The Minnesota

# State Register



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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-consulting contracts, non-state bids and public contracts and grants.

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

Vol. 19 Issue Number	hedule and Submission  PUBLISH  DATE	Deadlines  Deadline for both  Adopted and Proposed  RULES	Deadline for: Emergency Rules, Executive and Commissioner's Orders, Revenue and Official Notices, State Grants, Professional-Technical-Consulting Contracts, Non-State Bids and Public Contracts
16	Monday 17 October	Monday 3 October	Monday 10 October
17	Monday 24 October	Monday 10 October	Monday 17 October
18	Monday 31 October	Monday 17 October	Monday 24 October
19	Monday 7 November	Monday 24 October	Monday 31 October
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- "Professional-Technical-Consulting Award Reports," published each month listing the previous month's awards of contracts and RFPs that appeared in the Monday edition of the "State Register." Individual copies are \$7.00 per report, plus \$3.00 shipping if applicable. Order stock # 99-43. Six-month subscriptions cost \$50.00, a savings of about \$15.00 over the cost of purchasing them individually. Appears monthly. Order stock number 90-15. Available in hard copy format only.

#### 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 (612) 296-0504 Room 231 State Capitol, St. Paul, MN 55155

#### 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 (612) 296-2146 Room 175 State Office Building, St. Paul, MN 55155

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## 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.

Volume 19-Issues #14 - 16 Inclusive		.1315; .1320; .1325; .1330; .1335; .1340; .1345; .1350; .1355;	
Chiropractic Examiners Board 2500.0500; .0510; .0550; .0700; .0730; .0750; .1150; .1420;		.1360; .1365; <b>4660</b> .1700; .5030; <b>9050</b> .0040; .0210; .1030; .1070; .0390 (proposed)	
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4655.9200; .9300; .9324; .9326; .9327; .9328; .9329; .9331; .9332; 4658.0010; .0020; .0025; .0030; .0035; .0045; .0050;		.0090; .0100; .0110; .0125; .0140; .0165; .0170; .0180; .0190; .0200; .0210 (proposed)	819
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.0430; .0435; .0440; .0445; .0450; .0455; .0460; .0465; .0470;		<b>9505</b> .2160; .2165; .2180; .2185; .2190; .2195; .2200; . 2205;	
.0475; .0490; .0500; .0505; .0510; .0515; .0520; .0525; .0530; .0580; .0700; .0705; .0710; .0715; .0720; .0725; .0730; .0750;		.2210; .2215; .2220; .2225; .2230; .2235; .2236; .2240; .2245 (proposed)	721
.0800; .0805; .0810; .0815; .0820; .0850; .1300; .1305; .1310;		9505.2165 s.6a,6b (proposed repealer)	721

Pursuant to Minn. Stat. §14.22, an agency may propose to adopt, amend, suspend or repeal rules without first holding a pubic 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.

## **Department of Health**

## **Proposed Permanent Rules Relating to Nursing Home Regulatory Reform NOTICE OF HEARING**

NOTICE IS HEREBY GIVEN that a public hearing on the above-entitled matter will be held in the Capitol Room, Capitol View Conference Center, 70 West County Road B2, Little Canada, Minnesota, beginning at 9:00 a.m. on Monday, November 21, 1994, and continuing until all interested or affected persons have an opportunity to participate. The hearing will continue, if necessary, at additional times and places as determined during the hearing by the administrative law judge.

Hearing Procedures. Following the agency's presentation at the hearing, all interested or affected persons will have an opportunity to participate. Such persons may present their views either orally at the hearing or in writing at any time prior to the close of the hearing record. All evidence presented should be pertinent to the matter at hand. Written material not submitted at the time of the hearing which is to be included in the hearing record may be mailed to Jon L. Lunde, Administrative Law Judge, Office of Administrative Hearings, 100 Washington Square, Suite 1700, Minneapolis, Minnesota 55401-2138; telephone 612/341-7645, either before the hearing or within five working days after the public hearing ends. The Administrative Law Judge may, at the hearing, order the record be kept open for a longer period not to exceed 20 calendar days. Any written material or responses must be received at the office no later than 4:30 p.m. on the final day. The comments received during the comment period shall be available for review at the Office of Administrative Hearings.

Following the close of the comment period the agency and all interested persons have five business days to respond in writing to any new information submitted during the comment period. During the five-day period, the agency may indicate in writing whether there are any amendments suggested by other persons which the agency is willing to adopt. No additional evidence may be submitted during the five-day period. Any written material or responses must be received at the office no later than 4:30 p.m. on the final day. The written responses shall be added to the rulemaking record. Upon the close of the record the Administrative Law Judge will write a report as provided for in *Minnesota Statutes*, section 14.50. The rule hearing is governed by *Minnesota Statutes*, section 14.14 to 14.20 and by *Minnesota Rules*, parts 1400.0200 to 1400.1200. Questions about procedure may be directed to the Administrative Law Judge.

Subject of Rule and Statutory Authority. The Department of Health intends to adopt a permanent rule after a public hearing following the procedures set forth in the Administrative Procedure Act, Minnesota Statutes, sections 14.22 to 14.28. Currently, licensed nursing homes and boarding care homes are subject to Minnesota Rules Chapters 4655 and 4660. These proposed rules would supersede portions of those current rules. The text of the proposed rules and amendments follows this notice.

Minnesota Rules, parts 4658.0010 to 4658.0580 and 4658.0700 to 4658.1365 (Proposed) address licensing, administration, restraints, comprehensive resident assessments and plans of care, clinical records, nursing services, medical and dental services, infection control, and medications and pharmacy services to be provided in licensed nursing homes. Minnesota Rules, parts 4655.9200 to 4655.9400 address the fining schedule for noncompliance with correction orders relating to violations of Chapters 4655 and 4660. Minnesota Rules, parts 4660.1700 and 4660.5030 address the physical plant and equipment requirements for the medication room and laundry equipment, respectively, in licensed nursing homes. Citations to nursing home operations rules have

been revised to reference the proposed rules. *Minnesota Rules*, parts 9050.0040, 9050.0210, 9050.1030, and 9050.1070 address resident services provided to residents in facilities owned or operated by the Minnesota Veterans Homes Board. Citations to nursing home operations rules have been revised to reference the proposed rules. *Minnesota Rules*, part 9505.0390, provides definitions for rehabilitative and therapeutic services in the medical assistance program. A citation to a nursing home operations rule has been revised to reference the proposed rule.

The statutory authority to adopt the rule is *Minnesota Statutes*, sections 144A.04, subdivision 3 and 144A.08, with the revisions developed under the authority of *Minnesota Laws 1991*, Chapter 292, Article 4, Section 55.

Comments. Written comments in support of or opposition to the proposed rule or any part or subpart of the rule must be in writing and received by the Administrative Law Judge by the due date. Comment is encouraged. Your comments should identify the portion of the proposed rule addressed, the reason for the comment, and any change proposed.

Agency Contact Person. Copies of the proposed rules are available and may be obtained by writing or calling the agency contact person. Comments or questions on the rule must be submitted to:

Maggie Friend
Minnesota Department of Health
Facility and Provider Compliance Division
393 North Dunlap Street
P.O. Box 64900
St. Paul, Minnesota 55164-0900
Telephone: (612) 643-3615
Fax: (612) 643-2593

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

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

Statement of Anticipated Costs and Benefits. *Minnesota Statutes*, section 144A.29, subdivision 4 (1993) requires each rule promulgated by the commissioner of health pursuant to sections 144A.01 to 144A.15 to contain a short statement of the anticipated costs and benefits to be derived from the provisions of this rule. This statement has been prepared and is available from the agency contact person.

Small Business Considerations. In preparing these rules, the Department of Health has considered the requirements of *Minnesota Statutes*, section 14.115, in regard to the impact of the proposed rules on small businesses. Subdivision 7 of that section exempts rules that affect "service business regulated by government bodies, for standards and costs, such as nursing homes, long-term care facilities, hospitals, providers of medical care, day care centers, group homes, and residential care facilities...." It is the Department's position that this rule is exempt from §14.115, because nursing homes are specifically exempted in that statute.

Expenditure of Public Money by Local Public Bodies. The implementation of this rule will not have a total cost of over \$100,000 to local public bodies in either of the two years immediately following the adoption of the rule.

Impact on Agricultural Lands. This rule will not pose any direct adverse impacts on agricultural land as specified in *Minnesota Statutes*, section 17.80 to 17.84.

Lobbyist Registration. Minnesota Statutes, chapter 10A requires each lobbyist to register with the Ethical Practices Board. Questions regarding this requirement may be directed to the Ethical Practices Board at First Floor Centennial Office Building, 658 Cedar Street, St. Paul, Minnesota 55155, (612) 296-5148.

**Departmental Charges.** Minnesota Statutes, section 16A.1285, subdivisions 4 and 5, do not apply because the rules do not establish or adjust departmental charges. Although portions of the rules relate to the schedule of fines for nursing home violations, the Department believes that the fines are exempt from the procedures of Minnesota Statutes section 16A.1285, subdivisions 4 and 5 because the fines are nonrecurring and do not produce significant revenues.

Adoption Procedure After the Hearing. After the close of the hearing record, the administrative law judge will issue a report on the proposed rule.

NOTICE: You may request to be notified of the date on which the administrative law judge's report will be available, after

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

Dated: 29 September 1994

Mary Jo O'Brien, Commissioner Minnesota Department of Health

#### **Rules as Proposed**

#### 4655.9200 FIFTY DOLLAR PENALTY FOR NONCOMPLIANCE.

A \$50 penalty assessment will be issued under the provisions of *Minnesota Statutes*, section 144.653, subdivision 6, for noncompliance with correction orders relating to the parts of these rules listed in items A to K:

- A. parts 4655.0300, subparts 4 and 5; 4655.0310; 4655.0600; 4655.0700; and 4655.0800;
- B. parts 4655.1200, subpart 1, item E<sub>7</sub>; 4655.1700<sub>7</sub>; and 4655.1400, item items A, item B, subitem subitems (1), item B, subitem and D;
  - C. parts 4655.1910, subparts 1 to 4; 4655.2200; and 4655.2100;
  - D. parts 4655.2700 and 4655.2800;
  - E. parts 4655.3600, 4655.3700, 4655.3800, 4655.4200, and 4655.4400;
  - F. parts part 4655.5100 and 4655.6200;
  - G. parts 4655.7000, subpart 1, items B, C, D, and I; and 4655.7300, subparts 1 and 2;
  - H. parts 4655.8000, subpart 8; and 4655.8300, subpart 6;
  - I. part 4655.8630, subpart 3;
  - J. parts 4655.9030 and 4655.9050; and
  - K. parts 4660.3000 and 4660.4500.

#### 4655.9300 PENALTIES FOR NURSING HOMES.

Subpart 1. Application. Subparts 2 to 4 apply to nursing homes only.

Subp. 2. \$50 penalty assessment. A \$50 penalty assessment will be assessed on a daily basis to a nursing home for noncompliance with correction orders relating to the following rules:

- A. part 4638.0200, subpart 2;
- B. part 4655.3600;
- C. part 4655.4100;
- D. part 4655.4110, subpart 2;
- E. part 4655.4120, subpart 3;
- F. part 4655.4150;
- G. part 4655.4170;
- H. part 4655.7000, subpart 2;
- I. part 4655.7780; subpart 2;
- J. part 4655.8820, subpart 1, item C; and
- K. J. part 4660.1460, subpart 1, item A.

Subp. 3. \$150 penalty assessment. A \$150 penalty assessment will be assessed on a daily basis to a nursing home for noncompliance with correction orders relating to the following rules:

- A. part 4638.0200, subpart 3;
- B. part 4655.2420; subpart 2; items B to F;
- C. part 4655:2410; subpart 4;
- D. part 4655.3000;
- E. C. part 4655.4110, subpart 1;
- F. D. part 4655.4120, subparts 1 and 2;
- G. E. part 4655.4130, subpart 2;
- H. F. part 4655.4130, subpart 3;
- I. G. part 4655.4140;
- J. H. part 4655.4160;
- K. I. part 4655.7860;
- L. J. part 4655.8820, subpart 1, items A and B; and
- M. K. part 4655.8820, subparts 2 and 3.
- Subp. 4. \$250 penalty assessment. A \$250 penalty assessment shall be assessed on a daily basis to a nursing home for noncompliance with correction orders relating to the following rules:
  - A. part 4655.2420, subpart 2, item A; and
  - B. part 4660.1460, subpart 1, item B.

#### 4655.9324 MISCELLANEOUS PROCEDURES.

Penalty assessments for violations of parts 4655.1910 to 4655.2420 4655.2300 are as follows:

- A. Except as noted in item B, a \$250 penalty assessment shall be issued for a violation of part 4655.1910, subparts 1 to 3.
- B. A \$50 penalty assessment shall be issued for a violation of that portion of part 4655.1910, subpart 1, which states: "Visiting hours shall be established as a written policy of the home and shall be posted in plain view of visitors."
  - C. Part 4655.1910, subpart 4, \$100.
  - D. Part 4655.1910, subpart 5, \$250.
  - E. Part 4655.1910, subpart 6, \$250.
  - F. Part 4655.1910, subpart 7, \$500.
  - G. Part 4655.1910, subpart 8, \$100.
  - H. Part 4655.2000, subpart 1, \$100.
  - I. Part 4655.2000, subpart 2, \$100.
  - J. Part 4655.2100, \$100.
  - K. Part 4655.2200, \$100.
  - L. Part 4655.2300, \$100.
  - M. Part 4655.2410, subpart 2, \$500.
  - N. Part 4655.2410, subpart 3, \$300.
  - O. Part 4655.2410, subpart 4, \$350.
  - P. Part 4655.2420, subpart 2, item A, \$500.
  - Q. Part 4655.2420, subpart 2, item B, \$350.
  - R. Part 4655.2420, subpart 2, item C, \$100.
  - S. Part 4655.2420, subpart 2, item D, \$300.
  - T. Part 4655:2420, subpart 2, item E, \$350.
  - U. Part 4655.2420, subpart 2, item F, \$300.

#### 4655.9326 RECORDS AND REPORTS.

Penalty assessments for violations of parts 4655.3200 to 4655.4400 are as follows:

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

- J. Except as noted in items K and L, a \$300 penalty assessment shall be issued for a violation of part 4655.3900.
- K. A \$100 penalty assessment shall be issued for a violation of that portion of part 4655.3900, subpart 3, which states: "A detailed incident report of any accident, injury, or error in drug administration and the action taken shall be completed immediately."
- L. A \$100 penalty assessment shall be issued for a violation of that portion of part 4655.3900, subpart 4, which states: "All nurses' notes shall be written and signed by the person giving the medication or making the observation."
  - M. Part 4655.4100, \$50.
  - N. K. Part 4655.4110, subpart 1, \$250.
  - O. L. Part 4655.4110, subpart 2, \$50.
  - P. M. Parts 4655.4120 to 4655.4160, \$100.
  - Q. N. Part 4655.4170, \$100.
  - R. O. Part 4655.4200, \$50.
  - S. P. Part 4655.4300, \$100.
  - T. O. Part 4655.4400, \$50.

## 4655.9327 MEDICAL AND DENTAL SERVICES.

Penalty assessments for violations of parts 4655.4600 to 4655.4900 4655.4800 are as follows:

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

- N. Part 4655.4900, subpart 2, \$300.
- O. Part 4655.4900, subpart 3, \$300.

#### 4655.9328 STAFFING AND SERVICES.

Penalty assessments for violations of parts 4655.5100 to 4655.6200 4655.5400 are as follows:

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

- H. Part 4655.5600, subpart 2, first paragraph, \$300.
- I. Part 4655.5600, subpart 2, second paragraph, \$300.
- J. Part 4655.5700, subpart 2, \$300.
- K. Part 4655.5700, subpart 3, \$300.
- L. Part 4655.5700, subpart 4, \$100.
- M. Part 4655.5700, subpart 5, \$300.
- N. Part 4655.5800, subpart 2, item A, \$300.
- O. Part 4655.5800; subpart 2; item B; \$300.
- P. A \$300 penalty assessment shall be issued for that portion of part 4655.5800, subpart 2, item C, which states that the responsibilities of the director of nursing include: "Planning and conducting written orientation programs for new nursing personnel, and continuing in service education for all nursing home personnel, if there is no one designated who is responsible for all inservice education."
  - Q. Part 4655.5800, subpart 2, items D to G, \$100.
  - R. Part 4655.5800, subpart 2, item H, \$300.

- S. Part 4655.5800; subpart 2, items I to M, \$100.
- T. A \$500 penalty assessment shall be issued for that portion of part 4655.5800, subpart 3, which states: "No nursing personnel shall perform duties for which they have not had proper and sufficient training. Duties assigned to nursing personnel shall be consistent with their training, experience, and licensure."
  - U. Part 4655.5900, \$350.
  - V. Port 4655,6000, \$300.
  - W. Part 4655.6100, \$350.
- X. A \$100 penalty assessment shall be issued for a violation of that portion of part 4655.6200, subpart 2, which states: "The nursing home shall provide opportunities for personnel to attend courses in rehabilitation nursing and other educational programs."
- Y. A \$350 penalty assessment shall be issued for a violation of that portion of part 4655.6200, subpart 3, which states: "Nursing home personnel shall be trained in nursing skills including demonstrations and practice with supervision as needed and prior to assignment to patient care responsibilities."

#### 4655.9329 CARE OF PATIENTS AND RESIDENTS.

Penalty assessments for violations of parts 4655.6400 to 4655.6800 4655.6700 are as follows:

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

- G. Part 4655.6800, items A to C, \$350.
- H. Part 4655.6800, item D. \$100.

#### 4655.9331 MEDICATIONS.

Penalty assessments for violations of parts 4655.7600 4655.7810 to 4655.7860 are as follows:

- A. A \$500 penalty assessment shall be issued for a violation of that portion of part 4655.7700, subpart 1, which states: "A system shall be developed in each nursing home to assure that all medications are administered safely and properly."
- B. A \$300 penalty assessment shall be issued for a violation of that portion of part 4655.7700, subpart 2, which states: "The supervising nurse or other nursing staff trained specifically by the supervising nurse or a physician in the administration of medications and familiar with the expected action of drugs, shall be designated and held responsible for the administration of medications during each eight-hour period."
- C. A \$50 penalty assessment shall be issued for a violation of that portion of part 4655.7700, subpart 3, which states: "A list of earefully selected personnel, currently employed, who have been so trained, none under 18 years of age, shall be maintained. The written training program shall be available at each nursing station."
- D. A \$500 penalty assessment shall be issued for a violation of that portion of part 4655.7700, subpart 4, which states: "Medications administered by hypodermic may be given only by a physician, registered nurse, or licensed practical nurse."
- E. A \$350 penalty assessment shall be issued for a violation of those portions of part 4655.7700, subparts 6 and 7, which state:
  "The actual act of swallowing oral medications shall be observed personally by the individual responsible for administering medications. When medications have been added to food, the amount of food consumed shall be recorded by the person designated to administer medications."
- F. A \$500 penalty assessment shall be issued for a violation of that portion of part 4655.7700, subpart 8, which states: "All medications shall be administered exactly as ordered by the physician. Any medication errors or patient reactions shall be reported to the physician at once and an explanation made in the patient's care record."
  - G. Part 4655.7710, \$350.
  - H. Part 4655.7720, subparts 1 to 5, \$300.
  - I. Part 4655.7720, subpart 6, \$300.
  - J. Part 4655.7720, subpart 7, \$300.
  - K. Part 4655.7720, subpart 8, \$300.
  - L. Parts 4655.7730 to 4655.7740, \$300.
  - M. Part 4655,7750, \$300.
- N. A \$350 penalty assessment shall be issued for a violation of that portion of part 4655.7760, subpart 1, which states: "All medications administered to each patient shall be recorded on the medication and treatment record or in the nurses' notes on the patient's chart. This information shall include the name and quantity of the drug given and the time administered and shall be ini-

tialed by the person giving the drug. Special notations shall be made whenever medications are started or discontinued. Medicine eards or a medicine list shall be maintained to show each medication which is currently being given."

- O: A \$300 penalty assessment shall be issued for a violation of those portions of part 4655,7760 not identified in item N.
- P. Part 4655,7770, \$350.
- Q: Part 4655.7780: \$300:
- R. Part 4655.7790, subpart 1, \$100.
- S. Part 4655.7790; subpart 2; \$100;
- T. Except as noted in item UB, a \$300 penalty assessment shall be issued for a violation of part 4655.7860.
- U. B. A \$50 penalty assessment shall be issued for a violation of that portion of part 4655.7860 which states: "The nursing home or boarding care home shall keep written documentation verifying completion of the required course by all unlicensed [nursing] personnel administering medications."

#### 4655.9332 LINEN SERVICE AND LAUNDRY.

Penalty assessments for violations of parts 4655.8000 to 4655.8300 are as follows:

- A. part 4655.8000, subpart 2, \$200;
- B. part 4655.8000, subpart 3, \$200;
- C. part 4655.8000, subpart 4, \$200;
- D. part 4655.8000, subpart 5, \$300;
- E. part 4655.8000, subpart 6, \$300;
- F. part 4655.8000, subpart 7, \$100; and
- G. part 4655.8000, subpart 8, \$50; and
- H. part 4655.8100, \$300.

#### LICENSING

#### **4658.0010 DEFINITIONS.**

- Subpart 1. Scope. The terms used in parts 4658.0010 to 4658.1365 have the meanings given them in this part.
- Subp. 2. Convalescent and nursing care (C&NC) unit. "Convalescent and nursing care (C&NC) unit" means a nursing home unit operated in conjunction with a hospital where there is a direct physical connection between the unit and the hospital which permits the movement of the residents and the provision of services without going outside the building or buildings involved. The units are subject to this chapter.
  - Subp. 3. Department. "Department" means the Minnesota Department of Health.
- Subp. 4. Existing facility. "Existing facility" means a licensed nursing home or nursing home space that was in place before the effective date of this chapter. All existing facilities will be deemed to be in substantial compliance with the physical plant requirements for new construction, except as noted in this chapter and chapter 4660. Existing facilities must, at a minimum, maintain compliance with the rules applicable at the time of their construction.
  - Subp. 5. Licensed nurse. "Licensed nurse" means a registered nurse or a licensed practical nurse.
- Subp. 6. Licensee. "Licensee" means the person or governing body to whom the license is issued. The licensee is responsible for compliance with this chapter.
- Subp. 7. Nursing assistant. "Nursing assistant" means a nursing home employee who is assigned by the director of nursing services to provide or assist in the provision of nursing or nursing-related services under the supervision of a registered nurse. Nursing assistant includes nursing assistants employed by nursing pool companies but does not include a licensed health professional.
  - Subp. 8. Nursing home. "Nursing home" means a licensed facility or unit used to provide care for aged or infirm persons who

require nursing care and related services in accordance with this chapter. A nursing home license is required for the facility if any of the residents need or receive nursing care. Examples of nursing care are:

- (1) bedside care, including administration of medications, irrigations and catheterizations, and applications of dressings or bandages:
  - (2) rehabilitative nursing techniques; or
- (3) other treatments prescribed by a physician which require technical knowledge, skill, and judgment as possessed by a licensed nurse.
  - Subp. 9. Nursing personnel. "Nursing personnel" means registered nurses, licensed practical nurses, and nursing assistants.
  - Subp. 10. Resident. "Resident" means an individual cared for in a nursing home.

#### 4658.0015 COMPLIANCE WITH REGULATIONS AND STANDARDS.

A nursing home must operate and provide services in compliance with all applicable federal, state, and local laws, regulations, and codes, and with accepted professional standards and principles that apply to professionals providing services in a nursing home.

4658.0020 LICENSING IN GENERAL.

- Subpart 1. Required. For the purpose of this chapter, a state license is required for a facility where nursing home care is provided for five or more aged or infirm persons who are not acutely ill.
- Subp. 2. License fees. Each application for either an initial or renewal license to operate a nursing home must be accompanied by a fee based upon the formula as provided by Minnesota Statutes, section 144.122. A bed must be licensed if it is available for use by resident. If the number of licensed beds is increased during the term of the license, a fee for each additional bed must be paid. There is no refund for a decrease in licensed beds.
- Subp. 3. License expiration date. Initial and renewal licenses are issued for one year and expire on the anniversary date of issuance. A license renewal must be applied for on an annual basis.
  - Subp. 4. License to be posted. The license must be posted at the main entrance of a nursing home.
- Subp. 5. Separate licenses. Separate licenses are required for institutions maintained on separate premises even though operated under the same management. A separate license is not required for separate buildings maintained by the same owner on the same premises.

#### 4658.0025 PROCEDURES FOR LICENSING NURSING HOMES.

Subpart 1. Initial licensure. For the purpose of this part, initial licensure applies to newly constructed facilities designed to operate as a nursing home and to other facilities not already licensed as a nursing home. Applicants for initial licensure must complete the license application form supplied by the department. An application for initial licensure must be submitted at least 90 days before the requested date for licensure and must be accompanied by a license fee based upon the formula as provided by Minnesota Statutes, section 144.122.

