The Minnesota

State Register

Rules and Official Notices Edition



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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.

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#23	Monday 7 December	Noon Tuesday 24 November	Noon Tuesday 1 December	
#22	Monday 30 November	Noon Wednesday 18 November	4:30pm Monday 23 November	
Number	DATE	1 1	Contracts, Non-State Bids and Public Contracts	
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Vol. 23			Commissioner's Orders, Revenue and Official Notices,	

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Room 231 State Capitol, St. Paul, MN 55155 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 80 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. The current 1997 set is a 13-volume bound collection of all adopted rules in effect at the time. Supplements are published to update this set of rules. Generally speaking, proposed and adopted exempt rules do not appear in this set because of their short-term nature, but are published in the *State Register*.

An agency must first solicit **Comments on Planned Rules** or **Comments on Planned Rule Amendments** from the public on the subject matter of a possible rulemaking proposal under active consideration within the agency (*Minnesota Statutes* §§ 14.101). It does this by publishing a notice in the *State Register* at least 60 days before publication of a notice to adopt or a notice of hearing, or within 60 days of the effective date of any new statutory grant of required rulemaking.

When rules are first drafted, state agencies publish them as **Proposed Rules**, along with a notice of hearing, or a 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 most current edition of the *Minnesota Guidebook to State Agency Services*.

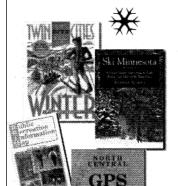
The *State Register* features partial and cumulative listings of rules in this section on the following schedule: issues #1-13 inclusive; issues #14-25 inclusive; issue #26 cumulative for issues #1-26; issues #27-38 inclusive; issue #39, cumulative for issues #1-39; issues #40-51 inclusive; and issues #1-52 (or 53 in some years), cumulative for issues #1-52 (or 53). An annual subject matter index for rules was separately printed usually in August, but starting with Volume 19 now appears in the final issue of each volume. For copies or subscriptions to the *State Register*, contact Minnesota's Bookstore, 117 University Avenue, St. Paul, MN 55155 (651) 297-3000, or toll-free 1-800-657-3757.

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Proposed Rules

Comments on Planned Rules or Rule Amendments

An agency must first solicit **Comments on Planned Rules** or **Comments on Planned Rule Amendments** from the public on the subject matter of a possible rulemaking proposal under active consideration within the agency (*Minnesota Statutes* §§ 14.101). It does this by publishing a notice in the *State Register* at least 60 days before publication of a notice to adopt or a notice of hearing, and within 60 days of the effective date of any new statutory grant of required rulemaking.

Rules to be Adopted After a Hearing

After receiving comments and deciding to hold a public hearing on the rule, an agency drafts its rule. It then publishes its rules with a notice of hearing. All persons wishing to make a statement must register at the hearing. Anyone who wishes to submit written comments may do so at the hearing, or within five working days of the close of the hearing. Administrative law judges may, during the hearing, extend the period for receiving comments up to 20 calendar days. For five business days after the submission period the agency and interested persons may respond to any new information submitted during the written submission period and the record then is closed. The administrative law judge prepares a report within 30 days, stating findings of fact, conclusions and recommendations. After receiving the report, the agency decides whether to adopt, withdraw or modify the proposed rule based on consideration of the comments made during the rule hearing procedure and the report of the administrative law judge. The agency must wait five days after receiving the report before taking any action.

Rules to be Adopted Without a Hearing

Pursuant to *Minnesota Statutes* § 14.22, an agency may propose to adopt, amend, suspend or repeal rules without first holding a public hearing. An agency must first solicit **Comments on Planned Rules** or **Comments on Planned Rule Amendments** from the public. The agency then publishes a notice of intent to adopt rules without a public hearing, together with the proposed rules, in the *State Register*. 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*.

Pollution Control Agency

Proposed Permanent Rules Relating to Individual Sewage Treatment Systems

Notice of Intent to Adopt a Rule Without a Public Hearing

Proposed Amendments to Rules Governing Individual Sewage Treatment Systems, Minnesota Rules Chapter 7080.

Introduction. The Minnesota Pollution Control Agency (MPCA) intends to adopt a rule without a public hearing following the procedures set forth in the Administrative Procedure Act, *Minnesota Statutes* sections 14.22 to 14.28, and in rules of the Office of Administrative Hearings, *Minnesota Rules* parts 1400.2300 to 1400.2310. The proposed rule will amend *Minnesota Rules* chapter 7080 governing Individual Sewage Treatment Systems. You have 109 days to submit written comments on the proposed rule and may also submit a written request that a hearing be held on the rule.

Second Notice. Agency staff are currently working on amendments to Chapter 7080 in addition to those published in this notice. A second notice concerning these supplemental amendments will be published in the *State Register* on February 8, 1999. The amendments identified in this notice are being published before the rest of the amendments to meet a deadline established in *Minnesota Statutes* section 14.125.

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

Mark Wespetal Policy and Planning Division Community and Area Wide Programs Minnesota Pollution Control Agency 520 Lafayette Road North St. Paul, Minnesota 55155-4194 Phone: (651) 296-9322

1-800-657-3843 (MN Toll Free)

FAX: (651) 297-8676

Internet: mark.wespetal@pca.state.mn.us.

Statutory Authority and Subject of Rule. Authority to amend and adopt the proposed rule comes from a combination of three statutes. *Minnesota Statutes* section 115.03, subdivision 1, paragraph (e), provides the agency general authority to modify and adopt rules for purposes of controlling or abating water pollution or for the installation or operation of disposal systems. Section 115.55, subdivision 3, directs the agency to adopt rules establishing minimum standards and criteria for the design, location, installation, use, and maintenance of ISTS. Finally, section 115.56, subdivision 1, directs the agency to establish rules for licensing ISTS professionals.

These rule amendments are being proposed to fulfill the 1997 legislative directive in amendments to section 115.55, subdivision 3, which requires the agency to establish procedures for the commissioner to approve new individual sewage treatment system technology

Proposed Rules

that does not have minimum construction standards established under *Minnesota Rule* chapter 7080. Additional amendments are being proposed to clarify "warrantied systems" authorized under *Minnesota Statutes* section 115.55, subdivision 8.

A copy of the proposed rule is published immediately after this notice.

Comments. You have until 4:30 p.m. on March 19, 1999, to submit written comment in support of or in opposition to the proposed rule and any part or subpart of the rule. Your comment must be in writing and received by the MPCA contact person by the due date. Comment is encouraged. Your comment should identify the portion of the proposed rule addressed and the reason for the comment. You are encouraged to propose any change desired. Any comments that you would like to make on the legality of the proposed rule must also be made during this comment period.

Request for Rule Hearing. In addition to submitting comments, you may also request that a hearing be held on the rule. Your request for a public hearing must be in writing and must be received by the agency contact person by 4:30 p.m. on March 19, 1999. Your written request for a public hearing must include your name and address. You must identify the portion of the proposed rule to which you object or state that you oppose the entire rule. Any request that does not comply with these requirements is not valid and cannot be counted by the MPCA for determining whether a public hearing must be held. You are also encouraged to state the reason for the request and any changes you want made to the proposed rule.

Withdrawal of Requests for Rule Hearing. 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 enough requests for a hearing are withdrawn to reduce the number below 25, the MPCA must give written notice of this to all persons who requested a hearing, explain the actions the MPCA took to effect the withdrawal, and ask for written comments on this action. If a public hearing is required, the MPCA will follow the procedures in *Minnesota Statutes* sections 14.131 to 14.20. See the upcoming February 8, 1999, notice for *potential* hearing dates, times and locations.

Request to Have MPCA Board Make Decision on Rule. You have the right to submit a request to the MPCA Commissioner or an MPCA Board member to have the MPCA Board make the decision on whether to adopt the proposed rule. Your request must be in writing, must state to whom it is directed, and must be received by the MPCA contact person by 4:30 p.m. on March 19, 1999. Under *Minnesota Statutes* section 116.02, the MPCA Board will make the decision on the rule only if the MPCA Commissioner grants your request or if an MPCA Board member makes a timely request that the decision be made by the MPCA Board.

Rule Modifications. The proposed rule may be modified as a result of public comment. The modifications must be supported by comments and information submitted to the MPCA, and the adopted rule may not be substantially different than this proposed rule. If the proposed rule 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 (SONAR) is now available from the MPCA contact person. This statement contains a summary of the justification for the proposed rule, including a description of who will be affected by the proposed rule and an estimate of the probable cost of the proposed rule. Copies of the SONAR may be obtained for no cost from the MPCA by calling Joanne Dalbec (651) 296-7487. The SONAR can also be viewed on the MPCA Internet web site at www.pca.state.mn.us/news/publicnotice/index.html. Select the notice heading from the index.

Consideration of Economic Factors. *Minnesota Statutes* section 116.07, subdivision 6, requires the MPCA to give due consideration to economic factors in exercising its powers. The MPCA has given due consideration to available information as to any economic impacts that the proposed rule would have and found that: 1) If implemented correctly, the proposed rule will cause no increase and may lower the cost of installing a new ISTS system. 2) Establishing a process for evaluating and allowing the use of new technologies is economically advantageous to businesses with technologies that are not considered to be standard systems in the rule. The consideration of economic factors are discussed in further detail in the SONAR.

Impact on Farming Operations. *Minnesota Statutes* section 14.111 requires that if an agency adopts or repeals rules that affect farming operations, the agency must provide a copy of the proposed rule change to the Commissioner of Agriculture, no later than 30 days prior to publication of the proposed rule in the *State Register*. The proposed rule does not affect farming operations.

Review by the Commissioner of Transportation. *Minnesota Statutes* section 174.05 requires the MPCA to inform the Commissioner of Transportation of all rulemakings that concern transportation. The proposed rule does not concern transportation.

Departmental Charges Imposed by the Rule. *Minnesota Statutes* section 16A.1285 is inapplicable because the proposed rule does not impose any departmental charges or fees.

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Adoption and Review of Rule. If no hearing is required and if the decision is not required to be made by the MPCA Board, the MPCA Commissioner may adopt the rule after the end of the comment period. The rule and supporting documents will then be submitted to the Office of Administrative Hearings for review for legality. You may ask to be notified of the date the rule is submitted to the office. If you want to be so notified, or want to receive a copy of the adopted rule, or want to register with the MPCA to receive notice of future rule proceedings, submit your request to the MPCA contact person listed above.

Peder A. Larson Commissioner

7080.0020 DEFINITIONS.

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

Subp. 24c. New technology. "New technology" means a new product or design, new combination of components, new component of a product, or modification to existing components that has been submitted to the commissioner for review and approval as a standard system.

Subp. 24e. 24d. Notice of noncompliance. "Notice of noncompliance" means a document written and signed by a qualified employee or licensee after a compliance inspection which gives notice that an individual sewage treatment system is not in compliance as specified under part 7080.0060.

Subp. <u>24d.</u> <u>24e.</u> **Ordinary high water level.** "Ordinary high water level" has the meaning given in *Minnesota Statutes*, section 103G.005, subdivision 14.

Subp. 24e. 24f. Original soil. "Original soil" means naturally occurring inorganic soil that has not been moved, smeared, compacted, nor manipulated with construction equipment.

[For text of subps 25 to 44, see M.R.]

Subp. 45. **Standard system.** "Standard system" means an individual sewage treatment system specified in parts 7080.0125 to 7080.0170 or approved by the commissioner under part 7080.0400.

[For text of subps 45a to 49a, see M.R.]

Subp. 51a. Warrantied system. "Warrantied system" means an individual sewage treatment system product or design on the warrantied system's list under part 7080.0450.

[For text of subps 52 and 53, see M.R.]

7080.0400 NEW TECHNOLOGY.

- <u>Subpart 1.</u> **Procedures for approval.** The commissioner shall approve new technologies as standard systems if documents submitted to the commissioner indicate that the new technology:
 - A. protects the public health and the environment and meets the requirements in this part;
- B. has long-term treatment and hydraulic reliability while serving typical dwellings or other establishments under adverse climatic conditions and varied soil conditions;
 - C. is readily operational and maintained to meet the conditions of this part; and
 - D. can be recommended for use under specified conditions, notwithstanding that under other conditions its use is limited.
- <u>Subp. 2.</u> **Submittal requirements.** Any request for approval of new technology shall include data and information demonstrating that the new technology protects the public health and the environment. The submittal shall include, as applicable:
 - A. plans and specifications;
 - B. theory of operation;
 - C. testing protocol as appropriate for the system;
 - D. testing data, including the results of:
 - (1) laboratory testing;
- (2) in-field testing showing a detailed examination and monitoring of the new technology under normal and stressed conditions;
- (3) in-field testing of a large number of systems over a wide range of climatic and soil conditions, over an extended period of time, and under design use; and
 - (4) compliance with national standards;

- E. limits of reliable operation (capacity and longevity);
- F. installation requirements and procedures;
- G. inspection requirements;
- H. capital costs;
- I. present value design, installation, operation, and maintenance costs;
- J. operation and maintenance requirements and schedules;
- K. proof of review by a professional engineer or person holding a Ph.D. with experience relevant to the new technology; and
- L. additional data and information as requested by the commissioner.
- Subp. 3. Approval. If upon review, the commissioner determines that the new technology complies with this part, the commissioner shall issue an approval in writing. The commissioner may impose conditions on any approval. Upon approval, the applicant must submit fact sheets to the commissioner, which can then be offered directly to ISTS professionals. The fact sheets must include a general description of the new technology and clear requirements for design, construction, inspection, operation, and maintenance. If an approved new technology is modified in component design, or any other way, or if additional representation regarding the function or performance approval of the new technology are made, the approval shall be considered null and void, unless the change is submitted to the commissioner for review and approval. Upon approval the new technology may be employed unless prohibited by local ordinance.
- Subp. 4. **Denial.** If upon review, the commissioner determines that documentation or data is insufficient to grant approval, or that for any other reason a new technology does not comply with this part, the request for approval shall be denied in writing.

7080.0450 WARRANTIED INDIVIDUAL SEWAGE TREATMENT SYSTEMS.

- Subpart 1. Limitations on adoption and use of this part. Warrantied individual sewage treatment systems meeting the requirements under this part may be employed unless specifically prohibited in local ordinance. Past or current incorporation by reference by a local unit of government of chapter 7080 or of the minimum technical standards and criteria for individual sewage treatment systems, parts 7080.0060 to 7080.0176, does not include adoption of this part. If a local unit of government chooses to adopt this part it must do so expressly. A local unit of government should use, for example, the following format: "Minnesota Rules, part 7080.0450, is incorporated by reference into Ordinance"
- <u>Subp. 2.</u> Submittal requirements. <u>Warrantied individual sewage treatment systems may be employed provided the manufacturer or designer submits satisfactory information to the commissioner as follows:</u>
- A. a description of how the system will be used and installed, how it is expected to perform under those conditions, the anticipated design life, and the period to be warrantied such that the user receives a reasonable assurance of performance;
 - B. pertinent existing data, including in-field testing data, that the system will perform as expected;
- C. a commonly accepted financial assurance document or documentation of the manufacturer's or designer's financial ability to cover potential replacement or upgrades necessitated by failure of the system to meet performance expectations for the duration of the warranty period;
- D. a full warranty effective for the designated warranty period, which must be at least five years from the time of installation covering design, labor, and material costs to remedy failure to meet performance expectations for systems used and installed according to manufacturer's or designer's instructions; and
 - E. additional information requested by the commissioner to assure compliance with this part.

Subp. 3. Administrative requirements.

- A. Individual sewage treatment systems meeting the requirements of subpart 2 shall be placed on a warrantied systems list maintained by the commissioner and available to the public.
- B. Changes made to a warrantied individual sewage treatment system which are not included in the approved warranty submittal require resubmittal and approval to be placed on the warrantied systems list.

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- C. The commissioner shall remove a warrantied individual sewage treatment system from the warrantied systems list upon a finding of fraud, system failure, failure to meet warranty conditions, or failure to meet this part or other matters which fail to meet with the intent and purpose of this chapter. If the commissioner removes a system from the warrantied systems list, all systems installed under the warrantied systems list shall still be covered by the original warranty.
 - D. A copy of the warranty must be provided to the owner and included with the design records.
- E. Warrantied individual sewage treatment systems may qualify as a standard system if the technology is submitted under part 7080.0400.

Pollution Control Agency

Proposed Permanent Rules Relating to Listed Metals in Specified Products

DUAL NOTICE: Notice of Intent to Adopt Rules Without a Public Hearing Unless 25 or More Persons Request a Hearing, and Notice of Hearing If 25 or More Requests for Hearing Are Received

Proposed Rules Governing Listed Metals in Specified Products, Minnesota Rules Chapter 7039.

Introduction. The Minnesota Pollution Control Agency (MPCA) intends to adopt rules without a public hearing following the procedures set forth in the Administrative Procedure Act, *Minnesota Statutes*, sections 14.22 to 14.28, and rules of the Office of Administrative Hearings, *Minnesota Rules*, parts 1400.2300 to 1400.2310. If, however, 25 or more persons submit a written request for a hearing on the rules within 30 days or by 4:30 p.m. on December 30, 1998, a public hearing will be held in the MPCA Boardroom, 520 Lafayette Road North, St. Paul, Minnesota 55155-4197, starting at 9:00 a.m. on January 20, 1999 and continuing until all public testimony is heard. To find out whether the rules will be adopted without a hearing or if the hearing will be held, you should contact the agency contact person after December 30, 1998 and before January 20, 1999.

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

Bill Dunn Minnesota Pollution Control Agency 520 Lafayette Road North St. Paul, Minnesota 55155-4194 (651) 282-2663 FAX (651) 297-8701

Internet: bill.dunn@pca.state.mn.us

Subject of Rule and Statutory Authority. Since 1991, the Minnesota legislature has enacted into law provisions intended to encourage the reduction or elimination of toxic metals from products and packaging. In 1997, the legislature amended *Minnesota Statutes*, section 115A.9651 to provide for a new process under which specified products containing listed metals would receive evaluation for possible prohibition from the Minnesota market. This amendment called for the creation of an advisory council, called the "Listed Metal Advisory Council," (Council) to oversee the first step in the process of evaluating the products covered by the statute. The main function of the Council is to make recommendations to the Commissioner of the Minnesota Pollution Control Agency (MPCA) regarding whether the Commissioner should adopt a rule banning a product in which the use of a toxic metal cannot be justified in accordance with legislative criteria.

The MPCA staff now proposes to adopt a rule to govern the process of evaluation of products by the Council, and otherwise govern the implementation of the Listed Metals Program.

The statutory authority to adopt the rule is set forth in *Minnesota Statutes*, section 115A.9651, subd. 11, which provides: "(a) The pollution control agency may adopt, amend, suspend, and repeal rules to implement this section." *Minnesota Statutes*, section 115A.9651, subd. 11 (e) provides that "section 14.125 does not apply to the Agency's rulemaking authority under this section." (*Minnesota Statutes*, section 14.125 requires an agency to adopt rules within 18 months of the effective date of the law authorizing or requiring the rules.) A copy of the proposed rules is published in the *State Register* and attached to this notice as mailed.

Comments. You have until 4:30 p.m. on December 30, 1998, to submit written comment in support of or in opposition to the proposed rule or any part or subpart of the rule. Your comment must be in writing and received by the MPCA contact person by the due date. Comment is encouraged. Your comment should identify the portion of the proposed rule addressed, the reason for the comment, and any change proposed. You are encouraged to propose any change desired. Any comments that you would like to make on the legality of the proposed rule must also be made during this comment period.

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Request for Hearing. In addition to submitting comments, you may also request that a hearing be held on the rule. Your request for a public hearing must be in writing and must be received by the MPCA contact person by 4:30 p.m. on December 30, 1998. Your written request for a public hearing must include your name and address. You must identify the portion of the proposed rule to which you object or state that you oppose the entire rule. Any request that does not comply with these requirements is not valid and cannot be counted by the MPCA for determining whether a public hearing must be held. You are also encouraged to state the reason for the request and any changes you want made to the proposed rule.

Withdrawal of Requests. If 25 or more persons submit a written request for hearing, a public hearing will be held unless a sufficient number withdraw their requests in writing. If enough requests for hearing are withdrawn to reduce the number below 25, the MPCA must give written notice of this to all persons who requested a hearing, explain the actions the MPCA took to effect the withdrawal, and ask for written comments on this action. If a public hearing is required, the MPCA will follow the procedures in *Minnesota Statutes*, sections 14.131 to 14.20.

Accommodation. If you need an accommodation to make this hearing accessible, please contact the MPCA contact person at the address or telephone number listed above.

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 be supported by data and views submitted to the MPCA or presented at the hearing and the adopted rule may not be substantially different than this proposed rule. If the proposed rule affects you in any way, you are encouraged to participate in the rulemaking process.

Cancellation of Hearing. The hearing scheduled for January 20, 1999, will be canceled if the MPCA does not receive requests from 25 or more persons that a hearing be held on the rule. If you requested a public hearing, the MPCA will notify you before the scheduled hearing whether or not the hearing will be held. You may also call the MPCA contact person after December 30, 1998 (date comment period ends) to find out whether the hearing will be held.

Notice of Hearing. If 25 or more persons submit written requests for a public hearing on the rule, a hearing will be held following the procedures in *Minnesota Statutes*, sections 14.131 to 14.20. The hearing will be held on the date and at the time and place listed above. The hearing will continue until all interested persons have been heard. An Administrative Law Judge is assigned to conduct the hearing. The judge can be reached at:

The Honorable Richard C. Luis Administrative Law Judge Office of Administrative Hearings 100 Washington Square, Suite 1700 100 Washington Avenue South Minneapolis, Minnesota 55401-2138 (612) 349-2542 FAX (612) 349-2665

Hearing Procedure. If a hearing is held, you and all interested or affected persons including representatives of associations or other interested groups, will have an opportunity to participate. You may present your views either orally at the hearing or in writing at any time before the close of the hearing record. All evidence presented should relate to the proposed rule. You may also submit written material to the Administrative Law Judge to be recorded in the hearing record for five working days after the public hearing ends. This five-day comment period may be extended for a longer period not to exceed 20 calendar days if ordered by the Administrative Law Judge at the hearing. Following the comment period, there is a five-working-day response period during which the MPCA and any interested person may respond in writing to any new information submitted. No additional evidence may be submitted during the five-day response period. All comments and responses submitted to the Administrative Law Judge must be received at the Office of Administrative Hearings no later than 4:30 p.m. on the due date. All comments or responses received will be available for review at the Office of Administrative Hearings. This rule hearing procedure is governed by *Minnesota Rules* 1400.2000 to 1400.2240, and *Minnesota Statutes*, sections 14.131 to 14.20. Questions about procedure may be directed to the Administrative Law Judge.

The MPCA requests that any person submitting written views or data to the Administrative Law Judge prior to the hearing or during the comment or response period also submit a copy of the written views or data to the MPCA contact person at the address stated above.

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Statement of Need and Reasonableness. A Statement of Need and Reasonableness (SONAR) is now available from the MPCA contact person. This statement contains a summary of the justification for the proposed rule, including a description of who will be affected by the proposed rule and an estimate of the probable cost of the proposed rule. The statement may also be reviewed and copies obtained at the cost of reproduction from either the MPCA or the Office of Administrative Hearings. In addition, the MPCA has placed a copy of the SONAR on its Web site at: www.pca.state.mn.us. Click on the News/Public Notices selection button to access the public notice which also contains the rule and SONAR.

Consideration of Economic Factors. *Minnesota Statutes*, section 116.07, subd. 6 requires the MPCA to give due consideration to economic factors in exercising its powers. In proposing these rules, the MPCA has given due consideration to available information as to any economic impacts the proposed rules would have. The main fiscal impact of the rule is with regard to product review reports and fees that must be submitted. The rule allows products that have similar formulations, uses and limitations to be considered "one product." This will minimize administrative burden and cost. Additional information regarding the MPCA's consideration of economic factors is discussed in Section VI., Items B, C and E in the SONAR.

Impact on Farming Operations. *Minnesota Statutes*, section 14.111 requires that if an agency adopts or repeals rules that affect farming operations, the agency must provide a copy of the proposed rule change to the Commissioner of Agriculture, no later than 30 days prior to publication of the proposed rule in the *State Register*. The MPCA had a phone conversation on October 13, 1998 and a subsequent discussion the month of September 1998, with a representative from the Commissioner's Office of the Department of Agriculture regarding the proposed rule. Based on both conversations, it is the MPCA's understanding that the proposed rule does not directly and substantially impact farming operations. Additional information regarding the MPCA's consideration of the impact on farming operations is discussed in the SONAR, Section VIII., Impact on Farming Operations.

