

State

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STATE OF
MINNESOTA

Register

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George T. Morrow, II,
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Office of the State Register

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Proposed Rulemaking

DEPARTMENT OF HEALTH

STATE BOARD OF HEALTH

PROPOSED RULES AMENDING AWARD PROCEDURES AND ESTABLISHING STANDARDS UNDER THE COMMUNITY HEALTH SERVICES ACT

Notice of Hearing

Notice is hereby given that a public hearing in the above-entitled matter will be held in the Board Room, Minnesota Health Department Building, 717 Delaware Street S.E., Minneapolis, Minnesota, on October 8, 1976, commencing at 9:30 A.M. and continuing until all interested persons have had an opportunity to be heard.

All interested or affected persons will have an opportunity to participate. Statements may be made orally and written materials may be submitted at hearing. In addition, written materials may be submitted by mail to the office of the Hearing Examiner, at Room 300, 1745 University Avenue, St. Paul, Minnesota 55104, (612)296-6910, either before the hearing or within 20 days after the close of the hearing.

The proposed rules, if adopted, would amend existing State Board of Health grant award procedures and establish subsidy award criteria. Additionally, standards would be established relative to personnel, reporting and participation requirements under the Community Health Services Act, Laws of 1976, ch. 9. Copies of the proposed rules are now available and one free copy may be obtained by writing to:

Mr. Robert W. Hiller
Room 244, Minnesota
Department of Health Building
717 Delaware Street S.E.
Minneapolis, Minnesota 55440

Additional copies will be available at the door on the date of the hearing.

The statutory authority of the Minnesota State Board of Health to promulgate the proposed rules is contained in Laws of 1976, ch. 9, § 8, subd. 1(c).

A "statement of need" explaining why the State Board

of Health feels the proposed rules are necessary will be filed with the Hearing Examiner's Office at least 25 days prior to the hearing and will be available there for public inspection.

Testimony or other evidence to be submitted for consideration should be pertinent to the matter at hand and may be presented either orally or in writing at the public hearing or by mailing a statement to Mr. Robert W. Hiller, Room 244, Minnesota Department of Health Building, 717 Delaware Street S.E., Minneapolis, Minnesota 55440. If the person submitting a statement cannot be present to read his statement at the time of the hearing, the statement will be entered into the record. For those wishing to submit written statements or exhibits, it is requested that at least three copies of such statement, exhibit or summary be furnished at the hearing. The record will remain open for receipt of briefs or other written material relative to the proposed rule for 20 days subsequent to the public hearing.

It is suggested that to save time and avoid duplication, those organizations or associations having a common viewpoint or interest in these proceedings join together where possible and present a single statement in behalf of such interests.

Also, please be advised that pursuant to Minn. Stat. § 10A.01, subd. 11 (1974) any individual engaged for pay or other consideration for the purpose of representing persons or associations attempting to influence administrative action, such as the promulgation of this rule, must register with the State Ethics Commission as a lobbyist within 5 days of the commencement of such activity by the individual.

Warren R. Lawson, M.D.
Secretary and Executive Officer

Rules as Proposed

MHD 451 Purpose, scope, and definitions.

A. Purpose of rules. The purpose of these rules is

to establish a process for allocating federal and state funds in the form of grants and subsidies to assist in establishing and maintaining community health services.

B. Scope of rules.

1. [The Board administers a number of grant programs. Some programs are governed by separate procedural rules.] These rules [are intended to] apply generally to all grants and subsidies awarded by the Board which are not governed by other specific procedural rules [for specific grant programs].

2. The monies available for the grant and subsidy awards governed by these rules come from both state and federal sources. These rules, therefore, do not prescribe the exclusive procedures and requirements applicable to grants and subsidies governed by them, but [instead] are in addition to any procedures and requirements specified in the enabling and authorizing laws establishing subsidies and [the] grants programs, [and appropriating the money thereto,] as well as any other applicable rules.

C. Type of [grants] funds. [Grants] Funds shall be available for the following purposes:

1. Planning grants for the development of a community health service agency or system.

2. Demonstration grants of the appropriateness, effectiveness, or feasibility of [developing] a [new] community health service, or for the integration of existing community health services.

