

278.4

ARTICLE 4

278.5

HEALTH-RELATED LICENSING BOARDS

112.17

ARTICLE 3

112.18

HEALTH OCCUPATION AND HEALTH RELATED LICENSING BOARDS

112.19 Section 1. Minnesota Statutes 2020, section 144E.001, is amended by adding a subdivision
112.20 to read:

112.21 Subd. 16. **Education program primary instructor or primary instructor.** "Education
112.22 program primary instructor" or "primary instructor" means an individual, as approved by
112.23 the board, who serves as the lead instructor of an emergency medical care initial certification
112.24 course and who is responsible for planning or conducting the course according to the most
112.25 current version of the National EMS Education Standards by the NHTSA, United States
112.26 Department of Transportation.

113.1 Sec. 2. Minnesota Statutes 2020, section 144E.27, is amended to read:

113.2 **144E.27 EDUCATION PROGRAMS; BOARD APPROVAL; REGISTRATION**
113.3 **OF EMR.**

113.4 Subdivision 1. **Education program instructor.** An education program instructor must
113.5 be an emergency medical responder, EMT, AEMT, paramedic, physician, physician assistant,
113.6 or registered nurse.

113.7 Subd. 1a. **Approval required.** (a) All education programs for an emergency medical
113.8 responder must be approved by the board.

113.9 (b) To be approved by the board, an education program must:

113.10 (1) submit an application prescribed by the board that includes:

113.11 (i) type and length of course to be offered;

113.12 (ii) names, addresses, and qualifications of the program medical director, program
113.13 education coordinator, and instructors;

113.14 (iii) admission criteria for students; and

113.15 (iv) materials and equipment to be used;

113.16 (2) for each course, implement the most current version of the United States Department
113.17 of Transportation EMS Education Standards, or its equivalent as determined by the board
113.18 applicable to Emergency Medical Responder registration education;

113.19 (3) have a program medical director and a program coordinator;

113.20 (4) have at least one instructor for every ten students at the practical skill stations;

113.21 (5) retain documentation of program approval by the board, course outline, and student
113.22 information; and

113.23 (6) submit the appropriate fee as required under section 144E.29.

113.24 (c) The National EMS Education Standards by the NHTSA, United States Department
113.25 of Transportation contains the minimal entry level of knowledge and skills for emergency
113.26 medical responders. Medical directors of emergency medical responder groups may expand
113.27 the knowledge and skill set.

113.28 Subd. 2. **Registration requirements.** To be eligible for registration with the board as
113.29 an emergency medical responder, an individual shall ~~complete a board-approved application~~
113.30 ~~form and:~~

114.1 (1) ~~successfully complete a board-approved initial emergency medical responder~~
114.2 ~~education program. Registration under this clause is valid for two years and expires on~~
114.3 ~~October 31 the United States Department of Transportation course or its equivalent as~~
114.4 ~~approved by the board, specific to the emergency medical responder classification; or~~

114.5 (2) be credentialed as an emergency medical responder by the National Registry of
114.6 Emergency Medical Technicians. ~~Registration under this clause expires the same day as~~
114.7 ~~the National Registry credential; and~~

114.8 (3) complete a board-approved application form.

114.9 Subd. 2a. **Registration expiration dates.** Emergency medical responder registration
114.10 expiration dates are as follows:

114.11 (1) for initial registration granted between January 1 and June 30 of an even-numbered
114.12 year, the expiration date is October 31 of the next even-numbered year;

114.13 (2) for initial registration granted between July 1 and December 31 of an even-numbered
114.14 year, the expiration date is October 31 of the second odd-numbered year;

114.15 (3) for initial registration granted between January 1 and June 30 of an odd-numbered
114.16 year, the expiration date is October 31 of the next odd-numbered year; and

114.17 (4) for initial registration granted between July 1 and December 31 of an odd-numbered
114.18 year, the expiration date is October 31 of the second even-numbered year.

114.19 Subd. 3. **Renewal.** (a) The board may renew the registration of an emergency medical
114.20 responder who:

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

114.22 (2) successfully completes a course in cardiopulmonary resuscitation approved by the
114.23 board or the licensee's medical director; and

114.24 (3) submits a completed renewal application to the board before the registration expiration
114.25 date.

114.26 (b) The board may renew the lapsed registration of an emergency medical responder
114.27 who:

- 114.28 (1) successfully completes a board-approved refresher course; ~~and~~
- 114.29 (2) successfully completes a course in cardiopulmonary resuscitation approved by the
- 114.30 board or the licensee's medical director; and
- 115.1 (3) submits a completed renewal application to the board within 12 months after the
- 115.2 registration expiration date.
- 115.3 Subd. 5. **Denial, suspension, revocation.** (a) The board may deny, suspend, revoke,
- 115.4 place conditions on, or refuse to renew the registration as an emergency medical responder
- 115.5 of an individual who the board determines:
- 115.6 (1) violates sections 144E.001 to 144E.33 or the rules adopted under those sections, an
- 115.7 agreement for corrective action, or an order that the board issued or is otherwise empowered
- 115.8 to enforce;
- 115.9 (2) misrepresents or falsifies information on an application form for registration;
- 115.10 (3) is convicted or pleads guilty or nolo contendere to any felony; any gross misdemeanor
- 115.11 relating to assault, sexual misconduct, theft, or the illegal use of drugs or alcohol; or any
- 115.12 misdemeanor relating to assault, sexual misconduct, theft, or the illegal use of drugs or
- 115.13 alcohol;
- 115.14 (4) is actually or potentially unable to provide emergency medical services with
- 115.15 reasonable skill and safety to patients by reason of illness, use of alcohol, drugs, chemicals,
- 115.16 or any other material, or as a result of any mental or physical condition;
- 115.17 (5) engages in unethical conduct, including, but not limited to, conduct likely to deceive,
- 115.18 defraud, or harm the public, or demonstrating a willful or careless disregard for the health,
- 115.19 welfare, or safety of the public;
- 115.20 (6) maltreats or abandons a patient;
- 115.21 (7) violates any state or federal controlled substance law;
- 115.22 (8) engages in unprofessional conduct or any other conduct which has the potential for
- 115.23 causing harm to the public, including any departure from or failure to conform to the
- 115.24 minimum standards of acceptable and prevailing practice without actual injury having to
- 115.25 be established;
- 115.26 (9) provides emergency medical services under lapsed or nonrenewed credentials;
- 115.27 (10) is subject to a denial, corrective, disciplinary, or other similar action in another
- 115.28 jurisdiction or by another regulatory authority;
- 115.29 (11) engages in conduct with a patient that is sexual or may reasonably be interpreted
- 115.30 by the patient as sexual, or in any verbal behavior that is seductive or sexually demeaning
- 115.31 to a patient; or