To be issued a license, an applicant must file with the department a current copy of the architectural and engineering plans and specifications of the facility as prepared and certified by an architect or engineer registered to practice in Minnesota.

If the applicant for licensure is a corporation, it must submit with the application a copy of its articles of incorporation and bylaws. A foreign corporation must also submit a copy of its certificate of authority to do business in Minnesota. The department will issue the initial license as of the date the department determines that the nursing home is in compliance with parts 4655.0090 to 4655.9900, 4658.0010 to 4658.1365, 4660.0090 to 4660.9940, and Minnesota Statutes, sections 144A.01 to 144A.16, unless the applicant requests a later date.

Subp. 2. Renewed licenses. An applicant for license renewal must complete the license application form supplied by the department. An application must be submitted at least 60 days before the expiration of the current license and must be accompanied by a license fee based upon the formula as provided by Minnesota Statutes, section 144.122. The department will issue a renewed license if a nursing home continues to satisfy the requirements of parts 4655.0990 to 4655.9900, 4658.0010 to 4658.1365, 4660.0100 to 4660.9940, and Minnesota Statutes, sections 144A.01 to 144A.16.

If the licensee is a corporation, it must submit any amendments to its articles of incorporation or bylaws with the renewal application.

If the renewal application specifies a different licensed capacity from that provided on the current license, the licensee must comply with subpart 6. If the changes are not approved before the current license expires, the renewed license will be issued without reflecting the requested changes.

Subp. 3. Transfer of interests; notice. A controlling person, as defined in Minnesota Statutes, section 144A.01, subdivision 4.

who transfers a beneficial interest in the nursing home must notify the department, in writing, at least 14 days before the date of the transfer. The written notice must contain the name and address of the transferor, the name and address of the transferee, the nature and amount of the transferred interests, and the date of the transfer.

Subp. 4. Transfer of interest; expiration of license. A transfer of a beneficial interest will result in the expiration of the nursing home's license:

A. if the transferred beneficial interest exceeds ten percent of the total beneficial interest in the licensee, in the structure in which the nursing home is located, or in the land upon which the nursing home is located, and if, as the result of the transfer, the transferee then possesses a beneficial interest in excess of 50 percent of the total beneficial interest in the licensee, in the structure in which the nursing home is located, or in the land upon which the nursing home is located; or

B. if the transferred beneficial interest exceeds 50 percent of the total beneficial interest in the licensee, the structure in which the nursing home is located, or in the land upon which the nursing home is located.

Under either of these conditions, the nursing home license expires at the time of relicensure, 90 days after the date of the transfer, or 90 days after the date when notice of transfer is received, whichever date is later. If the current license expires before the end of the 90-day period, the licensee must apply for a renewed license in accordance with subpart 2. The department must notify the licensee by certified mail at least 60 days before the license expires.

Subp. 5. Transfer of interest; relicensure. A controlling person may apply for relicensure by submitting the license application form at least 60 days before the license expiration date. Application for relicensure must be accompanied by a license fee based upon the formula as provided by Minnesota Statutes, section 144.122. Payment of any outstanding penalty assessments must be submitted before the application for relicensure may be acted upon by the department. If the applicant for relicensure is a corporation, it must submit a copy of its current articles of incorporation and bylaws with the license application. A foreign corporation must also submit a copy of its certificate of authority to do business in Minnesota. The department will relicense the nursing home as of the date the commissioner determines that the prospective licensee complies with parts 4655.0090 to 4655.9900, 4658.0010 to 4658.1365, 4660.0100 to 4660.9940, and Minnesota Statutes, sections 144A.01 to 144A.16, unless the applicant requests a later date. The former licensee remains responsible for the operation of the nursing home until the nursing home is relicensed.

Subp. 6. Amendment to the license. If the nursing home requests a change in its licensed capacity or in its license classification, it must submit the request on the application for amendments to the license. This application must be submitted at least 30 days before the requested date of change and if an increase in the number of licensed beds is requested, accompanied by a fee based upon the formula as provided by Minnesota Statutes, section 144.122. The department will amend the license as of the date the department determines that the nursing home is in compliance with parts 4655.0990 to 4655.9900, 4658.0010 to 4658.1365, 4600.0100 to 4660.9940, and Minnesota Statutes, sections 144A.01 to 144A.16, unless a later date is requested by the licensee. The amendment to a license is effective for the remainder of the nursing home's licensure year.

Subp. 7. Issuing conditions or limitations on the license. The department must attach to the license any conditions or limitations necessary according to subpart 8 to assure compliance with the laws and rules governing the operation of the nursing home or to protect the health, treatment, safety, comfort, and well-being of the nursing home residents. A condition or limitation may be attached to a license at any time.

Subp. 8. Reasons for conditions or limitations. In deciding to condition or limit a license the department must consider:

- A. the nature and number of correction orders or penalty assessments issued to the nursing home or to other nursing homes having some or all of the same controlling persons:
- B. the permitting, aiding, or abetting of the commission of any illegal act in the nursing home by any of the controlling persons or employees of the nursing home;
  - C. the performance of any acts contrary to the welfare of the residents in a nursing home by a controlling person or employee:
  - D. the condition of the physical plant or physical environment;
  - E. the existence of any outstanding variances or waivers; or
  - F. the number or types of residents the nursing home is able to provide for.

- Subp. 9. Types of conditions or limitations. The department must impose one or more of the following conditions or limitations for reasons determined under subpart 8:
  - A. restrictions on the number or types of residents to be admitted or permitted to remain in the nursing home:
  - B. restrictions on the inclusion of specified individuals as controlling persons or managerial employees; or
  - C. imposition of schedules for the completion of specified activities.
- Subp. 10. Statement of conditions or limitations. The department must notify the applicant or licensee, in writing, of its decision to issue a conditional or limited license. The department must inform the applicant or licensee of the reasons for the condition or limitation and of the right to appeal.

Unless otherwise specified, a condition or limitation remains valid as long as the licensee of the nursing home remains unchanged or as long as the reason for the condition or limitation exists. The licensee must notify the department when the reasons for the condition or limitation no longer exist. If the department determines that the condition or limitation is no longer required, it will be removed from the license.

The existence of a condition or limitation must be noted on the face of the license. If the condition or limitation is not fully stated on the license, the department's licensure letter containing the full text of the condition or limitation must be posted alongside the license in an accessible and visible location.

Subp. 11. Effect of a condition or limitation. A condition or limitation has the force of law. If a licensee fails to comply with a condition or limitation, the department may issue a correction order or assess a fine or it may suspend, revoke, or refuse to renew the license in accordance with Minnesota Statutes, section 144A.11.

If the department assesses a fine, the fine is \$250. The fine accrues on a daily basis according to *Minnesota Statutes*, section 144A.10.

- Subp. 12. Appeal procedure. The applicant or licensee may contest the issuance of a conditional or limited license by requesting a contested case proceeding under the Administrative Procedure Act, Minnesota Statutes, sections 14.57 to 14.69, within 15 days after receiving the notification described in subpart 10. The request for a hearing must set out in detail the reasons why the applicant contends that a conditional or limited license should not be issued.
- Subp. 13. License application forms. The department will furnish the applicant or the licensee with the necessary forms to obtain initial or renewed licensure or to request relicensure of the nursing home after a transfer of interest. The license forms must require that the information described in subparts 14 to 16 be provided.
  - Subp. 14. General information. General information means:
    - A. the name, address, and telephone number of the nursing home;
    - B. the name of the county in which the nursing home is located:
    - C. the legal property description of the land upon which the nursing home is located:
    - D. the licensed bed capacity:
- E. the designation of the classification of ownership, for example, state, county, city, city and county, hospital district, federal, corporation, nonprofit corporation, partnership, sole proprietorship, or other entity:
- F. the name and address of the controlling person or managerial employee who will be responsible for communicating with the commissioner of health on all matters relating to the nursing home license and on whom personal service of all notices and orders will be served; and
  - G. the location and square footage of the floor space constituting the facility.
- Subp. 15. Disclosure of controlling persons. According to <u>Minnesota Statutes</u>, section 144A.03, the nursing home license application must identify the name and address of all controlling persons of the nursing home, as defined in <u>Minnesota Statutes</u>, section 144A.01, subdivision 4.
- Subp. 16. Disclosure of managerial employees. A nursing home must provide the name and address of all administrators, assistant administrators, directors of nursing, medical directors, and service directors, and indicate their previous work experience in nursing homes during the past two years.

#### 4658.0030 CAPACITY PRESCRIBED.

Each license must specify the maximum allowable number of residents to be cared for at any one time. No number of residents in excess of that number may reside in the nursing home. The maximum number of licensed beds is determined by the amount of space that is available in the facility as specified in chapter 4660.

#### **4658.0035 EVALUATION.**

A nursing home is subject to evaluation and approval by the department of the nursing home's physical plant and its operational aspects before a change in ownership, classification, capacity, or an addition of services which necessitates a change in the nursing home's physical plant.

#### 4658.0040 VARIANCE AND WAIVER.

Subpart 1. Request for variance or waiver. A nursing home may request that the department grant a variance or waiver from the provisions of this chapter. A request for a variance or waiver must be submitted to the department in writing. Each request must contain:

- A. the specific part or parts for which the variance or waiver is requested;
- B. the reasons for the request:
- C. the alternative measures that will be taken if a variance or waiver is granted;
- D. the length of time for which the variance or waiver is requested; and
- E. other relevant information necessary to properly evaluate the request for the variance or waiver.

Subp. 2. Criteria for evaluation. The decision to grant or deny a variance or waiver must be based on the department's evaluation of the following criteria:

- A. whether the variance or waiver adversely affects the health, treatment, comfort, safety, or well-being of a resident;
- B. whether the alternative measures to be taken, if any, are equivalent to or superior to those prescribed in this chapter; and
- C. whether compliance with the part or parts would impose an undue burden upon the applicant.
- Subp. 3. Notification of variance. The department must notify the applicant in writing of its decision. If a variance or waiver is granted, the notification must specify the period of time for which the variance or waiver is effective and the alternative measures or conditions, if any, to be met by the applicant.
- Subp. 4. Effect of alternative measures or conditions. Alternative measures or conditions attached to a variance or waiver have the force and effect of this chapter and are subject to the issuance of correction orders and penalty assessments in accordance with Minnesota Statutes, section 144A.10.

The amount of fines for a violation of this part is that specified for the particular rule for which the variance or waiver was requested.

- Subp. 5. Renewal. A request for the renewal of a variance or waiver must be submitted in writing at least 45 days before its expiration date. Renewal requests must contain the information specified in subpart 1. A variance or waiver must be renewed by the department if the applicant continues to satisfy the criteria in subparts 2 and 3, and demonstrates compliance with the alternative measures or conditions imposed at the time the original variance or waiver was granted.
- Subp. 6. Denial, revocation, or refusal to renew. The department must deny, revoke, or refuse to renew a variance or waiver if it is determined that the criteria in subparts 2 and 3 are not met. The applicant must be notified in writing of the reasons for the decision and informed of the right to appeal the decision.
- Subp. 7. Appeal procedure. An applicant may contest the denial, revocation, or refusal to renew a variance or waiver by requesting a contested case hearing under Minnesota Statutes, chapter 14. The applicant must submit, within 15 days of the receipt of the department's decision, a written request for a hearing. The request for hearing must set forth in detail the reasons why the applicant contends the decision of the department should be reversed or modified. At the hearing, the applicant has the burden of proving that it satisfied the criteria specified in subparts 2 and 3, except in a proceeding challenging the revocation of a variance or waiver.

#### 4658.0045 PENALTIES FOR LICENSING VIOLATIONS.

Penalty assessments for violations of parts 4658.0010 to 4658.0035 are as follows:

- A. part 4658.0020, subparts 1, 2, and 3, \$250;
- B. part 4658.0020, subparts 4 and 5, \$50;

- C. part 4658.0025, \$250;
- D. part 4658.0030, \$100; and
- E. part 4658.0035, \$100.

#### ADMINISTRATION AND OPERATIONS

#### 4658.0050 LICENSEE.

Subpart 1. General duties. The licensee of a nursing home is responsible for its management, control, and operation. A nursing home must be managed, controlled, and operated in a manner that enables it to use its resources effectively and efficiently to attain or maintain the highest practicable physical, mental, and psychosocial well-being of each resident.

Subp. 2. Specific duties. The licensee must develop written bylaws or policies which are available to all members of the governing body and assume legal responsibility for matters under its control, for the quality of care rendered and for compliance with applicable laws and rules of legally authorized agencies.

#### Subp. 3. Responsibilities. A licensee is responsible for:

- A. Full disclosure of each person having an interest of ten percent or more of the ownership of the home to the department with any change reported in writing within 14 days of its occurrence. In case of corporate ownership, the name and address of each officer and director must be specified. If the home is organized as a partnership, the name and address of each partner must be furnished. In the case of a home operated by a lessee, the persons or business entities having an interest in the lessee organization must be reported and an executed copy of the lease agreement furnished. If the home is operated by the holder of a franchise, disclosure must be made as to the franchise holder who must also furnish an executed copy of the franchise agreement.
- B. Appointment of a licensed nursing home administrator who is responsible for the operation of the home in accordance with law and established policies and whose authority to serve as administrator is delegated in writing. The administrator of a hospital with a convalescent and nursing care unit may serve both units according to Minnesota Statutes, section 144A.04.
- C. Notification of the termination of service of the administrator and the appointment of a replacement must be given within five days in writing to the department by the governing body of the home. If a licensed nursing home administrator is not available to assume the position immediately, notification to the department must include the name of the person temporarily in charge of the home. The governing body of a nursing home must not employ an individual as the permanent administrator until it is determined that the individual qualifies for licensure as a nursing home administrator in Minnesota under Minnesota Statutes, section 144A.04.
- D. Provision of an adequate and competent staff and maintenance of professional standards in the care of residents and operation of the nursing home.
  - E. Provision of facilities, equipment, and supplies for care consistent with the needs of the residents.
  - F. Provision of evidence of adequate financing, property administration of funds, and the maintenance of required statistics.

#### 4658.0055 ADMINISTRATOR.

- Subpart 1. Designation. A nursing home must designate one individual who is in immediate charge of the operation and administration of the nursing home, whether that individual is the licensee or a person designated by the licensee. The individual must have authority to carry out the provisions of this chapter and must be charged with the responsibility of doing so.
- Subp. 2. Serve only one nursing home. The administrator must be full time and serve only one nursing home and may not serve as the director of nurses, except as permitted by *Minnesota Statutes*, section 144A.04. For purposes of this subpart, "full time" means no less than 40 hours worked per week.
- Subp. 3. Administrator's absence; requirements. The administrator must not leave the premises without giving information as to where the administrator can be reached and without delegating authority to a person who is at least 21 years of age and capable of acting in an emergency. At no time may a nursing home be left without competent supervision. The person left in charge must have the authority to act in an emergency.
- Subp. 4. Notice of person in charge. The name of the person in charge at the time must be posted at the main entrance of the nursing home.

## 4658.0060 RESPONSIBILITIES OF ADMINISTRATOR.

The administrator is responsible for the:

- A. maintenance, completion, and submission of reports and records as required by the department;
- B. formulation of written policies, procedures, and programs for operation, management, and maintenance of the nursing home:

- C. current personnel records for each employee according to part 4658.0130;
- D. written job descriptions for all positions which define responsibilities, duties, and qualifications that are readily available for all employees:
  - E. work assignments consistent with qualifications and the work load;
- F. maintenance of a weekly time schedule which shows each employee's name, job title, hours of work, and days off for each day of the week. The schedule must be dated and communicated to employees. The schedules, time cards, and payroll records must be kept on file in the home for three years and must be available to representatives from the department;
- G. orientation for new employees and volunteers and provision of a continuing in-service education program for all employees and volunteers to give assurance that they understand the proper method of carrying out all procedures:
- H. establishment of a recognized accounting system. There must be financial resources at the time of initial licensure to permit full-service operation of the home for six months without regard to income from resident fees; and
  - L. the development and maintenance of channels of communications with employees, including:
    - (1) distribution of written personnel policies to employees:
    - (2) regularly scheduled meetings of supervisory personnel:
    - (3) an employee suggestion system; and
    - (4) employee evaluation.

#### 4658.0065 RESIDENT SAFETY AND DISASTER PLANNING.

- Subpart 1. Safety program. A nursing home must have an organized safety program in accordance with a written safety plan. The written plan must be included in the orientation and in-service training programs of all employees and volunteers to ensure safety of residents at all times.
- Subp. 2. Security of physical plant. A nursing home must have a method of ensuring the security of exit doors leading directly to the outside which are not under direct observation from the nurses' station.
- Subp. 3. Written disaster plan. A nursing home must have a written disaster plan specific to the nursing home with procedures for the protection and evacuation of all persons in the case of fire or explosion or in the event of floods, tornadoes, or other emergencies. The plan must include information and procedures about the location of alarm signals and fire extinguishers, frequency of drills, assignments of specific tasks and responsibilities of the personnel on each shift, persons and local emergency departments to be notified, precautions and safety measures during tornado alerts, procedures for evacuation of all persons during fire or floods, planned evacuation routes from the various floor areas to safe areas within the building, or from the building when necessary, and arrangements for temporary emergency housing in the community in the event of total evacuation.
- Subp. 4. Availability of disaster plan. Copies of the disaster plan containing the basic emergency procedures must be posted at all nurses' stations, kitchens, laundries, and boiler rooms. Complete copies of the detailed disaster plan must be available to all supervisory personnel.
  - Subp. 5. Drills. Residents do not need to be evacuated except when a drill is planned in advance.

#### 4658.0070 QUALITY ASSESSMENT AND ASSURANCE COMMITTEE.

A nursing home must maintain a quality assessment and assurance committee consisting of the administrator, the director of nursing services, the medical director, and at least three other members of the nursing home's staff, representing all disciplines directly involved in resident care. The quality assessment and assurance committee must identify issues with respect to which quality assurance activities are necessary and develop and implement appropriate plans of action to correct identified quality deficiencies. The committee must address, at a minimum, incident and accident reporting, infection control, and medications and pharmacy services.

#### 4658.0075 OUTSIDE RESOURCES.

If a nursing home does not employ a qualified professional person to furnish a specific service to be provided by the nursing home, the nursing home must have that service furnished to residents under a written agreement with a person or agency outside the

nursing home. The written agreement must specify that the service meets professional standards and principles that apply to professionals providing services in a nursing facility, and that the service meets the same standards as required by this chapter.

#### 4658,0080 NOTIFICATION OF BOARDS.

A nursing home must notify the applicable professional board when a licensed health professional is providing inappropriate services, inadequate care, or fails to respond to the needs of the residents.

#### 4658.0085 NOTIFICATION OF CHANGE IN RESIDENT HEALTH STATUS.

A nursing home must develop and implement policies to guide staff decisions to consult physicians, physician assistants, and nurse practitioners, and if known, notify the resident's legal representative or an interested family member of a resident's acute illness, serious accident, or death. The policies must have criteria which address at least the appropriate notification times for:

- A. an accident involving the resident which results in injury and has the potential for requiring physician intervention:
- B. a significant change in the resident's physical, mental, or psychosocial status, for example, a deterioration in health, mental, or psychosocial status in either life-threatening conditions or clinical complications:
- C. a need to alter treatment significantly, for example, a need to discontinue an existing form of treatment due to adverse consequences, or to begin a new form of treatment:
  - D. a decision to transfer or discharge the resident from the nursing home; or
  - E. expected and unexpected resident deaths.

#### 4658.0090 USE OF OXYGEN.

A nursing home must develop and implement policies and procedures for the safe storage and use of oxygen.

#### 4658.0095 AVAILABILITY OF LICENSING RULES.

A copy of this chapter must be made available by a nursing home upon request for the use of all nursing home personnel, residents, and family members.

#### 4658.0100 EMPLOYEE ORIENTATION AND IN-SERVICE EDUCATION.

- Subpart 1. Orientation and initial training. All personnel must be instructed in the requirements of the law and the rules pertaining to their respective duties and the instruction must be documented. All personnel must be informed of the policies of the nursing home, and procedure manuals must be readily available to guide them in the performance of their duties.
- Subp. 2. In-service education. A nursing home must provide in-service education. The in-service training must be sufficient to ensure the continuing competence of employees, must address areas identified by the quality assessment and assurance committee, and must address the special needs of residents as determined by the nursing home staff.
- Subp. 3. Reference materials. Textbooks, periodicals, dictionaries, and other reference materials must be available and kept current.
- <u>Subp. 4.</u> Coordination of in-service education programs. In a nursing home with over 90 beds, one person must be designated as responsible for coordination of all in-service education programs.

#### **4658.0105 COMPETENCY.**

A nursing home must ensure that direct care staff are able to demonstrate competency in skills and techniques necessary to care for residents' needs, as identified through resident assessments and described in the plan of care, and are able to perform their assigned duties.

#### 4658.0110 INCIDENT AND ACCIDENT REPORTING.

A detailed incident report of any accident or injury and the action taken must be completed immediately.

#### 4658.0115 WORK PERIOD.

A nursing home must not schedule a person to duty for more than one consecutive work period except in a documented emergency. For purposes of this chapter, a documented emergency means situations where replacement staff are not able to report to duty for the next shift due to adverse weather conditions, natural disasters, illness, strike, or other documented situations where normally scheduled staff are no longer available. For purposes of this chapter, a normal work period must not exceed 12 hours.

#### 4658,0120 EMPLOYEE POLICIES.

Subpart 1. Keys. The person in charge of a nursing home on each work shift must have the ability to open all doors and locks in the nursing home except the business office.

- Subp. 2. Requirements for staff. A nursing home must have at least one responsible person awake, dressed, and on duty at all times. The person must be at least 21 years of age and capable of performing the required duties of evacuating the residents.
- Subp. 3. Identification of staff. Each employee and volunteer must wear a badge which includes name and position. 4658.0125 PERSONAL BELONGINGS.

Personnel must not keep personal belongings in the food service or resident areas. Provision must be made elsewhere for storage. 4658.0130 EMPLOYEES' PERSONNEL RECORDS.

A current personnel record must be maintained for each employee and be stored in a confidential manner. The records must be available to representatives of the department and must contain:

- A. the person's name, address, telephone number, gender, Minnesota license, certification or registration number, if applicable, and similar identifying data;
  - B. a list of the individual's training, experience, and previous employment;
  - C. the date of employment, type of position currently held, hours of work, and attendance records; and
  - D. the date of resignation or discharge.

Employee health information, including the record of all accidents and reportable illnesses, must be maintained and stored in a separate employee medical record.

#### 4658,0135 POLICY RECORDS.

- Subpart 1. Availability of policies. All policies and procedures adopted by the home must be placed on file and be made available upon request to nursing home personnel, residents, and family members.
- Subp. 2. Admission policies. Admission policies must be made available upon request to prospective residents, family members, legal representatives, and designated representatives.

#### 4658.0140 TYPE OF ADMISSIONS.

- Subpart 1. Selection of residents. The administrator, in cooperation with the director of the nursing service and the medical director, is responsible for exercising discretion in the type of residents admitted to the home in accordance with the admission policies of the nursing home.
- Subp. 2. Residents not accepted. Residents must not be admitted or retained for whom care cannot be provided in keeping with their known physical, mental, or behavioral condition. Prospective residents who are denied admission must be informed of the reason for the denial of their admission.

#### 4658.0145 AGREEMENT AS TO RATES AND CHARGES.

- Subpart 1. Written agreement. At the time of admission, there must be a written agreement between the nursing home and the resident, the resident's agent, or the resident's guardian, which includes:
  - A. the base rate and what services and items are provided by the nursing home and are included in that base rate:
  - B. extra charges for care or services:
  - C. obligations concerning payment of the rates and charges; and
  - D. the refund policy of the home.

All residents' bills must be itemized for services rendered.

Subp. 2. Notification of rates and charges. Annually, and when there is any change, a nursing home must inform the resident of services available in the nursing home and of charges for those services, including any charges for services not covered under Medicare or Medicaid or by the nursing home's per diem rate. A nursing home must inform the resident or the resident's agent or guardian before any change in the charges for services not covered under Medicare or Medicaid or by the nursing home's per diem rate.

#### 4658.0150 INSPECTION BY DEPARTMENT.

All areas of a nursing home and all records related to the care and protection of residents including resident and employee records must be open for inspection by the department at all times for the purposes of enforcing this chapter.

#### 4658.0155 REPORTS TO DEPARTMENT.

Reports regarding statistical data and services furnished must be submitted on forms furnished by the department. Copies must be retained by the nursing home.