3. Special projects grants [support of projects] for the delivery of community health services to specified target populations.

4. Community health services subsidies for the delivery of community health services.

[(d) Eligibility for grants. Public funds in the form of grants are available to governmental and nonprofit agencies, institutions, and organizations for purposes described herein.]

D. Definition of terms. The following terms used in these rules shall have the meanings given them:

1. "Act" means the Minnesota Community Health Services Act of 1976, Laws of 1976, ch. 9.

2. "Activity" means public health/community health services [the tasks] described in the grant or subsidy application and approved by the Board for fiscal support.

[(2) "Applicant" means the governmental or nonprofit private agency, institution, or organization which seeks and requests a grant award from the Board.]

3. "Application" means a written request for funds

[a grant award] submitted by the applicant on forms provided by the Board pursuant to these rules and applicable statutes.

4. "Award" means the authorization by the Board for an applicant [to a grantee] to receive and expend grant or subsidy [public] funds for an activity.

5. "Board" means the State Board of Health and includes the Commissioner of Health and the Minnesota Department of Health. These rules shall be administered by the Commissioner of Health, who is the Secretary and Executive Officer of the Board.

6. "Community Health Services" means those services designed to protect and improve the people's health within a geographically defined community by emphasizing services to prevent illness, disease, and disability, by promoting effective coordination and use of community resources, and by extending health services into the community. These services include community nursing services, home health services, disease prevention and control services, family planning services, nutritional services, dental public health services, emergency medical services, health education, and environmental health services.

7. "Consumer" means a person who is not a licensed or credentialed health professional or the spouse of such person, a person who does not have a material financial interest in the provision of professional health services, and a person who is not directly related to health services planning and development, except as a consumer member of health-related boards.

8. "Fiscal Management Officer" means the chief fiscal officer for the recipient of funds [of the grantee] who has primary responsibility and [for the] accountability for expenditure of and reporting on grant and subsidy funds.

[(8) "Grantee" means that agency, institution, or organization which has received a grant award.]

9. "Fiscal Year" for subsidies to a local board of health means January 1 through December 31. The fiscal year for grants may differ dependent upon funding source requirements.

10. "Key Administrative Personnel" means those persons functioning under an approved community health services plan, including:

- a. the community health services administrator,
- b. the nursing director,

KEY: New rules and both proposed and adopted additions to existing rules are printed in boldface. Proposed and adopted deletions from existing rules are printed in [single brackets]. Underlining indicates additions from proposed to adopted rules, while [[double brackets]] indicate deletions from proposed to adopted rules. Existing rules are printed in standard type face.

- c. the home health services director,
- d. the disease prevention and control director,
- e. the emergency medical services director,
- f. the health education director, and
- g. the environmental health services director.

11. "Local Agency" means a nonprofit institution or organization or a general purpose subdivision of state government or combinations thereof authorized under joint powers agreement.

12. "Local Government Officials" means members of a board of county commissioners, or a city council, or a township board, or a school board, or other such officials who have responsibility for decision making concerning health and related human services.

13. "Local Match" means the local agency's [grantee] share of the cost of activities funded by grants and which share complies with the eligibility requirements of the funding source. [the funded activity.]

14. "Local Participation" means those funds expended by a general purpose subdivision of state government or combinations thereof authorized under a joint powers agreement to support community health services, which are identified in the community health services plan and which qualify for subsidy, including funds derived from tax levies, gifts, fees for services, revenues from contracts, and federal general revenue sharing funds.

15. "Notice of Availability" means a written announcement by [of] the Board noting the availability of [grant] funds.

16. "Project Director" means the person [official of the grantee] responsible for [the] administration of [the grant] a funded activity.

17. "Provider" means any individual who is a licensed or credentialed health professional; an employee or representative of a licensed or certified health care institution or agency, health care insurer, or health professional school; or a person with a material financial interest in the provision of health services.

MHD 452. Availability of [Grant] Funds and Application Process.