Review by the Commissioner of Transportation. *Minnesota Statutes*, section 174.05 requires the MPCA to inform the Commissioner of Transportation of all rulemakings that concern transportation, and requires the Commissioner of Transportation to prepare a written review of the rules. The requirements of *Minnesota Statutes*, section 174.05 are not applicable.

Departmental Charges Imposed by the Rule. The requirements of *Minnesota Statutes*, section 16A.1285 are inapplicable because the proposed rules do not impose any departmental charges or fees.

State Regulatory Policy. *Minnesota Statutes*, section 14.131 requires an agency to consider, in developing rules, the legislative policy supporting performance-based regulatory systems set forth in *Minnesota Statutes*, section 14.002. The rule was drafted with the intent of assisting the regulated community in complying with its statutory obligations. Where possible, the rule was drafted to allow maximum flexibility in terms of the type and timing of submittals and other events. The MPCA's discussion on how the agency considered and implemented the legislative policy supporting performance-based regulatory systems is found in the SONAR, Section VII., State Regulatory Policy.

Lobbyist Registration. *Minnesota Statutes*, chapter 10A, requires each lobbyist to register with the Campaign Finance and Public Disclosure Board. Questions regarding this requirement may be directed to the Campaign Finance and Public Disclosure Board at: First Floor South, Centennial Building, 658 Cedar Street, St. Paul, Minnesota 55155, telephone (651) 296-5148 or 1-800-657-3889

Request to Have MPCA Board Make Decision on Rule if No Hearing is Required. If a hearing is required, the MPCA Board will make the final decision on whether to adopt the rule. However, even if no hearing is required, you may submit a request to the MPCA Commissioner or an MPCA Board member to have the MPCA Board make the decision on whether to adopt the proposed rule. Your request must be in writing, must state to whom it is directed and must be received by the MPCA contact person by 4:30 p.m. on December 30, 1998. Under *Minnesota Statutes*, section 116.02, where a hearing is not required the MPCA Board will only make the decision on the rule if the MPCA Commissioner grants your request or if an MPCA Board member makes a timely request that the decision be made by the MPCA Board.

Adoption Procedure if No Hearing. If no hearing is required, and if the decision is not required to be made by the MPCA Board, the MPCA Commissioner may adopt the rule after the end of the comment period. The rule and supporting documents will then be submitted to the Office of Administrative Hearings for review for legality. You may ask to be notified of the date the rule is submitted to the office. If you want to be so notified, or want to receive a copy of the adopted rule, or want to register with the MPCA to receive notice of future rule proceedings, submit your request to the MPCA contact person listed above.

Adoption Procedure After the Hearing. If a hearing is held, after the close of the hearing record, the Administrative Law Judge will issue a report on the proposed rule. You may ask to be notified of the date when the judge's report will become available, and can make this request at the hearing or in writing to the Administrative Law Judge. After the report is issued, the MPCA Board will make the final decision on whether to adopt the rule. You may also ask to be notified of the date on which the MPCA adopts the rule and files it with the Secretary of State, and can make this request at the hearing or in writing to the MPCA contact person stated above.

Order. I order that the rulemaking hearing be held at the date, time and location listed above.

Peder A. Larson Commissioner

7039.0010 SCOPE.

The purpose of this chapter is to implement the program created by *Minnesota Statutes*, section 115A.9651. This chapter establishes the procedures that the Listed Metal Advisory Council will follow for review of specified products.

7039.0020 DEFINITIONS.

- Subpart 1. Scope. The terms used in this chapter have the meanings given them in *Minnesota Statutes*, section 115A.9651, and in this part.
- Subp. 2. Art supply. "Art supply" means a specified product which is packaged or sold for individual use and which is intended for use by individuals engaged in the production of works of art which are not mass produced.
- <u>Subp. 3.</u> Certification of compliance. "Certification of compliance" has the meaning given in <u>Minnesota Statutes</u>, section 115A.9651, subdivision 3.
 - Subp. 4. Chair. "Chair" means chair of the council.
- Subp. 5. Council. "Council" means the Listed Metals Advisory Council created by Minnesota Statutes, section 115A.9651, subdivision 5.
- <u>Subp. 6.</u> Commissioner. "Commissioner" means the commissioner of the Minnesota Pollution Control Agency or staff delegated by the commissioner to perform the duties of the commissioner.
 - Subp. 7. Days. "Days" means calendar days.
 - Subp. 8. Essential product. "Essential product" has the meaning given in Minnesota Statutes, section 115A.9651, subdivision 2.
- Subp. 9. Exempt product. "Exempt product" means a product which has been subject to a decision under *Minnesota Statutes*, section 115A.965, subdivision 3, paragraph (b) or (c), for the duration of that decision and subject to any conditions on that decision.
- Subp. 10. Intentionally introduce. "Intentionally introduce" has the meaning given in *Minnesota Statutes*, section 115A.9651, subdivision 2.
 - Subp. 11. Listed metal. "Listed metal" has the meaning given in Minnesota Statutes, section 115A.9651, subdivision 2.
 - Subp. 12. Listed product. "Listed product" has the meaning given in Minnesota Statutes, section 115A.9651, subdivision 2.
 - Subp. 13. New product. "New product" has the meaning given in Minnesota Statutes, section 115A.9651, subdivision 2.
 - Subp. 14. Official. "Official" has the meaning given in Minnesota Statutes, section 115A.9651, subdivision 2.
- Subp. 15. Prohibited products list. "Prohibited products list" means the list of listed products established by Minnesota Statutes, section 115A.9651, subdivision 4. "Prohibited products" are those products which have been discontinued or reformulated to eliminate the listed metals and which therefore no longer meet the definition of a specified product.
- Subp. 16. Specified product. "Specified product" has the meaning given in *Minnesota Statutes*, section 115A.9651, subdivision 2, paragraph (i).
- Subp. 17. **Temporary member.** "Temporary member" means a person appointed to the council pursuant to the procedure established in *Minnesota Statutes*, section 115A.9651, subdivision 5, paragraph (f).

7039.0030 OFFICERS AND DUTIES.

- Subpart 1. Officers. The chair of the council is appointed by the commissioner. The chair may appoint a vice-chair. The vice-chair shall discharge the duties of the chair during the absence or disability of the chair.
 - Subp. 2. Vacancies. Upon vacancy of the chair of the council, the commissioner shall appoint a new chair.
- Subp. 3. **Removal.** Any council member may be removed from office by the commissioner as provided in *Minnesota Statutes*, section 15.059, subpart 4.
- Subp. 4. Execution of documents. Recommendations to the commissioner and other documents approved by the council pursuant to law shall be executed on the council's behalf by the chair. In the absence of the chair, the vice-chair or any permanent member of the council who has received approval from the chair may sign the document on behalf of the council.

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7039.0040 COUNCIL MEETINGS.

- <u>Subpart 1.</u> Regular meetings. The council shall meet at a date, place, and time set by the council. The chair may direct that any regular meeting be canceled, postponed, or advanced. The chair may appoint subcommittees.
- <u>Subp. 2.</u> Special meetings. The chair may call a special meeting of the council when the chair deems it necessary to accomplish council business.
- Subp. 3. Quorum. A majority of council members shall constitute a quorum. A quorum must be present to transact business. When temporary members have been appointed and the issue before the council concerns the product or product group that the temporary members were appointed to consider, a quorum consists of a majority of the members of the council, including both temporary and permanent members.
- Subp. 4. Presiding officer. The chair shall preside at council meetings and shall determine the limits of time and the relevancy of discussion or debate on any matter before the council. If both the chair and vice-chair are absent, the members present shall elect a presiding officer to serve for that meeting or until the chair or vice-chair arrives.
- Subp. 5. Voting. A majority vote by members present for the vote is binding. All members present shall vote or abstain on every matter presented for decision.
- <u>Subp. 6.</u> Public participation at meetings. <u>Meetings of the council shall be open to the public.</u> <u>Participation by persons other than members of the council shall be at the request of the chair. The chair may limit testimony by persons other than council members as needed for efficient and timely conduct of council business.</u>
- <u>Subp. 7.</u> Parliamentary procedure. Except as specifically provided in this chapter, Robert's Rules of Order shall govern questions of parliamentary procedure that arise.
 - Subp. 8. Record of meetings. The council shall keep full and accurate minutes of meetings.
- Subp. 9. Material to be considered by council. Material for consideration by the council must be submitted to the staff of the council at least two working days before the council meeting to allow for copying and distribution to council members, unless the chair has given authorization to do otherwise.

7039.0050 CONFLICT OF INTEREST.

No permanent or temporary member of the council who is an employee of a manufacturer or user of a specified product may sit in consideration of that product. As used in this part, "employee" includes officers and directors. No permanent or temporary council member who has a direct and substantial financial interest relating to any matter before the council shall vote on the matter.

7039.0060 TRADE SECRET INFORMATION.

- Subpart 1. Prior identification of trade secret information required. If a person wishes the council to consider information which the person considers to be trade secret information as defined in *Minnesota Statutes*, section 13.37, subdivision 1, paragraph (b), the person shall first submit that information to the staff of the council with a cover letter that specifically identifies those portions of the information that the person wishes to have treated as nonpublic data and gives the reasons why the person believes that the information meets the definition of trade secret information and the reasons why the person believes that submission of the trade secret information is necessary to the business of the council. No information received by the council may be treated as trade secret information unless it is identified as such as provided in this part.
- Subp. 2. Commissioner response. Following receipt of information identified as trade secret information, the council staff shall review that information and make a preliminary finding with regard to whether the information meets the requirements of *Minnesota Statutes*, section 13.37, subdivision 1, paragraph (b). Unless otherwise agreed to by the submitter, the commissioner shall notify the submitter of the commissioner's preliminary determination within ten working days during which time the information shall be treated as nonpublic. If the finding is that the information should be classified as nonpublic, the staff shall notify the submitter and shall thereafter maintain the information as nonpublic. If the finding is that the information should be classified as public, the staff shall notify the submitter and allow the submitter to (1) supplement the rationale for treatment of the information as nonpublic. (2) request that the information be returned to the submitter, or (3) agree to the classification of the information as public. If a submitter disagrees with the decision of the commissioner under this part, the submitter may request a commissioner of administration advisory opinion as provided in *Minnesota Statutes*, section 13.072. If no advisory opinion is requested, the submitter agrees to comply with the interpretation of the commissioner. All parties shall abide by the decision provided under *Minnesota Statutes*, section 13.072.
- Subp. 3. Use of nonpublic information at council meetings. As provided by Minnesota Statutes, section 471.705, meetings may not be closed to discuss data that are not public data, except as specifically provided in Minnesota Statutes, section 471.705. The council shall avoid public dissemination of trade secret information by using redacted or summary data, except as necessary to conduct the business of the council.

7039.0070 REQUIRED REPORTS AND CERTIFICATIONS.

Subpart 1. Submittals required. By July 1, 1998 (for manufacturers), or August 15, 1998 (for users), for all specified products that have not been identified as essential products or exempt products under *Minnesota Statutes*, section 115A.9651, subdivision 6, paragraph (f), a manufacturer or user of a specified product must submit a certification that the product no longer contains listed metals as provided in *Minnesota Statutes*, section 115A.9651, subdivision 3, or a product review report as provided in *Minnesota Statutes*, section 115A.9651, subdivision 6. Other entities such as manufacturer associations or distributors may prepare a product review report on behalf of a user or manufacturer or group of users or manufacturers, but the product review report must be signed by an official of each manufacturer or user represented by the report.

Subp. 2. Product review reports. Following receipt of product review reports as provided in subpart 1, the commissioner shall review the reports for completeness and to verify that each product is the subject of an appropriate report. If the product review report is not complete, the commissioner shall indicate in writing that the report is incomplete and shall indicate the information that is needed. Product review reports are required for each product as defined by statute, except that if the formulation uses and limitations for an entire product line are substantially similar, the product line may be the subject of one product review report. In determining if a product line can be addressed with one report, the commissioner shall consider if the products have substantially similar formulations, uses, and limitations. If there is a dispute about the number of product review reports due, the commissioner shall notify the submitter of the commissioner's preliminary determination. Following an opportunity to comment, the commission shall consider any additional information received and shall issue a decision stating the number of product review reports required.

Subp. 3. Contents of product review reports. Each product review report shall contain at least the following:

- A. a policy statement articulating upper management support for eliminating or reducing intentional introduction of listed metals into its products;
 - B. a description of the product and the amount of each listed metal distributed for use in this state;
 - C. a description of past and ongoing efforts to eliminate or reduce the listed metal in the product;
- D. an assessment of options available to reduce or eliminate the intentional introduction of the listed metal, including any alternatives to the specified product that do not contain the listed metal, perform the same technical function, are commercially available, and are economically practicable;
- E. a statement of objectives in numerical terms and a schedule for achieving the elimination of the listed metals and an environmental assessment of alternative products;
 - F. a listing of options considered not to be technically or economically practicable; and
 - G. certification attesting to the accuracy of the information in the report signed and dated by an official of the manufacturer or user.
- Subp. 4. Annual progress reports and fee. By July 1, 1999, and annually thereafter until the commissioner takes action under *Minnesota Statutes*, section 115A.9651, subdivision 9, the manufacturer, user, or other entity submitting the report on behalf of manufacturers and users must submit a progress report and fee. The progress report shall update all information required in the product review report. As used in this part, an "action" by the commissioner under *Minnesota Statutes*, section 115A.9651, subdivision 9, includes a decision to prohibit the specified product under *Minnesota Statutes*, section 115A.9651, subdivision 9, paragraph (a), as recommended by the council; a decision not to prohibit the specified product in opposition to the recommendation of the council; and a decision to accept the recommendation of the council not to prohibit a particular product.

7039.0080 DUTIES OF COUNCIL WITH REGARD TO EXISTING PRODUCTS.

- Subpart 1. Recommendations to commissioner. The council shall recommend to the commissioner the prohibition for distribution for sale or use in this state an existing specified product that is not an essential product in accordance with this part. A recommendation that the commissioner take action shall include all information required by *Minnesota Statutes*, section 14.131, that the council can ascertain. The council may also recommend to the commissioner that a product it has considered not be prohibited for distribution for sale or use in this state.
- <u>Subp. 2.</u> Selection of specified products for consideration. The <u>council shall review product review reports submitted as required under *Minnesota Statutes*, section 115A.9651, subdivision 6, to determine which specified products or product groups should be considered for prohibition as provided in subpart 1. The council shall consider potential environmental impacts in prioritizing its review, including the amount of the product or product group used in the state, the amount of listed metals, the toxicity rel-</u>

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ative to other specified products, and the likely ability of the manufacturers and users of the specified product to switch to a less environmentally harmful alternative.

- Subp. 3. Schedule for consideration of specified products or product groups. The permanent members of the council shall prioritize the council's review of a specified product for consideration and shall publish a notice in the *State Register* by October 1, 1998, identifying those specified products, or groups of products, which will be reviewed by July 1, 2000. By October 1, 2000, the council shall publish a notice in the *State Register* identifying those remaining specified products, or groups of products, which will be reviewed by July 1, 2005. Following publication of the products or product groups that will be considered by the council, the council shall establish a detailed schedule for consideration. The council shall amend the detailed schedule as information changes or as provided by subpart 4 or as new products are submitted for review or as otherwise appropriate. The revised detailed schedule shall be available upon request to council staff.
- Subp. 4. Expedited review requests. A manufacturer or user who has submitted a product review report may request, in writing, an expedited review by the council. The council shall consider requests for expedited review at the next council meeting. The council shall grant expedited review if it finds that delay until the time scheduled for consideration is economically or administratively burdensome for the manufacturer or user, or that expedited consideration will not significantly disrupt the schedule. When the council grants a request for expedited review, it shall notify the submitter and amend the schedule.
- Subp. 5. **Temporary members.** Following publication of the schedule under subpart 3, the commissioner shall appoint temporary members in an even number up to six for the first product or product group to be considered. Thereafter, the commissioner shall appoint temporary members at the request of the chair of the council. The chair shall request such appointments as necessary to accommodate the schedule of consideration of products and product groups.
- <u>Subp. 6.</u> Notice to manufacturers and users. <u>Following appointment of the temporary members, the council shall notify manufacturers and users of the product or product group to be considered and invite their participation before the council. Persons receiving notice under this subpart shall have 30 days to supplement product reports or otherwise provide the council with information relevant to the product or product group under consideration, and request an oral presentation.</u>
- Subp. 7. Standard of review for existing products. The council's advice to the commissioner shall be based on an evaluation of the environmental impact of the product or product group and the ability of the manufacturer or user to reduce or eliminate the listed metal. Before making a recommendation to the commissioner as provided in subpart 1, the council must conclude that:
- A. there is an alternative to the specified product that does not contain the listed metal that performs the same technical function, is commercially available, and is economically practicable; and
 - B. replacement of the product with the alternative will result in an environmental benefit in the state.
- <u>Subp. 8.</u> **Preliminary report.** <u>Before making a recommendation to the commissioner, the council shall make available its recommendation for at least 30 days to receive written comments from interested persons.</u>
- Subp. 9. Final report. Following receipt of comments on the draft recommendation, the council shall make its recommendation to the commissioner. The recommendation may be to prohibit the distribution for sale or use in this state or not to prohibit such distribution.

7039.0090 DUTIES OF COUNCIL WITH REGARD TO NEW PRODUCTS.

- Subpart 1. Schedule for consideration of new products. Within 30 days of receipt of a new product review report, the commissioner shall determine if that report is complete. If the report is not complete, the commissioner shall indicate in writing that the report is incomplete and shall indicate the information that is needed. No new product may be distributed in the state until the commissioner has determined that a complete product review report and fee have been received. When the commissioner determines that a complete new product review report has been received, the commissioner shall notify the chair and request that the chair establish a schedule for consideration of the new product. In determining the schedule for consideration, the chair shall consider whether the new product is similar to products or product groups which are already scheduled for consideration, such that common consideration would be efficient, or if the new product is similar to products already considered by the council, in which case rapid consideration may be given based on the established record and without the appointment of temporary council members. If the chair recommends consideration based on the established record and without the appointment of temporary members, the commissioner must approve the decision of the chair.
- Subp. 2. Notice. The chair shall publish notice of its decision to consider a new product by amending the detailed schedule as provided in part 7039.0080.
- Subp. 3. **Procedure.** The council shall follow the procedures established for consideration of products and product groups when considering a new product, except that if approved by the commissioner, no temporary members need be appointed.

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- <u>Subp. 4.</u> Standard of review for new products. The council's advice to the commissioner shall be based on an evaluation of the environmental impact of the product and the ability of the manufacturer or user to reduce or eliminate the listed metal. Before making a recommendation that the commissioner, the council must conclude that:
- A. there is an alternative to the specified product that does not contain the listed metal that performs that same technical function, is commercially available, and is economically practicable, and replacement of the product with the alternative will result in an environmental benefit in the state; or
- B. if there is no alternative to the new product, that the use of the listed metal in the new product presents a significant threat to the safe and efficient operation of waste facilities, or use of the listed metal does not increase the useful life span of the new product, reduce the overall toxicity of the final product or of material used in the production of the final product, or otherwise provide a net environmental benefit to the state.

7039.0100 RULEMAKING RECORD.

The commissioner may adopt a council recommendation as the agency's statement of need and reasonableness. Persons seeking to participate in any rulemaking proceeding under *Minnesota Statutes*, section 115A.9651, subdivision 11, must show, for any information submitted for consideration in the rulemaking proceeding that was not submitted for consideration of the council, that the information was either new or that reasonable justification exists as to why the information was not submitted for consideration of the council. If the administrative law judge determines that the showing required by this part has not been made, no consideration shall be given to the information in determining the need for and reasonableness of the proposed rule.

7039.0110 ESSENTIAL PRODUCTS REVIEW.

- Subpart 1. **Verification.** The commissioner shall publish in the <u>State Register a list of essential products for which the commissioner has received certification pursuant to Minnesota Statutes, section 115A.9651, subdivision 7, as provided in that subdivision. If the commissioner has reason to believe that a product identified as an essential product does not meet the requirements for an essential product, the commissioner shall give notice to the manufacturer or user and provide an opportunity to respond.</u>
- <u>Subp. 2.</u> Change in status. A manufacturer or user who receives information or otherwise knows that a product certified as an essential product no longer meets that definition shall notify the commissioner within 60 days of receipt of the information and shall thereafter no longer use the product which formerly met the definition without first submitting a product review report.
- Subp. 3. New essential products, notice. A new user of a product which has been certified to the commissioner as an essential product may use the product for the required application without submittal of a certification. A new manufacturer of an essential product must submit a certification. If, after filing the January 1, 1998, certification required by *Minnesota Statutes*, section 115A.9651, subdivision 7, a new essential product is required (for example, a new military specification is promulgated) a manufacturer or user of that new essential product shall submit a certification within 60 days of receiving notice that the use is required.

7039.0120 TERMINATION OF COUNCIL.

As provided by statute, the duties given to the council under this chapter shall be performed by the commissioner following termination of the council on June 30, 2006.

Exempt Rules

Exempt rules are excluded from the normal rulemaking procedures (*Minnesota Statutes* §§ 14.386 and 14.388). They are most often of two kinds. One kind is specifically exempted by the Legislature from rulemaking procedures, but approved for form by the Revisor of Statutes, reviewed for legality by the Office of Administrative Hearings, and then published in the *State Register*. These exempt rules are effective for two years only.

The second kind of exempt rule is one adopted where an agency for good cause finds that the rulemaking provisions of *Minnesota Statutes*, Chapter 14 are unnecessary, impracticable, or contrary to the public interest. This exemption can be used only where the rules:

- (1) address a serious and immediate threat to the public health, safety, or welfare, or
- (2) comply with a court order or a requirement in federal law in a manner that does not allow for compliance with *Minnesota Statutes* §§ 14.14-14.28, or
- (3) incorporate specific changes set forth in applicable statutes when no interpretation of law is required, or
- (4) make changes that do not alter the sense, meaning, or effect of the rules.

These exempt rules are also reviewed for form by the Revisor of Statutes, for legality by the Office of Administrative Hearings and then published in the *State Register*. In addition, the Office of Administrative Hearings must determine whether the agency has provided adequate justification for the use of this exemption. Rules adopted under clauses (1) or (2) above are effective for two years only.

The Legislature may also exempt an agency from the normal rulemaking procedures and establish other procedural and substantive requirements unique to that exemption.

Department of Human Services

Adopted Exempt Permanent Rules Relating to Diagnostic Related Group Classification

Notice of Revision of Diagnosis Related Groups Classifications for Inpatient Hospital Payment, *Minnesota Rules*, part 9500.1100, subparts 20b to 20f pursuant to *Minnesota Statutes*, section 256.969, subdivision 2

This notice provides information about revisions of the diagnostic categories for inpatient hospital services under the Medical Assistance (MA), General Medical Care (GAMC) and MinesotaCare Programs.

Minnesota Statutes, section 256.969, subdivision 2 and Minnesota Rules, part 9500.1110, subpart 2 authorize the Commissioner of Human Services to reconfigure the diagnostic categories after notice in the State Register and a 30-day comment period.

The diagnostic category revisions are based on a review of 1994/95 base year claims that will be used to establish the January 1, 1999 rates. The change in base year makes it necessary in some cases to combine previously separate diagnostic categories which had either zero or very low claim counts. Categories have been added to reduce the variances in cost within the diagnostic categories and to create diagnostic categories for high-usage diagnoses and procedures.

The diagnostic category revisions are effective for admissions occurring on or after January 1, 1999. Aggregate payments to the industry for inpatient services are not altered by these revisions. A report of the relative values for the diagnostic categories will be sent to each hospital with the rate notice by December 1, 1998.

Written comments on the diagnostic category revisions may be sent to:

Department of Human Services Payment Policy Division 444 Lafayette Road Saint Paul, Minnesota 55155-3853

Telephone calls about the diagnostic category changes may be directed to:

Ann Gjerstad (651) 297-2814 or Richard Tester (651) 296-5596

9500.1100 **DEFINITIONS**.

[For text of subps 1 to 20a, see M.R.]