- 116.1 (12) makes a false statement or knowingly provides false information to the board, or
116.2 fails to cooperate with an investigation of the board as required by section 144E.30.
- 116.3 (b) Before taking action under paragraph (a), the board shall give notice to an individual
116.4 of the right to a contested case hearing under chapter 14. If an individual requests a contested
116.5 case hearing within 30 days after receiving notice, the board shall initiate a contested case
116.6 hearing according to chapter 14.
- 116.7 (c) The administrative law judge shall issue a report and recommendation within 30
116.8 days after closing the contested case hearing record. The board shall issue a final order
116.9 within 30 days after receipt of the administrative law judge's report.
- 116.10 (d) After six months from the board's decision to deny, revoke, place conditions on, or
116.11 refuse renewal of an individual's registration for disciplinary action, the individual shall
116.12 have the opportunity to apply to the board for reinstatement.
- 116.13 Subd. 6. **Temporary suspension.** (a) In addition to any other remedy provided by law,
116.14 the board may temporarily suspend the registration of an individual as an emergency
116.15 responder after conducting a preliminary inquiry to determine whether the board believes
116.16 that the individual has violated a statute or rule that the board is empowered to enforce and
116.17 determining that the continued provision of service by the individual would create an
116.18 imminent risk to public health or harm to others.
- 116.19 (b) A temporary suspension order prohibiting an individual from providing emergency
116.20 medical care shall give notice of the right to a preliminary hearing according to paragraph
116.21 (d) and shall state the reasons for the entry of the temporary suspension order.
- 116.22 (c) Service of a temporary suspension order is effective when the order is served on the
116.23 individual personally or by certified mail, which is complete upon receipt, refusal, or return
116.24 for nondelivery to the most recent address provided to the board for the individual.
- 116.25 (d) At the time the board issues a temporary suspension order, the board shall schedule
116.26 a hearing, to be held before a group of its members designated by the board, that shall begin
116.27 within 60 days after issuance of the temporary suspension order or within 15 working days
116.28 of the date of the board's receipt of a request for a hearing from the individual, whichever
116.29 is sooner. The hearing shall be on the sole issue of whether there is a reasonable basis to
116.30 continue, modify, or lift the temporary suspension. A hearing under this paragraph is not
116.31 subject to chapter 14.
- 116.32 (e) Evidence presented by the board or the individual may be in the form of an affidavit.
116.33 The individual or the individual's designee may appear for oral argument.
- 117.1 (f) Within five working days of the hearing, the board shall issue its order and, if the
117.2 suspension is continued, notify the individual of the right to a contested case hearing under
117.3 chapter 14.
- 117.4 (g) If an individual requests a contested case hearing within 30 days after receiving
117.5 notice under paragraph (f), the board shall initiate a contested case hearing according to

117.6 chapter 14. The administrative law judge shall issue a report and recommendation within
117.7 30 days after the closing of the contested case hearing record. The board shall issue a final
117.8 order within 30 days after receipt of the administrative law judge's report.

117.9 Sec. 3. Minnesota Statutes 2020, section 144E.28, subdivision 1, is amended to read:

117.10 Subdivision 1. **Requirements.** To be eligible for certification by the board as an EMT,
117.11 AEMT, or paramedic, an individual shall:

117.12 (1) successfully complete the United States Department of Transportation course, or its
117.13 equivalent as approved by the board, specific to the EMT, AEMT, or paramedic classification;

117.14 (2) ~~pass the written and practical examinations approved by the board and administered~~
117.15 ~~by the board or its designee;~~ obtain National Registry of Emergency Medical Technicians
117.16 certification specific to the EMT, AEMT, or paramedic classification; and

117.17 (3) complete a board-approved application form.

117.18 Sec. 4. Minnesota Statutes 2020, section 144E.28, subdivision 3, is amended to read:

117.19 Subd. 3. **Reciprocity.** The board may certify an individual who possesses a current
117.20 National Registry of Emergency Medical Technicians ~~registration~~ certification from another
117.21 jurisdiction if the individual submits a board-approved application form. The board
117.22 certification classification shall be the same as the National Registry's classification.
117.23 Certification shall be for the duration of the applicant's ~~registration~~ certification period in
117.24 another jurisdiction, not to exceed two years.

117.25 Sec. 5. Minnesota Statutes 2020, section 144E.28, subdivision 7, is amended to read:

117.26 Subd. 7. **Renewal.** (a) Before the expiration date of certification, an applicant for renewal
117.27 of certification as an EMT shall:

117.28 (1) successfully complete a course in cardiopulmonary resuscitation that is approved by
117.29 the board or the licensee's medical director;

117.30 (2) ~~take the United States Department of Transportation EMT refresher course and~~
117.31 ~~successfully pass the practical skills test portion of the course, or successfully complete 48~~
118.1 ~~hours of continuing education in EMT programs that are consistent with the United States~~
118.2 ~~Department of Transportation National EMS Education Standards or its equivalent as~~
118.3 ~~approved by the board or as approved by the licensee's medical director and pass a practical~~
118.4 ~~skills test approved by the board and administered by an education program approved by~~
118.5 ~~the board. The cardiopulmonary resuscitation course and practical skills test may be included~~
118.6 ~~as part of the refresher course or continuing education renewal requirements; and~~ satisfy
118.7 one of the following requirements:

118.8 (i) maintain National Registry of Emergency Medical Technicians certification following
118.9 the requirements of the National Continued Competency Program, or its equivalent as

118.10 approved by the board. The cardiopulmonary resuscitation course required under clause (1)
118.11 shall count toward the continuing education requirements for renewal; or

118.12 (ii) for an individual who only holds Minnesota EMT certification and held the
118.13 certification prior to April 1, 2021, maintain Minnesota certification by completing the
118.14 required hours of continuing education as determined in the National Continued Competency
118.15 Program of the National Registry of Emergency Medical Technicians, or its equivalent as
118.16 approved by the board. The cardiopulmonary resuscitation course required under clause (1)
118.17 shall count toward the continuing education requirements for renewal. This item expires
118.18 April 1, 2036; and

118.19 (3) complete a board-approved application form.

118.20 (b) Before the expiration date of certification, an applicant for renewal of certification
118.21 as an AEMT or paramedic shall:

118.22 (1) for an AEMT, successfully complete a course in cardiopulmonary resuscitation that
118.23 is approved by the board or the licensee's medical director, and for a paramedic, successfully
118.24 complete a course in advanced cardiac life support that is approved by the board or the
118.25 licensee's medical director;

118.26 (2) ~~successfully complete 48 hours of continuing education in emergency medical training~~
118.27 ~~programs, appropriate to the level of the applicant's AEMT or paramedic certification, that~~
118.28 ~~are consistent with the United States Department of Transportation National EMS Education~~
118.29 ~~Standards or its equivalent as approved by the board or as approved by the licensee's medical~~
118.30 ~~director. An applicant may take the United States Department of Transportation Emergency~~
118.31 ~~Medical Technician refresher course or its equivalent without the written or practical test~~
118.32 ~~as approved by the board, and as appropriate to the applicant's level of certification, as part~~
118.33 ~~of the 48 hours of continuing education. Each hour of the refresher course, the~~
118.34 ~~cardiopulmonary resuscitation course, and the advanced cardiac life support course counts~~
119.1 ~~toward the 48-hour continuing education requirement; and satisfy one of the following~~
119.2 ~~requirements:~~

