STATE REGISTER

STATE OF MINNESOTA



VOLUME 9, NUMBER 40 April 1, 1985

Pages 2139-2226



Printing Schedule for Agencies

Issue Number	*Submission deadline for Executive Orders, Adopted Rules and **Proposed Rules	*Submission deadline for State Contract Notices and other **Official Notices	Issue Date
	SCHEDUI	LE FOR VOLUME 9	
41	Monday Mar 25	Monday Apr 1	Monday Apr 8
42	Monday Apr 1	Monday Apr 8	Monday Apr 15
43	Monday Apr 8	Monday Apr 15	Monday Apr 22
44	Monday Apr 15	Monday Apr 22	Monday Apr 29

^{*}Deadline extensions may be possible at the editor's discretion; however, none will be made beyond the second Wednesday (12 calendar days) preceding the issue date for rules, proposed rules and executive orders, or beyond the Wednesday (5 calendar days) preceding the issue date for official notices. Requests for deadline extensions should be made only in valid emergency situations.

Instructions for submission of documents may be obtained from the Office of the State Register, 506 Rice Street, St. Paul, Minnesota 55103, (612) 296-0930.

The State Register is published by the State of Minnesota, State Register and Public Documents Division, 117 University Avenue, St. Paul, Minnesota 55155, pursuant to Minn. Stat. § 14.46. Publication is weekly, on Mondays, with an index issue in September. In accordance with expressed legislative intent that the State Register be self-supporting, the subscription rate has been established at \$130.00 per year, postpaid to points in the United States. Second class postage paid at St. Paul, Minnesota. Publication Number 326630. (ISSN 0146-7751) No refunds will be made in the event of subscription cancellation. Single issues may be obtained at \$3.25 per copy.

Subscribers who do not receive a copy of an issue should notify the *State Register* Circulation Manager immediately at (612) 296-0931. Copies of back issues may not be available more than two weeks after publication.

The State Register is the official publication of the State of Minnesota, containing executive orders of the governor, proposed and adopted rules of state agencies, and official notices to the public. Judicial notice shall be taken of material published in the State Register.

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^{**}Notices of public hearings on proposed rules and notices of intent to adopt rules without a public hearing are published in the Proposed Rules section and must be submitted two weeks prior to the issue date.

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NOTICE

How to Follow State Agency Rulemaking Action in the State Register

State agencies must publish notice of their rulemaking action in the State Register. If an agency seeks outside opinion before promulgating new rules or rule amendments, it must publish a NOTICE OF INTENT TO SOLICIT OUTSIDE OPINION also. The PROPOSED RULES section contains:

- Calendar of public hearings on proposed rules.
- Proposed new rules (including notice of hearing and/or notice of intent to adopt rules without a hearing).
- Proposed amendments to rules already in existence in the Minnesota Rules.
- Proposed emergency rules.
- Withdrawal of proposed rules (option; not required).

The ADOPTED RULES section contains:

- Notice of adoption of new rules and rule amendments adopted without change from the previously published proposed rules. (Unchanged adopted rules are not republished in full in the State Register unless an agency requests this.)
- Adopted amendments to new rules or rule amendments (adopted changes from the previously published proposed rules).
- Notice of adoption of emergency rules.
- · Adopted amendments to emergency rules (changes made since the proposed version was published).
- Extensions of emergency rules beyond their original effective date.

The OFFICIAL NOTICES section includes (but is not limited to):

- Notice of intent to solicit outside opinion before promulgating rules.
- Additional hearings on proposed rules not listed in original proposed rules calendar.

ALL ADOPTED RULES and ADOPTED AMENDMENTS TO EXISTING RULES published in the State Register and filed with the Secretary of State before July 31, 1983 are published in the Minnesota Rules 1983. ADOPTED RULES and ADOPTED AMENDMENTS TO EXISTING RULES filed after July 31, 1983 will be included in a supplement scheduled for publication in mid-1984. Proposed and adopted EMERGENCY (formerly called TEMPORARY) RULES appear in the State Register but are generally not published in the Minnesota Rules 1983 due to the short-term nature of their legal effectiveness. Those that are long-term may be published.

The State Register publishes partial and cumulative listings of rule in the MINNESOTA RULES AMENDMENTS AND ADDITIONS list on the following schedule:

Issues 1-13, inclusive Issues 14-25, inclusive Issue 26, cumulative for 1-26 Issue 39, cumulative for 1-39 Issues 40-51, inclusive Issue 52, cumulative for 1-52

Issues 27-38, inclusive

The listings are arranged in the same order as the table of contents of the Minnesota Rules 1983.

MCAR AMENDMENTS AND ADDITIONS:

TITLE 12 SOCIAL SERVICE
Part 2 Public Welfare Department
(now Human Services)

MINNESOTA RULES AMENDMENTS AND

ADDITIONS ====

DEPARTMENT OF COMMERCE		SECRETARY OF STATE
2735.01000500 (proposed)	2144	8260.0100; .0200 (proposed)
2740.0100; .1100; .1200; .1600; .2100; .2400; .2500;		,
.2600; .2900; .3100; .3600; .3700; .3900; .4400; .5200;		
.9904; .9909; .9914; .9919; .9924; .9929; .9934; .9939;		
.9944; .9949; .9954; .9959; .9964; .9979;		DEPARTMENT OF PUBLIC WELFARE
.99919993 (proposed)	2146	(Now HUMAN SERVICES)
2875.1590 (withdrawn)	2170	9500.0031; .0051; .0071; .0081; .0091; .0111;
STATE BOARD OF EDUCATION		.03310339; .03510353 [Emer] (extended)
3505.2510 (withdrawn)	170	9500.14501475 [Emer] (extended)
MN HOUSING FINANCE AGENCY		9505.50005030 [Emer] (extended)
4900.0293 (adopted)	174	9510.10201140 [Emer] (extended)
4900.0640 (adopted)		9525.00150145 [Emer] (extended)
4900.0040 (adopted)	:1/4	9525.18001930 [Emer] (extended)
DEPARTMENT OF LABOR AND INDUSTRY		9555.34103412 [Emer] (extended)
5205.0010 [standards] (proposed)	2171	9555.3415 [Emer] (extended)
5220.1400 (proposed)		9555.3417 [Emer] (extended)

Pursuant to Minn. Stat. of 1982, §§ 14.22, an agency may propose to adopt, amend, suspend or repeal rules without first holding a public hearing, as long as the agency determines that the rules will be noncontroversial in nature. The agency must first publish a notice of intent to adopt rules without a public hearing, together with the proposed rules, in the State Register. The notice must advise the public:

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

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

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

Department of Commerce

Proposed Rules Prohibiting Sex Discrimination in Insurance Contracts

Notice of Intent to Adopt Rules without a Public Hearing

Notice is hereby given that the Department of Commerce proposes to adopt the above-entitled rules without a public hearing. The Commissioner of Commerce has determined that the proposed adoption of these rules will be noncontroversial in nature and has elected to follow the procedures set forth in Minnesota Statutes, § 14.21.

Persons interested in these rules shall have 30 days to submit comments in support of or in opposition to the rules. Each comment should identify the portion of the proposed rule addressed, the reason for the comment, and any change proposed. The proposed rules may be modified if the modifications are supported by the data and views submitted to the agency and do not result in a substantial change.

No public hearing will be held unless twenty-five (25) or more persons make a written request for a hearing within the 30-day comment period. In the event a public hearing is required, the agency will proceed according to the provisions of Minnesota Statutes, § 14.14, subd. 1.

Persons who wish to submit comments or a written request for a public hearing should submit them to Richard G. Gomsrud, General Counsel, Department of Commerce, 500 Metro Square Building, St. Paul, MN 55101. Any person requesting a public hearing should state her/his name and address, identify the portion of the proposed rule addressed, the reason for the request and any change proposed and send this information to the above address.

Authority for the adoption of these rules is contained in Minnesota Statutes, § 72A.19, subd. 1. Additionally, a Statement of Need and Reasonableness describing the need for and reasonableness of each provision and identifying the data and information relied upon to support the proposed rules has been prepared and is available upon request.

Pursuant to Minn. Laws 1983, ch. 188 codified as Minn. Stat. § 14.115, subd. 2, the impact on small business has been considered in the promulgation of the rules. Anyone wishing to present evidence or argument as to the rules' effect on small business may do so. The Department's position regarding the impact of the rules on small business is set forth in the Statement of Need and Reasonableness.

Upon adoption of the final rules without a public hearing, the proposed rules, this notice, the Statement of Need and Reasonableness, all written comments received, and the final Rules as Adopted will be delivered to the Attorney General for review as to form and legality, including the issue of substantial change. Persons who wish to be advised of the submission of this material to the Attorney General, or who wish to receive a copy of the final rules as proposed for adoption, should submit a written statement of such request to Richard Gomsrud, General Counsel, Department of Commerce, 500 Metro Square Bldg., St. Paul, MN 55101.

A copy of the proposed rules is attached to this notice. Copies of this notice and the proposed rules are available and may be obtained by contacting Rose Weiner at the above address.

Michael A. Hatch Commissioner of Commerce

Rules as Proposed (all new material)

2735.0100 DEFINITIONS.

- Subpart 1. Scope. For the purposes of parts 2735.0100 to 2735.0500, the terms defined in this part have the meanings given them.
- Subp. 2. Contracts. "Contracts" means any insurance policy, plan, group contract certificate, or binder, including any rider or endorsement offered by an insurer.
- Subp. 3. Insurer. "Insurer" means any insurance company, association, reciprocal or interinsurance exchange, nonprofit hospital plan, nonprofit professional health service plan, health maintenance organization, fraternal benefit society, or beneficial association.

2735.0200 PURPOSE.

The purpose of parts 2735.0100 to 2735.0500 is to eliminate the act of denying benefits or coverage on the basis of sex or marital status in the terms and conditions of insurance contracts and in the underwriting criteria of insurance carriers.

2735.0300 AUTHORITY.

Parts 2735.0100 to 2735.0500 are adopted pursuant to Minnesota Statutes, sections 45.023; 72A.20, subdivision 16; and 72A.19, subdivision 2.

2735.0400 APPLICABILITY AND SCOPE.

Parts 2735.0100 to 2735.0500 apply to all contracts delivered or issued for delivery in this state by an insurer on or after the effective date of these parts, to all existing group contracts which are amended on or after these parts, and to all group insurance policies or group subscriber contracts that provide coverage for Minnesota residents enrolled thereunder.

2735.0500 AVAILABILITY REQUIREMENTS.

Availability of any insurance contract shall not be denied to an insured or prospective insured on the basis of sex or marital status of the insured or prospective insured. The amount of benefits payable, or any term, condition, or type of coverage shall not be restricted, modified, excluded, or reduced on the basis of the sex or marital status of the insured or prospective insured except to the extent the amount of benefits, term, condition, or type of coverage vary as a result of the application of rate differentials permitted under Minnesota law. However, nothing in this part prohibits an insurer from taking marital status into account for the purpose of defining persons eligible for dependent benefits. Practices prohibited by this part include but are not limited to the following:

- A. denying coverage to females gainfully employed at home, employed part time, or employed by relatives when coverage is offered to males similarly employed;
 - B. denying policy riders to females when the riders are available to males;
- C. denying maternity benefits to insureds or prospective insureds purchasing an individual contract when comparable family coverage contracts offer maternity benefits;
- D. denying, under group contracts, dependent coverage to husbands of female employees, when dependent coverage is available to wives of male employees;
 - E. denying disability income contracts to employed women when coverage is offered to men similarly employed;
 - F. treating complications of pregnancy differently from any other illness or sickness under the contract;
 - G. restricting, reducing, modifying, or excluding benefits relating to coverage involving the genital organs of only one sex;
- H offering lower maximum monthly benefits to women than to men who are in the same classification under a disability income contract;
- I. offering more restrictive benefit periods and more restrictive definitions of disability to women than to men in the same classifications under a disability income contract;
- J. establishing different conditions by sex under which the policyholder may exercise benefit options contained in the contract; and

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K. limiting the amount of coverage an insured or prospective insured may purchase based upon the insured's or prospective insured's marital status unless the limitation is for the purpose of defining persons eligible for dependent benefits.

