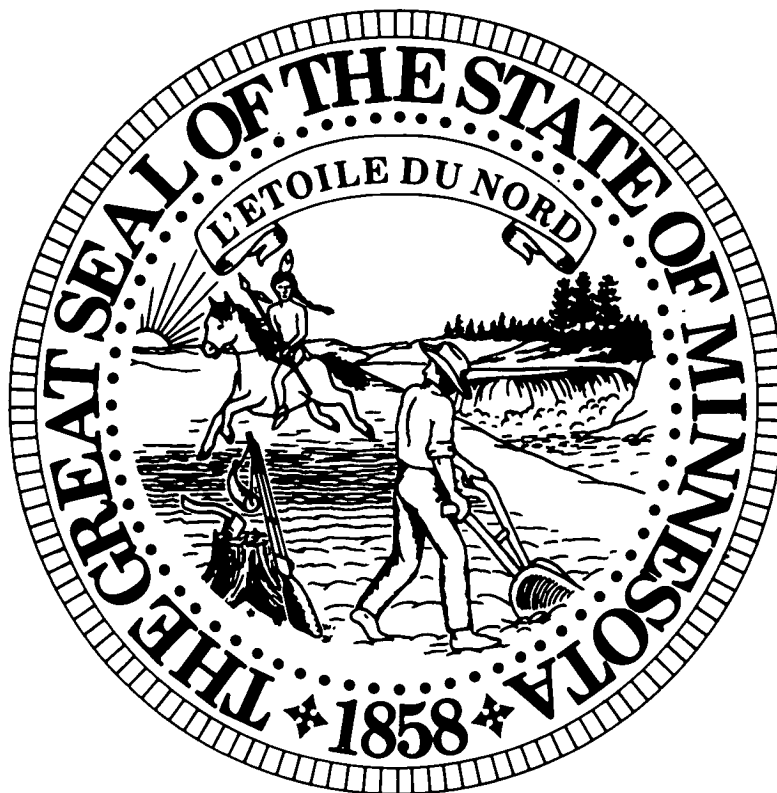


P182

4

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The *State Register* is the official publication of the State of Minnesota, containing executive and commissioners' orders, proposed and adopted rules, official and revenue notices, professional, technical and consulting contracts, non-state bids and public contracts, and grants.

A *Contracts Supplement* is published Tuesday, Wednesday and Friday and contains bids and proposals, including printing bids.

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22	Monday 29 November	Monday 15 November	Friday 19 November
23	Monday 6 December	Monday 22 November	Monday 29 November
24	Monday 13 December	Monday 29 November	Monday 6 December

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Department of Administration

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612/297-7963

FOR LEGISLATIVE NEWS

Publications containing news and information from the Minnesota Senate and House of Representatives are available free to concerned citizens and the news media. To be placed on the mailing list, write or call the offices listed below:

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Briefly-Preview—Senate news and committee calendar; published weekly during legislative sessions.

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Contact: Senate Public Information Office
Room 231 State Capitol, St. Paul, MN 55155
(612) 296-0504

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Session Weekly—House committees, committee assignments of individual representatives; news on committee meetings and action. House action and bill introductions

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Session Summary—Summarizes all bills that both the Minnesota House of Representatives and Minnesota Senate passed during their regular and special sessions.

Contact: House Information Office
Room 175 State Office Building, St. Paul, MN 55155
(612)) 296-2146

Minnesota Rules: Amendments & Additions

Issues #14-21 inclusive (Issues #1-13 appeared in #13)..... 1364

Proposed Rules

Veterans Homes Board

Veterans homes..... 1366

Adopted Rules

Labor and Industry Department

Workers' compensation; independent contractors..... 1379

Independent medical examination fees..... 1379

Managed care..... 1379

Revenue Notices

Revenue Department

Revenue Notice #93-24; corporate franchise tax - royalties, fees and other like income..... 1383

Official Notices

Community College System

Notice of surplus property at Worthington Community College..... 1384

Labor and Industry Department

Prevailing wage certifications for commercial construction projects..... 1384

Prevailing wage certifications..... 1384

Minnesota Comprehensive Health Association

Meeting notice for ad hoc committee on strategic planning.. 1385

Minnesota Early Childhood Care and Education Council

Meeting notice of the Council's Licensing Task Force..... 1385

Pollution Control Agency

Opinions sought regarding proposed amendment to rule governing water quality permit fees..... 1385

Opinions sought regarding proposed amendments governing management of used oil and related wastes..... 1385

Public Employees Retirement Association

Meeting notice..... 1386

Transportation Department

Opinions sought on the 1993 Minnesota State Rail Plan..... 1386

State Grants

Pollution Control Agency

Grant funds available for management of solid waste..... 1387

Trade and Economic Development Department

Proposals sought for operation of a Small Business Development Center in the Mankato area 1388

Professional, Technical and Consulting Contracts

Corrections Department

Proposals sought for psychiatric services 1389

Higher Education Coordinating Board

Proposals sought to conduct survey on planning for education and careers..... 1389

Human Services Department

Proposals sought for study of options for determining eligibility for the Medical Assistance Program 1390

Proposals sought to evaluate demonstration projects relating to outcome based service delivery 1392

State Designer Selection Board

Proposals sought for a Veterans Homes Board project 1393

Transportation Department

Proposals sought for services: public relations, advertising, and marketing research 1395

Non-State Bids and Public Contracts

Metropolitan Waste Control Commission

Letters of interest sought for engineering consultant services..... 1396

Minnesota Historical Society

Proposals sought for engineering services..... 1396

Awards of State Contracts & Advertised bids

Commodities and requisitions are advertised in the *State Register Contracts Supplement* published every Tuesday, Wednesday and Friday. For subscription information call 612/297-7963.

Commodity award results are available through the **Materials Management Helpline** 612/296-2600.

Minnesota Rules: Amendments and Additions

NOTICE: How to Follow State Agency Rulemaking in the *State Register*

The *State Register* is the official source, and only complete listing, for all state agency rulemaking in its various stages. State agencies are required to publish notice of their rulemaking action in the *State Register*. Published every Monday, the *State Register* makes it easy to follow and participate in the important rulemaking process. Approximately 75 state agencies have the authority to issue rules. Each agency is assigned specific *Minnesota Rule* chapter numbers. Every odd-numbered year the *Minnesota Rules* are published. This is a ten-volume bound collection of all adopted rules in effect at the time. Supplements are published to update this set of rules. Proposed and adopted emergency rules do not appear in this set because of their short-term nature, but are published in the *State Register*.

If an agency seeks outside opinion before issuing new rules or rule amendments, it must publish a NOTICE OF INTENT TO SOLICIT OUTSIDE OPINION in the *Official Notices* section of the *State Register*. When rules are first drafted, state agencies publish them as **Proposed Rules**, along with a notice of hearing, or notice of intent to adopt rules without a hearing in the case of noncontroversial rules. This notice asks for comment on the rules as proposed. Proposed emergency rules and withdrawn proposed rules are also published in the *State Register*. After proposed rules have gone through the comment period, and have been rewritten into their final form, they again appear in the *State Register* as **Adopted Rules**. These final adopted rules are not printed in their entirety in the *State Register*, only the changes made since their publication as Proposed Rules. To see the full rule, as adopted and in effect, a person simply needs two issues of the *State Register*, the issue the rule appeared in as proposed, and later as adopted. For a more detailed description of the rulemaking process, see the *Minnesota Guidebook to State Agency Services*.

The *State Register* features partial and cumulative listings of rules in this section on the following schedule: issues 1-13 inclusive; issues 14-25 inclusive; issue 26, cumulative for issues 1-26; issues 27-38 inclusive; issue 39, cumulative for 1-39; issues 40-51 inclusive; and issue 52, cumulative for 1-52. An annual subject matter index for rules appears in August. For copies of the *State Register*, a subscription, the annual index, the *Minnesota Rules* or the *Minnesota Guidebook to State Agency Services*, contact the Print Communications Division, 117 University Avenue, St. Paul, MN 55155 (612) 297-3000 or toll-free in Minnesota 1-800-657-3757.

Issues #14-20 Inclusive (issues #1-13 appeared in #13)

Agriculture Department

1550.3050 (adopted)	1115
1555.7410; .7420; .7430; .7440; .7450; .7460; .7470; .7480; .7490; .7500 (proposed repealer)	1086
1555.7411; .7421; .7431; .7441; .7451; .7461 (proposed)	1085

Animal Health Board

1705.2400; .2430; .2434; .2440; .2450; .2460; .2470; .2472; .2474; .2476; .2480; .2490; .2510 (adopted)	1222
Renumbered	1222

COLUMN A

1705.2400, subpart 3b	1705.2400, subpart 3c
1705.2400, subpart 5b	1705.2400, subpart 7a
1705.2400, subpart 8a	1705.2400, subpart 1c
1705.2400, subpart 13	1705.2400, subpart 6a
1705.2400, subpart 14	1705.2400, subpart 5d
1705.2400, subpart 15	1705.2400, subpart 3b
1705.2470, subpart 1	1705.2470, subpart 1d
1705.2472, subpart 2, item A	1705.2470, subpart 1
1705.2472, subpart 2, item C	1705.2470, subpart 1a
1705.2472, subpart 2, item D	1705.2470, subpart 1b
1705.2472, subpart 2, item E	1705.2470, subpart 1c
1705.2472, subpart 2, item F	1705.2460, subpart 8a
1705.2470, s.2; .2474, s.4; .2476, s.3 (repealed)	1222
1720.0860; .0870; .0880; .0930; .0940; .0950; .0960; .0970; .1000; .1010 (adopted)	1189
1720.0980; .1020 (repealed)	1189

Chiropractic Examiners Board

2500.0100; .1200 (adopted)	1222
----------------------------------	------

Dentistry Board

3100.0100; .1400; .2000; .4100; .6300; .8500; .8700 (proposed)	1021
3100.2000, s.7; .1100, s.3 (proposed repealer)	1025

Health Department

4715.3140; .3150; .3160; .3170; .5900; .6000 (proposed)	1152
4720.0010; .0350; .0410; .1075; .1250; .1300; .1800; .1820; .1830; .1831; .1833; .1835; .1836; .1848; .2010; .2020; .3350; .4450; .6150; .6450; .6650 (adopted)	1222
4725.0550, s.2; .1075, s.2 (repealed)	1222

Jobs and Training Department

3300.5000; .5010; .5030; .5040; .5050; .5060 (proposed)	1025
---	------

Secretary of State

3650.0010; .0020; .0030; .0040 (proposed)	1050
---	------

State Board of Technical Colleges

3700.1200; .1210; .1220; .1230; .1240; .1250; .1260; .1265; .1270; .1275; .1280 (proposed)	1056
3515.5500, s.4, 5, 6, 7, 11; .6005, s.2, 3 (repealed)	1059

Trade and Economic Development Department

4290.0010; .0020; .0030; .0040; .0050 (adopted)	1223
---	------

Health Department

4717.7100; .7150; .7200; .7300; .7400; .7500; .7600; .7650; .7700; .7750; .7800 (adopted)	1340
--	------

Higher Education Coordinating Board

4812.0100; .0110; .0130; .0140; .0150; 4830.0300; .0400; .6510; .6610; .9005; .9010; .9015; .9020; .9025; .9030 (adopted)	1141
4830.0400, s.6; .0500; .1550; .1551; .1552; .1553; .1554; .1555; .1556; .1560; .1561; .1562; .1563; .1564; .1565 (repealed)	1141

Labor and Industry Department

5205.0010 (adopted)	1065
5218.0010; .0020; .0030; .0040; .0100; .0200; .0250; .0300; .0500; .0600; .0700; .0750; .0760; .0800; .0900 (adopted)	1379
5219.0500 (adopted)	1379
5224.0010 (adopted)	1379

Natural Resources Department

6100.0100; .0300; .0400; .0500; .1905; .1930; .2400 (adopted)	1145
6102.0010; .0020; .0030; .0040; .0050; .0060 (adopted)	1145
6105.0870 (proposed)	941

Optometry Board

6500.1900; .3000 (adopted)	1340
----------------------------------	------

Natural Resources

6212.0800; .0900; .1100; .1300 (adopted)	1339
--	------

Pharmacy Board

6800.0100; .0300; .0350; .0500; .0700; .0800; .0910; .0950; .1010; .1050; .1150; .1210; .1250; .1300; .1460;	
---	--

Minnesota Rules: Amendments and Additions

.1500; .2150; .2250; .2300; .2500; .2700; .2810; .3100; .3110; .3120; .3200; .3300; .3350; .3400; .3450; .3510; .3850; .3950; .4150; .4210; .4220; .4230; .4240; .4250; .4400; .4500; .4600; .4700; .5100; .5200; .5300; .5350; .5400; .5600; .6200; .6300; .6500; .6700; .7100; .7510; .7520; .7530; .7900; .7950; .8000; .8001; .8002; .8003; .8004; .8005; .8006; .8007; .8008; .8100; .8200; .8300; .8400; .8500; .8600; .8700; .9200; .9700; .9900; .9923; .9924; .9950; .9951; .9952; .9953; .9954 (adopted).....	1145	.3010; .3020; .3030; .4000; .4010; .4020; .4030; .4040; .5000; .6000; .7000; .7010; .7020; .7030; .7040; .7050; .7060; .7070; .7080; .7090; .7100; .9900 (proposed).....	1210
Pollution Control Agency		Public Safety Department	
7001.0020; .0050; .0140; .0180; .0550; .3050; 7002.0005; .0015; 7005.0100; 7007.0050; .0100; .0200; .0300; .0350; .0400; .0450; .0500; .0550; .0600; .0650; .0700; .0750; .0800; .0850; .0900; .0950; .1000; .1050; .1100; .1150; .1200; .1250; .1300; .1350; .1400; .1450; .1500; .1600; .1650; .1700; .1750; .1800; .1850 (adopted).....	1059	7504.0100; .0200; .0300; .0400; .0500; .0600 (adopted).....	944
7045.0020; .0120; .0125; .0230 (proposed).....	1334	Minnesota State Lottery	
7046.0010; .0020; .0031; .0045; .0060 (proposed).....	1041	7856.2020; .6000; .0100; .0200 (adopted).....	1223
7046.0010, s.24; .0031, s.2, 2a; .0045, s.2 (proposed repealer).....	1048	7856.1000, s.5 (repealed).....	1223
7105.0010; .0050; .0060; .0080; .0090; .0100; .0110; .0160 (adopted).....	1059	Gambling Control Board	
7105.0010, s.16 (repealed).....	1059	7861.0030; .0040 (adopted).....	1189
7007.0200; .0250; .0501; .0801; 7011.0551; .1201; .1205; .1210; .1215; .1225; .1227; .1229; .1231; .1233; .1235; .1240; .1245; .1250; .1255; .1260; .1265; .1270; .1275; .1280; .1285; 7017.1000 (proposed Rules).....	1086	7861.0070 (proposed).....	1336
7011.1201, s.2, 3, 4; .1202; .1203; .1204; .1206; .1207 (proposed repealer).....	1115	Minnesota State Retirement System	
Public Service Department		7900.0200; .0400 (adopted).....	1223
7600.0100; .0200; .0300; .0400; .0500; .0600; .0700; .0800; .0900; .1000; .1100; .1200; .1300; .1400; .1500; .1600; .1700; .1800; .1900; .2000; .2100; .2200; .2300; .2400; .2500; .2600; .2700; .2800; .2900; .3000; .3100; .3200; .3300; .3400; .3500; .3600; .3700; .3800; .3900; .4000; .4100; .4200; .4300; .4400; .4500; .4600; .4700; .4800; .4900; .5000; .5100; .5200; .5300; .5400; .5500; .5600; .5700; .5800; .5900; .6000; .6100; .6200; .6300; .6400; .6500; .6600; .6700; .6800; .6900; .7000; .7100; .7200; .7210; .7300; .7400; .7500; .7600; .7700; .7750; .7800; .7900; .8100; .8200; .8300; .8400; .8500; .8600; .8700; .8800; .8900; .9000; .9100; .9200; .9300; .9400; .9500; .9600; .9700; .9800; .9900 (repealed).....	1222	7900.1600 (adopted).....	1189
7601.0100; .0200; .1000; .1010; .1020; .1500; .2000; .2010; .3000;		Revenue Department	
		8175.0100 (proposed).....	1048
		Transportation Department	
		8880.0100; .0200; .0300; .0400; .0500; .0600; .0700; .0800; .0900; .1000; .1100; .1200; .1300; .1400 (proposed).....	1178
		Human Services Department	
		9500.1090; .1095; .1100; .1105; .1110; .1115; .1116; .1120; .1121; .1122; .1124; .1128; .1130; .1131; .1140 (adopted).....	1115
		9500.1100, s.4, 4a, 7, 8, 8a, 10, 12, 13, 17, 20, 21, 23, 24, 24a, 28, 30, 30a, 33a, 39, 40, 41, 42, 43, 43a, 44, 46, 47, 47a, 48, 49, 52; .1110, s.3; .1120, s.3; .1125; .1130, s.2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, .1135 (repealed).....	1121
		9525.2700; .2710; .2720; .2730; .2740; .2750; .2760; .2770; .2780; .2800 (proposed).....	1141
		9525.2710, s.14, 15, 18, 21, 30, 33; .2750, s.3; .2760, s.3; .2770, s.3, 4; .2780, s.1, 6 (repealed).....	1144
		9050.0030; .0040; .0050; .0055; .0060; .0070; .0080; .0150; .0200; .0210; .0220; .0300; .0500; .0510; .0520; .0580; .0600; .0720; .1030; .1070 (proposed).....	1368
		9565.5000; .5010; .5020; .5025; .5027; .5030; .5050; .5060; .5065; .5070; .5080; .5090; .5100; .5110; .5120; .5130; .5140; .5150; .5160; .5200 (adopted).....	1144
		9565.5010, s.6, 6, 13, 23, 24, 33; .5025, s.4; .5030, s.2, 3, 8; .5040; .5060, s.1, 3, 4, 5, 6, 7; .5110, s.6, 9, 10 (repealed).....	1144