119.3 (i) maintain National Registry of Emergency Medical Technicians certification following
119.4 the requirements of the National Continued Competency Program, or its equivalent as
119.5 approved by the board. The cardiopulmonary resuscitation course or advanced cardiac life
119.6 support course required under clause (1) shall count toward the continuing education
119.7 requirements for renewal; or

119.8 (ii) for an individual who only holds Minnesota AEMT or paramedic certification and
119.9 held the certification prior to April 1, 2021, maintain Minnesota certification by completing
119.10 the required hours of continuing education as determined in the National Continued
119.11 Competency Program of the National Registry of Emergency Medical Technicians, or its
119.12 equivalent as approved by the board. The cardiopulmonary resuscitation course or advanced

- 119.13 cardiac life support course required under clause (1) shall count toward the continuing
119.14 education requirements for renewal. This item expires April 1, 2036; and
- 119.15 (3) complete a board-approved application form.
- 119.16 (c) Certification shall be renewed every two years.
- 119.17 (d) If the applicant does not meet the renewal requirements under this subdivision, the
119.18 applicant's certification expires.
- 119.19 Sec. 6. Minnesota Statutes 2020, section 144E.28, subdivision 8, is amended to read:
- 119.20 Subd. 8. **Reinstatement.** (a) Within ~~four~~ two years of a certification expiration date, a
119.21 person whose certification has expired under subdivision 7, paragraph (d), may have the
119.22 certification reinstated upon submission of:
- 119.23 (1) evidence to the board of training equivalent to the continuing education requirements
119.24 of subdivision 7; and
- 119.25 (2) a board-approved application form.
- 119.26 (b) If more than ~~four~~ two years have passed since a certificate expiration date, an applicant
119.27 must complete the initial certification process required under subdivision 1.
- 119.28 Sec. 7. Minnesota Statutes 2020, section 144E.283, is amended to read:
- 119.29 **144E.283 PRIMARY INSTRUCTOR QUALIFICATIONS.**
- 119.30 ~~(a)~~ An emergency medical technician education program primary instructor must:
- 120.1 (1) possess ~~valid~~ current Minnesota certification, registration, or licensure as one of the
120.2 following, at a level that is equivalent to or higher than the level of certification or registration
120.3 being taught:
- 120.4 (i) an EMR, EMT, AEMT, or paramedic;
- 120.5 (ii) a physician; with certification in adult or pediatric emergency medicine from the
120.6 American Board of Emergency Medicine or the American Board of Osteopathic Emergency
120.7 Medicine, with certification in an emergency medical services subspecialty, or serving as
120.8 a medical director of a licensed ambulance service;
- 120.9 (iii) a physician assistant; with experience in emergency medicine; or
- 120.10 (iv) a registered nurse with certification in adult or pediatric prehospital nursing from
120.11 (A) the Board of Certification for Emergency Nursing, including certified flight registered
120.12 nurse or certified transport registered nurse, or (B) the National Certification Corporation,
120.13 including certified in neonatal pediatric transport;
- 120.14 (2) ~~have two years of active emergency medical practical experience~~ if required under
120.15 this chapter for Minnesota certification or registration, possess National Registry of
120.16 Emergency Medical Technicians certification or registration as an EMR, EMT, AEMT, or

- 120.17 paramedic, at a level that is equivalent to or higher than the level of certification or
120.18 registration being taught;
- 120.19 (3) satisfy one of the following requirements:
- 120.20 (i) hold at least an associate's degree and have been certified for at least three years at a
120.21 level that is equivalent to or higher than the level of certification or registration being taught;
120.22 or
- 120.23 (ii) have been certified for at least five years at a level that is equivalent to or higher
120.24 than the level of certification or registration being taught;
- 120.25 ~~(3)~~ (4) be recommended by a medical director of a licensed hospital, ambulance service,
120.26 or education program approved by the board;
- 120.27 ~~(4)~~ (5) satisfy one of the following requirements:
- 120.28 (i) successfully complete the United States Department of Transportation Emergency
120.29 Medical Services Instructor Education Program or its equivalent as approved by the board
120.30 course; and
- 120.31 (ii) successfully complete the National Association of EMS Educators Instructor level
120.32 1 course;
- 121.1 (iii) successfully complete the Fire Instructor I course;
- 121.2 (iv) hold at least a bachelor's degree in education;
- 121.3 (v) hold at least a master's degree in a related field of study;
- 121.4 (vi) have been vetted through the Minnesota State faculty credentialing process; or
- 121.5 (vii) successfully complete an equivalent course or hold an equivalent degree as approved
121.6 by the board;
- 121.7 ~~(5)~~ (6) complete eight hours of continuing education in educational topics every two
121.8 years, with documentation filed with the education program coordinator;
- 121.9 (7) complete a board-approved application form; and
- 121.10 (8) receive board approval as a primary instructor.
- 121.11 ~~(b) An emergency medical responder instructor must possess valid registration,~~
121.12 ~~certification, or licensure as an EMR, EMT, AEMT, paramedic, physician, physician~~
121.13 ~~assistant, or registered nurse.~~
- 121.14 Sec. 8. Minnesota Statutes 2020, section 144E.285, subdivision 1, is amended to read:
- 121.15 Subdivision 1. **Approval required.** (a) All education programs for an EMR, EMT,
121.16 AEMT, or paramedic must be approved by the board.

- 121.17 (b) To be approved by the board, an education program must:
- 121.18 (1) submit an application prescribed by the board that includes:
- 121.19 (i) type ~~and length~~ of course to be offered;
- 121.20 (ii) names, addresses, and qualifications of the program medical director, program
- 121.21 education coordinator, and instructors;
- 121.22 ~~(iii) names and addresses of clinical sites, including a contact person and telephone~~
- 121.23 ~~number;~~
- 121.24 ~~(iv)~~ (iii) admission criteria for students; and
- 121.25 ~~(v)~~ (iv) materials and equipment to be used;
- 121.26 (2) for each course, implement the most current version of the United States Department
- 121.27 of Transportation EMS Education Standards, or its equivalent as determined by the board
- 121.28 applicable to EMR, EMT, AEMT, or paramedic education;
- 121.29 (3) have a program medical director and a program coordinator;
- 122.1 (4) utilize primary instructors who meet the requirements of section 144E.283 for teaching
- 122.2 at least 50 percent of the course content. The remaining 50 percent of the course may be
- 122.3 taught by guest lecturers approved by the education program coordinator or medical director;
- 122.4 ~~(5) have at least one instructor for every ten students at the practical skill stations;~~
- 122.5 ~~(6) maintain a written agreement with a licensed hospital or licensed ambulance service~~
- 122.6 ~~designating a clinical training site;~~
- 122.7 ~~(7)~~ (5) retain documentation of program approval by the board, course outline, and
- 122.8 student information;
- 122.9 ~~(8)~~ (6) notify the board of the starting date of a course prior to the beginning of a course;
- 122.10 and
- 122.11 ~~(9)~~ (7) submit the appropriate fee as required under section 144E.29; ~~and~~
- 122.12 ~~(10) maintain a minimum average yearly pass rate as set by the board on an annual basis.~~
- 122.13 ~~The pass rate will be determined by the percent of candidates who pass the exam on the~~
- 122.14 ~~first attempt. An education program not meeting this yearly standard shall be placed on~~
- 122.15 ~~probation and shall be on a performance improvement plan approved by the board until~~
- 122.16 ~~meeting the pass rate standard. While on probation, the education program may continue~~
- 122.17 ~~providing classes if meeting the terms of the performance improvement plan as determined~~
- 122.18 ~~by the board. If an education program having probation status fails to meet the pass rate~~
- 122.19 ~~standard after two years in which an EMT initial course has been taught, the board may~~
- 122.20 ~~take disciplinary action under subdivision 5.~~

