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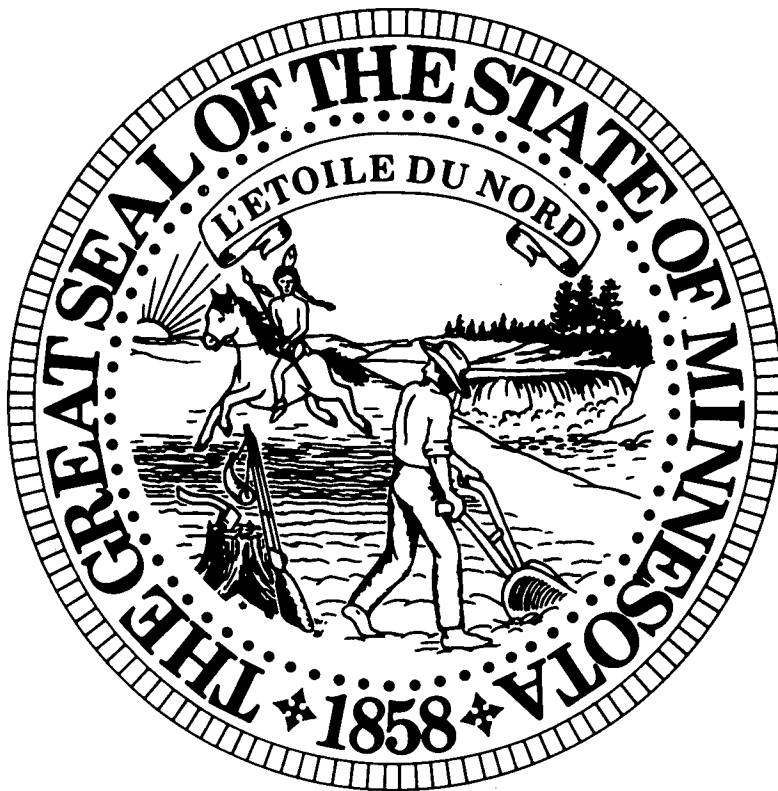
The Minnesota

State Register

Department of Administration—Print Communications Division

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State Register

Judicial Notice Shall Be Taken of Material Published in the *State Register*

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.

Printing Schedule and Submission Deadlines

Vol. 18 Issue Number	PUBLISH DATE	Submission deadline for Adopted and Proposed Rules	Submission deadline for: Emergency Rules, Executive Orders, Commissioner's Orders, Revenue Notices, Official Notices, State Grants, Professional, Technical and Consulting Contracts, Non-State Bids and Public Contracts
28	Monday 10 January	Thursday 23 December	Monday 3 January
29	Tuesday 18 January	Monday 3 January	Monday 10 January
30	Monday 24 January	Monday 10 January	Friday 14 January
31	Monday 31 January	Friday 14 January	Monday 24 January

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Deadline extensions may be possible at the editor's discretion. Requests for deadline extensions should only be made in valid emergency situations. Please call 297-7963 and leave your fax number—you will be faxed a one-page information sheet regarding submissions and a submission calendar.

State Register and *Contracts Supplement* SUBSCRIPTIONS:

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Arne H. Carlson, Governor
Debra Rae Anderson, Commissioner
Department of Administration

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Print Communications Division
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Jane E. Schmidley, Acting Editor
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:

SENATE

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

Perspectives—Publication about the Senate.

Session Review—Summarizes actions of the Minnesota Senate.

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

HOUSE

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

This Week—weekly interim bulletin of the House.

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

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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.

Issue #27-28 Inclusive (issues #1-26 appeared in #26)

Pollution Control Agency

7023.1010; .1020; .1025; .1030; .1035; .1040; .1050; .1055;
 .1060; .1065; .1070; .1075; .1080; .1085; .1090; .1100;
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 7023.1010, s. 23,24; .1055, s. 6; .1095 (repealed) 1593

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8820.2950 (proposed) 1591

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 9545.0750; .0760; .0770; .0780; .0790; .0800; .0810; .0820;
 .0830 (repealed) 1595
 9545.0755; .0765; .0775; .0785; .0795; .0805; .0815; .0825;
 .0835; .0845 (adopted) 1593

Zoological Board

9900.0400; .1500; .2800; .3800; .4400; .5200; .5500; .6400;
 .7600; .7800 (proposed) 1625

Attention Builders, Architects, Designers, Property Owners...

**Accessible and Usable Buildings and Facilities
 CABO/ANSI, A117.1**

Just released by the Council of American Building Officials, this 2 publication set includes UBC Chapter 31 and appendix. Specifications in this standard (ANSI - American National Standards Institute) are to make buildings and facilities accessible to individuals with disabilities -- both new buildings and existing structures. These standards are applicable to doorways, routes, seating and other elements of building design. Includes diagrams and floor plans. The two books (total of 96 pp) are bound and three-hole drilled for ease of use. **19-2 SR \$35.00**



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 building code publications.

Publication editors: As a public service, please reprint this ad in your publication as is, reduced, enlarged, or redesigned to suit your format. Thank you.

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.

Minnesota Zoological Board

Adopted Permanent Rules Relating to Zoo Admissions and Activities

Rules as Adopted

9900.0400 ENTRY AT DESIGNATED ENTRANCES.

It shall be unlawful for any person or ~~vehicle~~ to enter the zoo premises ~~except~~ admission area without paying applicable admission fees at designated entrances.

9900.1500 PHYSICAL CONTACT WITH WILDLIFE.

It is unlawful for any person to attempt to make or to make physical contact with any wildlife on the zoo premises except as authorized in ~~contact~~ specified areas of the children's zoo under the supervision of zoo staff.

9900.2800 INTOXICATING LIQUORS, CONTROLLED SUBSTANCES, AND BEER.

It is unlawful to use any intoxicating liquor, ~~controlled substances~~, or beer on the zoo premises without written approval of the director, or to enter the zoo premises under the influence of any intoxicating liquor, controlled substance, or beer ~~except as provided in part 9900.2900~~.

9900.3800 IMPERSONATING ZOO OFFICERS OR EMPLOYEES.

No person shall impersonate a zoo ~~officer, ranger, or~~ employee.

9900.4400 SPORTS EQUIPMENT.

It shall be unlawful for any person to bring any sports equipment, including balls, frisbees, games, sleds, snowshoes, skis, or any other equipment used in sports activities into the admissions area without the ~~advance written~~ permission of the director.

9900.5200 SMOKING.

Smoking is prohibited ~~in the admission area~~ except in designated areas.

9900.5500 POSSESSION OF WEAPONS.

Possession of any ~~concealed or unconcealed~~ weapon on the zoo premises is prohibited.

9900.6400 SPEED LIMIT.

No person shall drive a vehicle on zoo premises at a speed greater than is reasonable and prudent under the conditions and having regard to the actual and potential hazards then existing. In every event speed shall be so restricted as may be necessary to avoid colliding with any person, vehicle, or wildlife. The maximum speed limit is 15 miles per hour ~~or 24 kilometers per hour~~.

9900.7600 EFFECT OF RULES ON ZOO EMPLOYEES, AGENTS, AND CONTRACTORS.

Nothing in these rules this chapter shall prevent zoo employees or agents from performing their assigned duties or operate to ~~modify rights of third parties contained in contracts with the Minnesota Zoological Garden restrict those activities otherwise pro-~~

KEY: PROPOSED RULES SECTION — Underlining indicates additions to existing rule language. ~~Strike outs~~ indicate deletions from existing rule language. If a proposed rule is totally new, it is designated "all new material." **ADOPTED RULES SECTION** — Underlining indicates additions to proposed rule language. ~~Strike outs~~ indicate deletions from proposed rule language.

Official Notices

scribed where the board has expressly authorized such activities either by employees, agents, or contractors or when authorized by the director.

9900.7800 VIOLATION OF RULES.

A violation of any rule herein set forth in this chapter is a petty misdemeanor.

REPEALER. *Minnesota Rules*, parts 9900.0300; 9900.2600; 9900.2700; 9900.2900; and 9900.4600, are repealed.

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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.

Department of Agriculture

Minnesota Rural Finance Authority

Notice of Public Hearing on the Issuance of an Agricultural Development Revenue Bond Under *Minnesota Statutes*, Chapter 41c

NOTICE IS HEREBY GIVEN that a public hearing will be held on January 26, 1994, at 9 A.M. in Room 145 Department of Agriculture Building, 90 West Plato Boulevard, Saint Paul Minnesota, on a proposal that the Minnesota Rural Finance Authority (the Authority) issue its revenue bond under *Minnesota Statutes*, Chapter 41C, in order to finance the purchase of approximately 160 acres of farmland located in Section 6, Aldrich Township, Wadena County, Minnesota on behalf of Joseph D. McIntire, a single person (the Borrower). The maximum aggregate face amount of the proposed bond issue is \$44,000. The revenue bond will be a limited obligation of the Authority, payable solely from the revenue pledged to the payment thereof. No holder of such revenue bond will ever have the right to compel any exercise of the taxing power of the State of Minnesota to pay the bond or the interest thereon, nor to enforce payment against any property of the Authority or the State of Minnesota, except the revenues specifically pledged to the payment thereof. Before issuing the revenue bond, the Authority will enter into an agreement with the Borrower whereby the Borrower will be obligated to make payments at least sufficient at all times to pay the principal of and interest on such revenue bond when due. All persons interested may appear and be heard at the time and place set forth above, or may file written comments with the Executive Director of the Authority prior to the date of the hearing set forth above.

Dated: 15 December 1993

LaVonne Nicolai
RFA Executive Director

Department of Agriculture

Minnesota Rural Finance Authority

Notice of Public Hearing on the Issuance of an Agricultural Development Revenue Bond Under *Minnesota Statutes*, Chapter 41c

NOTICE IS HEREBY GIVEN that a public hearing will be held on January 26, 1994, at 9 A.M. in Room 145 Department of Agriculture Building, 90 West Plato Boulevard, Saint Paul Minnesota, on a proposal that the Minnesota Rural Finance Authority (the Authority) issue its revenue bond under *Minnesota Statutes*, Chapter 41C, in order to finance the purchase of approximately 80 acres of farmland located in Section 7, Magnolia Township, Rock County, Minnesota on behalf of Michael J. Hoiland, a single person (the Borrower). The maximum aggregate face amount of the proposed bond issue is \$87,000. The revenue bond will be a limited obligation of the Authority, payable solely from the revenue pledged to the payment thereof. No holder of such revenue bond will ever have the right to compel any exercise of the taxing power of the State of Minnesota to pay the bond or the interest thereon, nor to enforce payment against any property of the Authority or the State of Minnesota, except the revenues specifically pledged to the payment thereof. Before issuing the revenue bond, the Authority will enter into an agreement with the Borrower whereby the Borrower will be obligated to make payments at least sufficient at all times to pay the principal of and interest on such

revenue bond when due. All persons interested may appear and be heard at the time and place set forth above, or may file written comments with the Executive Director of the Authority prior to the date of the hearing set forth above.

Dated: 15 December 1993

LaVonne Nicolai
RFA Executive Director

Department of Commerce

Notice of Solicitation of Outside Information or Opinions Regarding Proposed Rules Relating to Credit Unions

NOTICE IS HEREBY GIVEN that the Minnesota Department of Commerce is seeking information or opinions from sources outside the department in preparing to propose the adoption of rules relating to credit unions. Specifically, the rules will pertain to credit unions having a common bond of residents within a well-defined neighborhood, community or rural district and will address the application for expansion of the field of membership not related to select groups and *Minn. Stat.* §52.05 subd. 2. Issues to be considered by the department when the rules are proposed include: the application procedure in relationship to *Minn. Stat.* §52.02; amendments to bylaws; interested party petitions; the applicant's financial condition; other financial institution implications; the time for proceeding; parties with standing; and administrative hearings and appeals.

The adoption of the rules is authorized by *Minn. Stat.* §46.01 subd. 2 which authorizes the Commissioner of Commerce to adopt rules as necessary to administer or execute the laws relating to financial institutions subject to the commissioner's supervision and examination. Credit unions are subject to the commissioner's supervision and examination pursuant to the provisions of *Minn. Stat.* chapter 52. The rules are also authorized pursuant to the authority granted to the commissioner under *Minn. Stat.* §52.05 and 45.023.

The Minnesota Department of Commerce requests information and opinions concerning the subject matter of the rules. Interested persons or groups may submit data or views in writing or orally. Written statements should be addressed to:

James G. Miller
Deputy Commissioner
Minnesota Department of Commerce
133 East Seventh Street
St. Paul, Minnesota 55101

Oral statements will be received during regular business hours over the telephone at 296-2715 and in person at the above address.

All statements of information and opinions will be accepted until 4:30 p.m. on February 10, 1994.