Department of Commerce

Proposed Rules Relating to the Comprehensive Health Insurance Association

Notice of Intent to Adopt Rules without a Public Hearing

Notice is hereby given that the Department of Commerce proposes to adopt the above-entitled rules without a public hearing. The Commissioner of Commerce has determined that the proposed adoption of these rules will be noncontroversial in nature and has elected to follow the procedures set forth in Minnesota Statutes, § 14.21.

Persons interested in these rules shall have 30 days to submit comments in support of or in opposition to the rules. Each comment should identify the portion of the proposed rule addressed, the reason for the comment, and any change proposed. The proposed rules may be modified if the modifications are supported by the data and views submitted to the agency and do not result in a substantial change.

No public hearing will be held unless twenty-five (25) or more persons make a written request for a hearing within the 30-day comment period. In the event a public hearing is required, the agency will proceed according to the provisions of Minnesota Statutes, § 14.14, subd. 1.

Persons who wish to submit comments or a written request for a public hearing should submit them to Richard G. Gomsrud, General Counsel, Department of Commerce, 500 Metro Square Building, St. Paul, MN 55101. Any person requesting a public hearing should state her/his name and address, identify the portion of the proposed rule addressed, the reason for the request and any change proposed and send this information to the above address.

Authority for the adoption of these rules is contained in Minnesota Statutes, § 62E.09(i). Additionally, a Statement of Need and Reasonableness describing the need for and reasonableness of each provision and identifying the data and information relied upon to support the proposed rules has been prepared and is available upon request.

Pursuant to Minn. Laws 1983, ch. 188 codified as Minn. Stat. § 14.115, subd. 2, the impact on small business has been considered in the promulgation of the rules. Anyone wishing to present evidence or argument as to the rules' effect on small business may do so. The Department's position regarding the impact of the rules on small business is set forth in the Statement of Need and Reasonableness.

Upon adoption of the final rules without a public hearing, the proposed rules, this notice, the Statement of Need and Reasonableness, all written comments received, and the final Rules as Adopted will be delivered to the Attorney General for review as to form and legality, including the issue of substantial change. Persons who wish to be advised of the submission of this material to the Attorney General, or who wish to receive a copy of the final rules as proposed for adoption, should submit a written statement of such request to Richard Gomsrud, Department of Commerce, 500 Metro Square Bldg., St. Paul, MN 55101.

A copy of the proposed rules is attached to this notice. Copies of this notice and the proposed rules are available and may be obtained by contacting Rose Weiner at the above address.

Michael A. Hatch Commissioner of Commerce

Rules as Proposed

2740.0100 DEFINITIONS.

Subpart 1. to 12. [Unchanged.]

Subp. 13. Covered expenses. "Covered expenses" means the usual and customary charges for the services and articles listed in Minnesota Statutes, section 62E.06, or, with respect to qualified plans, the actuarial equivalence thereof, when prescribed for a covered person by a physician and when such the expenses are incurred during a period in which the state plan policy or contract is in effect.

Subp. 14. to 28. [Unchanged.]

Subp. 29. Licensed and tested insurance agent or solicitor insurance agent. "Licensed and tested insurance agent or solicitor" "insurance agent" means an insurance agent or solicitor as defined in Minnesota Statutes, section 60A.02, subdivision 7 or 8, and licensed as such by the commissioner under Minnesota Statutes, section 60A.17 to act as an agent or solicitor for accident and health insurance as defined in Minnesota Statutes, section 60A.06, subdivision 1, clause (5)(a).

Subp. 30. and 31. [Unchanged.]

Subp. 32. Net gains. "Net gains" means the excess of premiums or contract charges over claims expenses, after the writing carrier's expenses and agent referral fees (, not to exceed 12 1/2 15 percent of premiums or contract charges), have been paid as provided in part 2740.4400, subpart 4.

Subp. 33. to 44.[Unchanged.]

Subp. 44a. Qualified medicare supplement plan. "Qualified medicare supplement plan" means a plan of health coverage meeting the requirements of Minnesota Statutes, sections 62A.31, 62A.32, 62E.02, subdivision 5, and 62E.07.

Subp. 45. to 52. [Unchanged.]

Subp. 53. Rejection, "Rejection," for the purpose of state plan eligibility, means refusal by any association member, or any authorized representative, including any insurance agent, acting on behalf of any association member, to issue a qualified plan or a qualified medicare supplement plan to a person who completes an application for coverage under such qualified plan, or a qualified medicare supplement plan, as determined by the board.

Subp. 54. to 56. [Unchanged.]

Subp. 56a. Self-insurer. "Self-insurer" means an entity defined by Minnesota Statutes, section 62E.02, subdivision 21, which is a "governmental plan" as defined by United States Code, title 29, section 1002(32) or a "church plan" as defined by United States Code, title 29, section 1002(33)(A) or which is otherwise exempt from or outside of the scope of the provisions of the Employee Retirement Income Security Act of 1974, United States Code, title 29, sections 1001 to 1381, as amended.

Subp. 57. [Unchanged.]

Subp. 58. Total cost of self-insurance. "Total cost of self-insurance" includes any direct and indirect administrative expenses incurred that are related to the operation of a plan of self-insurance, plus the sum of any payment made to or on behalf of Minnesota residents for costs or charges for health benefits by a self-insurer under a plan of health coverage, regardless of the amount incurred or relationship of the cost to an insured or partially insured plan of health coverage, which is not counted as premium by an insurer, except to the extent of such payments made for coverage of the types described in Minnesota Statutes, section 62E.02, subdivision 11, clauses (1) to (8).

Subp. 59. [Unchanged.]

2740.1100 DUTIES OF EMPLOYERS.

Subpart 1. Duty to make available a qualified plan. An employer shall be deemed to have made available a qualified plan to its employees as required in Minnesota Statutes, section 62E.03, subdivision 1 when participation under a number 2 or number 3 qualified plan or a health maintenance plan is offered to the employee directly by a self-insurer or through an insurer or health maintenance organization and, without regard to whether the cost of such participation is paid directly or indirectly by the employer or by the employee or by their joint payment.

Subp. 2. [Unchanged.]

Subp. 3. Frequency of required offer. Except as provided in subpart 2, an employer shall be deemed to have complied with the requirements of Minnesota Statutes, section 62E.03, subdivision 1 if he the employer makes available to his the employer's employees a plan of health coverage which is certified as a number 2 or number 3 qualified plan or a health maintenance plan at least once during each accounting period utilized by the employer for Minnesota income tax purposes.

2740.1200 DUTIES OF INSURERS AND FRATERNALS.

Subpart 1. [Unchanged.]

- Subp. 2. Timing of required offer of a qualified plan or qualified medicare supplement plan. Timing of required offer of a qualified plan or qualified medicare supplement plan is as follows:
- A. The offer of each type of qualified plan (that is, a number 1, number 2, and number 3 qualified plan) that is required when an insurer or fraternal is offering an individual policy of accident <u>and</u> health insurance shall occur no later than the date of delivery of such policy to the applicant.
 - B. to E. [Unchanged.]

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." <u>ADOPTED RULES SECTION</u> — <u>Underlining</u> indicates additions to proposed rule language. <u>Strike outs</u> indicate deletions from proposed rule language.

- Subp. 3. [Unchanged.]
- Subp. 4. Duty to offer major medical coverage. Each insurer and fraternal shall affirmatively offer, subject to its underwriting standards, coverage of major medical expenses to every applicant for a new unqualified policy at the time of application and annually thereafter to every holder of an unqualified policy of accident and health insurance renewed by the insurer or fraternal as required by Minnesota Statutes, section 62E.04, subdivision 4. "Affirmatively offer" shall mean written advice to the applicant for, or the holder of, an unqualified policy of accident and health insurance, of the availability of coverage for major medical expenses. Such written advice of the availability of the coverage for major medical expenses may be satisfied by a contractual provision in the unqualified policy that gives the insured the contractual right to apply to the insurer or fraternal for a new policy or a rider on an existing unqualified policy that provides coverage for 80 percent of the covered expenses for services listed in Minnesota Statutes, section 62E.06, subdivision 1 or the actuarial equivalence thereof subject to a \$5,000 deductible for out-of-pocket expenses, subject to the insurer's or fraternal's underwriting requirements.
 - Subp. 5. and 6. [Unchanged.]
- Subp. 7. Exceptions to duties for certain policies and contracts. Exceptions to duties for certain policies and contracts are as follows:
 - A. [Unchanged.]
- B. The issuance or renewal by an insurer or fraternal on or after June 3, 1977, of the <u>a</u> policy or contract that is designed solely to provide payments on a per diem, fixed indemnity, or nonexpense incurred basis, shall not be subject to Minnesota Statutes, section 62E.04, except for policies and contracts sold by an insurer to provide payments on a hospital indemnity basis if such coverage is issued to an applicant who is not covered by a qualified plan or a health maintenance plan at the time of issue.
 - Subp. 8. [Unchanged.]

2740.1600 TERMINATION OF COVERAGE; CONVERSION PRIVILEGES.

Subpart 1. and 2. [Unchanged.]

Subp. 3. Due notice of cancellation or termination. An insurer, health maintenance organization, or self-insurer shall be deemed to have provided "due notice of cancellation or termination" as required in Minnesota Statutes, section 62E.16 if the insurer, health maintenance organization, or self-insurer notifies in writing those employees at their respective addresses as provided to the insurer, health maintenance organization, or self-insurer by the employer pursuant to the terms of Minnesota Statutes, section 62E.16.

2740.2100 DEFINITIONS.

- Subpart 1. Accident and health insurance business. "Accident and health insurance business" means the issuance or renewal of any accident and health insurance policy as defined in Minnesota Statutes, section 62E.02, subdivision 11.
 - A. [Unchanged.]
 - B. Such business shall not include the issuance or renewal of policies or contracts providing coverage that is:
 - (1) to (8) [Unchanged.]
- (9) limited to accident-only coverage issued by a licensed and tested an insurance agent or solicitor and that provides reasonable benefits in relation to the cost of covered services.
 - Subp. 2. and 3. [Unchanged.]
- Subp. 4. Self-insurance business. "Self-insurance business" means the provision, directly or indirectly, of a plan of health coverage by a self-insurer. "Self-insurance business" does not include the direct provision of health care services to employees at no charge to them by an employer engaged in the business of providing health care services to the public, nor does it include provision of benefits that, if provided by an insurer doing accident and health insurance business, would be excluded under subpart 1, item B. "Directly or indirectly" for the purposes of parts 2740.2100 to 2740.2600 2740.5500 means that the employer or employee welfare benefit plan self-insurer funds the plan of health coverage in any amount or collects any employee contributions which are used to pay for the plan of health coverage.

2740,2400 ASSESSMENTS.