122.21 Sec. 9. Minnesota Statutes 2020, section 144E.285, is amended by adding a subdivision
122.22 to read:

122.23 Subd. 1a. **EMR requirements.** The National EMS Education Standards established by
122.24 the NHTSA, United States Department of Transportation, specifies the minimum
122.25 requirements for knowledge and skills for emergency medical responders. A medical director
122.26 of an emergency medical responder education group may establish additional knowledge
122.27 and skill requirements for EMRs.

122.28 Sec. 10. Minnesota Statutes 2020, section 144E.285, is amended by adding a subdivision
122.29 to read:

122.30 Subd. 1b. **EMT requirements.** In addition to the requirements under subdivision 1,
122.31 paragraph (b), an education program applying for approval to teach EMTs must:

123.1 (1) in the application prescribed by the board, include names and addresses of clinical
123.2 sites, including a contact person and telephone number;

123.3 (2) maintain a written agreement with a licensed hospital or licensed ambulance service
123.4 designating a clinical training site; and

123.5 (3) maintain a minimum average yearly pass rate as set by the board. An education
123.6 program not meeting the standard in this subdivision shall be placed on probation and must
123.7 comply with a performance improvement plan approved by the board until the program
123.8 meets the pass-rate standard. While on probation, the education program may continue to
123.9 provide classes if the program meets the terms of the performance improvement plan, as
123.10 determined by the board. If an education program that is on probation status fails to meet
123.11 the pass-rate standard after two years in which an EMT initial course has been taught, the
123.12 board may take disciplinary action under subdivision 5.

123.13 Sec. 11. Minnesota Statutes 2020, section 144E.285, subdivision 2, is amended to read:

123.14 Subd. 2. **AEMT and paramedic requirements.** (a) In addition to the requirements
123.15 under subdivision 1, paragraph (b), an education program applying for approval to teach
123.16 AEMTs and paramedics must:

123.17 (1) be administered by an educational institution accredited by the Commission of
123.18 Accreditation of Allied Health Education Programs (CAAHEP);;

123.19 (2) in the application prescribed by the board, include names and addresses of clinical
123.20 sites, including a contact person and telephone number; and

123.21 (3) maintain a written agreement with a licensed hospital or licensed ambulance service
123.22 designating a clinical training site.

123.23 (b) An AEMT and paramedic education program that is administered by an educational
123.24 institution not accredited by CAAHEP, but that is in the process of completing the

123.25 accreditation process, may be granted provisional approval by the board upon verification
123.26 of submission of its self-study report and the appropriate review fee to CAAHEP.

123.27 (c) An educational institution that discontinues its participation in the accreditation
123.28 process must notify the board immediately and provisional approval shall be withdrawn.

123.29 ~~(d) This subdivision does not apply to a paramedic education program when the program~~
123.30 ~~is operated by an advanced life support ambulance service licensed by the Emergency~~
123.31 ~~Medical Services Regulatory Board under this chapter, and the ambulance service meets~~
123.32 ~~the following criteria:~~

124.1 ~~(1) covers a rural primary service area that does not contain a hospital within the primary~~
124.2 ~~service area or contains a hospital within the primary service area that has been designated~~
124.3 ~~as a critical access hospital under section 144.1483, clause (9);~~

124.4 ~~(2) has tax exempt status in accordance with the Internal Revenue Code, section~~
124.5 ~~501(c)(3);~~

124.6 ~~(3) received approval before 1991 from the commissioner of health to operate a paramedic~~
124.7 ~~education program;~~

124.8 ~~(4) operates an AEMT and paramedic education program exclusively to train paramedics~~
124.9 ~~for the local ambulance service; and~~

124.10 ~~(5) limits enrollment in the AEMT and paramedic program to five candidates per~~
124.11 ~~biennium.~~

124.12 Sec. 12. Minnesota Statutes 2020, section 144E.285, subdivision 4, is amended to read:

124.13 Subd. 4. **Reapproval.** An education program shall apply to the board for reapproval at
124.14 least three months prior to the expiration date of its approval and must:

124.15 (1) submit an application prescribed by the board specifying any changes from the
124.16 information provided for prior approval and any other information requested by the board
124.17 to clarify incomplete or ambiguous information presented in the application; ~~and~~

124.18 (2) comply with the requirements under subdivision 1, paragraph (b), clauses (2) to ~~(4)~~;
124.19 (7);

124.20 (3) be subject to a site visit;

124.21 (4) for education programs that teach EMTs, comply with the requirements in subdivision
124.22 1b; and

124.23 (5) for education programs that teach AEMTs and paramedics, comply with the
124.24 requirements in subdivision 2 and maintain accreditation with the CAAHEP.

278.6 Section 1. Minnesota Statutes 2020, section 148.90, subdivision 2, is amended to read:

278.7 Subd. 2. **Members.** (a) The members of the board shall:

- 278.8 (1) be appointed by the governor;
- 278.9 (2) be residents of the state;
- 278.10 (3) serve for not more than two consecutive terms;
- 278.11 (4) designate the officers of the board; and
- 278.12 (5) administer oaths pertaining to the business of the board.
- 278.13 (b) A public member of the board shall represent the public interest and shall not:
- 278.14 (1) be a psychologist or have engaged in the practice of psychology;
- 278.15 (2) be an applicant or former applicant for licensure;
- 278.16 (3) be a member of another health profession and be licensed by a health-related licensing
- 278.17 board as defined under section 214.01, subdivision 2; the commissioner of health; or licensed,
- 278.18 certified, or registered by another jurisdiction;
- 278.19 (4) be a member of a household that includes a psychologist; or
- 278.20 (5) have conflicts of interest or the appearance of conflicts with duties as a board member.
- 278.21 (c) At the time of their appointments, at least two members of the board must reside
- 278.22 outside of the seven-county metropolitan area.
- 278.23 (d) At the time of their appointments, at least two members of the board must be members
- 278.24 of:
- 278.25 (1) a community of color; or
- 278.26 (2) an underrepresented community, defined as a group that is not represented in the
- 278.27 majority with respect to race, ethnicity, national origin, sexual orientation, gender identity,
- 278.28 or physical ability.
- 279.1 Sec. 2. Minnesota Statutes 2020, section 148.911, is amended to read:
- 279.2 **148.911 CONTINUING EDUCATION.**
- 279.3 (a) Upon application for license renewal, a licensee shall provide the board with
- 279.4 satisfactory evidence that the licensee has completed continuing education requirements
- 279.5 established by the board. Continuing education programs shall be approved under section
- 279.6 148.905, subdivision 1, clause (10). The board shall establish by rule the number of
- 279.7 continuing education training hours required each year and may specify subject or skills
- 279.8 areas that the licensee shall address.
- 279.9 (b) At least four of the required continuing education hours must be on increasing the
- 279.10 knowledge, understanding, self-awareness, and practice skills to competently address the