Subp. 20b. **Diagnostic categories eligible under the medical assistance program.** The following diagnostic categories are for persons eligible under the medical assistance program except as provided in subpart 20c, 20d, 20e, or 20f:

DIAGNOSTIC
CATEGORIES

WITHIN
DIAGNOSTIC
CATEGORIES

DIAGNOSTIC
CATEGORIES

CATEGORIES

CLASSIFICATION
OF DISEASES,

9th Ed., CLINICAL MODIFICATIONS

CODES

A. Nervous System Conditions

(1) [Reserved for future use]

 $\frac{\text{Treated with craniotomy}}{\text{age} \ge 17 \text{ and cochlear}}$

<u>implants</u> <u>001, 002, 049</u> <u>049 includes</u>

20.96-20.98 only

(2) [Reserved for future use]

Treated with craniotomy,

<u>age 0-17</u> 003

(3) Treated with Craniotomy 001-003

[Reserved for future use]

(4) Treated with Spinal

Procedure 004

[Reserved for future use]

(5) Treated with Other

Surgical Procedure 005-008

[Reserved for future use]

(6) Nervous system neoplasms 010, 011

(7) Cranial and Peripheral

Nerve Disorders 018-019

[Reserved for future use]

(8) Nervous System Infection

except Viral Meningitis 020

[Reserved for future use]

(9) Viral Meningitis 021

[Reserved for future use]

(10) Seizure and Headache

Age > 17 024-025

[Reserved for future use]

(11) Seizure and Headache

Age 0-17 026

[Reserved for future use]

Exempt Rules _____

•	
(12) Traumatic Stupor with	
Coma > 1 hour	027
[Reserved for future use]	
(13) Traumatic Stupor with	
Coma < 1 hour, Age 0-17	030
[Reserved for future use]	
(14) Concussion	031-033
[Reserved for future use]	001 000
(15) Other Nervous System	
Conditions	009, 012-017,
[Reserved for future use]	009, 012 017, 022 023,
inceserved for future disci	028-029,
	034-035
(16) Treated with other	051-055
	004 005 007
surgical procedures	<u>004, 005, 007</u>
(17) Peripheral, cranial, and	
other nerve procedure	000
without cc	<u>008</u>
(18) Other nervous system	
<u>diseases</u> <u>treated</u>	
without surgery	<u>013, 015, 017</u>
(19) Spinal disorders/	
<u>injuries</u> and <u>nervous</u>	
system infection	<u>009, 020</u>
(20) Specific cerebral	
vascular and	
<u>cranial/peripheral</u>	
<u>nerve</u> <u>disorders</u>	<u>014, 018, 019</u>
(21) <u>Degenerative</u> disorders	
and nonspecific	
<u>cerebral vascular</u>	
disorders with cc	<u>012, 016</u>
(22) Seizure and headache	024-026
(23) Traumatic stupor and	
$\frac{1}{\text{coma}} \ge \frac{1}{1} \text{ hr and coma}$	
≤ 1 hour, age ≥ 17	
with cc	027, 028
(24) Viral meningitis,	<u>527, 525</u>
hypertensive	
encephalopathy.	
concussion age ≥ 17 with	
cc, other stupor,	
and coma	021-023,
and coma	029, 031
(25) Conguesian aga 0.17	029, 031
(25) Concussion, age 0-17 or \geq 17 without cc	022 022
	<u>032, 033</u>
(26) Stupor and coma, $\leq 1 \text{ hr}$,	
age 0-17 and other	
disorders of the	020 024 025
<u>nervous</u> <u>system</u>	<u>030, 034, 035</u>
B. Eye Diseases and Disorders	036-048
C. Ear, Nose, Throat, and Mouth Diseases and Disc	arders
	nucis
(1) Treated with	
tonsillectomy/	050 060
adenoidectomy only	059, 060

(2) Treated with		
myringotomy with tube	0.10	
insertion, age 0-17	062	
(3) Otitis media and URI	068-070	
(4) Dental and oral disorders	185-187	
(5) Other Ear, Nose,		
Throat, and Mouth Conditions	040 059 061	
[Reserved for future use]	049-058, 061, 063-067,	
[Reserved for future use]	003-007; 071-074;	
	168 169	
(6) Other ear, nose, throat,	100-107	
and mouth conditions	049-058, 061,	Codes in
und modul conditions	063-067, 071-	DRG 049
	<u>074, 168, 169</u>	Except
		20.96-20.98
D. Bosnivotowy System Conditions		
D. Respiratory System Conditions (1) [Reserved for future use]		
Treated with ventilator		
$\frac{\text{Support}}{\text{Support}} \le 96 \text{ hrs}$	475	excludes
$\frac{\text{support}}{\text{support}} \leq 20 \text{ ms}$	473	96.72
(2) Treated with Ventilator		<u> 20.72</u>
Support	475	
[Reserved for future use]		
(3) [Reserved for future use]		
Treated with ventilator		
support 96+ hrs	<u>475</u>	<u>includes</u>
		<u>96.72</u>
(4) Treated with		
tracheostomy except		
for face, mouth,		
and neck diagnoses	483	
(5) Treated with Other		
Surgical Procedure	075-077, 482	
[Reserved for future use]	002	
(6) Respiratory neoplasms	082	
(7) Simple Pneumonia and	000 000	
Pleurisy, Age > 17	089-090	
[Reserved for future use] (8) Simple Pneumonia and		
Pleurisy, Age 0-17	091	
[Reserved for future use]	071	
(9) Other Respiratory		
System Conditions	078-081,	
[Reserved for future use]	083-088,	
	092-097,	
	099-102	
(10) Treated with tracheo-		
stomy for face, mouth,		
and neck diagnoses	<u>482</u>	

Exempt Rules _____

E.

(11) Simple pneumonia and	
pleurisy, age 0-17 and	
$\underline{\text{age}} \ge 17 \text{ without } \underline{\text{cc}}$	<u>090, 091</u>
(12) Major chest procedures	
and OR procedures	
with cc	<u>075, 076</u>
(13) Major respiratory	
diseases and	
disorders treated	
without surgery	078, 079, 087
······································	<u>092, 101</u>
(14) Other OR procedures	<u> </u>
without cc	077
(15) Specific respiratory	<u>077</u>
system diseases and	
other diseases	
with cc	<u>080, 081, 083</u>
with cc	
	<u>085, 088, 089</u>
(16) Danisata wa asata wa	<u>094, 099</u>
(16) Respiratory system	
diseases without cc and	004 006 002
bronchitis age ≥ 17	<u>084, 086, 093</u>
	<u>095-097, 100,</u>
	<u>102</u>
Circulatory System Conditions	
(1) [Reserved for future use]	
Major cardiac	
<u>surgeries</u>	104, 106, 108
(2) [Reserved for future use]	<u> </u>
Other cardiac	
interventional and	
surgical procedures	<u>105, 107, </u>
surgical procedures	110, 115
(3) [Reserved for future use]	110, 113
Percutaneous cardiac	
and other vascular	
procedures	111 112 114
<u>procedures</u>	111, 112, 114
(4) Tracked social Walls	<u>116-120, 479</u>
(4) Treated with Vein	110
Ligation and Stripping	119
[Reserved for future use]	
(5) Treated with Other	404.400
Surgical Procedure	104-108,
[Reserved for future use]	110-118,
	120, 478, 479
(6) Deep Vein	
Thrombophlebitis	128
[Reserved for future use]	
(7) Circulatory Disorders/	
Endocarditis	121-126
[Reserved for future use]	
(8) Cardiae Congenital and	
Valvular Disorders	
Age 0-17	137
[Reserved for future use]	
(9) Other Circulatory	
System Conditions	127, 129-136,
[Reserved for future use]	127, 125–130, 138–145

(10) Major cardiac disorders treated without surgery	122-125, 127, 129, 137, 138, 144
(11) Acute MI and congenital	
heart disease with cc	
and endocarditis	<u>121, 126, 135</u>
(12) Other circulatory	
<u>conditions</u>	<u>132-134, 136,</u>
	<u>139-143, 145</u>
(13) Deep vein thrombo-	
phlebitis and peripheral	
vascular disorders	<u>128, 130, 131</u>
(14) Procedures for vascular	
diseases and conditions	<u>113, 478</u>
	[For text of item F, see M.R.]
	[1 of text of item 1, see Wife.]
G. Hepatobiliary System Conditions	
(1) Treated with	101 201
surgical procedure	191-201,
(2) FD 1.6 C 4 1	493, 494
(2) [Reserved for future use]	
(3) Cirrhosis and alcoholic	202
hepatitis	202
(4) Malignancy of	
hepatobiliary system	202
or pancreas	203
(5) Disorders of pancreas	204
except malignancy	204
(6) Other disorders of	-0
the liver	205, 206
(7) Disorders of the	
biliary tract	207, 208
(8) [Reserved for future use]	
H. Diseases and Disorders of the Musculoskeleta	l System and Connective Tissues
(1) Treated with major joint	
and limb reattachment	
procedures	209, 471, 491
(2) Treated with hip and	
femur procedures or	
amputation	210-213
(3) Treated with Back and	
Neck Procedures	214-215
[Reserved for future use]	
(4) Treated with Biopsy of	
Musculoskeletal System	
and Connective Tissue	216
[Reserved for future use]	
(5) Treated with wound	
debrid or skin graft	
except hand	217

Exempt Rules _____

(6) Treated with lower	
extremity and humer	
procedure except hip,	
foot, femur	218-220
(7) Treated with Knee	
Procedure	221-222
[Reserved for future use]	
(8) Treated with upper	
extremity procedure	223, 224
(9) Treated with foot	
procedure	225
(10) Treated with soft tissue	
procedure	226, 227
(11) Treated with Hand or	
Wrist Procedure	228-229
[Reserved for future use]	
(12) Treated with Local	
Excision and Removal	
of Interior Fix Devices	
of Hip and Femur	230
[Reserved for future use]	
(13) Treated with Local	
Excision and Removal	
of Interior Fix Devices	
except Hip and Femur	231
[Reserved for future use]	
(14) Treated with Other	
Surgical Procedures	232-234
[Reserved for future use]	
(15) Other musculoskeletal	
system and connective	
tissues conditions	235-256
(16) [Reserved for future use]	
(17) Spinal fusion: combined	
anterior/posterior	
and fusion with cc	496, 497
(18) Treated with back and	<u> 170,</u> <u>177</u>
neck procedures	<u>498, 499</u>
(19) Treated with knee	
procedure	<u>501-503</u>
(20) Treated with biopsy or	<u> </u>
other surgical	
procedures	216, 233, 234
(21) Hand and wrist	<u>210, 233, 231</u>
procedures and carpal	
tunnel release	006, 228, 229
(22) Treated with local	000, <u>220, 229</u>
excision and removal of	
internal fix devices	230, 231
(23) Arthroscopy, other back	<u>230, 231</u>
and neck procedures	
without cc	<u>232, 500</u>
without cc	
	[For text of items I to P, see M.R.]

Q. Myeloproliferative Diseases and Disorders, Poorly Differentiated Malignancy and other Neoplasms Not Elsewhere Classified

(1) Treated wit	h
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Chemotherapy without Acute Leukemia as

Secondary Diagnosis 410

[Reserved for future use]

(2) Treated with chemotherapy

with acute leukemia as secondary diagnosis 492

(3) Other Treatments for

Myeloproliferative

Diseases and Disorders
[Reserved for future use] 400-409,
411-414, 473

(4) Treated with radiotherapy

or chemotherapy w/o

<u>acute leukemia</u> <u>409, 410</u>

(5) [Reserved for future use]

(6) Surgical treatments for

myeloproliferative

<u>diseases and disorders</u> 400-402, 406-408

(7) Other nonsurgical

treatments for

 $\underline{myeloproliferative}$

<u>diseases and disorders</u> 403-405, 411-414, 473

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

UU. Organ Transplants

(1) Kidney Transplant 302

[Reserved for future use]

(2) Other Transplants 103, 480-481

[Reserved for future use]

 (3) Kidney and lung
 302, 495

 (4) Heart and liver
 103, 480

 (5) Bone marrow transplant
 481

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

Subp. 20c. Medical assistance covered diagnostic categories under the aid to families with dependent children Minnesota family investment program. The following diagnostic categories are for persons eligible for medical assistance under the aid to families with dependent children Minnesota family investment program, except as provided in subpart 20d, 20e, or 20f:

Exempt Rules =

DIAGNOSTIC CATEGORIES DRG NUMBERS WITHIN DIAGNOSTIC CATEGORIES INTERNATIONAL
CLINICAL
DIAGNOSIS
CODES (9th Ed.)
CLASSIFICATION
OF DISEASES,
9th Ed., CLINICAL
MODIFICATIONS
CODES

A. Nervous System Conditions

(1) [Reserved for future use]

Treated with craniotomy

 $\frac{age \ge 17 \text{ and}}{cochlear \text{ implants}}$

001, 002, 049

049 includes 20.96-20.98 only

(2) [Reserved for future use]

Treated with craniotomy, age 0-17

<u>age 0-17</u>
(3) Treated with Craniotomy 003
001-003

[Reserved for future use]

(4) Treated with Spinal

Procedure 004

[Reserved for future use]

(5) Treated with Other

Surgical Procedure 005-008

[Reserved for future use]

(6) Nervous System Neoplasms 010 011

[Reserved for future use]

(7) Cranial and Peripheral

Nerve Disorders 018-019

[Reserved for future use]

(8) Nervous System Infection

except Viral Meningitis 020

[Reserved for future use]

(9) Viral meningitis

[Reserved for future use]

(10) Seizure and headache

age >17 024, 025

(11) Seizure and headache

age 0-17 026

(12) Traumatic Stupor with

Coma > One hour 027

[Reserved for future use]

(13) Traumatie Stupor with

Coma < One hour,

Age 0-17 030

[Reserved for future use]

(14) Concussion 031-033

[Reserved for future use]

(15) Other Nervous System

 Conditions
 009, 012 017,

 [Reserved for future use]
 022-023,

 028-029,

034-035

021

(16) <u>Cerebral vascular and</u> <u>CNS</u> <u>disorders</u> <u>treated</u>		
without surgery	<u>013-015, 017,</u> <u>019, 021, 022</u>	
(17) Treated with other		
surgical procedures	<u>004, 007, 008</u>	
(18) Neoplasms and other		
nervous system	010 011 024	
<u>disorders</u>	010, 011, 034, 035	
(19) <u>Infection</u> , <u>traumatic</u>		
stupor, and coma ≥ 1 hr		
and other major	000 012 016	
<u>disorders</u>	<u>009, 012, 016,</u>	
(20) Styron and some of the	<u>018, 020, 027</u>	
(20) Stupor and coma ≤ 1 hr and concussion, age ≥ 17	022 028 022	
(21) Concussion, age 0 -17	023, 028-032 033	
•	036-048	
B. Eye Diseases and Disorders		
C. Ear, Nose, Throat, and Mouth Diseases and Dis (1) Treated with	orders	
Tonsillectomy/		
Adenoidectomy Only	059, 060	
(2) Treated with	037, 000	
Myringotomy with Tube		
Insertion, Age 0-17	062	
(3) Otitis media and URI	068-070	
(4) Dental and oral		
disorders	185-187	
(5) Other Ear, Nose,		
Throat, and Mouth		
Conditions	049-058, 061,	
[Reserved for future use]	063-067,	
	071-074,	
	168-169	
(6) Other ear, nose, throat,		
and mouth conditions	<u>049-058, 061,</u>	Codes in DRG
	<u>063-067, 071-</u>	049 Except
	<u>074, 168, 169</u>	<u>20.96-20.98</u>
D. Respiratory System Conditions		
(1) [Reserved for future use]		
<u>Treated</u> with ventilator		
$\underline{\text{support}} \leq \underline{96} \text{ hrs}$	<u>475</u>	excludes 96.72
(2) Treated with Ventilator		
Support 1.6	475	
[Reserved for future use]		
(3) [Reserved for future use]		
Treated with ventilator	175	includes
support 96 ± hrs	<u>475</u>	includes 96.72

Exempt Rules _____

(4) Treated with Tracheostomy	
except for Face, Mouth,	
and Neck Diagnoses	483
[Reserved for future use]	
(5) Treated with Other	
Surgical Procedure	075-077, 482
[Reserved for future use]	
(6) Respiratory Neoplasms	082
[Reserved for future use]	
(7) Simple Pneumonia and	
Pleurisy, Age > 17	089-090
[Reserved for future use]	
(8) Simple Pneumonia and	
Pleurisy, Age 0-17	091
[Reserved for future use]	
(9) Other Respiratory	
System Conditions	078 081,
[Reserved for future use]	083-088,
	092-097,
	099-102
(10) Treated with	
tracheostomy and	
pulmonary edema	
and resp failure	<u>087, 482, 483</u>
(11) Resp neoplasms,	
infections, and COPD	<u>079, 081, 082,</u>
	<u>088</u>
(12) Major chest procedures	<u>075</u>
(13) Pleural effusion,	
pulmonary embolism,	
pneumothorax, and	
other disorders	
with cc	078, 085,
	086, 092,
	<u>094, 095,</u>
	101
(14) Other OR	
procedures	<u>076, 077</u>
(15) Other respiratory	
system diseases	<u>080, 083, 084,</u>
-	089-091, 093,
	096, 097,
	099, 100,
	102
E. Circulatory System Conditions	_ _
E. Circulatory System Conditions	
(1) [Reserved for future use]	104 106 109
<u>Major cardiac surgeries</u> (2) [Reserved for future use]	<u>104, 106, 108</u>
Other cardiac and vascular	
interventional and	105 107 110
surgical procedures	105, 107, 110,
(2) [Descripted for future usel	<u>113, 115, 478</u>
(3) [Reserved for future use] Parautanaous cardina and	
Percutaneous cardiac and	
other cardiovascular	005 111 112
procedures	005, 111, 112,
	114, 116-120,

(4) Treated with	
Vein Ligation and	
Stripping	119
[Reserved for future use]	
(5) [Reserved for future use]	
(6) Deep Vein	
Thrombophlebitis	128
[Reserved for future use]	
(7) Circulatory Disorders/	
Endocarditis	121-126
[Reserved for future use]	
(8) Cardiae Congenital	
and Valvular Disorders	
Age 0-17	137
[Reserved for future use]	
(9) Other Circulatory	
System Conditions	127, 129-136,
[Reserved for future use]	138-145
(10) [Reserved for future use]	
Major cardiac disorders	
treated without surgery	121-127, 129,
	<u>135, 137, 144</u>
(11) Treated with Other	
Surgical Procedure	103-108,
[Reserved for future use]	110-118,
	120, 4 78, 4 79
(12) Other circulatory	, ,
conditions	<u>132-134, 136,</u>
	<u>138-143, 145</u>
(13) Deep vein thrombo-	
phlebitis and periph-	
eral vascular disorders	128, 130, 131
	[For text of item F, see M.R.]
Hepatobiliary System Conditions	
(1) [Reserved for future use]	
<u>Treated</u> with surgical	
<u>procedure</u>	<u>191-201,</u>
	<u>493, 494</u>
(2) [Reserved for future use]	
(3) Cirrhosis and alcoholic	
hepatitis	202
(4) Malignancy of	
hepatobiliary system	
or pancreas	203
(5) Disorders of pancreas	
except malignancy	204
(6) Other disorders of	
the liver	205, 206

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

G.

Exempt Rules ====

(7) Disorders of the biliary tract	207, 208
(8) Treated with	
Surgical Procedure	191-201, 480,
[Reserved for future use]	493-494
H. Diseases and Disorders of the Musculoskeleta (1) Treated with major joint	al System and Connective Tissues
and limb reattachment	
procedures	209, 471, 491
(2) Treated with hip and	
femur procedures or	
amputation	210-213
(3) Treated with Back and	214 215
Neck Procedures	214-215
[Reserved for future use] (4) [Reserved for future use]	
(5) Treated with wound debrid	
or skin graft except	
hand	217
(6) Treated with lower	-1.
extremity and humer	
procedures except hip,	
foot, femur	218-220
(7) Treated with Knee	
Procedure	221-222
[Reserved for future use]	
(8) Treated with upper	222 224
extremity procedure (9) Treated with foot	223, 224
procedure	225
(10) Treated with soft	223
tissue procedure	226, 227
(11) Treated with Hand or	,
Wrist Procedure	228-229
[Reserved for future use]	
(12) Treated with Local	
Excision and Removal	
of Int Fix Devices	
of Hip and Femur	230
[Reserved for future use]	
(13) Treated with Local Excision and Removal	
of Int Fix Devices	
except Hip and Femur	231
[Reserved for future use]	231
(14) [Reserved for future use]	
(15) Other musculoskeletal	
system and connective	
tissues conditions	235-256
(16) Treated with Other	
Surgical Procedures	216, 232-234
[Reserved for future use]	
(17) Spinal fusion: combined	
anterior/posterior and fusion with cc	<u>496, 497</u>
(18) Treated with back	1 70, 1 71
and neck procedures	<u>498, 499</u>
me proceduos	

(19) Treated with knee	
<u>procedure</u>	<u>501-503</u>
(20) Other surgical purcedures	
with cc and treated	
with biopsy	<u>216, 233</u>
(21) Hand and wrist	
procedures and carpal	
tunnel release	<u>006, 228, 229</u>
(22) Treated with local	
excision and removal of	
<u>internal</u> <u>fix</u> <u>devices</u>	<u>230, 231</u>
(23) Other musculoskeletal	
procedures without	
cc and arthroscopy	<u>232, 234, 500</u>
	[For tout of items I and I are M.D.]
	[For text of items I and J, see M.R.]
Kidney and Urinary Tract Conditions	[For text of items I and J, see M.K.]
Kidney and Urinary Tract Conditions (1) [Reserved for future use]	[For text of items I and J, see M.R.]
, , , , , , , , , , , , , , , , , , ,	[For text of items I and J, see M.R.]
(1) [Reserved for future use]	[For text of items I and J, see M.R.]
(1) [Reserved for future use](2) Treated with	[For text of items I and J, see M.R.]
(1) [Reserved for future use](2) Treated with prostatectomy, minor	306-314
(1) [Reserved for future use](2) Treated with	
(1) [Reserved for future use](2) Treated with prostatectomy, minor bladder, or urethral procedure	
 (1) [Reserved for future use] (2) Treated with prostatectomy, minor bladder, or urethral procedure (3) Treated with other surgical procedure (4) Renal failure 	306-314
 (1) [Reserved for future use] (2) Treated with prostatectomy, minor bladder, or urethral procedure (3) Treated with other surgical procedure 	306-314 315
 (1) [Reserved for future use] (2) Treated with prostatectomy, minor bladder, or urethral procedure (3) Treated with other surgical procedure (4) Renal failure 	306-314 315
(1) [Reserved for future use] (2) Treated with prostatectomy, minor bladder, or urethral procedure (3) Treated with other surgical procedure (4) Renal failure (5) Other kidney and urinary tract conditions (6) Treated with Kidney,	306-314 315 316
 (1) [Reserved for future use] (2) Treated with prostatectomy, minor bladder, or urethral procedure (3) Treated with other surgical procedure (4) Renal failure (5) Other kidney and urinary tract conditions 	306-314 315 316

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

302, 304

303, 305

Q. Myeloproliferative Diseases and Disorders, Poorly Differentiated Malignancy and other Neoplasms Not Elsewhere Classified

(1) Treated with

K.