Contributing members, according to the assessment agreement, will be assessed for their proportionate share of the operating and administrative expenses of the association, incurred or estimated to be incurred, together with losses, if any, incurred by the association as a result of operation of the state plan. The total amount of operating and administrative expenses and losses:

- A. [Unchanged.]
- B. may, at the recommendation of the board, subject to the approval of the commissioner, consist of a reasonable estimate of

the operating and administrative expenses of the association for the succeeding fiscal year, which amount shall be adjusted at the end of the succeeding fiscal year to the amount of actual operating and administrative expenses, and <u>contributing</u> members shall be entitled to credit for any excess or shall be assessed for any deficit in these expenses in the next annual fiscal year end assessment future assessments.

2740.2500 LEVY OF ASSESSMENTS.

- Subpart 1. Annual. The association shall make an annual determination of each contributing member's liability, if any, and may levy assessments following each fiscal year end. The fiscal year ends on December 31 unless the association establishes a different fiscal year end. Assessments are due and payable 30 days after receipt of a written assessment notice.
- **Subp. 2. Interim.** The association may also, upon approval of the commissioner, levy interim assessments when deemed necessary to assure the financial capability of the association to meet the incurred or estimated operating and administrative expenses of the association and losses resulting from the state plan. Interim assessments shall be due and payable within 30 days of receipt by a contributing member of a written interim assessment notice.
- Subp. 3. Member share. The association shall levy each contributing member's share of the total assessment based on the ratio of: the contributing member's total accident and health insurance premium, subscriber contract charges, or health maintenance organization contract charges (the preceding defined as charges for accident and health insurance business as defined in part 2740.2100, subparts 1 and 2), received from or on behalf of residents of Minnesota, or total cost of self insurance, as determined by the commissioner; to the total premium for accident and health insurance business for all contributing members of premiums, contract charges, and benefit plan costs reported.
- **Subp. 4. Costs and charges.** The costs and charges referred to in the ratio in subpart 3 shall, to the extent possible, be determined by reference to a form issued by the association or the commissioner which all <u>contributing</u> members shall submit to the commissioner annually for the preceding calendar year.
 - A. [Unchanged.]
- B. The commissioner shall have the authority to audit the accounts and records of any contributing member and any agent, trust, third party administrator, or other entity administering all or any portion of a plan of health coverage with or on behalf of a self insurer for the purpose of obtaining information necessary to levy an assessment.
- Subp. 5. Discretionary waiver. The board may, in its discretion, decline to levy assessments against contributing members that owe up to \$5 \$10 or less in a given year.

2740.2600 FAILURE TO EXECUTE ASSESSMENT AGREEMENT OR TO PAY ASSESSMENTS.

The names of all insurers, self insurers, fraternals, and health maintenance organizations that are required under the act to be members of the association, but which fail to execute an assessment agreement, will be forwarded by the association to the commissioner for appropriate action within the discretion of the commissioner. Any contributing members that fail to pay annual or interim assessments when such assessments become payable will be reported by the association to the commissioner for appropriate action within the discretion of the commissioner.

2740.2900 DETERMINATION OF MEMBER'S VOTING RIGHTS.

Subpart 1. [Unchanged.]

Subp. 2. Weighted vote. A member's vote shall be a weighted vote based on the member's total cost of self-insurance, accident and health insurance premiums, subscriber contract charges, or health maintenance contract charges derived from or on behalf of residents of Minnesota in the previous calendar year, as determined by the commissioner. To the extent possible, this figure shall be determined by reference to the annual reporting form submitted by contributing members to the commissioner in accordance with part 2740.2500, subpart 4, and similar forms showing all other members' total accident and health insurance premiums, subscriber contract charges (defined as charges for business specified in part 2740.2100, subparts 1 and 2) received from or on behalf of residents of Minnesota, or total cost of self-insurance, as defined in part 2740.0100, subpart 58, as determined by the commissioner.

If the necessary information is not available to the commissioner on the form described in this subpart at the time that voting rights must be determined, the commissioner may estimate the member's weighted vote based on other information available to the commissioner.

Subp. 3. Voting procedures. Members are entitled to vote in person, by proxy, or by mail as determined by the board.

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When a member elects to vote in person at a members' meeting, the representative casting the vote shall present credentials as required pursuant to the bylaws or operating rules of the association.

When a member elects to vote by proxy, the proxy statement as approved by the board and by the commissioner shall be returned on or before the date indicated in the meeting notice sent to the members.

Voting by mail may be permitted as authorized by the bylaws or operating rules of the association, and the meeting notice to members shall so indicate.

2740.3100 MINIMUM BENEFITS OF COMPREHENSIVE HEALTH INSURANCE PLANS.

Subpart 1. [Unchanged.]

- Subp. 2. Benefits of number 1 and number 2 qualified plan. Benefits shall meet or exceed the requirements of Minnesota Statutes, section 62E.06 or the actuarial equivalence thereof as determined pursuant to the actuarial equivalence tables set forth in parts 2740.9905 to 2740.9986, except where substitution of an actuarially equivalent benefit is not permissible under the act.
 - A. [Unchanged.]
- B. Coverage shall include an annual (calendar year) limitation of not more than \$3,000 per covered person on total out-of-pocket expenses, which out-of-pocket expenses shall include the deductible under the state plan policy or contract, and which benefit (copayment) out-of-pocket expense limitation is not subject to substitution of an actuarially equivalent benefit (copayment).
- C. Coverage shall be subject to a maximum lifetime benefit of not less than \$250,000 per covered person, less any amount paid to or on behalf of the covered person under any other state qualified plan policy or contract of the state plan. This benefit is not subject to substitution of an actuarially equivalent benefit.
- Subp. 3. Benefits of qualified medicare supplement plan. Benefits of a qualified medicare supplement plan shall meet or exceed the following minimum standards or the actuarial equivalence thereof as determined pursuant to the actuarial equivalence tables set forth in parts 2740.9905 to 2740.9986.
- A. The plan shall provide benefits to covered persons who are 65 years of age or older by supplementing medicare through provision of 50 percent of the deductible and copayment required under medicare:
- (1) coverage of part A medicare eligible expenses for hospitalization to the extent not covered by medicare to at least 50 percent of the deductible and copayment required under medicare for the first 60 days of any medicare benefit period;
- (2) coverage of part A medicare eligible expenses for hospitalization to the extent not covered by medicare from the 61st day through the 90th day in any medicare benefit period;
- (3) coverage of part A medicare eligible expenses incurred as daily hospital charges during use of medicare's lifetime hospital inpatient reserve days to the extent not covered by medicare;
- (4) upon exhaustion of all medicare hospital inpatient coverage including the lifetime reserve days, coverage of 90 percent of all medicare part A eligible expenses for hospitalization not covered by medicare subject to a lifetime maximum benefit of an additional 365 days;
- (5) coverage of 20 percent of the amount of medicare eligible expenses under part B regardless of hospital confinement and coverage of at least 50 percent of the medicare calendar year part B deductible.
- B. The plan shall provide 80 percent of the covered charges for expenses as provided in Minnesota Statutes, section 62E.06 or the actuarial equivalence thereof, which charges are not paid or payable under medicare or would not have been paid or payable had the covered person who is or was entitled or eligible to enroll in medicare been so enrolled or which charges are not paid or payable under item A.
- C. Coverage shall include an annual limitation of \$1,000 total out-of-pocket expenses per covered person for covered expenses charges, provided that an annual deductible of not more than \$200 is permissible for those covered charges not paid or payable under medicare or otherwise included in item A or B.
- D. Coverage may not shall be subject to a maximum lifetime benefit of not less than \$100,000, or the unused portion of the maximum lifetime benefit under any policy or contract of the state plan under which the person was previously covered, whichever is less per covered person, less any amount paid to or on behalf of the covered person under any other qualified medicare supplement plan of the state plan.
- E. The minimum coverage of a qualified medicare supplement plan required by this subpart is not subject to substitution of actuarially equivalent benefits.

Subp. 4. and 5. [Unchanged.]

2740.3600 ENROLLMENT.

- Subp. 1. [Unchanged.]
- Subp. 2. Eligible person. "Eligible person," as used in subpart 1, means a resident of Minnesota who submits or on whose behalf is submitted a complete certificate of eligibility and enrollment form to the association or its writing carrier and who is not already covered by another state plan policy or contract.
 - A. A complete certificate of eligibility and enrollment form may provide:
 - (1) name, address, age, sex, and length of time as a resident of Minnesota;
 - (2) [Unchanged.]
- (3) evidence of rejection, or a requirement of a restrictive rider, <u>rate-up</u>, or preexisting conditions limitation on a qualified plan <u>or qualified medicare supplement plan</u>, the effect of which is to substantially reduce coverage from that received by a person who is considered a standard risk, by <u>at least two one</u> association <u>members member</u>, or by an <u>authorized representative</u>, including an <u>insurance agent</u>, acting <u>on behalf of an association member</u>, within six months of the date of application. "Substantially reduce coverage from that received by a person who is considered a standard risk" includes any restriction on coverage as a result of an illness, condition, or risk which the association deems substantial, any increase in rates for an applicant based on an illness, condition, or risk, which the association deems substantial, and any preexisting conditions limitation which the association deems substantial.
- B. In lieu of evidence of rejection, or a requirement of a restrictive rider, rate-up, or preexisting conditions limitation on a qualified plan or qualified medicare supplement plan, as required by item A, subitem (3), a complete certificate of eligibility and enrollment form may provide evidence which meets the requirements of an operating rule adopted by the association of a proposed covered person having been treated within three years of the date of the certificate of eligibility and enrollment form for one or more conditions listed in the operating rule.
- <u>C.</u> Before a person is determined to be an eligible person, the board may require that any items listed in item items A and B or, if acting pursuant to provisions of the association's operating rules, other necessary information be submitted to the association or its writing carrier and may also investigate the authenticity of information submitted as a part of the certificate of eligibility.
- C. D. If a covered person, under a qualified plan of the state plan, upon reaching age 65, or becoming enrolled in medicare, wishes to purchase a state plan qualified medicare supplement plan, the requirement that the person obtain two rejections one rejection, restrictive rider, rate-up, or preexisting conditions limitation on a qualified medicare supplement plan, the effect of which is to substantially reduce coverage from that received by a person who is considered a standard risk, from members one member of the association, or from an authorized representative, including an insurance agent acting on behalf of an association member, within the preceding six months may be waived by the board if acting pursuant to provisions of the association's operating rules.
- D. E. A person who is age 65 or older shall be eligible for coverage only under the state plan's qualified medicare supplement plan and when an insured person under a qualified plan reaches age 65, the board may, if acting pursuant to provisions of the association's operating rules, terminate or refuse to renew coverage under the qualified plan. A person under age 65 who is otherwise eligible for coverage under the state plan and is enrolled in medicare shall be permitted to purchase a qualified plan 1 or 2 or the qualified medicare supplement plan of the state plan.
- E. F. An applicant or any person proposed to be covered under a qualified plan of the state plan who has previously been covered by a under one or more qualified plans of the state plan policy or contract and who has exhausted the \$250,000 maximum lifetime benefit under the state plan shall not be an eligible person for coverage under a qualified plan of the state plan of the state plan applicant for or any person proposed to be covered under a qualified medicare supplement policy or contract plan of the state plan who has previously been covered under one or more qualified medicare supplement plans of the state plan shall be eligible for a maximum benefit under the qualified medicare supplement policy or contract of the state plan under which the person was previously covered, whichever is less and who has exhausted the \$100,000 maximum lifetime benefit shall not be an eligible person for coverage under a qualified medicare supplement plan of the state plan.
- F. G. When a covered person under the state plan no longer meets one or more of the requirements for eligibility for coverage under the state plan, the board may, if acting pursuant to the association's operating rules, terminate or refuse to renew coverage under the state plan.

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2740.3700 ASSOCIATION'S RESPONSE.