## 4658.0190 PENALTIES FOR ADMINISTRATION AND OPERATIONS.

Penalty assessments for violations of parts 4658.0050 to 4658.0155 are as follows:

- A. part 4658.0050, subpart 1, \$250;
- B. part 4658.0050, subpart 2, \$100;
- C. part 4658,0050, subpart 3, items A and D, \$250;
- D. part 4658.0050, subpart 3, items B, F, G, and H, \$100;
- E. part 4658.0050, subpart 3, items C and E, \$50;
- F. part 4658.0055, subparts 1 to 3, \$100;
- G. part 4658.0055, subpart 4, \$50;
- H. part 4658.0060, items A, F, H, and I, \$50;
- I. part 4658.0060, items B, C, D, E, and G, \$100;
- J. part 4658.0065, \$200;
- K. part 4658.0070, \$100;
- L. part 4658.0075, \$100;
- M. part 4658.0080, \$100;
- N. part 4658.0085, \$350;
- O. part 4658.0090, \$500;
- P. part 4658.0095, \$50;
- O. part 4658.0100, subparts 1 to 3, \$100;
- R. part 4658.0100, subpart 4, \$50;
- S. part 4658.0100, subpart 5, \$300;
- T. part 4658.0105, \$300;
- U. part 4658.0110, \$100;
- V. part 4658.0115, \$100;
- W. part 4658.0120, subpart 1, \$100;
- X. part 4658.0120, subpart 2, \$500;
- Y. part 4658.0120, subpart 3, \$50;
- Z. part 4658.0125, \$50;
- AA. part 4658.0130, \$50;
- BB. part 4658.0135, subpart 1, \$50;
- CC. part 4658.0135, subpart 2, \$50;
- DD. part 4658.0140, subpart 1, \$100;
- EE. part 4658.0140, subpart 2, \$250;
- FF. part 4658.0145, subpart 1, \$100;
- GG. part 4658.0145, subpart 2, \$100;
- HH. part 4658.0150, \$100; and

#### II. part 4658,0155, \$50.

#### 4658.0300 USE OF RESTRAINTS.

Subpart 1. Definitions. For purposes of this part, the following terms have the meanings given.

- A. "Physical restraints" means any manual method or physical or mechanical device, material, or equipment attached or adjacent to the resident's body that the individual cannot remove easily which restricts freedom of movement or normal access to one's body. Physical restraints include, but are not limited to, leg restraints, arm restraints, hand mitts, soft ties or vests, and wheelchair safety bars. Physical restraints also include practices which meet the definition of a restraint, such as tucking in a sheet so tightly that a resident confined to bed cannot move; bed rails; chairs that prevent rising; or placing a wheelchair-bound resident so close to a wall that the wall prevents the resident from rising. Bed rails are considered a restraint if they restrict freedom of movement. If the bed rail is used solely to assist the resident in turning or to help the resident get out of bed, then the bed rail is not used as a restraint. Wrist bands or devices on clothing that trigger electronic alarms to warn staff that a resident is leaving a room or area do not, in and of themselves, restrict freedom of movement and should not be considered restraints.
- B. "Chemical restraints" means any psychopharmacologic drug that is used for discipline or convenience and is not required to treat medical symptoms.
  - C. "Discipline" means any action taken by the nursing home for the purpose of punishing or penalizing a resident.
- D. "Convenience" means any action taken solely to control resident behavior or maintain a resident with a lesser amount of effort that is not in the resident's best interest.
- E. "Involuntary seclusion" means the separation of a resident from other residents or from the resident's room against the resident's will, or the will of the resident's legal representative. Emergency or short-term monitored separation from other residents is not considered involuntary seclusion and is allowed if used as a therapeutic intervention to reduce agitation until professional staff can develop a plan of care to meet the resident's needs.
- F. "Emergency measures" means the immediate action necessary to alleviate an unexpected situation or sudden occurrence of a serious and urgent nature.
- Subp. 2. Freedom from restraints. Residents must be free from any physical or chemical restraints imposed for purposes of discipline or convenience, and not required to treat the resident's medical symptoms. Residents must be free from corporal punishment and involuntary seclusion.

#### Subp. 3. Emergency use of restraints.

- A. If a resident exhibits behavior which becomes a threat to the health or safety of the resident or others, the person in charge of the nursing home must take temporary, emergency measures to protect the resident and other persons in the nursing home, and the physician must be called immediately.
- B. If a restraint is needed, it may be applied only upon the physician's order which specifies the duration and circumstances under which the restraints are to be used.
- C. The resident's legal representative or interested family member must be notified when temporary emergency measures are taken.
- Subp. 4. Decision to apply restraint. The decision to apply a restraint must be based on the assessment of each resident's capabilities and an evaluation of least restrictive measures. The restraint must be used in accordance with the plan of care and the comprehensive resident assessment, which allow for progressive removal or the progressive use of less restrictive means. Nothing in this part requires a resident to be awakened during the resident's normal sleeping hours. At a minimum, for a resident placed in a restraint, a nursing home must:
  - A. obtain an informed consent;
  - B. obtain a written order from the attending physician;
  - C. check the resident at least every 30 minutes;
  - D. assist the resident as often as necessary for the resident's safety, comfort, exercise, and elimination needs;

- E. provide an opportunity for motion, exercise, and elimination for not less than ten minutes during each two-hour period in which a restraint is employed;
  - F. release the resident from the restraint as quickly as possible; and
  - G. keep a record of restraint usage and checks.

#### 4658.0350 PENALTIES FOR USE OF RESTRAINTS.

Penalty assessments for violations of part 4658.0300 are as follows:

- A. part 4658.0300. subpart 2. \$500:
- B. part 4658.0300, subpart 3, items A and B, \$500;
- C. part 4658.0300, subpart 3, item C, \$50;
- D. part 4658.0300, subpart 4, item A, \$250;
- E. part 4658,0300, subpart 4, item B, \$300;
- F. part 4658.0300, subpart 4, items C to F, \$500; and
- G. part 4658.0300, subpart 4, item G, \$300.

#### 4658.0400 COMPREHENSIVE RESIDENT ASSESSMENT.

Subpart 1. Assessment. A nursing home must conduct a comprehensive assessment of each resident's needs, which describes the resident's capability to perform daily life functions and significant impairments in functional capacity. The results of the comprehensive resident assessment must be used to develop, review, and revise the resident's comprehensive plan of care as defined in part 4658,0405.

Subp. 2. Information gathered. The comprehensive resident assessment must include at least the following information:

- A. medically defined conditions and prior medical history:
- B. medical status measurement:
- C. physical and mental functional status:
- D. sensory and physical impairments:
- E. nutritional status and requirements:
- F. special treatments or procedures:
- G. mental and psychosocial status:
- H. discharge potential:
- I. dental condition:
- J. activities potential:
- K. rehabilitation potential:
- L. cognitive status; and
- M. drug therapy.

Subp. 3. Frequency. Comprehensive resident assessments must be conducted:

- A. within 14 days after the date of admission:
- B. promptly after a significant change in the resident's physical or mental condition; and
- C. at least once every 12 months.

Subp. 4. Review of assessments. A nursing home must examine each resident at least once every 90 days and revise the resident's comprehensive assessment to ensure the continued accuracy of the assessment.

#### 4658.0405 COMPREHENSIVE PLAN OF CARE.

Subpart 1. Development. A nursing home must develop a comprehensive plan of care for each resident within seven days after the completion of the comprehensive resident assessment as defined in part 4658.0400. The comprehensive plan of care must list measurable objectives and timetables to meet the resident's long- and short-term goals for medical, nursing, and mental and psychosocial needs that are identified in the comprehensive resident assessment. The comprehensive plan of care must include:

A. the physician's orders for medications, treatments, diet, and other therapy; and

## **=** Proposed Rules

B. the types of care and consultation services needed, how they can best be accomplished, how the plan meets the needs and interests of the resident, what methods are most successful, and the modifications necessary to ensure best results.

Subp. 2. Use. A comprehensive plan of care must be used by all personnel involved in the care of the resident. The comprehensive plan of care must be reviewed and updated at least every 90 days and after any permanent or significant change in resident condition. An interdisciplinary conference to review the comprehensive plan of care must be conducted regularly to keep the plans current.

#### 4658.0420 PENALTIES FOR COMPREHENSIVE ASSESSMENT AND PLAN OF CARE.

Penalty assessments for violations of parts 4658.0400 and 4658.0405 are as follows:

- A. part 4658.0400, \$300; and
- B. part 4658.0405, \$300.

#### CLINICAL RECORDS

#### 4658.0430 HEALTH INFORMATION MANAGEMENT SERVICE.

Subpart 1. Health information management. A nursing home must maintain a health information management service, including clinical records, in accordance with accepted professional standards and practices, federal regulations, and state statutes pertaining to the content of the clinical record, health care data, computerization, confidentiality, retention, and retrieval. For purposes of this part, "health information management" means the collection, analysis, and dissemination of data to support decisions related to: disease prevention and resident care; effectiveness of care; reimbursement and payment; planning, research, and policy analysis; and regulations.

- Subp. 2. Quality of health information. A nursing home must develop and utilize a mechanism for auditing the quality of its health information management service.
- Subp. 3. Person responsible for health information management. A nursing home must designate a person to be responsible for health information management.

#### 4658.0435 CONFIDENTIALITY OF CLINICAL RECORDS AND INFORMATION.

Subpart 1. Maintaining confidentiality of records. Information in the clinical records, regardless of form or storage methods, must be kept confidential according to Minnesota Statutes, chapter 13 and sections 144.335 and 144.651, and federal regulations. A resident's clinical information in a nursing home must be considered confidential but it must be made available to all persons in the nursing home who are responsible for the care of the resident. The clinical information must be open to inspection by representatives of the Department of Health and others legally authorized to obtain access.

Subp. 2. Electronic transmission of health care data. If a nursing home chooses to transmit or receive health care data by facsimile machine, the nursing home must develop and comply with policies and procedures to ensure the confidentiality, security, and verification of the transmission and receipt of information authorized to be transmitted by facsimile machine. A durable copy of the facsimile transmission must be placed in the resident's record.

#### 4658.0440 ABBREVIATIONS.

A nursing home must have an explanation key available for abbreviations or symbols used in documentation and the collection of data and information.

#### 4658.0445 CLINICAL RECORD.

Subpart 1. Unit record. A resident's clinical record must be started at admission and incorporated into a central unit record system. The clinical record must contain sufficient information to identify the resident, contain a record of resident assessments, the comprehensive plan of care, progress notes on the implementation of the care plan, and a summary of the resident's condition at the time of discharge.

Subp. 2. Form of entries and authentication. Data collected must be timely, accurate, and complete. All entries must be entered, authenticated, and dated by the person making the entry. All entries must be made as soon as possible after the observation or treatment in order to keep the clinical record current. In cases where authentication is done electronically or by rubber stamp.

safeguards to prevent unauthorized use must be in place. Nursing assistants may document in the nursing notes if allowed by nursing home policy.

Subp. 3. Classification systems. All diagnoses and procedures must be accurately and comprehensively coded to ensure accurate resident medical profiles.

#### Subp. 4. Admission information.

- A. Identification information. Identification information must be collected and maintained for each resident upon admission and must include, at a minimum:
  - (1) the resident's legal name and preferred name;
  - (2) previous address;
  - (3) social security number;
  - (4) gender;
  - (5) marital status;
  - (6) date and place of birth:
  - (7) date and hour of admission:
- (8) advanced directives, including Do Not Resuscitate (DNR) and Do Not Intubate (DNI) status, Health Care Power of Attorney, or living will, if any:
  - (9) name, address, and telephone number of designated relative or significant other, if any:
  - (10) name, address, and telephone number of person to be notified in an emergency:
  - (11) legal representative or personal representative, if any:
  - (12) religious affiliation and clergy member.
  - (13) hospital preference; and
  - (14) name of attending physician.
- B. Physician and professional services. The clinical record must contain the recording requirements of parts 4658.0710 to 4658.0725.
  - C. Nursing services. The clinical record must contain the recording requirements of parts 4658.0515 to 4658.0530.
  - D. Dietary and food services. The clinical record must contain the recording requirements of parts 4658.0600 and 4658.0625.
  - E. Restraints. The clinical record must contain the recording requirements of part 4658.0300.

#### 4658.0450 CLINICAL RECORD CONTENTS.

Each resident's clinical record, including nursing notes, must include:

- A. the condition of the resident at the time of admission:
- B. temperature, pulse, respiration, and blood pressure, taken at least weekly, and pertinent observations as often as indicated by the condition of the resident;
  - C. the resident's height and weight at the time of admission, and weight at least once each month thereafter:
  - D. the resident's general condition, actions, and attitudes;
  - E. observations, assessments, and interventions provided by all disciplines responsible for care of the resident;
  - F. significant observations on, for example, behavior, orientation, adjustment to the nursing home, judgment, or moods;
- G. date, time, quantity of dosage, and method of administration of all medications, and the signature of the nurse or authorized persons who administered the medication:
  - H. a report of a tuberculin test within the past three months, as described in part 4658.0810;
  - I. reports of appropriate laboratory examinations:
  - J. dates and times of all treatments and dressings:
  - K. dates and times of visits by physicians, dentists, or podiatrists;
  - L. visits to clinics or hospitals:
  - M. any orders or instructions relative to the comprehensive plan of care:

- N. any change in the resident's sleeping habits or appetite;
- O. pertinent factors regarding changes in the resident's general conditions; and
- P. results of initial comprehensive assessment and all subsequent comprehensive assessments as described in part 4658.0400.

## 4658.0455 TELEPHONE AND ELECTRONIC ORDERS.

- A. Orders received by telephone, facsimile machine, or other electronic means must be kept confidential according to Minnesota Statutes, sections 144.335, 144.651, and 144.652.
- B. Orders received by telephone or other electronic means must be immediately recorded or placed in the resident's record by the person authorized by the home and must be countersigned by the ordering health practitioner licensed to prescribe at the time of the next visit.
  - C. Orders received by facsimile machine must have been signed by the ordering health practitioner licensed to prescribe.

#### 4658.0460 MASTER RESIDENT RECORD.

A permanent record must be kept listing at a minimum the full name of the resident, resident identification number, date of birth, date of admission, date of discharge, and discharge disposition. The master resident record must be kept in such a manner that total admissions, discharges, deaths, and resident days can be calculated, and an alphabetical listing of residents can be created.

#### 4658.0465 TRANSFER, DISCHARGE, AND DEATH.

- Subpart 1. Discharge summary. At the time of discharge or death, the nursing home must compile a summary that includes the date and time of discharge, reason for discharge, and discharge diagnosis and condition; or the date, time, and cause of death.
- Subp. 2. Transfer of resident information. When a resident is transferred or discharged to another care facility, pertinent information about the resident's care and sufficient information to ensure continuity of care must accompany the resident.

#### 4658.0470 RETENTION, STORAGE, AND RETRIEVAL.

- Subpart 1. Retention. A resident's records must be preserved for a period of at least five years following discharge or death.
- Subp. 2. Storage. Space must be provided for the safe and confidential storage of residents' clinical records. Records of current residents must be stored on site.
- Subp. 3. Retrieval. If records are stored off site, policies and procedures must be developed and implemented by clinical record personnel and the nursing home administration for the confidentiality, retention, and timely retrieval of records within 24 hours. The policies and procedures must specify who is authorized to retrieve a record. Off-site archived copies of clinical databases must be protected against fire, flood, and other emergencies. The policies must address the location and retention of records if the nursing home discontinues operation.

#### 4658.0475 COMPUTERIZATION.

If a nursing home is converting to an electronic paperless health information management system:

- A. policies and procedures must be established and maintained that require password protection of the clinical database;
- B. any outside contract for health information management services must include a provision that the company providing the services assumes responsibility for maintaining the confidentiality of all health information within its control:
  - C. audit trails must be developed for computer applications to determine the source and date of all entries and deletions:
  - D. backup systems must be implemented and maintained:
  - E. preventative maintenance must be implemented and maintained:
  - E. there must be a plan for preparing, securing, and retaining archived copies of computerized clinical databases;
- G. procedures must be implemented for preparing and securing daily, weekly, and monthly archived copies of computerized clinical databases; and
  - H. there must be confidentiality and protection from unauthorized use of active and archived computerized clinical databases.

#### 4658.0490 PENALTIES FOR CLINICAL RECORDS.

Penalty assessments for violations of parts 4658.0430 to 4658.0475 are as follows:

- A. part 4658.0430, \$300;
- B. part 4658.0435, \$250;
- C. part 4658.0440, \$50;
- D. part 4658.0445, subpart 1, \$300;
- E. part 4658.0445, subpart 2, \$300;
- F. part 4658.0445, subpart 3, \$300;
- G. part 4658,0445, subpart 4, \$100:
- H. part 4658.0450, \$300;
- I. part 4658.0455, item A. \$250:
- J. part 4658.0455, item B. \$300;
- K. part 4658.0455, item C. \$300;
- L. part 4658.0460, \$50:
- M. part 4658.0465, subpart 1, \$50;
- N. part 4658.0465, subpart 2, \$100;
- O. part 4658.0470, \$100; and
- P. part 4658.0475, \$300.

#### 4658.0500 DIRECTOR OF NURSING SERVICES.

- Subpart 1. Qualifications and duties. A nursing home must have a director of nursing services who is a registered nurse currently licensed in Minnesota.
- Subp. 2. Requirement of full-time employment. A director of nursing services must be employed full time, no less than 40 hours per week, and devote full time to the nursing services of the nursing home.
- Subp. 3. Assistant to director. A licensed nurse who serves as the assistant to the director of nursing services must be designated and be responsible for the duties of the director in the director's absence and must assist the director of nursing services in carrying out the director's responsibilities so that the functions of the director of nursing services are maintained seven days per week.
- Subp. 4. Education. After the effective date of this part, a person newly appointed to the position of the director of nursing services must be educated in rehabilitation nursing techniques, gerontology, nursing service administration, management, supervision, and psychiatric or geriatric nursing before or within the first 12 months after appointment as director of nursing services.

#### 4658.0505 DIRECTOR OF NURSING SERVICES; RESPONSIBILITIES.

A nursing home must have a written job description for the director of nursing services that includes responsibility for:

- A. the total nursing care of residents and the accuracy of the nursing care records:
- B. establishing and implementing procedures for general nursing care, developing nursing policy and procedure manuals that must be available at each nurse's station, and developing written job descriptions for each level of nursing personnel:
- C. planning and conducting orientation programs for new nursing personnel, and continuing in-service education for all nursing home personnel, if there is no one designated who is responsible for all in-service education;
  - D. determining with the administrator the numbers and levels of nursing personnel to be employed;
  - E. participating in recruitment and selection of nursing personnel:
- F. assigning, supervising, and evaluating the performance of all nursing personnel and delegating and monitoring responsibilities to other personnel consistent with their training, experience, and licensure;
- G. participating in the selection of prospective residents in terms of nursing service needed and nursing competencies available:
- H. assuring that a resident care plan is established and implemented for each resident and that the plan is reviewed every 90 days and revised when there is a permanent or significant change:

- I. coordinating nursing services for the residents in the nursing home with other resident care services provided both within and outside the nursing home:
  - J. participating in planning, decision making, and budgeting for nursing care:
  - K. interacting with physicians to plan care for residents:
  - L. recommending termination of employment of nursing personnel when necessary; and
  - M. participating in discharge or transfer planning for residents.

#### **4658.0510 NURSING STAFF.**

- Subpart 1. Requirements. A nursing home must have on duty at all times a sufficient number of qualified nursing personnel, including registered nurses, licensed practical nurses, and nursing assistants to meet the needs of the residents at all nurses' stations, on all floors, and in all buildings if more than one building is involved. This includes relief duty, weekends, and vacation replacements. The minimum number of hours of nursing personnel to be provided in a nursing home is the greater of two hours of nursing personnel per resident per 24 hours or 0.95 hours per standardized resident day, plus additional qualified nursing staff commensurate with the needs of the residents. "Standardized resident day" means the sum of the number of residents in each case mix class multiplied by the case mix weight for that resident class, as described in part 9549.0059, subpart 2, calculated on the basis of the nursing home's census for any given day.
- Subp. 2. On-site coverage. A licensed nurse must be employed so that on-site nursing coverage is provided eight hours per day, seven days per week.
  - Subp. 3. On call coverage. A registered nurse must be on call during all hours when a registered nurse is not on duty.
- Subp. 4. Assignment of duties. Nursing personnel must not perform duties for which they have not had proper and sufficient training. Duties assigned to nursing personnel must be consistent with their training, experience, and licensure.
- Subp. 5. Duties. The nursing staff must be employed and used for nursing duties only. A nursing home must provide sufficient additional staff for housekeeping, dietary, laundry, and maintenance duties and those persons must not provide nursing care.

#### 4658.0515 FREQUENCY OF REPORTING.

Nursing notes must be recorded at least once every seven days on all residents and more often if indicated by their condition.

4658.0520 ADEQUATE AND PROPER CARE.

- Subpart 1. Care in general. A resident must receive nursing care and treatment, personal and custodial care, and supervision based on individual needs as identified in the comprehensive resident assessment and plan of care as described in parts 4658,0400 and 4658,0405. A nursing home resident must be out of bed as much as possible unless the attending physician states in writing on the resident's clinical record that the resident must remain in bed.
  - Subp. 2. Criteria for determining adequate and proper care. The criteria for determining adequate and proper care include:
    - A. Evidence of adequate care and kind and considerate treatment at all times. Privacy must be respected and safeguarded.
- B. Clean skin and freedom from offensive odors. A bathing plan must be part of each resident's plan of care. A resident confined to bed must be given a complete bath at least every other day and more often as indicated. An incontinent resident must be checked at least every two hours, and must receive perineal care following each episode of incontinence. Clean linens or clothing must be provided promptly each time the bed or clothing is soiled. Perineal care includes the washing and drying of the perineal area. Pads or diapers must be used to keep the bed dry and for the resident's comfort. Special attention must be given to the skin to prevent irritation. Rubber, plastic, or other types of protectors must be kept clean, be completely covered, and not come in direct contact with the resident. Soiled linen and clothing must be removed immediately from resident areas to prevent odors.
  - C. A shampoo at least every seven days and assistance with daily hair grooming as needed.
  - D. Assistance with or supervision of shaving of all residents as necessary to keep them clean and well-groomed.
- E. Assistance as needed with oral hygiene to keep the mouth, teeth, or dentures clean. Measures must be used to prevent dry, cracked lips.
  - F. Proper care and attention to hands and feet. Fingernails and toenails must be kept clean and trimmed.

- G. Bed linen must be changed weekly, or more often as needed. Beds must be made daily and straightened as necessary.
- H. Clean clothing and a neat appearance. Residents must be dressed during the day whenever possible.
- I. Monitoring resident temperature, pulse, respiration, and blood pressure as often as indicated by the resident's condition but at least every seven days.
- J. Recording resident height and weight at the time of admission and weight at least once every 30 days thereafter.

#### 4658.0525 REHABILITATION NURSING CARE.

- Subpart 1. Rehabilitation nursing care. A nursing home must have an active program of rehabilitation nursing care directed toward assisting each resident to achieve and maintain the highest practicable physical, mental, and psychosocial well-being according to the comprehensive resident assessment and plan of care described in parts 4658.0400 and 4658.0405. Continuous efforts must be made to encourage ambulation and purposeful activities.
- Subp. 2. Range of motion. A supportive program that is directed toward prevention of deformities through positioning and range of motion must be implemented and maintained. Based on the comprehensive resident assessment, the nursing home must ensure that:
- A. a resident who enters the nursing home without a limited range of motion does not experience reduction in range of motion unless the resident's clinical condition demonstrates that a reduction in range of motion is unavoidable; and
- B. a resident with a limited range of motion receives appropriate treatment and services to increase range of motion and to prevent further decrease in range of motion.
  - Subp. 3. Pressure sores. Based on the comprehensive resident assessment, the nursing home must ensure that:
- A. a resident who enters the nursing home without pressure sores does not develop pressure sores unless the individual's clinical condition demonstrates that they were unavoidable; and
- B. a resident who has pressure sores receives necessary treatment and services to promote healing, prevent infection, and prevent new sores from developing.
- Subp. 4. Positioning. Residents must be positioned in good body alignment. The position of residents unable to change their own position must be changed at least every two hours, including periods of time after the resident has been put to bed for the night, unless the physician has documented that repositioning every two hours during this time period is unnecessary or the physician has ordered a different interval.
- Subp. 5. Incontinence. A nursing home must have a continuous program of bowel and bladder training to reduce incontinence and the unnecessary use of catheters. Based on the comprehensive resident assessment, a nursing home must ensure that:
- A. a resident who enters a nursing home without an indwelling catheter is not catheterized unless the resident's clinical condition indicates that catheterization was necessary; and
- B. a resident who is incontinent of bladder receives appropriate treatment and services to prevent urinary tract infections and to restore as much normal bladder function as possible.
  - Subp. 6. Activities of daily living. Based on the comprehensive resident assessment, a nursing home must ensure that:
- A. a resident's abilities in activities of daily living do not diminish unless circumstances of the individual's clinical condition indicate that diminution was unavoidable. For purposes of this part, activities of daily living includes the resident's ability to:
  - (1) bathe, dress, and groom;
  - (2) transfer and ambulate;
  - (3) use the toilet:
  - (4) eat; and
  - (5) use speech, language, or other functional communication systems;
  - B. a resident is given the appropriate treatment and services to maintain or improve the abilities specified in item A; and
- C. a resident who is unable to carry out activities of daily living receives the necessary services to maintain good nutrition, grooming, and personal and oral hygiene.
  - Subp. 7. Nasogastric tubes. Based on the comprehensive resident assessment, a nursing home must ensure that:
- A. a resident who has been able to eat enough independently or with assistance is not fed by nasogastric tube or feeding syringe unless the resident's clinical condition demonstrates that use of a nasogastric tube or feeding syringe was unavoidable; and
  - B. a resident who is fed by a nasogastric or gastrostomy tube or feeding syringe receives the appropriate treatment and ser-

vices to prevent aspiration pneumonia, diarrhea, vomiting, dehydration, metabolic abnormalities, and nasal-pharyngeal ulcers and to restore, if possible, normal feeding function.