Chemotherapy without
Acute Leukemia as

[Reserved for future use]

renal system procedures

for non-neopl with cc

(7) Kidney transplant and

(8) Kidney, ureter, major bladder procedure

Secondary Diagnosis 410

[Reserved for future use]

(2) Treated with

Chemotherapy with Acute Leukemia as Secondary

Diagnosis 492

[Reserved for future use]

(3) [Reserved for future use]

Exempt Rules =

(4) [Reserved for future use]

<u>Treated</u> with radiotherapy

or chemotherapy 409, 410, 492

(5) Other Treatments for

Myeloproliferative

 Diseases and Disorders
 400-409,

 [Reserved for future use]
 411-414,

 473, 481

(6) Surgical treatments for

myeloproliferative

<u>diseases and disorders</u> 400-402, 406-408

(7) Other nonsurgical

<u>treatments</u> <u>for</u> <u>myeloproliferative</u>

<u>diseases and disorders</u> 403-405, 411-414, 473

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

II. Unrelated Operating Room Procedure Unrelated to Principal Diagnosis

(1) Extensive 468

[Reserved for future use]

 (2) Nonextensive
 476, 477

 (3) Extensive, age ≥ 17
 468

 (4) Extensive, age 0-17
 468

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

UU. [Reserved for future use] Organ Transplants

(1) Heart, liver, bone

marrow, lung 103, 480, 481,

<u>495</u>

(2) [Reserved for future use]

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

Subp. 20d. **Diagnostic categories for persons eligible under the general assistance medical care program.** The following diagnostic categories are for persons eligible under the general assistance medical care program except as provided in subpart 20e or 20f:

DIAGNOSTIC
CATEGORIES
WITHIN
DIAGNOSTIC
CATEGORIES
DIAGNOSTIC
CATEGORIES
CATEGORIES
CATEGORIES
CLASSIFICATION
OF DISEASES,
9th Ed., CLINICAL
MODIFICATIONS

A. Nervous System Conditions

(1) [Reserved for future use]

(2) [Reserved for future use]

Treated with craniotomy

and cochlear implants 001-003, 049 049 includes

20.96-20.98 only

CODES

(3) Treated with Craniotomy 001-003

[Reserved for future use]

(4) Treated with Spinal Procedure [Passaying for future used]	004
[Reserved for future use] (5) Treated with Other	
Surgical Procedure [Reserved for future use]	005-008
(6) Nervous system neoplasms	010, 011
(7) Cranial and Peripheral Nerve Disorders	018-019
[Reserved for future use] (8) Nervous system infection	
except viral meningitis (9) Viral meningitis	020 021
(10) [Reserved for future use]	021
(11) [Reserved for future use](12) Traumatie Stupor with	
Coma ← One Hour [Reserved for future use	027
(13) [Reserved for future use] (14) Concussion	031-033
[Reserved for future use] (15) [Reserved for future use] (16) Seizure and headache	024-026
(17) Other Nervous System	
Conditions [Reserved for future use]	009, 012 017, 022 023, 028 030, 034 035
(18) Treated with other	
surgical procedures (19) CNS and spinal disorders	004, 005, 007, 008
or injuries treated without surgery	009, 013
(20) Specific cerebral vascu- lar disorders except TIA	014
(21) Stupor and coma, non- traumatic and traumatic	
$\geq \frac{1 \text{ hr}}{\text{(22)}}$ Traumatic stupor	023, 027
and coma ≤ 1 hr and concussion (23) Other persons system	028-033
(23) Other nervous system conditions	012, 015-019, 022, 034, 035
B. Eye Diseases and Disorders	036-048

Exempt Rules			
·			
C. Ear, Nose, Throat, and Mouth Diseases and I	Disorders		
tonsillectomy/	050 060		
adenoidectomy only (2) [Reserved for future use]	059, 060		
(3) Otitis media and URI	068-070		
(4) Dental and oral disorders	185-187		
(5) [Reserved for future use]	165-167		
(6) Other Ear, Nose,			
Throat, and Mouth			
Conditions	049-058,		
[Reserved for future use]	061-067,		
[Keserved for future dise]	071-074,		
	168-169		
(7) Other ear, nose, throat,	100 100		
and mouth conditions	049-058,	Codes in DRG	
	061-067, 071-	049 Except	
	074, 168, 169	20.96-20.98	
D. Danminstony Cyctom Conditions	3, 222, 222		
D. Respiratory System Conditions (1) [Reserved for future use]			
Treated with ventilator			
$\frac{\text{Treated with Ventrator}}{\text{support}} \le \underline{96} \text{ hrs}$	475	excludes	
$\frac{\text{support}}{2} \leq \frac{100}{200} \text{ m/s}$	473	96.72	
(2) Treated with Ventilator		<u> 70.72</u>	
Support	475		
[Reserved for future use]	173		
(3) [Reserved for future use]			
Treated with ventilator			
support 96+ hrs	<u>475</u>	<u>includes</u>	
		96.72	
(4) Treated with tracheostomy			
except for face, mouth,			
and neck diagnoses	483		
(5) Treated with Other			
Surgical Procedure	075-077, 482		
[Reserved for future use]			
(6) Respiratory Neoplasms	082		
[Reserved for future use]			
(7) [Reserved for future use]			
Treated with tracheostomy			
for face, mouth, and neck	400		
diagnoses	<u>482</u>		
(8) [Reserved for future use]			
Major chest and other	075 077		
surgical procedure	<u>075-077</u>		
(9) [Reserved for future use]			
<u>Neoplasms, pleural</u> effusion, and			
pneumothorax with cc	082, 085, 094		
(10) Other Respiratory	082, 083, 034		
System Conditions	078-081,		
[Reserved for future use]	073-081, 083-088,		
[Reserved for future use]	092-102		
(11) Simple Pneumonia and	072-102		
Pleurisy	089-091		
[Reserved for future use]			
[Iteser.es for fatare ase]			

(12) Other respiratory		
system conditions	<u>078-081, 083,</u>	
	<u>084, 086-093,</u>	
	<u>095-102</u>	
E. Circulatory System Conditions		
(1) [Reserved for future use]		
Major cardiac surgery and		
surgery for circulatory		
<u>disorders</u>	<u>104-106, 108,</u>	
	<u>113, 478</u>	
(2) [Reserved for future use]		
Other cardiovascular	107 110 111	
<u>procedures</u>	<u>107, 110, 111,</u>	
(3) Acute and Subacute	<u>115, 116</u>	
Endocarditis	126	
[Reserved for future use]	120	
(4) Treated with Vein		
Ligation and Stripping	119	
[Reserved for future use]		
(5) [Reserved for future use]		
Cardiac interventional		
and other vascular		
<u>procedures</u>	<u>112, 114, 117, </u>	
(C.D. W.)	<u>118, 120, 479</u>	
(6) Deep Vein	100	
Thrombophlebitis	128	
[Reserved for future use]		
(7) [Reserved for future use] <u>Deep vein thrombophle-</u>		
bitis, peripheral vasc		
disease, and vein		
stripping	119, 128,	
	<u>130, 131</u>	
(8) [Reserved for future use]		
<u>Circulatory</u> <u>disorders</u>		
including acute MI and		
endocarditis	<u>121-126, 129</u>	
(9) [Reserved for future use]		
Other circulatory system	107, 122, 142	
conditions	<u>127, 132-142,</u>	
(10) Circulatory Disorders	<u>144, 145</u>	121-125
[Reserved for future use]		121-123
(11) Treated with Other		
Surgical Procedure	103-108,	
[Reserved for future use]	110-118, 120,	
-	478-479	

Exempt Rules _____

	•	
	(12) Other Circulatory	
	System Conditions	127, 129-145
	[Reserved for future use]	
	(13) Chest pain	143

		[For text of item F, see M.R.]
G.	Hepatobiliary System Conditions	
	(1) [Reserved for future use]	
	(2) [Reserved for future use]	
	(3) Cirrhosis and alcoholic	
	hepatitis	202
	(4) Malignancy of	
	hepatobiliary system	
	or pancreas	203
	(5) Disorders of pancreas	
	except malignancy	204
	(6) Other disorders of	
	the liver	205, 206
	(7) Disorders of the biliary	-
	tract	207, 208
	(8) Treated with	-
	Surgical Procedure	191-201, 480,
	[Reserved for future use]	493-494
	(9) Treated with surgical	.,,
	procedure	<u>191-201,</u>
	<u>procedure</u>	493, 494
	D: 1D: 1 01 14 1 1 1	
Н.	Diseases and Disorders of the Musculoskelet	al System and Connective Tissues
	(1) Treated with major joint	
	and limb reattachment	
	procedures	209, 471, 491
	(2) Treated with hip and	
	femur procedures or	
	amputation	210-213
	(3) Treated with Back and	
	Neek Procedures	214-215
	[Reserved for future use]	
	(4) Treated with biopsy of	
	musculoskeletal system	
	and connective tissue	216
	(5) Treated with wound	
	debrid or skin graft	
	except hand	217
	(6) Treated with lower	
	extrem extremity	
	and humer procedure	
	except hip, foot, femur	218-220
	(7) Treated with Knee	
	Procedure	221-222
	[Reserved for future use]	
	(8) Treated with upper	
	extremity procedure	223, 224
	(9) Treated with foot	
	procedure	225
	(10) Treated with soft	
	tissue procedure	226, 227
	1	-

(11) Treated with Hand or	228 220
Wrist Procedure	228-229
[Reserved for future use]	
(12) Treated with local	
excision and removal	
of int fix devices	220
of hip and femur	230
(13) Treated with local	
excision and removal	
of int fix devices	221
except hip and femur	231
(14) Treated with other	
surgical procedures	232-234
(15) Other musculoskeletal	
system and connective	
tissues conditions	235-256
(16) Spinal fusion: combined	
anterior/posterior and	
fusion with cc	<u>496, 497</u>
(17) Treated with other back	
and neck procedures	<u>498-500</u>
(18) Treated with knee	
<u>procedure</u>	<u>501-503</u>
(19) Hand and wrist	
procedures and carpal	
tunnel release	<u>006, 228, 229</u>
	[For text of items I and J, see M.R.]
Kidney and Urinary Tract Conditions	
(1) [Reserved for future use]	
(2) Treated with	
prostatectomy, minor	
bladder, or urethral	
procedure	306-314
(3) Treated with other	
surgical procedure	315
[Reserved for future use]	
(4) Renal failure	316
(5) Other kidney and urinary	
tract conditions	317-333
(6) Treated with Kidney,	
Ureter, or Major	
Bladder Procedure	302-305
[Reserved for future use]	
(7) Treated with kidney,	
ureter, or major bladder	
procedure	<u>303-305, 315</u>

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

K.

Exempt Rules =

- Q. Myeloproliferative Diseases and Disorders, Poorly Differentiated Malignancy and other Neoplasms Not Elsewhere Classified
 - (1) [Reserved for future use]
 - (2) [Reserved for future use]
 - (3) [Reserved for future use]

Other treatments for myeloproliferative

diseases and disorders 400-409, 411-414, 473 (4) Treated with chemotherapy 410, 492

(5) Other Treatments for

Myeloproliferative

 Diseases and Disorders
 400-409,

 [Reserved for future use]
 411-414,

 473, 481

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

UU. [Reserved for future use] Organ Transplants

(1) <u>Kidney or lung</u> 302, 495

(2) Heart or liver,

<u>bone marrow</u> <u>103, 480, 481</u>

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

Subp. 20e. **Diagnostic categories relating to a rehabilitation hospital or a rehabilitation distinct part.** The following diagnostic categories are for services provided within a rehabilitation hospital or a rehabilitation distinct part regardless of program eligibility:

DIAGNOSTIC
CATEGORIES

WITHIN
DIAGNOSTIC
CATEGORIES

DIAGNOSTIC
CATEGORIES

CATEGORIES

CLASSIFICATION
OF DISEASES,
9th Ed., CLINICAL
MODIFICATIONS

CODES

A. Nervous System Diseases

and Disorders 001-035 except codes in item XX

B. [Reserved for future use]

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

H. Diseases and Disorders of the Musculoskeletal System

and Connective Tissues 209-213, $\underline{216-220}$, $\underline{in item XX}$

223-256, 471, 491, 496-503

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

RR. Mental Diseases and

Disorders/Substance Use and Substance Induced

Organic Mental Disorders 424-432, 434, $\underbrace{\text{except codes}}_{\text{435}}$ $\underbrace{\text{in item } XX}$

SS. Multiple Significant

Trauma/Unrelated Operating

Room Procedures 468, 476, 477, except codes 484-487 in item XX

TT. Other Conditions Requiring

Rehabilitation Services 036-108, except codes 110-208, in item XX 257-423, 439-455, 457-467, 472, 473, 475, 478-483,

492-494 <u>495</u>

488-490.

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

XX. Quadriplegia and quadriplegia secondary to spinal cord injury all DRGs with ICD-9 diagnoses codes: 344.01, 344.02, 344.03, 344.04, 344.09 in combination with 907.2

Subp. 20f. Diagnostic categories for neonatal transfers. The following diagnostic categories are for services provided to neonatal transfers at receiving hospitals with neonatal intensive care units regardless of program eligibility:

DIAGNOSTIC **DRG NUMBERS** INTERNATIONAL **CATEGORIES** WITHIN **CLINICAL**

DIAGNOSIS DIAGNOSTIC CODES (9th Ed.) **CATEGORIES CLASSIFICATION** OF DISEASES, 9th Ed., CLINICAL

MODIFICATIONS

CODES

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

Subp. 20g. Additional DRG requirements.

- A. The Version 15 of the Medicare grouper and DRG assignment to the diagnostic category must be used uniformly for all determinations of rates and payments.
 - B. The discharge status will be changed to "discharge to home" for DRG 385, 433, and 456.
 - C. A diagnosis with the prefix "v57" will be excluded when grouping under subpart 20e.
- D. For neonates transferred into a neonatal intensive care unit with a DRG assignment of DRG 482 or DRG 483, the ICD-9-CM procedure codes 30.3, 30.4, 31.1, 31.21, and 31.29 will be excluded when grouping under subparts 20b, 20c, and 20d.

[For text of subps 22 to 51, see M.R.]

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

Executive Orders =

Office of the Governor

Emergency Executive Order #98-16: Providing for Assistance to the Freeborn and Jackson County Sheriffs

I, ARNE H. CARLSON, GOVERNOR OF THE STATE OF MINNESOTA, by virtue of the authority vested in me by the Constitution and the applicable statutes, do hereby issue this Emergency Executive Order:

WHEREAS, a severe winter storm occurred in southwestern Minnesota beginning on November 10, 1998; and

WHEREAS, the storm's heavy snowfall has resulted in downed power lines and the closing of Interstate 90 in the area west of Worthington; and

WHEREAS, there are many motorists stranded on Interstate 90; and

WHEREAS, the Freeborn and Jackson County Sheriff's Departments do not have adequate local resources for emergency overnight housing;

NOW, THEREFORE, I hereby order that:

- 1. The Adjutant General of Minnesota order to active duty on or about November 10, 1998, in the service of the State, such personnel and equipment of the military forces of the State as required and for such period of time as necessary to provide emergency housing in Freeborn and Jackson Counties.
- 2. The Adjutant General is authorized to purchase, lease or contract goods or services necessary to accomplish the mission.
- 3. The cost of subsistence, transportation, fuel, pay and allowances of said individuals shall be defrayed from the general fund of the State as provided for in *Minnesota Statutes* 1998, sections 192.49, subd. 1; 192.51 and 192.52.

Pursuant to *Minnesota Statutes* 1998, section 4.035, subd. 2, this Order is effective immediately, and shall remain in effect until such date as elements of the military forces of the State are no longer required.

IN TESTIMONY WHEREOF, I have set my hand this nineteenth day of November, 1998.

Arne H. Carlson Governor

Filed According to Law: Joan Anderson Growe Secretary of State

Office of the Governor

ra a srove

Emergency Executive Order #98-17: Providing for Assistance to the Pennington County Sheriff

I, ARNE H. CARLSON, GOVERNOR OF THE STATE OF MINNESOTA, by virtue of the authority vested in me by the Constitution and the applicable statutes, do hereby issue this Emergency Executive Order:

WHEREAS, a severe winter snowstorm has hit northwestern Minnesota; and

WHEREAS, the heavy snowfall and high winds have resulted in blocked and closed roads with blowing and drifting snow, creating hazardous travel conditions; and

WHEREAS, there are not adequate shelter facilities available for stranded travelers; and

WHEREAS, the Pennington County Sheriff's Department does not have adequate local resources for emergency overnight housing or search and rescue efforts;

NOW, THEREFORE, I hereby order that:

1. The Adjutant General of Minnesota order to state active duty on or about November 18, 1998, in the service of the State, such personnel and equipment of the military forces of the State as required, and for such period of time as necessary to provide emergency shelter and a search and rescue mission in Pennington County.

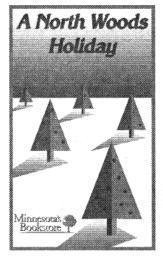
- 2. The Adjutant General is authorized to purchase, lease or contract goods or services necessary to accomplish the mission.
- 3. The cost of subsistence, transportation, fuel, pay and allowances of said individuals shall be defrayed from the general fund of the State, as provided for in *Minnesota Statutes* 1998, Sections 192.49, subd. 1; 192.51 and 192.52.

Pursuant to *Minnesota Statutes* 1998, section 4.035, subd. 2, this Order is effective immediately and shall remain in effect until such date as elements of the military forces of the state are no longer needed.

IN TESTIMONY WHEREOF, I have set my hand this nineteenth day of November, 1998.

Arne H. Carlson Governor

Filed According to Law:
Joan Anderson Growe
Secretary of State



Celebrate a North Woods Holiday

with Minnesota's Bookstore as we welcome guest authors:

Craig Blacklock, noted nature photographer,

Eleanor Ostman, St. Paul Pioneer Press food columnist
and Carrol Henderson, DNR Non-Game Wildlife Specialist/author

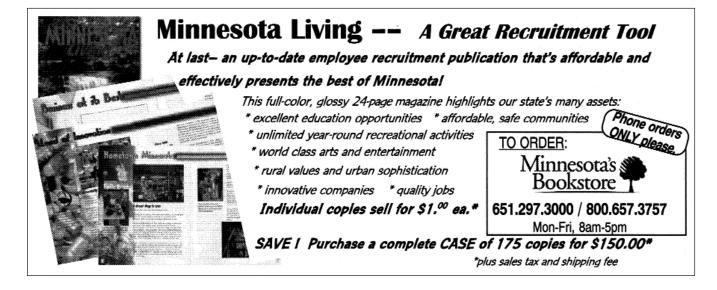


Friday, December 4
11am-1pm
Minnesota's Bookstore

117 University Ave. St. Paul

1/2 block West of State Capitol





Pursuant to *Minnesota Statutes* §§ 14.101, an agency must first solicit comments from the public on the subject matter of a possible rule-making proposal under active consideration within the agency by publishing a notice in the *State Register* at least 60 days before publication of a notice to adopt or a notice of hearing, and within 60 days of the effective date of any new statutory grant of required rulemaking.

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

Department of Administration

Building Codes and Standards Division

Notice of Advisory Committee Membership

NOTICE IS HEREBY GIVEN of the membership of the advisory committees appointed in 1998 by the Building Codes and Standards Division:

- Residential Building Code Advisory Committee: Kevin Mealhouse, Greg Johnson, Roy Lund, Marlin Grant, Scott McLellan.
- Non-Residential Building Code Advisory Committee: David Krings, Mike Kulczyk, Steve Landry, Jon Rao Papke, Lucian Ed Soltvedt, Bob Gazdik, Scott McLellan.
- **Structural Building Code Advisory Committee:** Ronald LaMere, Dave Drenth, Mac McCalla, Larry McMurtry, Gene Abbott, Frank Berg, Jack Meyer, Marlin Grant, Steve Talafous, Michael Lederle, Elmer Kopp, Scott McLellan.
- **Mechanical Code Advisory Committee:** John Clark, Ken Kammerer, Jim Nunn, Ron Rice, Brad Thorson, Bill Forder, Ray Schaefer, Marty Strub, Patrick Mooney, Bob Laughlin, Janet Streff.
- Accessibility Code Advisory Committee: Dinah Doelter, Julee Quarve-Peterson, Gail Manning, Harold Kiewel, Sue Lasoff, Dave Wagner, Chris VanHauer, Margot Imdieke Cross, Tate Halvorson, Jerry Norman, Curt Wiehle.
- Elevator Code Advisory Committee: Russ Ohman, Luke Riley, Jim Carlson, Bryan Hines, Thomas Brace, Jon Nisja, Bernie Carey, John Shugren, Ted Smith, David Wagner, Margot Imdieke, Matt Piper, Steve Marstad, Brad Thorson, Merwyn Larson, Dick Valley, Bernie Wiklund, Richard Wysocki, Jim Blatner, Curt Wiehle, Elroy Berdahl.

Department of Administration

Request for Comments on Planned Amendment to Rules Governing the Electric Code, *Minnesota Rules*, Chapter 1315

Subject of Rules. The Minnesota Department of Administration requests comments on its planned amendments to rules governing Chapter 1315 of the Minnesota State Building Code, Electric Code. The Department is considering rule amendments that would adopt the 1999 edition of the National Electric Code.

Persons Affected. The amendment to the rules would likely affect builders, building officials, electrical contractors, material suppliers and homeowners.

Statutory Authority. *Minnesota Statutes*, 326.243 and 16B.61 to 16B.64 authorize the Department to adopt rules relating to the adoption of the National Electric Code.

Public Comment. Interested persons or groups may submit comments or information on these planned rules in writing until further notice is published in the *State Register* that the Department intends to adopt or to withdraw the rules. The Department does not contemplate appointing an advisory committee to comment on the planned rules.

Rules Drafts. The Department has not yet prepared a draft of the planned rules amendments.

Agency Contact Person. Written comments, questions, requests to receive a draft of the rules when it has been prepared, and requests for more information on these planned rules should be addressed to: Janet Streff, 408 Metro Square Building, 121 7th Place East, St. Paul, MN 55101.

Alternative Format. Upon request, this Request for Comments can be made available in an alternative format, such as large print, Braille, or cassette tape. To make such a request, please contact the agency contact person at the address or telephone number listed above.

Note: Comments received in response to this notice will not necessarily be included in the formal rulemaking record submitted to the administrative law judge when a proceeding to adopt rules is started. The agency is required to submit to the judge only those written comments received in response to the rules after they are proposed.

Dated: 23 November 1998

Thomas R. Joachim, Director Building Codes and Standards Division Department of Administration

Department of Administration

Request for Comments on Planned Amendment to Rules Governing Manufactured Homes, *Minnesota Rules*, Chapter 1350

Subject of Rules. The Minnesota Department of Administration requests comments on its planned rules and amendments to rules governing Chapter 1350 of the Minnesota State Building Code, Manufactured Homes. The Department is considering rule amendments that will give manufactured home community owners the authority to annually sell no more than five used homes in their communities. The Licensee must be the titleholder of the homes. The Department is also considering housekeeping changes to keep the code references current and make other miscellaneous updates and fee revisions.

Persons Affected. The amendment to the rules would likely affect manufactured home community owners and those in the general public that plan to purchase manufactured homes, manufactured home dealers, manufactured home limited dealers, manufactured home installers and manufactured home accessory structures manufacturers.

Statutory Authority. *Minnesota Statutes*, sections 327.33 and 327B.10 authorize the Department to adopt rules relating to manufactured homes.

Public Comment. Interested persons or groups may submit comments or information on these planned rules in writing until further notice is published in the *State Register* that the Department intends to adopt or to withdraw the rules. The Department does not contemplate appointing an advisory committee to comment on the planned rules

Rules Drafts. The Department has not yet prepared a draft of the planned rules amendments.

Agency Contact Person. Written comments, questions, requests to receive a draft of the rules when it has been prepared, and requests for more information on these planned rules should be addressed to: Janet Streff, 408 Metro Square Building, 121 7th Place East, St. Paul, MN 55101.

Alternative Format. Upon request, this Request for Comments can be made available in an alternative format, such as large print, Braille, or cassette tape. To make such a request, please contact the agency contact person at the address or telephone number listed above.

Note: Comments received in response to this notice will not necessarily be included in the formal rulemaking record submitted to the administrative law judge when a proceeding to adopt rules is started. The agency is required to submit to the judge only those written comments received in response to the rules after they are proposed.

Dated: 23 November 1998

Thomas R. Joachim, Director Building Codes and Standards Division Department of Administration

Department of Administration

Notice of State Designer Selection Board (SDSB) Meeting Dates, Times and Agenda Items

Pursuant to SDSB *Minnesota Rule* 3200.0400, below is the schedule of State Designer Selection Board meeting dates, times and agenda items as of November 18, 1998:

- December 8, 9:00 a.m.
 - 1. Interviews/Award Selection for Project 31-98 Winona State University
- December 15, 1998, 9:00 a.m.
 - 1. Shortlisting Project 32-98 University of Minnesota, St. Paul
- December 29, 1998, 9:00 a.m.
 - 1. Interviews/Award Selection for Project 32-98, University of Minnesota, St. Paul

Unless otherwise stated, all meetings are held in the Administration Building, 50 Sherburne Avenue, St. Paul, Room G-10/Conference Room A. Other matters may come before the Board and be added to the agenda as needed. For additional information, contact Lisa Blue at (651) 297-5526.

Minnesota Auto Theft Prevention Program

Notice of Meeting of the Board of Directors

The Minnesota Auto Theft Prevention Program, will be holding its Board of Directors meeting on December 10, 1998. The meeting will begin at 9:00 A.M. and will be held at the Minnesota Auto Theft Prevention Program (MATPP) office located at 1110 Centre Pointe Curve, Suite 405, Mendota Heights, MN. (Hwy 110 and Lexington Ave., west of Hwy 35W (South) on the south side of the GNB Technologies Bldg.). Meetings are open to the public. For more information you may contact the MATPP office at (651) 405-6155.

Emergency Medical Services Regulatory Board

Notice of Completed Application In the matter of the License Application of the Jackson Volunteer Ambulance Service, Jackson, Minnesota

PLEASE TAKE NOTICE that the Emergency Medical Services Regulatory Board (hereinafter "EMSRB") has received a completed application from the **Jackson Ambulance Service**, **Jackson**, **Minnesota**, for a new type of service, advanced ambulance service - specialized.

NOTICE IS HEREBY GIVEN that, pursuant to *Minnesota Statutes* Sec. 144E.11, subd. 3 (1997), each municipality, county, community health board, governing body of a regional emergency medical services system, ambulance service and other person wishing to make recommendations or comments opposing the application to the EMSRB within 30 days or by December 30, 1998, 4:30 p.m.