Proposed Rules

Pursuant to Minn. Stat. §14.22, an agency may propose to adopt, amend, suspend or repeal rules without first holding a public hearing, as long as the agency determines that the rules will be noncontroversial in nature. The agency must first publish a notice of intent to adopt rules without a public hearing, together with the proposed rules, in the *State Register*. The notice must advise the public:

1. that they have 30 days in which to submit comment on the proposed rules;
2. that no public hearing will be held unless 25 or more persons make a written request for a hearing within the 30-day comment period;
3. of the manner in which persons shall request a hearing on the proposed rules; and
4. that the rule may be modified if the modifications are supported by the data and views submitted

If, during the 30-day comment period, 25 or more persons submit to the agency a written request for a hearing of the proposed rules, the agency must proceed under the provisions of §§14.14-14.20, which state that if an agency decides to hold a public hearing, it must publish a notice of intent in the *State Register*.

Pursuant to Minn. Stat. §§14.29 and 14.30, agencies may propose emergency rules under certain circumstances. Proposed emergency rules are published in the *State Register* and, for at least 25 days thereafter, interested persons may submit data and views in writing to the proposing agency.

Veterans Homes Board

Proposed Permanent Rules Relating to Veterans Homes

DUAL NOTICE: Notice of Intent to Adopt a Rule Without a Public Hearing Unless 25 or More Persons Request a Hearing and Notice of Hearing if 25 or More Requests for Hearing are Received

Introduction. The Veterans Homes Board intends to adopt a permanent rule without a public hearing following the procedures set forth in the Administrative Procedures Act, *Minnesota Statutes*, §14.22 to §14.28. If, however, 25 or more persons submit a written request for a hearing on the rule within 30 days or by December 22, 1993 a public hearing will be held on January 12, 1994. To find out whether the rule will be adopted without a hearing or if the hearing will be held, you should contact the agency contact person after December 22, 1993 and before January 12, 1994.

Agency Contact Person. Comments or questions on the rule and written requests for a public hearing on the rule must be submitted to:

Annette Spencer
Minnesota Veterans Homes Board
20 West 12th St. Rm. 122
St. Paul, MN 55155
(612) 297-5254
Fax (612) 296-6177

Subject of Rule and Statutory Authority. The proposed rule is about admission procedures, discharges procedures and the assessment of contracts for deed in determining maintenance charges. The statutory authority to adopt the rule is *Minnesota Statutes*, section 198.003, subdivision 1. A copy of the proposed rule is published in the *State Register* and attached to this notice as mailed. A free copy of the rule may be obtained by contacting Annette Spencer at the address or telephone number listed above.

Comments. You have until 4:30 p.m. on December 22, 1993 to submit written comment in support of or in opposition to the proposed rule or any part of subpart of the rule. Your comment must be in writing and received by the agency contact person by the due date of the proposed rule addressed, the reason for the comment, and any change proposed.

Request for a Hearing. In addition to submitting comments, you may also request that a hearing be held on the rule. Your request for a public hearing must be in writing and must be received by the agency contact person by 4:30 p.m. on December 22, 1993. Your written request for public hearing must include your name, address, and telephone number. You are encouraged to identify the portion of the proposed rule which caused your request, the reason for the request, and any changes you want made to the proposed rule. If 25 or more persons submit a written request for a hearing, a public hearing will be held unless a sufficient number withdraw their requests in writing.

Modifications. The proposed rule may be modified whether as a result of public comment or as a result of the rule hearing process. Modifications must not result in a substantial change in the proposed rule as attached and printed in the *State Register* and must be supported by data and views submitted to the agency or presented at the hearing. If the proposed rule affects you in any way, you are encouraged to participate in the rulemaking process.

Cancellation of Hearing. The hearing scheduled for January 12, 1994 will be canceled if the agency does not receive requests from 25 or more persons that a hearing be held on the rule. If you request a public hearing, the agency will notify you before the scheduled hearing whether or not the hearing will be held. You may also call Annette Spencer at (612) 297-5254 after December 22, 1993 to find out whether the hearing will be held.

Notice of Hearing. If 25 or more persons submit written requests for a public hearing on the rule, a hearing will be held following the procedures in *Minnesota Statutes*, §14.14 to §14.20. The hearing will be held on January 12, 1994 at the Administration Building, 50 Sherburne Avenue, St. Paul, Minnesota in Room 116B beginning at 9:00 a.m. and will continue until all interested persons have been heard. The hearing will continue, if necessary, at additional times and places as determined during the hearing by the administrative law judge. The administrative law judge assigned to conduct the hearing Howard L. Kaibel, Jr. Judge Kaibel can be reached at:

Office of Administrative Hearings
100 Washington Square, Suite 1700
Minneapolis, Minnesota, 55401-2138
(612) 341-7608

Hearing Procedure. If a hearing is held, you and all interested or affected persons including representatives of associations or other interested groups, will have an opportunity to participate. You may present your views either orally at the hearing or in writing at any time prior to the close of the hearing record. All evidence presented should relate to the proposed rule. You may also mail written material to the administrative law judge to be recorded in the hearing record for five working days after the public hearing ends. This five-day comment period may be extended for a longer period not to exceed 20 calendar days if ordered by the administrative law judge at the hearing. Comments received during this period will be available for review at the Office of Administrative Hearings. You and the agency may respond in writing within five business days after the submission period ends to any new information submitted. All written materials and responses submitted to the administrative law judge must be received at the Office of Administrative Hearings no later than 4:30 p.m. on the due date. No additional evidence may be submitted during the five-day response period. This rule hearing procedure is governed by *Minnesota Rules*, parts 1400.0200 to 1400.1200 and *Minnesota Statutes*, §14.14 to §14.20. Questions about procedure may be directed to the administrative law judge.

Statement of Need and Reasonableness. A statement of need and reasonableness is now available from the agency contact person. This statement describes the need for and reasonableness of each provision of the proposed rule. It also includes a summary of all the evidence and argument which the agency anticipates presenting at the hearing, if one is held. The statement may also be reviewed and copies obtained at the cost of reproduction from the Office of Administrative Hearings.

Small Business Considerations. It is the position of the Minnesota Veterans Homes Board that these proposed rules are not subject to *Minnesota Statutes*, §14.115, subdivision 4 regarding small business considerations in rulemaking.

Expenditure of Public Money by Local Public Bodies. These rules will not result in the expenditure of public monies by local public bodies.

Impact on Agricultural Lands. These rules will not have an impact on agricultural land.

Lobbyist Registration. *Minnesota Statutes*, chapter 10A requires each lobbyist to register with the Ethical Practice Board. Questions regarding this requirement may be directed to the Ethical Practices Board at:

Ethical Practices Board
658 Cedar Street
St. Paul, MN 55155
(612) 296-5148

Adoption Procedure if No Hearing. If no hearing is required, after the end of the comment period the agency may adopt the rule. The rule and supporting documents will then be submitted to the attorney general for review as to legality and form to the extent form relates to legality. You may request to be notified of the date the rule is submitted to the attorney general or be notified of the attorney general's decision on the rule. If you so want to be so notified, or wish to receive a copy of the adopted rule, submit your request to Annette Spencer.

Adoption Procedure After Hearing. If a hearing is held, after the close of the hearing record, the administrative law judge will issue a report of the proposed rule. You may request to be notified of the date on which the administrative law judge's report will

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Proposed Rules

be available, after which date the agency may not take any final action on the rule for a period of five working days. If you want to be notified about the report, you may so indicate at the hearing. After the hearing, you may request notification by sending a written request to the administrative law judge. You may also request notification of the date on which the rule is adopted and filed with the Secretary of State. The agency's notice of adoption must be mailed on the same day that the rule is filed. If you want to be notified of the adoption, you may so indicate at the hearing or send a request in writing to the agency contact person at any time prior to the filing of the rule with the Secretary of State.

Dated: 4 November 1993

James H. Main
Chairman
Board of Directors
Minnesota Veterans Homes

Rules as Proposed

9050.0030 COMPLIANCE WITH STATUTES, RULES, AND CODES.

The Minnesota Veterans Homes Board shall ensure compliance by the facility and staff with applicable statutes, with applicable rules of the Minnesota Department of Health and the Minnesota Department of Human Services, and with applicable health, safety, sanitation, building, zoning, and operations codes, including the following:

[For text of items A to G, see M.R.]

H. the building code in chapters 1300 to 1365 and *Minnesota Statutes*, ~~section~~ sections 16B.59 to 16B.73;

[For text of items I to K, see M.R.]

L. the patient's bill of rights in *Minnesota Statutes*, section 144.651 and the complaint and resident's rights provisions of *Minnesota Statutes*, section 144A.13; ~~and~~

M. the United States Department of Veterans Administration Affairs Code M-1, part 1, chapter 3; ~~and~~

N. the United States Department of Veterans Affairs Guide to Inspection of State Veterans Homes: Domiciliary Care Standards and Guide to Inspection of State Veterans Homes Nursing Home Care Standards.

9050.0040 DEFINITIONS.

[For text of subps 1 to 14, see M.R.]

Subp. 15. **Board.** "Board" means the board of directors of the Minnesota veterans homes or its designee created by *Minnesota Statutes*, section ~~198.022~~ 198.002, and defined in *Minnesota Statutes*, section 198.001, subdivision 6.

[For text of subps 16 to 23, see M.R.]

Subp. 24. **Chemical dependency counselor.** "Chemical dependency counselor" means a ~~staff person who meets the qualifications in part 9530.4270, subpart 4~~ person who is licensed under *Minnesota Statutes*, sections 148C.01 to 148C.11, or who has met the minimum qualifications of a chemical dependency counselor under the examination process of the state of Minnesota or the Minnesota Merit System.

[For text of subps 25 to 40, see M.R.]

Subp. 40a. **Equivalent chemical dependency program.** "Equivalent chemical dependency program" means an unlicensed chemical dependency program that meets the program design requirements of parts 9530.4100 to 9530.4450 ~~and 9530.6620 or 9530.5000~~ to 9530.6650 9530.6500.

[For text of subps 41 to 43, see M.R.]

Subp. 44. **Health care facility.** "Health care facility" means a hospital, nursing home, boarding care home, or supervised living facility licensed by the Minnesota Department of Health under *Minnesota Statutes*, sections 144.50 to 144.56 or 144A.01 to ~~144A.17~~ 144A.18.

[For text of subps 45 to 63, see M.R.]

Subp. 64. **Licensed ~~consulting~~ psychologist.** "Licensed ~~consulting~~ psychologist" means a person licensed under *Minnesota Statutes*, section 148.91, subdivision 4 5.

Subp. 65. **Licensed practical nurse.** "Licensed practical nurse" means a person licensed under *Minnesota Statutes*, sections ~~148.94 148.171~~ to 148.299 148.285.

Subp. 66. [See repealer.]

[For text of subps 67 to 69, see M.R.]

Subp. 69a. Make available. "Make available" means to assist a resident in obtaining information about and arrange for a resident's access to a particular service, but not necessarily assure payment for that service.

[For text of subps 70 to 80, see M.R.]

Subp. 81. Net income. "Net income" means income remaining after allowable deductions and exclusions have been subtracted from gross income under parts 9050.0720 to ~~9050.0755~~ 9050.0750.

[For text of subps 82 to 84, see M.R.]

Subp. 85. Nursing staff. "Nursing staff" has the meaning given it ~~to nursing personnel~~ in part 4655.0100, subpart 9.

[For text of subps 86 to 89, see M.R.]

Subp. 90. Personal fund account. "Personal fund account" means the account maintained at a facility by a resident that is solely for use of that resident and managed according to parts ~~4655.4150~~ 4655.4100 to 4655.4170.

[For text of subps 91 to 94, see M.R.]

Subp. 94a. Provide. "Provide" means that the facility pays for a particular service for the resident.

[For text of subp 95, see M.R.]

Subp. 95a. Psychological practitioner. "Psychological practitioner" means a person licensed under Minnesota Statutes, section 148.91, subdivision 6.

[For text of subps 96 to 105, see M.R.]

Subp. 106. Social worker. "Social worker" means a person who is licensed under *Minnesota Statutes, section 148B.21* ~~sections 148B.18 to 148B.28, or~~ who has met the minimum qualifications of a social worker under the examination process of the state of Minnesota or the Minnesota Merit System or a county civil service system in Minnesota.

[For text of subps 107 and 108, see M.R.]

Subp. 109. Staff psychologist. "Staff psychologist" means a person licensed under *Minnesota Statutes, section 148.91, subdivision 4* ~~or 5~~ sections 148.88 to 148.98, who is employed by or under contract to the board to provide psychological services in a board-operated facility.

[For text of subps 110 to 120, see M.R.]

9050.0050 PERSONS ELIGIBLE FOR ADMISSION.

[For text of subps 1 to 3, see M.R.]

Subp. 4. Exceptions. An applicant otherwise eligible for admission to a board-operated facility under subpart 2 or 3 who has adequate means of support may be admitted to a board-operated facility if the applicant complies with the requirements in *Minnesota Statutes, section 198.03*. An applicant seeking admission under *Minnesota Statutes, section 198.03*, and this subpart must not have past unpaid debts to the state for maintenance charges for prior residence in a board-operated facility. An applicant who has past unpaid ~~debts~~ bills to the state must ~~make full payment of~~ satisfy the past ~~unpaid bills~~ debt for maintenance charges ~~or negotiate a reasonable repayment plan with the board~~ before an application for admission will be placed on the active waiting list.

9050.0055 ADMISSIONS PROCESS, WAITING LIST, PRIORITY.

Subpart 1. Process. A person seeking admission to a board-operated facility may obtain an application form and information describing the required application procedures from the facility. The social services staff of the board-operated facility shall assist the person to complete the application form and process. When an application is requested, the social services staff shall provide a checklist of items requiring documentation, information, or verification to complete the application. An application is complete when the following information is received by the board-operated facility:

A. a completed, signed application form;

B. a copy of the person's military discharge papers or verification from the United States Department of Veterans Affairs or National Personnel Records Center; and

C. a signed copy of the board-operated facility's admission policy statement; and

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Proposed Rules

the following medical records:

- (1) a discharge summary from all hospitals at which the person received treatment within the ~~five~~ two years before application;
- (2) a patient care information form from the current nursing home, if any; and
- (3) if the person resides at home at the time of application, a patient care information form completed by the primary caregiver; and
- (4) ~~if the person resides at home at the time of application, a history and physical from the attending physician.~~

The social services staff of the board-operated facility shall keep a checklist on which to record the date of receipt of information for the person's application file. Upon completion of an application file, a determination must be made by the board-operated facility social services staff as to whether the applicant meets the general eligibility requirements in part 9050.0050. If the requirements of part 9050.0050 are met, an applicant's name must be referred to the admissions committee or be placed on the waiting list for the particular facility as specified in subpart 3.