A. Notice of availability. The Board shall mail a notice of availability of grant and subsidy funds to interested parties and local agencies who have requested the Board in writing to be so notified. The notice of availability [of grant funds] shall include at least the following information:

1. Specific purposes for which funds are available.

2. The [date and] format of the notice of intent to apply for [a grant award] funds.

3. [When applications shall be submitted to the Board.] The final dates for submission of notice of intent and for submission of applications.

4. The expected timetable for review of applications by the Board.

5. Regional review requirements.

B. Notice of intent. Interested parties shall notify the Board in writing of intent to apply for funds in accordance with the timetables [schedule] and format specified in the Board's notice of availability [of grant funds].

C. Provision of application forms. Upon receipt of the notice of intent, the Board shall transmit application forms and instructions to the agency, institution, or organization submitting the notice of intent.

D. Submission of application. Applications shall be submitted to the Board no later than the date specified in the notice of availability. Information addressed in the application shall include, but not be limited to the following items: [noted below. The Board may request the submission of additional information consistent with these rules and any applicable legislation as well as information necessary to clarify matters already contained in the application. Such request shall be for the sole purpose of enabling the Board to fairly, adequately and completely evaluate the application to determine whether a grant should be awarded.]

1. Name and address of the applicant.

2. Names of the project director and the fiscal management officer who will be responsible for the activity for which funding [a grant award] is sought.

3. [An activity description including at least the following:] Identification of the significant community health services needs of the community and a description of the way the proposed activity will affect these needs, including:

- a. Statement of the community health problem[(s)] to which the activity is addressed.

- b. Statement of goal(s)[.] of the activity.

- c. Objective(s) to be accomplished by the activity.

- d. Methods by which each objective will be achieved.

- e. Evaluation criteria to be used for periodic assessment of the activity.

- f. Completed budget and budget justification.

g. Identification of local match and/or local participation.

h. Original signature on face sheet and budget form.

[(4) Identification of the significant health-related needs of the community along with an explanation of the way the proposed activity will affect these needs.]

4. Assurances of compliance with applicable state and federal laws pertaining to the administration of [grants.] funds, and where applicable, documentation of approval by the county board(s) or city council(s) of the proposed community health services plan.

5. The community health services plan submitted to the Board for fiscal year 1977 may be for funding for any remaining portion of fiscal year 1977. Thereafter, the annual community health services plan shall be submitted to the Board no later than August 15 of each year for funding for the following fiscal year.

E. Additional information To enable the Board to make an adequate evaluation, the Board may request the submission of additional information consistent with these rules and any applicable statutes. The Board may refuse to award a grant or subsidy for failure of the applicant to submit requested additional information.

MHD 453 Review and disposition of applications [OF APPLICATION AND DISPOSITION THERE-OF].

A. Regional review. The applicant shall submit one copy of the completed application form to the Board by the date specified in the notice of availability and **concurrently to the** [to each of the health systems agencies and] regional development commission(s) for [in] the area[s] in which the funded activity will take place. [Their findings shall be submitted to the Board in accordance with the time schedule specified in the notice of availability.] **Such regional development commissions shall review and comment on the proposed community health service plans within 40 days after receipt, and shall review and comment on grant applications within 20 days after receipt. In addition, one copy of the completed application form shall be submitted to the appropriate health systems agencies for review and comment, or approval as appropriate. Any comments of the health systems agencies shall be submitted to the Board in accordance with the time schedule specified immediately above for regional development commissions.**

B. Board review.

KEY: New rules and both proposed and adopted additions to existing rules are printed in **boldface**. Proposed and adopted deletions from existing rules are printed in [single brackets]. Underlining indicates additions from proposed to adopted rules, while [[double brackets]] indicate deletions from proposed to adopted rules. Existing rules are printed in standard type face.

1. The Board shall review all applications in accordance with the time schedule specified in the notice of availability.

2. The Board shall give consideration to the following criteria in determining which activities shall receive [an award] funds:

a. Eligibility. A determination that all legal conditions of eligibility are established. In the case of special grants authorized under Section 12, Subdivisions 1. and 2. of the Act, the following conditions shall apply:

(1) Migrant agricultural workers shall include only those persons and their families whose principal occupation is or has been in agriculture on a seasonal basis during the preceding twelve month period, and who are required to establish a temporary place of abode for the purpose of such employment.