Written recommendations or comments opposing the application should be sent to: Mary Hedges, Executive Director, EMSRB, 2829 University Ave. S.E., Suite 310, Minneapolis, Minnesota 55414-3222.

If fewer than six comments opposing the application are received during the comment period, and the EMSRB approves the application, the applicant will be exempt from a contested case hearing, pursuant to *Minnesota Statutes* Sec. 144E.11, subd. 4 (1997). If six or more comments in opposition to the application are received during the comment period or the EMSRB denies the application, the applicant may immediately request a contested case hearing, or may try to resolve the objections of the public and/or the EMSRB within 30 days, pursuant to *Minnesota Statutes* Sec. 144E.11, subd. 5(a), (b) (1997). If the applicant is unable to resolve the objections within 30 days, or if the applicant initially requests a hearing, a contested case hearing will be scheduled and notice of the hearing given pursuant to *Minnesota Statutes* Sec. 144E.11, subd. 5(c), (e) (1997).

Dated: 16 November 1998

Mary F. Hedges, Executive Director

Department of Human Services

Health Care Access Project

Members Sought for New Health Care Access and Program Eligibility Committee

The Health Care Administration of the Minnesota Department of Human Services, Health Care for Families and Children, Health Care Access Project, seeks letters of interest from persons interested in serving on a new Health Care Access and Program Eligibility Committee. The Department seeks input and advise on health care program policy, and the committee's focus will be on program eligibility criteria, the application verification process, and enrollment procedures.

The goals of the Department's Health Care Access Project are to increase access to health care coverage and to ensure that access is not a barrier to achieving and maintaining self-sufficiency. The goals will be met by: 1) increasing local access and assistance with the Minnesota Health Care Programs application; 2) simplifying application, verification, and enrollment procedures; 3) providing information on public programs and other health care insurance options; 4) fostering a better understanding of public health care program requirements; and 5) providing outreach staff, training, written materials, and other resources in an effort to reduce the numbers of uninsured Minnesotans.

It is anticipated that the following projects will be discussed in committee meetings during 1999-2000:

- GAMC to MinnesotaCare: Focuses on converting existing General Assistance Medical Care cases to MinnesotaCare
 and the county option of enrolling GAMC applicants in MinnesotaCare beginning January 1, 2000. The Department and
 county human service agencies will work together to facilitate a smooth transition of enrollees to ensure continuous coverage throughout the process.
- New Minnesota Health Care Programs Application: Focuses on shortening the application and providing clear instructions.
- Outreach: Components include community education; resource materials; the Limited English Proficiency (LEP) Advisory Committee; an outreach grantee program; and specialized assistance to American Indian reservations.
- Self-Sufficiency Initiatives: Focuses on making payment of MinnesotaCare premiums easier through: automatic checking withdrawal; credit card payment; one-time electronic transfer of funds; wage withholding; and state tax refund payments. The Department plans to identify barriers, revise the redetermination eligibility process, and create solutions to ensure continuous health care coverage for health care program participants.

Committee members will be appointed for two-year terms, beginning in January, 1999. Meetings will be held quarterly at the Department of Human Services, 444 Lafayette Road North, St. Paul, Minnesota.

For further information, contact Stephanie Schwartz, Minnesota Department of Human Services at (651) 297-7198. Letters of interest should be sent to: Stephanie Schwartz, Health Care Administration, Health Care Access Project, Minnesota Department of Human Services, 444 Lafayette Road North, St. Paul, Minnesota 55155-3848. Letters of interest will be accepted until Friday, December 18, 1998.

Department of Human Services

Notice of All Health Services that Require Authorization as a Condition of Minnesota Health Care Program Payment

The following is the current authorization list which replaces any other list published in the *State Register*. This authorization list is effective on or after January 1, 1999.

AUTHORIZATION LIST

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

- A. The health service could be considered, under some circumstances, to be of questionable medical necessity.
- B. Use of the health service needs monitoring to control the expenditure of program funds.
- C. Less costly, appropriate alternatives to the health service are generally available.

- D. The health service is investigative.
- E. The health service is newly developed or modified.
- F. The health service is of a continuing nature and requires monitoring to prevent its continuation when it ceases to be beneficial.
- G. The health service is comparable to a service provided in a skilled nursing facility or hospital but is provided in a recipient's home.
- H. The health service could be considered cosmetic.

THIS LIST OF HEALTH SERVICES REQUIRING AUTHORIZATION IS PRESENTLY IN EFFECT. NEWLY ADDED CODES WILL REQUIRE AUTHORIZATION FOR SERVICES PROVIDED ON OR AFTER JANUARY 1, 1999.

Identifies any changes in coding or limits.

These newly added or changed codes will require Authorization for services provided on or after January 1, 1999.

I. DENTAL SERVICES

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

- 1. Surgical services, (except D7210, D7220, D7230, D7240, X7216 surgical extractions). For emergencies follow the after-the-fact authorization procedures.
- 2. Removable Resin base and Cast Metal Partials.

It is essential that requests submitted for authorization consideration be accompanied by adequate case information and appropriate diagnostic materials (i.e., x-rays, prosthesis information, teeth to be replaced, prognosis for remaining dentition, complete 6 point perio charting for cast metal partials).

RADIOGRAPHS

R/D/OGR/H H/S		
Service <u>Code</u>	Service Description	
(Authorization required only if provided more than once in a three-year period or for person under age 8)		
D0210	Intraoral series (including bitewing)	
D0330	Panoramic film	
D0335	Panorex, includes bitewing and additional peripheral films	
(Authorization required only if six in a 12-month period are exceeded)		
D0230	Intraoral, periapical, each additional film	
D0240	Intraoral, occlusal film	

D0240 Intraoral, occlusal film
D0250 Extraoral, first film
D0260 Extraoral, each additional film

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

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

TESTS AND LABORATORY EXAMINATIONS

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

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

D1110 Prophylaxis adults
D1120 Prophylaxis, children

FLUORIDE

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

CROWNS - SINGLE RESTORATIONS ONLY

CIOWING	SINGLE RESTORTIONS ONE!
Service <u>Code</u>	Service <u>Description</u>
D2710	Crown - resin (laboratory)
D2720	Crown - resin with high noble metal
D2721	Crown - resin with predominantly/base metal
D2722	Crown - resin with noble metal
D2740	Crown - porcelain/ceramic substrate
D2750	Crown - porcelain fused to high noble metal
D2751	Crown - porcelain fused to predominantly/base metal
D2752	Crown - porcelain fused to noble metal
D2790	Crown - full cast high noble metal
D2791	Crown - full cast predominantly base metal
D2792	Crown - full cast noble metal
D2810	Crown - 3/4 cast metallic
OTHER RE	STORATIVE SERVICES
D2952	Cast post and core in addition to crown
D2960	Labial veneer (laminate)
D2961	Labial veneer (resin laminate)-laboratory
D2962	Labial veneer (porcelain laminate)-laboratory
D2999	Unspecified restorative procedure, by report
OTHER EN	DODONTIC PROCEDURES
D3460	Endodontic endosseous implant
D3960	Bleaching of discolored tooth
D3999	Unspecified endodontic procedure
SURGICAL	SERVICES (including usual post-operative services)
D4210	Gingivectomy or gingivoplasty - per quadrant
D4211	Gingivectomy or gingivoplasty - per tooth
PERIODON	TICS
D4220	Gingival curettage, surgical, per quadrant, by report
D4240	Gingival flap procedures, including root planning - per quadrant
D4249	Crown lengthening - hard and soft tissue, by report
D4250	Mucogingival surgery - per quadrant
D4260	Osseous surgery, including flap entry and closure per quadrant
D4263	Bone replacement graft - first site in quadrant
D4264	Bone replacement graft - each additional site in quadrant
D4266	Guided tissue regeneration - resorbable barrier, per site, per tooth
D4267	Guided tissue regeneration - nonresorbable barrier, per site, per tooth (includes membrane removal)
D4270	Pedicle soft tissue grafts
D4271	Free soft tissue grafts including donor site
D4273	Subepithelial connective tissue graft procedure (including donor site surgery)
D4274	Distal or proximal wedge procedure (when not performed in conjunction with surgical procedures in the same anatomical area)

ADJUNCTIVE PERIODONTAL SERVICES

Service <u>Code</u>	Service <u>Description</u>
D4320	Provisional splinting, intracoronal
D4321	Provisional splinting, extracoronal
D4341	Periodontal scaling, and root planning - per quadrant
D4381	Localized delivery of chemotherapeutic agents via a controlled release vehicle into diseased crevicular tissue, by tooth, by report
OTHER	

O'

D4910 Periodontal maintenance procedures (following active therapy)

D4999 Unspecified periodontal service (by report)

PROSTHODONTICS, REMOVABLE DENTURES

(Authorization required only if provided more than once in a five year period)

D5110 Complete upper D5120 Complete lower

PARTIAL DENTURES (including six months post-delivery care)

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

OTHER PROSTHETIC SERVICES

D5860	Overdenture complete, by report
D5861	Overdenture partial, by report
D5862	Precision attachment, by report

D5899 Unspecified removable prosthodontics procedure, by report

MAXILLOFACIAL PROSTHETICS

D5951	Feeding aid
D5952	Speech aid prosthesis, pediatric
D5953	Speech aid prosthesis, adult
D5954	Palatal augmentation prosthesis
D5955	Palatal lift prosthesis, definitive
D5958	Palatal lift prosthesis, interim
D5959	Palatal lift prosthesis, modification
D5960	Speech aid prosthesis, modification
D5982	Surgical stent
D5983	Radiation carrier
D5984	Radiation shield
D5985	Radiation cone locator
D5986	Fluoride gel carrier
D5987	Commissure splint

IMPLANTS

Service <u>Code</u>	Service <u>Description</u>
D6055	Implant connecting bar
D6080	Implant maintenance procedures, including: removal of prosthesis, cleansing of prosthesis and abutment rein sertion of prosthesis.
D6095	Repair implant abutment, by report

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

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

RETAINERS

D6545 Retainer - cast metal for acid etched fixed prosthesis

CROWNS (Only covered in situations where documented medical condition prohibits use of removable prostheses)

D6720	Crown - resin with high noble metal
D6721	Crown - resin with predominantly base metal
D6722	Crown - resin with noble metal
D6750	Crown - porcelain fused to high noble metal
D6751	Crown - porcelain fused to predominantly base metal
D6752	Crown - porcelain fused to noble metal
D6780	Crown - 3/4 cast high noble metal
D6790	Crown - full cast high noble metal
D6791	Crown - full cast predominantly base metal
D6792	Crown - full cast noble metal
OTHER FIXED	PROSTHETIC SERVICES

OTHER FIXED PROSTHETIC SERVICES

D6920	Connector bar
D6940	Stress breaker
D6950	Precision attachment

ORAL SURGERY EXTRACTION

D7241 Removal of impacted tooth - completely bone, with unusual surgical complications

OTHER SURGICAL PROCEDURES

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

REDUCTION OF DISLOCATION AND MANAGEMENT OF OTHER TEMPOROMANDIBULAR JOINT DYSFUNCTIONS

Service	Service
<u>Code</u>	Description

D7880 Occlusal orthotic appliance

D7899 Unspecified TMD therapy, by report

LIMITED ORTHODONTIC TREATMENT

D8010	Limited orthodontic treatment of primary dentition
D8020	Limited orthodontic treatment of transitional dentition
D8030	Limited orthodontic treatment of adolescent dentition
D8040	Limited orthodontic treatment of adult dentition

INTERCEPTIVE ORTHODONTIC TREATMENT

D8050 Interceptive orthodontic treatment of primary dentition

D8060 Interceptive orthodontic treatment of transitional dentition

COMPREHENSIVE ORTHODONTIC TREATMENT

D8070	Comprehensive orthodontic treatment of transitional dentition
D8080	Comprehensive orthodontic treatment of adolescent dentition
D8090	Comprehensive orthodontic treatment of adult dentition

MINOR TREATMENT TO CONTROL HARMFUL HABITS

D8210 Removal appliance therapy

D8220 Fixed or cemented appliance therapy

TREATMENT OF THE PERMANENT DENTITION/OTHER ORTHODONTIC SERVICES

D8660	Pre-orthodontic treatment visit (PA required once every five years)
D8670	Periodic orthodontic treatment visit
D8680	Orthodontic retention
D8690	Orthodontic treatment
D8750	Post-treatment stabilization

X0515 Orthodontic full case study (PA required once every five years)

D8999 Unspecified orthodontic treatment

MISCELLANEOUS SERVICES

D9940	Occlusal guards, by report
D9941	Fabrication of athletic mouth guards
D9951	Occlusal adjustment, limited
D9952	Occlusal adjustment, complete
D9999	Unspecified adjunctive procedure, by report - Inpatient anesthesia for dental services.

II. VISION CARE SERVICES

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

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

VISION THERAPY SERVICES

Service Service Code Description

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

MATERIAL CODES

V2500 Contact Lens - for diagnosis other than Aphakia, Keratoconus, or Aniseikonia, or to Bandage Lenses.
to When submitting invoices for one of these three diagnosis, be sure to specify the diagnosis on the claim
V2599

III. MEDICAL SUPPLIES AND EQUIPMENT: PROSTHESES AND ORTHOSES

Medical Equipment/Supplies

Providers must get authorization for all procedure codes listed in the Equipment and Supplies code list, where authorization is indicated, and the following general areas:

- 1. All wheelchairs: When purchased, rented beyond three months, or for use in nursing facilities.
- 2. Maintenance of equipment.
- 3. Authorization is required for underpads and diapers if the recipient is under the age of four.
- 4. Repairs to equipment when combined parts and labor exceeds \$400.00. Specify who owns the equipment.
- 5. E1399 is the unspecified equipment code. This code is only to be used when there is no specific, descriptive HCPCS or DHS code assigned. Refer to equipment guide. Authorization required if more than \$100.00

Nutritional Products (enteral)

All enteral nutrition products except those for treatment of phenylketonuria, hyperlysinemia, and maple syrup urine disease, require authorization after the first 30 days. See Physician Services chapter for coverage standards and the Authorization chapter for submission by FAX, I.T.S./FAX or mail.

Prostheses and Orthoses

Providers must get authorization for the following:

1. Prostheses and orthoses when the purchase or projected cumulative rental cost exceeds \$3,000.

Service Service
Code Description
Y5370 Wig

IV. HEARING AIDS

Services in the following categories require authorization:

- 1. The purchase of a noncontract hearing aid, including pocket talkers. Indicate model number and manufacturer on form.
- 2. The provision of more than one hearing aid or hearing aid dispensing fee in a five-year period.
- 3. Purchase of a hearing aid when pure-tone average is less than 25 dB HL in an adult and less than 20 dB HL in a child.

V. DRUGS

The following drugs require authorization through the FAX, I.T.S./ FAX or mail from. The following drugs require authorization from the first day of service, or as indicated. For authorization contact Care Delivery Management Incorporated (CDMI), M-F 8:00 am - 4:30 p.m., metro: 456-5275, outstate: 1-800-382-5275, fax; 612-405-7459.

Alglucerase (Ceredase)

Agents used to promote smoking cessation (including patches, nasal spray, gum, inhaler)

Botulinum Toxin Type A (Botox)

Demeclocycline (Declomycin)

Epoetin Alfa/Erythropoietin/EPO (Epogen and Procrit)

Filgrastim/G-CSF (Neupogen)

Granisetron (Kytril) [for more than 4 consecutive weeks of continuous treatment]

Interferon Alfa-n3 (Alferon N)

InterferonGamma-1b (Actimmune)

Lansoprazole (Pevacid) [for more than 8 consecutive weeks of continuous treatment]
Omeprazole (Prilosec) [for more than 8 consecutive weeks of continuous treatment]
Ondansetron (Zofran) [for more than 4 consecutive weeks of continuous treatment]

Sargramostim/GM-CSF (Leukine and Prokine)

Viagra

For services performed in physician office: (Authorization comes from physician)

Service <u>Code</u>	Service <u>Description</u>
J0205	Alglucerase
J0585	Botulinum Toxin Type A
J1440	Injection, Filgrastin (G-CSF) 300 mcg.
J1441	Injection, Filgrastin (G-CSF) 480 mcg.
J1626	Granisetron [for more than 4 consecutive weeks of continuous treatment]
J9215	Interferon Alfa-n3
J9216	Interferon Gamma -1b
J2405	Ondasetron [for more than 4 consecutive weeks of continuous treatment]
J2820	Sargramostim/GM-CSF

Authorization requests will not be accepted by CDMI for drugs which do not appear on the above list.

VI. REHABILITATIVE SERVICES

OCCUPATIONAL THERAPY

Any combination of the following codes that exceed 6 units per calendar year.

Service <u>Code</u>	Service <u>Description</u>	
97003	Occupational therapy evaluation, initial	
97004	Occupational therapy reevaluation, periodic	
The following C	occupational therapy codes always require authorization.	
X4511	Unlisted occupational therapy	
97150	Occupational therapy group sessions	
97750	Physical performance test, functional capacity	
97770	Sensory integration or cognitive skills	
The following occupational therapy code requires authorization:		
X5511	Occupational therapy supplies that exceed \$32.00 per calendar year	
Any combination of the following codes that exceed 50 hours per year.		
X4515	Occupational therapy, motor skills	
X4524	Occupational therapy, preventive skills	
X4526	Occupational therapy, therapeutic adaptions	
97535	Self care home management training, (e.g., Activities of Daily Living [ADL's] compensatory, training, meal preparation, safety procedures, and instruction in use of adaptive equipment)	
97537	Community work reintegation training (e.g., shopping, transportation, money management, avocational activities and/or work environment/modification analysis, work task analysis)	

PHYSICAL THERAPY

Any combination of the following codes that exceed 8 units per calendar year

Service <u>Code</u>	Service Description
97001	Physical therapy evaluation, initial
97002	Physical therapy evaluation, periodic
Any combination	of the following codes that exceeds 30 hours per calendar year:
97032	Electrical stimulation
97033	Iontophoresis
97034	Contrast baths
97035	Ultrasound
97036	Hubbard tank
97110	Therapeutic procedure, exercises
97112	Therapeutic procedure, neuromuscular
97113	Therapeutic procedure, aquatic therapy
97116	Therapeutic procedure, gait training
97124	Massage
◆ 97140	Manual therapy techniques (eg. mobilization/manipulation, manual lymphatic drainage, manual traction), one or more regions, each 15 minutes.
97504	Orthotics fitting and training; upper and lower extremity
97530	Therapeutic activities
97542	Wheelchair management propulsion training
97703	Checkout for orthotic/prosthetic use
X5515	PT wound care
Any combination	of the following modalities that exceed 30 per calendar year:
90901	Biofeedback training by any modality
97010	Hot or cold packs
97012	Traction
97014	Electric stimulation
97016	Vasopneumatic devices
97018	Paraffin bath
97020	Microwave
97022	Whirlpool
97024	Diathermy
97026	Infrared
97028	Ultraviolet
Any combination	of the following codes that exceed two services per calendar year require authorization:
95831	Muscle testing, manual extremity
95832	Hand
95833	Total evaluation of body without hands
95834	Total evaluation of body with hands

Service

97799

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

Code	<u>Description</u>	
95851	Range of motion measurements	
95852	Range of motion measurements - hand with comparison to normal side.	
The following codes always require authorization:		
97039	Unlisted modality	
97139	Unlisted therapeutic procedure	
97150	Therapeutic procedures, group, two or more persons	
97545	Work hardening/conditioning; initial 2 hours	
97546	Work hardening, additional hour	
97750	Physical performance test or measurement (functional capacity)	

SPEECH-LANGUAGE PATHOLOGY

Service

The following codes always require authorization:

92598	Modification of voice prosthetic or augmentative/ alternative communication device to support oral speech
02500	

92599 Unlisted otorhinolaryngological services

Unlisted physical med/rehab service

The following codes require authorization:

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	92506	Medical evaluation of speech that exceeds 6 units per calendar year
	92525	Evaluation of swallowing or oral function for feeding that exceeds four sessions per calendar year
	92597	Evaluation for use and/or fitting of voice prosthetic or augmentative/alternative communication device to support oral speech that exceed eight units per calendar year
	V5362	Speech screenings (articulation) that exceeds four units per calendar year.
	V5363	Language screenings (receptive or expressive) that exceeds four units per calendar year.
	V5364	Dysphagia screenings that exceeds four units per calendar year.
Any combination of the following codes that exceeds 50 hours per calendar year.		
	92507	Individual speech, language and hearing treatment

92507	Individual speech, language and hearing treatment
92508	Group speech language or hearing treatment
92510	Aural rehab following cochlear implant
92526	Treatment of swallowing dysfunction and/or oral function for feeding

AUDIOLOGY

The following codes require authorization:

The following codes require audiorization.		
92506	Audiology evaluation/reevaluations that exceed two per calendar year	
92507	Individual hearing therapy that exceeds five sessions per calendar year	
92592	Monaural or binaural hearing aid checks that exceed four per calendar year (one unit maximum per day)	
92593	Monaural or binaural hearing aid checks that exceed four per calendar year (one unit maximum per day)	
92599	Unlisted otorhinolaryngologic service	
Any combination of the following codes that exceeds one per calendar year.		
92590	Monaural hearing aid exam & selection	

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

VII. ALL OTHER SERVICES

The following health services require authorization:

- 1. All air ambulance transportation that originates or is to a destination outside of Minnesota.
- 2. ALS or BLS non emergency ambulance trips in excess of six trips per month.
- 3. Scheduled ground transportation provided outside of Minnesota.
- 4. Partial hospitalization programs.
- 5. Investigative health services and procedures
- 6. Procedures that may be considered cosmetic. If staged reconstructive surgery is being proposed for correction of a congenital anomaly the complete plan for future surgeries must be submitted with the first authorization.
- 7. All surgical or behavioral modification services aimed specifically at weight reduction.
- 8. Services provided outside of Minnesota. This requirement for prior authorization does not include services provided in a recipient's local trade area that would not require prior authorization if provided within Minnesota, emergency services, services needed because the recipient's health would be endangered if the recipient was required to return to Minnesota or services provided to children placed outside of Minnesota through the subsidized adoption assistance program under *Minnesota Statutes*, Section 256B.055, subdivision 1 or 2. Includes any transportation costs.

In addition, the following specific procedures and investigative procedures require authorization. There are four lists: Non-investigative services, no code list, investigative services (alpha), and investigative services (numeric).