- Subp. 8. Prosthetic devices. A nursing home must assist residents to adjust to their disabilities and to use their prosthetic devices.
- Subp. 9. Hydration. Residents must be offered and receive adequate water and other fluids to maintain proper hydration and health, unless fluids are restricted.
- Subp. 10. In-service. A nursing home must provide evidence of an in-service training program in rehabilitation for all nursing personnel to promote ambulation; aid in activities of daily living; assist in activities, self-help, maintenance of range of motion, and proper chair and bed positioning; and in the prevention or reduction of incontinence.

#### 4658.0530 ASSISTANCE WITH EATING.

Subpart 1. Nursing personnel. Nursing personnel must determine that residents are served diets as prescribed. Residents needing help in eating must be promptly assisted upon receipt of the meals and the assistance must be unhurried and in a manner that maintains or enhances each resident's dignity and respect. Adaptive self-help devices must be provided to contribute to the resident's independence in eating. Food and fluid intake of residents must be observed and deviations from normal reported to the charge nurse. Persistent unresolved problems must be reported to the physician.

- Subp. 2. Other persons. Persons other than nursing personnel may assist residents with eating if the following conditions are met:
  - A. the nursing home has a policy allowing that assistance:
- B. the resident has been assessed and a determination made that the resident may be safely fed by a person other than nursing personnel, and that is documented in the comprehensive plan of care;
  - C. the resident has agreed to be fed by a person other than nursing personnel:
- D. the person has completed a training program on assisting residents with eating, which, at a minimum, meets the training and competency standards for eating assistance contained in the nursing assistant training curriculum;
  - E. the person is under the supervision of the director of nursing services while performing this activity;
- F. there are mechanisms in place to ensure appropriate reporting to the nursing staff of observations made by the person during meal time; and
  - G. the use of persons other than nursing personnel to substitute for sufficient nursing staff is prohibited.

#### 4658.0580 PENALTIES FOR NURSING SERVICES.

Penalty assessments for violations of parts 4658.0500 to 4658.0530 are as follows:

- A. part 4658.0500, subpart 1, \$300;
- B. part 4658.0500, subpart 2, \$300;
- C. part 4658.0500, subpart 3, \$100;
- D. part 4658.0500, subpart 4, \$300;
- E. part 4658.0505, items A to C. \$300:
- F. part 4658.0505, items D to G, \$100;
- G. part 4658.0505, item H. \$300;
- H. part 4658.0505, items I to M, \$100;
- I. part 4658.0510, subpart 1, \$300;
- J. part 4658.0510, subparts 2 to 4, \$500;
- K. part 4658.0510, subpart 5, \$300;
- L. part 4658.0515, \$300;

- M. part 4658.0520, subpart 1, \$350;
- N. part 4658.0520, subpart 2, items A to H. \$350;
- O. part 4658.0520, subpart 2, items I to J. \$300;
- P. part 4658,0525, subparts 1 to 9, \$350;
- O. part 4658.0525, subpart 10, \$100; and
- R. part 4658.0530, \$350.

#### 4658.0700 MEDICAL DIRECTOR.

- Subpart 1. Designation. A nursing home must designate a physician licensed by the state of Minnesota to serve as medical director.
- Subp. 2. Duties. The medical director, in conjunction with the administrator and the director of nursing services, must be responsible for:
  - A. the development of resident care policies and procedures that are to be approved by the governing body:
  - B. implementation of resident care policies:
  - C. the development of standards of practice for medical care to provide guidance to attending physicians;
- D. the medical direction and coordination of medical care in the home, including serving as liaison with attending physicians, and periodic evaluation of the adequacy and appropriateness of health professional and supportive staff and services;
  - E. surveillance of the health status of the nursing home's employees as it relates to the performance of their assigned duties:
  - F. participation with the director of nursing services to ensure a quality level of care provided to residents; and
  - G. participation on the quality assessment and assurance committee as required in part 4658.0070.

#### 4658,0705 MEDICAL CARE AND TREATMENT.

- Subpart 1. Physician supervision. A nursing home must ensure that each resident has a licensed physician designated for the supervision of the medical care and treatment of the resident during the resident's stay in the nursing home.
  - Subp. 2. Availability of physicians for emergency and advisory care.
- A. A nursing home must provide or arrange for the provision of physician services 24 hours a day, in case of an emergency, and to act in an advisory capacity.
  - B. The name and telephone number of the emergency physician must be readily available.

#### 4658.0710 ADMISSION ORDERS AND PHYSICIAN EVALUATIONS.

- Subpart 1. Physical examination. A resident must have a current admission medical history and complete physical examination performed and recorded by a physician, physician assistant, or nurse practitioner within five days before or within seven days after admission.
- Subp. 2. Admission orders. A nursing home must have physician orders for a resident's admission and immediate care at the time of admission.
  - Subp. 3. Frequency of physician evaluations.
- A. A resident must be evaluated by a physician at least once every 30 days for the first 90 days after admission, and then whenever medically necessary. A physician visit is considered timely if it occurs within ten days after the date the visit was required.
- B. Except as provided in this item, all required physician visits must be made by the physician personally. At the option of the physician, required visits after the initial visit may alternate between personal visits by the physician and visits by a physician assistant or nurse practitioner according to parts 5600.2600 to 5600.2670, chapters 6330 and 6340, and Minnesota Statutes, sections 147.34 and 148.235.
  - Subp. 4. Physician visits. At each visit, a physician or physician's designee must:
    - A. review the resident's comprehensive plan of care, including medications and treatments, and progress notes:
    - B. write, sign, and date physician progress notes: and
    - C. sign and date all orders.

#### 4658.0715 MEDICAL INFORMATION FOR CLINICAL RECORD.

A physician or physician designee must provide the following information for the clinical record:

- A. the report of the admission history and physical examination:
- B. the admitting diagnosis:
- C. a description of the general medical condition, including disabilities and limitations:
- D. a report of subsequent physical examinations:
- E. instructions relative to the resident's total program of care:
- E. written orders for all medications with stop dates, treatments, rehabilitations, and any medically prescribed special diets;
- G. progress notes:
- H. any advanced directives:
- I. physician contacts with the resident's family or the resident's representative; and
- J. condition on discharge or transfer, or cause of death.

#### 4658.0720 PROVIDING DAILY ORAL CARE.

Subpart 1. Daily oral care plan. A nursing home must establish a daily oral care plan for each resident as part of the initial comprehensive resident assessment.

- A. A resident's daily oral care plan must indicate whether or not the resident has natural teeth or wears removable dentures or partials. It must also indicate whether the resident is able to maintain oral hygiene independently, needs supervision, or is dependent on others.
- B. A nursing home must provide a resident with the supplies and assistance necessary to carry out the resident's daily oral care plan. The supplies must include at a minimum: toothbrushes, fluoride toothpaste, mouth rinses, dental floss, denture cups, denture brushes, denture cleaning products, and denture adhesive products.
- C. A nursing home must make the daily oral care plan available to the attending dentist before each checkup, and must modify the plan according to the dentist's, dental hygienist's, or other dental practitioner's directions.
- Subp. 2. Labeling dentures. A nursing home must label full and partial dentures with the resident's name or other identifiers within seven days of admission.

#### 4658.0725 PROVIDING ROUTINE AND EMERGENCY ORAL HEALTH SERVICES.

Subpart 1. Routine dental services. A nursing home must provide, or obtain from an outside resource, routine dental services to meet the needs of each resident. Routine services include dental examinations and cleanings, fillings and crowns, root canals, periodontal care, oral surgery, bridges and removable dentures, orthodontic procedures, and adjunctive services that are provided for similar dental patients in the community at large, as limited by third party reimbursement policies.

#### Subp. 2. Annual dental visit.

- A. Within 90 days after admission, a resident must be referred for an initial dental examination unless the resident has received a dental examination within the six months before admission.
- B. After the initial dental examination, a nursing home must ask the resident if the resident wants to see a dentist and then provide any necessary help to make the appointment, on at least an annual basis. This opportunity for an annual dental checkup must be provided within one year from the date of the initial dental examination or within one year from the date of the examination done within the six months before admission.

#### Subp. 3. Emergency dental services.

- A. A nursing home must provide, or obtain from an outside resource, emergency dental services to meet the needs of each resident.
- B. When emergency dental problems arise, a nursing home must contact a dentist within 24 hours, describe the dental problem, and document and implement the dentist's plans and orders.

Subp. 4. Dental records. For each dental visit, the clinical record must include the name of the dentist or dental hygienist, date of the service, specific dental services provided, medications administered, medical or dental consultations, and follow-up orders.

#### 4658.0730 NURSING HOME REQUIREMENTS.

- Subpart 1. Training. Nursing home staff providing daily oral care must be trained and competent to provide daily oral care for residents.
- Subp. 2. Written agreement. A nursing home must maintain a written dental provider agreement with at least one licensed dentist who agrees to provide:
  - A. routine and emergency dental care for the nursing home's residents:
  - B. consultation on the nursing home's oral health policies and procedures; and
  - C. oral health training for nursing home staff.
- Subp. 3. Making appointments. A nursing home must assist residents in making dental appointments and arranging for transportation to and from the dentist's office.
- Subp. 4. On-site services. A nursing home must arrange for on-site dental services for residents who cannot travel, if those services are available in the community.
- Subp. 5. List of dentists. A nursing home must maintain a list of dentists in the service area willing and able to provide routine or emergency dental services for the nursing home's residents. Copies of the list must be readily accessible to nursing staff.

#### 4658,0750 PENALTIES FOR PHYSICIAN AND DENTAL SERVICES.

Penalty assessment for violations of parts 4658.0700 to 4658.0730 are as follows:

- A. part 4658.0700, subpart 1, \$100;
- B. part 4658.0700, subpart 2, items A to F, \$300;
- C. part 4658.0700, subpart 2, item G, \$100;
- D. part 4658,0705, subpart 1, \$300;
- E. part 4658.0705, subpart 2, item A, \$300;
- F. part 4658.0705, subpart 2, item B, \$100;
- G. part 4658.0710, subpart 1, \$350;
- H. part 4658.0710, subpart 2, \$300;
- I. part 4658.0710, subpart 3, item A, \$350;
- J. part 4658.0710, subpart 3, items B and C, \$300;
- K. part 4658.0710, subpart 4, \$100;
- L. part 4658.0715, \$350;
- M. part 4658.0720, subpart 1, \$300;
- N. part 4658.0720, subpart 2, \$100;
- O. part 4658,0725, subpart 1, \$350;
- P. part 4658.0725, subparts 2 and 3, \$300;
- O. part 4658.0725, subpart 4, \$100;
- R. part 4658.0730, subparts 1 to 4, \$300; and
- S. part 4658.0730, subpart 5, \$100.

#### 4658.0800 INFECTION CONTROL.

- Subpart 1. Infection control program. A nursing home must establish and maintain an infection control program designed to provide a safe, sanitary, and comfortable environment and to help prevent the development and transmission of disease and infection.
- Subp. 2. Direction of program. A nursing home must assign one person, either a licensed nurse or a licensed physician, the responsibility of directing infection control activities in the nursing home.

## : Proposed Rules

- Subp. 3. Staff assistance with infection control. Personnel must be assigned to assist with the infection control program, based on the needs of the residents and nursing home, to implement the policies and procedures of the infection control program.
- Subp. 4. Policies and procedures. The infection control program must include policies and procedures which provide for the following:
- A. surveillance designed to establish nosocomial infection rates and to identify the major sites of infection, their cause or origin, and associated complications;
  - B. a system for detection, investigation, and control of outbreaks of infectious diseases;
  - C. isolation and precautions systems to reduce risk of transmission of infectious agents:
  - D. in-service education in infection prevention and control;
- E. a resident health program including an immunization program, a tuberculosis program as defined in part 4658.0810, and policies and procedures of resident care practices to assist in the prevention and treatment of infections:
- F. the development and implementation of employee health policies and infection control practices, including a tuberculosis program as defined in part 4658.0815;
  - G, a system for reviewing antibiotic utilization:
- H. a system for review and evaluation of products which affect infection control, including items such as disinfectants, antiseptics, gloves, and disposable diapers; and
  - I. methods for maintaining awareness of current standards of practice in infection control.

#### 4658.0805 PERSONS PROVIDING SERVICES.

All persons providing services, including volunteers, with a communicable disease as listed in part 4605.7040 or with infected skin lesions must not be permitted to work in the nursing home until a physician certifies that the person's condition will permit the person to work without endangering the health of residents and other staff. The administrator may require that a staff member have a medical examination when a reasonable suspicion of communicable disease exists.

#### 4658.0810 RESIDENT TUBERCULOSIS PROGRAM.

- Subpart 1. Tuberculosis test at admission. A resident's clinical record at admission must contain a report of a standard Mantoux tuberculin test within the past three months or, if the Mantoux test is positive or contraindicated or if there is a history of a positive Mantoux test, a chest X-ray within three months in advance of admission and as indicated thereafter.
- Subp. 2. Evaluation of symptoms. A resident exhibiting symptoms consistent with tuberculosis must be evaluated by Mantoux test, unless certified in writing by a physician to have had a positive reaction to a standard intradermal tuberculin test or other medical contraindication; chest X-ray; or other diagnostic tests as deemed necessary by a physician or physician designee. Symptoms consistent with tuberculosis include chronic cough with or without anorexia, weight loss, or fever, that does not respond promptly and completely to antibiotic treatment or which persist for a period of four weeks.

#### 4658.0815 EMPLOYEE TUBERCULOSIS PROGRAM.

- Subpart 1. Responsibility of nursing home. A nursing home must ensure that all employees, prior to employment and as otherwise indicated in this part, are screened for tuberculosis according to this part.
- Subp. 2. Tuberculin test. All employees, unless certified in writing by a physician to have had a positive reaction or other medical contraindication to a standard intradermal tuberculin test, must have a standard intradermal tuberculin test with purified protein derivative (Mantoux) within three months prior to employment.
- Subp. 3. Positive test. If the tuberculin test is positive or if the employee's physician has certified a positive reaction to the tuberculin test within the past two years, the employee must submit, prior to employment, a written report by a physician of a negative full-sized chest X-ray taken within the previous three months. Annual written reports of the employee's negative chest X-ray must be required until two years have passed since the first documented positive standard intradermal tuberculin test. All employees who have taken a complete course or are currently taking preventive therapy as directed by their physician are exempt from the testing requirements of this part.

- Subp. 4. Written documentation of compliance. Reports or copies of reports of the tuberculin test or chest X-ray must be maintained by the nursing home.
- Subp. 5. Evaluation of symptoms. All employees exhibiting symptoms consistent with tuberculosis must be evaluated within 72 hours by Mantoux test, unless certified in writing by a physician to have had a positive reaction or other medical contraindication to a standard intradermal tuberculin test; chest X-ray; or other diagnostic test as deemed necessary by a physician or physician designee. Symptoms consistent with tuberculosis include chronic cough with or without anorexia, weight loss, or fever, which do not respond promptly and completely to antibiotic treatment or which persist for a period of four weeks.

#### 4658.0820 FOOD POISONING AND DISEASE REPORTING.

Any occurrence of food poisoning or reportable disease as listed in part 4605.7040 must be reported immediately to the Minnesota Department of Health, Acute Disease Epidemiology Division, 717 Delaware Street SE, Minneapolis, Minnesota 55414 (612-623-5414).

### 4658.0850 PENALTIES FOR INFECTION CONTROL.

Penalty assessments for violations of parts 4658.0800 to 4658.0820 are as follows:

- A. part 4658.0800, \$300;
- B. part 4658,0805, \$300;
- C. part 4658.0810, \$200;
- D. part 4658.0815, subparts 1 to 3, \$200;
- E. part 4658,0815, subpart 4, \$50;
- F. part 4658.0815, subpart 5, \$300; and
- G. part 4658.0820, \$100.

#### 4658.1300 MEDICATIONS AND PHARMACY SERVICES; DEFINITIONS.

- Subpart 1. Controlled substances. "Controlled substances" has the meaning given in Minnesota Statutes, section 152.01, subdivision 4.
- Subp. 2. Schedule II drugs. "Schedule II drugs" means drugs with a high potential for abuse that have established medical uses as defined in Minnesota Statutes, section 152.02, subdivision 3.
- Subp. 3. Pharmacy services. "Pharmacy services" means services to ensure the accurate acquiring, receiving, dispensing, and administering of all drugs to meet the needs of each resident.
- Subp. 4. Drug regimen. "Drug regimen" means all prescribed and over-the-counter medications a resident is taking.

#### 4658.1305 PHARMACIST SERVICE CONSULTATION.

A nursing home must employ or obtain the services of a licensed pharmacist who:

- A. provides consultation on all aspects of the provision of pharmacy services in the nursing home:
- B. establishes a system of records of receipt and disposition of all controlled drugs in sufficient detail to enable an accurate reconciliation; and
  - C. determines that drug records are accurately maintained and that an account of all controlled drugs is maintained.

#### 4658.1310 DRUG REGIMEN REVIEW.

- A. The drug regimen of each resident must be reviewed at least once every 30 days by a licensed pharmacist. This review must be done in accordance with Appendix N of the State Operations Manual, Surveyor Procedures for Pharmaceutical Service Requirements in Long-Term Care, published by the Department of Health and Human Services, Health Care Financing Administration, April 1992. This standard is incorporated by reference. It is available through the Minitex interlibrary loan system. It is not subject to frequent change.
- B. The pharmacist must report any irregularities to the director of nursing services and the attending physician, and these reports must be acted upon by the time of the next physician visit, or sooner, if indicated by the pharmacist. For purposes of this part, "acted upon" means the acceptance or rejection of the report and the signing or initialing by the director of nursing services and the attending physician.
- C. If the attending physician does not concur with the pharmacist's recommendation, the matter must be reported to the medical director and reviewed by the Quality Assurance and Assessment (QAA) committee required by part 4658.0070. The QAA must make a recommendation to the attending physician regarding a solution to the pharmacist report.

#### 4658.1315 UNNECESSARY DRUG USAGE.

Subpart 1. General. A resident's drug regimen must be free from unnecessary drugs. An unnecessary drug is any drug when used:

- A. in excessive dose, including duplicate drug therapy;
- B. for excessive duration;
- C. without adequate indications for its use; or
- D. in the presence of adverse consequences which indicate the dose should be reduced or discontinued.

In addition to the drug regimen review required in part 4658.1310, the nursing home must comply with provisions in the Interpretive Guidelines for Code of Federal Regulations, title 42, section 483.25(1)(1) found in Appendix P of the State Operations Manual, Guidance to Surveyors for Long-Term Care Facilities, published by the Department of Health and Human Services, Health Care Financing Administration, April 1992. This standard is incorporated by reference. It is available through the Minitex interlibrary loan system and the state law library. It is not subject to frequent change.

Subp. 2. Monitoring. A nursing home must monitor each resident's drug regimen for unnecessary drug usage, based on the nursing home's policies and procedures, and report any irregularity to the resident's attending physician. If the attending physician does not concur with the nursing home's recommendation, the matter must be reported to the medical director and reviewed by the OAA committee as required by part 4658.0070. The OAA must made a recommendation to the attending physician regarding a solution to the nursing home report.

#### 4658,1320 MEDICATION ERRORS.

A nursing home must ensure that:

- A. It is free of medication error rates of five percent or greater as described in the Interpretive Guidelines for Code of Federal Regulations, title 42, section 483.25(m), found in Appendix P of the State Operations Manual, Guidance to Surveyors for Long-Term Care Facilities, which is incorporated by reference in part 4658.1315. For purposes of this part, a medication error means:
- (1) a discrepancy between what was prescribed and what medications are actually administered to residents in the nursing home, including a noticeable pattern of medication errors as noted during a review of the medication error forms or incident reports if training or discipline was not done for the individual or individuals responsible for the errors; or
  - (2) the administration of expired medications.
  - B. It is free of any significant medication error. A significant medication error is:
    - (1) an error which causes the resident discomfort or jeopardizes the resident's health or safety; or
- (2) medication from a category that usually requires the medication in the resident's blood to be titrated to a specific blood level and a single medication error could alter that level and precipitate a reoccurrence of symptoms or toxicity.
- C. All medications are administered as prescribed. An incident report or medication error report must be filed for any medication error that occurs. Any significant medication errors or resident reactions must be reported to the physician and the resident or the resident's legal designee and an explanation made in the resident's clinical record.

#### 4658.1325 ADMINISTRATION OF MEDICATIONS.

- Subpart 1. Pharmacy services. A nursing home must provide pharmacy services.
- Subp. 2. Staff allowed to administer medications. A licensed nurse or unlicensed nursing personnel, as described in part 4658.1360, must be designated as responsible for the administration of medications during each work period.
- Subp. 3. List of staff to administer medications. A list of staff authorized to administer medications must be available at each nursing station.
- <u>Subp. 4.</u> Self-administration. A resident may self-administer medications if the comprehensive resident assessment and comprehensive plan of care as required in parts 4658.0400 and 4658.0405 indicates this practice is safe and there is a written order from the attending physician.
  - Subp. 5. Medications administered by injection. Medications for injection may be given only by a physician, physician's

assistant, registered nurse, nurse practitioner, or licensed practical nurse, or may be self-administered by a resident in accordance with subpart 4.

- Subp. 6. Medications added to food. Adding medication to a resident's food must be prescribed by the resident's physician and the resident must consent to having medication added to food.
- Subp. 7. Administration requirements. The administration of medications must include the complete procedure of checking the resident's record, transferring individual doses of the medication from the resident's prescription container, and distributing the medication to the resident.
- Subp. 8. Documentation of administration. The name, date, time, quantity of dosage, and method of administration of all medications, and the signature of the nurse or authorized persons who administered and observed the same must be recorded in the resident's clinical record.

#### 4658.1330 WRITTEN AUTHORIZATION FOR ADMINISTERING DRUGS.

All medications, including those brought into a nursing home by a resident, must be administered only in accordance with a written order signed by a health care practitioner licensed to prescribe in Minnesota except that order may be given by telephone provided that the order is done according to part 4658.0455.

#### 4658.1335 DRUGS IN STOCK.

- Subpart 1. Stock supply drugs. Only medications obtainable without prescription may be retained in stock supply and must be kept in the original container.
- Subp. 2. Emergency drug supply. A nursing home must have emergency drug supplies which must be approved by the OAA committee and used when necessary for resident care in emergencies. The contents, maintenance, and usage of the emergency supply must comply with part 6800.6700.
- Subp. 3. Prohibitions. No prescription drug supply for one resident may be used or saved for the use of another resident in the nursing home. The QAA committee must monitor for any use of borrowed medications.

#### 4658.1340 MEDICINE CABINET AND PREPARATION AREA.

- Subpart 1. Storage of drugs. A nursing home must store all drugs in locked compartments under proper temperature controls, and permit only authorized nursing personnel to have access to the keys.
- Subp. 2. Storage of Schedule II drugs. A nursing home must provide separately locked compartments, permanently affixed to the physical plant or medication cart for storage of controlled drugs listed in *Minnesota Statutes*, section 152.02, subdivision 3.

#### 4658.1345 LABELING OF DRUGS.

Drugs used in the nursing home must be labeled in accordance with part 6800.6300.

#### 4658.1350 DISPOSITION OF MEDICATIONS.

Subpart 1. Drugs given to discharged residents.