Any written material received by the department will become part of the rulemaking record to be submitted to the attorney general or administrative law judge in the event that the rules are adopted.

The Credit Union Advisory Task Force, established pursuant to *Minn. Stat.* §52.061, will participate in the rulemaking process by reviewing the proposed rules and making recommendations to the commissioner. The task force is expected to complete its work during the first quarter of 1994. It is hoped that the rulemaking process will be completed in the fourth quarter of 1994.

Dated: 29 December 1993

James E. Ulland
Commissioner of Commerce

Department of Health

Health Care Delivery Systems Division

Notice of Solicitation of Outside Information or Opinion in Connection with Technology Evaluations on:

- 1) Autologous Bone Marrow Transplant for Solid Tumors and Bone Marrow Cancers;
- 2) Magnetic Resonance Imaging for Diagnosis of Headache; and
- 3) Prostatic Specific Antigen for Prostate Cancer Screening.

The Health Technology Advisory Committee has selected the above-mentioned technologies for evaluation. The evaluations will

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provide information on the safety, improvement in health outcomes, clinical effectiveness, and cost effectiveness of each technology. The Minnesota Department of Health is seeking information or opinions from sources outside the agency to assist in identifying information pertinent to the evaluation of each technology.

Interested persons or groups may submit information or opinions in writing or orally. Written statements should be addressed to: Mary Fahey, P.O. Box 64975, St. Paul, MN, 55164-0975. Oral statements will be taken during regular business hours over the telephone at (612) 282-6355.

All statements of information and opinions must be submitted within thirty (30) days from the publication of this notice. Any written material received by the Minnesota Department of Health shall be subject to the requirements of the Minnesota Data Practices Act (*Minnesota Statutes*, Section 13). Notices regarding additional opportunities to submit information pertaining to the evaluation of technologies will be published.

Minnesota Department of Human Services

PRIOR AUTHORIZATION LIST

As authorized by *Minnesota Statutes*, section 256B.0625, subdivision 25, the following list includes all health services that require prior authorization as a condition of MA/GAMC/MinnesotaCare reimbursement. The list is presented in sections: Dental Services, Vision Care Services, Medical Supplies and Equipment, Prosthetics and Orthotics, Hearing Aids, Drugs, Rehabilitative Services, Home Care Services, and All Other Services. The criteria used to develop this list are as follows:

- A. The health service could be considered, under some circumstances, to be of questionable medical necessity.
- B. Use of the health service needs monitoring to control the expenditure of program funds.
- C. Less costly, appropriate alternatives to the health service are generally available.
- D. The health service is investigative.
- E. The health service is newly developed or modified.
- F. The health service is of a continuing nature and requires monitoring to prevent its continuation when it ceases to be beneficial.
- G. The health service is comparable to a service provided in a skilled nursing facility or hospital but is provided in a recipient's home.
- H. The health service could be considered cosmetic.

THIS LIST OF HEALTH SERVICES REQUIRING PRIOR AUTHORIZATION IS PRESENTLY IN EFFECT. SERVICES THAT WERE ADDED TO THIS LIST SINCE IT WAS LAST PUBLISHED ARE IDENTIFIED WITH AN ARROW OR LINE TO THE LEFT OF THE CODE. THESE NEWLY ADDED CODES WILL REQUIRE PRIOR AUTHORIZATION FOR SERVICES PROVIDED ON OR AFTER JANUARY 18, 1994.

I. DENTAL SERVICES

In addition to the specific services and procedures listed in this section, the following dental services always require prior authorization:

1. Hospitalization for dental treatment (see Dental Services chapter).
2. Surgical services, except emergencies and alveolectomies. For emergencies and alveolectomies follow the after-the-fact prior authorization procedures.
3. All removable prosthesis.

It is essential that requests submitted for prior authorization consideration be accompanied by adequate case information and appropriate diagnostic materials (i.e., x-rays, prosthesis information, teeth to be replaced).

RADIOGRAPHS

<u>Service Code</u>	<u>Service Description</u>
---------------------	----------------------------

(Prior authorization required only if provided more than once in a three-year period or for person under age 8)

D0210	Intraoral series (including bitewings)
D0330	Panoramic film
D0335	Panorex, includes bitewings and additional peripheral films

(Prior authorization required only if six in a 12-month period are exceeded)

D0230	Intraoral, periapical, each additional film
-------	---------------------------------------------

<u>Service Code</u>	<u>Service Description</u>
D0240	Intraoral, occlusal film
D0250	Extraoral, first film
D0260	Extraoral, each additional film

(Prior authorization required only if any combination of up to four in a 12-month period is exceeded)

D0270	Bitewing, single film
D0272	Bitewings, two films
D0274	Bitewings, four films

TESTS AND LABORATORY EXAMINATIONS

D0999 Unspecified diagnostic procedure, by report (When no medical procedure is being done in addition to the dental procedure)

DENTAL PROPHYLAXIS (Prior authorization required only if provided more than once in a six-month period)

D1110	Prophylaxis adults
D1120	Prophylaxis, children

FLUORIDE

D1204	Topical application of fluoride (excluding prophylaxis), adult
D1205	Topical application of fluoride (including prophylaxis), adult

CROWNS - SINGLE RESTORATIONS ONLY

D2710	Crown - resin (laboratory)
D2720	Crown - resin with high noble metal
D2721	Crown - resin with predominantly/base metal
D2722	Crown - resin with noble metal
D2740	Crown - porcelain/ceramic substrate
D2750	Crown - porcelain fused to high noble metal
D2751	Crown - porcelain fused to predominantly/base metal
D2752	Crown - porcelain fused to noble metal
D2790	Crown - full cast high noble metal
D2791	Crown - full cast predominantly base metal
D2792	Crown - full cast noble metal
D2810	Crown - 3/4 cast metallic

OTHER RESTORATIVE SERVICES

D2952	Cast post and core in addition to crown
D2960	Labial veneer (laminate)
D2961	Labial veneer (resin laminate)-laboratory
D2962	Labial veneer (porcelain laminate)-laboratory
D2999	Unspecified restorative procedure, by report

ROOT CANAL THERAPY (includes treatment plan, clinical procedures, and follow-up care)

Prior authorization is required for root canal therapy involving more than one molar done on the same day.

OTHER ENDODONTIC PROCEDURES

D3346	Retreatment-anterior, by report
D3347	Retreatment-bicuspid, by report
D3348	Retreatment-molar, by report
D3460	Endodontic endosseous implant
D3960	Bleaching of discolored tooth
D3999	Unspecified endodontic procedure

SURGICAL SERVICES (including usual post-operative services)

D4210	Gingivectomy or gingivoplasty - per quadrant
D4211	Gingivectomy or gingivoplasty - per tooth

Official Notices

Service Code Service Description

PERIODONTICS

D4220 Gingival curettage, surgical, per quadrant, by report
D4240 Gingival flap procedures, including root planning - per quadrant
D4249 Crown lengthening - hard and soft tissue, by report
D4250 Mucogingival surgery - per quadrant
D4260 Osseous surgery, including flap entry and closure per quadrant
D4261 Bone replacement graft - single site (including flap entry and closure)
D4262 Bone replacement graft - multiple sites (including flap entry and closure)
D4268 Guided tissue regeneration (includes the surgery and re-entry)
D4270 Pedicle soft tissue grafts
D4271 Free soft tissue grafts including donor site

ADJUNCTIVE PERIODONTAL SERVICES

D4320 Provisional splinting, intracoronal
D4321 Provisional splinting, extracoronal
D4341 Periodontal scaling, and root planning - per quadrant
D4345 Periodontal scaling performed in the presence of gingival inflammation

OTHER PERIODONTIC SERVICES

D4910 Periodontal maintenance procedures (following active therapy)
D4999 Unspecified periodontal service (by report)

PROSTHODONTICS, REMOVABLE COMPLETE DENTURES

D5110 Complete upper
D5120 Complete lower
D5130 Immediate upper
D5140 Immediate lower

PARTIAL DENTURES (including six months post-delivery care)

D5211 Upper partial - resin base (including any conventional clasps, rests and teeth)
D5212 Lower partial - resin base (including any conventional clasps, rests and teeth)
D5213 Upper partial - cast metal base with resin saddles (including any conventional clasps, rests and teeth)
D5214 Lower partial - cast metal base with resin saddles (including any conventional clasps, rests and teeth)

OTHER PROSTHETIC SERVICES

D5810 Interim complete denture (upper)
D5811 Interim complete denture (lower)
D5820 Interim partial denture (upper)
D5821 Interim partial denture (lower)
D5860 Overdenture complete, by report
D5861 Overdenture partial, by report
D5862 Precision attachment, by report
D5899 Unspecified removable prosthodontic procedure, by report

MAXILLOFACIAL PROSTHETICS

D5911 Facial moulage (sectional)
D5912 Facial moulage (complete)
D5913 Nasal prosthesis
D5914 Auricular prosthesis
D5915 Orbital prosthesis
D5916 Ocular prosthesis
D5919 Facial prosthesis
D5922 Nasal septal prosthesis
D5923 Ocular prosthesis, interim
D5924 Cranial prosthesis
D5925 Facial augmentation implant prosthesis

<u>Service Code</u>	<u>Service Description</u>
D5926	Nasal prosthesis, replacement
D5927	Auricular prosthesis, replacement
D5928	Orbital prosthesis, replacement
D5929	Facial prosthesis, replacement
D5931	Obturator prosthesis, surgical
D5932	Obturator prosthesis, definitive
D5933	Obturator prosthesis, modification
D5934	Mandibular resection prosthesis with guide flange
D5935	Mandibular resection prosthesis without guide flange
D5936	Obturator/prosthesis, interim
D5951	Feeding aid
D5952	Speech aid prosthesis, pediatric
D5953	Speech aid prosthesis, adult
D5954	Palatal augmentation prosthesis
D5955	Palatal lift prosthesis, definitive
D5958	Palatal lift prosthesis, interim
D5959	Palatal lift prosthesis, modification
D5960	Speech aid prosthesis, modification
D5982	Surgical stent
D5983	Radiation carrier
D5984	Radiation shield
D5985	Radiation cone locator
D5986	Fluoride gel carrier
D5987	Commissure splint
D5988	Surgical splint
D5999	Unspecified maxillofacial prosthesis, by report

IMPLANTS

D6030	Endosseous implant (in the bone)
D6040	Subperiosteal implant
D6050	Transosseous implant
D6055	Implant connecting bar
D6080	Implant maintenance procedures, including: removal of prosthesis, cleansing of prosthesis and abutment reinsertion of prosthesis
D6090	Repair implant, by report
D6100	Implant removal, by report
D6199	Unspecified implant procedure, by report

PROSTHODONTICS, FIXED BRIDGE PONTICS (Only covered in situations where documented medical condition prohibits use of removable prostheses)

D6210	Pontic - cast high noble metal
D6211	Pontic - cast predominantly base metal
D6212	Pontic - cast noble metal
D6240	Pontic - porcelain fused to high noble metal
D6241	Pontic - porcelain fused to predominantly base metal
D6242	Pontic - porcelain fused to noble metal
D6250	Pontic - resin with high noble metal
D6251	Pontic - resin with predominantly base metal
D6252	Pontic - resin with noble metal

RETAINERS

D6545	Retainer - cast metal for acid etched fixed prosthesis
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CROWNS (Only covered in situations where documented medical condition prohibits use of removable prostheses)

D6720	Crown - resin with high noble metal
D6721	Crown - resin with predominantly base metal

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<u>Service Code</u>	<u>Service Description</u>
D6722	Crown - resin with noble metal
D6750	Crown - porcelain fused to high noble metal
D6751	Crown - porcelain fused to predominantly base metal
D6752	Crown - porcelain fused to noble metal
D6780	Crown - 3/4 cast high noble metal
D6790	Crown - full cast high noble metal
D6791	Crown - full cast predominantly base metal
D6792	Crown - full cast noble metal

OTHER FIXED PROSTHETIC SERVICES

D6940	Stress breaker
D6950	Precision attachment

ORAL SURGERY EXTRACTION

D7210	Surgical removal of erupted tooth, requires elevation of mucoperiosteal flap and removal of bone and/or section of tooth
X7216	Removal and/or excision supernumerary tooth, impacted
D7220	Removal of impacted tooth - soft bone
D7230	Removal of impacted tooth - partially bone
D7240	Removal of impacted tooth - completely bone
D7241	Removal of impacted tooth - completely bone, with unusual surgical complications

OTHER SURGICAL PROCEDURES

D7271	Tooth implantation
D7272	Tooth transplantation
D7280	Surgical exposure of impacted or unerupted tooth for orthodontic reasons (including orthodontic attachments)
D7281	Surgical exposure of impacted or unerupted tooth to aid eruption
D7290	Surgical repositioning of teeth
D7291	Transseptal fiberotomy