(2) Native Americans without an established county of residence shall include only persons not residing on Indian land who are members of an organized tribe, band or other group of aboriginal people of the United States, having a treaty relationship with the federal government and who are regarded as Native Americans by the group in which they claim membership.

b. Limitation of funds. The amount of funding available for a specific type of grant[.] or subsidy.

c. Probable effectiveness. Evidence that the proposed activity will positively affect identified community health problems in a cost effective manner.

d. Community support. Evidence of coordinated planning and of community support, including the **availability** [level] of local match **and/or local participation** [available] for the proposed activity.

[(dd) Past performance. The extent to which the grantee has met the goals and objectives of any activity previously funded by the Board.]

e. Equity. Equitable distribution of [grant] funds throughout the state.

f. Regional review. The findings submitted by the regional review agencies.

g. Quality of the application. Clarity, specificity, and completeness of the application.

C. Disposition.

1. The Board shall inform each applicant in writ-

ing that one of the following actions has been taken with respect to its application.

a. Approval of application as submitted. [and justification thereof.]

b. Approval of application with modifications. [and justification thereof.]

c. Conditional disapproval due to inadequate funds. **Such** [These] applications shall be held by the Board pending availability of additional funds.

d. Disapproval of application with justification.

2. The Board's notice of award shall specify the amount of the award, source of funds, duration of the funding period, and such conditions as are necessary for assuring the appropriate use of public funds.

MHD 454 [Grant] Administration.

A. [Grant] Monitoring. [The Board shall designate] **A** member of the Department of Health staff **will be designated** to act as monitor for each grant or subsidy awarded. The person designated shall provide or arrange for technical assistance and shall [to the grantee and] monitor progress toward the goals and objectives of the activity.

B. [Grantee] **Local agency** responsibilities. The **local agency**, [grantee shall] in addition to fulfilling the goals and objectives of the activity, shall:

1. Comply with the terms and conditions of the [grant] **Board's award notice** and with the requirements of these rules and other applicable [legislation] **laws and rules and regulations.**

2. Maintain such records, including **program and** accounting records, as are necessary to make the required reports and to permit assessment of the activity by the Board.

3. Provide access [to the Board] to records relating to the funded activity.

4. Provide progress reports in accordance with a schedule [established by the Board.] **specified in the award notification.**

5. Assure that:

a. The treasurer or an official exercising similar functions [for the grantee] shall receive and provide for the custody of all funds paid [to the grantee] by the Board.

b. **All local funds that are expended by the agency used to match a directly-awarded federal grant are reported on the budget/expenditure form.**

[(bb) The local match reported is used only to match the specific grant award and not any other grant

awarded by the Board or any other state or federal source.]

c. **The local funds identified as local match and/or local participation are used solely to match the specific grant or subsidy awarded by the Board.**

d. [Grant] Funds are used solely for the purpose **authorized** [outlined] in the [grant] award.

e. Accounting records are supported by source documents.

f. Audits are conducted to determine at a minimum the fiscal integrity of financial transactions and reports.

C. [Grantee] Disqualification. The Board may withhold or terminate funding [to the grantee] for failure to comply with the terms of the **award**, [grant,] with the requirements of [the] **applicable** rules or [applicable legislation,] **statutes**, or for other just cause. The Board may require reimbursement of unauthorized expenditures identified by fiscal audit.

MHD 455 Special rules authorized by Laws of 1976, ch. 9.

A. **Personnel.** MHD 455A. establishes minimum standards for the training, credentialing and experience requirements for key administrative personnel under Section 8 of the Act, except that this rule shall not apply to employees of agencies having a personnel system approved by the United States Civil Service Commission.