[For text of subp 2, see M.R.]

Subp. 3. Waiting lists. Each board-operated facility shall maintain an active waiting list and an inactive waiting list to determine the admission priority of applicants. The active waiting list is for applicants desiring the first available bed at the level of care appropriate to the applicant's needs. The inactive waiting list is for those applicants who do not want to exercise their option for admission, but who want to be prepared to exercise that option and want to be kept informed of openings or of the length of the active waiting list at the board-operated facility.

If an eligible applicant cannot be considered for admission to a board-operated facility with an appropriate level of care due to unavailability of a bed, the applicant must be placed on either an active or inactive waiting list according to preference. An applicant shall indicate preference for the active or inactive waiting list on ~~the application for admission~~ a separate form. An applicant may request movement from one waiting list to another at any time, unless the request is precluded by subpart 5. An applicant requesting movement from one waiting list to another must be placed at the bottom of the waiting list to which movement was requested. The applicant's position on the waiting list is determined by the date on which the application file is complete.

Subp. 4. Priority. ~~Current residents of board-operated facilities have~~ If it is determined by the utilization review committee that a current resident needs a level of care not offered at the board-operated facility where the resident is staying, the current resident has priority for consideration for admission to other board-operated facilities at an appropriate level of care if they meet the criteria for that level of care and a bed is available. A person who is discharged for failure to meet bed hold criteria in part 9050.0150, subpart 2 or 3, has priority for consideration for admission to a board-operated facility at an appropriate level of care if the person meets the criteria for that level of care and a bed is available. A person on the active waiting list must be considered for admission and, if approved by the admissions committee, offered a bed consistent with the person's position on the active waiting list and the person's case mix classification and level of care needs as determined by the admissions committee. A person offered admission has seven working days to consider the offer. If the person declines the offer of admission, the person's name must be put on the bottom of the active waiting list, unless the person requests removal from the active waiting list or transfer to the inactive waiting list. If the person fails to respond to the offer of admission within seven working days from the date the offer is made, the person's application file must be closed and the person's name removed from all waiting lists. A person whose name is removed from all waiting lists for failure to respond to an offer for admission must reapply.

[For text of subps 5 and 6, see M.R.]

9050.0060 ADMISSIONS COMMITTEE; CREATION, COMPOSITION, AND DUTIES.

[For text of subpart 1, see M.R.]

Subp. 2. Composition of admissions committee. The admissions committee must consist of ~~three or more~~ of the following staff members of the board-operated facility: the administrator or a designee, a registered nurse, and a social worker; ~~a mental health professional or mental health practitioner, and a physical therapist.~~ Additional admissions committee members may include any of the following staff members, as indicated by the diagnosis or diagnoses of the applicant to be reviewed: a chemical dependency counselor, a mental health professional or mental health practitioner, a physical therapist, an occupational therapist, a speech therapist, a dietician, and clergy member a chaplain, or a staff psychologist or psychiatrist. The applicant's attending physician must be included on the admissions committee if the physician chooses to participate.

Subp. 3. Duties. The admissions committee has the duties specified in items A and B.

[For text of item A, see M.R.]

B. The admissions committee shall record the minutes of each committee meeting. The minutes must reflect the date of the review, the applicant's name and medical diagnosis, the current living status of the applicant, the reason for the placement request,

a brief description of the applicant's physical or mental status, and the rationale behind the committee decision. The minutes must be kept by the administrator for the time specified for retention of medical records in parts 4655.3200 to 4655.3600.

Subp. 4. **Screening.** To prepare for review of an application for admission, the admissions committee or its designated representatives shall conduct a preadmission screening similar to that prescribed in *Minnesota Statutes*, section ~~256B.091~~ 256B.0911. The admissions committee or its designated representatives shall interview the applicant or the applicant's legal representative, if any, and the applicant's family members with the applicant's consent. The admissions committee shall also obtain the following information:

[For text of items A to F, see M.R.]

9050.0070 TYPES OF ADMISSIONS.

[For text of subps 1 and 2, see M.R.]

Subp. 3. **Criteria for admission to and continued stay in a boarding care facility.** The decision about admission to or continued stay in a board-operated facility licensed to provide boarding care must be based on the facility's ability to meet the care needs of the applicant or resident. A person whose care needs can be met by the board-operated facility must be admitted, placed on the waiting list, or retained as a resident if the admissions committee or utilization review committee determines the person meets the criteria in items A to N. A person whose care needs cannot be met must be denied admission or continued stay if the admissions committee or utilization review committee determines the person does not meet the criteria in items A to N.

A. The person must have or be assigned a case mix classification of A ~~or~~ B, D, or E under the case mix system established by parts 9549.0058, subpart 2, and 9549.0059 and *Minnesota Statutes*, section 144.072.

[For text of items B to H, see M.R.]

I. The person must require no more than twice daily face-to-face monitoring by the nursing staff of the boarding care facility. For continued stay, face-to-face monitoring for special medical needs may exceed twice daily for up to five days with approval of the director of nursing or the assistant director of nursing of the boarding care facility.

[For text of items J and K, see M.R.]

L. A person with a diagnosis of chemical abuse within the past six months or a diagnosis of chemical dependency, excluding a chemical dependency diagnosis of "in remission," must have successfully completed a chemical dependency treatment program as described in parts 9050.0040, subparts 25 and 99, and ~~9530.6620~~ 9530.5000 to ~~9530.6650~~ 9530.6500, or an equivalent chemical dependency program, or must be chemically free. For the purposes of this item, a person is chemically free if the person has three months of nonuse or use with no symptoms of dependency as identified in the Diagnostic and Statistical Manual of Mental Disorders prior to admission and demonstrates no symptoms of abuse or dependency during residence. The person's chemical-free status may be verified by a collateral contact. For purposes of this part, "collateral contact" means an oral or written communication initiated by facility staff for the purpose of gathering information from an individual or agency, other than the applicant, to verify or supplement information provided by the applicant. Collateral contact includes contact with family members, criminal justice agencies, educational institutions, and employers. The current list of accepted equivalent chemical dependency programs as defined in part 9050.0040, subpart 40a, must be kept at the board office.

[For text of items M and N, see M.R.]

Subp. 4. **Criteria for admission to and continued stay in a nursing home facility.** The decision about admission or continued stay in a board-operated facility licensed as a nursing home must be based on the facility's ability to meet the care needs of the person. A person whose care needs can be met by the facility must be admitted, placed on the waiting list, or retained as a resident if the admissions committee or utilization review committee determines that the person meets all of the criteria in items A to G. A person whose care needs cannot be met must not be admitted or retained as a resident if the admissions committee determines the person fails to meet all of the criteria in items A to G.

[For text of items A to F, see M.R.]

G. A person with a diagnosis of chemical abuse within the past six months or a diagnosis of chemical dependency, excluding a chemical dependency diagnosis of "in remission," must have successfully completed a chemical dependency treatment program as described in parts 9050.0040, subparts 25 and 99, and ~~9530.6620~~ 9530.5000 to ~~9530.6650~~ 9530.6500, or an equivalent chemical dependency program, or must be chemically free. For the purpose of this item, a person is chemically free if the person has three

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Proposed Rules

months of nonuse or use with no symptoms of dependency as identified in the Diagnostic and Statistical Manual of Mental Disorders before admission and demonstrates no symptoms of abuse or dependency during residence. The person's chemical-free status may be verified by a collateral contact. For purposes of this part, "collateral contact" means an oral or written communication initiated by facility staff for the purpose of gathering information from an individual or agency, other than the applicant, to verify or supplement information provided by the applicant. Collateral contact includes contact with family members, criminal justice agencies, education institutions, and employers. The current list of accepted equivalent chemical dependency programs as defined in part 9050.0040, subpart 40a, shall be kept at the board office. Persons whose long-term medical condition is assessed as precluding continued chemical abuse may be accepted for nursing care.

9050.0080 ADMISSION DECISION; NOTICE AND REVIEW.

Subpart 1. **Notice.** An applicant must be advised ~~by the board~~, in writing, of the admissions committee's decision and the reasons for the decision. The notice must be sent to the applicant no later than three working days after the admissions committee's decision. The notice must include information about the applicant's right to request a review of a denial and about the review process as specified in subpart 2 or information regarding additional actions necessary to effect admission. Nothing in this subpart precludes concurrent or prior notification by telephone.

[For text of subp 2, see M.R.]

9050.0150 BED HOLD.

[For text of subps 1 to 3, see M.R.]

Subp. 4. **Personal absence.** A resident's bed must be held when the person leaves the board-operated facility on a personal absence. A personal absence may be no longer than 96 hours, unless the resident has made a definitive arrangement with the administrator or administrator's designee regarding a longer absence. The resident shall advise the administrator or administrator's designee of the total length of the absence and the resident shall agree to pay the maintenance charge during the absence.

[For text of subps 5 to 7, see M.R.]

9050.0200 DISCHARGE.

[For text of subps 1 and 2, see M.R.]

Subp. 3. **Grounds for discharge.** Discharge procedures must be instituted with regard to a resident if one of the following grounds or circumstances exist:

[For text of items A to C, see M.R.]

D. the resident is absent without notice from the facility for more than 96 consecutive hours or a definitive arrangement has been made for an absence longer than 96 hours and the resident fails to comply with that arrangement; or

[For text of item E, see M.R.]

Subp. 4. **Notice of involuntary discharge.** Unless the time for the notice is extended by the administrator of a board-operated facility or a situation arises that is outside the facility's control, such as a utilization review, a change in the resident's medical or treatment program, the resident's own or another resident's welfare, or nonpayment of stay, a resident must be notified in writing by the administrator or administrator's designee of the facility of its intent to proceed with involuntary discharge of the resident at least 30 days before the scheduled date of discharge as provided by *Minnesota Statutes*, section 144.651, subdivision 29. In situations outside the board-operated facility's control, notice of discharge must be given a reasonable time before the discharge ~~and~~. The reasonable time must be determined by the facility administrator or administrator's designee, based upon the particular facts of the situation prompting the discharge.

[For text of subp 5, see M.R.]

Subp. 6. **Exceptions.** A resident's discharge under subpart 3, item D, is subject to reconsideration if the resident reports his or her whereabouts to the administrator of the facility or administrator's designee and requests reconsideration within 30 days from the resident's departure from the facility without notice. A notice of involuntary discharge must be sent to the resident's address, if it is known, or to the resident's last known address, and to the address of a person listed by the resident as the person to be contacted during an emergency. The notice of discharge must be signed by the administrator or administrator's designee and sent by certified mail within a reasonable amount of time, following the determination that the resident is absent without notice.

9050.0210 VOLUNTARY DISCHARGE PROCEDURES.

[For text of subpart 1, see M.R.]

Subp. 2. **Responsibilities of facility staff.** ~~The board~~ board-operated facility staff shall ensure that the tasks in items A to E are completed in effecting effect a discharge under this part according to items A to E.

A. The discharge component of the resident's individual care plan must be updated and implemented after the resident has had an opportunity to confer with a social worker about the plan as described in subitems (1) and (2).

[For text of subitem (1), see M.R.]

(2) The ~~board~~ board-operated facility staff shall ~~ensure that adequate arrangements exist~~ make referrals to resources designed to meet the resident's financial and other needs following the resident's discharge.

B. The attending physician and board-operated facility multidisciplinary staff shall complete the resident's medical record. The resident's medical record must be retained as specified in parts 4655.3200 to ~~4655.3600~~ 4655.4000.

[For text of items C to E, see M.R.]

9050.0220 INVOLUNTARY DISCHARGE PROCEDURES.

[For text of subpart 1, see M.R.]

Subp. 2. **Initial notice, review of recommendation.** An initial notice for involuntary discharge must be issued by the administrator of the board-operated facility or administrator's designee if, after review of the recommendations and documentation from the utilization review committee or finance department, the administrator agrees with the recommendations.

Subp. 3. **Reconsideration.** A resident or the resident's legal representative may request a reconsideration of the initial notice of involuntary discharge. The request must be made in writing within ten days of receipt of the initial notice of involuntary discharge. Reconsideration must be before the administrator of the board-operated facility under the procedures in subpart 4. Once the resident has requested a reconsideration, the remaining time for filing an administrative appeal must be stayed until the reconsideration decision is issued.

[For text of subps 4 and 5, see M.R.]

Subp. 6. **Appeals process.** An applicant or resident, or legal representative, may appeal a discharge or transfer order. A request for reconsideration within the ten-day time period will stay the remaining time which a resident has to request an administrative appeal. Appeals must be in accordance with contested case procedures under the Administrative Procedure Act, *Minnesota Statutes*, section 14.48 et. seq., until rules are adopted under *Minnesota Statutes*, section 144A.135, by the commissioner of health. Once the rules adopted under *Minnesota Statutes*, section 144A.135, have taken effect, all appeals must be in accordance with those rules. The administrator shall inform the resident or applicant of the rules that govern the appeal in the notice provided under part 9050.0100, subpart 2, or 9050.0200, subpart 4. A final discharge order issued by the administrator following the Office of Administrative Hearings' review remains in effect pending any appeal. Notwithstanding this provision, the administrator may, for good cause shown, waive imposition of the discharge order until all appeals have been concluded.

Nothing in this part may be construed to limit, change, or restrict other appeal or review procedures available to a resident under law.

9050.0300 CARE PLANNING.

Subpart 1. **Generally.** A board-operated facility must have and implement a care planning procedure. Under the procedure, a resident's care plan is initiated and reviewed by the care plan team to ensure that the resident's needs are addressed and the facility has the ability to competently and safely care for the resident according to the criteria in part 9050.0070, subparts 3 and 4. The care plan team is comprised of the facility staff members who are directly involved with the resident's care, including a physician, licensed nurse, social worker, and other staff as indicated by the ~~patient's~~ resident's condition.

[For text of subps 2 and 3, see M.R.]

9050.0500 COST OF CARE; BASIS FOR MAINTENANCE CHARGE; BILLING.

[For text of subpart 1, see M.R.]

Subp. 2. **Costs to be included in calculating cost of care.** The calculation of the cost of care includes both the direct and indirect costs of providing resident care. These costs must be compiled separately for each board-operated facility on the basis of whether nursing home or boarding care services are provided.

[For text of items A and B, see M.R.]

C. Calculation of the cost of care does not include the expenses of the board and capital expenditures or revenues, including

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Proposed Rules

federal matching funds and designated contributions, and resident fund accounts as specified in parts ~~4655.4120~~ 4655.4100 to 4655.4170.

[For text of subps 3 to 6, see M.R.]

9050.0510 MAINTENANCE CHARGE; ADDITIONAL SERVICES; VETERAN EXCLUSIVE SERVICES.

Subpart 1. **Additional services at resident's own expense.** In addition to the services in the resident's admissions agreement, a resident may use additional health care services at the resident's own expense if the health care services do not exceed the level of care for which the facility is licensed and if the service provider complies with documentation requirements of the board-operated facility. A resident who chooses to use additional health care services at the resident's own expense shall continue to pay the maintenance charge determined under part ~~9050.0530~~ 9050.0560.

[For text of subp 2, see M.R.]

9050.0520 MAINTENANCE CHARGE; DELINQUENT ACCOUNTS; INTEREST; DISCHARGE.

Subpart 1. **Interest on delinquent accounts.** A resident's account is considered delinquent if a resident willfully refuses or willfully fails to pay the bill by the due date. Applicants or residents must be notified if payment has not been received by the due date printed on the bill. Interest must be charged on all delinquent accounts, effective the date the bill was due, as provided in *Minnesota Statutes*, section 334.01. For purposes of this subpart, "willful refusal or willful failure to pay" means a situation in which:

[For text of items A and B, see M.R.]

Subp. 2. **Discharge for nonpayment.** Discharge proceedings must be instituted under part 9050.0200, subpart ~~2~~ 3, item A, when an account is delinquent. Discharge proceedings for nonpayment must be stopped when full payment, including accrued interest, is made.

9050.0580 REVIEW OF MAINTENANCE CHARGE DETERMINATION.

An applicant or resident or legal representative may request that the administrator of a board-operated facility reconsider a maintenance charge determination. The request must be submitted in writing; ~~directed~~ to the administrator within ten days of receipt of the maintenance charge notice. The administrator shall, within ten days of receipt of the request, conduct a review of the maintenance charge determination. The review must be in the same format and time frames as the procedures under part 9050.0220. The administrator's determination is final upon receipt by the applicant or resident, or legal representative, and is the final agency action.