- Subpart 1. Time limitation. Within 30 days of receipt of a complete certificate of eligibility and enrollment form pursuant to part 2740.3600, subpart 2, items A and C, the association or the writing carrier shall accept the certificate of eligibility or shall reject the certificate of eligibility for failure to meet the eligibility requirements.
- Subp. 2. Acceptance. If the association or its writing carrier accepts the certificate of eligibility, it shall forward a notice of acceptance, billing information, and a policy or contract or certificate that shall evidence coverage under the state plan.
 - A. [Unchanged.]
- B. When the state plan premium is received by the association or its writing carrier for the first billing period and accepted in accordance with this part, the coverage shall be effective retroactive to the date of receipt by the association or its writing carrier of the completed certificate of eligibility pursuant to part 2740.3600, subpart 2, items A and, B, and C unless otherwise requested by the insured person and approved by the board.
- Subp. 3. Nonacceptance. If the association does not accept the certificate of eligibility, the applicant shall be informed of the reason for the rejection and shall have the opportunity to submit additional information to substantiate eligibility for coverage under the state plan and to request reconsideration of the decision. The board shall may establish a review mechanism for reviewing requests for reconsideration of rejected certificates of eligibility. The association shall give notice of a final determination of ineligibility to the applicant stating the reasons therefor and advising the applicant of the right to appeal to the commissioner within a reasonable period of time.

2740.3900 SOLICITATION OF ELIGIBLE PERSONS DISSEMINATION OF INFORMATION CONCERNING STATE PLAN.

- Subpart 1. Plan. The association shall develop a plan for use by the association, upon approval by the commissioner, to publicize the existence of the state plan, and the eligibility requirements, and procedures for enrollment, and to maintain public awareness of and participation in the state plan.
- Subp. 2. Forms and instructions. The association shall prepare and make available certificate of eligibility forms and enrollment instruction forms to members, insurance solicitors, agents and brokers, and to the general public in Minnesota.
- Subp. 3. Referral fee. The association shall require the writing carrier to pay a referral fee of \$25 \$50 for any certificate of eligibility accepted by the association or its writing carrier. The referral fee shall be paid to the licensed agent whose signature appears as the agent on the accepted certificate of eligibility if the referring agent is licensed by the commissioner as an insurance agent and if the referring agent's signature appears as the agent on the accepted certificate of eligibility. The referral fee shall be paid from the premium received for the state plan. Referring agents shall not be authorized to interpret, amend, or alter the terms of the state plan policy or contract, nor shall referring agents be authorized to bind the association in any way. Referring agents shall not be agents of the association for any purpose, and the association shall not bear responsibility for acts of referring agents.

2740.4400 OPERATIONS OF THE WRITING CARRIER.

- Subpart 1. Administrative and claims payment functions. The writing carrier shall perform all administrative and claims payment functions relating to the state plan.
 - A. [Unchanged.]
- B. The writing carrier shall perform all necessary functions to assure timely payment of benefits to covered persons under the state plan.
 - (1) to (3) [Unchanged.]
- (4) The writing carrier shall exercise reasonable efforts to advise covered persons, within 15 working 60 business days of receipt of a properly completed and executed proof of loss, whether the submitted claim was accepted or rejected by the writing carrier, unless sooner settled.
- (5) The writing carrier shall may establish an appeals procedure approved by the board to review claims that are denied in whole or in part. When a claim or any portion thereof is denied, the writing carrier shall inform the covered person of the existence of the procedure, including the right to appeal to the commissioner within a reasonable period of time.
 - Subp. 2. [Unchanged.]
- Subp. 3. Claims expenses. The writing carrier shall pay claims expenses from the premium payments received from or on behalf of covered persons under the state plan. If the writing carrier's payments for claims expenses exceed the portion of the state plan premiums allocated by the board for payment of claims expenses, the association shall provide to the writing carrier additional funds for payment of claims expenses. Not less than 87-1/2 85 percent of the state plan premium, as determined by the board, shall be used to pay claims expenses, and not more than 12-1/2 15 percent of the state plan premium shall be used to pay agent referral fees

(authorized by Minnesota Statutes, section 62E.15, subdivision 3) and to pay the writing carrier's direct and indirect expenses, as defined and authorized in Minnesota Statutes, section 62E.13, subdivision 7 and described in parts 2740.4300 to 2740.4500 subpart 5.

- Subp. 4. Direct and indirect expense reimbursement. The writing carrier shall be paid from time to time as provided in the association's contract with the writing carrier for its direct and indirect expenses incurred in the performance of its services from the state plan premiums received in an amount not to exceed the lesser of:
 - A. 12-1/2 15 percent of the state plan premium, less agent referral fees payable under part 2740.3900, subpart 3;
 - B. and C. [Unchanged.]
- Subp. 5. Direct and indirect expenses. Direct and indirect expenses shall include that portion of the <u>writing</u> carrier's actual administrative, printing, claims administration, management, building overhead expenses, and other actual operating and administrative expenses approved by the board as allocable to the administration of the state plan.

Subp. 6 and 7. [Unchanged.]

2740.5200 REINSURANCE PLAN.

Subpart 1. [Unchanged.]

Subp. 2. Application and acceptance. Insurer or fraternal members wishing to participate in the pool shall apply to the association for participation in the pool, specifying the categories of coverage that the member desires to reinsure.

Members Each member entering into a reinsurance pooling agreement for a particular category or categories of coverage shall offer to place in the pool all policies and contracts that it issues in the category or categories listed in part 2740.5100 that it wishes to reinsure.

Only policies and contracts acceptable to the association or its reinsurance administrator may be accepted for reinsurance. The association is under no obligation to accept any but standard risks in the reinsurance plan.

Subp. 3. to 5. [Unchanged.]

Rules as Proposed (all new material)

2740.9904 PURPOSE.

Minnesota Statutes, section 62E.02, defines "qualified plans" as health benefit plans that provide the benefits required in Minnesota Statutes, section 62E.06 or "the actuarial equivalent of those benefits." Minnesota Statutes, section 62E.06 describes three qualified plans. These statutes require all plans of health coverage subject to Minnesota Statutes, section 62E.06 to be labeled as qualified or non-qualified. The commissioner may be requested to determine whether a plan is qualified and may take up to 90 days to make that determination. Minnesota Statutes, section 62E.02 defines a qualified medicare supplement plan as one which has been certified by the commissioner as providing the minimum benefits required by Minnesota Statutes, section 62E.07. Since the definition does not allow the option of an actuarial equivalent plan, the current rules do not include actuarial equivalent tables for medicare supplement policies.

2740.9909 COMPOSITE POINT VALUES FOR QUALIFIED PLAN NUMBER THREE.

The composite point values for a qualified plan number three for 1984 are as shown herein.

Composite Point Values for Minnesota Qualified Plan No. 3

Points	Benefit
363	Hospital room and board, unlimited days, semi-private.
480	Hospital extras (i.e., hospital services, hospital miscellaneous, hospital special services, or ancillary services) including anesthesia.
243	Surgery, including administration of anesthesia, assistant surgeon and oral surgery but no tooth repair or extractions.
215	Home and office physician care, unlimited.
51	Physician care in hospital, unlimited.
63	Obstetrics, unlimited.

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110	Hospital maternity, unlimited.
105	X rays and laboratory tests, outpatient and out of hospital.
100	Prescription drugs and medicine, outpatient and out of hospital.
15	Radioactive therapy, outpatient and out of hospital.
16	Nursing or convalescent facility.
8	Home health agency care.
10	Physical therapy.
4	Oxygen.
5	Prostheses.
5	Durable medical equipment rental or purchase.
2	Second opinion surgery.
2	Private duty nursing.
3	Ambulance.
- 12	Adjustment for major medical maximum.
1788	Total reasonable and customary medical services
-245	\$150 deductible.
- 309	20 percent coinsurance.
1234	Total after deductions for deductible and coinsurance
-49	Coordination of benefits.
-31	Nonduplication with no-fault.
30	3,000 annual "out-of-pocket" expense limit.
8	Well baby care.
0	Emergency accident.
. 0	Supplement accident.
0	Student dependents.
1192	Grand Total

2740.9914 DETERMINATION OF AVERAGE SEMI-PRIVATE HOSPITAL ROOM AND BOARD LEVEL OF SURGICAL CHARGES.

Subpart 1. Why develop values annually. Many companies issue policies with scheduled benefits. Due to inflation the value of scheduled benefits declines each year in relation to reasonable and customary charges. It would be best if the test of actuarial equivalence would automatically adjust for inflation and thus would more accurately value these types of benefits.

Subp. 2. When values determined. In December of each year, the commissioner will publish the following values:

- A. the average semi-private hospital room and board (ASP value);
- B. the value of surgical charges (SURG value);
- C. the ratios of the average semi-private hospital room and board for the year to that in 1984 (ASP factor);
- D. the ratio of the value of surgical charges for the year to that in 1984 (SURG factor); and
- E. the composite ratio of medical care for the year to that in 1984 (COMP factor).

The commissioner may appoint a service agency to calculate these values on a consistent basis each year.

Subp. 3. How values determined. Values will be determined as follows:

- A. The ASP value will be the weighted bed average of semi-private room and board charges for acute hospitals in Minnesota. The information will be derived from each hospital's latest room and board charge filed with the commissioner or the service agency. A semi-private room will be defined as a room with two beds.
- B. The SURG value will be the sum of the product of the average charge, filed with the commissioner or the service agency, for each of the surgical operations shown below times the factor shown for that operation. The surgical operations and their factors are shown in part 2740.9919.
- C. The ASP factor will be the ASP value to be published for the year divided by that published for 1984. For 1984, this will be 1.000 by definition.
- D. The SURG factor is the ratio of the SURG value for the year divided by that published for 1984. For 1984, this will be 1.000 by definition.
- E. The COMP factor is the composite factor for medical care. This equals 54 percent times the ASP factor for the year plus 46 percent times the SURG factor for the year.

2740.9919 TABLE OF SURGICAL FACTORS TO DEVELOP SURG VALUE.

CPT4 Code	Surgical Factor	Description
SKIN 10060 11400 11750 12011 17100	.7710 2.0161 .4368 1.9732 4.6520	Abscess, incision, and drainage, simple Benign lesion removal of (up to 0.5 cm.) Nail, permanent removal of Simple wound, simple repair (up to 2.5 cm.) Benign skin lesion, destruction of
MUSCUL 20610 27130 29425	OSKELETAL	Major joint or bursa, injection or aspiration of Total hip joint replacement, simple Application walking cast
33512 93547	/ASCULAR .1111 .2166 /E SYSTEM	Coronary bypass, three arteries Left heart catheterization with coronary angiogram
43235 43844 44950 45300 47600 49505	.4514 .0569 .2618 2.7170 .3765 .3086	Gastroscopy, diagnostic Stomach bypass for morbid obesity Appendectomy Proctosigmoidoscopy, diagnostic Gallbladder, removal of Inguinal hernia repair, unilateral
URINARY 52601 53670	Y SYSTEM .1579 3.5373	Prostate resection (TUR), complete Urinary bladder catheterization
MALE GE 54150	.8509	Circumcision by clamp, newborn
FEMALE 58120 58150 58980	GENITAL .8470 .4792 .9455	Uterus, dilation and curettage (D & C), nonobstetrical Uterus, removal of Laparoscopy, diagnostic
NERVOUS 63030 64721	S SYSTEM .0694 .1988	Laminotomy herniated disc, lumbar Carpal tunnel syndrome repair
EYE 66980 EAR	.2003	Cataract removal, intraocular lens insertion
69437	.3934	Tympanostomy with ventilating tube insertion

2740.9924 HOW TO USE THE LIST.

Subpart 1. Basic and comprehensive major medical plans. The list is used in the following manner:

- A. Determine the ASP value, SURG value, ASP factor, SURG factor, and COMP factor for the calendar year. This is published annually by the commissioner.
- B. List the plan benefits, ignoring deductibles, coinsurance, well baby care, emergency accident, supplemental accident, and student dependents. Include the plan maximum in the plan benefits.
 - C. For each benefit, find the appropriate table of equivalent points for basic and major medical plans.