1. Non-Investigative Services

Service <u>Code</u>	Service Description
A4301	Implantable access total system, catheter, port reservoir (venous, arterial or epidural), percutaneous access.
E0751	Implantable pulse generator
E0782	Infusion pump, implantable
E0783	Programmable infusion pump
E0784	External ambulatory pump, insulin
J0585	Botulinum Toxin Type A
K0454	Nonpowered pressure mattress
Q0134	Collagen implant material
X0691*9	Day treatment, nervous and mental
X5231*21	Face-to-face contact between the case manager and the client
X5232*21	Face-to-face contact between the case manager and the client's family, legal representative, primary caregiver, mental health providers, or other service providers, or other interested persons
X5233*21	Telephone contact between the case manager and client, the client's mental health provider or other service providers, a client's family, legal representative, primary caregiver, or other interested persons (MA reim bursement limited to three hours per month)
X5234*21	Contacts between the case manager and the case manager's clinical supervisor concerning the client
X5235*21	Development, review, and revision of the client's ICSP or IFCSP, including the case manager's functional assessment of the client
X5236	Time spent by the case manager traveling outside the county of financial responsibility to meet face-to-face with a client or the client's family, legal representative, or primary caregiver when the client is a resident of a regional treatment center, residential treatment facility, or an inpatient hospital located outside the county of financial responsibility (MA reimbursement limited to eight hours per day)
X5237*2	Time spent by the case manager traveling within the county of financial responsibility to meet face-to-face with the client or the client's family, legal representative, or primary caregiver
X5317*15	Cognitive remediation training (1 to 3 clients)
X5318*15	Cognitive remediation training (4 to 9 clients)

Service <u>Code</u>	Service <u>Description</u>
X5535*16	Neuropsychological rehabilitation (individual)
X5536*17	Neuropsychological rehabilitation (group)
X5330	Partial hospitalization program - adult
X5331	Partial hospitalization program - adolescent
X5528*22	Crisis assistance in a family community support service program
X5538*22	Individual skills training in a home-based mental health, therapeutic support of foster care, and family community support service program.
X5539*22	Family skills training in a home-based mental health, therapeutic support of foster care, and family community support service program.
X5540*22	Group skills training in a home-based mental health, therapeutic support of foster care, and family community support service program.
X5541*22	Travel in a home-based mental health, therapeutic support of foster care and family community support service program
X5641*2	Private duty nursing by RN
X5642*2	Private duty nursing by LPN
X7010	ICF-MR and DAC special needs - service (review by Long-term Care Division)
X7020	ICF-MR and DAC special needs - equipment (review by Long-term Care Division)
11920	Tattooing, intradermal introduction of insoluble opaque pigments to correct color defects of skin, including micropigmentation; 6.0 sq cm or less
11921	6.1 to 20.0 sq cm
11922	each additional 20.0 sq cm
11950	Subcutaneous injection of "filling" material (e.g., collagen); 1 cc or less
11951	1.1 to 5 cc
11952	5.1 to 10 cc
11954	over 10 cc
11450	Excision of skin and subcutaneous tissue for hidradenitis, axillary; with simple or intermediate repair
11451	with complex repair
11462	Excision of skin and subcutaneous tissue for hidradenitis, inguinal; with simple or intermediate repair
11463	with complex repair
11470	Excision of skin and subuteaneous tissue for hidradenitis; perianal, perineal, or ubilical; with simple or intermediate repair
11471	with complex repair
15775	Punch graft for hair transplant; 1 to 15 punch grafts
15776	more than 15 punch grafts
15780	Dermabrasion of skin
15781	less than total face
15782	regional
15783	superficial, any site (e.g., tattoo removal)
15786	Abrasion; single lesion
15787	each additional four lesions or less
15788	Chemical peel, facial; epidermal
15789	facial; dermal

Service <u>Code</u>	Service <u>Description</u>
15792	non-facial; epidermal
15793	non-facial; dermal
15810	Salabrasion; 20 sq. cm or less
15811	over 20 sq. cm
15820	Blepharoplasty, lower eyelid
15821	with extensive herniated fat pad
15822	Blepharoplasty, upper eyelid
15823	with excessive skin weighing down lid
15824	Rhytidectomy; forehead
15825	neck with platysmal tightening (platysmal flap, "P-flap")
15826	glabellar frown lines
15828	cheek, chin and neck
15831	Excision, excessive skin and subcutaneous tissue (including lipectomy), abdomen (abdominoplasty)
15832	thigh
15833	leg
15834	hip
15835	buttock
15836	arm
15837	forearm or hand
15838	submental fat pad
15839	other area
15876	Suction assisted lipectomy, head and neck
15877	trunk
15878	Suction assisted lipectomy, upper extremity
15879	lower extremity
17106*24	Destruction of cutaneous vascular proliferative lesions (e.g. laser technique); less than 10 sq. cm
17107*24	10.0 - 50.0 sq. cm
17108*24	over 50.0 sq. cm
17380	Electrolysis epilation, each 1/2 hour
19140	Mastectomy for gynecomastia through circumareolar or other incision
19182	Subcutaneous mastectomy
19316	Mastopexy
19318	Reduction mammaplasty
19324	Mammaplasty, augmentation without prosthetic implant
19325	with prosthetic implant
19328	Removal of intact mammary implant
19355	Correction of inverted nipples
20550*25	Injection, tendon sheath, ligment, trigger point or ganglion cyst
20975	Electrical stimulation to bone healing invasive (operative)
21010	Arthrotomy, temporomandibular joint
21050	Condylectomy, temporomandibular joint (separate procedure)

Service <u>Code</u>	Service Description
21060	Meniscectomy, temporomandibular
21070	Coronoidectomy (separate procedure)
21085	Impression and custom preparation; oral surgical splint
21110	Application of interdental fixation device, includes removal
21137	Reduction forehead; contouring only
21138	Reduction forehead; contouring and application of prosthetic material or bone graft (includes obtaining autograft)
21139	Reduction forehead; contouring and setback of anterior frontal sinus wall
21141	Reconstruction midface, Lefort I; single piece, segment movement in any direction (eg, for Long Face Syndrome), without bone graft
21142	two pieces, segment movement in any
21143	three or more pieces, segment movement in any direction, without bone graft
21145	Reconstruction midface, Lefort I; single piece, any direction, requiring bone grafts (includes obtaining autografts)
21146	Reconstruction midface, Lefort I; two pieces, any direction, requiring bone grafts (includes obtaining autografts) (e.g., ungrafted unilateral alveolar cleft)
21147	Reconstruction midface, Lefort I; three or more pieces, any direction, requiring bone grafts (includes obtaining autografts) (e.g., ungrafted bilateral alveolar cleft or multiple osteotomies)
21150	Reconstruction midface, Lefort II; anterior intrusion (e.g., Treacher-Collins syndrome)
21151	Reconstruction midface, Lefort II; any direction, requiring bone grafts (includes obtaining autografts)
21154	Reconstruction midface, Lefort III (extracranial), any type, requiring bone grafts (includes obtaining autografts); without Lefort I
21155	Reconstruction midface, Lefort III (extracranial), any type, requiring bone grafts (includes obtaining autografts); with Lefort I
21159	Reconstruction midface, Lefort III (extra and intracranial), with forehead advancement (e.g., mono bloc), requiring bone grafts (includes obtaining autografts); without Lefort I
21160	Reconstruction midface, Lefort III (extra and intracranial), with forehead advancement(e.g., mono bloc), requiring bone grafts (includes obtaining autografts); with Lefort I
21172	Reconstruction superior-lateral orbital rim and lower forehead, advancement or alteration, with or without grafts (includes obtaining autografts)
21175	Reconstruction bifrontal, superior-lateral orbital rims and lower forehead, advancement or alternation (e.g. plagiocephaly, trigonocephaly, brachycephaly), with or without grafts (includes obtaining autografts)
21179	Reconstruction, entire or majority of forehead and/or supraorbital rims; with grafts (allograft or prosthetic material)
21180	Reconstruction, entire or majority of forehead and/or supraorbital rims; with autograft (includes obtaining grafts)
21181	Removal by contouring of benign tumor of cranial bones (e.g., fibrous dysplasia), extracranial
21182	Reconstruction of orbital walls, rims, forehead, nasoethmoid complex following intra-and extracranial excision of benign tumor of cranial bone (e.g., fibrous dysplasia), with multiple autografts (includes obtaining grafts); total area of bone grafting less than 40cm2
21183	Reconstruction of orbital walls, rims, forehead, nasoethmoid complex following intra-and extracranial excision of benign tumor of cranial bone (e.g., fibrous dysplasia), with multiple autografts (includes obtaining grafts); total area of bone grafting greater than 40 cm2, but less than 80 cm2
21184	Reconstruction of orbital walls, rims, forehead, nasoethmoid complex following intra- and extracranial excision of benign tumor of cranial bone (e.g., fibrous dysplasia), with multiple autografts (includes obtaining grafts); total area of bone grafting greater than 80 cm2

Service <u>Code</u>	Service Description
21188	Reconstruction midface, osteotomies (other than Lefort type) and bone grafts (includes obtaining autografts)
21193	Reconstruction of mandibular ramus, horizontal, vertical, "c" or "l" osteotomy; without bone graft
21194	Reconstruction of mandibular ramus, horizontal, vertical, "c" or "l" osteotomy; with bone graft
21195	Reconstruction of mandibular ramus, sagittal split; without internal rigid fixation
21196	Reconstruction of mandibular ramus, sagittal split; with internal rigid fixation
21198	Osteotomy, mandible, segmental
21206	Osteotomy, maxilla, segmental (e.g., Wassmund or Schuchard)
21208	Osteoplasty, facial bones; augmentation (autograft, or prosthetic implant)
21209	Osteoplasty, facial bones; reduction
21240	Arthroplasty, temporomandibular joint, with or without autograft (includes obtaining graft)
21242	Arthroplasty, temporomandibular joint, with allograft
21243	Arthroplasty, temporomandibular joint with prosthetic joint replacement
21244	Reconstruction of mandible, extraoral, with transosteal bone plate
21245	Reconstruction of mandible or maxilla, subperiosteal implant, partial
21246	Reconstruction of mandible or maxilla, subperiosteal implant, complete
21247	Reconstruction of mandibular condyle with bone and cartilage autografts (includes obtaining grafts) (e.g., for hemifacial microsomia)
21248	Reconstruction of mandible or maxilla, endosteal implant, partial
21249	Complete
21255	Reconstruction of zygomatic arch and glenoid fossa with bone and cartilage (includes obtaining autografts)
21256	Reconstruction of orbit with osteotomies (extracranial) and with bone grafts (includes obtaining autografts) (e.g., microphthalmia)
21299	Unlisted craniofacial and maxillofacial procedure
21260	Periorbital osteotomies for orbital hypertelorism
21261	combined intra and extracranial approach
21263	with forehead advancement
21267	Orbit repositioning
21268	combined intra and extracranial approach
21270	Malar augmentation, prosthetic material
21275	Secondary revision of orbitocraniofacial reconstruction
21462*7	Open treatment of closed or open mandibular fracture, with interdental fixation
21485	Complicated manipulative treatment of TMJ dislocation, initial or subsequent
30120	Excision or surgical planing of skin of nose
30400	Rhinoplasty, primary
30410	Complete
30420	Including major septal repair
30430	Rhinoplasty, secondary
30435	Intermediate
30450	Major revision
32491	Removal of lung other than pneumonectomy; excision/pliction of emphysematous lung(s) bullous or non bullous) for lung volume reduction. Sternal split or transthracic approach with or without any pleural.

Service <u>Code</u>	Service Description
32851	Lung transplant, single; without cardiopulmonary bypass
32852	with cardiopulmonary bypass
32853	double (bilateral sequential or en bloc); without cardiopulmonary bypass
32854	double (bilateral sequential or en bloc); with cardiopulmonary bypass
33935	Heart-lung transplant with recipient cardiectomy, pneumonectomy
36468	Single or multiple injections of sclerosing solutions, spider veins (telangiectasia); limb or trunk
36469	face
36470	Injection of sclerosing solution; single vein
36471	multiple veins, same leg
36530	Insertion of implantable intravenous infusion pump
38240	Bone marrow transplant, allogenic
38241	Bone marrow transplant, autologous
42140	Uvulectomy, excision of uvula
42145	Palatopharyngoplasty (e.g., uvulopalatopharyngoplasty, uvulopharyngoplasty)
43842	Gastroplasty, vertical-banded, for morbid obesity
43843	Gastroplasty, other than vertical-banded, for morbid obesity
43845	Gastroplasty, any method, for morbid obesity
43846	Gastric restrictive procedure, with gastric bypass for morbid obesity with short limb (less than 100 cm) Roux-en-Y gastroenterostomy
43847	Gastric restriction procedure, with gastric bypass for morbid obesity
43848	Revision of gastric restriction procedure for morbid obesity (separate procedure)
43850	Revision of gastroduodenal anastomosis with reconstruction; without vagotomy
43855	with vagotomy
43860	Revision of gastrojejunal anastomosis (gastrojejunostomy) with reconstruction; without vagotomy
43865	with vagotomy
44130	Enteroenterostomy, anastomosis of intestine; with or without cutaneous enterostomy (separate procedure)
47135	Liver transplant, with or without recipient hepatectomy
47136	Liver allotransplantation, heterotoxic, partial or whole, from cadaver or living donor any age
48160	Pancreatectomy, total or subtotal, with autologous transplantation of pancreas or pancreatic islets
48554	Transplantation of pancreatic allograft
51715	Endoscopic injection of implant material into submucosal tissues of the urethra
52510	Transurethral balloon dilation of prostatic urethra, any method
54400	Insertion of penile prosthesis; non-inflatable, semi-rigid.
54401	inflatable, self contained
54405	Insertion of inflatable penile prosthesis
54660	Insertion of testicular prosthesis
55970	Intersex surgery; male to female
55980	female to male
61770	Stereotactic localization, or any method, including burr hole(s), with insertion of catheter(s) for brachytherapy (for Parkinsonism)
61850	Twist drill or burr hole(s) for implantation of neurostimulator electrodes, cerebral; cortical

Service <u>Code</u>	Service <u>Description</u>
61855	subcortical
61860	Craniectomy or craniotomy for implantation of neurostimulator electrodes; cerebral; cortical
61865	subcortical
61870	Craniectomy for implantation of neurostimulator electrodes, cerebellar; cortical
61875	subcortical
61885	Incision and subcutaneous placement of cranial neurostimulator pulse generator or receiver, direct or inductive coupling.
62350	Implantation, revision or repositioning of intrathecal or epidural catheter
62351	Insertion or replacement, subarachnoid or epidural catheter, with resevoir and/or pump for intermittent or continuous infusion of drug, including laminectomy
62360	Implantation or replacement of device for intrathecal or epidural drug
62361	Implantation or replacement of device or intrathecal epidural drug
63185	Laminectomy with rhizotomy; 1 or 2 segments
63190	Laminectomy with rhizotomy; more than 2 segments
63650	Percutaneous implantation of neurostimulator electrodes; epidural
63655	Laminectomy for implantation of neurostimulator electrodes
63685	Incision and subcutaneous placement of spinal neurostimulator pulse generator or receive, direct or inductive coupling
64553	Percutaneous implantation of neurostimulator electrodes; cranial nerve
64555	peripheral nerve
64560	autonomic nerve
64565	neuromuscular
64573	Incision for implantation of neurostimulator electrodes; cranial nerve
64575	peripheral nerve
64577	autonomic nerve
64580	neuromuscular
64590	Incision and subcutaneous placement of peripheral neurostimulator pulse generator or receiver, direct or inductive coupling
64612*8	Destruction by neurolytic agent (chemodenervation of muscle endplate); muscles enervated by facial nerve
64613*8	cervical spinal muscles
65760	Keratomileusis
65765	Keratophakia
65767	Epikeratoplasty
65770	Keratoprosthesis
65771	Radial keratotomy
65772	Corneal relaxing incision for correction of surgically induced astigmatism
65775	Corneal wedge resection for correction of surgically induced astigmatism
67345	Chemodenervation of extraocular muscle
67900	Repair of brow ptosis (supraciliary, mid-forehead or coronal approach)
67901	Repair blepharoptosis, frontalis muscle technique with suture
67902	frontalis muscle technique with fascial sling
67903	(tarso)levator resection or advancement, internal approach

Service <u>Code</u>	Service <u>Description</u>
67904	(tarso)levator resection or advancement, external approach
67906	superior rectus technique with fascial sling
67909	Reduction of overcorrection of ptosis
67911	Correction of lid retraction
69300	Otoplasty, protruding ear, with or without size reduction
69710	Implantation or replacement of electromagnetic bone conduction hearing device in temporal bone
69930	Cochlear implant
G0032	PET myocardial perfusion imaging, (following rest spect, 78464); single study, rest or stress (exercise and/or pharmacologic).
G0033	PET myocardial perfusion imaging, (following rest spect, 78464); multiple studies, rest or stress (exercise and/or pharmacologic).
G0034	PET myocardial perfusion imaging, (following rest spect, 78465); single study, rest or stress (exercise and/or pharmacologic).
G0035	PET myocardial perfusion imaging, (following rest spect, 78465); multiple studies, rest or stress (exercise and/or pharmacologic).
G0036	PET myocardial perfusion imaging, (following coronary angiography, 93510-93529); single study, rest or stress (exercise and/or pharmacologic).
G0037	PET myocardial perfusion imaging. (Following coronary angiography, 93510-93529); multiple studies, rest or stress (exercise and/or pharmacologic).
G0038	PET myocardial imaging, (following stress planar myocardial perfusion, 78460); single study, rest or stress (exercise and/or pharmaclolgic).
G0039	PET myocardial perfusion imaging, (following stress planar myocardial perfusion, 78460); multiple studies, rest or stress (exercise and/or pharmacologic).
G0040	PET mycardial perfusion imaging, (following stress echocardiogram, 93350); single study, rest or stress (exercise and/or pharmacologic).
G0041	PET myocardial perfusion imaging, (following stress echocardiogram, 93350.)
G0042	PET myocardial persusion (following stress ventriculogram, 78481 or 78483); single study, rest or stress (exercise and/or pharmacologic).
G0043	PET myocardial perfusion imaging, (following stress ventriculogam, 78481 or 78483); multiple studies, rest or stress (exercises and/or pharmacologic).
G0044	PET myocardial perfusion imaging, (following rest ECG, 93000); single study, rest or stress (exercise and/or pharmacologic).
G0045	PET myocardial perfusion imaging (following rest ECG,93000); multile studies, rest or stress (exercise and/or pharmacologic).
G0046	PET myocardial perfusion imaging, (following rest ECG, 93015); single study, rest or stress (exercise and/or pharmacologic).
G0047	PET myocardial perfusion imaging (following rest ECG, 93015); multiple studies, rest or stress (exercise and/or pharmacologic).
G0125	PET lung imaging of solitary pulmonary nodules following CT (7125, 71260 or 71270)
G0126	PET lung imaging of solitary pulmonary nodules using 2 fluoro (FD6) following CT (71250, 71260, 71270) initial staging of pathologically diagnosed non-small cell lung cancer.
75553	Cardiac MRI for morphology; with contrast material
75554	Cardiac MRI for function, with or without morphology, complete study
75555	Cardiac MRI for function, with or without morphology; limited study
75556	Cardiac MRI for volocity flow mapping

	Service	Service
	Code	<u>Description</u>
	76070*26	Computerized tomograpy, bone density study.
	76075*27	Dual energy X-ray absorptiometry (DEXNA), bone density study.
	76076*28	Dual energy X-ray absorptiometry (DEXA), bone density study, one or more sites.
	76078	Radiographic absorptiometry (photodensitometry), one or more sites
	76093	MRI breast, unilateral, with or without contrast
	76094	MRI breast, bilateral, with or without contrast
	76390	Magnetic resonance spectroscopy (for magnetic resonance imaging, use appropriate MRI body site code)
	78350	Bone density (bone mineral content) study; single photon absorptiometry
	78351	dual photon absorptiometry
	78459	MRI, positron emission tomography (PET), metabolic evaluation
	78491	MRI, positron emission tomography (PET), perfusion; single study at rest or stress
	78492	MRI, positron tomography (PET), perfusion; multiple studies at rest or stress
4	78494	Cardiac blood pool imaging, grated equilibrium, SPECT, at rest, wall motion study plus ejection fraction, with or without quantitative processing.
4	- 78496	Cardiac blood pool imaging, gated equilibrium, single study, at rest, with right ventricular ejection fraction by first pass technique.
	78608	PET scan; metabolic evaluation
	78609	Brain Imaging (PET) positron emission tomography
	78807	Radionuclide localization of abscess (SPECT)
	78810	Tumor imaging, positron emission tomography (PET), metabolic evaluation
	90802*14	Interactive diagnostic assessment
	90804*4	Individual psychotherapy, insight oriented, behavior modifying and/or supportive, in an office or outpatient facility, 20-30 minutes face to face with patient.
	90805*4	Individual psychotherapy, insight oriented, behavior modifying and/or supportive, in an office or outpatient facility, 20-30 minutes face to face with patient; with medical evaluation and management services
	90806*4,22	Individual psychotherapy, insight oriented, behavior modifying and/or supportive, in office or outpatient facility, 45-50 minutes face to face with patient
	90807*4,22	Individual psychotherapy, insight oriented, behavior modifying and/or supportive, in office or outpatient facility, 45-50 minutes face to face with patient; with medical evaluation and management services
	90808*4,22	Individual psychotherapy, insight oriented, behavior modifying and/or supportive, in office or outpatient facility, 75-80 minutes face to face with patient;
	90809*4,22	Individual psychotherapy, insight oriented, behavior modifying and/or supportive, in office or outpatient facility, 75-80 minutes face to face with the patient; with medical evaluation and management services
	90810*14	Individual psychotherapy, interactive, using play equipment, physical devices, language interpreter, or other mechanisms of non-verbal communications, in an office or outpatient facility, 20-30 minutes face to face with patient
	90811*14	Individual psychotherapy, interactive, using play equipment, physical devices, language interpreter, or other mechanisms of non-verbal communication in an office or outpatient, facility, 20-30 minutes face to face with patient; with medical evaluation and management services
	90812*14	Individual psychotherapy, interactive, using play equipment, physical devices, language interpreter, or other mechanisms of non-verbal communication, in an office or outpatient facility, 45-50 minutes face to face with patient
	90813*14	Individual psychotherapy, interactive, using play equipment, physical devices, language interpreter, or other mechanisms of non-verbal communication in an office or outpatient facility, 45-50 minutes face to face with patient, with medical evaluation and management services

Service <u>Code</u>	Service <u>Description</u>
90814*14	Individual psychotherapy, interactive, using play equipment, physical devices, language interpreter, or other mechanisms of non- verbal communication in an office or outpatient facility, 75-80 minutes face to face with patient
90815*14	Individual psychotherapy, interactive, using play equipment, physical devices, language interpreter, or other mechanisms of non- verbal communication, in an office or outpatient facility, 75-80 minutes face to face with patient with medical evaluation and management services
90816*29	Individual psychotherapy, insight oriented, behavior modifying and/or supportive, in an inpatient hospital, partial hospital or residential care setting, approximately 20 to 30 minutes face to face with the patient;
90817*29	Individual psychotherapy, insight oriented, behavior modifying and/or supportive, in an inpatient hospital, partial hospital or residential care setting, approximately 20 to 30 minutes face to face with the patient; with medical evaluation and management services;
90818*29	Individual psychotherapy, insight oriented, behavior modifying and/or supportive, in an inpatient hospital, partial hospital or residential care setting, approximately 45 to 50 minutes face to face with the patient;
90819*29	Individual psychotherapy, insight oriented, behavior modifying and/or supportive, in an inpatient hospital, partial hospital or residential care setting, approximately 45 to 50 minutes face to face with the patient; with medical evaluation and management services;
90821*29	Individual psychotherapy, insight oriented, behavior modifying and/or supportive, in an inpatient hospital, partial hospital or residential care setting, approximately 75 to 80 minutes face to face with the patient;
90822*29	Individual psychotherapy, insight oriented, behavior modifying and/or supportive, in an inpatient hospital, partial hospital or residential care setting, approximately 75 to 80 minutes face to face with the patient; with medical evaluation and management services;
90823*29	Individual psychotherapy, interactive, using play equipment, physical devices, language interpreter, or other mechanisms of non-verbal communication, in aninpatient, partial hospital or residential care setting, approximately 20 to 30 minutes face to face with the patient;
90824*29	Individual psychotherapy, interactive, using play equipment, physical devices, language interpreter, or other mechanisms of non-verbal communication, in an inpatient, partial hospital or residential care setting, approximately 20 to 30 minutes face to face with the patient; with medical evaluation and management services
90826*29	Individual psychotherapy, interactive, using play equipment, physical devices, language interpreter, or other mechanisms of non-verbal communication, in an inpatient, partial hospital or residential care setting, approximately 45 to 50 minutes face to face with the patient;
90827*29	Individual psychotherapy, interactive, using play equipment, physical devices, language interpreter, or other mechanisms of non-verbal communication, in an inpatient, partial hospital or residential care setting, approximately 45 to 50 minutes face to face with the patient; with medical evaluation and management services
90828*29	Individual psychotherapy, interactive, using play equipment, physical devices, language interpreter, or other mechanisms of non-verbal communication, in an inpatient, partial hospital or residential care setting, approximately 75 to 80 minutes face to face with the patient;
90829*29	Individual psychotherapy, interactive, using play equipment, physical devices, language interpreter, or other mechanisms of non-verbal communication, in an inpatient, partial hospital or residential care setting, approximately 75 to 80 minutes face to face with the patient; with medical evaluation and management services
90846*4,22	Family psychotherapy (without the patient present)
90847*4,22	Family psychotherapy (conjoint psychotherapy) (with patient present)
90853*14	Group therapy (other than of a multiple-family group)
90857*14	Interactive group psychotherapy
90875*4	Individual psychophysiological therapy incorporating biofeedback training by any modality (face to face) with the patient and, with psychotherapy (e.g., insight oriented, behavior modifying or supportive psychotherapy); 20-30 minutes
90899	Unlisted psychiatric service or procedure
95805*23	Multiple sleep latency testing

Service <u>Code</u>	Service Description
95807*23	Sleep study, 3 or more parameters
95808*23	Polysomnography; sleep staging with 1-3 additional parameters
95810*23	Polysomnography; sleep staging with 4 or more additional parameters
97780*20	Acupuncture, one or more needles; without electrical stimulation
☞ 97781*20	Acupuncture, one or more needles; with electrical stimulation
98940*1	Chiropractic manipulative treatment (CMT); spinal, one to two regions
98941*1	spinal, three to four regions
98942*1	spinal, five regions

- *1 For any combination of the CMT codes authorization is required for treatments in excess of 6 per month and 24 per calendar year.
- *2 All hours of private duty nursing provided in a hospital or facility certified as an ICF, SNF, or ICF-MR.
- *4 A. Authorization is required for more than twenty-six (26) hours (52 visits/units of 90804, 90805) or 90875 (when billed in one unit increments) and twenty (20) hours of 90806 or 90807 or 40 units of 90875 (when billed in two-unit increments) per calendar year. Note: The 90875 when billed as one unit and 90804 or 90805 combined decrements from the total 26 hours per calendar year. There is not a separate benefit level for each code. Likewise, 90875 when billed as two units and 90806 or 90807 combined decrement from the total 20 hours per calendar year. There is not a separate benefit level for each code.
 - B. In addition to the twenty hours of 90806 or 90807 allowed in A above, a recipient is entitled to six (6) X5531's which are discretionary visits and may be used in any frequency or in combination with any other psychotherapy which is subject to the PA requirement without requiring PA. For example, a provider may choose to provide a group therapy session (90853) and an individual therapy session (90806 or 90807 or X5531) during the same five (5) day calendar period. This would normally require PA if the 90806 or 90807 code was used. See F below. However, by using one of the six (6) X5531's the PA system can be bypassed. The purpose of these X5531s is to provide flexibility without the need for obtaining PA. Please utilize them carefully and thoughtfully.
 - C. PA is required when 90804 or 90805 or one unit of 90875 is provided in excess of once every five (5) calendar days.
 - D. PA is required either when more than three (3) hours of 90853 are provided within a five (5) calendar day period, or when more than seventy-eight (78) hours per calendar year has been reached.
 - E. PA is required for 90847 in excess of 26 hours per calendar year or when provided in excess of once every five (5) calendar days. (Note: 90846 must be used when the family member being treated is not present during the family therapy session. CPT 90846 is subject to the same P.A. requirements and limitations as those imposed on CPT 90847. Use of this code does not result in an additional benefit level but counts against the benefit level available for 90847.
 - F. PA is required when more than one type of psychotherapy (individual, group, or family) is provided within a five (5) calendar day period. However, 90804-90807 cannot be provided in excess of once every ten (10) calendar days without PA. (Note:90846 and 90847 are both considered to be family therapy.) For children under age 21, these restrictions do not apply. For children, there are no spacing requirements applied between individual and family psychotherapy. They are flexible with no spacing requirement applied between these services.
 - G. PA is required for 90806 or 90807 or two units of 90875 when provided in excess of once every ten (10) calendar days, and when 90804 or 90805 or one unit of 90875 and 90806 or 90807 or two units of 90875 are provided in excess of one every ten (10) calendar days. For children under age 21, these restrictions do not apply). The provision of these services for children will be subject to a weekly (5 day) spacing with PA needed after the basic benefit is used.