- A. Medications belonging to a resident must be given to the resident when discharged or transferred and be recorded on the clinical record.
- B. A nursing home must contact the Minnesota Board of Pharmacy or the nursing home's consulting pharmacist about unused portions of controlled substances remaining in the nursing home after death or discharge of a resident for whom they were prescribed. The board or the pharmacy must furnish the necessary instructions and forms, a copy of which must be kept on file in the nursing home for two years.
- C. Unused portions of other prescription drugs remaining in the nursing home after the death or discharge of the resident for whom they were prescribed or any prescriptions discontinued permanently, must be destroyed by nursing staff in the presence of a pharmacist or registered nurse in the nursing home, by flushing them into the sewer system and defacing or destroying the labels from the containers, or must be returned to the pharmacy according to subpart 3. A notation of the destruction listing the date, quantity, name of medication, and prescription number must be recorded on the clinical record.
- Subp. 2. Loss or spillage. When a loss or spillage of a prescribed Schedule II drug occurs, an explanatory notation must be made in a Schedule II record. The notation must be signed by the person responsible for the loss or spillage and by one witness who must also observe the destruction of any remaining contaminated drug by flushing into the sewer system or wiping up the spill.
- Subp. 3. Returned to pharmacy. Drugs and prescribed medications used in nursing homes may be returned to the dispensing pharmacy in accordance with part 6800.2700, subpart 2.

### 4658.1355 MEDICATION REFERENCE BOOK.

A nursing home must maintain at least one current medication reference book. For the purposes of this part, "current" means material published within the previous two years.

### 4658.1360 ADMINISTRATION OF MEDICATIONS BY UNLICENSED PERSONNEL.

Subpart 1. Training. Unlicensed nursing personnel who administer medications in a nursing home must:

- A. have completed a nursing assistant training program approved by the department; and
- B. have completed a standardized medication administration training program for unlicensed personnel in nursing homes which is offered through a Minnesota postsecondary educational institution that includes, at a minimum, instruction on the following:
  - (1) the complete procedure of checking the resident's record:
  - (2) transferring individual doses of the medication from the resident's prescription container:
  - (3) distribution to the resident; and
- (4) recording the date, time, quantity of dosage, and method of administration of all medications, and the signature of the nurse or authorized persons who administered and observed the same.
- Subp. 2. Documentation of training course. A nursing home must keep written documentation verifying completion of the required course by all unlicensed nursing personnel administering medications.
- Subp. 3. Medical administration. A person who completes the required training course may administer medication, whether oral, suppository, eye drops, ear drops, inhalant, or topical, if:
  - A. the medications are regularly scheduled; and
- B. in the case of pro re nata (PRN) medications, the administration of the medication is reported to a registered nurse within a time period that is specified by nursing home policy prior to the administration. Responsibility for delegating the task of medication administration is as specified in the Minnesota Nurse Practice Act, Minnesota Statutes, section 148.171, paragraph (3). Administration of injectable medications must be done as specified in part 4658.1325, subpart 5.

### 4658.1365 PENALTIES FOR MEDICATIONS AND PHARMACY SERVICES.

Penalty assessments for violations of parts 4658.1300 to 4658.1360 are as follows:

- A. part 4658.1305, \$300;
- B. part 4658.1310, \$300;
- C. part 4658.1315, \$300;
- D. part 4658.1320, \$500;
- E. part 4658.1325, subpart 1, \$500;
- F. part 4658.1325, subpart 2, \$300;
- G. part 4658.1325, subpart 3, \$50;
- H. part 4658.1325, subpart 4, \$250;
- I. part 4658.1325, subpart 5, \$500;
- J. part 4658.1325, subpart 6, \$250;
- K. part 4658.1325, subpart 7, \$350;
- L. part 4658.1325, subpart 8, \$300;
- M. part 4658.1330, \$350;
- N. part 4658.1335, \$300;
- O. part 4658.1340, \$300;

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### Proposed Rules =

- P. part 4658.1345, \$300;
- O. part 4658.1350, \$300;
- R. part 4658.1355, \$100;
- S. part 4658.1360, subpart 1, \$300;
- T. part 4658.1360, subpart 2, \$50; and
- U. part 4658.1360, subpart 3, \$350.

### 4660.1700 MEDICATION ROOM, EXISTING AND NEW.

The medicine preparation area (see parts 4655.7730 and 4655.7740) shall be provided in a location which is quiet and convenient for the nursing staff, and separated from all soiled activities. It can be a designated area within the nurses' station or the clean utility room. The area shall contain a work counter, a sink with institutional fittings, a single-service towel dispenser, a refrigerator for medications with a reliable thermometer, and medicine and narcotics cabinets.

### 4660.5030 LAUNDRY EQUIPMENT, EXISTING AND NEW.

The equipment shall be of commercial type and shall consist of one or more washers, extractors, tumblers, or combinations of these, as well as ironers and presses, depending on the size of the facility. The washer installation shall be capable of meeting the operating requirements in parts 4655.8000, subpart 6, and part 4655.8300, subpart 4. The washers and extractors should each have a combined rated capacity of not less than 12 pounds of dry laundry per patient, when operating not more than 40 hours per week. The tumbler and flat work ironer should each have a rated capacity of 15 percent and 70 percent respectively of the washers when operating 40 hours per week.

### **9050.0040 DEFINITIONS.**

[For text of subps 1 to 57, see M.R.]

Subp. 58. Individual care plan. "Individual care plan" means a written plan developed under part 4655.6000 for implementing and coordinating a resident's care and treatment that is developed and maintained by the multidisciplinary staff on the basis of assessment results for each resident. The purpose of the individual care plan is to integrate care, identify and meet the service needs of the resident, set treatment goals and objectives for the resident, and identify responsibilities of the multidisciplinary staff for the resident's care and treatment.

[For text of subps 59 to 120, see M.R.]

### 9050.0210 VOLUNTARY DISCHARGE PROCEDURES.

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

Subp. 2. Responsibilities of facility staff. The board-operated facility staff shall effect a discharge under this part according to items A to E.

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

C. The resident's medications must be disposed of by a pharmacist according to parts 4655.7600 4658.1350 and 4655.7810 to 4655.7860.

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

### 9050,1030 RESIDENT CARE SERVICES.

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

Care services are provided according to Department of Health licensure regulations and the certification requirements of the United States Department of Veterans Affairs. Laws pertaining to resident care services include ehapter chapters 4655 and 4658; Minnesota Statutes, chapters 144 and 144A; United States Department of Veterans Affairs Code M-1, part 1, chapter 3; and United States Department of Veterans Affairs Guide for Inspection of State Veterans Homes Nursing Home Care Standards and Guide for Inspection of State Veterans Homes: Domiciliary Care Standards. United States Department of Veterans Affairs publications shall be available for review at each board-operated facility.

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

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

# Proposed Rules

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

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

### [For text of subps 2 to 15, see M.R.]

Subp. 16. Pharmaceutical services. Pharmaceutical services must be made available through a licensed pharmacist by each board-operated facility to meet the needs of residents according to parts 4655.7790 4658.1300 to 4658.1365 and 4655.7810 to 4655.7860; United States Department of Veterans Affairs Code M-1, part 1, chapter 3; and United States Department of Veterans Affairs Guide for Inspection of State Veterans Homes Nursing Home Care Standards and Guide for Inspection of State Veterans Homes: Domiciliary Care Standards. A licensed pharmacist is defined in part 9050.0040, subpart 92.

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

[For text of subps 17 to 19, see M.R.]

### 9050.1070 RESIDENT RIGHTS AND RESPONSIBILITIES.

[For text of subps 1 to 24, see M.R.]

Subp. 25. **Resident hygiene.** Residents shall maintain a reasonable state of body and oral hygiene based on the resident's physical and mental capabilities. Each resident shall receive nursing care or personal and custodial care and supervision based on individual needs according to parts 4655.6400, 4658.0520, and 4655.6800 4658.0525.

[For text of subps 26 to 39, see M.R.]

### 9505.0390 REHABILITATIVE AND THERAPEUTIC SERVICES.

Subpart 1. **Definitions.** For purposes of parts 9505.0390 to 9505.0392 and 9505.0410 to 9505.0412, the following terms have the meanings given them in this part.

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

I. "Rehabilitative nursing services" means rehabilitative nursing care as specified in part 4655.5900, subparts 2 and 3 4658.0525.

[For text of items J to L, see M.R.]

[For text of subps 2 to 8, see M.R.]

TERM CHANGE. The reference "4655.9342" will be substituted for "4655.9900" wherever it occurs in Minnesota Rules.

**REPEALER.** Minnesota Rules, parts 4655,2410; 4655,2420; 4655,3900; 4655,4900; 4655,5600; 4655,5700; 4655,5800; 4655,5900; 4655,6000; 4655,6100; 4655,6200; 4655,6800; 4655,7600; 4655,7700; 4655,7710; 4655,7720; 4655,7720; 4655,7730; 4655,7740; 4655,7750; 4655,7760; 4655,7770; 4655,7790; 4655,7790; 4655,9800; 4655,9900, are repealed.

# **Board of Water and Soil Resources**

# Proposed Permanent Rules Relating to Comprehensive Local Water Planning

Notice of Intent to Adopt a Rule without a Public Hearing

The Board of Water and Soil Resources ("Board") intends to adopt amendments to a permanent rule without a public hearing following the procedures set forth in the Administrative Procedures Act, Minnesota Statutes, section 14.22 to 14.28. You have 30 days

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### **Proposed Rules**:

to submit written comments on the proposed amendments and may also submit a written request that a hearing be held on the amendments.

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

Douglas J. Thomas, Water Planning Coordinator Minnesota Board of Water and Soil Resources Southbridge Office Building 155 South Wabasha, Suite 104 Saint Paul, Minnesota 55107

Telephone: 612-297-5617 FAX: 612-297-5615

Electronic mail: [doug@bwsr-mn.bwsr.state.mn.us]

Subject of Rule and Statutory Authority. The proposed amendments pertain to the inclusion of added statutory requirements for plan content, and modifications to improve the clarity and content of the rule. The statutory authority to adopt these amendments is *Minnesota Statutes*, 103B.321, Subd. 2. A copy of the proposed amendments is published in the *State Register* and attached to this notice as mailed.

Comments. Comments are encouraged. You have until 4:30 p.m., November 16, 1994, to submit written comment in support of or in opposition to the proposed amendments or any part or subpart of the proposed amendments. Your comments must be in writing and received by the agency contact person by the due date. Your comment should identify the portion of the proposed amendments addressed, the reason for the comment, and any change proposed.

Request for Hearing. In addition to submitting comments, you may also request that a hearing be held on the amendments. Your request for a public hearing must be in writing and received by the agency contact person by 4:30 p.m. on November 16, 1994. Your written request must include your name and address. You are encouraged to identify the portion of the proposed amendments which caused your request, the reason for the request, and any changes you want made to the proposed amendments. If 25 or more persons submit a written request for a hearing, a public hearing will be held unless a sufficient number withdraw their requests in writing. If a public hearing is required, the Board will follow the procedures in *Minnesota Statutes*, sections 14.131 to 14.20.

Modifications. The proposed amendments may be modified as a result of public comment. The modifications must be supported by data and views submitted to the Board and may not result in a substantial change in the proposed amendments as attached and printed in the State Register. If the proposed amendments affect you in any way, you are encouraged to participate in the rule-making process.

Statement of Need and Reasonableness. A Statement of Need and Reasonableness is now available from the agency contact person. This statement describes the need for and reasonableness of each provision of the proposed amendments and identifies the data and information relied upon to support the proposed amendments.

Small Business Considerations. In preparing the proposed amendments to the permanent rule, the Board has considered the requirements of *Minnesota Statutes*, sections 14.115, subdivision 7(2), in regard to the impact on small businesses. The adoption of the proposed amendments relate to the development of plans by local government. Therefore, the Board claims exemption to describing specific impacts to small businesses. If you believe the proposed amendments will affect small businesses you are encouraged to provide comments to the agency contact person in the manner described in the "comments" section of this notice.

Expenditure of Public Money by Local Public Bodies. Minnesota Statutes, section 14.11, subdivision 1, does not apply because adoption of the proposed amendments to the permanent rule will not result in additional spending by local public bodies in excess of \$100,000 per year for the first two years following adoption of the proposed amendments.

Impact on Agricultural Lands. In preparing the proposed amendments to the permanent rule, the Board has considered the requirements of *Minnesota Statutes*, section 14.11, subdivision 2, in regard to the impact on agricultural lands. The proposed amendments to the rule relate to development of comprehensive local water plans. Therefore, the Board claims exemption because adoption of the proposed amendments will not result in direct and substantial adverse impacts to agricultural lands. If you believe the proposed amendments will result in direct and substantial adverse impacts to agricultural lands, you are encouraged to provide comments to the agency contact person in the manner described in the "comments" section of this notice.

Adoption and Review of Rule. If no hearing is required, after the end of the comment period the Board may adopt the proposed amendments. The proposed amendments and supporting documents will be submitted to the Attorney General for review as to legality and form to the extent that form relates to legality. You may request to be notified of the date the proposed amendments are submitted to the Attorney General or be notified of the Attorney General's decision on the proposed amendments. If you wish to be so notified, or if you wish to receive a copy of the adopted amendments, submit your request to the agency contact person listed above.

Dated: 30 September 1994

Ronald D. Harnack Executive Director

# Rules as Proposed

### **9300.0010 DEFINITIONS.**

- Subpart 1. Applicability. The definitions in this part and in *Minnesota Statutes*, section 110B.02 103B.305 apply to parts 9300.0020 to 9300.0210.
- Subp. 2. Geographic indicator. "Geographic indicator" means latitude and longitude; <u>universal transverse mercator coordinates (UTM's)</u>; or township, range, section, and 40-acre parcel.

### [For text of subp 3, see M.R.]

- Subp. 3a. Major watershed. "Major watershed" means the 81 major watershed units delineated by the map "State of Minnesota Watershed Boundaries 1979" as produced by the Minnesota Department of Natural Resources. Office of Planning and Research. Water Policy Planning Program, with funding from the Legislative Commission on Minnesota Resources. This map is incorporated by reference, is not subject to frequent change, and is available through the Minitex interlibrary loan system.
- Subp. 4. Minor watershed unit. "Minor watershed unit" means each of the approximately 5,600 minor watershed units of surface water drainage delineated on the state watershed boundaries map prepared pursuant to the requirements of Laws of Minnesota 1977, chapter 455, section 33, subdivision 7, paragraph (a) and the accompanying data base, and the revisions of that data base. by the map "State of Minnesota Watershed Boundaries 1979."
- Subp. 5. Protected <u>Public</u> waters. "Protected <u>Public</u> waters" means those waters of the state identified as public waters or wetlands under defined in *Minnesota Statutes*, section 105.37, subdivision 14 or 15, or section 105.391, subdivision 1 103G.005, subdivision 15, and inventoried under <u>Minnesota Statutes</u>, section 103G.201.
- Subp. 5a. Public waters wetlands. "Public waters wetlands" means wetlands as defined in Minnesota Statutes, section 103G.005, subdivision 18.
- Subp. 6. State board. "State board" means the Minnesota Board of Water and Soil Resources created by *Minnesota Statutes*, section 105.71, subdivision 1 103B.101.
- Subp. 7. Watershed management organization. "Watershed management organization" has the meaning given in *Minnesota Statutes*, section 473.876, subdivision 9 103B.205, subdivision 13.
- Subp. 8. Watershed units. "Watershed units" has the meaning given in *Minnesota Statutes*, section 110B.02 103B.305, subdivision 10.

### PURPOSE AND PROCEDURE OF PLANNING

### 9300.0020 PURPOSES OF PLANNING PROCESS AND SCOPE OF PLAN.

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

- Subp. 3. Principles. A comprehensive water plan must conform to the following principles:
  - A. Sound hydrologic management of water:
- (1) significant upstream and downstream effects on surface water, and up-gradient and down-gradient effects on ground-water, of actions impacting water and related land resources should be fully considered;
  - (2) natural water storage and retention systems should be preserved and used to the maximum extent practical:
  - (3) water management decisions should be based on sound data and technical analysis;
- (4) interrelationships between surface and groundwater, land and water use, and quality and quantity of water should be recognized; and
  - (5) potential variations in precipitation, both short-term and long-term, should be fully considered.
  - B. Effective environmental protection:

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### Proposed Rules:

- (1) potential cumulative effects of proposed actions should be considered;
- (2) prevention of potential water and related land resources problems should be emphasized;
- (3) the overall quality of the environment should be protected or enhanced; and
- (4) public health and safety should be protected or enhanced.

### C. Efficient management:

- (1) the total benefits of water programs and projects should not exceed the total costs;
- (2) water management programs should be adequately funded to achieve high-priority objectives;
- (3) comprehensive water planning should be coordinated with other related planning programs to fill management gaps and minimize duplication of effort:
  - (4) comprehensive approaches to identified problems and opportunities should be considered; and
  - (5) water conservation practices should be used to the maximum extent practical.

### 9300.0030 PROCEDURES FOR WATER PLANNING.

- Subpart 1. Applicability. A county board that decides to develop or revise a comprehensive water plan under *Minnesota Statutes*, chapter 110B 103B shall use the procedures provided in this part to facilitate public participation and intergovernmental coordination.
- Subp. 2. Resolution to develop or revise plan. A county board deciding to develop or revise a comprehensive water plan must adopt a resolution requiring the development or revision of a plan.
- Subp. 3. Notice of decision to develop or revise plan. Within 30 days after adoption of a resolution requiring the development or revision of a comprehensive water plan, the county shall send notice of its decision to develop or revise a plan to:
  - A. the county boards of contiguous counties;
- B. the governing bodies of counties, watershed districts, and watershed management organizations that have jurisdiction in each watershed unit wholly or partly within the county;
  - C. the governing bodies of all local units of government wholly or partly within the county;
  - D. the regional development commission, if any; and
  - E. the state board.

Upon receipt of the resolution, the state board shall notify each of the state agencies identified in part 9300.0170, subpart 2 and any other agency the state board deems appropriate.

- Subp. 4. Request for local plans and official controls. Within 30 days after adoption of a resolution requiring the development or revision of a comprehensive water plan, the county shall request from all local units of government having jurisdiction within the county the following information:
  - A. any existing water and related land resources plans and official controls; and
- B. any conflicts, problems, or opportunities that those local units of government want examined and addressed in the comprehensive water plan.

The information must be submitted within 60 days of the county board's board request.

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

- Subp. 6. Meetings with local units of government within the county. The county board adopting the resolution shall conduct meetings with local units of government exercising authority in water and related land resources management within the county during the plan preparation and implementation or revision of the plan.
- Subp. 7. Public participation process. The county board developing or revising a comprehensive water plan shall ensure that there is a process for public participation during plan development and or revision as well as implementation of the plan.

[For text of subp 8, see M.R.]

Subp. 9. **Delegation.** The county board is responsible for the comprehensive water plan, but may delegate all or part of the preparation or revision of the comprehensive water plan to a local unit of government, regional development commission, or a resource conservation and development committee that is willing to carry out this assignment. If a county delegates all or part of the comprehensive water plan preparation or revision, it must ensure that public meetings are recorded and that there is a process for public participation in the preparation or revision of the plan.

### CONTENT OF A COMPREHENSIVE WATER PLAN

### 9300.0035 EXECUTIVE SUMMARY.

Each comprehensive water plan must have a section entitled "Executive Summary." The executive summary should outline the purpose of the comprehensive water plan; the membership on any task force or advisory board; a brief history of the planning process; and a summary of the goals, problems, and proposed potential solutions.

# 9300.0040 DATA CONSISTENCY WITH STATE PLANNING AGENCY MINNESOTA PLANNING, LAND MANAGEMENT INFORMATION CENTER GUIDELINES.

Data collected after February 16, 1987 November 15, 1986, for a comprehensive water plan must follow the guidelines for consistency established by the Minnesota State Planning Agency Planning, Land Management Information Center. To assure consistency, this data must include a geographic indicator.

Data must also be coded using recommended standard identifiers, where available. Standard identifiers are: the Minnesota unique well number for wells and the protected public waters inventory identification number for surface waters.

Consistency of map scales is also recommended, where possible. The information required to be presented in map form by parts 9300.0050 and 9300.0070 may be combined on multiple maps or map overlays.

### 9300.0050 PHYSICAL ENVIRONMENT, LAND USE, AND DEVELOPMENT.

Summarizing information about the physical environment enables a county to understand the present conditions affecting water and related land resources. At a minimum, the following information about the county's physical environment, land use, and development must be included in the comprehensive water plan: collected. Information must be included in the plan if it provides the basis for understanding a county's present or future water-related opportunities or problems that are or will be faced by the county.

### A. Precipitation:

- (1) a map or list of the location of precipitation gaging stations in the county;
- (2) a map showing isolines of normal annual total precipitation in inches; and
- (3) a map showing isolines of normal total precipitation in inches for the period May through September.
- B. Geology and water resources:
- (1) a map or description of important aquifer systems aquifers, confining layers, and groundwater flow characteristics to the extent known;
- (2) a description of ground groundwater and surface water interconnections, such as recharge and discharge areas, where they are known;
  - (3) a map or description of groundwater sensitivity to pollution;
  - (4) a map of boundaries and flow directions of major watershed units and minor watershed units; and
- (4) (5) a map of state protected <u>public</u> waters and public drainage ditches, including the location of any existing dams and control structures;
  - (6) a map of public drainage systems; and
  - (7) a map of public dams and control structures.
  - C. Soils:
    - (1) a general soils maps and description of soils infiltration characteristics; and
    - (2) a map of erosion-prone soils.
  - D. Map of original vegetation.
- E. Description of general topographic relief of <u>major</u> watershed units based on United States Geological Survey topographic maps.
  - F. Land use and public utility services:

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- (1) a general map of existing land uses;
- (2) a map showing the areas served by storm sewers, sanitary sewers, and public water systems; and
- (3) a map or list by geographic indicator showing the location of community public water supply intakes and wells, and a map of the wellhead contribution area if known.
  - G. Land ownership:
    - (1) a map showing the ownership of local, state, federal, and Indian tribal lands; and
    - (2) a map showing lands with easements that relate to water resources, where that information is available.

### 9300.0070 SURFACE WATER, GROUND WATER, AND RELATED LAND RESOURCES.

Subpart 1. Applicability. Collecting and summarizing information about the surface water, ground water, and related land resources, enables a county to characterize its water and related land resources, and to identify problems and opportunities. The level of detail should be determined in conjunction with neighboring counties, based on the information available, the extent and use of the resource, and the degree to which problems and opportunities are identified. The information should be listed by watershed unit and ground water systems where appropriate. At a minimum, information collected about existing county resources must include the information required by subparts 2 to 5, when that information is available. Information must be included in the plan if it provides the basis for understanding a county's present or future water-related opportunities or problems that are or will be faced by the county. Information not presented in the plan must be identified and maintained in a data repository in the county.

### Subp. 2. Water quantity information. The following information about water quantity must be included in the plan:

### A. Surface water:

- (1) a description of high, mean, and low flows on streams a map of known surface water gauging stations;
- (2) a discussion of lakes and streams with high or low water problems:
- (3) a list of lakes where the state has established ordinary high water marks;
- (3) (4) a list of permitted withdrawals from lakes and streams, including the location by geographic indicator, source, use, and amounts withdrawn;
  - (4) (5) a list of lakes and streams in the county for which state protected levels or flows have been established;
- (5) (6) a description of known surface water use conflicts, including those caused by ground water pumping that affects surface water; and resulting from water appropriations or natural conditions.
- (6) the implications of surface water quantity information for present and future water and land uses and an assessment of those implications.

### B. Ground water:

- (1) a list of wells covered by state appropriation permits, including the location by geographic indicator, amounts of water appropriated, type of use, and aquifer source;
  - (2) a description of known well interference problems and water use conflicts; and
- (3) a list of state observation wells located in the county including geographic indicator, unique well number, aquifers measured, years of record, and average monthly levels; and.
- (4) the implications of ground water quantity information for present and future water and land uses and an assessment of those implications.

### Subp. 3. Water quality information. The following information about water quality must be included in the plan:

### A. Surface water:

- (1) a map or list of the state water quality management classifications for each stream and lake;
- (2) a summary of available lake and stream water quality monitoring data; examples of these kinds of data are:
  - (a) bacteriological contamination indicators (for example, total coliform counts);
  - (b) inorganic chemicals (for example, phosphorus, nitrogen, and metals);
  - (c) organic chemicals (for example, petroleum constituents, pesticides, and organic solvents);
  - (d) sedimentation (for example, suspended solids);
  - (e) dissolved oxygen; and
  - (f) excessive growth or deficiency of aquatic plants;

- (3) a summary of information from informal sources relating to surface water quality, such as fish kills; and.
- (4) the implications of surface water quality information for present and future water and land use, and an assessment of those implications.

#### B. Ground water:

- (1) a summary of available water quality data, including routinely monitored sites. Examples of data are:
  - (a) (1) bacteriological contamination indicators (for example, total coliform counts);
  - (b) (2) inorganic chemicals (for example, nitrate/nitrite and metals concentrations); and
  - (e) (3) organic chemicals (for example, organic solvents, petroleum constituents, and pesticides).
- (2) The implications of ground water quality information for present and future water and land uses with emphasis on those with potential health-related impacts and an assessment of those implications.

Where possible, the information required in this item should be presented by aquifer groundwater system and geographic area.

