" means a child who is in need of protection or services because the child:

314.1 (1) is abandoned or without parent, guardian, or custodian;

314.2 (2)(i) has been a victim of physical or sexual abuse as defined in section 626.556,
314.3 subdivision 2, (ii) resides with or has resided with a victim of child abuse as defined in
314.4 subdivision 5 or domestic child abuse as defined in subdivision 13, (iii) resides with or

- 314.5 would reside with a perpetrator of domestic child abuse as defined in subdivision 13 or child
314.6 abuse as defined in subdivision 5 or 13, or (iv) is a victim of emotional maltreatment as
314.7 defined in subdivision 15;
- 314.8 (3) is without necessary food, clothing, shelter, education, or other required care for the
314.9 child's physical or mental health or morals because the child's parent, guardian, or custodian
314.10 is unable or unwilling to provide that care;
- 314.11 (4) is without the special care made necessary by a physical, mental, or emotional
314.12 condition because the child's parent, guardian, or custodian is unable or unwilling to provide
314.13 that care;
- 314.14 (5) is medically neglected, which includes, but is not limited to, the withholding of
314.15 medically indicated treatment from an infant with a disability with a life-threatening
314.16 condition. The term "withholding of medically indicated treatment" means the failure to
314.17 respond to the infant's life-threatening conditions by providing treatment, including
314.18 appropriate nutrition, hydration, and medication which, in the treating physician's or
314.19 ~~physicians'~~ advanced practice registered nurse's reasonable medical judgment, will be most
314.20 likely to be effective in ameliorating or correcting all conditions, except that the term does
314.21 not include the failure to provide treatment other than appropriate nutrition, hydration, or
314.22 medication to an infant when, in the treating physician's or ~~physicians'~~ advanced practice
314.23 registered nurse's reasonable medical judgment:
- 314.24 (i) the infant is chronically and irreversibly comatose;
- 314.25 (ii) the provision of the treatment would merely prolong dying, not be effective in
314.26 ameliorating or correcting all of the infant's life-threatening conditions, or otherwise be
314.27 futile in terms of the survival of the infant; or
- 314.28 (iii) the provision of the treatment would be virtually futile in terms of the survival of
314.29 the infant and the treatment itself under the circumstances would be inhumane;
- 314.30 (6) is one whose parent, guardian, or other custodian for good cause desires to be relieved
314.31 of the child's care and custody, including a child who entered foster care under a voluntary
314.32 placement agreement between the parent and the responsible social services agency under
314.33 section 260C.227;
- 315.1 (7) has been placed for adoption or care in violation of law;
- 315.2 (8) is without proper parental care because of the emotional, mental, or physical disability,
315.3 or state of immaturity of the child's parent, guardian, or other custodian;

431.1 Sec. 36. Minnesota Statutes 2017 Supplement, section 364.09, is amended to read:
431.2 **364.09 EXCEPTIONS.**

431.3 (a) This chapter does not apply to the licensing process for peace officers; to law
431.4 enforcement agencies as defined in section 626.84, subdivision 1, paragraph (f); to fire
431.5 protection agencies; to eligibility for a private detective or protective agent license; to the
431.6 licensing and background study process under chapters 245A and 245C; to the licensing
431.7 and background investigation process under chapter 240; to eligibility for school bus driver
431.8 endorsements; to eligibility for special transportation service endorsements; to eligibility
431.9 for a commercial driver training instructor license, which is governed by section 171.35
431.10 and rules adopted under that section; to emergency medical services personnel, or to the
431.11 licensing by political subdivisions of taxicab drivers, if the applicant for the license has
431.12 been discharged from sentence for a conviction within the ten years immediately preceding
431.13 application of a violation of any of the following:

315.4 (9) is one whose behavior, condition, or environment is such as to be injurious or
315.5 dangerous to the child or others. An injurious or dangerous environment may include, but
315.6 is not limited to, the exposure of a child to criminal activity in the child's home;

315.7 (10) is experiencing growth delays, which may be referred to as failure to thrive, that
315.8 have been diagnosed by a physician and are due to parental neglect;