VESTIBULOPLASTY

D7340	Vestibuloplasty - ridge extension (secondary epithelialization)
D7350	Vestibuloplasty - ridge extension (including soft tissue grafts, muscle re-attachments, revision of soft tissue attachment, and management of hypertrophied and hyperplastic tissue)

EXCISION OF BONE TISSUE

D7470	Removal of exostosis - mandible or maxilla
D7480	Partial ostectomy guttering or saucerization
D7490	Radical resection of mandible with bone graft

REDUCTION OF DISLOCATION AND MANAGEMENT OF OTHER TEMPOROMANDIBULAR JOINT DYSFUNCTIONS

D7830	Manipulation under anesthesia
D7840	Condylectomy
D7850	Surgical discectomy; with or without implant
D7852	Disc repair
D7854	Synovectomy
D7856	Myotomy
D7858	Joint reconstruction
D7860	Arthrotomy
D7865	Arthroplasty
D7870	Arthrocentesis
D7872	Arthroscopy - diagnosis, with or without biopsy
D7873	Arthroscopy - surgical: lavage and lysis of adhesions
D7874	Arthroscopy - surgical: disc repositioning and stabilization
D7875	Arthroscopy - surgical: synovectomy
D7876	Arthroscopy - surgical: discectomy

<u>Service Code</u>	<u>Service Description</u>
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D7877	Arthroscopy - surgical: debridement
D7880	Occlusal orthotic appliance
D7899	Unspecified TMD therapy, by report

OTHER ORAL SURGERY REPAIR OF TRAUMATIC WOUNDS

D7920	Skin grafts (identify defect covered, location and type of graft)
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OTHER REPAIR PROCEDURES

D7940	Osteoplasty for orthognathic deformities
D7941	Osteotomy, ramus, closed
D7942	Osteotomy, ramus, open
D7943	Osteotomy, ramus, open with bone graft
D7944	Osteotomy segmented or subapical per sextant or quadrant
D7945	Osteotomy, body of mandible
D7946	Maxilla, total (Le Fort I)
D7947	Maxilla, segmented (Le Fort I)
D7948	Osteoplasty facial bones for midface hypoplasia or retrusion (Le Fort II or III) without bone graft
D7949	Le Fort II or III with bone graft
D7950	Osseous, osteoperiosteal, periosteal, or cartilage graft of the mandible - autogenous or nonautogenous
D7955	Repair of maxillofacial soft and hard tissue defect
D7970	Excision of hyperplastic tissue, per arch
D7971	Excision of pericoronary gingiva
D7980	Sialolithotomy
D7981	Excision of salivary gland
D7982	Sialodochoplasty
D7991	Coronoidectomy
D7993	Implant - facial bones
D7994	Implant - other than facial bones
D7999	Unspecified oral surgical procedure, by report

ORTHODONTICS MINOR TREATMENT FOR TOOTH GUIDANCE

D8110	Removable appliance therapy
D8120	Fixed or cemented appliance therapy

MINOR TREATMENT TO CONTROL HARMFUL HABITS

D8210	Removal appliance therapy
D8220	Fixed or cemented appliance therapy

INTERCEPTIVE ORTHODONTIC TREATMENT

D8360	Removable appliance therapy
D8370	Fixed appliance therapy

COMPREHENSIVE ORTHODONTIC TREATMENT OF THE TRANSITIONAL DENTITION

D8460	Class I malocclusion
D8470	Class II malocclusion
D8480	Class III malocclusion

TREATMENT OF THE PERMANENT DENTITION

D8560	Class I malocclusion
D8570	Class II malocclusion
D8580	Class III malocclusion
D8650	Treatment of the atypical or extended skeletal case
D8750	Post-treatment stabilization
X0515	Orthodontic full case study (PA required once every five years)
D8999	Unspecified orthodontic treatment

Official Notices

Service Code **Service Description**

MISCELLANEOUS SERVICES

D9940 Occlusal guards, by report
D9941 Fabrication of athletic mouth guards
D9951 Occlusal adjustment, limited
D9952 Occlusal adjustment, complete
D9999 Unspecified adjunctive procedure, by report

II. VISION CARE SERVICES

In addition to the codes specified below, all noncontract eyeglasses, lenses, and frames require prior authorization.

CONTACT LENS TREATMENT SERVICES (All contact lens services and supplies must be prior authorized except for recipients with a diagnosis of Aphakia, Aniseikonia, Keratoconus, or Bandage lenses.)

Service Code **Service Description**

92070 Fitting of contact lens for treatment of disease, including supply of lens
92310 Prescription of optical and physical characteristics of and fitting of contact lens, with medical supervision of adaptation; corneal lens, both eyes, except for aphakia
92325 Modification of contact lens (separate procedure), with medical supervision of adaptation
92391 Supply of contact lenses, except prosthesis for aphakia

OPHTHALMIC TREATMENT SERVICES (PA required if the recipient utilized any service under this heading in the past 24 months)

92004 Ophthalmological services; comprehensive, new patient
92014 Ophthalmological services; comprehensive, established patient
92340 Fitting of spectacles, except for aphakia; monofocal
92341 bifocal
92342 multifocal, other than bifocal
92352 Fitting of spectacle prosthesis for aphakia; monofocal
92353 multifocal
92358 Prosthesis service for aphakia; temporary

LOW VISION TREATMENT SERVICES

92354 Fitting of spectacle mounted low vision aid; single-element system
92355 telescopic or other compound lens system

VISION THERAPY SERVICES

92065 Orthoptic and/or pleoptic training, with continuing medical direction and evaluation

OTHER SPECIALIZED SERVICES

92285 External ocular photography with medical diagnostic evaluation for documentation of medical progress
92287 Anterior seg photo with fluorescein angiography
92390 Supply of spectacles, except prosthesis for aphakia and low vision aids
92392 Supply of low vision aids

MATERIAL CODES

V2500 to Contact Lens - for diagnosis other than Aphakia, Keratoconus, or Aniseikonia, or Bandage Lens.
V2599 (When submitting invoice for one of these three diagnosis, be sure to specify the diagnosis on claim. If th
 diagnosis is omitted, the claim will reject.)
V2600 Hand held low vision aids and other nonspectacle mounted aids
V2610 Single lens spectacle mounted low vision aids
V2615 Telescopic and other compound lens system, including distance vision telescopic, near vision telescopes and com-
 pound microscopic lens system
V2629 Not otherwise classified, prosthetic eye
V2718 Press-on lens, Fresnell prism, per lens
V2743 Tint other than rose 1 or 2
V2744 Tint photochromic
V2755 U-V lens

III. MEDICAL SUPPLIES AND EQUIPMENT; PROSTHESES AND ORTHOSES

Medical Equipment/Supplies

Providers must get prior authorization for all procedure codes listed in the Equipment and Supplies chapter, Codes Guide, where prior authorization is indicated, and the following general areas.

1. All wheelchairs and wheelchair accessories and repairs for nursing facility residents. Requests must state if the recipient or facility owns the wheelchair.
2. Repairs when the charge exceeds \$300. This includes labor and parts charges. All repairs and adaptations to equipment for nursing facility residents need written prior authorization. Specify who owns the equipment.
3. Maintenance of equipment.
4. Prior authorization is required for underpads and diapers if the recipient is under the age of four.
5. A battery charger for a wheelchair requires prior authorization if one has been purchased for the recipient within the last three years.
6. A home blood glucose monitor requires prior authorization if one has been purchased for the recipient within the last four years.
7. In addition to the items described in 1-6, the following procedure codes require prior authorization after two months rental:

<u>Service Code</u>	<u>Service Description</u>
E0669	Segmental pneumatic appliance for use with pneumatic compressor, half leg
E0670	Segmental pneumatic appliance for use with pneumatic compressor, half arm

8. In addition to the items described in 1-7, the following procedure codes require prior authorization after three months rental and are codes to be used for submitting prior authorizations for wheelchairs:

K0001	Standard wheelchair
K0002	Standard hemi (low seat) wheelchair
K0003	Lightweight wheelchair
K0004	High strength, lightweight wheelchair
K0005	Ultralight wheelchair
K0006	Heavy duty wheelchair
K0007	Extra heavy duty wheelchair
K0008	Custom manual wheelchair/base
K0009	Other manual wheelchair/base
K0010	Standard-weight frame motorized/power wheelchair
K0011	Standard-weight frame motorized/power wheelchair with programmable control parameters for speed adjustment, tremor dampening, acceleration control and braking
K0012	Lightweight portable motorized/power wheelchair
K0013	Custom motorized/power wheelchair base
K0014	Other motorized/power wheelchair base

9. In addition to the items described in items 1-8, all of the following wheelchair codes require prior authorization.

K0020	Fixed, adjustable height armrest, pair
K0028	Fully reclining back
K0088	Battery charger, lead acid or gel cell (if one has been purchased for the recipient within the last three years)
K0089	Battery charger, dual mode (if one has been purchased for the recipient within the last three years)
K0108	Other accessories

Nutritional Products (enteral)

1. All enteral nutrition products except those for treatment of phenylketonuria, hyperlysinemia, and maple syrup urine disease, and the first 30 days after hospital discharge to other than a long-term care facility. See Nutritional Services chapter for coverage standards and rebate requirements and the Prior Authorization phone-in chapter for required information for prior authorization.

Prostheses and Orthoses

Providers must get prior authorization for the following.

1. Prostheses and orthoses when the purchase or projected cumulative rental costs exceeds \$2,000. This requirement excludes orthopedic footwear (see number two below).

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2. Custom orthopedic footwear requires prior authorization (see codes below). Noncustom orthopedic footwear requires prior authorization if the shoe will not be attached to a leg brace.
3. Repairs and adaptations to a prosthesis or orthosis when the charge exceeds \$300.
4. Charges in excess of \$100 on L1499, L7499, and L8499.
5. All codes listed below.

<u>Service Code</u>	<u>Service Description</u>
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K0163	Vacuum erection system
K0115*	Orthotic seating system, back module, posterior/lateral control, with or without lateral supports, custom fabricated for a attachment to wheelchair base
K0116*	Orthotic seating system, combined back and seat module, custom fabricated for attachment to wheelchair base
K0117	Unlisted item, orthotic seating, back module
L1950	AFO, spinal, molded to patient (model IRM type), plastic
L3230	Orthopedic footwear, custom shoes, depth inlay
L3250	Orthopedic footwear, custom molded shoes, removable inner molds, prosthetic shoe
Y5370	Wig

*ONLY FOR RESIDENTS OF NURSING FACILITIES

IV. HEARING AIDS

Services in the following categories require prior authorization:

1. Repairs to hearing aids when the cost of parts and labor exceeds \$100, or if a repair was made in the preceding 12 months.
2. The purchase of a noncontract hearing aid, including pocket talkers. Indicate model number and manufacturer on form.
3. The provision of more than one hearing aid or hearing aid dispensing fee in a five-year period.
4. More than one miscellaneous hearing aid and service per calendar year.
5. More than two hearing instrument parts and accessories (code billings) per calendar year.
6. More than two ear molds per calendar year.
7. Purchasing of a hearing aid when pure-tone average is less than 25 dB HL in an adult and less than 20 dB HL in a child.

V. DRUGS

The following drugs require prior authorization which can only be obtained on the phone-in prior authorization line.

Agoral (OTC laxative) liquid
Alferon N (Interferon Alfa-3)
Antihemophilic Factor VIII
Antihemophilic Factor IX
Ceredase (Alglucerase)
Clozapine (Clozaril)
Declomycin
Epoetin Alfa/Erythropoietin (Epoen and Procrit)
Filgrastim (Neupogen)
Interferon Gamma-1b (Actimmune)
Lactulose
Maltsupex (OTC laxative) liquid/powder/tabs; only for children six and under
Omeprazole (Prilosec): for >8 week consecutive daily treatment
Ondansetron (Zofran): for >4 week consecutive daily treatment
Papaverine; injectable
Papaverine and Phentolamine; compound injectable
Sargramostim (Leukine and Prokine)
Thorazine spansule
Tretinoin (Retin-A): for patients who are 30 or older
Vancomycin oral formula

Prior authorization requests will not be accepted by the Department for drugs which do not appear on the above list. Non-covered drugs which have received previous approval may continue to be dispensed through the duration of the approved period.

VI. REHABILITATIVE SERVICES

OCCUPATIONAL THERAPY

The following occupational therapy services require prior authorization.

<u>Service Code</u>	<u>Service Description</u>
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Any combination of Q0109 and Q0110 that exceed two per calendar year.