- Subp. 4. Information on special land uses and conditions that influence water quality and quantity. The following information about special land uses and conditions must be included in the plan:
  - A. Eroding lands:
    - (1) a description or map by major watershed unit of areas where eroding lands are causing sedimentation problems:
- (2) water quality and quantity implications for watercourses, water basins, ditches, and wetlands of sedimentation and an assessment of those implications; and
  - (3) an assessment by watershed unit of the effects of land use and cover on quantity and quality of runoff.
  - B. Irrigation:
    - (1) a map or list by geographic indicator of irrigated acreage; and,
- (2) for any county containing more than 1,000 acres of irrigated land in any one township, the implications of irrigation for present and future land and water use and an assessment of those implications.
  - C. Drainage:
    - (1) a map showing the location and type of drainage systems in the county:
- (2) a table listing the public drainage systems in the county and the amounts expended, by year, for repair work on each system; and
  - (2) an assessment of any significant water quality and quantity effects due to public or private ditch systems; and
- (3) a summary of any known water quality and quantity information from engineering reports <u>prepared for ditch establishments</u>, <u>improvements</u>, <u>and repairs in the county</u> and <u>any federal</u>, <u>state</u>, <u>or local</u> modeling efforts on ditches in the county.
  - D. Pollutant sources:
- (1) a map or list by geographic indicator of known closed and open sanitary landfills, closed and operating open dumps, and Minnesota Superfund hazardous waste sites and a summary of available water quality information relating to these sites;
- (2) a map or list by geographic indicator of feedlots, abandoned wells not sealed in accordance with state statutes and rules, underground storage tank sites, and permitted wastewater discharges under chapter 7001 and parts 7023.9000 to 7023.9050, and a summary of available water quality information relating to these sites;
  - (3) a list by geographic indicator of facilities that have hazardous waste generator identification numbers; and,
- (4) the implications of pollutant sources for present and future water and land uses and an assessment of those implications.
  - E. Special geologic conditions:
- (1) a map of known geologic conditions, such as karst areas, buried valleys, or sand plains that may pose concerns relating to water quality or quantity; and.

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## Proposed Rules =

- (2) the implications of special conditions for present and future water and land uses and an assessment of those implications:
- Subp. 5. Information on related land resources. The following information about related land resources shall be included in the plan:

#### A. Wetlands:

- (1) maps of wetlands identified under the National Wetlands Inventory, where available;
- (2) a summary of plans for wetlands with controlled outlets, such as plans for draw downs;
- (3) a description of <u>wetland regulations affecting county waters including</u> the United States Corps of Engineers, Section 404 permit <u>program</u>, the <u>Swampbuster Provisions of the United States Department of Agriculture Food Security Act, the Minnesota Wetland Conservation Act, and the Department of Natural Resources Protected Waters Program requirements affecting county waters; and;</u>
- (4) the implications of a discussion of the values of wetlands with consideration for present and future water uses with special consideration for water quality, flood attenuation, wildlife, and recreation, and an assessment of those implications; and
  - (5) delineation of high priority areas for wetland preservation, enhancements, restoration, and establishment.

### B. Floodplains:

- (1) a list of current floodplain maps and studies which have been adopted for regulatory purposes including any supplemental maps and studies to Federal Emergency Management Agency (FEMA) studies in the county including incorporated areas:
- (2) a description of floodplain regulations including the Department of Natural Resources Floodplain Management Program; the Federal Emergency Management Agency, and watershed districts if applicable;
- (3) a map showing those areas delineated as floodplain by existing local ordinances or in proposed ordinances that have a due date established by the Minnesota Department of Natural Resources or the Federal Emergency Management Agency;
  - (2) (4) a map of areas with known flooding problems;
  - (3) (5) an estimate of average annual flood damages, if available; and
  - (4) an assessment of the adequacy and enforcement of existing floodplain ordinances.
- (6) a description of all potential Department of Natural Resources flood damage reduction grant projects in the county including incorporated areas.

### C. Shorelands:

- (1) a list of local units of government with approved shoreland ordinances;
- (2) a list of protected public waters, and their shoreland classifications under Minnesota Statutes, section 105.485 sections 103F.201 to 103F.221; and
- (3) an assessment of the adequacy and enforcement of the shoreland ordinances a description of the shoreland development act, Minnesota Statutes, sections 103F.201 to 103F.221.

### D. Water-based recreation lands:

- (1) a map and description of water oriented recreational resources <u>including</u> those listed in the State Comprehensive Outdoor Recreation Plan;
  - (2) a map of public water accesses;
- (3) a map and description of state or federally designated wild and scenic rivers and state designated canoe and boating routes; and.
  - (4) an assessment of the adequacy of water-based recreational lands for present and future use.

### E. Fish and wildlife habitat:

- (1) a map and description of any state designated wildlife management areas and any lakes with state designated classifications for game or fish management within the county;
  - (2) a map and description of any state designated trout lakes or trout streams within the county;
- (3) a list and description of the state ecological and management classifications and use attainability for lakes and streams, where available:

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- (4) a list and description of the conclusions and recommendations of biological surveys or reconnaissance studies, where available; and
  - (5) a description of state management plans for fish lakes, streams, and wildlife areas, where available; and,
  - (6) an assessment of the adequacy of fish and wildlife habitat for present and future use.
  - F. Unique features and scenic areas:
- (1) a map or description of unique features and scenic areas with relationships to water including state designated natural and scientific areas, areas containing county, state, and federal rare and endangered species, and other features such as waterfalls, springs, and historic mills; and
- (2) the implications of unique features and scenic areas for present and future water and land use, and an assessment of those implications.

# <u>9300.0085</u> ASSESSMENTS AND IMPACTS OF EXPECTED CHANGES TO SURFACE WATER, GROUNDWATER, AND RELATED LAND RESOURCES.

- Subpart 1. Applicability. Assessing information about the surface water, groundwater, and related land resources, enables a county to characterize its water and related land resources, and to identify problems and opportunities. By identifying expected changes to surface water, groundwater, and related land resources, a county can assess the impact of expected changes to its water resources. Assessments and expected changes should be categorized by major watershed units and groundwater systems where appropriate. At a minimum, assessments and expected changes are required by subparts 2 to 5.
- Subp. 2. Surface water quality and quantity information. The following assessments, and expected changes about water quality and quantity must be included in the plan:

### A. Surface water quality:

- (1) the implications of surface water quality information for present and future water and land use, and an assessment of those implications;
- (2) expected changes to the physical environment, land use, and development identified under part 9300.0050 which influence surface water quality:
- (3) special land and water uses or conditions, and trends within or without the county that might effect a county's surface water quality; and
  - (4) the influence of existing programs on surface water quality.

### B. Surface water quantity:

- (1) the implications of surface water quantity information for present and future water and land uses and an assessment of those implications;
- (2) expected changes to the physical environment, land use, and development identified under part 9300.0050 which influence surface water quantity;
- (3) special land and water uses or conditions, and trends within or without the county that might effect a county's surface water quantity; and
  - (4) the influence of existing programs on surface water quantity.
- Subp. 3. Groundwater quality and quantity information. The following assessments and expected changes about groundwater quality must be included in the plan.

### A. Groundwater quality:

- (1) the implications of groundwater quality information for present and future water and land uses with emphasis on those with potential health-related impacts and an assessment of those implications;
- (2) expected changes to the physical environment, land use, and development identified under part 9300.0050 which influence groundwater quality;

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- (3) special land and water uses or conditions, and trends within or without the county that might effect a county's ground-water quality; and
  - (4) the influence of existing programs on groundwater quality.

Where possible, the information required in this item should be presented by aquifer system and geographic area.

### B. Groundwater quantity:

- (1) the implications of groundwater quantity information for present and future water and land uses and an assessment of those implications;
- (2) expected changes to the physical environment, land use, and development identified under part 9300.0050 which influence groundwater quantity;
- (3) special land and water uses or conditions, and trends within or without the county that might effect a county's ground-water quantity; and
  - (4) the influence of existing programs on groundwater quantity.
- Subp. 4. Special land uses and conditions that influence quality and quantity. The following assessments, and expected changes about special land uses and conditions that influence water quality and quantity must be included in the plan:

### A. Eroding lands:

- (1) water quality and quantity implications for watercourses, water basins, ditches, and wetlands from sedimentation and an assessment of those implications;
  - (2) an assessment by major watershed unit on the effects of land use and cover on quantity and quality of runoff:
- (3) expected changes to the physical environment, land use, and development identified under part 9300.0050 which influence erosion and sedimentation:
- (4) special land and water uses or conditions, and trends within and without the county that might effect erosion and sedimentation; and
  - (5) the influence of existing programs on erosion and sedimentation.

### B. Irrigation:

- (1) for any county containing more than 1,000 acres of irrigated land in any one township, the implications of irrigation for present and future land and water use and an assessment of those implications;
- (2) expected changes to the physical environment, land use, and development identified under part 9300.0050 which influence irrigation;
  - (3) special land and water uses or conditions, and trends within and without the county that might affect irrigation; and
  - (4) the influence of existing programs on irrigation.

### C. Drainage:

- (1) an assessment of any significant water quality and quantity effects due to public and private ditch and tile systems:
- (2) expected changes to the physical environment, land use, and development identified under part 9300.0050 which influence drainage;
  - (3) special land and water uses or conditions, and trends within and without the county that might affect drainage; and
  - (4) the influence of existing programs on drainage.

#### D. Pollutant sources:

- (1) the implications of pollutant sources for present and future water and land uses and an assessment of those implications;
- (2) expected changes to the physical environment, land use, and development identified under part 9300.0050 which influence pollutant sources:
- (3) special land and water uses or conditions, and trends within and without the county that might affect pollutant sources; and
  - (4) the influence of existing programs on pollutant sources.
  - E. Special geologic conditions:

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- (1) the implications of special geologic conditions for present and future water and land uses and an assessment of those implications:
- (2) expected changes to the physical environment, land use, and development identified under part 9300,0050 which influence special geologic conditions:
- (3) special land and water uses or conditions, and trends within or without the county that might effect special geologic conditions; and
  - (4) the influence of existing programs on special geologic conditions.
- Subp. 5. Related land resources. The following assessments, and expected changes about related land resources must be included in the plan:

#### A. Wetlands:

- (1) the implications of wetlands for present and future water and land uses, with special consideration for water quality, flood attenuation, wildlife, and recreation, and an assessment of those implications:
- (2) expected changes to the physical environment, land use, and development identified under part 9300.0050 which influence wetlands;
  - (3) special land and water uses or conditions, and trends within and without the county that might affect wetlands; and
  - (4) the influence of existing programs on wetlands.

### B. Floodplains:

- (1) an assessment of the adequacy of the data used for regulatory purposes and enforcement of existing floodplain ordinances;
- (2) expected changes to the physical environment, land use, and development identified under part 9300,0050 which influence floodplains;
  - (3) special land and water uses or conditions, and trends within and without the county that might affect floodplains; and
  - (4) the influence of existing programs on floodplains.

### C. Shorelands:

- (1) an assessment of the adequacy and enforcement of the existing shoreland ordinances:
- (2) expected changes to the physical environment, land use, and development identified under part 9300.0050 which influence shorelands;
  - (3) special land and water uses or conditions, and trends within or without the county that might effect shorelands; and
  - (4) the influence of existing programs on shorelands.

### D. Water-based recreation lands:

- (1) an assessment of the adequacy of water-based recreational lands for present and future use;
- (2) expected changes to the physical environment, land use, and development identified under part 9300.0050 which influence water-based recreation lands;
- (3) special land and water uses or conditions, and trends within or without the county that might effect water-based recreation lands; and
  - (4) the influence of existing programs on water-based recreation lands.

### E. Fish and wildlife habitat:

- (1) an assessment of the adequacy of fish and wildlife habitat for present and future use:
- (2) expected changes to the physical environment, land use, and development identified under part 9300.0050 which influence fish and wildlife habitat;

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- (3) special land and water uses or conditions, and trends within or without the county that might effect fish and wildlife habitat; and
  - (4) the influence of existing programs on fish and wildlife habitat.
  - F. Unique features and scenic areas:
- (1) the implications of unique features and scenic areas for present and future water and land use, and an assessment of those implications;
- (2) expected changes to the physical environment, land use, and development identified under part 9300.0050 which influence unique features and scenic areas;
- (3) special land and water uses or conditions, and trends within or without the county that might effect unique features and scenic areas; and
  - (4) the influence of existing programs on unique features and scenic areas.

#### 9300.0090 PROBLEMS AND OPPORTUNITIES.

- Subpart 1. **Purpose.** Identification of problems and opportunities is needed to guide the county in developing its goals, objectives, policies, and plan of action.
- Subp. 2. Description of problems and opportunities. For each <u>major</u> watershed unit and ground water system, where appropriate, the comprehensive water plan must identify key issues relating to water quality, quantity, special land uses and conditions, and related land resources. The plan must discuss assets or opportunities, as well as problems associated with each issue. <u>The plan must also address those issues which have been identified as having regional significance or importance.</u>
- Subp. 3. Determining issues, problems, and opportunities. A county must determine water related issues, problems, and opportunities in its comprehensive water plan. At a minimum, a county must gather information about water related problems and opportunities in the following manner:
  - A. investigate those problems and opportunities disclosed at public meetings and in written comments;
  - B. investigate those problems and opportunities that affected local units of government want examined;
- C. assess information gathered investigate those problems and opportunities derived from assessments of data under parts 9300.0050 to 9300.0080 part 9300.0085; and
- D. assess the status and adequacy of official controls, plans, and other local, state, or federal programs concerning water and related land uses.

### 9300.0100 ESTABLISHMENT OF COUNTY GOALS AND POLICIES.

The comprehensive water plan must state goals <u>and corresponding policies</u> for present and future water and land uses to set the framework for determining plan objectives and related actions.

### 9300.0110 OBJECTIVES AND PLAN OF ACTION.

The objectives and plan of action should be tailored to address the problems and opportunities previously identified in the comprehensive water plan. A comprehensive water plan must state measurable objectives and a plan of action for each <u>major</u> watershed unit and ground water system, where appropriate, for each of the following categories:

- A. opportunities and problems in surface water and ground water quality and quantity identified pursuant to part 9300.0090;
- B. significant special land uses and conditions that influence water quantity and quality based on opportunities and problems identified pursuant to part 9300.0090; and
  - C. related land resources opportunities and problems identified pursuant to part 9300.0090.

### 9300.0125 IMPLEMENTATION PROGRAM.

- Subpart 1. Program, standards, and schedule required. The comprehensive water plan must state how and when the plan will be implemented to meet the objectives and carry out the actions described in parts 9300.0110 and 9300.0120, and establish standards for stormwater runoff. Components and schedules that are described previously do not have to be repeated.
- Subp. 2. Program. An implementation program may include data collection programs, educational programs, capital improvement projects, project feasibility studies, enforcement strategies, amendments to existing official controls, adoption of new official controls, and other actions. If the county considers no actions are necessary to address identified problems or opportunities it must explain why actions are not needed. Staff and financial resources available or needed to carry out the comprehensive water plan must be stated.
  - Subp. 3. Stormwater and drainage design performance standards. Each plan must contain minimum standards for the design

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of new stormwater conveyance, ponding, and treatment systems consistent with the overall goals of the comprehensive water plan and consistent with Minnesota Statutes, section 103B.3365, subdivision 4. The performance standards must provide for:

- A. the establishment of maximum permissible runoff rates for selected design storms based on considerations such as existing and future flood levels and expected increases in runoff volume with respect to impacts on downstream channels and adjacent properties:
  - B. reducing the impacts of flooding on natural resources and personal and real property;
- C. the establishment of design criteria for stormwater outlet structures to address floatable pollutants and to provide access for maintenance and repair:
  - D. the methodology of pond design for nutrient entrapment consistent with the watershed goals identified in the plan; and
- E. compliance with pollutant loading for specific watersheds consistent with regional and statewide plans in consideration of federal and state water quality standards.
- Subp. 4. Schedule. The implementation schedule must state the time in which each of the actions contained in the implementation program will be taken.
- Subp. 5. Roles and responsibilities of local units of government. The comprehensive water plan must include a discussion of the roles and responsibility of each local unit of government in the county including, but not limited to, soil and water conservation districts, watershed districts, cities, and townships. In addition to general roles and responsibilities of the various local units of government in plan implementation, the county must specifically address the roles and responsibilities of local units of government in the implementation of a local water resources protection and management program under Minnesota Statutes, section 103B,3365.
- Subp. 6. Agreements with local units of government. If a county board has made any agreement for the implementation of a comprehensive water plan or portions of a plan with a local unit of government within the county, that local unit and its delegated responsibility must be specified, and a description of how and when the implementation will occur must be included.
- Subp. 7. Capital improvement program. If capital improvement projects are proposed to implement a comprehensive water plan, the projects must be described in the plan. The description of a proposed capital improvement project must include the following information:
  - A. the physical components of the project, including their approximate size, configuration, and location;
  - B. the purposes of the project and their relationship to the objectives in the comprehensive water plan;
  - C. the proposed schedule for project construction;
  - D. the expected federal, state, and local costs;
  - E. the types of financing proposed, such as special assessments, ad valorem taxes, or grants; and
  - F. the sources of local financing proposed for the project, such as subcounty, countywide, or multicounty.

### 9300.0140 LOCAL REVIEW AND POTENTIAL CONFLICTS.

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

- Subp. 2. **Identification of conflicts.** Conflicts or potential conflicts that occur between the comprehensive water plan and the existing or proposed plans of local units of government must be identified either during the <del>planning</del> plan development or revision process or during review of the comprehensive water plan by other local units of government.
- Subp. 3. **During plan preparation or <u>revision</u>**. Local units of government must notify the county board intending to develop <u>or revise</u> a comprehensive water plan of any conflicts that those local units want examined and addressed in the comprehensive water plan in accordance with part 9300.0030, subpart 4.
  - Subp. 4. During plan review.
- A. Before it is submitted to the state board for review, the comprehensive water plan must be submitted for review and comment to:
  - (1) all local units of government wholly or partly within the county preparing or revising the plan;

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- (2) all applicable regional development commissions;
- (3) all contiguous counties and water management organizations; and
- (4) other counties, watershed districts, intercounty joint powers boards, and watershed management organizations within the same watershed unit or ground water system as the county preparing or revising the plan that may be affected by the plan.
- B. In their comments on the plan, other local units of government must identify and describe any conflicts they have with the plan not already identified in the plan. The local unit must state its position on any relevant conflict identified by the county for consideration by the state board during the board's review of the plan.
  - C. Comments shall be submitted as required by Minnesota Statutes, section 110B.08 103B.315, subdivision 3.

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

# REVIEW OF COMPREHENSIVE WATER PLANS BY STATE AGENCIES AND THE STATE BOARD 9300.0165 PRELIMINARY STATE REVIEW.

- Subpart 1. Submittal to state agencies. At the same time that a county submits its plan to other local government units it must also submit the plan to the state board, the departments of agriculture, health, and natural resources, the pollution control agency, and the Minnesota geological survey for preliminary review,
- Subp. 2. Review criteria. In addition to review for consistency with applicable state statutes and rules, each state agency receiving a comprehensive plan for preliminary state review may also provide a qualitative review of that plan.
- <u>Subp. 3.</u> Review schedule. Within 45 days of receipt of a comprehensive water plan from a county, a state agency should submit a letter to the county and the board identifying its comments.

### 9300.0170 FINAL STATE REVIEW.

Subpart 1. Submittal to state board. After conducting the public hearing required by Minnesota Statutes, section 110B.08 103B.315, subdivision 4, the county board must submit to the state board ten copies of its comprehensive water plan, all written comments received on the plan, a transcript or tape recording of the public hearing held on the plan, and a summary of changes made to the plan as a result of the local review process.

In order to determine whether a comprehensive water plan is consistent with state law, the state board shall make the determinations in the manner provided by subparts 2, 3, and 4.

- Subp. 2. State board consultation with agencies. Upon receipt of a comprehensive water plan and supporting documents, the state board shall transmit a copy of the plan to the departments of agriculture, health, and natural resources; the pollution control agency; the state planning agency; the environmental quality board; and any other state agency the state board believes could assist it in determining whether the plan is consistent with state law. An agency receiving a copy of the plan shall determine whether any portion of the plan is contrary to state law. Within 45 days of receipt of a comprehensive water plan from the state board, a state agency must submit a letter to the state board identifying the portions of the plan that the agency has determined to be inconsistent with state law.
- Subp. 3. State board determination of consistency with other plans. In determining whether a comprehensive water plan is consistent with state law Minnesota Statutes, section 103B.301, the state board shall determine whether the plan is consistent with the plan of another county or counties wholly or partially within affected watershed units or ground water systems, as required by Minnesota Statutes, section 110B.04 103B.311, subdivision 4, clause (4), that has already been approved by the state board or that has already been submitted under subpart 1. To determine consistency, the state board shall consider the compatibility of the plans' goals, objectives and related actions, and implementation programs. If the state board determines that the unapproved or subsequently submitted plan would not impede achievement of the goals, objectives, related actions, and implementation programs of the approved or previously submitted plan or plans, the board shall find the plan consistent with the plan or plans.
- Subp. 4. **Principles for review.** To determine whether a comprehensive water plan conforms to the requirements of *Minnesota Statutes*, section 110B.04 103B.311, subdivision 4, clause (3), the state board shall determine whether the plan conforms to the following principles: described in part 9300.0020, subpart 3.
  - A. Sound hydrologic management of water:
- (1) significant upstream and downstream effects on surface water, and up-gradient and down-gradient effects on ground water, of actions impacting water and related land resources should be fully considered;
  - (2) natural water storage and retention systems should be preserved and used to the maximum extent practical;
  - (3) water management decisions should be based on sound data and technical analysis;

- (4) interrelationships between surface and ground water, land and water use, and quality and quantity of water should be recognized; and
  - (5) potential variations in precipitation, both short term and long-term, should be fully considered.
  - B. Effective environmental protection:
    - (1) potential cumulative effects of proposed actions should be considered:
    - (2) prevention of potential water and related land resources problems should be emphasized;
    - (3) the overall quality of the environment should be protected or enhanced; and
    - (4) public health and safety should be protected or enhanced.

### C. Efficient management:

- (1) the total benefits of water programs and projects should exceed the total costs;
- (2) water management programs should be adequately funded to achieve high-priority objectives;
- (3) comprehensive water planning should be coordinated with other related planning programs to fill management gaps and minimize duplication of effort;
  - (4) comprehensive approaches to identified problems and opportunities should be considered; and
  - (5) water conservation practices should be used to the maximum extent practical.
- Subp. 5. State board decision. Within 90 days after the filing of a comprehensive water plan and supporting documents with the state board, the state board shall approve or disapprove a comprehensive water plan and provide the county board notice of the approval or disapproval of the plan. The state board shall approve a plan only if it determines that the plan is consistent with state law Minnesota Statutes, section 103B.301. If a plan is disapproved, the state board shall as part of its notice of disapproval provide the county board with a written statement of its reasons for disapproval.

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

### IMPLEMENTING AN APPROVED COMPREHENSIVE WATER PLAN

### 9300.0180 AMENDMENT OF LOCAL PLANS AND OFFICIAL CONTROLS.

Subpart 1. Notification after plan adoption. After a county board has adopted an approved comprehensive water plan or amendments to the plan, the county board that adopted the plan shall notify local units of government within the county of the adoption of the plan or amendments. Within 90 days of the notification, local units of government must submit existing water and related land resources plans and official controls to the county board for review.

[For text of subps 2 to 4, see M.R.]

### 9300.0190 AMENDMENT OF A COMPREHENSIVE WATER PLAN.

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

- Subp. 3. **Procedure and criteria.** Amendments to a comprehensive water plan shall be reviewed in the same manner, and are subject to the same criteria for approval, as an initial comprehensive water plan, except when the proposed amendments constitute minor amendments and:
- A. the county has held a public hearing to explain the amendments and published a legal notice of the hearing twice, at least seven days and 14 days before the date of the hearing:
- B. the county has sent copies of the amendments to the affected local units of government, state board, and state review agencies for review and comment:
- C. the state board has either agreed that the amendments are minor or failed to act within 45 days of receipt of the amendments.
- Subp. 4. Form of amendments. Unless the entire document is reprinted, all amendments adopted by the county must be printed in the form of replacement pages for the plan, each page of which must:

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- A. on draft amendments being considered, show deleted text as stricken and new text as underlined:
- B. be renumbered as appropriate; and
- C. include the effective date of the amendment.
- Subp. 5. Distribution of amendments. Each county must maintain a distribution list of agencies and individuals who received a copy of the plan and shall distribute copies of amendments within 30 days of adoption. All counties should consider sending drafts of proposed amendments to all plan review authorities to seek their comments before establishing a hearing date or commencing the formal review process.