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- D. Extract the appropriate point value for the benefit from the table, interpolating as necessary or indicated, and place it opposite the listed benefit. Ignore benefits for which no table exists.
 - E. Total the points for these benefits.
 - F. List deductible and coinsurance if the plan is a comprehensive major medical plan.
- G. Determine the appropriate point values for deductible, interpolating as necessary, and place the value in the list of points. Calculate the coinsurance points and place the values in the list of points.
 - H. Determine the total points after the deduction for deductible and coinsurance.
 - I. Determine the deduction for coordination and nonduplication of benefits.
- J. Determine the number of points for the limit on "out-of-pocket" expenses, well baby care, emergency accident, supplemental accident, and student dependents.
 - K. Calculate the grand total.
 - L. To determine qualification, utilize the grand total in the test for actuarial equivalence in part 2740.9949.
 - Subp. 2. Superimposed major medical plans. The following govern superimposed major medical plans:
 - A. Follow steps outlined in subpart 1, items A to D for basic health plan benefits.
 - B. Total the points for the basic plan.
- C. Utilize part 2740.9964, subparts 23, 24, and 25 to determine the point value of a Minnesota qualified plan superimposed over the basic plan with the deductible and benefit period of the plan at hand, interpolating as necessary. Put the points in the point column.
 - D. Compare the benefits in the superimposed major medical plan with the benefit structure of a Minnesota qualified plan:
 - (1) \$250,000 lifetime maximum.
 - (2) 80/20 coinsurance.
 - (3) \$3,000 annual per person out-of-pocket maximum.
 - (4) Eligible expenses are usual and customary expenses for:
 - (a) hospital services;
 - (b) physician care;
 - (c) prescription drugs;
 - (d) nursing home care of up to 120 days in one year, commencing within 14 days of hospitalization of at least three
 - (e) home health care;
 - (f) radium and radioactive therapy;
 - (g) oxygen;
 - (h) anesthetics;
 - (i) prostheses;
 - (j) rental or purchase of durable medical equipment;
 - (k) diagnostic x rays and laboratory tests;
- (l) oral surgery on impacted teeth, on tooth roots, or on gums and tissues of the mouth when not performed in connection with tooth extraction;
 - (m) physical therapy;
 - (n) maternity same as any illness;
 - (o) Minnesota statutorily-mandated benefits; and
 - (p) coordination of benefits.
- E. Consult the tables for point adjustments (usually negative for Minnesota qualified plan benefits not in the superimposed major medical plan being tested). Put the adjustments in the point column.
- F. Calculate the total by adding the points for the basic plan (item B), the superimposed major medical plan (item C), and the adjustments (item E).

days;

G. To determine qualification, utilize the grand total in the test for actuarial equivalence in part 2740.9949.

2740.9929 BENEFIT VARIATIONS NOT COVERED BY TABLES.

Only those plan variations that are most common are recognized. For instance, comprehensive plan coinsurance was assumed normally not to exceed 20 percent. Therefore, no points are shown for 25 percent. However, points for such missing benefit variations can be extrapolated or estimated.

2740.9934 USE OF TABLES.

Subpart 1. Certification of plans. Any insurer, self-insurer, or policyholder may use the test for actuarial equivalence as a guide. To obtain certification of any plan of health benefits as qualified, it must be submitted to the commissioner.

- Subp. 2. Filing with commissioner. The following should be sent to the commissioner:
 - A. The plan document if an uninsured plan or the policy form if an insured plan.
 - B. A statement of the grand total from part 2740.9924.
- C. A certification that the plan is qualified as either a plan 1, 2, or 3, or is nonqualified, by using the test of actuarial equivalence in part 2740.9949. The certification must be by a principal or officer, or by a member of the Academy of Actuaries.
- D. If the plan is not a qualified plan by using the test of actuarial equivalence, and the insurer or self-insurer desires to have it certified as a qualified plan, a statement of the specific reasons for the desired qualification.
- Subp. 3. Certification by commissioner. If the documents required by subpart 2 are filed and the plan is a qualified plan by using the test of actuarial equivalence in part 2740.9949, then the plan will be deemed certified as filed. If the documents required by subpart 2 are filed and the plan is not a qualified plan by using the test of actuarial equivalence in part 2740.9949, then the plan will be qualified if, and when, the commissioner certifies it as a qualified plan.

2740.9939 UPDATE OF TABLES.

Periodically, the tables may be revised as health care costs change. The commissioner may revalue the actuarial equivalence of any plan or policy at any time deemed appropriate. Also, as health care costs change, a plan may automatically lose or change its qualification. Annual revaluation of plans is required. When a plan is revalued and its qualification status changes, the filing procedures in part 2740.9934 will be followed.

2740.9944 MISUSE OF TABLES.

The tables of equivalent points are not intended for any other use, especially not for premium calculations. They represent a composite of data and were adjusted to be useable for testing actuarial equivalence. No other use is contemplated.

2740.9949 TEST FOR ACTUARIAL EQUIVALENCE FOR PLANS OTHER THAN MEDICARE SUPPLEMENT PLANS. Subpart 1. Table for 1984.

If the Grand Total of any Plan is: 1192 + points 911 + points 767 + points Less than 767 points Then that Plan is the Actuarial Equivalent of Minnesota Qualified Plan No.

3 2 1 Nongualified

Subp. 2. Effect of inflation. Each year the number of points required for each qualified plan will increase due to the effects of inflation on the benefits. Particular care should be taken to revalue any policy form which contains scheduled benefits or other policy forms which have different deductible or coinsurance provisions.

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2740.9954 WORKSHEET FOR OTHER THAN MEDICARE SUPPLEMENT PLANS.

Comprehensive Health Insurance Test for Actuarial Equivalence Other than Medicare Supplement Plans

Subparts	•			
of part			Major Medical	
2740.9964	Benefit	Basic	Superimposed	Comprehensive
1.	Hospital room and board			
2.	Hospital extras			
3.	Surgery			
4.	Physician care-home, office			
5.	Physician care-hospital			
6.	Maternity			
7.	Diagnostic X-ray and lab			
8.	Drugs and medicine			
9.	Radioactive therapy			
10.	Nursing/convalescent facility	•		
11.	Home health care			
12.	Physical therapy			
12.	Oxygen			•
12.	Prostheses			
12.	Durable medical equipment			
12.	Second opinion surgery			
12.	Private duty nursing			
12.	Ambulance			
13.	Hospital room and board in full		•	
14.	All hospital expenses in full			
15.	Major medical maximums		•	
15.	Subtotal reasonable and customary			
	medical services			
16.	Deductible	•	•	
16.	Coinsurance			
10.	Subtotal net of deductible and			
	coinsurance			
17.	Adjust (Comb. medical/dental deductil	hle)		
18.	COB/No-Fault			
19.	Limit on "out-of-pocket" expenses		•	
20.	Well baby care			
21.	Emergency and supplemental accident			
22.	Student dependents			
2325.	<u>-</u>			
25. 25.	Grand Total			
	Combined Basic and			
	Superimposed		XXX	XXX
Equivalent to	Minnesota qualified plan number			
Date	Minnesota quanned pian number			
	_	•		
2740.9959 I PLANS.	OCATION OF TABLES OF EQUIVAL	LENT POINTS FOR BASIC A	AND MAJOR ME	DICAL HEALTH
Subparts of		Other than Medicare Supplement	Plans	
part 2740.99	64	Name	1 Idiis	
1.				
2.	•	Hospital room and board		
3.		Hospital extras		
3. 4.		Surgery		
4. 5.		Home and office physician car	are	
٥.		In-hospital physician care		•

6.	Maternity
7.	Diagnostic X-ray and laboratory
8.	Drugs and medicine
9.	Radioactive therapy
10.	Nursing or convalescent-home care
11.	Home health care agency service
12.	Physical therapy
12.	Oxygen
12.	Prostheses
12.	Durable medical equipment
12.	Second opinion surgery
12.	Private duty nursing
12.	Ambulance
13.	Hospital room and board in full
14.	All hospital charges in full
15.	Major medical maximums
16.	Coinsurance and deductibles
17.	Combined dental and health insurance deductible
18.	Coordination and nonduplication of benefits
19.	Limit on "out-of-pocket" expenses
20.	Well baby care
21.	Emergency and supplement accident
22.	Student dependents
23.	Superimposed major medical
24.	Superimposed major medical
25.	Superimposed major medical

2740.9964 EQUIVALENT POINTS FOR BASIC AND MAJOR MEDICAL HEALTH PLANS; NOT TO BE USED FOR MEDICARE SUPPLEMENT PLANS.

Subpart 1. Hospital room and board.

Maximum Days	Room & Board
31	327
70	347
120	351
365	. 359
Unlimited	363

- A. Room and board is defined to include a semi-private room, or charges for a private room if prescribed as medically necessary by a physician. If the policy does not pay the additional charges for a private room, then deduct three points from hospital room and board.
- B. If the policy pays the private room charge even though not medically necessary, then add ten points if average charge per day is four percent greater than the average semi-private room and board charge.
- C. If the policy pays the hospital room and board charge up to a maximum daily benefit which is less than the average semi-private room and board charge in the area, then multiply the points for the semi-private room and board at the indicated maximum days by the ratio of the scheduled amount to the ASP value in the area for the year.

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Subp. 2. Hospital extras. Hospital extras such as hospital services, special hospital services, ancillary services, and hospital therapeutics.

Maximum	Anesthesia**			
Amount*	Included	Not Included		
\$ 500	130	130		
1,000	217	216		
2,000	317	312		
5,000	413	401		
10,000	454	433		
15,000	469	444		
Unlimited	480	451		

^{*}Before entering this table, divide the maximum amount in the policy by the ASP factor for the year.

This is for miscellaneous hospital services and includes the cost for inpatient hospital care, the cost for outpatient hospital treatment and the excess cost of intensive care unit or coronary care unit over the average semi-private room and board.

Subp. 3. Surgery.

	Administration of Anesthesia		
Limit	Included	Not Included	
Prevailing Fee with Assistant			
Surgeon	243	206	
Prevailing Fee without Assistant		•	
Surgeon	244	187	

If the policy pays the reasonable and customary charges up to a maximum in a schedule, then multiply the points for the prevailing fee by the ratio of the value of the schedule used in the policy to the SURG value for the year.

Subp. 4. Home and office physician care.

Annual First		isit Accident	
Maximum*	First Visit Sickness	Third Visit Sickness	
\$ 200	111	63	
500	141 .	72	
1,000	165	93	
Unlimited	215	118	

^{*}Before entering this table, divide the annual maximum in the policy by SURG factor for the year.

Subp. 5. In-hospital physician care.

Maximum Number	
of Visits	Prevailing Fee
31	46
70	49
120	49
365	50
Unlimited	51

- A. This benefit pays the reasonable and customary charge to the physician (other than the surgeon, assistant surgeon, or anesthetist) while confined in the hospital for medical or surgical reasons.
 - B. If the policy pays the greater of this benefit or the surgical benefit, then reduce these points by 30 percent.
- C. A number of policies pay a limited amount per visit (limited to one visit per day) which is less than or equal to the cost for a routine follow-up visit in the hospital. If it is equal to the cost for a routine follow-up visit (assumed to be \$24.20*/day in 1984), then deduct 14 points from the above points. If it is less than that, then use a proportional part of the points determined as if the maximum was equal to the cost for a routine follow-up visit.