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

- *7 Authorization is required if this code is used more than 30 days after documented fracture.
- *8 Authorization is required for chemodenervation of any area.
- *9 Authorization is required for day treatment in excess of 390 hours.
- *14 Authorization is required for 90802, 90810-90814, 90857 when the thresholds of 90801,90806 or 90807, 90853 have been used. These codes will be included in the thresholds of codes 90801, 90806 or 90807, 90853. (The provider cannot bill both a 90806 or 90807 and 90810-90814. They must choose one or the other.)

- *15 Authorization is required for cognitive remediation training (X5317, or X5318, or a combination of X5317 and X5318) in excess of 390 hours.
- *16 Authorization is required for neuropsychological rehabilitation (X5535) prior to service initiation and for more than 20 hours.
- *17 Authorization is required for neuropsychological rehabilitation (X5536) prior to service initiation and for more than 78 hours.
- *19 Authorization is required for neuropsychological testing and assessment (96117) a) to exceed 7 hours (or 28 units) of CPT code 96117 services per calendar year. A maximum of 10 hours (or 40 units) may be approved with prior authorization for a single assessment; and/or if multiple assessments (i.e., re-evaluation) are requested and determined to be medically necessary, a maximum of 15 hours (or 60 units) of CPT code 96117 may be allowed with authorization for the calendar year.
- *20 Acupuncture is covered for chronic pain. Authorization is required in excess of 10 sessions, and must be performed by an M.D or a licensed acupuncturist employed and supervised by an M.D. or; provided through a hospital pain management program by an M.D. or a licensed acupuncturist who is supervised by M.D.
 - *21 A child under age 21 may exceed the payment limitation of 10 hours per calendar month of case management services (exclusive of out-of-county travel) with prior authorization.
 - *22 A child under age 21 eligible for home-based mental health, therapeutic support of foster care, family community support services may exceed the payment limitations for this package with authorization.
 - *23 Authorization is required for persons 18 years of age and under.
 - *24 Authorization is not required for port wine stain birthmarks.
 - *25 Authorization needed after three sessions, up to five injections per session within thirty days.
 - *26 Authorization is required after 1 per calendar year
 - *27 Authorization is required after 1 per calendar year.
 - *28 Authorization is required after 1 per calendar year.
 - *29 Codes 90816 through 90829 when provided in other than an inpatient place of service shall be subject to the same practice parameters and service coverage limitations as other outpatient, individual psychotherapy codes (90804 through 90815) unless authorized.

2. INVESTIGATIVE LIST ALPHA ORDER

NO CODE ASSIGNED

Angel Wings Occluder

Autograft skin culture and culture transplants for severe burns and patients with giant hairy nevus

Autologous Chondrocvte Implantation

Balloon transurethral divulsion of prostate gland

Bullectomy (laser)

Cardiomyoplasty

Coma stimulation

Cranial sacral therapy

Cryosurgical Ablation of Prostate

Contact Dissolution Therapy

Chronic electrostimulation of the pallidum for Parkinson's disease.

Diastasis Recti Abdominus repair

Electrostimulated Gracilis Neosphinctor

Energy Emission Analysis

Fetal Tissue transplantation

Gravity lumbar reduction

Homeopathy & Homeopathic Gene Therapy Treatment Drugs

Homeopathic Medicine, Electrodiagnostic Machine

Knee Cartilage ((Meniscus) Transplants including autologous chrondrocyte implementation

Impedance Cardiography

Impotence - Vascular Surgery

Nerve Expansion

Nephrectomy (Percutaneous)

Neurometric encephalogram

Omental Transposition to Spinal Cord

Perfusion- isolated limb

Photodynamic therapy

Phototherapeutic Keratectomy

Red blood cell substitutes

Scanning laser technologies for glaucoma testing and monitoring

Seismocardiogram

Tissue Engineering

Topographic Brain Mapping

Transmyocardial Laser Revasculization

Transurethral Cryosurgical removal of prostate

Ventricular reduction surgery

Vertebral Axial Compression

Vagal Nerve Stimulator using Neralcybernetics Prosthesis (NCP)

ALPHA ORDER

Alpha- 1 Antitrypsin Deficiency Replacement Therapy - investigative except when used in patients satisfying the following criteria: (90799, 90784)

- 1. inherited alpha- 1 antrypsin deficiency;
- nonsmoking;
- 3. forced expiratory volume (FEV1) should be less than 65% of the normal value;
- 4. patients waiting for lung transplantation.

Ambulatory blood pressure monitoring

Angioplasty Laser - 92982, 92984

Apheresis - For LDL

- Hypercholesterolemia: Familial type IIA homozygous form (P)

Apnea Appliance, Oral

Arthoscopy/Arthroscopic Surgery for treatment of TMJ (29800, 29804) - when used for diagnosis only

Artificial Heart Implant (CPT codes 33945, 33999)

Cervigram - (considered not medically necessary)

Cochlear Implantation - The procedure is considered clinically accepted therapy in perlingually and postlingually deaf adults and children ages 2-17 years who cannot significantly benefit from a hearing aid. authorization is required. (69930, 69710 - 69711, L8614)

Cytoxan for Neurological Disorders - investigative except in patients with progressive MS who have failed standard therapy. (J9070 - J9092)

Epikeratophakia Lens (authorization required for eligible indications). (65760, 65765, 65767)

Fallopian Tube Catheterization (58345) - investigative except for restoring patency in proximal fallopian tube obstruction.

Gunderson Lyme Test - test is considered investigative.

Hair Analysis (82175, 83015, 83018)

Hyperhomocysteinemia

Immunoglobulin Therapy - investigative for the treatment of multiple sclerosis, chronic fatigue syndrome, and chronic sinus infections. Not considered investigative for acute inflammatory demyelinating polyneuropathy (Guillan Barre). (91560, 91561, 90799)

Infusion Pumps (implantable)

Impotence - surgical correction of organic impotence by either venous or arterial procedures is considered investigative. (37780 and 37790)

- A. Epidural access (CPT codes 63750, 63780)
 - 1. Administration of analgesia for control of severe, intractable pain of the terminally ill secondary to malignancy;
 - 2. Control of spasticity with low dose morphine;
 - 3. Control of physically disabling spasticity of spinal origin (i.e., resulting from Multiple Sclerosis or spinal cord injury) with intrathecal baclofen (Lioresal)in patients who:
 - a. are refractive to various pharmacologic (i.e., oral baclofen) and exercise therapies, and
 - b. have a significant functional component that is expected to improve with this therapy.

Note: We will pay for services associated with infusion pumps only when the pump is FDA approved. These associated services include implantation surgery and hospitalization. Infusion pumps provided on an outpatient basis require prior authorization. Infusion pumps associated with inpatient services are covered as part of the DRG payment and cannot be billed separately.

Interleukin 2 - for malignant melonoma - considered investigative for all indications except renal cell carcinoma.

Intravaginal Conception (IVC)

Iontophoresis Devices for Hyperhidrosis

IV Vitamins and Minerals - investigative when administered in the office setting for allergies, candidiasis, chronic fatigue syndrome, Epstein-Barr virus, and multiple sclerosis.

Laser Assisted Uvulopalatpharyngoplasty (LAUP)

Laser Corneal Sculpturing

Lyme Borreliosis Antigen Testing

Lymphokine Activated Killer Cells (LAK)

Magnetic Source Imaging

Methyl Test - Butyl Ether (MTBE) (43265)

Photodynamic Therapy

Phototherapy Lights - investigative for Seasonal Affective Disorders

Platelet Derived Wound Healing Factor (PDWHF)

Posturography

Prolastin - see alpha- 1 antitrypsin deficiency for indications for coverage.

Promontory Test

Protropin

Quantitative Computed Tomography (Bone Mineralization Studies)

Rhinomanometry (92512)

Rotating Chair Test

Sclerotherapy - investigative as a stand-alone treatment for varicose veins of the lower extremities. Sclerotherapy used in conjunction with surgical ligation or stripping, up to four months postoperatively, is considered accepted medical practice. Authorization is required. (36468 - 36471)

Seismocardiogram (93799)

Signal-Averaged ECG (93278)

Somatostatin Analog - investigative except for the treatment of metastatic carcinoid tumors and vasoactive intestinal peptide-secreting (VIP) tumors, and pancreatic fistulas.

Therastim

Thermography (93760 - 93762,)

Topographic Brain Mapping

Transcranial Doppler Ultrasound - investigative except when provided for the following indications:

- 1. detecting severe stenosis in the major basal intracranial arteries;
- 2. assessing patterns and extent of collateral circulation in patients with known regions of severe stenosis or occlusion;
- 3. evaluating and following patients with vasoconstriction of any cause especially after subarachnoid hemorrhage;
- 4. detecting arteriovenous malformations and studying their supply arteries and flow patterns;
- 5. assessing patients with suspected brain death.

Transurethral destruction of prostate tissue by microwave or thermography

Transurethral destruction of prostate tissue by radiofrequency thermography

Tubal Cannulation - investigative when used for performing assisted reproductive procedures and managing ectopic pregnancy. (58345)

Tumor Cell Sensitivity Assay

Tumor Markers:

- 1. CA 15-3
- 2. CA 19-9
- 3. CA 125
- 4. CEA
- 5. PAP
- 6. PSA
- 7. CA 50
- 8. CA 242

Ultra Fast CT

Uterine Lavage for Preembryo Transfer

Variance Cardiography (93278)

Vascular Surgery for Impotence - surgical correction of organic impotence by either venous or arterial procedures

3. INVESTIGATIVE LIST NUMERIC ORDER

This list does not contain all procedures that are considered investigative because not all procedures have CPT/HCPCS codes. Refer to the alpha list for the complete list of investigative procedures.

Some of the codes listed end in "99". In these cases, the procedure listed following the code refers to the specific procedure that is considered investigative.

Service Service Code Description

15780, 15783, 15786 - 15791 - Dermabrasion for Acne (considered cosmetic or investigative, depending on clinical stage of acne).

29800, 29804 - Arthoscopy/Arthroscopic Surgery for treatment of TMJ - when used for diagnosis only

33945, 33999 - Artificial Heart Implant

36520 - Therapeutic apheresis (plasma and or cell exchange). The use of apheresis is considered accepted medical practice for the following conditions when having failed conventional therapy:

Dermatologic

Pemphigus vulgaris: refractory (P)

Service Service Code Description

Hematologic

ABO- incompatible bone marrow transplantation (P)

Coagulation factor inhibitors (hemophilia, nonhemophilia): failed conventional theray, significant hemorrhage, or planned elective surgery (P)

Hemophilia with factor VIIIc inhibitors: fail conventional therapy, significant hemorrhage, or planned elective surgery (P)

Hyperviscosity syndrome (P)

Leukemia: acute debulking or blast crisis (LE) Leukemia: chronic myelogenous (CML) (LE)

Leukemia: hairy-cell (LE)

Maternal fetal incompatibility: high risk of fetal demise, and early delivery or intrauterine transfusion is not possible (P)

Multiple myeloma; renal failure (P)

Postransfusion purpura (P)

Sickle-cell disease (E)

Thrombotic thrombocytopenic purpura (TTP) (P) Thrombocystosis: sympotmatic or presurgical (T)

Waldenstrom's macroglobulinemia (P)

Metabolic Disease

Hypercholesterolemia: familial type IIA homozygous form (P) Hyperlipoproteinemia: familial type IIA homozygous form (P)

Refsum's disease (P)

Musculoskeletal and Connective tissue Cryoglobulinemia: refractory (P) Dermatomyositis: refractory (P) Polymyositis: refractory (P)

Vasculitis: life threatening or organ threatening (P)

Neurologic

Chronic inflammatory demyelinating pollyradiculoneuropathy (CIPD) (P)

Eaton - Lambert syndrome (P)
Guillian-Barre syndrome: severe (P)

Myasthenia gravis (P)

Progressive systemic sclerosis (scleroderma): refactory (P)

Renal

Glomerulonephritis: rapidly progressive type, either idiopathic or secondary to vascullitis (P)

Miscellaneous

Cholestasis: with intractable pruritus (P)

Drug overdose/poisoning (P)

thyroid storm, thyroid hormone overdose

Service <u>Code</u>	Service Description	
36522 - Photopheresis - investigative except for the treatment of cutaneous T-cell lymphoma. (The use of photopheresis for the treatment of scleroderma is considered investigative.)		
37788	Penile revascularization, artery, with or without vein graft	
37790	Penile venous occlusive procedure (for impotence)	
43265	Methyl Test - Butyl Ether (MTBE)	
51785	Perrymeter	
58345	Fallopian Tube Catheterization	
58345	Tubal Cannulation - investigative when used for performing assisted reproductive procedures and managing ectopic pregnancy.	
61855	Twist drill or burr hole(s) for implantation of neurostimulator electrodes; subcortical	
61885	Incision and subcutaneous placement of cranial neurostimulator pulse generator or receiver, direct or inductive coupling	
63750, 63780) - Infusion pumps - epidural access	
70541, 71555, 72159, 72198, 73225, 73725, 74185 - MRI for angiography		
71555	MRI of chest	
75552	myocardium,	
76093	MRI breast, unilateral	
76094	MRI breast, bilateral	
85828	Sleep Studies, Home	
90880	Hypnotherapy for Anesthesia	
91560, 91561	, 90799 - Immunoglobulin Therapy - investigative for the treatment of multiple sclerosis, chronic fatigue syndrome, and demyelinating polyneuropathy. Not considered investigative for acute inflammatory demyelinating polyneuropathy (Guillan Barre).	
91660	Histamine Therapy - investigative except when used for treatment of cluster headaches.	
92512	Rhinomanometry	
92982, 92984 - Angioscopy, Laser		
92995, 93365	5 - Tissue Type Plasminogen Activator (TPA) - investigative except when used as intravenous administration for cardiac thrombolysis during management of an evolving acute myocardial infarction.	
93278	Variance Cardiography	
93278	ECG, Variance Electrocardiography	
93278 - Signa	al-Averaged ECG	
93760 - 93762, Thermography		
93784	Ambulatory blood pressure monitoring, utilizing a system such as magnetic tape and/or computer disk, for 24 hours or longer; including recording scanning analysis, interpretation and report	
93786	Recording only	
93788	Scanning analysis with report	
93790	Physician review with interpretation and report	
95078	Provocation - Neutralization Testing (sublingual, intracutaneous or subcutaneous);	
J1660	Histamine Therapy - investigative except when used for treatment of cluster headaches.	
J9070 - J9092	2 - Cytoxan for Neurological Disorders - investigative except in patients with progressive MS who have failed standard therapy.	
Q0093, Q009	4 - Colony-Stimulating Factors	

Board of Medical Practice

Request for Comments on Planned Amendment of Rule Governing Physician Annual License Fee, *Minnesota Rules*, 5600.2500 (B.)

Subject of Rules. The Minnesota Board of Medical Practice, hereinafter "Board," requests comments on its planned amendment to the rule governing the Physician Annual License Fee. The Board is required by *Minnesota Statutes* §§ 16A.1285 and 214.06 (1997) to set fees sufficient to recover the cost of providing services. An increase in the Physician Annual License Fee will be necessary to for the Board recover its costs of regulating physicians. The fee was last increased in 1992.

Persons Affected. The amendment of the rules would likely affect physicians licensed by the Board and their employers.

Statutory Authority. *Minnesota Statute*, § 147.01 Subd. 3. (1997) authorizes the Board to adopt rules governing the regulation of physicians. *Minnesota Statute* § 214.06 (1997) authorizes the Board to establish fees related to licensure and registration renewals. *Minnesota Statute* § 16A.1285 (1997) requires the Board to assess fees in a sufficient amount so that revenue collected neither significantly over-recovers nor under recovers costs, including overhead costs, involved in the providing of services by the Board.

Public Comment. Interested persons or groups may submit comments or information on these planned rules in writing or orally, until 4:30 p.m. on February 1, 1999. The Board does not contemplate appointing an advisory committee to comment on the planned rules.

Rules Drafts. The Board has not yet prepared a draft of the planned rule amendment.

Agency Contact Person. Written or oral comments, questions, requests to receive a draft of the rules when it has been prepared, and requests for more information on the planned rule should be addressed to: William Marczewski, Suite 400, 2829 University Avenue SE, Minneapolis, MN 55414-3246, (612) 617-2152. TTY users may call the Board at 800-627-3529.

Alternative Format. Upon request, this Request for Comments can be made available in an alternative format, such as large print, Braille, or cassette tape. To make such a request, please contact the agency contact person at the address or telephone number listed above.

Note: Comments received in response to this notice will not necessarily be included in the formal rulemaking record submitted to the administrative law judge when a proceeding to adopt rules is started. The agency is required to submit to the judge only those written comments received in response to the rules after they are proposed.

Dated: 16 November 1997

Robert Leach, Executive Director Minnesota Board of Medical Practice

Board of Medical Practice

Request for Comments on Planned Repeal of Rules Governing Temporary Permits/Temporary Certificates of Graduate Training, *Minnesota Rule*, 5600.0800; Licensure of Foreign Graduates - Exam Application Information, *Minnesota Rule*, 5600.0900; and Licensure to Practice Osteopathy, *Minnesota Rule* 5600.1000

Subject of Rules. The Minnesota Board of Medical Practice, hereinafter "Board," requests comments on its planned repeal of *Minnesota Rules* 5600.0800, 5600.0900 and 5600.1000. The Temporary Permits/Temporary Certificates of Graduate Training and Licensure of Foreign Graduates - Exam Application Information rules were replaced by *Minnesota Statutes* §§ 147.03 and 147.0391, respectively. The rule governing licensure to practice Osteopathy, *Minnesota Rule* 5600.1000, has become obsolete with no physician licensed by the Minnesota Board of Osteopathy left in practice to apply for licensure as a physician under the Minnesota Board of Medical Practice.

Persons Affected. The repeal of the rules would likely affect physicians licensed by the Board and their employers.

Statutory Authority. *Minnesota Statute*, § 147.01 Subd. 3. (1997) authorizes the Board to adopt, amend or repeal rules governing the regulation of physicians.

Public Comment. Interested persons or groups may submit comments or information on these planned rules in writing or orally, until 4:30 p.m. on February 1, 1999. The Board does not contemplate appointing an advisory committee to comment on the planned repeal rules.

Rules Drafts. The Board has not yet prepared a draft of the planned repeal rules.

Agency Contact Person. Written or oral comments, questions, requests to receive a draft of the rules when it has been prepared, and requests for more information on the planned rules should be addressed to: William Marczewski, Suite 400, 2829 University Avenue SE, Minneapolis, MN 55414-3246, (612) 617-2152. TTY users may call the Board at 800-627-3529.

Alternative Format. Upon request, this Request for Comments can be made available in contact the agency contact person at the address or telephone number listed above.

Note: Comments received in response to this notice will not necessarily be included in the formal rulemaking record submitted to the administrative law judge when a proceeding to adopt rules is started.

The agency is required to submit to the judge only those written comments received in response to the rules after they are proposed.

Dated: 16 November 1997

Robert Leach, Executive Director Minnesota Board of Medical Practice

Metropolitan Council

Public Hearing on Affordable and Life-cycle Housing Goals Agreements for Communities Initiating Participation in the Livable Communities Housing Incentives Account Program in 1999

The Metropolitan Council will hold a public hearing on affordable and life-cycle housing goals agreements for communities initiating participation in the Metropolitan Livable Communities Housing Incentives Account Program in 1999.

The public hearing will be held at noon, Monday, January 4, 1999 in the Metropolitan Council Chambers, Mears Park Centre, 230 E. Fifth St., St. Paul. All interested persons are encouraged to attend the hearing and offer comments. People may register in advance to speak by calling (651) 602-1633 or (651) 291-0904 (TTY). Upon request, the Council will provide reasonable accommodations to persons with disabilities.

The procedure for the hearing will be as follows: 1) Persons will be called to speak in the order in which they have signed in. Those preregistered by phone will be called on first. 2) Individuals will be asked to limit their remarks to 5 minutes. 3) Designated representatives of groups or organizations will be asked to limit their comments to 10 minutes. 4) The chair of the hearing may limit the testimony by any person.

Written comments must be received by 5 p.m., Tuesday, January 19, 1999, and should be sent to Thomas C. McElveen, Metropolitan Council, 230 E. Fifth Street, St. Paul, MN 55101. Comments may also be faxed to Mr. McElveen at (651) 602-1442, be recorded on the Council's Public Comment Phone Line at (651) 602-1500, or sent electronically to: data.center@metc.state.mn.us

Due to deadlines established for newly participating communities, a complete report of these housing goals will not be available before December 31, 1998. Call the Council's Data Center at (651) 602-1140 or (651) 291-0904 (TTY) after December 31, 1998 for a copy of the housing goals.

Metropolitan Council Environmental Services

Public Hearing on Metropolitan Wastewater Treatment Plant Pretreatment/Primary Treatment Facility Plan Project Number 970620 at Metropolitan Council Chambers, 230 East Fifth Street, St. Paul, MN 55101, Tuesday, January 5, 1999, 7:00 p.m.

Influent flow to the Metropolitan Wastewater Treatment Plant is currently split between two primary treatment systems where grit removal, initial screening and primary sedimentation takes place. This project will eliminate the west primary treatment system due to the cost of maintaining and operating duplicate systems and the process impacts associated with two primary treatment systems which produce dissimilar flow streams going to secondary treatment. This upgrade will result in reduced operating and maintenance costs and provide process benefits, enhancing the consistency and stability of plant operation.

The second phase of this project, projected for implementation after 2005, will consider the provision for additional odor control and an additional primary settling tank if required by future flow conditions.

Official Notices =

Copies of the Facility Plan will be available for review no later than November 30, 1998 at the following locations:

- Metropolitan Council Data Center, 230 East Fifth Street, St. Paul
- Metropolitan Council Environmental Services, Office of Customer Relations and Environmental Education, 230 East Fifth Street, St. Paul
- St. Paul Public Library, 90 W. Fourth St., St. Paul
- Sun Ray Branch, St. Paul Public Library, 2105 Wilson Ave., St. Paul

All interested people are encouraged to attend the hearing on January 5, 1999 and provide comments.