- 279.11 psychological needs of individuals from diverse socioeconomic and cultural backgrounds.
- 279.12 Topics include but are not limited to:
- 279.13 (1) understanding culture, its functions, and strengths that exist in varied cultures;
- 279.14 (2) understanding clients' cultures and differences among and between cultural groups;
- 279.15 (3) understanding the nature of social diversity and oppression;
- 279.16 (4) understanding cultural humility; and
- 279.17 (5) understanding human diversity, meaning individual client differences that are
- 279.18 associated with the client's cultural group, including race, ethnicity, national origin, religious
- 279.19 affiliation, language, age, gender, gender identity, physical and mental capabilities, sexual
- 279.20 orientation, and socioeconomic status.
- 279.21 **EFFECTIVE DATE.** This section is effective July 1, 2023.

124.25 Sec. 13. Minnesota Statutes 2020, section 148.995, subdivision 2, is amended to read:

124.26 Subd. 2. **Certified doula.** "Certified doula" means an individual who has received a

124.27 certification to perform doula services from the International Childbirth Education

124.28 Association, the Doulas of North America (DONA), the Association of Labor Assistants

124.29 and Childbirth Educators (ALACE), Birthworks, the Childbirth and Postpartum Professional

124.30 Association (CAPPA), Childbirth International, the International Center for Traditional

125.1 Childbearing, ~~or~~ Commonsense Childbirth, Inc., Modern Doula Education (MDE), or an

125.2 organization designated by the commissioner under section 148.9965.

125.3 Sec. 14. Minnesota Statutes 2020, section 148.996, subdivision 2, is amended to read:

125.4 Subd. 2. **Qualifications.** The commissioner shall include on the registry any individual

125.5 who:

125.6 (1) submits an application on a form provided by the commissioner. The form must

125.7 include the applicant's name, address, and contact information;

125.8 (2) ~~maintains~~ submits evidence of maintaining a current certification from one of the

125.9 organizations listed in section 148.995, subdivision 2, or from an organization designated

125.10 by the commissioner under section 148.9965; and

125.11 (3) pays the fees required under section 148.997.

125.12 Sec. 15. Minnesota Statutes 2020, section 148.996, subdivision 4, is amended to read:

125.13 Subd. 4. **Renewal.** Inclusion on the registry maintained by the commissioner is valid

125.14 for three years, provided the doula meets the requirement in subdivision 2, clause (2), during

125.15 the entire period. At the end of the three-year period, the certified doula may submit a new

125.16 application to remain on the doula registry by meeting the requirements described in
125.17 subdivision 2.

125.18 Sec. 16. Minnesota Statutes 2020, section 148.996, is amended by adding a subdivision
125.19 to read:

125.20 **Subd. 6. Removal from registry.** (a) If the commissioner determines that a doula
125.21 included on the registry does not meet the requirement in subdivision 2, clause (2), the
125.22 commissioner shall notify the affected doula that the doula no longer meets the requirement
125.23 in subdivision 2, clause (2), specify steps the doula must take to maintain inclusion on the
125.24 registry, and specify the effect of failing to take such steps. The commissioner must provide
125.25 this notice by first class mail to the address on file with the commissioner for the affected
125.26 doula.

125.27 (b) Following the provision of notice under paragraph (a), the commissioner shall remove
125.28 from the registry any doula who no longer meets the requirement in subdivision 2, clause
125.29 (2), and who does not take the steps specified by the commissioner to maintain inclusion
125.30 on the registry.

126.1 Sec. 17. **[148.9965] DESIGNATION OF DOULA CERTIFICATION**
126.2 **ORGANIZATIONS BY COMMISSIONER.**

126.3 **Subdivision 1. Review and designation by commissioner.** The commissioner shall
126.4 periodically review the doula certification organizations listed in section 148.995, subdivision
126.5 2, or designated by the commissioner under this section. The commissioner may: (1)
126.6 designate additional organizations from which individuals, if maintaining current doula
126.7 certification from such an organization, are eligible for inclusion on the registry of certified
126.8 doulas; and (2) remove the designation of a doula certification organization previously
126.9 designated by the commissioner.

126.10 **Subd. 2. Designation.** A doula certification organization seeking designation under this
126.11 section shall provide the commissioner with evidence that the organization satisfies
126.12 designation criteria established by the commissioner. If the commissioner designates a doula
126.13 certification organization under this section, the commissioner shall provide notice of the
126.14 designation by publication in the State Register and on the Department of Health website
126.15 for the registry of certified doulas and shall specify the date after which a certification by
126.16 the organization authorizes a doula certified by the organization to be included on the
126.17 registry.

126.18 **Subd. 3. Removal of designation.** (a) The commissioner may remove the designation
126.19 of a doula certification organization previously designated by the commissioner under this
126.20 section upon a determination by the commissioner that the organization does not meet the
126.21 commissioner's criteria for designation. If the commissioner removes a designation, the
126.22 commissioner shall provide notice of the removal by publication in the State Register and

126.23 shall specify the date after which a certification by the organization no longer authorizes a
126.24 doula certified by the organization to be included on the registry.

126.25 (b) Following removal of a designation, the Department of Health website for the registry
126.26 of certified doulas shall be modified to reflect the removal.

279.22 Sec. 3. Minnesota Statutes 2020, section 148B.30, subdivision 1, is amended to read:

279.23 Subdivision 1. **Creation.** (a) There is created a Board of Marriage and Family Therapy
279.24 that consists of seven members appointed by the governor. Four members shall be licensed,
279.25 practicing marriage and family therapists, each of whom shall for at least five years
279.26 immediately preceding appointment, have been actively engaged as a marriage and family
279.27 therapist, rendering professional services in marriage and family therapy. One member shall
279.28 be engaged in the professional teaching and research of marriage and family therapy. Two
279.29 members shall be representatives of the general public who have no direct affiliation with
279.30 the practice of marriage and family therapy. All members shall have been a resident of the
279.31 state two years preceding their appointment. Of the first board members appointed, three
279.32 shall continue in office for two years, two members for three years, and two members,
280.1 including the chair, for terms of four years respectively. Their successors shall be appointed
280.2 for terms of four years each, except that a person chosen to fill a vacancy shall be appointed
280.3 only for the unexpired term of the board member whom the newly appointed member
280.4 succeeds. Upon the expiration of a board member's term of office, the board member shall
280.5 continue to serve until a successor is appointed and qualified.

280.6 (b) At the time of their appointments, at least two members must reside outside of the
280.7 seven-county metropolitan area.

280.8 (c) At the time of their appointments, at least two members must be members of:

280.9 (1) a community of color; or

280.10 (2) an underrepresented community, defined as a group that is not represented in the
280.11 majority with respect to race, ethnicity, national origin, sexual orientation, gender identity,
280.12 or physical ability.