9050.0600 PROPERTY LIMITATIONS.

[For text of subpart 1, see M.R.]

Subp. 2. **Real property limitations.** Real property owned by an applicant or resident must be excluded from consideration as an available resource, subject to the limitations in items A and B.

[For text of item A, see M.R.]

B. Real property being sold on a contract for deed must be excluded if the net present value of the contract in combination with other property does not exceed the limitations in parts 9050.0560 and 9050.0600. If the present value exceeds limitations, the contract payments must be sold considered as income to the applicant or resident. If the contract is sold, proceeds from the sale must be treated as lump sum payments.

[For text of items C to F, see M.R.]

[For text of subps 3 and 4, see M.R.]

9050.0720 CALCULATION OF NET INCOME; DEDUCTION FOR EMPLOYMENT EXPENSES.

[For text of subpart 1, see M.R.]

Subp. 2. **Deduction for employment expenses of applicant or resident.** The facility financial staff shall deduct the expenses in this part and parts 9050.0730 and 9050.0740 from gross income to determine net income. Deductible items include:

[For text of items A to S, see M.R.]

9050.1030 RESIDENT CARE SERVICES.

Subpart 1. **General.** Care services provided to residents of Minnesota veterans homes must be consistent with the overall goals and obligations of each facility as expressed in statute, the homes' mission statements, and rules governing the board-operated facilities, and must be consistent with available funding and limited if the service is not reimbursable by public or private resources according to *Minnesota Statutes*, section 144.651, subdivision 6.

Care services are provided according to Department of Health licensure regulations and the certification requirements of the

United States Department of Veterans Affairs. Laws pertaining to resident care services include chapter 4655; *Minnesota Statutes*, chapters 144 and 144A; ~~and~~ United States Department of Veterans Affairs Code M-1, part 1, chapter 3; and United States Department of Veterans Affairs Guide for Inspection of State Veterans Homes Nursing Home Care Standards and Guide for Inspection of State Veterans Homes: Domiciliary Care Standards.

Resident care services must be authorized by the Minnesota Veterans Homes Board of Directors.

Services that are veteran-exclusive through the United States Department of Veterans Affairs are not available to nonveteran residents according to part 9050.0510, subpart 2.

A resident, resident's guardian, legal representative, family member, conservator, or other person designated by the resident must be informed in writing by the admission staff of each board-operated facility or the resident's social worker, before or at the time of admission and when changes occur, of services that are included in the facility's basic per diem and of other services that may be available at additional charges.

The facility staff shall assist residents in obtaining information and making application for possible benefits or programs to which the residents are entitled according to parts 9050.0770 and 9050.0800, subpart 2, item G, and *Minnesota Statutes*, section 144.651, subdivision 17.

[For text of subp 2, see M.R.]

Subp. 3. Dietary services. At each board-operated facility, an adequately equipped kitchen must be maintained and qualified facility staff must be employed to supply the necessary food requirements of the residents. Dietary services provided to residents must be according to parts 4655.8500 to 4655.8800 ~~and~~ United States Department of Veterans Affairs Code M-1, part 1, chapter 3; and United States Department of Veterans Affairs Guide for Inspection of State Veterans Homes Nursing Home Care Standards and Guide for Inspection of State Veterans Homes: Domiciliary Care Standards.

A qualified dietician, as defined in part 9050.0040, subpart 34, or dietary supervisor if qualified, must be employed or contracted with to supervise the food service department of each facility. A qualified dietary supervisor is a person trained or experienced in the planning and preparation of meals as stated in part 4655.8510. The dietary staff shall prepare therapeutic diets as ordered by the resident's attending physician, according to federal and state standards and established recommended daily allowances.

A dietician shall ensure that nutritional care plans are developed according to each resident's nutritional needs and that an individual diet card is maintained for each resident.

Subp. 4. Recreational therapy. At each board-operated facility, a recreational therapy program must be provided according to part 4655.5200 ~~and~~ United States Department of Veterans Affairs Code M-1, part 1, chapter 3; and United States Department of Veterans Affairs Guide for Inspection of State Veterans Homes Nursing Home Care Standards and Guide for Inspection of State Veterans Homes: Domiciliary Care Standards. Recreational therapy programs must be appropriate to the needs and interests of residents to maximize individual residents' physical and psychosocial levels.

Adequate equipment, space, and supplies for recreational therapy programs must be provided at each facility.

A resident's recreation plan must be integrated into the resident's care plan and documentation of recreational therapy provided must be maintained in the resident's chart.

A qualified staff member responsible for the recreational therapy program shall meet at least the minimum qualifications in part 4655.5200, subpart 5.

Subp. 5. Social work services. On-site social work services must be provided to residents of each board-operated facility by qualified social workers to meet the psychosocial needs of individual residents.

The provision of social services must be documented in the resident's chart. Documentation must include a social services assessment or plan and quarterly progress reports on each resident in the facility according to United States Department of Veterans Affairs Code M-1, part 1, chapter 3, and United States Department of Veterans Affairs Guide for Inspection of State Veterans Homes Nursing Home Care Standards and Guide for Inspection of State Veterans Homes: Domiciliary Care Standards.

[For text of subp 6, see M.R.]

Subp. 7. Medical director. Each board-operated facility must have a medical director according to part 9050.0040, subpart 73, ~~and~~ United States Department of Veterans Affairs Code M-1, part 1, chapter 3; and United States Department of Veterans Affairs

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Proposed Rules

Guide for Inspection of State Veterans Homes Nursing Home Care Standards and Guide for Inspection of State Veterans Homes: Domiciliary Care Standards.

Subp. 8. **Attending physician.** Each resident must be assigned an attending physician who is responsible for overall medical care of the resident. A resident may choose a private attending physician at the resident's own expense if the physician agrees to comply with regulatory standards governing the home. Regulatory standards include parts 4655.4600 and 4655.4700 ~~and~~; United States Department of Veterans Affairs Code M-1, part 1, chapter 3; and United States Department of Veterans Affairs Guide for Inspection of State Veterans Homes Nursing Home Care Standards and Guide for Inspection of State Veterans Homes: Domiciliary Care Standards.

The attending physician shall prescribe a planned regimen of resident care based on a medical evaluation of the resident's immediate and long-term needs. The attending physician must be identified on the resident's medical chart.

The attending physician shall make arrangements for the medical care of the resident in the event of an on-site emergency or a planned absence by the attending physician.

Subp. 9. **Chaplain services.** Spiritual care must be provided by a chaplain to residents of each board-operated facility according to part 4655.5300 ~~and~~; United States Department of Veterans Affairs Code M-1, part 1, chapter 3; and United States Department of Veterans Affairs Guide for Inspection of State Veterans Homes Nursing Home Care Standards and Guide for Inspection of State Veterans Homes: Domiciliary Care Standards.

Adequate space must be provided for chaplain services and private space provided for a resident to meet with clergy of the resident's choice.

Subp. 10. **Mental health services.** Mental health services must be made available to residents who meet admission and continued stay criteria as specified in part 9050.0070, subparts 3 and 4, at each board-operated facility either on-site or through other means such as contract services, sharing agreements, or other arrangements according to United States Department of Veterans Affairs Code M-1, part 1, chapter 3, and United States Department of Veterans Affairs Guide for Inspection of State Veterans Homes Nursing Home Care Standards and Guide for Inspection of State Veterans Homes: Domiciliary Care Standards.

A resident must be offered mental health services on request by the resident, or as determined by members of the resident's individual care plan team, which may include a staff psychologist, staff psychiatrist, or chemical dependency counselor.

These services must include, but are not limited to, assessment, diagnosis, supportive counseling or self-help groups for residents presenting behavioral problems, psychiatric disorders, and chemical dependency or chemical abuse disorders. These services must be provided through disciplines such as psychology, psychiatry, and chemical dependency.

Documentation of mental health services provided to a resident must be maintained in the resident's chart.

Subp. 11. **Dental care services.** Dental care must be made available for residents of each board-operated facility according to part 4655.4800 ~~and~~; United States Department of Veterans Affairs Code M-1, part 1, chapter 3; and United States Department of Veterans Affairs Guide for Inspection of State Veterans Homes Nursing Home Care Standards and Guide for Inspection of State Veterans Homes: Domiciliary Care Standards.

Each facility must have a written agreement with a licensed dentist or dentists to provide emergency dental care when necessary.

Dental care for residents consists of, but is not limited to, cleaning of teeth by the dentist or dental hygienist, an examination of the resident's teeth and mouth by the dentist, taking of necessary X-rays as determined by the dentist, proper fitting of dentures, repair of dentures, and treatment of abnormalities caused by dentures as determined by the dentist.

Documentation of dental care provided must be maintained in the resident's chart.

Subp. 12. **Podiatric care services.** Podiatric care must be made available at each board-operated facility to residents through a podiatrist or physician, with the approval of the resident's attending physician, according to United States Department of Veterans Affairs Code M-1, part 1, chapter 3, and United States Department of Veterans Affairs Guide for Inspection of State Veterans Homes Nursing Home Care Standards and Guide for Inspection of State Veterans Homes: Domiciliary Care Standards.

Documentation of podiatric care provided must be maintained in the resident's chart.

Subp. 13. **Optometric care services.** Optometric care must be made available to residents of each board-operated facility according to United States Department of Veterans Affairs Code M-1, part 1, chapter 3, and United States Department of Veterans Affairs Guide for Inspection of State Veterans Homes Nursing Home Care Standards and Guide for Inspection of State Veterans Homes: Domiciliary Care Standards.

Consultation or treatment with the optometrist must be on written order of the resident's attending physician. For residents needing replacement of refractory lenses, the nursing department may request a resident's appointment with the optometrist.

Documentation of optometric care provided must be maintained in the resident's chart.

[For text of subp 14, see M.R.]

Subp. 15. **Diagnostic services.** Diagnostic services must be made available to residents of each board-operated facility on written order of the resident's attending physician according to United States Department of Veterans Affairs Code M-1, part 1, chapter 3, and United States Department of Veterans Affairs Guide for Inspection of State Veterans Homes Nursing Home Care Standards and Guide for Inspection of State Veterans Homes: Domiciliary Care Standards. Payments for diagnostic services are determined according to part 9050.0510.

Examples of diagnostic services include, but are not limited to, X-rays and laboratory work, such as blood tests.

Documentation of diagnostic care provided must be maintained in the resident's chart.

Subp. 16. **Pharmaceutical services.** Pharmaceutical services must be made available through a licensed pharmacist by each board-operated facility to meet the needs of residents according to parts 4655.7790 to 4655.7860 ~~and~~ United States Department of Veterans Affairs Code M-1, part 1, chapter 3; and United States Department of Veterans Affairs Guide for Inspection of State Veterans Homes Nursing Home Care Standards and Guide for Inspection of State Veterans Homes: Domiciliary Care Standards. A licensed pharmacist is defined in part 9050.0040, subpart 92.

Documentation of pharmaceutical services provided must be maintained in the resident's chart.

Subp. 17. **Specialized rehabilitation services.** Specialized rehabilitation services such as physical therapy, occupational therapy, and speech therapy must be provided to residents to improve and maintain maximum functioning according to ~~Minnesota Statutes, section 148.65; and~~ United States Department of Veterans Affairs Code M-1, part 1, chapter 3, and United States Department of Veterans Affairs Guide for Inspection of State Veterans Homes Nursing Home Care Standards and Guide for Inspection of State Veterans Homes: Domiciliary Care Standards.

Documentation of specialized rehabilitation services must be maintained in the resident's chart.

Subp. 18. **Maintenance.** Maintenance services must be maintained at each board-operated facility to ensure that the physical plant is kept in a continuous state of good repair and operation with regard to the health, comfort, safety, and well-being of residents and others according to chapter 4660 ~~and~~ United States Department of Veterans Affairs Code M-1, part 1, chapter 3; and United States Department of Veterans Affairs Guide for Inspection of State Veterans Homes Nursing Home Care Standards and Guide for Inspection of State Veterans Homes: Domiciliary Care Standards.

Subp. 19. **Transportation.** A means of transportation to and from approved medical providers must be provided or arranged for by each board-operated facility according to United States Department of Veterans Affairs Code M-1, part 1, chapter 3, and United States Department of Veterans Affairs Guide for Inspection of State Veterans Homes Nursing Home Care Standards and Guide for Inspection of State Veterans Homes: Domiciliary Care Standards, if the providers are located within the areas regularly serviced by the transportation staff of the facility.

~~An approved medical provider is a medical facility with a written transfer agreement for acute care services or Minnesota veterans homes contract services.~~

9050.1070 RESIDENT RIGHTS AND RESPONSIBILITIES.

[For text of subps 1 to 5, see M.R.]

Subp. 6. **Resident councils.** Residents may organize, maintain, and participate in a resident advisory council with elected officers to express feelings and thoughts about the facility, facility policies, and resident care issues according to *Minnesota Statutes*, sections 144.651, subdivision 27, and 144A.33; ~~and~~ United States Department of Veterans Affairs Code M-1, part 1, chapter 3; and United States Department of Veterans Affairs Guide for Inspection of State Veterans Homes Nursing Home Care Standards and Guide for Inspection of State Veterans Homes: Domiciliary Care Standards.

Space for resident council meetings must be provided at each board-operated facility. Staff or visitors may only attend resident council meetings at the council's invitation.

The administrator shall designate a staff person, with approval of the resident council, to assist the council and respond to written requests that result from council meetings.

Minutes of resident council meetings must be kept and made available to residents and other persons as the resident council deter-

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Proposed Rules

minutes. Minutes of resident council meetings must also be made available to the Department of Health and the United States Department of Veterans Affairs to show that resident council meetings are being held at each facility.

The designated staff person or other appropriate staff persons shall inform the resident council of:

[For text of items A to F, see M.R.]

[For text of subps 7 and 8, see M.R.]

Subp. 9. Resident grievances and complaints. A resident may voice grievances and complaints and recommend changes in rules, policies, and services of the board-operated facility without retaliation according to *Minnesota Statutes*, sections 198.32, 144.651, subdivision 20, and 144A.13; ~~and~~ United States Department of Veterans Affairs Code M-1, part 1, chapter 3; ~~and United States Department of Veterans Affairs Guide for Inspection of State Veterans Homes Nursing Home Care Standards and Guide for Inspection of State Veterans Homes: Domiciliary Care Standards.~~

On admission, each resident must be informed in writing of the right to complain. A notice of the right to complain must be posted in a conspicuous place in each board-operated facility.

Residents may complain through the facility grievance and complaint procedures. A resident may also voice grievances to the administrator, the board, the commissioner of veterans affairs, the commissioner of health, facility staff, other residents, the family council, or outside representatives of the resident's choice.

The grievance procedure at each board-operated facility must include the following:

[For text of items A to F, see M.R.]

[For text of subps 10 to 14, see M.R.]

Subp. 15. Privacy of resident records. A resident has a right to confidential treatment of personal and medical records and may approve or refuse release of the records to any individual outside the board-operated facility.

Medical records must be made available to persons at the board-operated facility who are responsible for the direct care of the resident. All information contained in the resident's records must be handled in a manner consistent with ~~chapter chapters 1205 and 4655 and~~ the Government Data Practices Act under *Minnesota Statutes*, chapter 13, ~~and section sections 144.335 and~~ 144.651, subdivision 16.

Written consent of the resident or the resident's guardian or conservator is required for the release of information concerning the resident to persons not otherwise authorized to receive it. Written consent of the resident must be handled in a manner consistent with *Minnesota Statutes*, section 13.04, subdivision 2.

Information to be released is limited to the items or information specified in the consent form.

Written consent for release of information need not be given when:

[For text of items A to D, see M.R.]

[For text of subps 16 to 20, see M.R.]

Subp. 21. Resident work therapy programs. A resident may take part in a resident work therapy program on approval of the resident's attending physician or as recommended by the resident's attending physician and the resident's care team as part of the individual treatment or care plan.

The labor or services that the resident performs must be for therapeutic purposes and appropriately goal-related in the resident's care plan according to *Minnesota Statutes*, section 144.651, subdivision 23.

The labor performed by the resident must be other than labor of a housekeeping nature with respect to the resident's own living area and the resident must be compensated appropriately and in compliance with Minnesota law and the Federal Fair Labor Standards Act.