1. **Except for the community health services administrator, this rule applies only when the local agency has the specific services program as a distinct organizational component. A person may perform more than one key administrative role.**

2. **Key administrative personnel shall have documented experience that includes skills necessary to:**

a. **Prepare and manage budgets.**

b. **Manage a planning process for the delivery of services.**

c. **Prepare necessary reports.**

d. **Evaluate programs for efficiency and effectiveness.**

e. **Coordinate the delivery of community health services with other public and private services.**

f. **Advise and assist the local board of health in the selection, direction, and motivation of personnel.**

3. **Incumbent key administrative personnel shall have until January 1, 1980, to meet the minimum training, credentialing, and experience standards.**

4. Minimum standards for key administrative personnel positions are as follows:

a. Community health services administrator. Academic preparation in administration, public health, or a related field and two years of documented experience in an administrative or supervisory capacity.

b. Community nursing director. Minnesota certification as a public health nurse and two years of documented experience in nursing, preferably in public health and in an administrative or supervisory capacity.

c. Home health services director. Licensure to practice as a registered nurse in Minnesota, preferably meeting certification standards for public health nursing, and two years of experience in nursing involving supervisory or administrative responsibilities.

d. Disease prevention and control director. Baccalaureate degree in physical or biological sciences and one year of experience in disease prevention and control methods; or two years of documented experience in an administrative or supervisory position in a disease prevention and control program.

e. Emergency medical services director. Two years of documented experience in an administrative or supervisory position in a health-related program and training and/or experience in emergency medical services.

f. Health education director. Baccalaureate degree and one year of experience in relevant fields; or two years of documented experience in an administrative or supervisory capacity in a health education program.

g. Environmental health director. Baccalaureate degree in physical or biological sciences and two years of experience relevant to the environmental health program operated by the local board of health; or six years of experience in a technical or professional capacity relevant to the environmental health program operated by the local board of health. A masters degree in the environmental health sciences or as much as two academic years of post-secondary environmental health course work may be substituted for up to two years of experience provided that, in any case, the environmental health director shall have at least one year of experience.

B. Uniform reports. The recipient of a subsidy award shall furnish uniform reports to the Board as follows:

1. Reports of expenditures shall be filed on forms provided by the Board no later than 45 days following the close of each quarter of the fiscal year.

2. Annual reports of evaluations of activities shall be submitted no later than 90 days following the close of the fiscal year. This will constitute compliance with the requirements of Section 10, Subdivision 1(e) of the Act. Reports of evaluation of the activities conducted under the annual community health services plan shall be submitted in accordance with the instructions and on forms provided by the Board and shall include at least the following:

a. An analysis of the results including statistical data for each of the activities included in the annual community health services plan using the evaluation criteria specified in the plan.

b. A narrative identification and description of efforts made toward improved coordination and integration of activities conducted by the local board of health with other organizations, agencies, and groups providing similar or related services in the area.

c. A summary expenditure report including the amount of local match or local participation.

d. Statistical data to comply with federal requirements.

C. Community participation process.

1. The community health services plan shall be developed with full community participation. Such participation shall include the following:

a. Written notice shall be made to interested persons, including affected providers, consumers, and local government officials, of the initiation of a local community health services plan development process. Such notice shall include the procedures by which persons may participate in that process, and notification of dates, times and location of meetings or hearings at which persons shall be given the opportunity to express their views.

b. A general roster shall be developed and maintained for mailings of materials relating to community health services plan development, implementation, or major revision.

c. A public meeting at which interested persons shall have the opportunity to comment on the proposed plan shall be held annually at least 15 days prior to approval by the county board(s) of a proposed community health services plan. A summary of the plan shall be made available to interested persons at least two weeks prior to this meeting. A complete copy of the proposed plan shall be available for public review at a designated place.

KEY: New rules and both proposed and adopted additions to existing rules are printed in boldface. Proposed and adopted deletions from existing rules are printed in [single brackets]. Underlining indicates additions from proposed to adopted rules, while [[double brackets]] indicate deletions from proposed to adopted rules. Existing rules are printed in standard type face.

d. A summary of the approved community health services plan shall be distributed to interested persons and a copy of the approved community health services plan and periodic progress reports shall be made available for public review at a designated place.