280.13 Sec. 4. Minnesota Statutes 2020, section 148B.31, is amended to read:

280.14 **148B.31 DUTIES OF THE BOARD.**

280.15 (a) The board shall:

280.16 (1) adopt and enforce rules for marriage and family therapy licensing, which shall be
280.17 designed to protect the public;

280.18 (2) develop by rule appropriate techniques, including examinations and other methods,
280.19 for determining whether applicants and licensees are qualified under sections 148B.29 to
280.20 148B.392;

280.21 (3) issue licenses to individuals who are qualified under sections 148B.29 to 148B.392;

- 280.22 (4) establish and implement procedures designed to assure that licensed marriage and
280.23 family therapists will comply with the board's rules;
- 280.24 (5) study and investigate the practice of marriage and family therapy within the state in
280.25 order to improve the standards imposed for the licensing of marriage and family therapists
280.26 and to improve the procedures and methods used for enforcement of the board's standards;
- 280.27 (6) formulate and implement a code of ethics for all licensed marriage and family
280.28 therapists; and
- 280.29 (7) establish continuing education requirements for marriage and family therapists.
- 280.30 (b) At least four of the 40 continuing education training hours required under Minnesota
280.31 Rules, part 5300.0320, subpart 2, must be on increasing the knowledge, understanding,
281.1 self-awareness, and practice skills that enable a marriage and family therapist to serve clients
281.2 from diverse socioeconomic and cultural backgrounds. Topics include but are not limited
281.3 to:
- 281.4 (1) understanding culture, its functions, and strengths that exist in varied cultures;
- 281.5 (2) understanding clients' cultures and differences among and between cultural groups;
- 281.6 (3) understanding the nature of social diversity and oppression; and
- 281.7 (4) understanding cultural humility.
- 281.8 **EFFECTIVE DATE.** This section is effective July 1, 2023.
- 281.9 Sec. 5. Minnesota Statutes 2020, section 148B.51, is amended to read:
- 281.10 **148B.51 BOARD OF BEHAVIORAL HEALTH AND THERAPY.**
- 281.11 (a) The Board of Behavioral Health and Therapy consists of 13 members appointed by
281.12 the governor. Five of the members shall be professional counselors licensed or eligible for
281.13 licensure under sections 148B.50 to 148B.593. Five of the members shall be alcohol and
281.14 drug counselors licensed under chapter 148F. Three of the members shall be public members
281.15 as defined in section 214.02. The board shall annually elect from its membership a chair
281.16 and vice-chair. The board shall appoint and employ an executive director who is not a
281.17 member of the board. The employment of the executive director shall be subject to the terms
281.18 described in section 214.04, subdivision 2a. Chapter 214 applies to the Board of Behavioral
281.19 Health and Therapy unless superseded by sections 148B.50 to 148B.593.
- 281.20 (b) At the time of their appointments, at least three members must reside outside of the
281.21 seven-county metropolitan area.
- 281.22 (c) At the time of their appointments, at least three members must be members of:
- 281.23 (1) a community of color; or

281.24 (2) an underrepresented community, defined as a group that is not represented in the
281.25 majority with respect to race, ethnicity, national origin, sexual orientation, gender identity,
281.26 or physical ability.

281.27 Sec. 6. Minnesota Statutes 2020, section 148B.54, subdivision 2, is amended to read:

281.28 Subd. 2. **Continuing education.** (a) At the completion of the first four years of licensure,
281.29 a licensee must provide evidence satisfactory to the board of completion of 12 additional
281.30 postgraduate semester credit hours or its equivalent in counseling as determined by the
282.1 board, except that no licensee shall be required to show evidence of greater than 60 semester
282.2 hours or its equivalent. In addition to completing the requisite graduate coursework, each
282.3 licensee shall also complete in the first four years of licensure a minimum of 40 hours of
282.4 continuing education activities approved by the board under Minnesota Rules, part 2150.2540.
282.5 Graduate credit hours successfully completed in the first four years of licensure may be
282.6 applied to both the graduate credit requirement and to the requirement for 40 hours of
282.7 continuing education activities. A licensee may receive 15 continuing education hours per
282.8 semester credit hour or ten continuing education hours per quarter credit hour. Thereafter,
282.9 at the time of renewal, each licensee shall provide evidence satisfactory to the board that
282.10 the licensee has completed during each two-year period at least the equivalent of 40 clock
282.11 hours of professional postdegree continuing education in programs approved by the board
282.12 and continues to be qualified to practice under sections 148B.50 to 148B.593.

282.13 (b) At least four of the required 40 continuing education clock hours must be on increasing
282.14 the knowledge, understanding, self-awareness, and practice skills that enable a licensed
282.15 professional counselor and licensed professional clinical counselor to serve clients from
282.16 diverse socioeconomic and cultural backgrounds. Topics include but are not limited to:

282.17 (1) understanding culture, culture's functions, and strengths that exist in varied cultures;

282.18 (2) understanding clients' cultures and differences among and between cultural groups;

282.19 (3) understanding the nature of social diversity and oppression; and

282.20 (4) understanding cultural humility.

282.21 **EFFECTIVE DATE.** This section is effective July 1, 2023.

282.22 Sec. 7. Minnesota Statutes 2020, section 148E.010, is amended by adding a subdivision
282.23 to read:

282.24 Subd. 7f. **Cultural responsiveness.** "Cultural responsiveness" means increasing the
282.25 knowledge, understanding, self-awareness, and practice skills that enable a social worker
282.26 to serve clients from diverse socioeconomic and cultural backgrounds including:

282.27 (1) understanding culture, its functions, and strengths that exist in varied cultures;

282.28 (2) understanding clients' cultures and differences among and between cultural groups;

282.29 (3) understanding the nature of social diversity and oppression; and

282.30 (4) understanding cultural humility.

283.1 Sec. 8. Minnesota Statutes 2020, section 148E.130, subdivision 1, is amended to read:

283.2 Subdivision 1. **Total clock hours required.** (a) A licensee must complete 40 hours of
283.3 continuing education for each two-year renewal term. At the time of license renewal, a
283.4 licensee must provide evidence satisfactory to the board that the licensee has completed the
283.5 required continuing education hours during the previous renewal term. Of the total clock
283.6 hours required:

283.7 (1) all licensees must complete:

283.8 (i) two hours in social work ethics as defined in section 148E.010; and

283.9 (ii) four hours in cultural responsiveness;

283.10 (2) licensed independent clinical social workers must complete 12 clock hours in one
283.11 or more of the clinical content areas specified in section 148E.055, subdivision 5, paragraph
283.12 (a), clause (2);

283.13 (3) licensees providing licensing supervision according to sections 148E.100 to 148E.125,
283.14 must complete six clock hours in supervision as defined in section 148E.010; and

283.15 (4) no more than half of the required clock hours may be completed via continuing
283.16 education independent learning as defined in section 148E.010.

283.17 (b) If the licensee's renewal term is prorated to be less or more than 24 months, the total
283.18 number of required clock hours is prorated proportionately.