^{**}Anesthesia does not include the administration of anesthesia.

^{*}Multiply the indicated value by the SURG factor for the year.

Subp. 6. Maternity.

A. complications only:

limited to some specified list 20 any complications 25

B. full maternity (including complications):

Maximum		Flat		Hospital
Limit*	Deductible	Maternity	Obstetrics	Maternity
\$ 300	None	_	23	28
600	None	49	44	55
1,000	None	81	59	80
2,000	None	149		
Unlimited	None	173	63	110

^{*}Before entering this table, divide maximum limit in the policy by the ASP factor for the year.

Subp. 7. X rays and laboratory tests (out of hospital).

Maximum*	Scheduled (Any Scheduled)	Unscheduled
\$100	56	70
200	67	89
500	74	101
Unlimited	77	105

^{*}Before entering this table, divide the maximum in the policy by the ASP factor for the year.

Subp. 8. Prescription drugs and medicine (out of hospital).

Deductible*
Per Prescription

\$4.00 69
2.00 86
None 100

Subp. 9. Radioactive therapy (out of hospital).

10

Scheduled (Any Schedule)

15

Unscheduled

Subp. 10. Nursing or convalescent home care (within 14 days of hospital confinement of at least three days).

Maximum
Days

120 or More
16
Less than 120
0

Subp. 11. Home health care agency services.

Maximum
Visits/Year

180 or More

8
Less than 180
0

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^{*}Before entering this table, divide the deductible per prescription by the SURG factor for the year.

Subp. 12. Miscellaneous.

- A. physical therapy (out of hospital), 10;
- B. oxygen (out of hospital), 4;
- C. prostheses (out of hospital), 5;
- D. durable medical equipment rental or purchase (out of hospital), 5;
- E. second opinion surgery, 2;
- F. private duty nursing (in hospital only), 2; and
- G. ambulance, 3.

Subp. 13. Hospital room and board in full to indicated limit (basic and comprehensive major medical plans). Add these points to the points in subpart 1 if the maximum hospital room and board is the semi-private room and board. If it is less than the semi-private room and board, make an appropriate adjustment.

	Plan Deductible* On All		Lim	it*	
Plan	Benefits	\$1,000	\$2,000	\$5,000	Unlimited
Comprehensive	\$ 0-300	58	60	66	79
Comprehensive	301- 600	61	63	69	82
Comprehensive	601- 900	66	68	74	87
Comprehensive	901-1200	74	76	82	95

^{*}Before entering the table, divide the deductible and the "in full limit" by the ASP factor for the year.

- A. The above table assumes that the policyholder pays 20 percent after the deductible. If the policyholder pays a different percentage, multiply the above points by the ratio of the percentage being paid by the insured to 20 percent.
- B. This benefit assumes that hospital room and board will be paid at 100 percent and that the deductible will not be applied to it. The deductible will be applied to the other covered expenses. After the limit is attained, any remaining deductible will not be applied but the coinsurance will be applied, to the hospital room and board benefits.

Subp. 14. All hospital charges in full to indicated limit (basic and comprehensive major medical plans). Add these points to the total points in subparts 1 and 2 if the maximum hospital room and board is the semi-private room and board. If it is less than the semi-private room and board, make an appropriate adjustment.

	Plan Deductible*				
•		LIMIT*			
Plan	On All Benefits	\$1,000	\$2,000	\$5,000	Unlimited
Comprehensive	\$ 0-300	70	110	121	177
Comprehensive	301- 600	171	151	162	218
Comprehensive	601- 900	198	238	249	305
Comprehensive	901-1200	343	383	394	450

^{*}Before entering the table, divide the deductible and the "in full limit" by the ASP factor for the year.

- A. The above table assumes that the insured pays 20 percent of the costs after the deductible and that the number of points before the deductible and coinsurance is 1800. If the percentage being paid by the insured is not 20 percent, multiply the above points by the ratio of the percentage being paid by the insured to 20 percent.
- B. This benefit assumes that the hospital room and board and hospital services will be paid at 100 percent and that the deductible will not be applied to them. The deductible will be applied to the other covered expenses. After the limit is attained, any remaining deductible will not be applied but the coinsurance will be applied, to either hospital room and board or hospital services benefits.

Subp. 15. Major medical maximum (comprehensive and superimposed plans).

Add (+) or Subtract (-)
-27
-12
- 7
- 2

^{*}Before entering the table, divide the maximum in the policy by the COMP factor for the year.

The smallest maximum in the qualified plan is \$250,000. The \$100,000 maximum as provided should be used in future years to help determine the reduction for a \$250,000 plan.

Subp. 16. Coinsurance and deductibles (comprehensive major medical plans).

A. This table assumes that the point values for all medical services and supplies are approximately 1800 points before deduction for the maximum on total benefits. If the total points are significantly greater or smaller, then the point values must be adjusted.

Deductible*	Deducted Points
\$ 0	0
50	85
100	170
150	245
200	310
500	622
1,000	820

^{*}Before entering this table, divide the deductible in the policy by the COMP factor for the year.

B. To determine the deduction for the coinsurance, subtract the points deducted for the deductible from the total point value for the benefits and then multiply the result by the coinsurance percentage.

Subp. 17. Combined dental and health insurance deductible (comprehensive major medical plans).

Deductible*	Added Point
\$ 50	75
100	60
150	43
200	38
500	35
1,000	15

^{*}Before entering this table, divide the deductible in the policy by the COMP factor for the year.

Subp. 18. Coordination and nonduplication of benefits (all plans).

- A. The following percentage of points after deduction for deductible and coinsurance should be subtracted if the policy coordinates benefits with other plans and its pricing assumes that a number of insured will have other policies in force.
 - (1) with other health plans, 4.0 percent;
 - (2) with no fault, 2.5 percent;
 - (3) with both subitems (1) and (2), 6.5 percent; and
 - (4) with neither, 0.
 - B. The percentage should be applied to the total points after deduction for deductible and coinsurance.

Subp. 19. Limit on "out-of-pocket" expenses (maximum copayment and deductible per benefit year)—comprehensive and superimposed major medical plans.

Maximum Claim	
When Out-of-Pocket	
is reached*	Points
\$ 500	236
1,000	196
2,000	158
3,000	130
4,000	110

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11,000	45
13,000	36
14,400	30

^{*}Before entering this table, divide the maximum claim when out-of-pocket limit by the COMP factor for the year.

- A. The above table assumes that the insured pays 20 percent of the costs after the deductible and that the number of points before the deductible and coinsurance is about 1800. If the percentage of claims being paid by the insured is other than 20 percent, multiply the number of points above by the ratio of the coinsurance being paid by the insured to 20 percent.
- B. The above table assumes that the amounts paid by the policyholder for deductible and coinsurance are included in determining out-of-pocket limitation.

Subp. 20. Well baby care.

Deduc	ctible*	Points
\$	0	17
	150	8
	500	2
1,	000	0

^{*}Before entering this table, multiply the deductible in the policy by the COMP factor for the year.

The above benefit assumes that the deductible and coinsurance are applied to the costs of the newborn.

Supb. 21. Emergency and supplemental accident (basic plans only).

Maximum*	Emergency	Supplemental
\$ 50	10	··· _
100	15	20
300	_	30
500		35
1,000	_	40
Unlimited	20	_

^{*}Before entering this table, divide the maximum in the policy by the SURG factor for the year.

Subp. 22. Student dependents.

 Student Extension

 Beyond Age 19

 None
 0

 To age 21
 2

 To age 23
 4

 To age 25
 5

Subp. 23. Superimposed major medical plans—over basic health plans with less than 500 points.

- A. Calculate point value of a comprehensive major medical plan by using deductible* \$200 greater than actual.
- B. Add basic health plan points.

Subp. 24. Superimposed major medical plans—80/20 coinsurance—over basic health plans with 500-799 points.

	Calendar	r Year Plan	Two year benefi	t period plan
Deductible*	Individual .	$2 \times family$	Individual	$2 \times family$
a. Corridor				
\$ 100	740	780	745	765
200	665	705	680	700
300	615	655	630	650
500	543	582	558	578
1,000	385	425	400	420
b. Integrated				
\$1,000	615	635	650	670
2,000	515	525	535	545

^{*}Before entering the table, divide the deductible in the policy by the COMP factor for the year before adding \$200. Do not make any further adjustments to the deductible.

Note: Points assume major medical contains Minnesota qualified plan number 3 benefits. Adjust for benefits not included and for variation in coinsurance.

Subp. 25. Superimposed major medical plans—80/20 coinsurance—over basic health plans with 800 or more points.

		Add to Basic Plan Points		
	Calenda	r Year Plan	Two year benefi	t period plan
Deductible*	Individual	2 × family	Individual	$2 \times family$
a. Corridor				
\$ 100	515	545	525	535
200	445	475	455	465
300	405	435	415	425
500	339	369	349	359
1,000	215	245	225	235
b. Integrated				
\$1,000	505	525	530	550
2,000	405	415	420	430

Note: Points assume major medical contains Minnesota qualified plan number 3 benefits. Adjust for benefits not included and for variation in coinsurance.

2740.9979 BASIC BACKGROUND FOR EXAMPLES.

Subpart 1. Inflation assumptions for 1985. The examples which follow assume that the actuarial equivalence of a series of plans is being calculated for calendar year 1985. Inflation was assumed to be 15.5 percent and 8.0 percent for hospital related and all other services, respectively.

Subp. 2. Values published by commissioner for 1985.

190*
220*
4,000.00
4,320.00*
1.155*
1.080*
1.121*

qualified plan in:

Oualified

Subp. 3. Point values for qualified plans in 1985. The following are the revised point values used to determine plans which are actuarially equivalent to qualified plans 1, 2, and 3 for 1985.

If plan has the indicated number of points then plan is actuarially equivalent to the

Plan Number		
	1984	1985
3	1192 + points	1216 + points
2	911 + points	957 + points
1	767 + points	847 + points
Nonqualified	Less than 767	Less than 847

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^{*}Before entering this table, divide the deductible in the policy by the COMP factor for the year.

^{*}Before entering this table, divide the deductible in the policy by the COMP factor for the year.

^{*}Estimated. Please substitute the actual values.

2740.9991 EXAMPLE I.

Subpart 1. Use of actuarial equivalence test.

A. Question: Is the following plan actuarially equivalent to any Minnesota qualified plan?

Surgery	Includes Assistant Surgeon and Administration of
<i>5 ,</i>	Anesthesia
Deductible:	\$100
Coinsurance:	80/20
Maximum:	\$250,000
Maternity:	Any complications
Student dependents:	To age 23
Limits on specified benefits	Outpatient mental limited to Minnesota
Required benefits	
Excluded care	Home health care
Out-of-pocket limit	\$3,000 per year
Coordination of benefits	Yes, but no COB for no-fault.

B. Answer (calculated January 1, 1985): test result is 1186 points. This plan is a Minnesota qualified plan number 2.

Subp. 2. Worksheet. Test for actuarial equivalence other than medicare supplement plans.