- Q0109 Occupational therapy evaluation, initial
- Q0110 Occupational therapy evaluations/reevaluations that exceed 1 1/2 hours per calendar year.
- X4511 Unlisted occupational therapy requires prior authorization.
- X4520 Occupational therapy group sessions require prior authorization.
- X5510 Occupational therapy consultations that exceed more than one hour per calendar year
- X5511 Occupational therapy supplies that exceed more than \$30 per calendar year

Any combination of the following codes that exceed 50 hours per year.

- X4515 Occupational therapy motor skills
- X4517 Occupational therapy sensory integrative skills
- X4522 Occupational therapy cognitive skills
- X4524 Occupational therapy preventive skills
- X4526 Occupational therapy therapeutic adaptations
- 97540 Activities of Daily Living
- 97541 Activities of Daily Living, additional 15 minutes

PHYSICAL THERAPY

X4521 Physical therapy group sessions require prior authorization

Any combination of the following codes that exceed two per calendar year.

- Q0104 Physical therapy evaluation/reevaluation
- Q0103 Initial physical therapy evaluation for new patient

Any combination of the following codes that exceeds 30 hours per calendar year:

- 97110 Therapeutic exercises
- 97112 Neuromuscular reeducation
- 97114 Functional activities
- 97116 Gait training
- 97118 Electrical stimulation
- 97120 Iontophoresis
- 97122 Traction, manual
- 97124 Massage
- 97126 Contrast baths
- 97128 Ultrasound
- 97145 Additional 15 minutes of 97110-97128, 90900 and 97799
- 97220 Hubbard tank initial 30 minutes
- 97221 Hubbard tank, additional 15 minutes
- 97240 Pool therapy, initial 30 minutes
- 97241 Pool therapy, additional 15 minutes
- 97500 Orthotics training, initial 30 minutes
- 97501 Orthotics training, additional 15 minutes
- 97520 Prosthetics training initial 30 minutes
- 97521 Prosthetics training additional 15 minutes
- 97530 Kinetic activities initial 30 minutes
- 97531 Kinetic activities additional 15 minutes
- 97700 Office visit for orthotics, prosthetics or ADL checkout
- 97701 Office visit, for orthotics, prosthetics or ADL checkout additional 15 minutes
- 90900 Biofeedback, initial 30 minutes
- X5515 Wound care, initial 30 minutes

Official Notices

<u>Service Code</u>	<u>Service Description</u>
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Any combination of the following modalities that exceed 30 per calendar year:

97010	Hot or cold packs
97012	Traction
97014	Electric stimulation
97016	Vasopneumatic devices
97018	Paraffin bath
97020	Microwave
97022	Whirlpool
97024	Diathermy
97026	Infrared
97028	Ultraviolet

More than one of the following tests per calendar year require prior authorization.

97720	Extremity testing, initial 30 minutes
97721	Extremity testing, additional 15 minutes

Any combination of the following codes that exceed two per calendar year require prior authorization:

95831	Muscle testing, manual extremity
95832	Hand
95833	Total evaluation of body w/out hands
95834	Total evaluation of body w/hands

Either of the following codes that exceed two per calendar year:

97752	Muscle testing w/torque curves during isometric & isokinetic exercise
95842	Muscle testing

Any combination of the following that exceed 12 per calendar year:

95851	Range of motion measurements
95852	Range of motion measurements - hand with comparison to normal side.

The following codes always require prior authorization:

97139	Unlisted procedure
97039	Unlisted modality
97545	Work hardening/conditioning; initial 2 hours
97546	additional hour

SPEECH-LANGUAGE PATHOLOGY

The following codes require prior authorization:

X4612	Extended consultations that exceed two per calendar year must be prior authorized.
X4614	Construction, programming or adaptation of an augmentative communication devices that exceeds four hours per calendar year
92599	Unlisted otorhinolaryngological services
V5362	Speech screenings that exceeds once per calendar year.
V5363	Language screenings that exceeds once per calendar year.
V5364	Dysphagia screenings that exceeds once per calendar year.
X5517	Assessment for augmentative communication device that exceeds one per year in addition to 92506.

Any combination of the following codes that exceed one per calendar year require prior authorization:

92506	Medical evaluation of speech
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Any combination of the following codes that exceeds 50 hours per calendar year.

92507	Individual speech, language and hearing treatment
92508	Group speech language or hearing treatment
X4610	Speech therapeutic services
X4611	Basic consultation

Service Code Service Description

AUDIOLOGY

The following codes require prior authorization:

- 92506 Audiology evaluation/reevaluations that exceed two per calendar year
- 92507 Individual hearing therapy that exceeds five sessions per calendar year
- 92592 and 92593 Monaural or binaural hearing aid checks that exceed four per calendar year
- 92599 Unlisted otorhinolaryngologic service must be prior authorized

Any combination of the following codes that exceeds one per calendar year.

- 92590 Monaural hearing aid exam & selection
- 92591 Binaural hearing aid exam & selection
- 92594 Electroacoustic evaluation for monaural hearing aid
- 92595 Electroacoustic evaluation for binaural hearing aid
- 92596 Ear protector attenuation measurements

Any combination of the following codes that exceed two per calendar year.

- X4611 Basic Consultations
- X4612 Extended Consultation

VII. HOME CARE SERVICES

Effective October 1, 1991, an MA recipient (except for Elderly Waiver [EW], Community Alternative Care [CAC], Community Alternatives for Disabled Individuals [CADI], or Traumatic Brain Injury [TBI] waiver recipients) may receive the following amounts of home care services each calendar year (**NOTE:** The first calendar year runs from October 1, 1991 through December 31, 1991. Subsequent years run from January 1st through December 31st.):

1. a combined total of forty (40) skilled nurse visits (X5284) or home health aide visits (X5285); and
2. a total of 40 units (10 hours) of R.N. supervision for personal care services (X4037 or X5644).

NOTE: Skilled nurse visits provided to a recipient residing in an intermediate care facility for persons with mental retardation (ICF/MR) do not fall under this limit and must be prior authorized by the Department. Refer to section 507.03 for procedures to follow to request prior authorization.

MA reimbursement for these services above these limits requires Department prior authorization.

Effective October 1, 1991, the following services require Department prior authorization **before any amount** of service may be provided. (**NOTE:** Some procedure codes have been changed or eliminated effective September 1, 1992. Refer to Instructional Bulletin #92-65A for further directions.)

Service Code Service Description

- X5643 15 minutes of personal care service by an independently enrolled personal care assistant (PCA)
- X5645 15 minutes of personal care service by a provider organization
- X5641 15 minutes of private duty nursing service by an independently enrolled R.N.
- X5642 15 minutes of private duty nursing service by an independently enrolled licensed practical nurse (L.P.N.)
- X5646 15 minutes of private duty nursing service by an R.N. employed by or under contract with a private duty nursing provider organization to a non-ventilator dependent recipient
- X5647 15 minutes of private duty nursing service by an R.N. employed by or under contract with a private duty nursing provider organization to a ventilator dependent recipient
- X5648 15 minutes of private duty nursing service by a L.P.N. employed by or under contract with a private duty nursing provider organization to a non-ventilator dependent recipient
- X5649 15 minutes of private duty nursing service by a L.P.N. employed by or under contract with a private duty nursing provider organization to a ventilator dependent recipient
- X5284 Skilled nurse visit (when provided to a recipient residing in an ICF/MR)

Refer to sections 507.01 or 507.03 for procedures to follow to request prior authorization.

VIII. ALL OTHER SERVICES

The following health services require prior authorization:

- 1. All air ambulance transportation that originates or is to a destination outside of Minnesota.
2. Scheduled ALS or BLS ambulance trips in excess of six trips per month. Procedure codes A0010 basic life support, A0222 ambulance return trip, A0225 neonatal transport, A0220 advanced life support, A0223 ALS supplies billed separately, and A0150 BLS nonemergency ambulance care are included.
3. Scheduled ground transportation provided outside of Minnesota.
4. Partial hospitalization programs.
5. Investigative health services and procedures (see Appendix F).
6. Procedures that may be considered cosmetic. If staged reconstructive surgery is being proposed for correction of a congenital anomaly the complete plan for future surgeries must be submitted with the first prior authorization.
7. All surgical or behavioral modification services aimed specifically at weight reduction.
8. Services provided outside of Minnesota. This requirement for prior authorization does not include services provided in a recipient's local trade area that would not require prior authorization if provided within Minnesota, emergency services, services needed because the recipient's health would be endangered if the recipient was required to return to Minnesota or services provided to children placed outside of Minnesota through the subsidized adoption assistance program under Minnesota Statutes, Section 256B.055, subdivision 1 or 2.
9. Treatment or removal of a hemangioma.

In addition, the following specific procedures require prior authorization:

Table with 2 columns: Service Code and Service Description. Lists various medical services such as manipulation of spine, implantable electrical nerve stimulator, Botulinum Toxin Type A, Acupuncture, Nutritional consultation, diabetes education sessions, and various contact types between case managers and clients.

<u>Service Code</u>	<u>Service Description</u>
X5331	Partial hospitalization program - adolescent
X5355* ¹⁰	Cardiac rehabilitation program; including physician services, per session
X5356* ¹⁰	Cardiac rehabilitation program; excluding physician services, per session
X5531* ⁴	Individual psychotherapy, discretionary visits, 45-50 minutes (replaces 90844-22)
X5641* ²	Private duty nursing by RN
X5642* ²	Private duty nursing by LPN
X7010	ICF-MR and DAC special needs - service (review by Long-term Care Division)
X7020	ICF-MR and DAC special needs - equipment (review by Long-term Care Division)
11920	Tattooing, intradermal introduction of insoluble opaque pigments to correct color defects of skin, including micropigmentation; 6.0 sq cm or less
11921	6.1 to 20.0 sq cm
11922	each additional 20.0 sq cm
11950	Subcutaneous injection of "filling" material (e.g., collagen); 1 cc or less
11951	1.1 to 5 cc
11952	5.1 to 10 cc
11954	over 10 cc
15775	Punch graft for hair transplant; 1 to 15 punch grafts
15776	more than 15 punch grafts
15780	Dermabrasion of skin
15781	less than total face
15782	regional
15783	superficial, any site (e.g., tattoo removal)
15786	Abrasion; single lesion
15787	each additional four lesions or less
15788	Chemical peel, facial; epidermal
15789	facial; dermal
15790	Chemical peel; total face
15791	regional, face, hand, or elsewhere
15792	non-facial; epidermal
15793	non-facial; dermal
15810	Salabrasion; 20 sq. cm or less
15811	over 20 sq. cm
15820	Blepharoplasty, lower eyelid
15821	with extensive herniated fat pad
15822	Blepharoplasty, upper eyelid
15823	with excessive skin weighing down lid
15824	Rhytidectomy; forehead
15825	neck with platysmal tightening (platysmal flap, "P-flap")
15826	glabellar frown lines
15828	cheek, chin and neck
15831	Excision, excessive skin and subcutaneous tissue (including lipectomy), abdomen (abdominoplasty)
15835	buttock
15836	arm
15832	thigh
15833	leg
15834	hip
15837	forearm or hand
15838	submental fat pad
15839	other area
15876	Suction assisted lipectomy, head and neck
15877	trunk
15878	Suction assisted lipectomy, upper extremity
15879	lower extremity
17106	Destruction of cutaneous vascular proliferative lesions (e.g. laser technique); less than 10 sq. cm
17107	10.0 - 50.0 sq. cm