315.9 (11) is a sexually exploited youth;

315.10 (12) has committed a delinquent act or a juvenile petty offense before becoming ten
315.11 years old;

315.12 (13) is a runaway;

315.13 (14) is a habitual truant;

315.14 (15) has been found incompetent to proceed or has been found not guilty by reason of
315.15 mental illness or mental deficiency in connection with a delinquency proceeding, a
315.16 certification under section 260B.125, an extended jurisdiction juvenile prosecution, or a
315.17 proceeding involving a juvenile petty offense; or

315.18 (16) has a parent whose parental rights to one or more other children were involuntarily
315.19 terminated or whose custodial rights to another child have been involuntarily transferred to
315.20 a relative and there is a case plan prepared by the responsible social services agency
315.21 documenting a compelling reason why filing the termination of parental rights petition under
315.22 section 260C.503, subdivision 2, is not in the best interests of the child.

315.23 Sec. 33. Minnesota Statutes 2017 Supplement, section 364.09, is amended to read:
315.24 **364.09 EXCEPTIONS.**

315.25 (a) This chapter does not apply to the licensing process for peace officers; to law
315.26 enforcement agencies as defined in section 626.84, subdivision 1, paragraph (f); to fire
315.27 protection agencies; to eligibility for a private detective or protective agent license; to the
315.28 licensing and background study process under chapters 245A and 245C; to the licensing
315.29 and background investigation process under chapter 240; to eligibility for school bus driver
315.30 endorsements; to eligibility for special transportation service endorsements; to eligibility
315.31 for a commercial driver training instructor license, which is governed by section 171.35
315.32 and rules adopted under that section; to emergency medical services personnel, or to the
316.1 licensing by political subdivisions of taxicab drivers, if the applicant for the license has
316.2 been discharged from sentence for a conviction within the ten years immediately preceding
316.3 application of a violation of any of the following:

431.14 (1) sections 609.185 to 609.2114, 609.221 to 609.223, 609.342 to 609.3451, or 617.23,
431.15 subdivision 2 or 3; or Minnesota Statutes 2012, section 609.21;

431.16 (2) any provision of chapter 152 that is punishable by a maximum sentence of 15 years
431.17 or more; or

431.18 (3) a violation of chapter 169 or 169A involving driving under the influence, leaving
431.19 the scene of an accident, or reckless or careless driving.

431.20 This chapter also shall not apply to eligibility for juvenile corrections employment, where
431.21 the offense involved child physical or sexual abuse or criminal sexual conduct.

431.22 (b) This chapter does not apply to a school district or to eligibility for a license issued
431.23 or renewed by the Professional Educator Licensing and Standards Board or the commissioner
431.24 of education.

431.25 (c) Nothing in this section precludes the Minnesota Police and Peace Officers Training
431.26 Board or the state fire marshal from recommending policies set forth in this chapter to the
431.27 attorney general for adoption in the attorney general's discretion to apply to law enforcement
431.28 or fire protection agencies.

431.29 ~~(d) This chapter does not apply to a license to practice medicine that has been denied or~~
431.30 ~~revoked by the Board of Medical Practice pursuant to section 147.091, subdivision 1a.~~

431.31 ~~(e) This chapter does not apply to any person who has been denied a license to practice~~
431.32 ~~chiropractic or whose license to practice chiropractic has been revoked by the board in~~
431.33 ~~accordance with section 148.10, subdivision 7.~~

432.1 ~~(f) This chapter does not apply to any license, registration, or permit that has been denied~~
432.2 ~~or revoked by the Board of Nursing in accordance with section 148.261, subdivision 1a.~~

432.3 ~~(g)~~ (d) This chapter does not apply to any license, registration, permit, or certificate that
432.4 has been denied or revoked by the commissioner of health according to section 148.5195,
432.5 subdivision 5; or 153A.15, subdivision 2.

432.6 ~~(h)~~ (e) This chapter does not supersede a requirement under law to conduct a criminal
432.7 history background investigation or consider criminal history records in hiring for particular
432.8 types of employment.