A. Worksheet.

Subparts			Major	Medical
of part 2740.9964	Benefit	Basic	Superimposed	Comprehensive
		Dasic	Superimposeu	363
1.	Hospital room and board			480
2.	Hospital extras	•		243
3.	Surgery			
4.	Physician care—home, office			215
5.	Physician care—hospital			51
6.	Maternity			25
7.	Diagnostic X-ray and lab			105
8.	Drugs and medicine			100
9.	Radioactive therapy			15
10.	Nursing/convalescent facility			16
11.	Home health care			0
12.	Physical therapy			10
12.	Oxygen			4
12.	Prostheses			5
12.	Durable medical equipment			5
12.	Second opinion surgery			2
12.	Private duty nursing			2
12.	Ambulance			3
13.	Hospital room and board in full			
14.	All hospital expenses in full			
15.	Major medical maximums			-12
Subto	tal reas, and cust, med, services			1632
16.	Deductible			-138
16.	Coinsurance			- 299
Subto	tal net of ded. and coin.			1195
17.	Adjust (comb. medical/dental ded)			
18.	COB/No-fault			-48
19.	Limit on "out-of-pocket expenses"			35
20.	Well baby care			
21.	Emergency and supplemental accident			

				^	_	_					E٤
u	u	,	u	"1	•	_					_
	n	u		u	•		u	п	u	_	

22.	Student dependents		4
2325.	Superimposed major medical		4
Grand Combi	Total ined basic and superimposed	xxx	1186 XXX
Equivalent to I	Minnesota qualified plan number 2 nonqualified		
Date	By		

B. Miscellaneous calculations.

- (1) The maximum in the policy (\$250,000) divided by the COMP factor (1.121) is \$223,015. This is 82.01 percent of the difference between the \$100,000 and \$250,000 maximums in part 2740.9964, subpart 15. The points would be minus 27 plus .8201 times 15 or -14.70 points.
- (2) The deductible in the policy (\$100) divided by the COMP factor (1.121) is 89.21. This is 78.41 percent of the difference between the \$50 and \$100 deductibles in part 2740.9964, subpart 16. Points deducted for the deductible would be 85 plus .7841 times 85 or 151.65. Since the total points in the policy before the deductible is significantly less than 1800, multiply 151.65 by (1632/1800). The result is 137.50.
- (3) The out-of-pocket maximum is \$3,000. The maximum claim when the out-of-pocket is reached is \$14,600. This divided by the COMP factor (1.121) is 13,024. This is 10.29 percent of the difference between the \$13,000 and \$14,400 maximum claim when out-of-pocket is reached. The adjustment for the out-of-pocket limit is 36 minus .1029 times 6 or 35.38.

2740.9992 EXAMPLE II.

Hospital:

Subpart 1. Use of actuarial equivalence test.

A. Question: Is the following plan actuarially equivalent to any Minnesota qualified plan?

\$170 per day, 365 days; 80 percent of misc. extras, the cost of anesthesia is included.

The policy does not pay for private room even if medically necessary.

\$3,000 maximum surgical schedule. Add 15 percent for the administration of anes-Surgery:

thesia.

In hospital physicians calls: \$25 per day—365 day maximum

Maternity: Any complications

X-ray and lab tests (out of hospital): \$500 maximum—unscheduled

B. Answer (calculated January 1, 1985): test result is 1004 points. This plan is a Minnesota qualified plan number two.

Subp. 2. Worksheet. Test for actuarial equivalence other than medicare supplement plans.

A. Worksheet.

Subpart of part			Major	Medical
2740.9964	Benefit	Basic	Superimposed	Comprehensive
1.	Hospital room and board	275		•
2.	Hospital extras (80 percent)	384		
3.	Surgery	189		
4.	Physician care—home, office			
5.	Physician care—hospital	33		
6.	Maternity	25		
7.	Diagnostic X-ray and lab	98		
8.	Drugs and medicine			
9.	Radioactive therapy			
10.	Nursing/convalescent facility			

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PROPOS	ED RULES				
11.	Home health care				
12.	Physical therapy		•		
12.	Oxygen				
12.	Prostheses				
12.	Durable medical equipmen	nt			
12.	Second opinion surgery	•			
12.	Private duty nursing				
12.	Ambulance	f11			
13.	Hospital room and board i				
14. 15.	All hospital expenses in fu Major medical maximums				
	al reas, and cust, med, service				
16.	Deductible	, s			
16. 16.	Coinsurance		•		
	al net of ded. and coin.				
17.	Adjust (comb. medical/der	atal ded)			
18.	COB/No-fault	itai ded)			
19.	Limit on "out-of-pocket e	vnenses''			
20.	Well baby care	Apenses			
21.	Emergency and supplement	ntal accident			
22.	Student dependents				
2325.	Superimposed major media	cal			
Grand	Total		1004		
	ned basic and superimposed	•	1001	XXX	XXX
	Ainnesota qualified plan numb	or ?			
Equivalent to h		ed			
Date	•	By			
		. Бу			
	cellaneous calculations.				
	Policy does not pay extra for p				n the 359. Since the
ASP value in 1	985 is 220, the number of point	nts will be 356 times the	ratio of 170 to 220 or 275	5.09 points.	
(2)	The surgical table was evalua	ted as 3,680.02 points.	The points not including	administration	of anesthesia is 206
times the ratio	of 3680.02 to 4620.00 or 164.0	09 points. For administrat	ion of anesthesia, the poir	nts are 164 time	s .15 or 24.6 points.
(3)	Since the maximum per diem	cost of in-hospital physi	cians calls is less than the	e cost for routi	ne follow-up (24.20
times 1.08 or 2	26.14), subtract 14 points from	m the number of points	for prevailing fee with 30		
points. Multipl	y the 35 points by the ratio of	\$25 to 26.14 or 33.47 pc	ints.		
(4)	Since the ASP factor is 1.15, t	the \$200 and \$500 maxin	num shown in part 2740.9	9964, subpart 7	is now 230 and 575
	hus the \$500 maximum is 78.2				
	es (101-89) or 98.39 points.				•
2740.9993 EX.	AMPLE III.				•
Subpart 1. l	Use of actuarial equivalence	test.			
-	stion: Is the following plan ac		v Minnesota qualified plan	n?	
	stion. Is the following plan ac-		-		
Hospital:		\$80 per day, 120 days,			
Surgery:		_	cal schedule, add ten per	cent for admin	istration of anesthe-
•		sia.			
Coordination of	benefits	Yes, does not include n	o-fault		
Superimposed i	najor medical:				
Deductible:		\$200 corridor per calen	dar year		
Coinsurance:		80/20			
Maximum:		\$250,000			

Maternity:

Student dependents:

Any complications

Out-of-pocket limit:

\$3,000

Excluded care:

Home health care and skilled nursing care

Limits on specified benefits:

1. Room and board

\$200 less basic benefits. Unlimited days

Coordination of benefits

Yes, does not include no-fault

B. Answer (calculated January 1, 1985): test result is 1147 points. This plan is a Minnesota qualified plan number two.

Subp. 2. Worksheet. Test for actuarial equivalence other than medicare supplement plans.

Subpart			20.	
of part 2740.9964	Benefit ·	Basic	Major Superimposed	medical Comprehensiv
1.				Comprehensiv
2.	Hospital room and board Hospital extras	128 290	-26	
3.	Surgery	. 290 114		
3. 4.	Physician care—home, office	114		
5.	Physician care—hospital			
6.	Maternity			
7.	Diagnostic X-ray and lab			
8.	Drugs and medicine			
9.	Radioactive therapy		•	
9. 10.	Nursing/convalescent facility		1.2	
11.	Home health care		- 13 6	
12.	Physical therapy		-0	
12.	Oxygen			
12.	Oxygen			
12.	Durable medical equipment			
12.	Second opinion surgery			
12.	Private duty nursing			
12.	Ambulance			
13.	Hospital room and board in full			
14.	All hospital expenses in full			
15.	Major medical maximums			
	tal reas, and cust, med, serv.	532		
16.	Deductible			
16.	Coinsurance			
	tal net of ded. and coin.			4.1
17.				
17.	Adjust (comb. medical/dental ded)	0.1		
16. 19.	COB/no-fault	21		
20.	Limit on 'out-of-pocket expenses' Well baby care			
20.	Emergency and supplemental accident			
22.	Student dependents			
2325.	Superimposed major medical		681	
Grand		511	636	
				1/1/1/
	ined basic and superimposed	1147	XXX	XXX
Equivalent to	Minnesota qualified plan number 2 nonqualified			
Date	Ву			

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- B. Miscellaneous calculations.
- (1) Since the room and board limit is less than the ASP factor, the number of points will equal 351 times the ratio of 80 to 220.
- (2) The \$2,000 maximum divided by 1.155 is 1731.60. This is 73.16 percent of the difference between the \$1,000 and \$2,000 maximums in the table. The points would be 217 plus .7316 times (317 217) or 290.16 points.
- (3) The surgical schedule is the same as in example II in part 2740.9992 value. The value of the table is 1840.1 for the \$1,500 maximum. The points excluding administration of anesthesia is 243 times 1840.1 divided by 4320.00 or 103.51 points. The administration of anesthesia would add 10.35 points.
- (4) The \$200 corridor deductible would be adjusted before entering part 2740.9964, subpart 24. The adjusted deductible would be 200 divided by 1.121 or 178.41. Since this is 78.41 percent of the way between the \$100 and \$200 deductibles, the points would be 740 minus .7841 times (740 665) or 681.19 points.
- (5) Home health care and skilled nursing home care are excluded. Therefore we should deduct 80 percent of their points shown in part 2740.9964, subparts 10 and 11.
- (6) Hospital room and board is limited to \$200 per day less what the basic benefit pays. The adjustment should equal .8 (363 times 20 divided by 220) or 26.4 points.

REPEALER. Minnesota Rules, parts 2740.2300; 2740.9905; 2740.9910; 2740.9915; 2740.9920; 2740.9925; 2740.9930; 2740.9935; 2740.9940; 2740.9945; 2740.9950; 2740.9955; 2740.9960; 2740.9965; 2740.9970; 2740.9981; 2740.9982; 2740.9983; 2740.9984; 2740.9985; and 2740.9986 are repealed.

Department of Commerce

Withdrawal of Proposed Rules Relating to Broker-Dealer Licensing Exemptions for Certain Financial Institutions

Proposed Minnesota Rules, Part 2875.1590, published in the *State Register* on February 4, 1985 at 9 S.R. 1714, has been withdrawn by the Department of Commerce. Proposed Part 2875.1590 addressed the offering of brokerage services through banks, savings institutions and savings and loan associations.

Michael A. Hatch Commissioner of Commerce

State Board of Education Department of Education Partnership Division

Withdrawal of Proposed Rule Governing Minimum Secondary Vocational Course Offerings

The rule proposed and published at State Register, Volume 9, Number 27, December 31, 1984, pp. 1506-1508 (9 S.R. 1506) is withdrawn.

Questions regarding this matter should be directed to:

Dayton Perry, Specialist State Department of Education Partnership Division 527 Capitol Square Building 550 Cedar Street St. Paul, Minnesota 55101 (612) 296-4864

Ruth E. Randall, Secretary State Board of Education

Department of Labor and Industry Occupational Safety and Health Division

Proposed Revisions to the Occupational Safety and Health Standards

Request for Comments

Notice is hereby given that the Department of Labor and Industry, Occupational Safety and Health Division (Minnesota OSHA), proposes to adopt the following revisions to the Minnesota Occupational Safety and Health Standards, as authorized under Minnesota Statutes § 182.655 (1984) establishing, modifying or revoking the Occupational Safety and Health Standards that have already been proposed and adopted by the federal Occupational Safety and Health Administration (Federal OSHA).

Complete copies of the specific standards are available by writing: Occupational Safety and Health Division, Department of Labor and Industry, 444 Lafayette Road, St. Paul, Minnesota 55101; or by calling: (612) 297-3254.