Earnings derived from participating in a resident work therapy program while the resident is living at the home may not be considered a means of support according to part 9050.0700, subpart 3, item A, and *Minnesota Statutes*, section 198.03.

[For text of subps 22 to 39, see M.R.]

REPEALER. *Minnesota Rules*, part 9050.0040, subpart 66, is repealed.

Adopted Rules

The adoption of a rule becomes effective after the requirements of Minn. Stat. §§14.14-14.28 have been met and five working days after the rule is published in *State Register*, unless a later date is required by statutes or specified in the rule.

If an adopted rule is identical to its proposed form as previously published, a notice of adoption and citation to its previous *State Register* publication will be printed.

If an adopted rule differs from its proposed form, language which has been deleted will be printed with strikeouts and new language will be underlined. The rule's previous *State Register* publication will be cited.

An emergency rule becomes effective five working days after the approval of the Attorney General as specified in Minn. Stat. §14.33 and upon the approval of the Revisor of Statutes as specified in §14.36. Notice of approval by the Attorney General will be published as soon as practicable, and the adopted emergency rule will be published in the manner provided for adopted rules under §14.18.

Department of Labor and Industry

Adopted Permanent Rules Relating to Workers' Compensation; Independent Contractors

Rules as Adopted

The rules proposed and published at *State Register*, Volume 17, Number 51, pages 3143-3355, June 21, 1993 (17 SR 3143), are adopted as proposed.

Department of Labor and Industry

Adopted Permanent Rules Relating to Independent Medical Examination Fees

The rules proposed and published at *State Register*, Volume 17, Number 51, pages 3143-3156, June 21, 1993 (17 SR 3143), are adopted with the following modifications:

Rules as Adopted

5219.0500 INDEPENDENT MEDICAL EXAMINATION FEES.

Subp. 3. **Charges.** Charges by a health care provider as defined by *Minnesota Statutes*, section 176.011, subdivision 24, for or in connection with independent medical examinations pursuant to *Minnesota Statutes*, section 176.155, must not exceed the cost specified in items A to J.

C. The total charge for reading, interpretation, and analysis of multiple or single X-rays and other diagnostic imaging or tests is \$75.

Department of Labor and Industry

Adopted Permanent Rules Relating to Managed Care

The rules proposed and published at *State Register*, Volume 17, Number 51, pages 3143-3155, June 21, 1993 (17 SR 3143), are adopted with the following modifications:

Rules as Adopted

5218.0010 DEFINITIONS.

Subp. 6. **Insurer.** "Insurer" means the insurer providing workers' compensation insurance required by *Minnesota Statutes*, chapter 176, and includes a self-insured employer ~~and third party administrator for the employer or insurer except as otherwise provided in part 5218.0200, subpart 4.~~

5218.0030 PURPOSE AND SCOPE.

The purpose of parts 5218.0010 to 5218.0900 is to establish procedures and requirements for certification as a managed care plan relating to the management and delivery of medical services to injured employees within the workers' compensation system under *Minnesota Statutes*, sections 176.135, subdivision 1, paragraph (f), and 176.1351. No ~~health care provider, network of providers,~~

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Adopted Rules

employer, insurer, or any other person may suggest to an employee, or state in any name, contract, or literature that an entity constitutes person or entity shall hold itself out to be a workers' compensation managed care entity unless the entity is a certified managed care plan under this chapter.

5218.0100 APPLICATION FOR CERTIFICATION.

Subpart 1. **Certification.** Except as provided in part 5218.0200, subpart 4, any person or entity may make written application to the commissioner to provide managed care to injured employees for injuries and diseases compensable under *Minnesota Statutes*, chapter 176, under a plan certified by the commissioner. To obtain certification of a plan, an application shall be submitted on a form provided by the commissioner which shall include items A to N, and other matters related to parts 5218.0010 to 5218.0900.

B. The plan must provide the information in subitems (1) to (7). An individual may act in more than one capacity:

(5) the name, address, and telephone number of a communication liaison for the department, the insurer, the employer, and the employee; and

(6) the nature of any affiliation specified in part 5218.0200, subpart 4, between the managed care plan, or its parent, subsidiary, or other related organization, and an employer, insurer, or third party administrator; and

(7) the name of any entity, other than individual health care providers, with whom the managed care plan has a joint venture or other agreement to perform any of the functions of the managed care plan, and a description of the specific functions to be performed by each entity.

F. The managed care plan must include procedures to ensure that employees will receive services in accordance with subitems (1) to (7):

(3) Following the initial evaluation, upon request, the employee must be allowed to receive ongoing treatment from any participating health care provider as the employee's primary treating health care provider in one of the disciplines in units (a) to (e), if the provider is available within the mileage limitations in subitem (7) and the treatment is required under *Minnesota Statutes*, section 176.135, subdivision 1, is within the provider's scope of practice, and is appropriate under the standards of treatment adopted by the managed care plan or the standards of treatment adopted by the commissioner under *Minnesota Statutes*, section 176.83, subdivision 5:

(5) Employees must be allowed to change primary treating providers within the managed care plan at least once without proceeding through the managed care plan's dispute resolution process. In such cases, employees must make a request to the managed care plan for a change in their treating health care provider. A change of providers from the evaluating health care provider in subitems (1) and (2) to a primary treating doctor for ongoing treatment is not considered a change of doctor, unless the employee has received treatment from the evaluating health care provider more than once for the injury.

(6) Employees must be able to receive information on a 24-hour basis regarding the availability of necessary medical services available within the managed care plan. The information may be provided through recorded toll-free telephone messages after normal working hours. The message must include information on how the employee can obtain emergency services or other urgently needed care and how the employee can access an evaluation within 24 hours of the injury as required under unit (a).

(7) Employees must have access to the evaluating and primary treating health care provider within 30 miles of either the employee's place of employment or residence if either the residence or place of employment is within the seven county metropolitan area. The seven county metropolitan area includes Anoka, Carver, Dakota, Hennepin, Ramsey, Scott, and Washington counties. If both the employee's residence and place of employment are outside the seven county metropolitan area, the allowable distance is 50 miles. If the employee requires specialty services that are not available within the stated mileage restriction, the managed care plan may refer the employee to a provider outside of the stated mileage restriction. If the employee is medically unable to travel to a participating provider within the stated mileage restriction, the managed care plan shall refer the employee to an available nonparticipating provider to receive necessary treatment for the injury.

Subp. 4. Restrictions on employer or insurer formed plans.

A. Any person or entity, other than a workers' compensation insurer licensed under *Minnesota Statutes*, chapter 79A, or an employer for its own employees, may not own, form, or operate apply for certification as a certified managed care plan. A health maintenance organization, a self-insured employer, an entity licensed under *Minnesota Statutes*, chapter 62C or 62D, or a preferred provider organization that is self-insured for workers' compensation is not precluded from applying subject to *Minnesota Statutes*, chapter 72A, is eligible for certification. An employee of a certified managed care plan shall not be required to obtain services under the plan.

B. A managed care plan, in its application for certification, must disclose to the commissioner the existence of any of the factors in subitems (1) to (4), and any equivalent interest the managed care plan has in an insurer. The commissioner shall consider these factors and any other relevant information in determining whether a managed care plan is owned, operated, or formed by an insurer or employer liable for services under *Minnesota Statutes*, section 176.1351, subdivision 1.

(1) when an insurer or employer, or any member of its staff, directly participates in the formation or certification of the plan;

(2) when an insurer or employer, or any member of its staff assumes a position as a director, or other governing member, officer, agent, or employee of the plan;

(3) when an insurer or employer, or any member of its staff has any ownership interest or similar financial or investment interest in the managed care plan; or

(4) when an insurer or employer, or any member of its staff, enters into any contract with the plan that limits the ability of the plan to accept business from any other insurer or any other source.

This item is subpart does not intended to limit restrict cooperative efforts, whether by contract or otherwise, between a managed care plan, employer, third party administrator, and insurer to accomplish the purposes of *Minnesota Statutes*, section 176.1351.

C. For purposes of this subpart, the following definitions apply:

(1) "Staff" means any person who is a regular employee of an insurer or other employer under this rule, or who is a regular employee of any parent or subsidiary entity of an insurer or employer.

(2) "Insurer" includes any subsidiary, parent, or other related entity affiliated with the insurer or employer, including a third party administrator.

Subp. 5. Coverage.

B. The requirements established in parts 5218.0010 to 5218.0900 do not apply to an employee with a compensable injury under *Minnesota Statutes*, chapter 176; If the employer received notice of the injury before the effective date of the managed care plan contract, the employee may continue to treat with a nonparticipating provider who has been treating the injury until the employee requests a change of doctor. At that time, further services shall be provided by the managed care plan according to part 5218.0100, subpart 1, item F, subitems (2) and (3). Services by health care providers who are not participating providers must be delivered according to part 5218.0500.

5218.0250 NOTICE TO EMPLOYEE BY EMPLOYER.

An employee who is otherwise covered by a certified managed care plan is not required to receive services under a managed care plan until the employer gives the employee notice of items A to E. For employees enrolled after the effective date of this chapter, this individual notice must be given at the time of enrollment and, The notice must also be offered again to an employee when the employer receives notice of the an injury. In addition, the employer must post a notice of items A to E at a prominent location on the employer's premises. The posted notice shall remain posted as long as the employees are covered by the managed care plan. The posted and individual notices must include the information in items A to E:

A. that the employer has enrolled with the specified managed care plan to provide all necessary medical treatment for workers' compensation injuries after a specified date. An employee with an injury prior to enrollment ~~is covered only if~~ may continue to receive treatment from a nonparticipating provider until the employee changes doctors. The specified date notice to employees must specify the effective date of the managed care plan, which must be later than the date the notice is posted;

D. how the employee can access care under the managed care plan and the toll-free 24-hour telephone number of the managed care plan that informs employees of available services;

E. that the employee is required to receive services from a health care provider who is a member of the managed care plan, except in the following circumstances:

(1) if the employee has established a relationship documented history of treatment before the injury with a health care provider who is able to treat the injury and who has treated the employee at least two times within the previous two years before the injury maintains the employee's medical records under the requirements in part 5218.0500, subparts 1 and 2, except that if the employee changes doctors it must be to a doctor within the managed care plan;

5218.0300 REPORTING REQUIREMENTS FOR CERTIFIED MANAGED CARE PLAN.

Subpart 1. **Contracts; modifications.** A managed care plan shall provide the commissioner with a copy of the following contracts.

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Adopted Rules

B. New types of agreements between participating health care providers and the managed care plan that are not identical to the agreements previously submitted to the department under part 5218.0100, subpart 1, item E, subitem (1), which shall not be effective until approved by the commissioner.

Subp. 2. **Annual reporting.** In order to maintain certification, each managed care plan shall provide on the first working day following each anniversary of certification the following information in items A to D. The annual report must be accompanied by a nonrefundable fee of \$400:

A. a current listing of participating health care providers, including provider names, types of license, specialty, business address, and telephone number, and for any new health care provider the information required by part 5218.0100, subpart 1, item D a statement that all licenses are current and in good standing;

C. a report that summarizes peer review, utilization review, reported complaints and dispute resolution proceedings showing cases reviewed, issued involved, and any action taken; ~~or and~~

Subp. 3. **Plan amendments.** Any of the proposed changes to the certified managed care plan in items A to ~~D~~ C, other than changes to the health care provider list, must be reported and may not be implemented under the plan until approved by the commissioner. Submitted changes must be accompanied by a nonrefundable fee of \$150:

B. amendments to contracts between the managed care plan and another entity performing functions of the managed care plan; and

C. changes in the managed care plan's ownership, organizational status or affiliation with an insurer, employer, or third party administration under part 5218.0200, subpart 3; and

~~D.~~ any other amendments to the managed care plan as certified.

5218.0500 HEALTH CARE PROVIDERS WHO ARE NOT PARTICIPATING HEALTH CARE PROVIDERS.

Subpart 1. **Authorized services.** A health care provider who is not a participating health care provider may provide medical services to an employee covered by a managed care plan in any of the circumstances in items A to D. The employer or insurer must notify the managed care plan of treatment under items A, B, and D and the managed care plan, employer, or insurer must initiate the contact with the nonparticipating provider. The managed care plan must explain its requirements and procedures to the nonparticipating health care provider, and must provide the plan's toll-free telephone number through which the nonparticipating provider may obtain information about the plan's requirements and procedures and other information specified in part 5218.0100, subpart 1, item L.

A. A nonparticipating provider may deliver services to an employee if the treatment is within the provider's scope of practice, if the health care provider maintains the employee's medical records, and has a documented history of treatment ~~of that~~ with the employee at least twice in the two years before the date of injury, whether for a work-related condition or not, and so long as the provider complies with subpart 2 and Minnesota Statutes, section 176.1351, subdivision 2, clause (8). A documented history of treatment does not include evaluations for no or minimal compensation or treatment of an injury before notice of the injury is given to the employer. The requirement of a history of treatment will be deemed to be satisfied if the employee documents at least two visits with the provider within the two years before the date of the injury. Employees with a history of treatment that does not meet this standard may request approval from the managed care plan or the insurer. If approval is denied, the employee may contest the denial according to the procedures in subpart 3 and part 5218.0700.

The employee must promptly, within ten calendar days of notice to an employer of an injury, provide the managed care plan or insurer with copies of medical records or a letter from the health care provider documenting the dates of the previous treatment. The managed care plan or insurer must treat the medical records as private data. If the employee requests a change of doctor, further services shall be provided by the managed care plan according to part 5218.0100, subpart 1, item F, subitems (2) and (3).

D. A nonparticipating provider may deliver services to an employee when the employee has received treatment for a claimed injury from a nonparticipating provider under part 5218.0200, subpart 5, ~~item items B and D~~, and where liability for the injury is admitted or established later than 14 days after the employer received notice of the injury.

5218.0700 DISPUTE RESOLUTION.

Disputes that arise ~~between the employee and the~~ on an issue related to managed care plan related to the delivery of health services under this chapter shall first be processed without charge to the employee or health care provider through the dispute resolution process of the managed care plan. The managed care plan dispute resolution process must be completed within 30 days of receipt of a written request. If the dispute cannot be resolved, the parties may proceed under *Minnesota Statutes*, sections 176.106 and 176.305 or 176.2615.

5218.0760 MEDICAL CASE MANAGEMENT.

Subpart 1. **Role of case manager.** The medical case manager must monitor, evaluate, and coordinate the delivery of quality,

cost effective medical treatment, and other health services needed by an injured employee, and must promote an appropriate, prompt return to work. Medical case managers must facilitate communication between the employee, employer, insurer, health care provider, managed care plan, and any assigned qualified rehabilitation consultant to achieve these goals. The managed care plan must describe in its application for certification how injured employees will be selected for case management, the services to be provided, and who will provide the services.

Revenue Notices

The Department of Revenue began issuing revenue notices in July of 1991. Revenue notices are statements of policy made by the department that provide interpretation, detail, or supplementary information concerning a particular statute, rule, or departmental practice. The authority to issue revenue notices is found in *Minnesota Statutes* §270.0604.

Department of Revenue

Revenue Notice #93-24: Corporate Franchise Tax - Royalties, Fees and Other Like Income

Minnesota Statutes, section 290.01, subd. 19d(11) allows a modification for corporations decreasing federal taxable income for a percentage of royalties, fees and other like income accrued or received from a foreign operating corporation or foreign corporation which is part of the same unitary business as the receiving corporation.

For the purposes of *Minn. Stat.* § 290.01, subd. 19d(11) "royalties, fees and other like income" is defined as follows:

- (1) "Royalties" are the amounts of income received or accrued for the use of patents, copyrights, secret processes and formulas, good will, trademarks, trade brands, franchises and other similar intangible proprietary property;
- (2) "Fees" are payments for services performed or to be performed, and;
- (3) "Other like income" includes other income accrued or received for similar use of proprietary intangibles or the performance of services, but by the terms of the contract is not referred to as royalties or fees.

Royalties, fees and other like income does not include dividends, interest, rent and loan repayment.

Dated: 22 November 1993

River Stories That Warm Your Heart

A Stretch on the River. 1950 novel about the son of a wealthy family who goes to work on a Mississippi River towboat to avoid being drafted. With power, gusto and humor, author Richard Bissel creates an energetic, rowdy, and delightful account of a typical trip up the river, accurately re-creating a colorful era of towboating on America's major waterway. Stock #17-6-SR, \$8.95 plus tax.