#### **RESOLUTION OF DISPUTES**

### 9300.0200 INFORMAL RESOLUTION OF DISPUTES.

Subpart 1. Applicability. A county preparing or that has prepared or revised a comprehensive water plan or another local unit of government may use the procedures provided in this part to:

- A. determine the meaning of any provision of parts 9300.0010 to 9300.0210 and Minnesota Statutes, chapter 110B 103B, or parts 9300.0010 to 9300.0210;
  - B. resolve any conflict between two comprehensive water plans;
  - C. resolve any conflict between a comprehensive water plan and any local plans or official controls; or
  - D. settle any other dispute relating to a comprehensive water plan.

Use of the procedure provided in this part is without prejudice to any party's use of the procedure provided for in *Minnesota Statutes*, section 110B.25, subdivision 2 103B.345, and part 9300.0210.

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

Subp. 3. Response and meeting. When the chair obtains the response of other involved local units of government or has made reasonable efforts to obtain it, the chair may attempt to resolve the issue informally or shall set a meeting between the chair of the dispute resolution committee and the involved local units of government and adequately inform those units in writing of the issues, time, date, and place of the meeting. At the meeting, a local unit of government may be represented by any person or persons of its choosing, subject to control by the chair dispute resolution committee, and the chair dispute resolution committee may consider any relevant evidence or argument by a local unit of government that any reasonable person would rely upon to resolve the issues in question. The decision of the chair dispute resolution committee may be announced at the hearing meeting or be made later but in either case shall be reduced to writing and a copy sent to all interested local units of government. The decision of the chair dispute resolution committee is effective 60 days following the decision of the chair dispute resolution committee unless a petition is filed within that time pursuant to Minnesota Statutes, section 110B.25 103B.345, subdivision 3, for a contested case hearing under that section.

### 9300.0210 FORMAL RESOLUTION OF DISPUTES.

- Subpart 1. Applicability. A county or other local unit of government may petition for a contested case hearing by satisfying the requirements of this part and Minnesota Statutes, section 110B.25 103B.345, subdivisions 2 and 3, and this part.
- Subp. 2. Petition for hearing. A petition for a hearing shall be made in writing and addressed to the state board. The petition shall contain:
- A. the name of the local unit of government petitioning and the names, addresses, and phone numbers of the officers of the local unit of government or other person representing the local unit of government for the purposes of the petition;
  - B. a request for a hearing;
  - C. a statement of the allegations or issues to be determined by the hearing; and
  - D. proof of service of a copy of the petition on all other involved local units of government.
- Subp. 3. Filing of petition. A petition is considered filed with the state board when it is received by the <u>state</u> board. Upon receipt of the petition, the <u>state</u> board shall acknowledge its receipt in writing.

[For text of subps 4 to 6, see M.R.]

REPEALER. Minnesota Rules, parts 9300.0080; and 9300.0160, are repealed.

# **Emergency Rules**

# **Emergency Rules**

### **Proposed Emergency Rules**

According to Minn. Stat. of 1984, §§14.29-14.30, state agencies may propose adoption of emergency rules if: 1) expressly required; 2) authorized by statute; or 3) if the manner permitted by a directive (given by statute, federal law or court order) does not allow for compliance with sections 14.14-14.28. The agency must, however, publish a notice of intent to adopt emergency rules, along with the rules themselves, in the State Register. The notice must advise the public:

- 1) that a free copy of the proposed emergency rule is available upon request from the agency;
- 2) that notice of the date that the rule is submitted to the attorney general will be mailed to persons requesting notification;
- 3) that the public has at least 25 days after publication of the proposed emergency rule to submit data and views in writing; and
- 4) that the emergency rule may be modified if the data and views submitted support such modification.

#### Adopted Emergency Rules

Emergency rules take effect five working days after approval by the attorney general, and after compliance with Minn. Stat. §§14.29-14.365. As soon as possible, emergency rules are published in the *State Register* in the manner provided for in section 14.18.

Emergency rules are effective for the period stated in the notice of intent to adopt emergency rules. This may not exceed 180 days.

#### Continued/Extended Emergency Rules

Adopted emergency rules may be continued in effect (extended) for an additional 180 days. To do this, the agency must give notice by: 1) publishing notice in the State Register: and 2) mailing the same notice to all persons who requested notification on rulemaking. No emergency rule may remain in effect 361 days after its original effective date. At that point, permanent rules adopted according to Minn. Stat. §§14.14-14.28 supercede emergency rules.

# **Department of Health**

# Proposed Repeal of Emergency Rules Relating to Health; Data Reporting

### Notice of Intent to Repeal Rules without a Public Hearing

Introduction. The Minnesota Department of Health intends to repeal emergency rules without a public hearing following the procedures set forth in the Administrative Procedure Act, *Minnesota Statutes*, sections 14.22 to 14.28. You have 30 days to submit written comments on the proposed repeal of rules and may also submit a written request that a hearing be held on the proposed repeal of rules.

Agency Contact Person. Comments or questions on the proposed repeal of rules and written requests for a public hearing on the proposed repeal of rules must be submitted to: Jim Golden, Minnesota Department of Health, Health Care Delivery Policy Division, P.O. Box 64975, 121 East Seventh Place, Suite 400 St. Paul, Minnesota 55164-0975, 612/282-5640. TDD users may call the Minnesota Department of Health at 612/623-5522.

Subject of Rules and Statutory Authority. The rules that the Department is proposing to repeal require group purchasers to submit all adjudicated claims to the Department on a quarterly basis. The statutory authority to repeal the rules is *Minnesota Statutes*, section 62J.35, subdivision 5. A copy of the proposed repeal of rules is published in the *State Register* and attached to this notice as mailed.

Comments. You have until 4:30 p.m., Wednesday, November 16, 1994, to submit written comment in support of or in opposition to the proposed repeal of rules. Your comment must be in writing and received by Jim Golden at the address listed above by the due date. Comment is encouraged. Your comment should identify the reason for the comment and any change proposed.

Request for a Hearing. In addition to submitting comments, you may also request that a hearing be held on the proposed repeal of rules. Your request for a public hearing must be in writing and must be received by Jim Golden at the address listed above by 4:30 p.m. on November 16, 1994. Your written request for a public hearing must include your name and address. You are encouraged to identify the reason for the request and any changes you want made to the proposed repeal of rules. If 25 or more persons submit a written request for a hearing, a public hearing will be held unless a sufficient number withdraw their requests in writing. If a public hearing is required, the Department will follow the procedures in *Minnesota Statutes*, sections 14.131 to 14.20.

Modifications. The proposed repeal of rules may be modified as a result of public comment. The modifications must be supported by data and views submitted to the Department and may not result in a substantial change in the proposed repeal of rules as attached and printed in the State Register. If the proposed repeal of rules affects you in any way, you are encouraged to participate in the rulemaking process.

Statement of Need and Reasonableness. A Statement of Need and Reasonableness is now available. This statement describes the need for and reasonableness of the proposed repeal of rules and identifies the data and information relied upon to support the

### Official Notices

proposed repeal of rules. A free copy of the statement may be obtained from Jim Golden at the address or telephone number listed above.

Small Business Considerations. The Department has considered the requirements of *Minnesota Statutes*, section 14.115, in regard to the impact of the proposed repeal of rules on small businesses. The repeal of the rules will remove any burden of the rules on all businesses, including small businesses.

Expenditure of Public Money by Local Public Bodies. *Minnesota Statutes*, section 14.11, subdivision 1, does not apply because repeal of these rules will not result in additional spending by local public bodies in excess of \$100,000 per year for the first two years following repeal of the rules.

Impact on Agriculture Lands. Minnesota Statutes, section 14.11, subdivision 2, does not apply because repeal of these rules will not have an impact on agricultural land.

Departmental Charges. Minnesota Statutes, section 16A.1285, subdivisions 4 and 5, do not apply because the repeal of rules does not establish or adjust departmental charges.

Repeal and Review of Rules. If no hearing is required, after the end of the comment period the Department may repeal the rules. The rules and supporting documents will then be submitted to the Attorney General for review as to legality and form to the extent form relates to legality. You may request to be notified of the date the rules are submitted to the Attorney General or be notified of the Attorney General's decision on the rules. If you wish to be so notified, or who wish to receive a copy of the repealed rules, submit your request in writing to Jim Golden at the address listed above.

Dated: 3 October 1994

Mary Jo O'Brien, Commissioner Department of Health

### **Rules as Proposed**

REPEALER. <u>Minnesota Rules</u>, parts 4653.0100 [Emergency]; 4653.0110 [Emergency]; 4653.0120 [Emergency]; 4653.0130 [Emergency]; 4653.0140 [Emergency]; 4653.0150 [Emergency]; 4653.0160 [Emergency]; and 4653.0170 [Emergency], published at 18 SR 1575 and continued at 18 SR 2553, are repealed.

# Official Notices =

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

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

# **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 November 2, 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 190 acres of farmland located in Section 29, Gales Township, Redwood County, Minnesota on behalf of Thomas & Shannon Hook, a married couple (the Borrowers). The maximum aggregate face amount of the proposed bond issue is \$170,000.00. 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: 5 October 1994

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 November 2, 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 165 acres of farmland located in Section 2, Crooks Township, Renville County, Minnesota on behalf of Gary L. & Teresa L. Seehusen, a married couple (the Borrowers). The maximum aggregate face amount of the proposed bond issue is \$209,500. 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: 5 October 1994

LaVonne Nicolai RFA Executive Director

# **Minnesota Comprehensive Health Association**

### Notice of Informational Meetings Relating to Writing Carrier Contract for the Period 1/1/95-12/31/97

NOTICE IS HEREBY GIVEN that the executive director of the Minnesota Comprehensive Health Association (MCHA) and a representative of the Minnesota Department of Commerce will hold five meetings throughout Minnesota to apprise MCHA enrollees of changes relating to the writing carrier contract between MCHA and Blue Cross and Blue Shield of Minnesota (BCBSM) for the period 1/1/95-12/31/97. Contract negotiations are currently underway. The writing carrier contract must be approved by the Minnesota Department of Commerce before implementation.

The meetings are as follows:

LOCATION	DATE	TIME
Redwood Falls Redwood Inn 1305 East Bridge Street Redwood Falls, MN 56283	Tuesday, October 25, 1994	6:30 p.m.
Rochester Best Western Apache Hiawatha Room 1517 16th Street S.W. Rochester, MN 55902	Wednesday, October 26, 1994	6:30 p.m.
Fergus Falls Otter Tail Power Minnesota & South Dakota Community 216 South Cascade Fergus Falls, MN 56538	Thursday, October 27, 1994 Rooms	6:30 p.m.
Minneapolis/St. Paul Holiday Inn Metrodome Aragon Ballroom 1500 Washington Avenue South Minneapolis, MN 55454	Wednesday, November 2, 1994	6:30 p.m.
Duluth Radisson Hotel 505 West Superior St. Duluth, MN 55802	Thursday, November 3, 1994	6:30 p.m.

# **Department of Education**

### Office of Information Technologies

# Notice of Invitation to Hearing to Respond to Questions Regarding the Development of an Information Technology System for Instructional Delivery in the Future

The Minnesota Department of Education Task Force on Information Technologies invites interested parties to provide responses to the following questions at a hearing to be held from 9:15 to 12:15 p.m. on October 26, 1994, at the Earle Brown Center in St. Paul.

- 1. What does the future hold for informational technologies?
- 2. How do you see these advancements and applications applying to learning? What results can we expect?
- 3. What new capabilities will information technologies offer for:
  - curriculum design;
  - instructional delivery;
  - administration—including financial management, student records, data transmission, collection, and analysis; and
  - · academic and lifework guidance and counseling?
- 4. If you were designing an informational technologies system for Minnesota schools and the Minnesota Department of Education, what are the key characteristics and attributes the system should have?
- 5. If you were starting from scratch, what is the first thing you would do in establishing this informational technologies system?

### The purpose of this hearing is to gather information.

The amount of time for presentations on October 26 to the Task Force on Information Technologies will be limited; therefore, parties are asked to submit a written response to the above questions and use their presentation to elaborate on specific issues of interest. Please contact Ms. Mary Mehsikomer, Department of Education, at (612) 296-2752 to schedule a presentation to the Task Force on October 26, 1994.

Please submit your written response to the above questions to Ms. Mary Mehsikomer, Office of Information Technologies, Minnesota Department of Education, 550 Cedar Street, St. Paul, Minnesota, 55101 or by FAX at (612) 297-1795.

# Housing Finance Agency Department of Economic Security Department of Trade and Economic Development

# Notice of Public Hearing and Comment Period for Development of a Consolidated Plan that Combines Applications for Federal Grants and the Comprehensive Housing Affordability Strategy

The Minnesota Housing Finance Agency (MHFA), the Department of Economic Security (DES) and the Department of Trade and Economic Development (DTED) are in the process of preparing a Consolidated Plan. This Plan is a new requisite to obtain funding from the Department of Housing and Urban Development (HUD). The Consolidated Plan combines applications for several federal grants and the Comprehensive Housing Affordability Strategy.

The Consolidated Plan serves as: a planning document for the jurisdiction, which builds on a participatory process at the lowest levels; an application for federal funds under HUD's formula grant programs; a strategy to be followed in carrying out HUD programs; and, an action plan that provides a basis for assessing performance.

These formula grant programs are covered by the consolidated plan:

- The Community Development Block Grant (CDBG) programs;
- The Emergency Shelter Grants (ESG) program;
- · The HOME Investment Partnerships (HOME) program; and,
- The Housing Opportunities for Persons with AIDS (HOPWA) program.

HUD is stressing the importance of citizen contribution in the development of the Comprehensive Plan. The participating state agencies have scheduled several opportunities for citizen participation in the state housing planning process.

### Comment Period on Draft of the Citizen Participation Plan

This Plan is an outline of the methods MHFA, DES and DTED will use to obtain citizen input on the Consolidated Plan. Citizens have an opportunity to examine the draft and make comments on its contents.

Dates: October 17-31, 1994

\*Location: The Plan will be available for review at the offices of the Minnesota Housing Finance Agency, 400 Sibley Street, Suite 300, St. Paul; any of the Regional Development Commissions; or, the following public libraries around the state: Bemidji Public Library, Bemidji; Duluth Public Library, Duluth; Marshall-Lyon County Library, Marshall; Minnesota Valley Regional Library, Mankato; Lake Agassiz Regional Library, Moorhead; Rochester Public Library, Rochester; Great River Regional Library, St. Cloud; Pioneerland Public Library System, Willmar; Winona Public Library, Winona; and, Nobles County Library, Worthington.

### **Public Hearing**

An opportunity for citizens to give opinions on the condition of the state's housing to those who will be formulating the spending patterns of HUD grants. Citizens' input will help formulate the state's housing objectives and priorities.

Date: Wednesday, October 26, 1994 at 3 p.m.

Location: MHFA Office, 400 Sibley Street, Suite 300, St. Paul, Jelatis Conference Room.

### Comment Period on Draft of the Consolidated Plan

Citizens have an opportunity to examine the draft of the Consolidated Plan and make comments on it.

Dates: November 15 to December 15, 1994

Location: See \* above

Persons in need of special accommodations should contact Denise Rogers at 612/296-8206 or if you have a Telecommunications Device for the Deaf call 612/297-2361.

# **Department of Human Services**

### **Health Care Administration**

# Notice of Intention to Solicit Input for the Department of Human Services MinnesotaCare Health Care Reform Waiver Planning

The Department of Human Services Health Care Administration has submitted a request to the Health Care Financing Administration to waive certain requirements of the Social Security Act and the Medicaid regulations. The waiver request is divided in two phases. The second phase requires extensive citizen input. The following stakeholder groups will be convened to assist the Department in obtaining that input. The date listed next to each work group is the last day on which the Department will accept letters of interest.

1) Eligibility Work Group

11/01/94

Participants will include representatives for: consumer, counties, providers, health plans, public health, and others.

2) Supplemental Benefits Work Group

04/01/95

Participants will include representatives for: consumers, purchasers, health plan companies, counties, public health, consulting agencies, liaisons from other advisory committees, and others.

3) Health Care Service Delivery for Persons with Disabilities Work Group

11/01/94

Participants will include representatives for: consumers, persons with various types of disabilities, providers, health plans, counties, and others.

4) Public Program Phase in to the Regulated All Payer Option (RAPO) Work Group

04/01/95

Participants will include representatives for: consumers, health plan companies, providers, counties, and others.

5) Department of Employee Relations Integration & Public Program Phase in to the Integrated Service Network (ISN) System

11/01/94

Participants will include representatives for: consumers, providers, counties, state employees, and others.

### Official Notices

Each group will be limited in size. Participants will be chosen with the goal of establishing a diverse group representing affected parties. Participants will be appointed by the Commissioner of Human Services after a review of all letters of interest received before the applicable closing dates. The Department will notify all parties that have submitted letters of interest of appointees.

Persons or groups who would like to participate should submit a letter of interest, including the name of any group they would be representing, their current address and phone number, the work group they are requesting participation on, and a resume, curriculum vitae, or biography to:

Debra Wagner Minnesota Department of Human Services 444 Lafayette Road St. Paul, MN 55155-3853 (612) 282-5965

For additional information, address questions to the above address or telephone number.

# **Department of Labor & Industry**

### **Labor Standards Division**

### **Notice of Prevailing Wage Certifications for Commercial Construction Projects**

Effective October 17, 1994 prevailing wage rates were determined and certified for commercial construction projects in the following counties:

Crow Wing: ISD #181 Lowell School Pipe Insulation Work-Brainerd.

Polk: Lysaker Gymnasium Floor Restoration-Crookston.

Washington: WWTP Fine Bubble Conversion-Cottage Grove.

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

# **Department of Labor and Industry**

### **Labor Standards Division**

# Notice of Prevailing Wage Determinations for Highway/Heavy Projects

On October 17, 1994 the commissioner determined and certified prevailing wage rates for Highway/Heavy construction projects in each county statewide.

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

John B. Lennes, Jr Commissioner

# **Department of Natural Resources**

### Division of Fish and Wildlife

# Notice of Solicitation of Outside Information or Opinion Regarding Amendment of Rules Governing Aquatic Nuisance Control

NOTICE IS HEREBY GIVEN that the Minnesota Department of Natural Resources is seeking information or opinions from sources outside the agency in preparing to amend rules governing aquatic nuisance control.

Subject of Rules and Statutory Authority. Specifically, the amendments to the existing rules will consider: aquatic nuisance control permit requirements, including standards for issuance of permits and permit fees; actions not requiring a permit; prohibited

aquatic nuisance control activities; the approval of pesticides and methods used for aquatic nuisance control; endorsement of commercial aquatic applicators license; and permitting of commercial operators.

The amendment of these rules is authorized by Minnesota Statutes, section 103G.615.

Small Business Considerations. Outside opinion is also being solicited as to any effect amendments to the rules might have on small businesses, as defined under *Minnesota Statutes*, section 14.115, subdivision 1. The rules may have an impact on small businesses dealing with the commercial application of pesticides to public waters, the mechanical removal of vegetation from public waters, and the sale of pesticides registered for aquatic use. Amendments to the rule may afford aquatic vegetation more protection, which could reduce the amount or type of work permitted at a given location. Any adopted amendments will not eliminate aquatic nuisance control work nor is it anticipated that the number of permits issued annually will decline.

Comments and Agency Contact Person. The Minnesota Department of Natural Resources requests information and opinions concerning the subject matter of the rules. Interested persons or groups may submit data or views on the subject matter of concern in writing or orally. Address written statements to:

Steven Enger
Department of Natural Resources
Box 25, 500 Lafayette Road
St. Paul, Minnesota 55155-4025

Oral statements will be received during regular business hours over the telephone at (612) 296-0782 and in person at the above address.

A copy of this notice will be mailed to all parties who have registered their names with the department for purposes of notice of rulemaking activity.

The department does intend to form an advisory task force on this issue. A representative from the following groups will be invited to participate with Department of Natural Resources staff on the task force; commercial applicators and operators, Minnesota Lakes Association, Minnesota Sportfishing Congress, lake conservation districts, Minnesota Department of Agriculture, Minnesota Pollution Control Agency, and the Minnesota Department of Health. It is anticipated that the advisory task force will complete its work during the spring of 1995. If no public hearing is requested, the rulemaking process is expected to be completed by the summer of 1995.

All statements of information and opinions shall be accepted throughout the rulemaking process until the rules are either adopted or withdrawn. All written material received by the Department of Natural Resources shall become part of the rulemaking record to be submitted to the attorney general or administrative law judge in the event that rule amendments are adopted.

Dated: 5 October 1994

Rodney W. Sando, Commissioner Department of Natural Resources

# **Department of Natural Resources**

Division of Fish and Wildlife, Section of Fisheries

# Notice of Solicitation of Outside Information or Opinions Regarding Proposed Rules Governing the Construction and Operation of a Quarantine Facility for Fish Eggs

NOTICE IS HEREBY GIVEN that the Minnesota Department of Natural Resources is seeking information or opinions from sources outside the agency in preparing to propose adoption of rules governing the construction and operation of a quarantine facility for fish eggs.

Subject of Rules and Statutory Authority. The proposed rules will cover requirements for fish egg quarantine facilities including importation of fish eggs, construction, licensing, operation, record keeping and reporting, inspection, and release of fish. The adoption of the rules is authorized by *Minnesota Statutes*, section 17.496 which directs the commissioner of natural resources to adopt rules for the construction and operation of a quarantine facility for fish eggs after consultation with the commissioner of agriculture and aquaculture advisory committee.

Small Business Considerations. Outside opinion is also being solicited as to any effect the rules might have on small businesses, as defined under *Minnesota Statutes*, section 14.115, subdivision 1. The rules may have an impact on small businesses dealing with private aquaculture, if the operators of such businesses wish to have a facility licensed as a quarantine facility, or wish to contract with a quarantine facility to import fish eggs. (There are currently no licensed quarantine facilities in Minnesota.)

Quarantine facilities for fish eggs generally have strict criteria for design, operational procedures, and release protocols, to minimize the risk of introducing emergency fish diseases to the naturalized fishery resource while providing an opportunity for the

### Official Notices:

importation of fertilized fish eggs from emergency disease-restricted areas and areas with unknown fish health history. Estimates for new construction at an acceptable site range from \$600,000 to \$2,000,000. Estimates to annually operate a quarantine facility range from \$40,000 for a small facility to \$400,000 for a large complex facility.

Although the high cost of constructing and operating quarantine facilities may make them cost prohibitive for most private hatchery operators, the overall impact on small private hatchery businesses would be negligible. Quarantine facilities may provide some advantages to private operators by increasing trout, salmon, or catfish importation options. However, this advantage would generally be outweighed by the complexity and increased cost associated with operating a quarantine facility, particularly when suitable disease-free sources of fish are generally available for production purposes. More likely clients for quarantine facilities would be universities and government agencies which are seeking to develop a disease free line from a unique strain of trout, salmon, or catfish which have a high risk of carrying emergency disease.

Most private operators interested in increasing options for importing trout, salmon, or catfish would likely pursue licensing a containment facility as provided by *Minnesota Statutes*, sections 17.4982 and 17.4991. Containment facilities have less strict construction and operation criteria than quarantine facilities, and are eligible to receive trout, salmon, and catfish with less disease history than would be required for standard facilities.

Comments and Agency Contact Person. The Minnesota Department of Natural Resources requests information and opinions concerning the subject matter of the rules. Interested persons or groups may submit data or views on the subject matter of concern in writing or orally. Written statements should be addressed to:

Steven Hirsch
Department of Natural Resources
500 Lafayette Road
St. Paul, Minnesota 55155-4012

Oral statements will be received during regular business hours over the telephone at (612) 296-0791 and in person at the above address

A copy of this notice will be mailed to all parties who have registered their names with the department for purposes of notice of rulemaking activity.

This rule was previously proposed for adoption in November of 1992. However, the rule was not adopted and changes have been made based on comments received regarding importation of fish eggs and qualifications for certified fish health inspectors. An advisory task force consisting of representatives from the department of agriculture, aquaculture advisory committee, and private industry were consulted in the drafting of the previous proposed rule, and will be consulted during this process also. If no hearing is required, the rulemaking process is expected to be completed during March, 1995.

All statements of information and opinions shall be accepted throughout the rulemaking process until the rules are adopted or withdrawn. All written material received by the Department of Natural Resources shall 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.

Dated: 4 October 1994

Rodney W. Sando, Commissioner Department of Natural Resources

# **Sentencing Guidelines Commission**

# Notice of Public Hearing to Consider Modifications to the Sentencing Guidelines

The Minnesota Sentencing Guidelines Commission will hold a public hearing on Wednesday, November 16, 1994, at 3:00 PM in Room 15, Ground Floor, State Capitol, St. Paul, Minnesota. The 1994 Legislature directed the Commission to: "... evaluate whether the current sentencing guidelines and related statutes are effective in furthering the goals of protecting the public safety and coordinating correctional resources with sentencing policy. Based on this evaluation, the commission shall develop and recommend options for modifying the sentencing guidelines so as to ensure that state correctional resources are reserved for violent offenders. These options may include, but need not be limited to changes to severity level rankings, criminal history score computations, sentence durations, the grid, and other sentencing guidelines policies."