2. Advisory committee.

a. **Interim planning committee.** When a county board(s) or city council(s) initiates a planning process for the development of a community health services plan, and until a local board of health is formally established, an interim planning committee shall be appointed by the county board(s) or city council(s) to assist in the development of the community health services plan. The committee shall function in a manner identical to that specified for the community health services advisory committee in Section 3, Subdivision 3 of the Act. Nominations for appointments to the interim planning committee shall be solicited from affected and interested community provider and consumer organizations and/or constituencies. Appointments to the interim planning committee shall be broadly representative of the community. The interim planning committee shall elect officers and may establish special study groups and task forces which may include persons

other than members of the interim planning committee. All meetings of the interim planning committee shall be public and minutes of meetings and records of attendance shall be maintained and transmitted to the county board(s), or city council(s) as appropriate. Staff to assist the committee and task forces shall be furnished by the county board(s) or city council(s).

b. **Advisory committee.** The advisory committee required by Section 3, Subdivision 3, of the Act to be established upon the formation of the local board of health shall be selected by the participating county board(s) or city council(s) from nominations solicited from interested and affected organizations, community groups and/or constituencies. The advisory committee may at its discretion organize special study groups and task forces which may include persons other than members of the advisory committee. All meetings and records of the advisory committee and of study groups and task forces established by it shall be public and minutes of meetings and records of attendance shall be maintained and transmitted to the local board of health. Staff support to the advisory committee shall be provided by the local board of health.

MHD 456-460. Reserved for future use.

Official Notices

DEPARTMENT OF HIGHWAYS

ADMINISTRATION DIVISION

Reproduction of Governor's Executive Order and Commissioner of Highways' Order Regarding 55 Miles Per Hour Speed Limit

EXECUTIVE ORDER NO. 78

Directing the Commissioner of Highways to Lower the Speed Limit to 55 Miles Per Hour

I, Wendell R. Anderson, Governor of the State of Minnesota, by virtue of the authority vested in me by the Constitution and applicable Statutes, hereby issue this Executive Order:

WHEREAS, the Minnesota Legislature, Laws of 1974, ch. 79 (S.F. 2644), has determined that there is a fuel shortage in this state; and that by reason of the fuel shortage, it may be necessary to reduce highway vehicular speeds to conserve fuel; and,

WHEREAS, after consideration of available information and after consultation with federal and state officials, I have concluded it necessary to reduce highway speeds, so to conserve fuel, to a maximum allowable speed of 55 miles per hour for all vehicles using the highways of this state;

NOW, THEREFORE, I order that, pursuant to Laws of 1974, ch. 79 and other applicable Statutes, the Commissioner of Highways issue an order, effective 12:01 a.m. on Sunday, March 3, 1974, designating 55 miles per hour as the maximum allowable speed for vehicles using the highways of this state.

This Executive Order is effective March 1, 1974.

IN TESTIMONY THEREOF, I hereunto set my hand on this first day of March, 1974.

Wendell R. Anderson

I, JOAN ANDERSON GROWE, Secretary of State of the State of Minnesota, do hereby certify that the annexed is a full, true and correct copy of Executive Order No. 78 by Governor Wendell R. Anderson Directing the Commissioner of Highways to lower the speed limit to 55 miles per hour, as filed in this office on March 1, 1974 under Official Document #26544.

COMMISSIONER'S ORDER NO. 54539

Pursuant to authority vested in me, and as provided in Laws of 1974, ch. 79, effective March 3, 1974.

I hereby designate the maximum allowable speed of vehicles using the streets and highways of the State of Minnesota to be 55 miles per hour during all hours of the day and night.

Any speed limits which have been authorized and established under the provisions of Minn. Stat. § 169.14 subd. 4 and 5 which are in excess of the Maximum Speed Limit of 55 mph herein established are suspended during the period of time in which this order is in effect.

Dated March 1, 1974

Ray Lappegaard
Commissioner of Highways

I, JOAN ANDERSON GROWE, Secretary of State of the State of Minnesota, do hereby certify that the annexed is a full, true and correct copy of Commissioner of Highways Order No. 54539 re Maximum Speed Limit of 55 mph, as filed in this office on March 2, 1974 under Official Document File No. 26536.

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OFFICE OF THE STATE REGISTER
95 Sherburne, Suite 203
St. Paul, Minnesota 55103

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St. Paul, Minnesota 55155

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