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<u>Service Code</u>	<u>Service Description</u>
17108	over 50.0 sq. cm
17340	Cryotherapy for acne
17360	Chemical exfoliation for acne (e.g., acne paste, acid)
17380	Electrolysis epilation, each 1/2 hour
19140	Mastectomy for gynecomastia through circumareolar or other incision
19316	Mastopexy
19318	Reduction mammoplasty
19324	Mammoplasty, augmentation without prosthetic implant
19325	with prosthetic implant
19328	Removal of intact mammary implant
19355	Correction of inverted nipples
21010	Arthrotomy, temporomandibular joint
21050	Condylectomy, temporomandibular joint (separate procedure)
21060	Meniscectomy, temporomandibular
21070	Coronoidectomy (separate procedure)
21086	Impression and custom preparation; auricular prosthesis
21087	Impression and custom preparation; nasal prosthesis
21088	Impression and custom preparation; facial prosthesis
21137	Reduction forehead; contouring only
21138	Reduction forehead; contouring and application of prosthetic material or bone graft (includes obtaining autograft)
21139	Reduction forehead; contouring and setback of anterior frontal sinus wall
21144	Reconstruction midface, Lefort I; intrusion, single piece (e.g., for long face syndrome)
21145	Reconstruction midface, Lefort I; single piece, any direction, requiring bone grafts (includes obtaining autografts)
21146	Reconstruction midface, Lefort I; two pieces, any direction, requiring bone grafts (includes obtaining autografts) (e.g., ungrafted unilateral alveolar cleft)
21147	Reconstruction midface, Lefort I; three or more pieces, any direction, requiring bone grafts (includes obtaining autografts) (e.g., ungrafted bilateral alveolar cleft or multiple osteotomies)
21150	Reconstruction midface, Lefort II; anterior intrusion (e.g., Treacher-Collins syndrome)
21151	Reconstruction midface, Lefort II; any direction, requiring bone grafts (includes obtaining autografts)
21154	Reconstruction midface, Lefort III (extracranial), any type, requiring bone grafts (includes obtaining autografts); without Lefort I
21155	Reconstruction midface, Lefort III (extracranial), any type, requiring bone grafts (includes obtaining autografts); with Lefort I
21159	Reconstruction midface, Lefort III (extra and intracranial), with forehead advancement (e.g., mono bloc), requiring bone grafts (includes obtaining autografts); without Lefort I
21160	Reconstruction midface, Lefort III (extra and intracranial), with forehead advancement (e.g., mono bloc), requiring bone grafts (includes obtaining autografts); with Lefort I
21172	Reconstruction superior-lateral orbital rim and lower forehead, advancement or alteration, with or without grafts (includes obtaining autografts)
21175	Reconstruction bifrontal, superior-lateral orbital rims and lower forehead, advancement or alteration (e.g. plagiocephaly, trigonocephaly, brachycephaly), with or without grafts (includes obtaining autografts)
21179	Reconstruction, entire or majority of forehead and/or supraorbital rims; with grafts (allograft or prosthetic material)
21180	Reconstruction, entire or majority of forehead and/or supraorbital rims; with autograft (includes obtaining grafts)
21181	Removal by contouring of benign tumor of cranial bones (e.g., fibrous dysplasia), extracranial
21182	Reconstruction of orbital walls, rims, forehead, nasoethmoid complex following intra- and extracranial excision of benign tumor of cranial bone (e.g., fibrous dysplasia), with multiple autografts (includes obtaining grafts); total area of bone grafting less than 40 cm ²
21183	Reconstruction of orbital walls, rims, forehead, nasoethmoid complex following intra- and extracranial excision of benign tumor of cranial bone (e.g., fibrous dysplasia), with multiple autografts (includes obtaining grafts); total area of bone grafting greater than 40 cm ² , but less than 80 cm ²
21184	Reconstruction of orbital walls, rims, forehead, nasoethmoid complex following intra- and extracranial excision of benign tumor of cranial bone (e.g., fibrous dysplasia), with multiple autografts (includes obtaining grafts); total area of bone grafting greater than 80 cm ²
21188	Reconstruction midface, osteotomies (other than Lefort type) and bone grafts (includes obtaining autografts)
21193	Reconstruction of mandibular ramus, horizontal, vertical, "c" or "l" osteotomy; without bone graft

<u>Service Code</u>	<u>Service Description</u>
21194	Reconstruction of mandibular ramus, horizontal, vertical, "c" or "I" osteotomy; with bone graft
21195	Reconstruction of mandibular ramus, sagittal split; without internal rigid fixation
21196	Reconstruction of mandibular ramus, sagittal split; with internal rigid fixation
21198	Osteotomy, mandible, segmental
21206	Osteotomy, maxilla, segmental (e.g., Wassmund or Schuchard)
21240	Arthroplasty, temporomandibular joint, with or without autograft (includes obtaining graft)
21242	Arthroplasty, temporomandibular joint, with allograft
21243	Arthroplasty, temporomandibular joint with prosthetic joint replacement
21244	Reconstruction of mandible, extraoral, with transosteal bone plate
21245	Reconstruction of mandible or maxilla, subperiosteal implant, partial
21246	Reconstruction of mandible or maxilla, subperiosteal implant, complete
21247	Reconstruction of mandibular condyle with bone and cartilage autografts (includes obtaining grafts) (e.g., for hemifacial microsomia)
21248	Reconstruction of mandible or maxilla, endosteal implant, partial
21249	complete
21255	Reconstruction of zygomatic arch and glenoid fossa with bone and cartilage (includes obtaining autografts)
21256	Reconstruction of orbit with osteotomies (extracranial) and with bone grafts (includes obtaining autografts) (e.g., microphthalmia)
21299	Unlisted craniofacial and maxillofacial procedure
21260	Periorbital osteotomies for orbital hypertelorism
21261	combined intra and extracranial approach
21263	with forehead advancement
21267	Orbit repositioning
21268	combined intra and extracranial approach
21270	Malar augmentation, prosthetic material
21275	Secondary revision of orbitocraniofacial reconstruction
21462*7	Open treatment of closed or open mandibular fracture, with interdental fixation
21485	Complicated manipulative treatment of TMJ dislocation, initial or subsequent
30120	Excision or surgical planing of skin of nose
30400	Rhinoplasty, primary
30410	complete
30420	including major septal repair
30430	Rhinoplasty, secondary
30435	intermediate
30450	major revision
30460	Rhinoplasty for nasal deformity secondary to congenital cleft lip and/or palate, including columellar lengthening; tip only
30462	tip, septum, osteotomies
32851	Lung transplant, single; without cardiopulmonary bypass
32852	with cardiopulmonary bypass
32853	double (bilateral sequential or en bloc); with cardiopulmonary bypass
33212*11	Insertion or replacement of automatic implantable cardioverter-defibrillator pulse generator
33245	Implantation of automatic implantable cardioverter-defibrillator pads with or without sensing electrodes
33246	with insertion of automatic implantable cardioverter defibrillator pulse generator
33935	Heart-lung transplant with recipient cardiectomy, pneumonectomy
36260	Insertion of implantable intra-arterial infusion pump (eg, for chemotherapy of liver)
36261	Revision of implanted intra-arterial infusion pump
36468	Single or multiple injections of sclerosing solutions, spider veins (telangiectasia); limb or trunk
36469	face
36470	Injection of sclerosing solution; single vein
36471	multiple veins, same leg
38240	Bone marrow transplant, allogenic
38241	Bone marrow transplant, autologous
40700*6	Plastic repair of cleft lip/nasal deformity; primary, partial, or complete, unilateral
40701*6	primary bilateral, one stage
40702*6	primary bilateral, one of two stages

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<u>Service Code</u>	<u>Service Description</u>
40720* ⁶	secondary, by recreation of defect and reclosure
42140	Uvulectomy, excision of uvula
42145	Palatopharyngoplasty (eg, uvulopalatopharyngoplasty, uvulopharyngoplasty)
42200* ⁶	Palatoplasty for cleft palate, soft and/or hard palate
42205* ⁶	Palatoplasty for cleft palate, with closure of alveolar ridge
42210* ⁶	with bone graft to alveolar ridge
42215* ⁶	Palatoplasty for cleft palate, major revision
42220* ⁶	secondary lengthening procedure
42225* ⁶	attachment pharyngeal flap
43810	Gastroduodenostomy
43820	Gastrojejunostomy
43825	with vagotomy, any type
43842	Gastroplasty, vertical-banded, for morbid obesity
43843	Gastroplasty, other than vertical-banded, for morbid obesity
43844	Gastric bypass for morbid obesity
43845	Gastroplasty, any method, for morbid obesity
43846	Gastric bypass with Roux-en-Y gastroenterostomy
43850	Revision of gastroduodenal anastomosis with reconstruction; without vagotomy
43855	with vagotomy
43860	Revision of gastrojejunal anastomosis (gastrojejunostomy) with reconstruction; without vagotomy
43865	with vagotomy
44131	Enteroenterostomy, anastomosis of intestine; intestinal bypass for morbid obesity
47135	Liver transplant, with or without recipient hepatectomy
48160	Transplantation of pancreatic allograft
54400	Insertion of penile prosthesis; non-inflatable
54401	inflatable
54405	Insertion of inflatable penile prosthesis
54660	Insertion of testicular prosthesis
55970	Intersex surgery; male to female
55980	female to male
56356	Hysteroscopy; with endometrial ablation (any method)
61885	Incision and subcutaneous placement of cranial neurostimulator pulse generator or receiver, direct or inductive coupling
61888	Revision or removal of cranial neurostimulator pulse generator or receiver
63185	Laminectomy with rhizotomy; 1 or 2 segments
63190	Laminectomy with rhizotomy; more than 2 segments
63650	Percutaneous implantation of neurostimulator electrodes; epidural
63685	Incision and subcutaneous placement of spinal neurostimulator pulse generator or receiver, direct or inductive coupling
63688	Revision or removal of implanted spinal neurostimulator pulse generator or receiver
63750	Insertion, subarachnoid catheter with reservoir and/or pump for intermittent or continuous infusion of drug, including laminectomy
63780	Insertion or replacement, subarachnoid or epidural catheter, with reservoir and/or pump for drug infusion, without laminectomy
64550	Application of surface (transcutaneous) neurostimulator
64553	Percutaneous implantation of neurostimulator electrodes; cranial nerve
64555	peripheral nerve
64560	autonomic nerve
64565	neuromuscular
64573	Incision for implantation of neurostimulator electrodes; cranial nerve
64575	peripheral nerve
64577	autonomic nerve
64580	neuromuscular
64585	Revision or removal of peripheral neurostimulator electrodes
64590	Incision and subcutaneous placement of peripheral neurostimulator pulse generator or receiver, direct or inductive coupling
64595	Revision or removal of peripheral neurostimulator pulse generator or receiver
64612* ⁸	Destruction by neurolytic agent (chemodeneration of muscle endplate); muscles innervated by facial nerve

<u>Service Code</u>	<u>Service Description</u>
64613* ⁸	cervical spinal muscles
65760	Keratomileusis
65765	Keratophakia
65767	Epikeratoplasty
65770	Keratoprosthesis
65771	Radial keratotomy
65772	Corneal relaxing incision for correction of surgically induced astigmatism
65775	Corneal wedge resection for correction of surgically induced astigmatism
67345	Chemodenuervation of extraocular muscle
67900	Repair of brow ptosis (supraciliary, mid-forehead or coronal approach)
67901	Repair blepharoptosis, frontalis muscle technique with suture
67902	frontalis muscle technique with fascial sling
67903	(tarso)levator resection or advancement, internal approach
67904	(tarso)levator resection or advancement, external approach
67906	superior rectus technique with fascial sling
67909	Reduction of overcorrection of ptosis
67911	Correction of lid retraction
69300	Otoplasty, protruding ear, with or without size reduction
69930	Cochlear implant
78350	Bone density (bone mineral content) study; single photon absorptiometry
78351	dual photon absorptiometry
78608	PET scan; metabolic evaluation
78609	perfusion evaluation
78807	Radionuclide localization of abscess (SPECT)
90820* ¹⁴	Interactive diagnostic assessment
90855* ¹⁴	Interactive individual psychotherapy
90857* ¹⁴	Interactive group psychotherapy
90843-	
90844* ⁴	Psychotherapy
90847* ⁴	Family medical psychotherapy (bill using 90846 when family member being treated is not present)
90853* ⁴	Group medical psychotherapy
90899* ⁵	Unlisted psychiatric service or procedure, e.g., pain clinics
90915* ⁴	Biofeedback training, other
93784	Ambulatory blood pressure monitoring, utilizing a system such as magnetic tape and/or computer disk, for 24 hours or longer; including recording, scanning analysis, interpretation and report
93797* ¹⁰	Physician services for outpatient cardiac rehabilitation; without continuous ECG monitoring
93798* ¹⁰	with continuous ECG monitoring
95807	Sleep study
95808	Sleep study
95810	Sleep study
95828	Polysomnography (recording, analysis and interpretation of the multiple simultaneous physiological measurements of sleep)
95883* ¹⁹	Neuropsychological testing battery by doctoral-prepared licensed neuropsychologist
99199* ⁸	Chemodenuervation *8

*¹PA is required for treatments in excess of 6 per month and 24 per calendar year.

*²All hours of private duty nursing provided in a hospital or facility certified as an ICF, SNF, or ICF/MR.

*³PA is required for nutritional counseling services in excess of one nutritional counseling evaluation and two nutritional counseling, follow-up visits per calendar year.

*⁴:

A. PA is required for more than twenty-six (26) hours (52 visits/units of 90843) or 90915 (when billed in one unit increments) and twenty (20) hours of 90844 or 40 units of 90915 (when billed in two-unit increments) per calendar year. Note: The 90915 when billed as one unit and 90843 combined decrements from the total 26 hours per calendar year. There is not a sep-

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arate benefit level for each code. Likewise, 90915 when billed as two units and 90844 combined decrement from the total 20 hours per calendar year. There is not a separate benefit level for each code.