316.4 (1) sections 609.185 to 609.2114, 609.221 to 609.223, 609.342 to 609.3451, or 617.23,
316.5 subdivision 2 or 3; or Minnesota Statutes 2012, section 609.21;

316.6 (2) any provision of chapter 152 that is punishable by a maximum sentence of 15 years
316.7 or more; or

316.8 (3) a violation of chapter 169 or 169A involving driving under the influence, leaving
316.9 the scene of an accident, or reckless or careless driving.

316.10 This chapter also shall not apply to eligibility for juvenile corrections employment, where
316.11 the offense involved child physical or sexual abuse or criminal sexual conduct.

316.12 (b) This chapter does not apply to a school district or to eligibility for a license issued
316.13 or renewed by the Professional Educator Licensing and Standards Board or the commissioner
316.14 of education.

316.15 (c) Nothing in this section precludes the Minnesota Police and Peace Officers Training
316.16 Board or the state fire marshal from recommending policies set forth in this chapter to the
316.17 attorney general for adoption in the attorney general's discretion to apply to law enforcement
316.18 or fire protection agencies.

316.19 ~~(d) This chapter does not apply to a license to practice medicine that has been denied or~~
316.20 ~~revoked by the Board of Medical Practice pursuant to section 147.091, subdivision 1a.~~

316.21 ~~(e) This chapter does not apply to any person who has been denied a license to practice~~
316.22 ~~chiropractic or whose license to practice chiropractic has been revoked by the board in~~
316.23 ~~accordance with section 148.10, subdivision 7.~~

316.24 ~~(f) This chapter does not apply to any license, registration, or permit that has been denied~~
316.25 ~~or revoked by the Board of Nursing in accordance with section 148.261, subdivision 1a.~~

316.26 ~~(g)~~ (d) This chapter does not apply to any license, registration, permit, or certificate that
316.27 has been denied or revoked by the commissioner of health according to section 148.5195,
316.28 subdivision 5; or 153A.15, subdivision 2.

316.29 ~~(h)~~ (e) This chapter does not supersede a requirement under law to conduct a criminal
316.30 history background investigation or consider criminal history records in hiring for particular
316.31 types of employment.

432.9 (f) This chapter does not apply to the licensing or registration process for, or to any
432.10 license, registration, or permit that has been denied or revoked by, a health-related licensing
432.11 board listed in section 214.01, subdivision 2.

432.12 Sec. 37. **GUIDELINES AUTHORIZING PATIENT-ASSISTED MEDICATION**
432.13 **ADMINISTRATION.**

432.14 (a) Within the limits of the board's available appropriation, the Medical Director Standing
432.15 Advisory Committee of the Emergency Medical Services Regulatory Board shall propose
432.16 guidelines authorizing EMTs, AEMTs, and paramedics certified under Minnesota Statutes,
432.17 section 144E.28, to assist a patient in emergency situations with administering prescription
432.18 medications that are:

- 432.19 (1) carried by a patient;
432.20 (2) intended to treat adrenal insufficiency or other rare conditions that require emergency
432.21 treatment with a previously prescribed medication;
432.22 (3) intended to treat a specific life-threatening condition; and
432.23 (4) administered via routes of delivery that are within the scope of training of the EMT,
432.24 AEMT, or paramedic.

432.25 (b) The proposed guidelines shall include language that requires the ambulance service
432.26 to be available to patients or their caregivers who have medical conditions identified in
432.27 paragraph (a) to define the patient's needs and, when appropriate, develop specific care
432.28 plans and provide education or other resources at the discretion of the ambulance service
432.29 medical director.

432.30 (c) The Emergency Medical Services Regulatory Board shall submit the proposed
432.31 guidelines and draft legislation as necessary to the chairs and ranking minority members of
432.32 the legislative committees with jurisdiction over health care by January 1, 2019.

317.1 (f) This chapter does not apply to the licensing or registration process for, or to any
317.2 license, registration, or permit that has been denied or revoked by, a health licensing board
317.3 listed in section 214.01, subdivision 2.