Comments, which must be received by 5 p.m. on January 19, may also be submitted as follows:

- Send written comments to Pauline Langsdorf at Metropolitan Council Environmental Services, 230 East Fifth Street, St. Paul, MN 55101
- Fax comments to Pauline Langsdorf at (651) 602-1003
- Record comments on Metropolitan Council's Public Comment Phone Line at (651) 602-1500
- E-mail comments to data.center@metc.state.mn.us
- Send TTY comments to (651) 291-0904

Upon request, Metropolitan Council will provide reasonable accommodations to people with disabilities. Requests must be received prior to December 28, 1998.

Additional information can be obtained from Metropolitan Council Environmental Services, Office of Customer Relations and Environmental Education at (651) 602-1805.

Pollution Control Agency

Notice of Intent to Approve the Creation of the Villard Lakes Area Sanitary District in Accordance with *Minnesota Statutes* § 115.20

The Minnesota Pollution Control Agency (MPCA) has been petitioned by the City of Villard and the Leven Township Board to approve the creation of a sanitary district to be known as the Villard Lakes Area Sanitary District. The purpose of the sanitary district is to promote the public welfare by providing the residents within its boundaries with an adequate and efficient system and means of collecting, conveying, pumping, treating and disposing of domestic sewage and limited amounts of industrial waste within the district. The territory of the proposed sanitary district is legally described as:

The Southeast Quarter of the Southwest Quarter, the South Half of the South Half of the Northeast Quarter, and the Southeast Quarter, all in Section 11, Township 126 North, Range 37 West; and

The South Half of the Southwest Quarter of the Northwest Quarter, and the Southwest Quarter, all in Section 12, Township 126 North, Range 37 West; and

The West Half, and the South Half of the Southeast Quarter, all in Section 13, Township 126 North, Range 37 West; and

The East Half, the Southwest Quarter, the South Half of the Northwest Quarter, and the Northeast Quarter of the Northwest Quarter, all in Section 14, Township 126 North, Range 37 West; and

The East Half of the Southeast Quarter of the Southeast Quarter of Section 15, Township 126 North, Range 37 West; and

The East Half of the East Half of the Northeast Quarter, and the East Half of the Northeast Quarter of the Southeast Quarter, all in Section 22, Township 126 North, Range 37 West; and

All of Section 23, Township 126 North, Range 37 West; and

The West Half of Section 24, Township 126 North, Range 37 West, and all of the East Half of Section 24, Township 126 North, Range 37 West lying North of the Right of Way to Minnesota Trunk Highway 28; and

All of Section 25, Township 126 North, Range 37 West lying North of the Right of Way to Minnesota Trunk Highway 28; and

All of Section 26, Township 126 North, Range 37 West; and

All of Section 35, Township 126 North, Range 37 West; and

All of the West Half of Section 36, Township 126 North, Range 37 West, lying North of the Right of Way of Minnesota Trunk Highway 28; and

The Southwest Quarter of the Southwest Quarter of Section 18, Township 126 North, Range 36 West; and

The West Half of the Northwest Quarter of Section 19, Township 126 North, Range 36 West.

All contained in Leven Township, Pope County. A map of the area is available at the MPCA.

The public has 30 days to submit written comments on the petition. If a person objects to the petition, that person may submit a written request for a hearing. The written comments or a written request for a hearing must be submitted to the MPCA by 4:30 p.m. on December 30, 1998. The written request for a hearing must state your interest in the petition, the nature of your objection and the reason for your objection. If 25 or more timely requests for hearing are received, the MPCA will schedule a hearing prior to making a determination on the petition.

Following the end of the comment period and, if held, the public hearing, the MPCA Commissioner will decide whether to approve the petition for creation of the district unless, as provided by *Minnesota Statutes* § 116.02, the MPCA Citizens' Board makes this decision. You have the right to submit a petition to the MPCA Commissioner asking that the MPCA Citizens' Board make the decision on approval of the petition for creation of the Villard Area Lakes Sanitary District. Your petition must be in writing and must be received by MPCA staff during the public comment period. Your petition will be granted or denied in the sole discretion of the MPCA Commissioner. The MPCA Citizens' Board will only make the decision on approval of the petition for creation of the sanitary district if the MPCA Commissioner grants your petition or if an MPCA Citizens' Board member makes a timely request to have the decision be made by the MPCA Citizens' Board.

A copy of the petition, resolutions, map of the area within the proposed sanitary district with legal description, and other documents relevant to the petition can be requested from the MPCA. Comments, questions and request for hearing regarding the creation of the sanitary district and requests for information must be submitted in writing to:

Debra Moynihan Telephone: (651) 296-5426
Regular/Remediation Section 1-800-657-3864
Policy and Planning Division Out of state: 1-800-627-3529
Minnesota Pollution Control Agency TYY: (651) 282-5332
520 Lafayette Road North FAX: (651) 297-8676

St. Paul, Minnesota 55155-4194

This notice, the petition, and other documents relevant to this petition can be made available in other formats, including Braille, large print, and audio tape, upon request.

Peder A. Larson Commissioner

Department of Transportation

Petition of the City of Fairmont for a variance from State Aid requirements for DIAGONAL PARKING STREET WIDTH

NOTICE IS HEREBY GIVEN that the Fairmont City Council has made written request to the Commissioner of Transportation pursuant to *Minnesota Rules* 8820.9961 for a variance from rules as they apply to a proposed construction project on Municipal State Aid Street No. 101 (Downtown Plaza), between County State Aid Highway No. 26 (Blue Earth Avenue) and Fourth Street in the City of Fairmont, Minnesota.

The request is for a variance from *Minnesota Rules* for State Aid Operations 8820.9961, adopted pursuant to *Minnesota Statutes* Chapter 161 and 162, so as to permit reconstruction of Municipal State Aid Street No. 101, between Blue Earth Avenue and Fourth Street in the City of Fairmont, Minnesota, so as to allow 45 degree diagonal parking on both sides of the street, with 5.5 meter stall depths, and half-street widths on both sides, from centerline to face of curb of 8.8 meters; in lieu of the required 6.0 meter stall depth, with half-street width from centerline to face of curb of 13.7 meters.

Any person may file a written objection to the variance request with the Commissioner of Transportation, Transportation Building, St. Paul, Minnesota 55155.

If a written objection is received within 20 days from the date of this notice in the *State Register*, the variance can be granted only after a contested case hearing has been held on the request.

Dated: 8 November 1998

Patrick B. Murphy Division Director State Aid for Local Transportation

State Grants & Loans

In addition to requests by state agencies for technical/professional services (published in the State Contracts section), the *State Register* also publishes notices about grants and loans available through any agency or branch of state government. Although some grant and loan 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 and loan notices, and to provide financial estimates as well as sufficient time for interested parties to respond.

Minnesota Auto Theft Prevention Program

Grant Availability for State, County, Local Police Departments, Governmental Agencies, Prosecutors, Judiciary, Businesses, Community and Neighborhood Organizations

The Board of the Minnesota Auto Theft Prevention Program announces the availability of over \$1,865,000.00 in grant funds accessible for the July 1, 1999 through June 30, 2000 grant period. Applications will be accepted from State, County, Local Police Departments, Governmental Agencies, Prosecutors, Judiciary, Businesses, Community and Neighborhood Organizations. This reimbursement grant program must be for projects dedicated to the area of auto theft. Grant application packets may be obtained by contacting Dennis Roske at the Auto Theft Prevention Program Office at (612) 405-6153 or 405-6155. To be considered, applications must be received in the MATPP office in Mendota Heights by 4:30 p.m. on December 31, 1998.

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, and final submission date of completed contract proposal.

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

Department of Administration

Division of State Building Construction

Notice of Request for Proposals (RFP) for Professional Services for Architectural and Engineering Services (no design) to Investigate Buildings, Elements of Buildings, Building Systems, and Building Sites

The Department of Administration, Division of State Building Construction (STATE) is soliciting proposals for architectural and engineering services (no design) to investigate buildings, elements of buildings, building systems, and building sites. Purpose of work is to write reports and make recommendations to guide state agency users' actions to make repairs, replacement or other remedial requirements. The estimated total cost of work available is \$2,000,000 with projects ranging from \$2,000 to an expected maximum of \$60,000 and a typical project of \$20,000.

Multiple CONSULTANTS will be issued master professional technical services contracts (Master Contracts) to perform work. The Master Contracts will be available for use by State Agencies identified in *Minnesota Statutes* 15.01 and *Minnesota Statutes* 15.91. The term for the Master Contracts will be two years commencing on January 1, 1999, with the possibility of annual extensions up to three additional years.

This request does not obligate the STATE to complete the work contemplated in this request, and the STATE reserves the right to cancel this solicitation if it is considered in its best interest.

To request a complete copy of the RFP, please mail or fax request to:

Sharon Schmidt, Contracts Officer Department of Administration Division of State Building Construction 50 Sherburne Avenue, Room G-10 St. Paul, MN 55155-1495 FAX: (651) 296-7650

Professional, Technical & Consulting Contracts

Proposals must be received no later than 4 p.m. on Friday, December 11, 1998. Late proposals will not be considered.

NOTE: The current list of professional architectural and engineering consultants used by the STATE to provide the described services expires on December 31, 1998. Consultants on that list must submit a proposal to be considered.

Department of Administration

Division of State Building Construction

Notice of Request for Proposal (RFP) for Professional Services for Concrete, Mortar and Bituminous Pavement Testing from Professional Testing Firms

The Department of Administration, Division of State Building Construction (STATE) is soliciting proposals for the services of testing firms to test concrete, mortar and bituminous pavement, and to prepare reports and recommendations based on findings. Purpose of work is to determine physical properties of materials, conformance to specifications and industry standards. The estimated total cost of work available is \$2,000,000 with projects ranging from \$2,000 to an expected maximum of \$300,000 and a typical project of \$10,000.

Multiple CONSULTANTS will be issued master professional technical services contracts (Master Contracts) to perform work. The Master Contracts will be available for use by State Agencies identified in *Minnesota Statutes* 15.01 and *Minnesota Statutes* 15.91. The term for the Master Contracts will be two years commencing on January 1, 1999, with the possibility of annual extensions up to three additional years.

This request does not obligate the STATE to complete the work contemplated in this request, and the STATE reserves the right to cancel this solicitation if it is considered in its best interest.

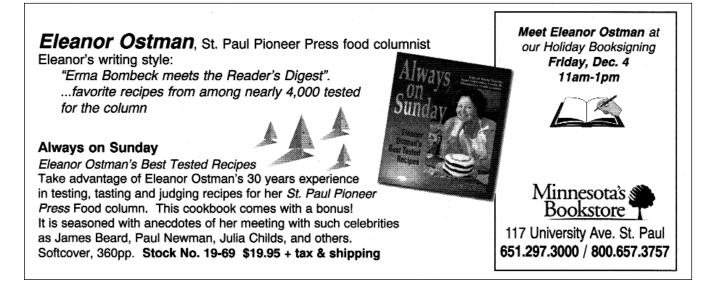
To request a complete copy of the RFP, please mail or fax request to:

Sharon Schmidt, Contracts Officer Department of Administration Division of State Building Construction 50 Sherburne Avenue, Room G-10 St. Paul, MN 55155-1495

FAX: (651) 296-7650

Proposals must be received no later than 4 p.m. on Friday, December 11, 1998. Late proposals will not be considered.

NOTE: The current list of professional testing firms used by the STATE to provide the described services expires on December 31, 1998. Professional testing firms on that list must submit a proposal to be considered.



Professional, Technical & Consulting Contracts

Department of Administration

Division of State Building Construction

Notice of Request for Proposal (RFP) for Professional Services for Soils Testing and Soil Borings from Professional Testing Firms

The Department of Administration, Division of State Building Construction (STATE) is soliciting proposals for the services of testing firms to test site soils, do soil borings, and to prepare reports and recommendations based on findings. Purpose of work is to determine building foundation needs, conditions of land and identification of materials in the soil. The estimated total cost of work available is \$2,000,000 with projects ranging from \$2,000 to \$300,000.

Multiple CONSULTANTS will be issued master professional technical services contracts (Master Contracts) to perform work. The Master Contracts will be available for use by State Agencies identified in Minnesota Statutes 15.01 and Minnesota Statutes 15.91. The term for the Master Contracts will be two years commencing on January 1, 1999, with the possibility of annual extensions up to three additional years.

This request does not obligate the STATE to complete the work contemplated in this request, and the STATE reserves the right to cancel this solicitation if it is considered in its best interest.

To request a complete copy of the RFP, please mail or fax request to:

Sharon Schmidt, Contracts Officer Department of Administration Division of State Building Construction 50 Sherburne Avenue, Room G-10 St. Paul. MN 55155-1495

FAX: (651) 296-7650

Proposals must be received no later than 4 p.m. on Friday, December 11, 1998. Late proposals will not be considered.

NOTE: The current list of professional testing firms used by the STATE to provide the described services expires on December 31, 1998. Professional testing firms on that list must submit a proposal to be considered.

Department of Natural Resources

Bureau of Engineering

Request for Proposals for Hydraulic Modeling

The Department of Natural Resources, Bureau of Engineering, is seeking hydraulic model investigation in the conjunction with the design of a protected public access/safe harbor of refuge at McQuade Road, Clifton, Minnesota. The three-dimensional physical hydraulic model study will be undertaken to represent realistic conditions at the site. Tasks included will be to evaluate the stability of the proposed breakwater, testing of alternative stable breakwater cross-sections and the assessment of an optimum entrance configuration. The Contractor will be required to submit to the designer a compilation and discussion of the test conditions/characteristics and the findings of each test scenario. Proposals are due no later than 3:00 P.M., December 21, 1998.

Details are contained in a complete Request for Proposals which may be obtained by contacting:

Tim Petersen, P.E., Assistant Administrator Department of Natural Resources, Bureau of Engineering 500 Lafayette Road St. Paul, MN 55155-4029 (651) 296-0608 (Voice) (651) 297-5818 (FAX)

e-mail: Tim.Petersen@DNR.State.Mn.US

■ Professional, Technical & Consulting Contracts

Department of Transportation

Engineering Services Division

Request for Proposal for Preliminary Design Services

The Minnesota Department of Transportation (Mn/DOT) is soliciting general qualifications and interest proposals for Preliminary Design Services. These services will be used on an as-needed basis by Mn/DOT's Preliminary District/Division Design Units and will be used in delivering quick turn around Preliminary designs and Environmental Documents.

This program will be a Transportation Contract Program (T-Contract) involving multiple Contractors with Master Preliminary Design Agreements. It is estimated that the total program will be \$20,000,000.00 over three years. It is anticipated that each Out State District will have a minimum of three Contractors under this T-Contract program and the Metro District will have a minimum of five Contractors. This T-Contract program is developed for the purpose of providing professional and technical short term rapid response Preliminary Design Services.

To receive a copy of the complete Request for Proposal, Contractors will be required to submit a written request, either by direct mail or fax, to the address indicated below through December 16, 1998. After December 16, 1998, Contractors will be required to pickup the Request for Proposal in person from our offices.

Complete Requests for Proposals can be obtained from:

Joseph D. Pignato, P.E. Sr. Agreements Administrator Minnesota Department of Transportation Seventh Floor North 395 John Ireland Boulevard, Mail Stop 680 St. Paul, Mn 55155-1899

Phone: (651) 297-1172, FAX: (651) 282-5127

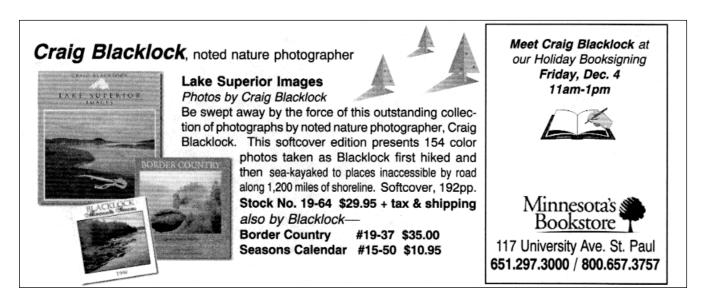
The responses to the Request for Proposals must be received by 2:00 PM December 21, 1998.

Late Submittals will not be considered. No time extensions will be granted.

Firms will be selected and placed on the T-Contract program list from this solicitation.

The successful responders will be required to submit acceptable evidence of compliance with worker's compensation insurance coverage requirements prior to execution of the contract.

This request does not obligate the Minnesota Department of Transportation to complete the work contemplated in this notice, and the Department reserves the right to cancel this solicitation at any time. All expenses incurred by submitting contractors responding to this notice will be borne by the responder.



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

Invitation for Bid for Compaq Proliant Server and Accessories

Sealed bids will be received at the offices of the Metropolitan Council, Mears Park Centre, 230 East 5th Street, St. Paul, Minnesota 55101, on December 14, at 3:00 P.M., at which time and place they will be publicly read, for the acquisition of Compaq Proliant Server Equipment and Accessories.

Copies of specifications and bid instructions may be obtained from the offices of the Metropolitan Council or by calling (651) 602-1499 or via FAX request at (651) 602-1083. All bids to be considered must be submitted on Council approved bid forms.

The award will be based upon, but not necessarily limited to, factors of price, lead time, agreement to the Metropolitan Council's terms and conditions and past experience with the Metropolitan Council.

The Metropolitan Council reserves the right to accept or reject any and all bids, or any part of any bid, and to waive any minor irregularities and deviations from requirements outlined in the technical specifications.

Minnesota Historical Society

Request for Proposals for Finance System Needs Assessment

The Minnesota Historical Society (Society) is seeking proposals from qualified vendors to conduct an analysis and needs assessment of its Finance and Accounting system according to the Specifications, the Contract, and the Request for Proposals. The project consists of conducting a needs assessment based on the information requirements of administrative, management and program staff.

The project is to be undertaken with the expressed intent and with the assumption that the Society wishes to modify/reengineer the various business processes in the finance and accounting function that can benefit from technology; and that all outcomes will be Web and Internet/Intranet compatible.

The Request for Proposal is available by calling or writing Jenna Gruen, Contracting Officer, Minnesota Historical Society, 345 Kellogg Blvd. West, St. Paul, MN 55102. Telephone is (651) 297-5863 (jenna.gruen@mnhs.org).

All proposals must be received by Jenna E. Gruen, Contracting Officer, or an authorized agent, at the Minnesota Historical Society, 345 Kellogg Boulevard West, St. Paul, MN 55102 by **Wednesday, January 6, 1999 at 2:00pm central time.** A bid opening will be conducted at that time. Late proposals will not be considered.

Authorized agents for receipt of bids are the following: Jenna E. Gruen, Contracting Officer or any Work Service Center staff member in the Finance and Administration Division on the 4th floor of the History Center. Bids may not be delivered to the information desk, to the guard or to any location or individual other than as specified above.

There will be a mandatory pre-proposal meeting for all interested parties on Wednesday, December 16, 1998 at 1:30 p.m. in the Irvine Room (first floor) at the Minnesota History Center located at 345 Kellogg Boulevard West in St. Paul, Minnesota.

Complete specifications and details concerning submission requirements are included in the Request for Proposals.

■ Non-State Public Bids, Contracts & Grants

Minnesota Historical Society

Request for Proposals for Human Resources System Needs Assessment

The Minnesota Historical Society (Society) is seeking proposals from qualified vendors to conduct an analysis and needs assessment of its Human Resources system according to the Specifications, the Contract, and the Request for Proposals. The project consists of conducting a needs assessment based on the information requirements of administrative, management and program staff.

The project is to be undertaken with the expressed intent and with the assumption that the Society wishes to modify/reengineer the various business processes in the human resources function that can benefit from technology; and that all outcomes will be Web and Internet/Intranet compatible.

The Request for Proposal is available by calling or writing Jenna Gruen, Contracting Officer, Minnesota Historical Society, 345 Kellogg Blvd. West, St. Paul, MN 55102. Telephone is (651) 297-5863 (jenna.gruen@mnhs.org).

All proposals must be received by Jenna E. Gruen, Contracting Officer, or an authorized agent, at the Minnesota Historical Society, 345 Kellogg Boulevard West, St. Paul, MN 55102 by **Wednesday, January 6, 1999 at 3:00pm central time.** A bid opening will be conducted at that time. Late proposals will not be considered.

Authorized agents for receipt of bids are the following: Jenna E. Gruen, Contracting Officer or any Work Service Center staff member in the Finance and Administration Division on the 4th floor of the History Center. Bids may not be delivered to the information desk, to the guard or to any location or individual other than as specified above.

There will be a mandatory pre-proposal meeting for all interested parties on Wednesday, December 16, 1998 at 1:30 p.m. in the Irvine Room (first floor) at the Minnesota History Center located at 345 Kellogg Boulevard West in St. Paul, Minnesota.

Complete specifications and details concerning submission requirements are included in the Request for Proposals.

Ramsey County

Advertisement for Space Needs Assessment

Ramsey County is seeking a qualified consultant to conduct a space needs assessment for the possible relocation of its Public Works Department. The Department's primary responsibility is construction, maintenance and operation of the approximately 300 mile County road system. The Department employs approximately 140 people and maintains over 400 pieces of equipment.

The space needs assessment should include a review of the Department's current operations and functions, comparing them with generally accepted architectural criteria and determining the minimum and ideal space required for each function. The assessment will also include an analysis of the relationships between each function. When complete, the assessment should provide the information necessary to determine the approximate cost and size of a new facility and be able to provide adequate space needs data for a future architect to begin designing the facility.

Consultants interested in working with Ramsey County on this project should submit federal forms 254 and 255 along with a statement of qualifications that adequately indicates the expertise and experience necessary to perform the needs assessment. The statement of qualifications must not exceed 10 pages.

Ramsey County will evaluate the Statement of Qualifications and select five firms to submit proposals and complete an oral interview. Consultants for this first phase of the project will be selected using the following criteria:

- Experience in performing a space needs assessment.
- Experience working for other public works agencies.
- Examples of completed projects similar to a Public Works facility.
- Proximity of principal owners of the firm to project location.
- · References.
- Ability to meet time lines and submittal requirements.

The consultant selected for this initial phase will not be excluded from providing services for future phases of this project.

Statements of Qualifications should be submitted no later than 4:30 p.m. December 18, 1998, to Paul Kirkwold, Director, Ramsey County Public Works Department, Suite 910, RCGC-West, 50 West Kellogg Blvd., St. Paul, MN 55102.

Non-State Public Bids, Contracts & Grants =

University of Minnesota

Notice of Bid Information Service (BIS) Available for All Potential Vendors

The University of Minnesota offers 24 hour/day, 7 day/week access to all Requests for Bids/Proposals through its fax back Bid Information Service (BIS). Subscriptions to BIS are \$75/per fiscal year (not prorated). Call 612-625-5534 for information or visit our web site at http://purchserv.finop.umn.edu. Choose BID Information Service.

Requests for Bids/Proposals are available to the public at no charge each business day from 8:00 a.m. - 4:30 p.m. in Purchasing Services lobby, Suite 560, 1300 S. 2nd Street, Mpls, MN 55454.

Upper Minnesota Valley Regional Development Commission

Notice of Request for Proposals (RFP) for Professional Consultant Services to Produce Promotional Materials for the Minnesota River Valley Scenic Byway

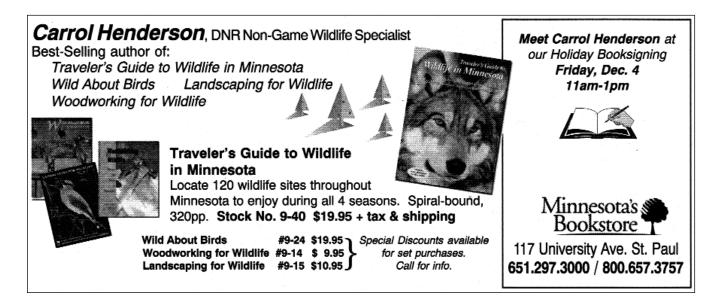
The Upper Minnesota Valley Regional Development Commission is requesting proposals for the design, development, production, and implementation of a brochure, internet website, video, and preliminary concept recommendations for interpretive kiosks for the Minnesota River Valley Scenic Byway. Project duration January 1, 1999 - June 30, 2000. Proposal cost estimates not to exceed \$33,000.

All firms interested in being considered for this project and desiring to receive a complete RFP package are invited to submit a Letter of Interest to:

Dawn E. Hegland UMVRDC Physical Development Director 323 West Schlieman Avenue Appleton, MN 56208

Inquiries can be directed to Dawn E. Hegland at (320) 289-1981 or umvrdc@info-link.net.

Proposals must be received no later than 4:00 P.M. on December 21, 1998.



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95 parks and trails within the metro area for sledding, skiing, snowmobiling, skating, rental information, etc. **Stock No. 19-68 \$14.95***

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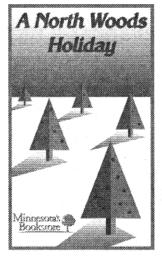
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