- B. In addition to the twenty hours of 90844 allowed in A above, a recipient is entitled to six (6) X5531's which are discretionary visits and may be used in any frequency or in combination with any other psychotherapy which is subject to the PA requirement without requiring PA. For example, a provider may choose to provide a group therapy session (90853) and an individual therapy session (90844 or X5531) during the same five (5) day calendar period. This would normally require PA if the 90844 code was used. See F below. However, by using one of the six (6) X5531's the PA system can be bypassed. THE PURPOSE OF THESE X5531s IS TO PROVIDE FLEXIBILITY WITHOUT THE NEED FOR OBTAINING PA. PLEASE UTILIZE THEM CAREFULLY AND THOUGHTFULLY.
- C. PA is required when 90843 or one unit of 90915 is provided more frequently than once every five (5) calendar days.
- D. PA is required either when more than three (3) hours of 90853 are provided within a five (5) calendar day period, or when more than seventy-eight (78) hours per calendar year has been reached.
- E. PA is required for 90847 in excess of 26 hours per calendar year or when provided more frequently than once every five (5) calendar days. (Note: 90846 must be used when the family member being treated is not present during the family therapy session. CPT 90846 is subject to the same P.A. requirements and limitations as those imposed on CPT 90847. Use of this code does not result in an additional benefit level but counts against the benefit level available for 90847.
- F. PA is required when more than one type of psychotherapy (individual, group, or family) is provided within a five (5) calendar day period. However, 90843 and 90844 cannot be provided more frequently than once every ten (10) calendar days without PA. (Note: 90846 and 90847 are both considered to be family therapy.)
- G. PA is required for 90844 or two units of 90915 when provided more frequently than once every ten (10) calendar days, and when 90843 or one unit of 90915, and 90844 or two units of 90915 are provided more frequently than one every ten (10) calendar days.

Calendar days are calculated by counting the first day after rendering a service as day one (1) and counting forward for a total of five (5) or ten (10) days as applicable. Additional services may not be provided until the sixth (6th) or eleventh (11th) day.

*⁵PA is required for pain clinic programs, eating disorder, and other structured outpatient programs.

*⁶PA required only when the service is performed on a patient 18 and over.

*⁷PA is required if this code is used more than 30 days after documented fracture.

*⁸PA is required for chemodenervation of any area.

*⁹PA is required for day treatment in excess of 390 hours.

*¹⁰PA is required in excess of 36 sessions per calendar year.

*¹¹This procedure code includes two services; the insertion or replacement of a pacemaker pulse generator or automatic implantable cardioverter-defibrillator pulse generator. When using this code to bill for the insertion or placement of pacemaker pulse generator, note this service in the Procedure box of the Practitioner Invoice, as this specific service does not require PA.

*¹²PA is required in excess of 6 sessions per calendar year.

*¹³PA is required in excess of 4 sessions per calendar year.

*¹⁴PA is required for 90820, 90855, 90857 when the thresholds of 90801, 90844, 90853 have been used. These codes will be included in the thresholds of codes 90801, 90844, 90853. (The provider cannot bill both a 90844 and 90855. The must choose one or the other.)

*¹⁵PA is required for cognitive training (X5317, or X5318, or a combination of X5317 and X5318) in excess of 390 hours.

*¹⁶PA is required for neuropsychological consultation (X5535) prior to service initiation and for more than 20 hours.

*¹⁷PA is required for neuropsychological consultation (X5536) prior to service initiation and for more than 78 hours.

*¹⁸PA is required for neuropsychological consultation (X5537) prior to service initiation. PA must be renewed each calendar year (i.e., in January).

*¹⁹PA is required for neuropsychological testing and assessment (95883) prior to service initiation.

*²⁰Acupuncture is covered for chronic pain. PA is required in excess of 10 sessions.

MN DEPARTMENT OF HUMAN SERVICES • HEALTH CARE MANAGEMENT DIVISION • PRIOR AUTHORIZATION UNIT

CLOZARIL INFORMATION - INITIAL TREATMENT REQUEST
THIS FORM MUST BE COMPLETED BY THE PHYSICIAN

A COPY OF THIS COMPLETED FORM AND ANY PHYSICIAN DOCUMENTATION ON THE BACK OF THIS FORM MUST BE ATTACHED TO THE PRESCRIPTION SENT TO THE PHARMACY

I. GENERAL INFORMATION:

- 1. PHYSICIAN NAME: _____ 2. MA PROVIDER NUMBER: _____
- 3. SPECIALTY: _____
- 4a. PATIENT NAME: _____ 4b. MA ID#: _____
- 4c. PATIENTS' CLOZARIL NATIONAL REGISTRY #: _____
- 5. NUMBER OF HOSPITAL ADMISSIONS DURING THE PAST TWO YEARS: _____
- 6. NUMBER OF DAYS PATIENT WAS IN HOSPITAL DURING PAST TWO YEARS: _____
- 7. REGARDING DRUG TRIALS : (circle one)
 - a. There was a lack of response to trials of other neuroleptic medications.
 - b. Was unable to achieve an effective dose of other neuroleptic medications due to intolerable and refractory extra pyramidal side effects or tardive dyskinesia.

(If [b], please describe on the back of this form. Note the side effect, for tardive dyskinesia, include the Abnormal Involuntary Movements Scale (AIMS) or Dyskinesia Identification Systems Condensed User's Scale (DISCUS) score.

II. CRITERIA FOR APPROVAL:

- 1. Diagnosis of schizophrenia per DSM-III-R 295.XX excluding 295.40. _____ YES _____ NO
- 2. SEVERITY OF ILLNESS:
Score on Brief Psychiatric Rating Scale (BPRS) of 45 or greater on an 18 item version, or at least a score of five in four of the following BPRS categories: A. Emotional Withdrawal; B. Conceptual Disorganization; C. Suspiciousness; D. Hallucinatory Behavior; E. Unusual Thought Content; F. Blunted Affect.
Note letters (from above) of categories or BPRS Score: _____
- 3. Duration of disease is six months or more. _____ YES _____ NO
- 4. Patient has had a minimum of two unsuccessful drug trials which met all of the following guidelines: _____ YES _____ NO
 - a. The two neuroleptics were from at least two anti-psychotic classes.
 - b. A trial of depo medication or documentation that such a trial was considered and reasons for rejection (use back of this form).
 - c. Duration of at least six weeks for each trial.
 - d. 1. Dosage of each drug was equivalent or greater than 1000mg per day of Chlorpromazine; or 2. Was unable to achieve an effective dose of trial neuroleptic medications due to intolerable and refractory extra pyramidal side effects or tardive dyskinesia.
- 5. Do any of the following apply to this patient?
 - a. History of a blood dyscrasia _____ YES _____ NO
 - b. Receiving other agents which have potential to suppress bone marrow function _____ YES _____ NO
 - c. Has an uncontrolled seizure disorder _____ YES _____ NO

(If yes to 5a-c, please document on the back the rationale for prescribing Clozaril.)
- 6. Do any of the following apply to this patient?
 - a. Has significant cardiac disease or is cardiac compromised _____ YES _____ NO
 - b. Has other severe medical condition(s) _____ YES _____ NO

(If yes to 6a-b, please document on the back the rationale for prescribing Clozaril.)

PHYSICIAN SIGNATURE: _____ DATE: _____

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MN DEPARTMENT OF HUMAN SERVICES • HEALTH CARE MANAGEMENT DIVISION • PRIOR AUTHORIZATION UNIT

CLOZARIL INFORMATION - CONTINUING TREATMENT REQUEST

THIS FORM MUST BE COMPLETED BY THE PHYSICIAN

A COPY OF THIS COMPLETED FORM AND ANY PHYSICIAN DOCUMENTATION ON THE BACK OF THIS FORM MUST BE ATTACHED TO THE PRESCRIPTION SENT TO THE PHARMACY

I. GENERAL INFORMATION:

1. PHYSICIAN NAME: _____ 2. MA PROVIDER NUMBER: _____
3. SPECIALTY: _____
4a. PATIENT NAME: _____ 4b. MA ID#: _____
4c. PATIENTS' CLOZARIL NATIONAL REGISTRY #: _____
5. NUMBER OF HOSPITAL ADMISSIONS & THE NUMBER OF HOSPITAL DAYS DURING THE PAST 3 MONTH/6 MONTH/12 MONTH (please circle the 3, 6 or 12) COURSE OF TREATMENT WITH CLOZARIL : _____
6. WHEN & WHERE WAS THIS PATIENT STARTED ON CLOZARIL? _____

II. CRITERIA:

- NO 1. Diagnosis of schizophrenia per DSM-III-R 295.XX excluding 295.40: _____ YES _____ NO
2. The patient has a current Clozaril National Registry Number: _____ YES _____ NO
- 3a. For patients started before 12/01/91 who have a baseline BPRS Score:
There has been a reduction greater than 20% from baseline in the Basic Psychiatric Rating Scale (BPRS) Total: _____ YES _____ NO
- or
- A two point reduction in at least two of the following key BPRS categories: _____ YES _____ NO
A. Emotional Withdrawal; B. Conceptual Disorganization; C. Suspiciousness;
D. Hallucinatory Behavior; E. Unusual Thought Content; F. Blunted Affect.

Please note letters (from above) of categories where there has been a two point reduction. _____

- 3b. If the patient was started on Clozaril before 12/01/91 and BPRS was not done for a baseline please document on the back of this form in specific terms as to how the patient has benefitted during the trial period.
4. If you had indicated on your Initial Request that you were prescribing Clozaril because of intolerable and refractory side effects, please answer the following:
- a. If tardive dyskinesia was a problem, has it improved? _____ YES _____ NO
Give current scores on AIMS or DISCUS Scales.
(Please document on the back of this form.)
- b. If extra pyramidal side effects were a problem have they improved? _____ YES _____ NO
(Please document on the back of this form.)

PHYSICIAN SIGNATURE: _____ DATE: _____

(12/01/91)

Labor and Industry Department

Labor Standards Division

Notice of Prevailing Wage Certifications for Commercial Construction Projects

Effective January 10, 1994 prevailing wage rates were determined and certified for commercial construction projects in: Anoka county: Reroof Food Service Building M.C.F.-Lino Lakes. Hennepin county: MPLS/STP International Airport Security Checkpoints Relocation, U of M Reroofing University Store South, West Bank Waterproofing Project-Minneapolis. Houston county: Caledonia High & Elementary Remodeling & Addition-Caledonia. Ottertail county: Parkers Prairie Public School Temperature Control System-Parkers Prairie. Rice county: Faribault Deaf Academy Freschette Hall Elevator Installation-Faribault. St. Louis county: U of M/Duluth New Campus Center-Duluth.

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

Metropolitan Council

Public Hearing on Regional Recreation Open Space Revised Capital Improvement Program for Fiscal Years 1994-2000

The Metropolitan Council's Committee of the Whole will hold a public hearing on the revised Regional Recreation Open Space Capital Improvement Program (CIP) for Fiscal Years 1994-2000 on Thursday, Feb. 10, 1994, 4:30 p.m. (immediately following the Metropolitan Council meeting). The hearing will be held in the Council Chambers, Mears Park Centre, 230 E. Fifth St., St. Paul. The CIP may affect the standards for determining projects of metropolitan significance in the Metropolitan Significance Rules.

Interested persons are encouraged to attend the hearing and offer comments. People may register in advance to speak by calling Ellie Porter at 291-6312 or 291-0904 (TDD). Upon request, the Council will provide reasonable accommodations to people with disabilities. Written comments, which must be received by 4:30 p.m., Feb. 25, 1994, should be sent to Arne Stefferud, Metropolitan Council, 230 E. Fifth St., St. Paul, MN 55101. Copies of the public hearing document (Publication No. 32-94-008) are available for review at major public libraries in the seven-county Twin Cities Metropolitan Area or by contacting the Council's Data Center at 291-8140 or 291-0904 (TDD).

Minnesota Comprehensive Health Association

Notice of Meeting of the Finance Committee

NOTICE IS HEREBY GIVEN that a meeting of the Minnesota Comprehensive Health Association (MCHA), Finance Committee will be held at 1:00 p.m. on Wednesday, January 19, 1994 at Allianz Life (formerly North American Life & Casualty Company), 1750 Hennepin Avenue South, Minneapolis, Minnesota.

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

Minnesota Comprehensive Health Association

Notice of Legislative and Public Policy Committee Meeting

NOTICE IS HEREBY GIVEN that a meeting of the Minnesota Comprehensive Health Association (MCHA), Legislative and Public Policy Committee will meet at 8:00 a.m. on Thursday, January 13, 1994 at Park Place Center, 5775 Wayzata Boulevard, St. Louis Park, Minnesota. The meeting will be in Suite #746.