The public hearing is to consider proposed modifications to the sentencing guidelines and commentary that address the legislative directive. This proposal was developed to work together as a balanced package toward the goals of protecting the public safety and ensuring that state correctional resources are reserved for violent offenders. This proposal includes changes to the guidelines that

### Official Notices

will continue the effort over the last several years to toughen sentences for person offenders and place less emphasis on prison for non-person offenders. The rationale to support this proposal includes the idea that nonviolent offenders can be more appropriately punished and held more accountable by using local community-based sanctions (including local incarceration) to place a greater emphasis on restitution and repairing the harm to the victim and the community.

A summary of the proposed modifications is presented in this publication. Materials prepared by a subcommittee of the Commission provide further explanation of the proposed modifications and include estimates of the impact on correctional resources. These materials are available, free of charge, by contacting the Minnesota Sentencing Guidelines Commission at Meridian National Bank Building, 205 Aurora Ave., Suite 205, St. Paul, MN 55103, or by calling Voice: (612) 296-0144. Deaf/Hard of Hearing/Speech Impaired Only TDD users may call this agency through the MN Relay Service: Twin Cities (612) 297-5353 or Greater Minnesota 1 (800) 627-3529; ask for (612) 296-0144. If you need special accommodations to attend, please contact the Minnesota Sentencing Guidelines Commission as soon as possible. This notice and explanatory materials can be made available in alternative formats upon request.

All interested persons are encouraged to attend the hearing and offer comments. Persons wishing to speak may register in advance by contacting the Commission staff at the above address/telephone number.

The Commission will hold the record open for five days after the public hearing to accept additional written comment on the proposed modifications. On December 1, 1994, the Commission will meet at 3:00 PM in Room 15, Ground Floor, State Capitol, St. Paul, Minnesota to formally adopt or reject the proposed modifications. If adopted, the modifications will become effective August 1, 1995, after review by the 1995 Legislature.

### **Summary of Proposed Modification Package**

### Create a New Severity Level Between Current Severity Level VI and VII

Create a new severity level VI with a presumptive duration of 36 months at a zero criminal history score and a presumptive disposition of prison, regardless of criminal history. The new severity level would include Assault Second Degree with a Firearm (moved up from the current severity level VI) and Second Degree Controlled Substance Crimes (moved down from severity level VII). The current severity level I would be eliminated; offenses currently at that level would be moved up to the current severity level II. In addition, First Degree Controlled Substance Crimes would be moved from severity level VIII to severity level VII. The severity levels would be renumbered so that levels I through X would still appear on the grid. The weights used to calculate criminal history will change only slightly to allow the new severity level V prior offenses to receive I 1/2 points.

### Adjust Severity Levels to Reflect the Commission's Ranking Principles

Adjust the severity level rankings of a number of offenses in severity levels I-VI to further differentiate crimes against persons from property crimes. Severity levels would be increased for approximately 40 crimes, including Assault 3, certain provisions of Third and Fourth Degree Criminal Sexual Conduct, and Criminal Vehicular crimes involving injury and a number of offenses involving weapons. Eliminate the distinction between Theft and Theft Related Offenses. For consistency, also adjust the rankings for a few other property crimes (e.g., Receiving Stolen Property, Motor Vehicle Theft and Motor Vehicle Use without Consent).

### Limit Misdemeanor/Gross Misdemeanor Point

Limit the Misdemeanor/Gross Misdemeanor List to person and weapon offenses and limit eligibility for a Misdemeanor/Gross Misdemeanor Point to those with a current person offense.

### Adjust Increases in Durations Across Criminal History

Provide for increases in durations across criminal history at severity levels I-VI that are at uniform intervals, consistent with increases at severity levels VII and above. Durations across history scores would increase by increments of two months at new severity levels I and II; three months at new severity level III; five months at new severity level IV; six months at new severity level V and seven months at the newly created severity level VI.

### Reverse the Order of the Severity Levels on the Grid

In conjunction with the above substantive changes, the grid would be modified to display severity levels in descending order. This will clearly show the guidelines emphasis on reserving prison resources for person offenders and is similar to guideline grid used in a number of other states.

The following grid shows the new severity level, the adjusted durations and the placement of severity levels in descending order.

# **PROPOSED**

### IV. SENTENCING GUIDELINES GRID

Presumptive Sentence Lengths in Months

Italicized numbers within the grid denote the range within which a judge may sentence without the sentence being deemed a departure. Offenders with nonimprisonment felony sentences are subject to jail time according to law.

### **CRIMINAL HISTORY SCORE**

	J. J							
SEVERITY LEVEL OF CONVICTION OFFENSE (Common offenses listed in italics)		0	1	2	3	4	5	6 or more
Murder, 2nd Degree (with intent)	x	306 299-313	326 319-333	346 339-353	366 359-373	386 379-393	406 399-413	426 419-433
Murder, 3rd Degree Murder, 2nd Degree (felony Murder)	ıx	150 144-156	165 <i>15</i> 9-171	180 174-186	195 189-201	210 204-216	225 219-231	240 234-246
Criminal Sexual Conduct, 1st Degree Assault, 1st Degree	VIII	86 81-91	98 93-103	110 105-115	122 117-127	134 129-139	146 141-151	158 153-163
Aggravated Robbery Controlled Substance Crimes, 1st Degree	VII	48 44-52	58 54-62	68 64-72	78 74-82	88 84-92	98 94-102	108 104-112
Assault, 2nd Degree w/Firearm Controlled Substance Crimes, 2nd Degree	VI	36 33-39	43 40-46	50 47-53	57 54-60	64 61-67	71 68-74	78 75-81
Criminal Sexual Conduct, 2nd Degree (a) & (b)	V	21	27	33	39 <i>37-41</i>	45 43-47	51 <b>4</b> 9-53	57 55-59
Residential Burglary Simple Robbery	IV	18	23	28	33 <i>31-35</i>	38 <i>36-40</i>	43 41-45	48 46-50
Nonresidential Burglary	Ш	12'	15	18	21	24 23-25	27 26-28	30 29-31
Theft Crimes (Over \$2,500)	II	121	13	15	17	. 19 18-20	21 20-22	23 22-24
Theft Crimes (\$2500 or less) Check Forgery (\$200-\$2500)	Ī	12'	12¹	13	15	17	19	21 20-22

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Burglary o
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Presumptive stayed sentence; at the discretion of the judge, up to a year in jail and/or other non-jail sanctions can be imposed ions of probation. However, certain offenses in this section of the grid always carry a presumptive commitment to a state hese offenses include Third Degree Controlled Substance Crimes when the offender has a prior felony drug conviction, of an Occupied Dwelling when the offender has a prior felony burglary conviction, second and subsequent Criminal Sexual offenses and offenses carrying a mandatory minimum prison term due to the use of a dangerous weapon (e.g., Second Degree Assault). See sections II.C. Presumptive Sentence and II.E. Mandatory Sentences.

	Presumptive commitment to state imprisonment. First Degree Murder is excluded from the guidelines by law and continues to	
		have a mandatory life sentence. See section II.E. Mandatory Sentences for policy regarding those sentences controlled by
		law, including minimum periods of supervision for sex offenders released from prison.

<sup>&#</sup>x27; One year and one day

# **Public Utilities Commission**

# Notice of Additional Public Forums Scheduled in Northeastern Minnesota for Local Calling Scope Investigation - P999/CI-94-296

### **Background**

The 1994 Legislature added a subdivision to *Minnesota Statutes* § 237.161 which requires that the Minnesota Public Utilities Commission no longer accept petitions for extended area telephone service through June 1, 1996, but instead institute:

"a proceeding or series of proceedings to investigate issues related to extended area telephone service and (the commission) shall issue a final order to establish, at a minimum, an orderly and equitable process and standards for determining the configurations of and cost allocations for extended area service in the state." Minnesota Statutes § 237.161, subd. 6 (1994).

On April 20, 1994, the Public Utilities Commission gave notice of its intent to investigate the appropriate local calling scope of telephone subscribers in Minnesota. The Notice, which included publication in the *State Register* on May 2, 1994, solicited comments from interested parties regarding the parameters of the investigation.

In its Order of August 22, 1994, the Commission established the parameters of the case. The primary aspects of the case, titled In the Matter of an Investigation into the Appropriate Local Calling Scope, in Accordance with Minnesota Statutes § 237.161 (1994) are:

- Any interested party is invited to propose a specific plan for an appropriate local calling scope. Proposed plans are to
  include (if resources permit): technical requirements for implementation; how the proposed plan satisfies subscriber
  demand; how revenue requirements are to be recovered; the cost to participants; the effects of the plan on competition;
  and the administrative and regulatory costs. Plans are due by November 30, 1994.
- Parties will have a response period until March 1, 1995.
- The Commission will set the proposals it believes warrant further investigation for a contested case hearing before an administrative law judge.
- During the months of September and October, 1994, the Commission will hold a series of public forums at which the
  case will be explained and the views of the public collected.

### **Notice of Additional Public Forums**

The Commission scheduled 12 public forums around the state between September 14 and October 13, 1994, as noticed in the State Register of August 29, 1994. The Commission will hold two additional public forums in Northeastern Minnesota. The locations and times for these additional public forums will be as follows:

- Thursday, October 27, 1994, 1:00 p.m. to 3:00 p.m.
   Nashwauk City Hall, 301 Central, Nashwauk, MN.
- Thursday, October 27, 1994, 7:00 p.m. to 9:00 p.m.
   Tower-Soudan School, Multi-Purpose Room, 415 N. 2nd St., Tower, MN.

For questions regarding the case, please contact Joy Gullikson (612/297-7071) or Diane Wells (612/296-6068). They can also be reached through 800/657-3782.

Dated: 30 September 1994

Burl Haar Executive Secretary

# 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 Agriculture**

### **Market Development and Promotion Division**

### **Notice of Authority to Make Grants**

The Minnesota Department of Agriculture announces its authority for fiscal year 1995 to make agricultural market development grants to encourage and promote marketing of Minnesota agricultural products as provided for in *Minnesota Statutes*, sections 17.101, subd 2, and 17.102, and *Minnesota Rules*, chapter 1552.

Grant applications may be received throughout the fiscal year and awarded at such time as funds may become available. Publication of this notice does not obligate the Minnesota Department of Agriculture to award grant funds. Copies of the rules governing the program and other related application materials are available. The rules describe eligibility criteria, application content, application procedures. The grant award for any project may not exceed \$70,000, and the total of all grants to any grantee may not exceed \$70,000 for the biennium ending June 30, 1995.

Other information may be obtained by contacting:

Chris Canaday
Market Development and Promotion Division
Minnesota Department of Agriculture
90 West Plato Blvd.
St. Paul, MN 55107
(612) 297-4648

# **Minnesota Historical Society**

# **New Grants Programs Offer Bonding Funds for Preservation**

The Minnesota Historical Society announces a winter grants cycle for two new grants programs. The first provides \$500,000 in matching grants for county and local preservation projects of a capital nature. The second provides \$950,000 as matching money for federal Intermodal Surface Transportation Efficiency Act (ISTEA) grants. Both programs, made possible by an allocation from the Minnesota Legislature in the 1994 bonding bill, target county and local jurisdictions.

The requirements for both of these state bond-funded grants programs differ from other grants programs MHS has administered in the past. A two-phased application process, with a required pre-application, will be implemented. Applicants must be governmental units eligible for state bond funds or must have a project sponsored by an eligible governmental unit. These grant funds may be spent only for land, buildings, or other improvements of a capital nature. To be funded, projects must serve a public purpose and the property must be in public ownership.

Informational meetings will be held in three cities this fall: Nov. 1 at the Rochester City Hall, 224 First Ave. SW in Rochester; Nov. 2 at the Montevideo Public Library, Main St. in Montevideo; and on Nov. 9 at the Hibbing Memorial Bldg., 400 E. 23rd St. in Hibbing. The meetings will begin at 3:00 p.m.

Deadlines for the winter grants cycle are:

Jan. 6, 1995: Pre-application due.

Feb. 3: Application due.

March 9: Grants Review Committee meets.

Projects may begin in the spring of 1995.

Grant information materials and application forms will be available in November. To request a packet or for more information, call Heather Esser, grants and National Register programs analyst, (612) 296-5434.

# 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**

### **State Designer Selection Board**

### Request for Proposal for a State University Project

### To Minnesota Registered Design Professionals:

The State Designer Selection Board has been requested to select a designer for a State University Project. Design firms who wish to be considered for these projects should deliver proposals on or before 4:00 p.m., November 8, 1994, to:

George Iwan

Executive Secretary, State Designer Selection Board

Room G-10, Administration Building

St. Paul, Minnesota 55155-3000

### The proposal must conform to the following:

- 1) Six (6) copies of the proposal will be required.
- 2) All data must be on 81/2" x 11" sheets, soft bound.
- 3) The cover sheet of the proposal must be clearly labeled with the project number, as listed in number 7 below, together with the designer's firm name, address, telephone number and the name of the contact person.

### 4) Mandatory Proposal contents in sequence:

- a) Identity of firm and an indication of its legal status, i.e. corporation, partnership, etc. If the response is from a joint venture, this information must be provided for firms comprising the joint venture.
- b) Names of the persons who would be directly responsible for the major elements of the work, including consultants, together with brief descriptions of their qualifications. Identify roles that such persons played in projects which are relevant to the project at hand. NOTE NEW REQUIREMENT: The proposal must contain a statement indicating whether or not the consultants listed have been contacted and have agreed to be a part of the design team.
- c) A commitment to enter the work promptly, if selected, by engaging the consultants, and assigning the persons named 4b above along with adequate staff to meet the requirements of work.
- d) A list of State and University of Minnesota current and past projects and studies awarded to the prime firm(s) submitting this proposal during the four (4) years immediately preceding the date of this request for proposal. The prime firm(s) shall list and total all fees associated with these projects and studies whether or not the fees have been received or are anticipated. In addition, the prime firm(s) shall indicate the amount of fees listed which were paid directly to engineers or other specialty consultants employed on the projects and studies listed pursuant to the above. *NOTE*: Please call for a copy of the acceptable format for providing this information.
- e) A section containing graphic material (photos, plans, drawings, etc.) as evidence of the firm's qualification for the work. The graphic material must be identified. It must be work in which the personnel listed in "c" have had significant participation and their roles must be clearly described. It must be noted if the personnel were, at the time of the work, employed by other than their present firms.

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

### 5) Statutory Proposal Requirements:

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

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

a) A copy of your firm's current certificate of compliance issued by the Commissioner of Human Rights; or

# Professional, Technical & Consulting Contracts

- b) A statement certifying that the firm has a current certificate of compliance issued by the Commissioner of Human Rights; or
- c) A statement certifying that the firm has not had more than 20 full-time employees in Minnesota at any time during the previous 12 months; or
  - d) A statement certifying that the firm has an application pending for a certificate of compliance.
  - 6) Design firms wishing to have their proposals returned after the Board's review must follow one of the following procedures;
- a) Enclose a self-addressed stamped postal card with the proposals. Design firms will be notified when material is ready to be picked up. Design firms will have two (2) weeks to pick up their proposals, after which time the proposals will be discarded; or
- b) Enclose a self-addressed stamped mailing envelope with the proposals. When the Board has completed its review, proposals will be returned using this envelope.

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

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

### 7a) PROJECT - 27-94

Central Chilled Water Plant Winona State University

APPROPRIATION: \$2,215,000 to design and construct a central chilled water system.

SCOPE OF PROJECT: Chilled water plant (new construction, approximately 3,500 gross square feet), two 1,250 ton chillers with provision for a third 1,000 ton chiller, extension of the existing chilled water loop to Watkins, Minnesota, and Phelps Halls and the new library site, cooling coil installation in Watkins, Minnesota, and Phelps Halls, and all related mechanical/electrical components. The design shall consider chilled water storage, and alternative methods of refrigeration/refrigerants/energy sources. Sophisticated analysis of water flows, pumping systems, and automatic controls will be required to integrate the new system with the existing chilled water loop and existing energy management system.

The new chilled water system shall be within the specified budget, dependable, durable, and energy efficient.

The engineer selected shall be knowledgeable as to law, rule, and regulation affecting system design and operation, rebate programs, various refrigeration methods including direct fired, gas fired motor, steam driven, absorption, and electric; and various refrigeration mediums including HCFC's, salts, and ammonia.

SITE: Adjacent to the existing heating plant building.

**PURPOSE OF PROJECT:** The University believes the peak cooling demand, including Watkins, Minnesota, and Phelps Halls, and the new library currently in design, plus a contingency, is 2,500 tons; the engineer must verify the 2,500 tons. The existing chilled water loop has no reliable capacity beyond the next 3-5 years. The new chilled water plant is therefore expected to meet the University's entire long term cooling demand.

ENGINEERING RESPONSIBILITIES: The engineer will be responsible for, but not limited to, such tasks as: review of University chiller loop studies; design through construction drawings, including a schematic design report and a cost estimate at each stage of the design; bid review and recommendation; and project construction administration including but not limited to preparation of construction change orders, review and approval/rejection of shop drawings and payment requests, oversight of project for owner (including on-site observation and chairing construction meetings), and recommendation to the owner as to project acceptance.

Design will be consistent with Minnesota State University System Design Standards.

Prior experience with installation of chilled water plants of similar size is required.

Engineer selected must have personnel assigned to the project with sufficient construction experience to verify that the work is in accordance with the contract documents. Engineer will be required to assist the University in obtaining permits and regulatory approvals.

ENGINEERING FEE: To be negotiated.

### **UNIVERSITY CONTACT:**

John Burros, Director of Facilities Winona State University P.O. Box 5838 Winona, Minnesota 55987-5838 (507) 457-5052

### STATE UNIVERSITY SYSTEM CONTACT:

David Hardin, Director of Facilities Management Minnesota State University System 555 Park Street, Suite 230 St. Paul, Minnesota 55103 (612) 296-6624

Maureen Steele Bellows, Chair State Designers Selection Board

# **■ Professional, Technical & Consulting Contracts**

# **Iron Range Resources and Rehabilitation Board**

# Notice of Request for Proposals to Advise and Construct and/or Manage and Operate a Championship Golf Course in Biwabik

The Office of the Commissioner of the Iron Range Resources and Rehabilitation Board is seeking proposals from national and regional qualified Golf Course Management Companies for the purpose of advising in the construction phase, and/or managing and operating the presently proposed 18 hole public championship golf course to be constructed at Giants Ridge Recreation Area in Biwabik, Minnesota.

Goal: It is the goal of this project to enhance the tourist attraction of Northeastern Minnesota, therefore assisting the area in it's economic future.

**Objective:** To provide quality management in all phases of the operation and maintenance of the golf facility and to assist and advise in the actual construction of the golf course.

Tasks: Tasks under this contract shall be in two phases.

- I. Construction advisement
- II. On-going management

This request for proposal does not obligate the state to complete the project, and the state reserves the right to cancel the solicitation if it is considered to be in its best interest.

Prospective responders with any questions regarding this request for proposal may call or write:

Mike Gentile, Project Coordinator Giants Ridge Recreation Area P.O. Box 190 Biwabik, MN 55708 (218) 865-4143

Other department personnel are NOT allowed to discuss the request for proposal with anyone, including responders, before the proposal submission deadline.

To receive a complete request for proposal please contact:

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

by 4:00 P.M., October 24, 1994.

# **Public Employees Retirement Association (PERA)**

# Notice of Request for Proposals (RFP) for Professional and Technical Services to Facilitate Beginning Implementation of Business Plan Strategies

NOTICE IS HEREBY GIVEN that the Public Employees Retirement Association (PERA) is soliciting proposals from qualified consultants interested in providing professional and technical services to assist PERA in beginning implementation of their first year business plan strategies. The general objective of this contract is to develop and begin implementing a 3 to 5 year information technology strategic plan to support PERA's business plan objectives, and to obtain project management support and training to assist PERA project teams in accomplishing the first year business plan strategies. PERA is seeking one or two primary contractors to provide support and expertise in the following areas:

- technology infrastructure planning and implementation
- project management leadership and coaching
- business process reengineering and application design
- data modeling and systems prototyping
- · selection and use of project management and systems development methodologies and tools
- performance measurement methods and practices

### Non-State Public Bids, Contracts & Grants

- data collection and analysis
- team building and quality management training
- coaching leaders to successfully manage and sustain organization change

Details are contained in a Request for Proposals which may be obtained by calling or writing:

Sally Kupferschmidt
Public Employees Retirement Association
Suite 200
514 St. Peter Street
St. Paul, MN 55102
Telephone (612) 296-7489 or FAX (612) 297-2547

The total cost of all contracted services will not exceed \$300,000. The deadline for proposal submission is 4:00 p.m. on November 10, 1994.

# Non-State Public Bids, Contracts & Grants =

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

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

# **Metropolitan Council Wastewater Services**

# Public Notice for Letters of Interest (LOI), Request for Qualifications (RFQ), and Statement of Qualifications (SOQ) for Geotechnical Professional Services

The Metropolitan Council Wastewater Services (MCWS) is soliciting Letters of Interest for Geotechnical Professional Services in support of in-house projects prepared by MCWS staff. The MCWS intends to engage 3 geotechnical professional services firms, each with an upper limit contract of \$50,000.

The type of work envisioned for these firms includes providing technical assistance to MCWS staff during those time periods when staff's experience does not include a specific area and/or when staff resources are insufficient to complete the project in a timely manner. The professional services will cover a variety of geotechnical engineering disciplines.

Firms interested in being considered for this work are to submit a LOI requesting the RFQ submittal package. RFQ submittal packages will be issued upon receipt of LOI's. SOQ's are due by 12 NOON on Tuesday, November 15, 1994. LOI's are to be directed to:

Metropolitan Council Wastewater Services Mears Park Centre 230 East 5th Street St. Paul, MN 55101

Attn: Jan Bevins, Contracts & Documents Division

Dated: 10 October 1994

By Order of the Metropolitan Council Wastewater Services Helen A. Boyer, General Manager

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# Long Term Care & Hospice - Tools for the Professional

# ---Training Materials---

### Long Term Care Nursing Assistant Course

Curriculum stresses the nursing assistant's role as part of a team of health care providers. Training program divided into 13 units covering care concerns—personal care, communications, emergency measures, patient/resident rights, mental health and social service needs, et.al. (Binder not included.) (MN Tech. College System, 1991)

Instructor's Guide-- Stock No. 5-12 \$35.00
Looseleaf, 342pp. Includes guide, curriculum & skill sheets:
Student Skill Sheets-- Stock No. 5-13 \$6.95
Looseleaf, 123pp.



Curriculum developed to meet the 75 hour training requirement under state and federal regulations for aides providing home health care or nursing assistant facility. Comprehensive skill development. (Health 1993)
Instructor's Guide-- Stock No. 10-53 \$35.00
Looseleaf, 124pp. Binder and tabs included.
Student Handbook-- Stock No. 10-52 \$39.00
Looseleaf, 267pp. Binder and tabs included.
Student Skills Sheets-- Stock No. 10-54 \$9.95
Looseleaf, 108pp. (no binder)

### ---Laws & Rules---

### Home Health Care/Hospice Rules

MN Statutes Chapter 144A and MN Rules Chapters 4668 and 4669. 61pp. Stock No. 3-82 \$6.95

### Nursing & Boarding Care Home Rules

Chapters 4620.1200, 4638, 4655, and 4660 (1993). Licensing requirements for facilities where nursing, personal or custodial care is provided. 215pp. Stock No. 3-12 \$14.00

# ---Patient & Family Education---

# A Guide to Home Care & Hospice Services

Handy "flip chart" booklet provides an overview of home care and hospice services in Minnesota. Topics covered include regulation of providers, agency licensing, services available, patient bill of rights, reporting abuse and neglect, and more. 8-1/2" x 11" (Health, 1993)

Stock No. 10-47 \$6.95/pkg. of 5



Bridging the Gap: A Training Manual for Respite Care Volunteers

Program assistance for the project director, coordinator of volunteers, or anyone associated with the training of volunteers in a respite care program for caregivers of chronically ill, frail, and elderly individuals. The manual offers ideas, plans, and resources to recruit, train, place and retain volunteers in a respite care program. Provides flexibility/options that enable the trainer to pick and choose training activities that are appropriate for the participants, the time available, and the trainer's skills.

Topics covered include:

- \* Recruiting volunteers
- \* Orientation
- \* Understanding the caregiver
- \* Handouts and forms
- Guidelines for trainers
- Ice breaker activities
- \* Resources
- \* Communications skills
- \* Dealing with care receiver's concerns, i.e. grief and loss
- \* Practical tips for volunteers

Looseleaf, 237pp. (MN Dept. of Human Services, 1993) Stock No. 10-50 \$35.00

### A Time for Choices

A compact booklet offering assistance in making decisions about death arrangements. Reviews burial, cremation, entombment, and ceremony options PLUS an itemization of costs and consumer protection services. 24pp., 15 copies/pkg. (Health, 1992)

Stock No. 10-14 \$15.00/pkg.



# **Print Communications Division**



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