283.19 Sec. 9. Minnesota Statutes 2020, section 148E.130, is amended by adding a subdivision
283.20 to read:

283.21 Subd. 1b. **New content clock hours required effective July 1, 2021.** (a) The content
283.22 clock hours in subdivision 1, paragraph (a), clause (1), item (ii), apply to all new licenses
283.23 issued effective July 1, 2021, under section 148E.055.

283.24 (b) Any licensee issued a license prior to July 1, 2021, under section 148E.055 must
283.25 comply with the clock hours in subdivision 1, including the content clock hours in subdivision
283.26 1, paragraph (a), clause (1), item (ii), at the first two-year renewal term after July 1, 2021.

126.27 Sec. 18. Minnesota Statutes 2020, section 151.01, subdivision 29, is amended to read:

126.28 Subd. 29. ~~Legend Medical gas.~~ "Legend Medical gas" means ~~a liquid or gaseous~~

126.29 ~~substance used for medical purposes and that is required by federal law to be dispensed~~

- 126.30 ~~only pursuant to the prescription of a licensed practitioner~~ any gas or liquid manufactured
126.31 ~~or stored in a liquefied, nonliquefied, or cryogenic state that:~~
- 126.32 (1) has a chemical or physical action in or on the human body or animals or is used in
126.33 conjunction with medical gas equipment; and
- 127.1 (2) is intended to be used for the diagnosis, cure, mitigation, treatment, or prevention of
127.2 disease.
- 127.3 Sec. 19. Minnesota Statutes 2020, section 151.01, is amended by adding a subdivision to
127.4 read:
- 127.5 Subd. 29a. **Medical gas manufacturer.** "Medical gas manufacturer" means any person:
- 127.6 (1) originally manufacturing a medical gas by chemical reaction, physical separation,
127.7 compression of atmospheric air, purification, or other means;
- 127.8 (2) filling a medical gas into a dispensing container via gas to gas, liquid to gas, or liquid
127.9 to liquid processes;
- 127.10 (3) combining two or more medical gases into a container to form a medically appropriate
127.11 mixture; or
- 127.12 (4) filling a medical gas via liquid to liquid into a final use container at the point of use.
- 127.13 Sec. 20. Minnesota Statutes 2020, section 151.01, is amended by adding a subdivision to
127.14 read:
- 127.15 Subd. 29b. **Medical gas wholesaler.** "Medical gas wholesaler" means any person who
127.16 sells a medical gas to another business or entity for the purpose of reselling or providing
127.17 that medical gas to the ultimate consumer or patient.
- 127.18 Sec. 21. Minnesota Statutes 2020, section 151.01, is amended by adding a subdivision to
127.19 read:
- 127.20 Subd. 29c. **Medical gas dispenser.** "Medical gas dispenser" means any person, other
127.21 than a licensed practitioner or pharmacy, who sells or provides a medical gas directly to the
127.22 ultimate consumer or patient via a valid prescription.
- 127.23 Sec. 22. **[151.191] LICENSING MEDICAL GAS FACILITIES; FEES;**
127.24 **PROHIBITIONS.**
- 127.25 Subdivision 1. **Medical gas manufacturers; requirements.** (a) No person shall act as
127.26 a medical gas manufacturer without first obtaining a license from the board and paying any
127.27 applicable fee specified in section 151.065.
- 127.28 (b) Application for a medical gas manufacturer license under this section must be made
127.29 in a manner specified by the board.

128.1 (c) A license must not be issued or renewed for a medical gas manufacturer unless the
128.2 applicant agrees to operate in a manner prescribed by federal and state law and according
128.3 to Minnesota Rules.

128.4 (d) A license must not be issued or renewed for a medical gas manufacturer that is
128.5 required to be licensed or registered by the state in which it is physically located unless the
128.6 applicant supplies the board with proof of licensure or registration. The board may establish
128.7 standards for the licensure of a medical gas manufacturer that is not required to be licensed
128.8 or registered by the state in which it is physically located.

128.9 (e) The board must require a separate license for each facility located within the state at
128.10 which medical gas manufacturing occurs and for each facility located outside of the state
128.11 at which medical gases that are shipped into the state are manufactured.

128.12 (f) Prior to the issuance of an initial or renewed license for a medical gas manufacturing
128.13 facility, the board may require the facility to pass an inspection conducted by an authorized
128.14 representative of the board. In the case of a medical gas manufacturing facility located
128.15 outside of the state, the board may require the applicant to pay the cost of the inspection,
128.16 in addition to the license fee in section 151.065, unless the applicant furnishes the board
128.17 with a report, issued by the appropriate regulatory agency of the state in which the facility
128.18 is located, of an inspection that has occurred within the 24 months immediately preceding
128.19 receipt of the license application by the board. The board may deny licensure unless the
128.20 applicant submits documentation satisfactory to the board that any deficiencies noted in an
128.21 inspection report have been corrected.

128.22 (g) A duly licensed medical gas manufacturing facility may also wholesale or dispense
128.23 any medical gas that is manufactured by the licensed facility, or manufactured or wholesaled
128.24 by another properly licensed medical gas facility, without also obtaining a medical gas
128.25 wholesaler license or medical gas dispenser registration.

128.26 (h) The filling of a medical gas into a final use container, at the point of use and by liquid
128.27 to liquid transfer, is permitted as long as the facility used as the base of operations is duly
128.28 licensed as a medical gas manufacturer.

128.29 **Subd. 2. Medical gas wholesalers; requirements.** (a) No person shall act as a medical
128.30 gas wholesaler without first obtaining a license from the board and paying any applicable
128.31 fee specified in section 151.065.

128.32 (b) Application for a medical gas wholesaler license under this section must be made in
128.33 a manner specified by the board.

129.1 (c) A license must not be issued or renewed for a medical gas wholesaler unless the
129.2 applicant agrees to operate in a manner prescribed by federal and state law and according
129.3 to Minnesota Rules.

129.4 (d) A license must not be issued or renewed for a medical gas wholesaler that is required
129.5 to be licensed or registered by the state in which it is physically located unless the applicant

129.6 supplies the board with proof of licensure or registration. The board may establish standards
129.7 for the licensure of a medical gas wholesaler that is not required to be licensed or registered
129.8 by the state in which it is physically located.

129.9 (e) The board must require a separate license for each facility located within the state at
129.10 which medical gas wholesaling occurs and for each facility located outside of the state from
129.11 which medical gases that are shipped into the state are wholesaled.

129.12 (f) Prior to the issuance of an initial or renewed license for a medical gas wholesaling
129.13 facility, the board may require the facility to pass an inspection conducted by an authorized
129.14 representative of the board. In the case of a medical gas wholesaling facility located outside
129.15 of the state, the board may require the applicant to pay the cost of the inspection, in addition
129.16 to the license fee in section 151.065, unless the applicant furnishes the board with a report,
129.17 issued by the appropriate regulatory agency of the state in which the facility is located, of
129.18 an inspection that has occurred within the 24 months immediately preceding receipt of the
129.19 license application by the board. The board may deny licensure unless the applicant submits
129.20 documentation satisfactory to the board that any deficiencies noted in an inspection report
129.21 have been corrected.