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

Public Employees Retirement Association

Board of Trustees, Notice of Meetings

The next regular monthly meeting of the Board of Trustees of the Public Employees Retirement Association (PERA) will be held on Thursday, January 13, 1994, at 9:30 a.m. in the PERA offices, 514 St. Peter Street - Suite 200, St. Paul, Minnesota.

Official Notices

An Information Forum of the Public Safety Officer will be held on Wednesday, January 19, 1994, at 1:00 p.m. in the offices of the Association.

Minnesota Small Business Assistance Office

Notice of Open Nominations For 1994 Governor's Entrepreneurship Award

Nominations are currently being taken for the annual Governor's Entrepreneurship Award. The award is made to individuals whose leadership and efforts have had a substantial impact on the startup, operation or expansion of a profit-making Minnesota business.

To be eligible, individuals must have performed their entrepreneurial activities and efforts as founders, officers or employees of a Minnesota business which has:

- Begun operations within the last five years;
- Passed beyond the development stage at the time of nomination;
- Demonstrated success in areas like, but not limited to: introduction of new products or services, use of new production processes, entry into a new market or achievement of substantial market share position in an established market where it was a new entrant, implementation of new strategies for financing, production, marketing, cost-reduction, distribution and the like; and as a result:
- Achieved competitive advantage in markets, created jobs, demonstrated growth in sales, growth in market share and profits.

Nominations are encouraged from all sectors of the business community, from all areas of the state, and from both small and large businesses. Award recipients will be selected by a panel of outside reviewers. Awards will be made in early May, 1994.

Further information on nomination criteria and procedures may be obtained by contacting:

Governor's Entrepreneurship Award
Minnesota Small Business Assistance Office
500 Metro Square
121 Seventh Place East
St. Paul, MN 55101-2146
(612) 296-5023 (Twin Cities area)
1-800-657-3858 (ask for Small Business Assistance)

Teachers Retirement Association

Notice of Regular Meeting

The Board of Trustees, Minnesota Teachers Retirement Association will hold a meeting on Friday, February 4, 1994, at 9:30 a.m., in Suite 500, Gallery Building, 17 W. Exchange St., St. Paul, MN to consider matters which may properly come before the Board.

NEW Fire Code Books Now Available

Minnesota State Fire Marshal Amendments 1993

Minn. Rules Chapter 7510.3100 - 7510.3280.
State fire safety standards for buildings, smoke detectors and alarms and changes to the Uniform Fire Code. Also rules governing storage and handling of flammable materials. 3-80 SR \$6.00

Uniform Fire Code 1991

National fire standards. Includes requirements for inspections, fire extinguishers, storage and handling of combustible materials, fireworks and more. 19-37 SR \$48.75



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 building code publications.

State Grants

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.

Department of Corrections

Notice of Availability of Funds for a Coalition of Abused Children Programs

The Minnesota Department of Corrections, Victim Services Unit, announces the availability of grant funds to establish a statewide coalition of abused children programs. One grant for \$30,000 will be awarded to a nonprofit organization for a twelve month period beginning July 1, 1994. Funds are made available through the Minnesota State Legislature.

Funds granted will support a statewide, membership coalition that has as its primary mission the eradication of child abuse and responds to the needs and concerns of Minnesota's abused children through input from its members.

Private nonprofit organizations and governmental units are eligible to apply for these funds. The deadline for submission is 4:30 p.m., Friday, March 11, 1994.

To receive a request for proposals which describes how to apply contact:

Margaret Miller
Department of Corrections/Victim Services Unit
300 Bigelow Building
450 North Syndicate Street
St. Paul, MN 55104
612/642-0251

Department of Health

Office of Rural Health

Notice of Availability of Funds to Plan and Develop Community Health Centers in Rural Medically Underserved Areas of Minnesota

The Commissioner of Health announces availability of funds to plan and develop community health centers in medically underserved areas of rural Minnesota. Rural communities are encouraged to consider community health centers as an option to meet essential healthcare requirements.

Seven hundred fifty thousand dollars will be available for grants to assist communities plan and establish their own centers. Grants can vary in size from \$20,000 to \$150,000 dependent on purpose, need and status of the project. Planning Grants will typically range from \$20,000 to \$37,250. Project grants include expansion and conversion grants which will run \$50,000 to \$75,000; and start up grants of \$90,000 to \$150,000. The exact size and mix of grants will be determined based on need demonstrated in applications.

Planning: Communities may be selected for Planning Grants if need, eligibility and intent to develop a community health center have been established. These funds should be used for (preconstruction) community organization, project development, facility, equipment, and organizational planning. Planning grants may also be used to qualify for Federal Rural Health Clinic and rural Federally Qualified Health Center programs.

Project Grants include CHC Start-up, Expansion and Conversion Grants:

Start-Up: Communities may be selected for Start-Up Grants for facilities, capital equipment, move, initial staffing and set-up. Funded community health centers are expected to be operational on or before December 31, 1995.

Practice Conversion or CHC Expansion: Communities may obtain funding for conversion of existing medical practices to community health centers. This provides a mechanism for communities to retain essential medical services which might otherwise be lost. Existing CHCs may also apply for grants to add sites in underserved rural areas.

Major eligibility requirements are highlighted below. The project must:

-Be located in a rural shortage area (Medically Underserved Area, Federal Health Professional Shortage Area, or Governor

State Grants

Designated Shortage Area). Rural is defined as outside the ten county Twin Cities metropolitan area, and outside the Duluth, St. Cloud, East Grand Forks, Moorhead, Rochester, and LaCrosse census defined urbanized areas.

-Represent or propose the formation of a non-profit corporation with local governance, or be a tribal or other governmental entity.

-Result in a locally owned and operated community health center which includes primary and preventive healthcare services, and incorporates quality assurance, regular review of clinical performance and peer review.

-Seek to employ midlevel professionals, where appropriate.

-Demonstrate sufficient community and popular support to raise 20% matching requirement and to sustain operations.

Information and/or applications are currently available from Thad Sparkman, Office of Rural Health, Minnesota Department of Health, P.O. Box 9441, Minneapolis, MN 55440-9441, (612) 623-5504. Letters of interest are due February 1, 1994. The deadline for submission of completed applications is 4:30 P.M., Tuesday, March 15, 1994. Late applications will not be accepted.

This announcement does not obligate the Commissioner to fund proposed projects. The right is reserved to modify or cancel the solicitation if it is deemed in the interest of the State to do so.

Minnesota Housing Finance Agency

Notice of Fund Availability and Request for Proposals Housing Trust Fund Housing Program

The Minnesota Housing Finance Agency (MHFA) and the Housing Trust Fund Advisory Committee (HTFAC) announce the availability of \$1,400,000 in loan funds to eligible sponsors to assist them in the development, construction, acquisition, preservation and rehabilitation of affordable rental housing, limited equity cooperative housing, and homes for ownership by low income persons. These funds were generated by interest earnings on real estate brokers' trust accounts; interest accrued on revenue bond application fees and forfeited fees; and state appropriated funds.

FORM OF AWARDS: Funds are awarded to projects in the form of a zero interest deferred loan. To encourage the long term affordability of the housing provided under this program, a thirty year repayment schedule is used. The loan must be repaid in full if the project fails to operate as affordable housing for low income persons during the first ten years of the loan. During the next twenty years, five percent of the loan is forgiven each year provided that the housing remains affordable for low income persons and families.

SET ASIDE: Up to twenty percent (approximately \$280,000) of the total funds available may be used for projects that are not compatible with the 30 year repayment schedule. Within the twenty percent set aside, up to \$140,000 will be available for home ownership projects. The MHFA's and the HTFAC's intent is to use this set aside of funds to encourage innovative proposals which would otherwise not be possible to fund given the 30 year use commitment. Applications submitted under the set aside will be evaluated with all applications received in response to the Request for Proposals.

ELIGIBLE APPLICANTS: Eligible applicants are individuals, for-profit entities, nonprofit entities, Minnesota Cities, joint power boards established by two or more cities, and Housing and Redevelopment Authorities.

ELIGIBLE PROJECTS: The legislation requires that the funds from the trust fund account be used "to provide loans or grants for projects for the development, construction, acquisition, preservation, and rehabilitation of low income rental and limited equity cooperative housing units and homes for ownership. At least 75 percent of the rental and cooperative units, and 100 percent of the homes for ownership in the development or all of the units funded by the housing trust fund account, must be rented to or cooperatively owned, or owned by persons and families whose income does not exceed 30 percent of the median family income for the metropolitan area." (*MN Statutes* Sect. 462A.201 Subd. 2, as amended.) As of February 1993, 30 percent of the Minneapolis/St. Paul area median income was \$14,880.

It is the desire of the MHFA and the HTFAC to use the Housing Trust Fund Housing Program to encourage and support innovative approaches to housing problems which provide affordable housing with strong local support. It is expected that these funds will be used to leverage other funds or to provide the final piece of a financing package. They can be used in conjunction with other MHFA, State, or Federal programs as appropriate.

The range of Housing Trust Fund awards from the smallest to the largest has been \$3,000 to \$190,000. The MHFA will not be accepting applications for proposals whose primary purpose is lead based paint abatement.

APPLICATION PROCESS: Applicants should request application packets from MHFA staff:

Professional, Technical & Consulting Contracts

Minnesota Housing Finance Agency
400 Sibley Street, Suite 300
St. Paul, MN 55101
(612) 297-3294

If after reviewing the application materials there are any questions concerning the Housing Trust Fund Housing Program or the application process they should be directed to Denise Holter (612) 297-4294. Samples of successful applications are available for review at the MHFA offices. Applicants are encouraged to discuss the feasibility of their project proposal with MHFA staff prior to submitting an application for funds.

The original and two (2) copies of the application are due by 4:30 p.m. on Friday, February 25, 1994. The Housing Trust Fund Advisory Committee will review the applications and should make funding recommendations to the MHFA Board by April 28, 1994.

This Request for Proposals (RFP) is subject to all applicable federal, state, and municipal laws, rules, and regulations. MHFA reserves the right to modify or withdraw this RFP at any time and is not able to reimburse any applicant for costs incurred in the preparation or submittal of applications.

The Minnesota Housing Finance Agency is an Equal Housing Opportunity and Equal Employment Agency.

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 Administration

Plant Management Division/Energy Management Services

Notice of Request for Statement of Qualifications from firms qualified to design, develop and install a Savings Monitoring System (SMS).

Minnesota Statute MS 16B.32 Subd 2 requires the Department of Administration to pursue energy efficiency improvements in state-owned and wholly state leased buildings in collaboration with utility companies such as Northern States Power Company (NSP). The goal of the statute is to reduce the energy consumption in these buildings by 25%. This is being accomplished under the Minnesota Energy Retrofit Program which is a program under which energy using systems (lighting, chillers, steam systems, etc.) within state-owned buildings are modified or replaced so as to use less energy. To properly monitor the program results will require a Savings Monitoring System. The estimated dollar value of this project is between \$500,000 and \$1,500,000.

Scope

The SMS is to be designed to include three principal components:

- A. Meters which measure the amount of energy being utilized by the facilities being retrofitted. This portion of the system includes data panels necessary to interface with the communication system and wiring or phone lines between meters and the data panels.
- B. Communication System which transmits the metered data electronically to a central location.
- C. Management Analysis Reports and related software which compare actual energy use to pre-retrofit energy use both in energy units (such as Btu's and KWH's) and in dollars (\$). The management analysis reports will not only track the on-going savings from the retrofit, but will also identify excessive running time or inefficient operation of large energy-using equipment such as chillers, air handling units and lighting and heating systems.

Functions of the SMS must be completely independent from any Energy Management System (EMS) used to locally control and monitor energy use within a state facility. Additionally, meter calibration must meet the requirements of the SMS system.

Professional, Technical & Consulting Contracts

A limited number of qualified responders will be selected to submit proposals. Statements of Qualifications must be submitted on or before 4:00 p.m., January 31, 1994,

to: Mr. Rajan Thomas
Plant Management Division
Energy Management Services
625 North Robert Street
St. Paul, MN 55101
(612-282-5234)

Copies of the complete Request for Qualifications may be obtained from the foregoing office.

Department of Administration

The Department of Labor and Industry together with the Materials Management Division, Department of Administration is seeking proposals for the Daedalus project.

The Daedalus project is comprised of business process reengineering, technology, and change management all meant to achieve the objectives of the Workers Compensation Division.

Currently the Workers Compensation Division is undergoing a major reengineering study. The purpose of this request for proposal is to provide the technological and change management components to support the reengineered business processes.

A request for proposal can be obtained from materials Management Division, 112 State Administration Building, 50 Sherburne Ave., St. Paul Minnesota 55155 Attn: Donald H. Olson fax (612) 297-3996, telephone (612) 296-3771. Proposals must be time stamped no later than 2:00 P.M. Friday, February 18, 1994 at the above address.