Old Times on the Mississippi River. George Merrick's lively, loving, and humorous reminiscences of his steamboat life from the bottom up, as a pantry boy, apprentice engineer, second clerk, and "cub" pilot. First published in 1909, he describes steamboat operations—from machinery and personnel to the economics of the business—with vivid examples and rich detail. 323 pp. includes appendices and index. Stock #17-45-SR. \$8.95 plus tax.

Canoeing with the Cree. Minnesota's distinguished newsman, Eric Sevareid, wrote his book in 1935 about a canoe journey he and a classmate made to Hudson Bay. The classic recounts their trip on the Mississippi, Minnesota and Red River of the North Rivers into Lake Winnipeg, and then God's River to Hudson Bay. 209 pp. includes index, maps and photos. Stock #17-14-SR. \$6.95 plus tax.

TO ORDER: Send to Minnesota's Bookstore, 117 University Avenue, St. Paul, MN 55155. Call (612) 297-3000, or toll-free nationwide: 1-800-657-3757. Minnesota residents please include 6½% sales tax. St. Paul residents include 7%. On all orders, add \$3.00 per order for shipping. Prepayment is required. Please include daytime phone. VISA/MasterCard, American Express and Discover orders accepted over phone and through mail. *Prices are subject to change.* FAX: (612) 296-2265.



Official Notices

Pursuant to the provisions of Minnesota Statutes §14.10, an agency, in preparing proposed rules, may seek information or opinion from sources outside the agency. Notices of intent to solicit outside opinion must be published in the *State Register* and all interested persons afforded the opportunity to submit data or views on the subject, either orally or in writing.

The *State Register* also publishes other official notices of state agencies, notices of meetings, and matters of public interest.

Minnesota Community College System

Worthington Community College

Notice of State Surplus Property

The Commissioner of Administration and the Worthington Community College offer for sale by sealed bid approximately 2.1 acres of land located in the area of College Way Drive and Thompson Avenue in Worthington, Minnesota.

Legal description from survey to govern land being sold.

The parcel will be sold on the basis of highest bid, **but not for less than the minimum bid of \$17,340.00**. All bids must be submitted by 2:00 P.M., December 15, 1993, to Department of Administration, Real Estate Management Division, 309 Administration Building, 50 Sherburne Avenue, St. Paul, Minnesota 55155.

For bid information, forms, envelopes, property survey and legal description, contact Mr. Donald Viessman, Worthington Community College, telephone (507) 372-2107, OR Real Estate Management Division, telephone (612) 296-6674.

Department of Labor and Industry

Labor Standards Division

Notice of Prevailing Wage Certifications for Commercial Construction Projects

Effective November 22, 1993 prevailing wage rates were determined and certified for commercial construction projects in: Anoka county: St. Francis Elementary School Media Center Mechanical Systems & Middle School 1994 Reroofing-St. Francis. Hennepin county: U of M Shops Building Renovation Systems Furniture-Minneapolis & Rehab Services Remodeling-Minneapolis. Lake county: Wastewater Treatment Facility Phase I Alterations & Additions-Two Harbors. Ramsey county: Edgerton Elementary School Remodeling-Maplewood. Rice county: MN Academy For The Blind Library Bldg Asbestos Removal-Faribault. St. Louis county: U of M MWAH Water Piping Replacement-Duluth, Virginia Madison Intermediate School-Virginia. Stevens county: Morris Welding Shop Addition-Morris. Winona county: ISD #861 Washington-Kosciusko & Jefferson Elementary Schools Basement Fire Protection Sprinklers-Winona.

Copies of the certified wage rates for these projects may be obtained by writing the Minnesota Department of Labor and Industry, Prevailing Wage Section, 443 Lafayette Road, St. Paul, Minnesota 55155-4306. The charge for the cost of copying and mailing are \$1.36 per project. Make check or money order payable to the State of Minnesota.

John B. Lennes Jr.
Commissioner

Labor Standards Division

Notice of Prevailing Wage Determinations for Highway/Heavy Projects

On November 22, 1993 the commissioner determined and certified prevailing wage rates for Highway/Heavy construction projects in each county statewide.

Certifications will be made for specific projects by request of letting entities advertising for bids. Copies may be obtained by writing the Minnesota Department of Labor and Industry, Prevailing Wage Section, 443 Lafayette Road, St. Paul, Minnesota 55155-4306, or calling (612) 296-6452. The charges for the cost of copying and mailing are \$1.00 for the first copy and \$.50 for any additional copies. Please note that the cost for one county varies according to the number of pages per county.

John B. Lennes Jr.
Commissioner

Minnesota Comprehensive Health Association

Notice of Meeting of the Ad Hoc Committee on Strategic Planning

NOTICE IS HEREBY GIVEN that a meeting of the Minnesota Comprehensive Health Association (MCHA), Ad Hoc Committee on Strategic Planning will be held at 8:00 a.m. on Tuesday, November 23, 1993 at Blue Cross and Blue Shield of Minnesota, 3535 Blue Cross Road, Eagan, in the 4th floor board room.

For additional information please call Lynn Gruber at (612) 593-9609.

Minnesota Early Childhood Care and Education Council

NOTICE IS HEREBY GIVEN that the Minnesota Early Childhood Care and Education Council (ECCE) has scheduled a meeting of the Council's Licensing Task Force.

The meeting will be held on December 8, 1993 from 11 AM to 1 PM, in room 116A of the Administration Building, 50 Sherburne Avenue, St. Paul, MN. The purpose of the meeting is to consider proposals from the Council for changes to Rule 2&3 dealing with licensing for child care. Direct inquiries to: Executive Director, Minnesota Early Childhood Care and Education Council, Third Floor, Ford Building, 117 University Avenue, St. Paul, MN 55155; Phone: 612/296-1400; FAX 612/296-1401; TDD MRS 612/297-5353 Metro) or TDD MRS 800/627-3529 (Greater Minnesota).

Minnesota Pollution Control Agency

Water Quality Division

Notice of Solicitation of Outside Information or Opinions Regarding Proposed Amendment to Rule Governing Water Quality Permit Fees, Minn. Rules parts 7002.0210 to 7002.0310.

The Minnesota Pollution Control Agency (Agency) is seeking information or opinions from interested parties on amendments of the rules governing water quality permit fees, *Minnesota Rules* parts 7002.0210 to 7002.0310. Fees are assessed to all persons required to obtain a permit from the Agency. Permits are required for the construction, installation, or operation of a disposal system and the associated discharge of a pollutant into the waters of the state.

The adoption of the rule is authorized by *Minnesota Statutes*, section 116.07, subd. 4d, which allows the Agency to collect permit fees to cover the costs of reviewing and acting upon permit applications and implementing and enforcing the conditions of the permit pursuant to agency rules. This statute also directs the Agency to adopt rules according to section 16A.128 to insure fees are not inappropriately collected.

The Agency is planning to renovate the water quality permit fee rules by amending the process for establishing the amount of a permit fee. Most fees are currently based on flow discharged from a facility. The Agency plans to amend the rules so fees are more closely related to the quantity of pollutants discharged.

Pollution Control Agency

Hazardous Waste Division

Notice of Solicitation of Outside Information or Opinions Regarding Proposed Amendments to the Rules Governing the Management of Used Oil and Related Wastes, *Minnesota Rules* Ch. 7045.

NOTICE IS HEREBY GIVEN that the Minnesota Pollution Control Agency (Agency) is seeking information or opinions from sources outside the Agency in preparing to propose amendments to the rules governing the management of used oil. The proposed amendments will incorporate federal regulations governing used oil management. The adoption of the rule is authorized by *Minnesota Statutes*, section 116.07, subd. 4 (1992), which permits the Agency to adopt rules governing the management of hazardous waste.

The Agency requests information and opinions concerning the subject matter of the rule. Interested persons or groups may

Official Notices

submit data or views on the subject matter of concern in writing or orally. Written statements should be addressed to Glenn Skuta, Hazardous Waste Division, Minnesota Pollution Control Agency, 520 Lafayette Road North, St. Paul, MN 55155. Oral statements will be received during regular business hours over the telephone at 612/297-8319 and in person at the above address.

All statements of information and opinions shall be accepted until December 22, 1993. Any written material received by the Agency shall become part of the rulemaking record to the attorney general or administrative law judge in the event that the rule amendments are adopted.

Charles W. Williams
Commissioner

Public Employees Retirement Association

Notice of Meetings

An Information Forum of the Public Employees Retirement Association will be held on Tuesday, November 23, 1993, at 9:30 a.m. in the offices of the Association, 514 St. Peter Street, Suite 200 - Skyway Level, Saint Paul, Minnesota.

Department of Transportation

Notice of Solicitation for Public Review and Comment on the 1993 Minnesota State Rail Plan

The Minnesota Department of Transportation, Office of Railroads and Waterways is offering an opportunity for public review and comment on the Draft Minnesota State Rail Plan. The draft rail plan is presented in three parts. Part 1: Minnesota Rail Service Improvement Program (MRSI): Evaluation and Inventory describes the state's role in preserving and enhancing rail service. Part 2: Freight Rail Issues identifies important current issues affecting railroads and rail stakeholders in the state. Part 3: Rail System and Line Analysis serves Mn/DOT as a guide and programming document for state investments in eligible rail lines through the state's MRSI program and responds to the Federal Railroad Administration requirements for receiving federal funding assistance on project lines.

The Draft Minnesota State Rail Plan is available for review at the Department of Transportation District Offices: District 1 - Duluth, 1123 Mesaba Ave., Duluth, MN 55811; District 2 - Bemidji, Box 490, Bemidji, MN 56601; District 3 - Brainerd, 1991 Industrial Park Rd., Baxter, MN 56401; District 4 - Detroit Lakes, P.O. Box 666, 1000 W. Hwy. 10, Detroit Lakes, MN 56502; District 6 - Rochester, Box 6177, 2900 48th St., N.W., Rochester, MN 55903-6177; District 7 - Mankato, P.O. Box 4039, Mankato, MN 56001; District 8 - Willmar, P.O. Box 768, 2505 Transportation Rd., Willmar, MN 56201; Metro District, Waters Edge Building, 1500 West Co. Rd. B2, Roseville, MN 55113-3174; or Office of Railroads and Waterways, Suite 925, Kelly Annex, 395 John Ireland Blvd., St. Paul, MN 55155.

Comments must be received by 4:30 p.m. on December 31, 1993. Comments are encouraged and should identify Part 1, 2 or 3 of the rail plan, reason for comment, and any change proposed. Please direct all correspondence to:

Office of Railroads and Waterways
Minnesota Department of Transportation
Suite 925, Kelly Annex
395 John Ireland Blvd.
St. Paul, MN 55155

Contact Ken Buckeye 612/296-8554 or Annette Swanson 612/297-3888 Fax 612/297-1887

In addition to requests by state agencies for technical/professional services (published in the State Contracts section), the *State Register* also publishes notices about grant funds available through any agency or branch of state government. Although some grant programs specifically require printing in a statewide publication such as the *State Register*, there is no requirement for publication in the *State Register* itself.

Agencies are encouraged to publish grant notices, and to provide financial estimates as well as sufficient time for interested parties to respond.

Pollution Control Agency (MPCA)

Notice of Grant Funds Available

The Solid Waste Management Processing Facilities Capital Assistance Program (CAP) was established by the Minnesota Legislature to provide financial and technical assistance to cities, counties, sanitary districts, and solid waste management districts to encourage the proper management of solid waste. Under an Executive Reorganization Order issued by Governor Carlson on September 17, 1993, the authority for and administration of the CAP Program was moved from the Minnesota Office of Waste Management to the MPCA.

The objective of the CAP program is to minimize land disposal of solid waste through the promotion of waste reduction, recycling, and resource recovery. The CAP Program is intended to encourage and assist the development and implementation of solid waste processing facilities, and to transfer the knowledge and experience gained from those projects to other communities in the state.

This notice is issued by the MPCA Commissioner under authority provided in *Minnesota Rules* Parts 9210.0100 to 9210.0180. The purpose of this notice is to solicit preliminary applications for projects that meet the CAP Program objectives.

Cities, counties, solid waste management districts, and sanitary districts are eligible to apply for CAP grant assistance. Projects eligible for CAP grants are solid waste processing facilities that include resource recovery. Examples of eligible facilities projects are waste-to-energy facilities, composting facilities, recycling facilities, and transfer stations that will serve waste processing facilities.

Projects for recycling or composting facilities may receive grants equal to 50 percent of the eligible project costs or up to \$2 million, whichever is less, except that projects completed as a result of intercounty cooperative agreements may receive grant assistance up to 50 percent of the eligible capital cost of the project, or \$2 million times the number of participating counties, whichever is less.

Projects for other types of processing facilities may receive grants equal to 25 percent of the eligible project cost or up to \$2 million, whichever is less, except that projects completed as a result of intercounty cooperative agreements may receive grant assistance up to 25 percent of the eligible capital cost of the project, or \$2 million times the number of participating counties, whichever is less.

Copies of the CAP Procedures Manual, including the rules applicable to the program and application forms are available by contacting:

Mary James
Minnesota Pollution Control Agency
Ground Water and Solid Waste Division
Local Government Assistance Unit
520 Lafayette Road
St. Paul, Minnesota 55155-4194
(612) 296-8624, or 1-800-657-3864 (toll-free in Minnesota)

Preliminary applications should be mailed or hand delivered to the MPCA. Faxed submittals will not be accepted.

Preliminary applications meeting the requirements of *Minnesota Rules* Parts 9210.0100 to 9210.0180 must be received by the MPCA at the above address by 4:30 p.m., CST, Friday, **January 21, 1994**.

Department of Trade and Economic Development

Minnesota Small Business Development Centers

Proposals Sought for Operation of a Small Business Development Center in the Mankato Area

The Department of Trade and Economic Development (DTED) presently serves as "host institution" in Minnesota for receipt of U.S. Small Business Administration funds for operation of a network of small business development centers.

DTED is seeking proposals from qualified organizations for operation of a small business development center in the Mankato area which includes the following counties:

Blue Earth County
Brown County
Faribault County
Freeborn County
Le Sueur County
Martin County
McLeod County
Nicollet County
Renville County
Rice County
Sibley County
Steele County
Waseca County
Watsonwan County

This function is presently performed by Mankato State University which has resigned from the program effective December 31, 1993. A replacement is sought to begin operations as soon after January 1, 1994 as possible.

The small business development center program is created by federal law. Federal funds pass to DTED by a contract with the U.S. Small Business Administration which defines the programmatic and financial elements of service delivery. Participating centers in Minnesota contract on a calendar year basis with DTED.

Interested organizations should contract Randall D. Olson to obtain a copy of the current cooperative agreement and other requirements.

Randall D. Olson, State Director
Minnesota Small Business Development Centers
500 Metro Square
121 7th Place East
St. Paul, Minnesota 55101-2146
Telephone # 612-297-5770

Written proposals are due at DTED not later than 5:00 p.m., January 14, 1994.

Professional, Technical & Consulting Contracts

Department of Administration procedures require that notice of any consultant services contract or professional and technical services contract which has an estimated cost of over \$10,000 be printed in the *State Register*. These procedures also require that the following information be included in the notice: name of contact person, agency name and address, description of project and tasks, cost estimate, and final submission date of completed contract proposal. Certain quasi-state agencies are exempted from some of the provisions of this statute.

In accordance with *Minnesota Rules* Part 1230.1910, certified Targeted Group Businesses and individuals submitting proposals as prime contractors shall receive the equivalent of a 6% preference in the evaluation of their proposal. For information regarding certification, call the Materials Management Helpline (612)296-2600 or [TDD (612)297-5353 and ask for 296-2600].

Department of Corrections

Health Services Unit Request for Proposals: Psychiatric Services

NOTICE IS HEREBY GIVEN to request proposals to provide psychiatric consultation services to the Minnesota Correctional Facility - Oak Park Heights Mental Health Unit. Services include initial psychiatric evaluation, prescription of psychotropic medications, evaluate/certify mental illness for emergency holds and judicial commitment. Vendor will spend approximately 240 hours per year at the Mental Health Unit - Oak Park Heights. Proposals should cover the period of January 1, 1994 through June 30, 1995.

Bidding Process:

Proposal information is restricted and not publicly available until afterward by the Department of Corrections.