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

HOUSE ARTICLE 1

49.17 Sec. 60. Minnesota Statutes 2016, section 144E.16, is amended by adding a subdivision
49.18 to read:

49.19 Subd. 9. **Rules authorizing patient-assisted medication administration.** (a) The board
49.20 shall adopt rules authorizing EMTs, AEMTs, and paramedics certified under section 144E.28
49.21 to assist a patient, in emergency situations, with administering prescription medications that
49.22 are:

- 49.23 (1) carried by a patient;
49.24 (2) intended to treat adrenal insufficiency or another rare but previously diagnosed
49.25 condition that requires emergency treatment with a previously prescribed medication;
49.26 (3) intended to treat a specific life-threatening condition; and
49.27 (4) administered via routes of delivery that are within the skill set of the EMT, AEMT,
49.28 or paramedic.

49.29 (b) EMTs, AEMTs, and paramedics assisting a patient with medication administration
49.30 according to the rules adopted under this subdivision may do so only under the authority
49.31 of guidelines approved by the ambulance service medical director or under direct medical
49.32 control.

50.1 Sec. 61. Minnesota Statutes 2016, section 144E.16, is amended by adding a subdivision
50.2 to read:

50.3 Subd. 10. **Rules establishing standards for communication with patients regarding**
50.4 **need for emergency medical services.** The board shall adopt rules to establish guidelines
50.5 for ambulance services to communicate with a patient in the service area of the ambulance
50.6 service, and with the patient's caregivers, concerning the patient's health condition, the
50.7 likelihood that the patient will need emergency medical services, and how to collaboratively
50.8 develop emergency medical services care plans to meet the patient's needs.

HOUSE ARTICLE 8

317.5 Sec. 34. **COUNCIL OF HEALTH BOARDS WORK GROUP.**

317.6 (a) The Council of Health Boards shall convene a work group to study and make
317.7 recommendations on:

317.8 (1) increasing the use of telehealth technologies including, but not limited to, high-fidelity
317.9 simulation and teleconferencing to complete portions of the clinical experiences required
317.10 as part of postsecondary educational programs that relate to counseling. Clinical experiences
317.11 may include supervised practicum and internship hours. The study shall include the
317.12 parameters in which the proposed technology may be utilized in order to ensure that students
317.13 are integrating classroom theory in a lifelike clinical setting without compromising clinical
317.14 competency outcomes;

317.15 (2) increasing access to telehealth technologies for use in supervision of persons
317.16 completing postdegree supervised practice work experience and training required for
317.17 licensure. The study shall include the parameters in which the proposed technology may be
317.18 utilized for supervision to ensure the quality and competence of the activities supervised;
317.19 and

317.20 (3) increasing client access to mental health services through use of telehealth
317.21 technologies.

317.22 (b) The work group must consist of representatives of:

317.23 (1) the Boards of Psychology, Social Work, Marriage and Family Therapy, and Behavioral
317.24 Health and Therapy;

317.25 (2) postsecondary educational institutions that have accredited educational programs
317.26 for social work, psychology, alcohol and drug counseling, marriage and family therapy,
317.27 and professional counseling; and

317.28 (3) the relevant professional counseling associations, including the Minnesota Counseling
317.29 Association; Minnesota Psychology Association; National Association of Social Workers,
317.30 Minnesota chapter; Minnesota Association for Marriage and Family Therapy; and the
317.31 Minnesota Association of Resources for Recovery and Chemical Health.

318.1 (c) By February 1, 2019, the council shall submit recommendations for using telehealth
318.2 technologies to the chairs and ranking minority members of the legislative committees with
318.3 jurisdiction over health occupations and higher education, and shall include a plan for
318.4 implementing the recommendations and any legislative changes necessary for
318.5 implementation.

433.1 Sec. 38. **REPEALER.**

318.6 Sec. 35. **REPEALER.**

- 433.2 (a) Minnesota Statutes 2016, section 214.075, subdivision 8, is repealed.
- 433.3 (b) Minnesota Rules, part 5600.0605, subparts 5 and 8, are repealed.

- 318.7 Minnesota Statutes 2016, section 214.075, subdivision 8, is repealed.
- 318.8 **EFFECTIVE DATE.** This section is effective the day following final enactment.