This notice does not obligate the State to complete the work described in this notice, and the State reserves the right to cancel this solicitation.

Department of Human Services

Health Care Policy Division

Notice of Availability of a Maternal and Child Health Care Specialist Contract: Working Title: MCH Program Specialist

The Department of Human Services (DHS) will issue a contract for a maternal and child health care specialist position. This position will be responsible for promoting provider participation in two DHS health care programs for the low income maternal and child population. The two programs are the Prenatal Care Program (PCP), and Child and Teen Checkups (C&TC). This position will provide PCP and C&TC program training to health care providers who are enrolled in Minnesota Medical Assistance. The training will address the administrative aspects of PCP and C&TC as they relate to Medical Assistance (MA) and MinnesotaCare clients.

DHS will contract with the selected candidate for 1 year on a full time basis. The candidate must be a health care professional or other related profession with experience working directly with health care providers. Recent experience in public health and obstetric or pediatric practice serving low income and culturally diverse populations is required. Experience in the areas of education and program promotion is also required. Experience with the managed care system is highly desirable.

The primary responsibilities of the position are to:

1. Recruit PCP and C&TC providers in underserved geographic areas in Minnesota.
2. Promote the PCP and C&TC programs to the appropriate provider communities.
3. Design and conduct PCP and C&TC workshops for providers regarding program administration requirements and standards of practice.
4. Evaluate results of the PCP and C&TC workshops and other related activities, and prepare a written report of the findings for DHS.
5. Coordinate activities with relevant Minnesota Department of Health activities, and serve in an advisory capacity to DHS as needed.

This position offers the opportunities to advance DHS' commitment to improving health care access for low income women, children, and families.

Professional, Technical & Consulting Contracts

A contract will be awarded based on recent experience, education, achievements, and professional standing. DHS will make the final selection and will issue a contract effective March 1, 1994.

DHS reserves the right to reject all applicants and/or not to contract.

Interested parties should direct inquiries or submit resumes by 4:30 p.m. on January 31, 1994 to:

Nancy McMorrان, Health Policy Division
Minnesota Department of Human Services
444 Lafayette Road
St. Paul, MN 55155-3853
Phone: (612) 296-8822
FAX (612) 297-3230

Department of Human Services

Moose Lake Regional Treatment Center

Notice of Request for Proposal for Pharmacy Services

NOTICE IS HEREBY GIVEN that the Moose Lake Regional Treatment Center, Mental Health Bureau, Department of Human Services, is seeking the services for the period February 1, 1994 thru June 30, 1994.

These services are to be performed as requested by the Administration of the Moose Lake Regional Treatment Center.

Requesting a full range of pharmacy services for approximately 150 - 200 mentally ill, chemically dependent and developmentally disabled clients.

The estimated amount of contract is \$39,600.00.

Responses to the above services must be received by January 31, 1994.

Direct inquiries to: Frank R. Milczark
Chief Executive Officer
Moose Lake Regional Treatment Center
1000 Lakeshore Drive
Moose Lake, MN 55767
(218) 485-4411 Ext. 242

Iron Range Resources and Rehabilitation Board

Iron Range Resources and Rehabilitation Board is requesting proposals to contract with a management firm to manage the food operations and/or programs and maintenance operations at Ironworld U.S.A. The purpose of this contract is to increase revenue and cut the operating costs at the facility. Ironworld U.S.A. is a seasonal tourism facility with an ethnic theme located in Chisholm, Minnesota.

The contractor selected will be responsible for improvements in the food area which will include management of all food areas (food preparation, food availability, food pricing, etc.) and/or complete management of the facility including:

- ticket sales
- promotion
- concessions
- entertainment
- demonstrations
- sponsorships
- children's area
- Interpretative Center
- exhibits
- overall operations and physical operation
- training of employees

Non-State Public Bids and Contracts

Responders must have a minimum of ten (10) years experience operating a similar tourist attraction and/or promoting and producing major entertainment festivals.

Prospective responders who have any questions or would like to receive a complete request for proposal may call or write:

Shirley Robinson or Bob Benner
IRRRB
P.O. Box 441
Eveleth, MN 55734
(218) 749-7721

by January 21, 1994. Proposals due date will be February 10, 1994. Other department personnel are not allowed to speak with anyone, including responders, about this proposal before the proposal submission deadline.

All proposals received will be evaluated by representatives of the IRRRB. In some instances, an interview may be part of the evaluation process.

Human Rights Certificate of Compliance- Required for bids in excess of \$50,000.00

The following information must accompany the proposal:

Have you employed more than twenty (20) full-time employees on a single working day during the previous twelve (12) months within the United States?

Yes _____ No _____

If your answer is yes, your proposal will be rejected unless you have an Affirmative Action plan certified by the State of Minnesota, Department of Human Rights.

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.

Ramsey County

Department of Public Works Engineering/Operations

Request for Prequalification Statements: Notice for Prequalifications for Bridge and Highway Reconstruction Preliminary Engineering - Design

Ramsey County is considering an expanded Bridge construction program. To assist with the implementation of this program, Ramsey County may require the services of qualified consultants.

The services required are the preparation of feasibility reports, project memorandums, design study reports, field surveys, soil analysis, preliminary and detailed design plans, and specifications for County State Aid Highway, Federal and State contract award. The consultant will also be required to conduct public meetings and secure approvals from the municipality, Minnesota Department of Transportation and other agencies as required for specific projects.

Consultants who wish to be considered for any potential projects under this program should submit six copies of their prequalification brochure and/or resume, including federal forms 254 and 255, by January 27. The brochure and resume shall be limited to 20 pages. This is not a request for proposal. The prequalifications will be used by the County as a mechanism for selecting which firms will be invited to an oral interview. It is expected a qualified reference list will be developed from the interview process which will remain in effect for the next five years.

Non-State Public Bids and Contracts

Please send your response to Wayne Leonard, Project Engineer, Ramsey County Department of Public Works, 3377 N. Rice Street, Shoreview, MN 55126, (612-482-5210).

Minnesota Zoo

NOTICE IS HEREBY GIVEN that the Minnesota Zoo, through their Project Management Department, is seeking architectural and/or engineering services for facility and site modifications for compliance with Americans with Disabilities Act (A.D.A.) Proposals will be submitted to the Project Management Department, Minnesota Zoo, Gate 2, 12101 Johnny Cake Road, Apple Valley, MN on Friday, February 4, 1994. To obtain a copy of the Request For Proposal (R.F.P.) or for further information please contact Robert K. Wallace at (612) 431-9302.

Metropolitan Council

FY 94-95 Public Education for Cross-Cultural Materials Request for Proposals Grant Program Publication Number 522-94-003 January, 1994

ELIGIBLE PROJECT SPONSORS: Businesses, nonprofit agencies, public institutions, school districts, and trade or industry organizations demonstrating an intimate understanding of the culture for which the project activities are proposed are eligible project sponsors. Projects must be implemented in the seven-county Metropolitan Area.

Since solid waste management message development has been done, the project sponsors will be required to work with municipal and county solid waste coordinators in producing cross-cultural solid waste management public education materials to ensure dissemination of the most current information.

PURPOSE: The Public Education Grant program for Cross-Cultural Materials is designed to provide eligible project sponsors with the opportunity and resources to produce cross-cultural educational materials for the region's culturally diverse population that will result in increased quality and quantity of landfill abatement information and opportunities in the Metropolitan Area. \$300,000 has been allocated to the Cross-Cultural program and is being made available to assist the region in meeting abatement goals and detoxifying the waste stream.

PROPOSAL SUBMISSION DATES: By 4:00 p.m. on Tuesday, April 19, 1994; and, if the total funding allocation has not been fully expended, by 4:00 p.m. on Tuesday, November 29, 1994. An Informational Meeting will be held on Wednesday, February 2, 1994, 9:00 - 10:30 a.m. - R.S.V.P.

GRANT REQUEST MAXIMUM: \$40,000.00 - 10% cash or in-kind matching funds required. Retroactive grant requests are ineligible for funding.

COUNCIL STAFF: Victoria Reinhardt, Grants Administrator, (612) 291-6536; Sunny Jo Emerson, Grants Assistant, (612) 291-6499; TDD (612) 291-0904

SUBMITTAL ADDRESS: Metropolitan Council, 230 East Fifth Street, St. Paul, MN 55101-1634

Metropolitan Council

Request for Proposals for Functional Industry and Pressure Points Analyses for Creating/Expanding Recycled Materials Markets for Four Specified Commodities - 1) Corrugated Cardboard and Kraft Paper; 2) Food Waste; 3) Wood Waste; and 4) Plastic Film Publication number: 522-94-005 January, 1994

ELIGIBLE APPLICANTS: Businesses, research firms and post-secondary educational institutions with expertise in economics, especially in commodity issues and industry analyses.

OVERVIEW OF THIS RFP: The purpose of the grant is to conduct research and develop reports that present comprehensive functional industry, value-added and pressure points analyses for creating and/or expanding recycled materials markets for each of the following four commodities: 1) CORRUGATED CARDBOARD and KRAFT PAPER; 2) FOOD WASTE; 3) WOOD WASTE; and 4) PLASTIC FILM. Each commodity may be the subject of a separate grant agreement. It is expected that the grant agreement(s) will be made with a single entity, but separate grantees/contractors for one or more of the commodities will be considered.

Grantee/contractor(s) will be expected to meet with the Council's project manager on a monthly basis to review project materials and progress. Grantee/contractor(s) will prepare and submit a draft report to the Council for review and approval. Grantee/contractor(s) will make all required changes and submit a final report, executive summary and presentation graphics. Work is expected to be of the highest quality with all decisions about whether the work meets this criterion made by the project manager. Grantee/con-

Non-State Public Bids and Contracts

tractor(s) will make two presentations following the completion of each final report and before the end of the grant agreement period. Grantee/contractor(s) will be selected according to criteria found later in this RFP. Targeted Group Business (TGB) participation is encouraged and will be considered in the proposal evaluation.

BACKGROUND: This project is an outgrowth of directed research prepared for the Council in 1992 and 1993. That research resulted in two reports—*Creating Recycled Materials market for PET Plastic Containers...Roles, Responsibilities and Pressure Points* and *Creating Recycled Materials Markets for Mixed Office Paper...Roles, Responsibilities and Pressure Points*. These reports examined the structure of each industry nationally, regionally and locally; identified major industry competitors, market forces, financial value-added and key switching points to determine which sectors in the industry are best positioned to “drive” increase demand for each recycled commodity. The reports also examined how different types of public sector market development tools may be used to best overcome industry barriers at those key switching points, and then recommended a course of action to expand the recycled materials markets for the two commodities.

This project will duplicate some, but not all of the tasks in the earlier directed research project. The analyses and reports for the four commodities listed above will examine the structure of each industry nationally, regionally and locally; identify major industry competitors, market forces, financial value-added and key switching points and identify which sectors in the industry are best positioned to “drive” increase demand for each recycled commodity. The other elements in the earlier studies will not be repeated in this project.

Copies of the two previously completed reports can be reviewed in the Council library from 8:15 a.m. to 5 p.m. weekdays or can be purchased from the Council’s Data Center for \$4.00 each. To order copies, call the Data Center at (612) 291-8140, TDD (612) 291-0904 or FAX (612) 291-6550 or write to: Metropolitan Council Data Center, 230 East 5th Street, St. Paul, MN 55101-1634. For additional information about the previous studies, please contact: Jim Uttley at (612) 291-6361 or TDD (612) 291-0904.

DEADLINE FOR SUBMISSION OF PROPOSAL: 4:00 P.M. (CST), Tuesday, March 1, 1994. **INFORMATIONAL MEETING:** 9:00 - 10:30 a.m., Tuesday, February 1, 1994, R.S.V.P.

GRANT AMOUNT: Not to exceed \$100,000 for 4 commodities.

COUNCIL GRANTS ADMINISTRATOR: Victoria Reinhardt (612) 291-6536 TDD (612) 291-0904.

SUBMITTAL ADDRESS: Metropolitan Council, 230 East Fifth Street, St. Paul, MN 55101-1634.

Information for Health Care Services

Health Care Facilities Directory

Lists of all Minnesota licensed and certified health care facilities. Statistical data tables and listings organized alphabetically by county, town and facility. Features hospitals, nursing homes, boarding homes, outpatient care, hospice and more. 213 pp. plus index. 1-89 SR \$18.95

Minnesota Health Statistics -- 1990

Minnesota Center for Health Statistics, published August 1992. Tables, diagrams outlining vital statistics for live births, induced abortions, fertility, infant and general mortality, marriage, divorce and population. 142 pp. 10-16SR \$15.00

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 health care publications.

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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**

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117 University, St Paul, Minnesota 55155 (located 1/2 block west of the State Capitol)
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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)