Proposals are to be prepared simply, providing a straight forward concise description of the vendor's capabilities to satisfy the requirements of this proposal. Your proposal document should respond completely to the requirements indicated in this request. All comprehensive documentation and supplemental information should be enclosed as a attachment or exhibit.

Proposals must be received by 4:30 p.m. Friday, December 3, 1993.

For additional information, contact:

Dana P. Baumgartner, Health Care Administrator
Department of Corrections
300 Bigelow Building
450 N. Syndicate Street
St. Paul, Minnesota 55104
Phone: (612) 642-0248

Minnesota Higher Education Coordinating Board

Notice of Availability of Request for Proposals to Conduct Survey on Planning for Education and Careers.

The Minnesota Higher Education Coordinating Board is requesting proposals to survey students, parents, school counselors, post-secondary admissions officials, and financial aid administrators about ways to help students make successful transitions from K-12 education to higher education and work. The objective is to determine the level of knowledge about academic, financial, and career planning by students and parents, need and desire for future information and guidance, and most effective ways of communication.

Cost of the contract is not expected to exceed \$25,000.

Proposals must be submitted no later than December 17, 1993.

Copies of the request for proposals are available from:

Ann Grindland
Minnesota Higher Education Coordinating Board
Suite 400 Capitol Square
550 Cedar Street
St. Paul, Minnesota 55101
(612) 296-9681

Professional, Technical & Consulting Contracts

Department of Human Services

Health Care Administration

Notice of Requests for Proposals: Study of Minnesota's Options in Regard to §209 (b), §1634 and SSI for Purposes of Determining Eligibility for the Medical Assistance Program

I. Introduction

The Minnesota Department of Human Services, Health Care Administration (the Department) is soliciting proposals from qualified parties to study Minnesota's options in regard to: §209(b) (§1902(f) of the Social Security Act); §1634 of the Act; and SSI for the purposes of determining eligibility for aged, blind and disabled persons under the State's Medical Assistance (MA) Program. The contractor will be required to draft a comprehensible study answering the questions in Item IV, orally present this draft study and present a final study to designated Department staff.

This Request for Proposals does not obligate the Department to complete the study, and the Department reserves the right to cancel the solicitation if it is considered to be in its best interest.

II. Objectives

This study will provide the Department with accurate information, allowing the Department to evaluate Minnesota's options regarding §209(b), §1634 and SSI eligibility status.

III. Qualifications of Respondents

Qualified respondents must be able to: demonstrate expertise in analysis of federal regulations and policies regarding SSI, state supplemental programs and Medicaid eligibility; demonstrate successful experience in the analysis of the fiscal implications of state options in this area; demonstrate expertise in determining costs of health benefits; demonstrate expertise in projecting health care costs related to state options in this area; and provide the Department with its anticipated level of participation in the study, as well as any services or information to be provided by the Department.

IV. Project Tasks

The contractor will complete a draft study answering the following questions in detail:

A. History

1. How did §209(b) develop?
2. Why did Minnesota select this option? Are the reasons still valid?
3. How does §209(b) differ from §1634 and SSI?
4. How are current §209(b) states more restrictive than SSI?
5. Why have some states subsequently dropped their §209(b) status?
6. What fiscal impact has dropping §209(b) had in those states?
7. How is Minnesota's eligibility different from SSI?
What methodologies and standards are more restrictive?
More liberal?

B. Options

1. Does §209(b) still exist, particularly in light of §1902(r)(2)?
2. What options does Minnesota have in this regard, §209(b), §1634, or SSI?
3. How would each of these options be implemented:
 - a. What specific eligibility methodologies and standards would change?
 - b. What legislation and rulemaking would be required?
 - c. Are agreements with the Social Security Administration required?
 - d. Identify any computer system issues with regard to MAXIS and MMIS.
 - e. What would be the effect on the Minnesota Supplemental Aid (MSA) and group residential housing programs?
 - f. Identify any other implementation steps required.

Professional, Technical & Consulting Contracts

C. Impact (How would selecting each of the options impact the following):

1. Identify the potential number of eligible individuals, as well as how many individuals would gain or lose eligibility for the MA, General Assistance Medical Care, MSA and group residential housing programs. Estimate the enrollment effects of different options on all affected State programs.
2. Estimate the fiscal impact on clients and state and local agencies. Estimate the fiscal impacts on all State programs affected.
3. How could health care reform impact any of these options? Estimate the most likely effects of federal health care reform.
4. Identify any other potential short- or long-term impact of each option.
5. How would the Quality Control error rate be impacted if SSI cases are removed from the Quality Control sample?
6. What is the impact on COLA pass along rules for MSA?

The contractor will orally present the draft study to designated Department staff, concluding with a final study paper due by the project completion date in Item VIII.

V. Human Rights Compliance

Proposals exceeding \$50,000 must include evidence of the respondent's compliance with the Human Rights Act attached to the envelope or package submitted under Item VI.

VI. Submission of Proposals

All proposals must be sent to and received by:

Jane Wilcox Hardwick
Federal Compliance and Legislation Unit
Minnesota Department of Human Services
444 Lafayette Road
St. Paul, Minnesota 55155-3853
(612) 296-7429

not later than 4:00 p.m. on January 3, 1994. Jane Wilcox Hardwick is the only individual authorized to answer questions concerning proposal requirements.

Late proposals will not be accepted. Submit six easily reproduced copies of the proposal in a sealed mailing envelope or package with the respondent's name and address clearly written on the outside. Each copy of the proposal must be signed, in ink. Prices and terms of the proposal must be valid for the length of the proposal.

Selection and notification of any proposed study will occur by February 14, 1994.

VII. Project Costs

The Department has estimated that the cost of this study will not exceed \$50,000.

VIII. Project Completion Date

The study must be completed by July 1, 1994 or within six months from the date the contract is executed, whichever occurs first.

IX. Proposal Contents

The following are considered the minimum contents of the proposal:

- A. Restatement of the objective, to demonstrate the respondent's understanding of the project
- B. Description of the deliverables to be provided by the respondent
- C. Outline of the respondent's background and experience with particular emphasis on the qualifications noted in Item III
- D. Detailed cost and work plan
- E. Anticipated level of the Department's participation in the study, as well as any services or information to be provided by the Department

Professional, Technical & Consulting Contracts

X. Evaluation

All proposals received by January 3, 1994 will be evaluated by designated representatives of the Department. A personal interview may be part of the evaluation process. Proposals will be evaluated on the following factors:

- A. Expressed understanding of the study
- B. Study work plan
- C. Study cost details
- D. Qualifications of respondent and respondent's personnel

Department of Human Services

Division for Persons with Developmental Disabilities

Request for Proposals (RFP) to Evaluate Demonstration Projects Relating to Outcome Based Service Delivery for Persons with Developmental Disabilities

This request for proposal does not obligate the state to complete the project. The state reserves the right to cancel the solicitation if it is considered to be in its best interests. The Social Service Administration of the Minnesota Department of Human Services (DHS) is soliciting proposals to evaluate demonstration projects relating to outcome based service delivery for persons with developmental disabilities.

The 1993 Legislature passed legislation (1993 *Laws of Minnesota*, First Special Session, Chapter 1, Article 4, Section 11) which authorized the Commissioner of Human Services to demonstrate improvement in the efficiency and effectiveness of services to residents of intermediate care services for persons with mental retardation or related conditions (ICF/MR) and other services.

The objectives of the project are to: 1) increase the influence of consumers and families in the development, monitoring and improvement of services, 2) measure service quality in terms of desired outcomes for consumers, and allow those outcomes to be the basis for service improvement, redesign, and development, 3) design/adopt a single set of consumer outcome indicators over time, which can be used to evaluate and improve service quality, 4) enable providers to assume more direct responsibility for providing and enhancing services, and encourage providers to implement quality improvement management, 5) refocus the state's role to one of assistance and support rather than regulation and sanction, 6) establish local service networks which will provide a broader array of choices for individuals over time, and increase service effectiveness, coordination and efficiency among service providers, and 7) determine a variety of effective methods to secure, evaluate and pay for desired consumer outcomes.

To be considered, respondents to this request must have: 1) extensive training and experience in developing and implementing evaluation designs for human services, 2) strong and established working relationships with the federal government in evaluating services preferably services to persons with developmental disabilities, 3) capacity to access and/or provide training and technical assistance as needed by the project, 4) extensive knowledge of various models of outcome based human service delivery preferably in the area of developmental disabilities, 5) a willingness to work with various stakeholders to design evaluation methods which are sensitive to evaluation needs of local communities and responsive to the need for statewide comparisons, 6) the ability to integrate program evaluation activities with training and technical assistance capacities to assure program improvement, and 7) knowledge of automated systems and statistical methods. Familiarity with Department information systems and data bases on services to persons with developmental disabilities is desirable.

The major duties of this contract are: 1) assist the Department in the developing and securing federal waiver request (s) necessary to implement demonstrations, 2) develop methods and protocols, including data collection and analysis, to evaluate demonstration projects on a statewide and local basis. The evaluation should also meet specifications of the federal waiver requirements, 3) provide and/or arrange for training and technical assistance to demonstration projects to develop and implement outcome based assessment, planning, and evaluation, and 4) produce a written report of the effectiveness of the demonstration projects. The State estimates the cost of these services at \$40,000.00 from January 1994 to January 1995.

Proposals in response to this RFP must be submitted following the RFP application information. A copy of the complete RFP material is available by contacting the Division for Persons with Developmental Disabilities at 612/296-2160 and requesting the "Outcome Based Service Delivery Demonstration Project RFP." There will not be a pre-application meeting. Further questions after review of the RFP should be addressed to Robert F. Meyer at 612/297-0307.

All applicants must provide three copies of their completed proposal to the Division for Persons with Developmental Disabilities, 444 Lafayette Road, St. Paul, Minnesota, 55155-3825, no later than the close of business (4:30 PM) on December 15, 1993.

State Designer Selection Board

Request for Proposal for a Project with the Veterans Homes Board

To Minnesota Registered Design Professionals:

The State Designer Selection Board has been requested to select designers for a project with the Veterans Homes Board. Design firms who wish to be considered for these projects should deliver proposals on or before 4:00 p.m., December 14, 1993, to:

George Iwan
Executive Secretary, State Designer Selection Board
Room G-10, Administration Building
St. Paul, Minnesota 55155-3000

The proposal must conform to the following:

- 1) Seven (7) copies of the proposal will be required.
- 2) All data must be on 8 1/2" x 11" sheets, soft bound.
- 3) The cover sheet of the proposal must be clearly labeled with the project number, as listed in number 7 below, together with the designer's firm name, address, telephone number and the name of the contact person.

4) Mandatory Proposal contents in sequence:

a) Identity of firm and indication of its legal status, i.e. corporation, partnership, etc. If the response is from a joint venture, this information must be provided for firms comprising the joint venture.

b) Names of the persons who would be directly responsible for the major elements of the work, including consultants, together with brief descriptions of their qualifications. Identify roles that such person played in projects which are relevant to the project at hand. **NOTE NEW REQUIREMENT:** The proposal must contain a statement indicating whether or not the consultants listed have been contacted and have agreed to be a part of the design team.

c) A commitment to enter the work promptly, if selected, by engaging the consultants, and assigning the persons named 4b above along with adequate staff to meet the requirements of work.

d) A list of State and University of Minnesota current and past projects and studies awarded to the prime firm(s) submitting this proposal during the four (4) years immediately preceding the date of this request for proposal. The prime firm(s) shall list and total all fees associated with these projects and studies whether or not the fees have been received or are anticipated. In addition, the prime firm(s) shall indicate the amount of fees listed which were paid directly to engineers or other specialty consultants employed on the projects and studies listed pursuant to the above. **NOTE:** Please call for a copy of the acceptable format for providing this information.

e) A section containing graphic material (photos, plans, drawings, etc.) as evidence of the firm's qualification for the work. The graphic material must be identified. It must be work in which the personnel listed in "c" have had significant participation and their roles must be clearly described. It must be noted if the personnel were, at the time of the work, employed by other than their present firms.

The proposal shall consist of no more than twenty (20) faces. Proposals not conforming to the parameters set forth in this request will be disqualified and discarded without further examination.

5) Statutory Proposal Requirements:

In accordance with the provisions of *Minnesota Statutes*, 1981 Supplement, Section 363.073; for all contracts estimated to be in excess of \$50,000.00, all responders having more than 20 full-time employees at any time during the previous 12 months must have an affirmative action plan approved by the Commissioner of Human Rights before a proposal may be accepted.

The Proposal will not be accepted unless it includes one of the following:

- a) A copy of your firm's current certificate of compliance issued by the Commissioner of Human Rights; or
- b) A statement certifying that the firm has a current certificate of compliance issued by the Commissioner of Human Rights; or
- c) A statement certifying that the firm has not had more than 20 full-time employees in Minnesota at any time during the previous 12 months; or
- d) A statement certifying that the firm has an application pending for a certificate of compliance.

Professional, Technical & Consulting Contracts

6) Design firms wishing to have their proposals returned after the Board's review must follow one of the following procedures:

a) Enclose a self-addressed stamped postal card with the proposals. Design firms will be notified when material is ready to be picked up. Design firms will have two (2) weeks to pick up their proposals, after which time the proposals will be discarded; or

b) Enclose a self-addressed stamped mailing envelope with the proposals. When the Board has completed its review, proposals will be returned using this envelope.

In accordance with existing statute, the Board will retain one copy of each proposal submitted.

Any questions concerning the Board's procedures, their schedule for the project herein described or the fee format form may be referred to George Iwan at (612) 296-4656.

7) PROJECT - 10-93

**Nursing Care Veterans Home
Fergus Falls, Minnesota**

General Description of Project: The 1993 Legislature (Special Session Chapter 1) authorized establishment of a new Minnesota Veterans Home to be located in Fergus Falls, Minnesota.

Project Details: The project consists of the design and construction of an 85 bed skilled nursing care facility in Fergus Falls, Minnesota at a site to be provided by the City of Fergus Falls, Minnesota. The new facility will be constructed with matching funds from the U.S. Department of Veterans Affairs (USDVA) (65%) and local community funds (35%).

The project shall be designed and constructed in accordance with the USDVA requirements for skilled nursing care facilities, the Minnesota Department of Health requirements, the Minnesota Building Code and all other applicable codes and regulations. A choice may be made by the Board of Directors to adapt the Luverne Veterans Home facility to the Fergus Falls site.

Work to be performed by Architect/Engineer: Complete architectural and engineering design for the following design and construction phases: schematic design, design development, construction document, bidding and construction observation. The scope of work also includes cooperation and assistance in submittal of the preliminary and final drawings and specifications to USDVA.

Total Project Budget Estimate: \$7 million

Architect Fee for the Work: The proposed architect/engineer fee is 7% of construction costs.

Architect/Engineer Qualifications: It is required that the Architect/Engineer firm have prior experience in the area of skilled nursing care facilities. We further request that the firm providing names of, locations of, number of beds, year constructed in, and copies of any waivers from the Minnesota Department of Health or the Minnesota Building Codes issued on constructed or designed facilities to demonstrate their prior experience in design of a skilled care nursing facilities.

Questions concerning this project may be referred to Rich Ziedt at (612) 296-2076.

Maureen Steele Bellows, Chair
State Designer Selection Board

MAILING LISTS GALORE

Successful business means successful sales

The Print Communications Division has a variety of mailing lists of licensed professionals and permit holders that will enable you to focus your marketing efforts on a targeted audience.

Types of lists available are: registered nurses, real estate agents, physicians, insurance agents, boat owners, hunters, cosmetologists, teachers, and many more! And you can get them on printouts, cheshire/pressure sensitive labels, as well as 9-track magnetic tapes.

What's more, you can choose from several selection capabilities. You will find our selections most helpful and beneficial to your business when you learn that you can acquire names and addresses of individuals in the areas you need to target most.

Find out more about our mailing lists by writing for our free mailing list catalog. In a hurry? Call (612) 296-0930 for more information. Requests can be sent to: Print Communications Division, Mailing List Service, 117 University Avenue, St. Paul, MN 55155. FAX: (612) 297-8260.

Department of Transportation

Engineering Services Division

The Minnesota Department of Transportation is seeking consultants to provide services in Public Relations, Advertising, and Marketing Research. These services will provide the public with information about Mn/DOT activities, including construction projects, scheduled traffic interruption, etc.