129.22 (g) A duly licensed medical gas wholesaling facility may also dispense any medical gas
129.23 that is manufactured or wholesaled by another properly licensed medical gas facility.

129.24 Subd. 3. **Medical gas dispensers; requirements.** (a) A person or establishment not
129.25 licensed as a pharmacy, practitioner, medical gas manufacturer, or medical gas dispenser
129.26 must not engage in the dispensing of medical gases without first obtaining a registration
129.27 from the board and paying the applicable fee specified in section 151.065. The registration
129.28 must be displayed in a conspicuous place in the business for which it is issued and expires
129.29 on the date set by the board.

129.30 (b) Application for a medical gas dispenser registration under this section must be made
129.31 in a manner specified by the board.

129.32 (c) A registration must not be issued or renewed for a medical gas dispenser located
129.33 within the state unless the applicant agrees to operate in a manner prescribed by federal and
129.34 state law and according to the rules adopted by the board. A license must not be issued for
130.1 a medical gas dispenser located outside of the state unless the applicant agrees to operate
130.2 in a manner prescribed by federal law and, when dispensing medical gases for residents of
130.3 this state, the laws of this state and Minnesota Rules.

130.4 (d) A registration must not be issued or renewed for a medical gas dispenser that is
130.5 required to be licensed or registered by the state in which it is physically located unless the
130.6 applicant supplies the board with proof of the licensure or registration. The board may
130.7 establish standards for the registration of a medical gas dispenser that is not required to be
130.8 licensed or registered by the state in which it is physically located.

283.27 Sec. 10. Minnesota Statutes 2020, section 156.12, subdivision 2, is amended to read:

283.28 Subd. 2. **Authorized activities.** No provision of this chapter shall be construed to prohibit:

284.1 (a) a person from rendering necessary gratuitous assistance in the treatment of any animal
284.2 when the assistance does not amount to prescribing, testing for, or diagnosing, operating,
284.3 or vaccinating and when the attendance of a licensed veterinarian cannot be procured;

284.4 (b) a person who is a regular student in an accredited or approved college of veterinary
284.5 medicine from performing duties or actions assigned by instructors or preceptors or working
284.6 under the direct supervision of a licensed veterinarian;

284.7 (c) a veterinarian regularly licensed in another jurisdiction from consulting with a licensed
284.8 veterinarian in this state;

284.9 (d) the owner of an animal and the owner's regular employee from caring for and
284.10 administering to the animal belonging to the owner, except where the ownership of the
284.11 animal was transferred for purposes of circumventing this chapter;

284.12 (e) veterinarians who are in compliance with subdivision 6 and who are employed by
284.13 the University of Minnesota from performing their duties with the College of Veterinary
284.14 Medicine, College of Agriculture, Agricultural Experiment Station, Agricultural Extension
284.15 Service, Medical School, School of Public Health, or other unit within the university; or a
284.16 person from lecturing or giving instructions or demonstrations at the university or in
284.17 connection with a continuing education course or seminar to veterinarians or pathologists
284.18 at the University of Minnesota Veterinary Diagnostic Laboratory;

130.9 (e) The board must require a separate registration for each medical gas dispenser located
130.10 within the state and for each facility located outside of the state from which medical gases
130.11 are dispensed to residents of this state.

130.12 (f) Prior to the issuance of an initial or renewed registration for a medical gas dispenser,
130.13 the board may require the medical gas dispenser to pass an inspection conducted by an
130.14 authorized representative of the board. In the case of a medical gas dispenser located outside
130.15 of the state, the board may require the applicant to pay the cost of the inspection, in addition
130.16 to the license fee in section 151.065, unless the applicant furnishes the board with a report,
130.17 issued by the appropriate regulatory agency of the state in which the facility is located, of
130.18 an inspection that has occurred within the 24 months immediately preceding receipt of the
130.19 license application by the board. The board may deny licensure unless the applicant submits
130.20 documentation satisfactory to the board that any deficiencies noted in an inspection report
130.21 have been corrected.

130.22 (g) A facility holding a medical gas dispenser registration must not engage in the
130.23 manufacturing or wholesaling of medical gases, except that a medical gas dispenser may
130.24 transfer medical gases from one of its duly registered facilities to other duly registered
130.25 medical gas manufacturing, wholesaling, or dispensing facilities owned or operated by that
130.26 same company, without requiring a medical gas wholesaler license.

- 284.19 (f) any person from selling or applying any pesticide, insecticide or herbicide;
- 284.20 (g) any person from engaging in bona fide scientific research or investigations which
- 284.21 reasonably requires experimentation involving animals;
- 284.22 (h) any employee of a licensed veterinarian from performing duties other than diagnosis,
- 284.23 prescription or surgical correction under the direction and supervision of the veterinarian,
- 284.24 who shall be responsible for the performance of the employee;
- 284.25 (i) a graduate of a foreign college of veterinary medicine from working under the direct
- 284.26 personal instruction, control, or supervision of a veterinarian faculty member of the College
- 284.27 of Veterinary Medicine, University of Minnesota in order to complete the requirements
- 284.28 necessary to obtain an ECFVG or PAVE certificate;
- 284.29 (j) a licensed chiropractor registered under section 148.01, subdivision 1a, from practicing
- 284.30 animal chiropractic; or
- 284.31 (k) a person certified by the Emergency Medical Services Regulatory Board under
- 284.32 chapter 144E from providing emergency medical care to a police dog wounded in the line
- 284.33 of duty.
- 285.1 **Sec. 11. MENTAL HEALTH PROFESSIONAL LICENSING SUPERVISION.**
- 285.2 (a) The Board of Psychology, the Board of Marriage and Family Therapy, the Board of
- 285.3 Social Work, and the Board of Behavioral Health and Therapy must convene to develop
- 285.4 recommendations for:
- 285.5 (1) providing certification of individuals across multiple mental health professions who
- 285.6 may serve as supervisors;
- 285.7 (2) adopting a single, common supervision certificate for all mental health professional
- 285.8 education programs;
- 285.9 (3) determining ways for internship hours to be counted toward licensure in mental
- 285.10 health professions; and
- 285.11 (4) determining ways for practicum hours to count toward supervisory experience.
- 285.12 (b) No later than February 1, 2023, the commissioners must submit a written report to
- 285.13 the members of the legislative committees with jurisdiction over health and human services
- 285.14 on the recommendations developed under paragraph (a).

130.27 **Sec. 23. REVISOR INSTRUCTION.**

- 130.28 In Minnesota Statutes, the revisor of statutes shall recode as Minnesota Statutes, section
- 130.29 144E.28, subdivision 8a, the community emergency medical technician certification

130.30 requirements that are currently coded as Minnesota Statutes, section 144E.275, subdivision
130.31 7, and shall revise any necessary cross-references consistent with that recoding.

131.1 Sec. 24. **REPEALER.**

131.2 Minnesota Statutes 2020, sections 144E.27, subdivisions 1 and 1a; and 151.19,
131.3 subdivision 3, are repealed.