Work is proposed to start in January 1994 and continues through June 1996.

A Request for Proposal can be obtained from the Mn/DOT Consultant Agreements Engineer.

Mr. Gabriel S. Bodoczy, P.E.
Consultant Agreements Unit
Minnesota Department of Transportation
395 John Ireland Boulevard, Room 720S
St. Paul, Minnesota 55155
Attention: Linda Moline
Fax: (612) 282-5127

Requests for Proposals will be available by mail from this office through December 8, 1993. A written request is required to receive the Request for Proposal. Indicate whether your firm is a Small Targeted Business or Disadvantaged Business Enterprise in your written request. After December 8, 1993, the Request for Proposal must be picked up in person.

No time extensions will be granted.

Proposals must be received at the above address no later than 2:00 P.M. on December 16, 1993.

This request does not obligate the State of Minnesota Department of Transportation to complete the work contemplated in this notice, and the Department reserves the right to cancel this solicitation. All expense incurred in responding to this notice shall be borne by the responder.



Social workers', counselors' and therapists' guides and directories

Chemical Dependency Programs Directory 1993-94. Features comprehensive listings for programs ranging from prevention/intervention services to a wide range of treatment services. Each type of program includes a listing of facilities and description of programs. Stock No. 1-12-SR, \$17.00 + tax.

Process parenting—Breaking the Addictive Cycle. This training manual provides parent education and treatment techniques for professionals working with recovering chemically dependent parents or dysfunctional families. Stock No. 5-4-SR, \$15.00 + tax.

TO ORDER: Send to Minnesota's Bookstore, 117 University Avenue, St. Paul, MN 55155. Call (612) 297-3000, or toll-free nationwide: 1-800-657-3757. Minnesota residents please include 6½% sales tax. St. Paul residents include 7%. On all orders, add \$3.00 per order for shipping. Prepayment is required. Please include daytime phone. VISA/MasterCard, American Express and Discover orders accepted over phone and through mail. *Prices are subject to change.* FAX: (612) 296-2265.

Non-State Public Bids and Contracts

The *State Register* also serves as a central marketplace for contracts let out on bid by the public sector. The *Register* meets state and federal guidelines for statewide circulation of public notices. Any tax-supported institution or government jurisdiction may advertise contracts and requests for proposals from the private sector.

It is recommended that contracts and RFPs include the following: 1) name of contact person; 2) institution name, address, and telephone number; 3) brief description of project and tasks; 4) cost estimate; and 5) final submission date of completed contract proposal. Allow at least three weeks from publication date (four weeks from date article is submitted for publication). Surveys show that subscribers are interested in hearing about contracts for estimates as low as \$1,000. Contact the editor for further details.

Metropolitan Waste Control Commission

Public Notice for Letter of Interest for Professional Services

The Metropolitan Waste Control Commission will be seeking the services of a Professional Engineering Consultant for design services and construction support of a Distributed Process Control System for its 250 MGD Metro Wastewater Treatment Plant. Consultant expertise requirements include: Distributed Process Control System design, programming, and startup; soliciting input for the design from all levels of a union organization; organizational development; helping people cope with change; and designing and implementing training plans for system users. Firms interested in being considered for this Project are invited to submit a Letter Of Interest asking for the project Request for Qualifications (RFQ). Pending Commission approval, requests for Statements of Qualifications will be sent to firms indicating an interest in this project.

All inquiries and submittals are to be addressed to:

Ref: Project 910800
Attn: Administrative Assistant
Contracts & Documents Division
Metropolitan Waste Control Commission
230 East 5th Street
St. Paul, MN 55101

October 28, 1993

By Order of the:
Metropolitan Waste Control Commission

Gordon O. Voss
Chief Administrator

MINNESOTA HISTORICAL SOCIETY

Notice of Request for Proposals for Engineering Services for Interior Drainage Improvements and Bluff Stabilization at Historic Fort Snelling

The Minnesota Historical Society is seeking proposals from qualified engineers and engineering firms to provide design and engineering services, including construction documents, for interior drainage improvements and bluff stabilization at Historic Fort Snelling.

The Request for Proposals is available by calling or writing Mary Green Toussaint, Contract/Procurement Technician at (612) 297-7007 or Gary W. Goldsmith, Contracting Officer, at (612) 297-5863, Minnesota Historical Society, 345 Kellogg Blvd. West, St. Paul, MN 55102.

Details concerning submission requirements are included in the Request for Proposals.

— Volunteer Services of Minnesota Publications —

NEW!

The Power & Potential of Youth in Service to Communities

Outlines learner outcomes for leaders in developing service and mentoring programs. 10-48SR \$16.00

Trainer's Manual: Part I

Effective step-by-step training methods. 10-33SR \$30.00

Trainer's Manual: Part II

Training volunteer leaders. 10-34SR \$30.00

Community Handbook, Part I:

Developing Public/Private Partnerships

Partnership issues: leadership, research 10-31SR \$5.00

Community Handbook, Part II:

Basic Volunteer Program Management

Guidelines: recruitment, orientation... 10-32SR \$5.00

Planning it Safe: How to Control Liability & Risk in Volunteer Programs

Legal risk and liability concerns. 10-45SR \$17.95

Available through Minnesota's Bookstore. Use the handy order form on the back of the *State Register* to order. Visit Minnesota's Bookstore to view a variety of Volunteer Services publications.

Minnesota's Bookstore Subscription Services

Minnesota's Bookstore offers several subscription services of activities, awards, decisions and special bulletins of various Minnesota agencies. Use the handy order form on the back of the *State Register* to order.

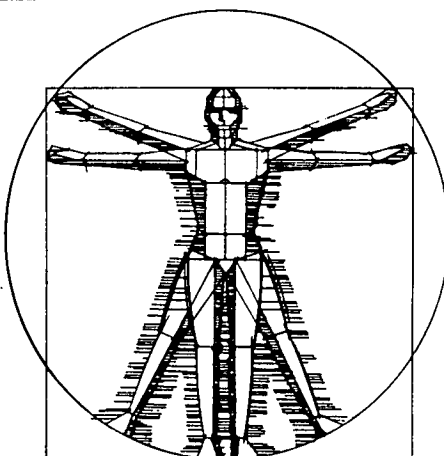
<i>Career Opportunity Bulletin</i> -- one year	90-3	\$ 30.00	<i>Workers Compensation Decisions</i> ,	90-12	\$400.00
<i>Career Opportunity Bulletin</i> -- six months	90-4	\$ 24.00	unpublished subs run Jan-Dec 1993; can be prorated		
<i>Gaming News</i> -- one year	90-8	\$ 40.00	<i>State Register</i> -- one year (via mail)	90-1	\$150.00
<i>Human Services Informational and Instructional Bulletin</i>	90-6	\$120.00	<i>Contracts Supplement</i> (one year)		
<i>Minnesota Statutes</i> set + supplement	18-2	\$165.00	-- via First Class Mail	90-5	\$125.00
<i>Minnesota Rules</i> 1991 set + supplement	18-100	\$200.00	-- via FAX	90-7-fax	\$140.00
<i>Tax Court/Property Decisions</i>	90-11	\$350.00	-- via ONLINE Service	90-7-online	\$140.00
<i>Workers Compensation Decisions</i> Vol. 48	90-13	\$195.00	Trial Subscription (13 weeks) of both <i>State Register</i> and <i>Contracts Supplement</i>	90-2	\$ 60.00

TO ORDER: Send to Minnesota's Bookstore, 117 University Avenue, St. Paul, MN 55155. Call 612/296-0931, or toll-free nationwide; 1-800-657-3757. Prepayment is required. Please include daytime phone. Prices are subject to change. FAX: 612-296-2265.

A Helping Hand for the Chemically Dependent

Directory of Chemical Dependency Programs in Minnesota.

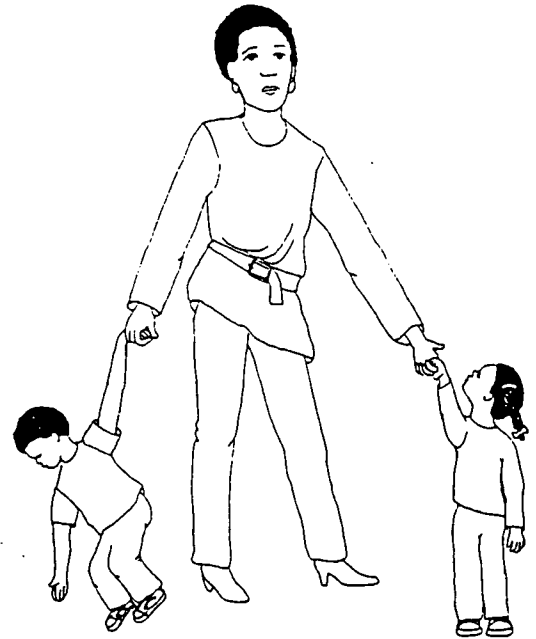
This 250-page directory lists prevention and intervention programs including county social service agencies, mental health centers, other information and referral programs, self-help programs and employee assistance programs. It also lists DWI (Driving While Intoxicated) clinics and detoxification centers. Outlining Minnesota's continuum of care, the Minn. Dept. of Human Services Directory lists treatment services under three headings: **Primary Residential Programs**—free-standing facilities, hospital-based facilities and state regional treatment centers; **Intermediate/Extended Residential Programs**—halfway houses, extended care facilities, and board and lodging facilities; **Non-Residential Programs**—freestanding facilities and hospital-based facilities. Stock #1-12-SR. \$17.00 + \$1.10 tax.



TO ORDER: Send to Minnesota's Bookstore, 117 University Avenue, St. Paul, MN 55155. Call (612) 297-3000, or toll-free nationwide: 1-800-657-3757. Minnesota residents please include 6 1/2% sales tax. St. Paul residents include 7%. On all orders, add \$3.00 per order for shipping. Prepayment is required. Please include daytime phone. VISA/MasterCard, American Express and Discover orders accepted over phone and through mail. *Prices are subject to change.* FAX: (612) 296-2265.

Introducing: Process Parenting--Breaking the Addictive Cycle

Finally, a training manual that provides parent education and treatment techniques for professionals who work with recovering **chemically dependent** parents or dysfunctional families. This 'first-of-its-kind' manual offers effective techniques and a **step-by-step curriculum for teacher/facilitators, PLUS over 30 client exercises** which aid parents in confronting parenting issues during their recovery. **Process Parenting** was written by Carol Morgaines, an early childhood/family educator. It was produced as a cooperative parent education project with Chrysalis Women's Center and the Chemical Dependency Program Division of the Minnesota Department of Human Services. A portion of the book is devoted to working with special parent groups: urban/rural, gay/lesbian and parents of color. An **indispensable tool** for early childhood-family educators, public health nurses, chemical dependency counselors, parent effectiveness training instructors, social workers and mental health therapists. Stock No. 5-4. \$15.00.

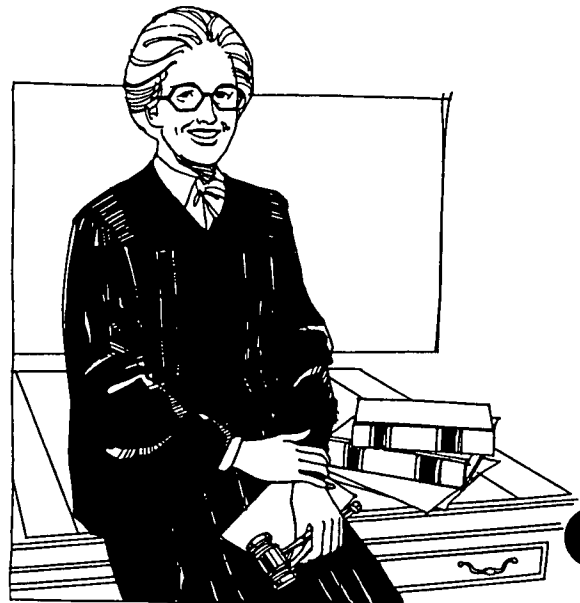


MN Sentencing Guidelines and Commentary 1993

Designed to establish rational and consistent sentencing standards, the guidelines are advisory to the sentencing judge. The guidelines and commentary cover a wide range of topics: offense severity, criminal history, jail credit and more. 81pp. Stock No. 14-18C. \$10.95.

Sentencing Guidelines Worksheets

These worksheets are used to assist in determining the severity of sentences. Package of 50; 6-part forms. Stock No. 8-6. \$14.95.





ATTENTION: Minnesota Business Leaders

Avoid getting lost in your search for government services and marketing information. Reach your market and keep you on top of state government policies and programs.

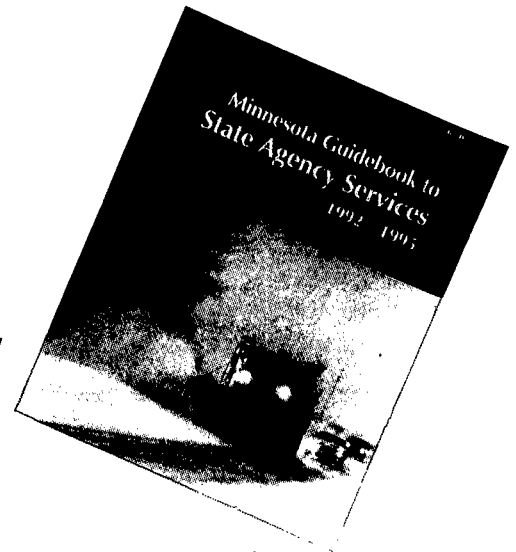
Business & Professional Directories -----

Minnesota Guidebook to State Agency Services 1992-95

An obvious "headliner" on any list for the business reference desk. The perfect "owner's manual" to Minnesota state government is a great reference tool for:

- * applying for grants, bidding on contracts
- * addresses, phone numbers and key contact people for each agency
- * license requirements and fees
- * gaining access to government services
- * participating in state policy making and service delivery
- * understanding the structure of Minnesota government with detailed descriptions of state agencies, their functions and services.

A MUST for the Minnesota business person. 710 pp. **Stock No. 1-11 SR REDUCED PRICE -- ~~\$16.00~~ NOW \$9.95**



Minnesota Manufacturer's Directory 1993

Lists companies alphabetically, by community, and by type of product manufactured. Includes name, address, phone number, sales volume, market products, area sales, marketing and purchasing. Also FAX numbers, data processing managers and chief engineers, when available. 742 pp. **Stock No. 40-2 SR \$95.00**

Airport Directory 1993

List of airports throughout the state. Approaches, rivers, all detailed markings, and much more. 178 pp. (pocket-size) **Stock No. 1-8 SR \$5.95**

Law Enforcement Directory 1993

Directory of state law enforcement agencies, sheriffs and police departments 51pp. **Stock No. 1-6 SR \$ 7.00**

Healing Arts (Physician's) Directory 1991

Names and addresses in alphabetical order for licensed physicians, chiropractors, osteopaths, optometrists, podiatrists and registered physical therapists. 426 pp. **Stock No. 1-1 SR \$19.95**

Directory of Chemical Dependency Programs '92-93

Comprehensive listing of chemical dependency treatment programs in Minnesota. Information on services provided, funding and staff, and a map are also included. 282 pp. **Stock No. 1-12 SR \$17.00**

State Agency Telephone Directory

Orders are now being taken for the **1994 Directory**. This directory lists all State of Minnesota government agencies. Features a greatly expanded FAX section with over 250 numbers, alphabetical employee listings, a classified section, organized by department, and "yellow pages" listing state offices in Greater Minnesota. 264pp. **Stock No. 1-87 SR \$12.95**

Mailing Lists ---

Let our Mailing List Service guide you through their **broad selection of State of Minnesota licensed professionals and permit holders**. Lists are available in a variety of formats including computer printouts, directories, cheshire or pressure-sensitive labels, or diskette. **For a free catalog or further information, call - 612/ 296-0930.**

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117 University, St Paul, Minnesota 55155 (located 1/2 block west of the State Capitol)
612/297-3000 (Metro area) 1-800-657-3757 (Toll Free)

TDD (Telecommunications Device for the Deaf): 612/282-5077 1-800-657-3706 (Toll Free)
FAX 612/296-2265 Online computer access: 612/821-4096 (8-N-1, 1200/2400 bps)

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Metro Area 612-297-3000 (FAX: 612-296-2265)
Toll free 1-800-657-3757
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Metro Area (612) 297-5353 Greater MN 1-800-627-3529

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