Interested persons are hereby afforded a period of 30 days to submit written data or comments on the described standards. Any interested person may file with the Commissioner written objections to the proposed standards stating the grounds for those objections; such person may request a public hearing on those objections.

Steve Keefe Commissioner of Labor & Industry

Standards as Proposed

5205.0010 ADOPTION OF FEDERAL OCCUPATIONAL SAFETY AND HEALTH STANDARDS BY REFERENCE. The Minnesota Department of Labor and Industry, Occupational Safety and Health codes and rules are amended by incorporating and adopting by reference and thereby making a part thereof, Title 29, of the Code of Federal Regulations as follows:

Part 1910—Occupational Safety and Health Standards as published in Volume 43, No. 206 of the Federal Register on October 24, 1978 and corrected in Volume 43, No. 216 on November 7, 1978 which incorporates changes, additions, deletions, and corrections made up to November 7, 1978; and subsequent changes made prior to July 1, 1984 April 1, 1985.

--Federal Register, Vol. 50, No. 6, dated 1/9/85—"Educational/Scientific Diving; Guidelines for Scientific Diving (Appendix B) Subpart T of Part 1910."

--Federal Register, Vol. 50, No. 22, dated 2/1/85-"Power Lawnmowers; Amendments-1910.243(e)."

Summary of Standards: The following summary of the proposed standards is very brief; persons interested in reviewing the entire standard may obtain a copy at the address noted above.

A) "Educational/Scientific Diving: Guidelines for Scientific Diving (Appendix B)." On November 26, 1982, Federal OSHA exempted scientific diving from coverage under 29 CFR Part 1910, Subpart T "Commercial Diving Operations" provided that the diving meets the definition of scientific diving and is under the direction and control of a diving program utilizing a safety manual and a diving control board meeting certain specified criteria. Minnesota OSHA adopted this exemption on May 30, 1983.

On January 9, 1985, Federal OSHA published Appendix B, "Guidelines for Scientific Diving," which establishes the final guidelines that OSHA will use, in conjunction with the exemption criteria outlined in Subpart T, to determine whether a scientific diving program can avail itself of the exemption from the standard for commercial diving operations. The absence of any factor specified in the guidelines or in Subpart T renders a diving program ineligible for the exemption.

By this notice, Minnesota OSHA proposes the adoption of Appendix B to Subpart T as published in the Federal Register (Volume 50, No. 2) on January 9, 1985.

B) "Amendments to 1910.243(e)—Power Lawnmowers." On October 24, 1978, Federal OSHA revoked certain general industry safety and health standards. Minnesota OSHA revoked the identical standards on May 28, 1979. An error was made in revoking the definitions for "sulky type mower" and "deadman control." The terms are still used in 1910.243 and should not have been deleted. Therefore, Federal OSHA has corrected these errors by including an explanation of the terms "sulky type mower" and "deadman control" in sections 1910.243(e)(3)(vii) and 1910.243(e)(4)(vi) respectively.

KEY: PROPOSED RULES SECTION — <u>Underlining</u> 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 — <u>Underlining</u> indicates additions to proposed rule language. Strike outs indicate deletions from proposed rule language.

By this notice, Minnesota OSHA proposes to adopt the definitions of "sulky type mower" and "deadman control" as published in the Federal Register (Volume 50, No. 22) on February 1, 1985.

Department of Labor and Industry Workers' Compensation Division

Proposed Rules Relating to Rehabilitation Consultant Qualifying

Notice of Intent to Amend Rules without a Public Hearing

Notice is hereby given that the Department of Labor and Industry, Workers' Compensation Division, proposes to adopt the above-captioned amendments to Minn. Rules pt. 5220.1400 subp. 5 without a public hearing. The Department has determined that the proposed adoption of these amendments will be noncontroversial in nature and has elected to follow the procedures set forth in Minn. Stat. §§ 14.21-14.28 (1984).

Persons or groups interested in these amendments shall have 30 days to submit comments on the proposed amendments. Comments in support of or in opposition to the proposed amendments are encouraged. Each comment should identify the portion of the proposed amendments addressed, the reason for the comment, and any change proposed. The proposed amendments may be modified if the modifications are supported by the data and views submitted to the Department and do not result in a substantial change in the proposed language.

A public hearing will be held if 25 or more persons submit written requests for a public hearing on the proposed amendments within the 30-day comment period. If a public hearing is required, the Department will proceed according to the provisions of Minn. Stat. §§ 14.131-14.20 (1984). Any person requesting a public hearing should state his or her name and address, and is encouraged to identify the portion of the proposed amendments addressed, the reason for the request, and any change proposed.

Comments or written requests for a public hearing should be submitted to:

Steve Keefe Commissioner, Department of Labor and Industry 5th Floor, Space Center Bldg. 444 Lafayette Road St. Paul, Minnesota 55101 (612) 296-2342

Authority for the adoption of these amendments is contained in Minn. Stat. § 176.102, subd. 10 (1984). A Statement of Need and Reasonableness that describes the need for and reasonableness of each provision of the proposed amendments, identifies the data and information relied upon to support the proposed amendments and assesses the impact of the proposed amendments on small business and on local public bodies has been prepared and is available from the Commissioner upon request at the above address.

Upon adoption of the final amendments without a public hearing, all jurisdictional documents, the Statement of Need and Reasonableness, all written comments and requests for hearing received, and the final amendments as adopted, will be delivered to the Attorney General. The amendments will then be reviewed by the Attorney General as to legality and form as it relates to legality, including the issues of substantial change, the agency's authority to adopt the amendments and the existence of a rational basis for the need for and reasonableness of the proposed amendments. Persons who wish to be notified of the submission of this material to the Attorney General, including modifications to the amendments as originally proposed, or who wish to receive a free copy of the final amendments as adopted, should submit a written request to the Commissioner at the above address.

The text of the proposed amendments follows this notice in the *State Register*. The amendments will permit QRC interns who were practicing on February 7, 1984, when the QRC eligibility requirements were increased, to become full status QRCs if they meet the criteria that were in effect prior to the 1984 increase in eligibility requirements. Presently, interns registered on or after February 7, 1984 must meet the new, more stringent requirements to be approved as full status QRCs.

These amendments may affect QRC firms: As these firms are service businesses regulated by government bodies, Minn. Stat. § 14.115, subd. 7(c) (1984) does not require the Commissioner to consider the small business impact of these amendments.

One free copy of the proposed amendments may be obtained by contacting Carla Mitrovich at the above address or by calling (612) 296-2342.

March 14, 1985

Steve Keefe Commissioner, Department of Labor and Industry

Rule as Proposed

5220.1400 QUALIFYING ELIGIBILITY CRITERIA FOR REHABILITATION CONSULTANT.

Subpart 1. to 4. [Unchanged.]

Subp. 5. General criteria. All persons who are qualified rehabilitation consultants shall be exclusively self-employed or exclusively employed by a single organization that is approved for the employment of qualified rehabilitation consultants or an employer/insurer.

All persons who are qualified rehabilitation consultants shall be residents of Minnesota. An organization authorized for the employment of qualified rehabilitation consultants may request an exception for a consultant who lives contiguous to a Minnesota catchment area if the organization and any such consultant agrees, as a condition to approval, to appear at any hearing when requested, in the same manner as if they had been subpoenaed. Failure to do so shall result in automatic revocation of the individual consultant's approval.

A qualified rehabilitation consultant operating on the effective date of this amendment who is registered is deemed to meet the standards of this part. Registered qualified rehabilitation consultant interns operating on the effective date of this amendment who are registered February 7, 1984, must meet the minimum requirements of this rule in effect on February 6, 1984, in order to make application for qualified rehabilitation consultant registration.

Secretary of State

Proposed Rules Relating to Financing Statements

Notice of Intent to Adopt Rules without a Public Hearing

Notice is hereby given that the Secretary of State proposes to modify the above-captioned rules without a public hearing. The modification corrects two referenced citations in the above-captioned rules. The Secretary of State has determined that the proposed adoption of these rules will be noncontroversial in nature and has elected to follow the procedures set forth in M.S. 14.21-14.28 (1982).

Persons interested in these rules shall have 30 days to submit comments in support of or in opposition to the proposed rules and comment is encouraged. Each comment should identify the portion of the rule addressed, the reason for the comment, and any change proposed. The proposed rules may be modified if the modifications are supported by the data and views submitted to the agency and do not result in a substantial change in the proposed language.

Any person may make a written request for a public hearing on the rule within the 30 day comment period. If 25 or more persons submit a written request for a public hearing within the 30 day comment period, a public hearing will be held. Any person requesting a public hearing should state his or her name and address and is encouraged to identify the portion of the rule addressed, the reason for the request, and any change proposed. In the event a public hearing is required, the agency will proceed according to the provisions of M.S. 14.131 to 14.20.

Persons who wish to submit comments or a written request for a public hearing should submit such comments or requests to:

Cheri Mattson
Office of the Secretary of State
180 State Office Building
St. Paul, MN 55155
(612) 296-2434

Authority for the adoption of these rules is contained in M.S. 336.9-403 Subd. 5 and 14.06. A copy of the proposed rule is attached to this notice. A statement of need and reasonableness that describes the need and reasonableness of the amendments has been prepared and is available from Cheri Mattson at the above address upon request.

If no hearing is required, upon adoption of the rules without a public hearing, the proposed rules, this notice, the statement of need and reasonableness, all written comments received, and the rules as adopted will be delivered to the Attorney General for review as to form and legality, including the issue of substantial change. Persons who wish to be advised of the submission of this

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material to the Attorney General, or who wish to receive a copy of the final rules as proposed for adoption, should submit a written statement of request to Cheri Mattson.

Pursuant to M.S. 14.115, the proposed rule will have an impact on small businesses as defined in M.S. 14.115. Subd. 1. When any small business files financing statements pursuant to M.S. 336.9-401 subsection 1, paragraphs (a), (b) or (c) or seeks to obtain information pursuant to M.S. 336.9-407 from the Secretary of State or the County Recorder, the small business, as with any other filer must submit the information on forms substantially in the form set out in the rules or it will have to pay a nonstandard filing charge.

Joan Anderson Growe Secretary of State

Rules as Proposed

8260.0100 FINANCING STATEMENT: FORM UCC-1.

Subpart 1. Permitted use. This form is for use when filing a financing statement pursuant to Minnesota Statutes, section 336.9-402 336.9-401, subsection (1), paragraphs (a) and (e) (b). The use of any other form will result in a nonstandard fee charge.

Subp. 2. to 5. [Unchanged.]

8260.0200 FIXTURE/REAL ESTATE: FORM UCC-2.

Subpart 1. Transactions covered. This form is for use when filing a financing statement pursuant to Minnesota Statutes, section 336.9-401, subsection (1), paragraph (b) (c). The use of any other form will result in a nonstandard fee.

Subp. 2. to 5. [Unchanged.]

ADOPTED RULES

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

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

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

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

Housing Finance Agency

Adopted Rule Governing the Rental Rehabilitation Program

The rule proposed and published at *State Register*, Volume 9, Number 28, pages 1550-1551, January 7, 1985 (9 S.R. 1550) is adopted as proposed.

Housing Finance Agency

Adopted Rules Governing the Amount and Eligibility for Home Improvement Grants or Rental Rehabilitation Loans

The rule proposed and published at State Register, Volume 9, Number 28, pages 1548-1549, January 7, 1985 (9 S.R. 1548) is adopted as proposed.

Department of Human Services

Extension of Emergency Rules Governing AFDC

Notice of Continuation of Emergency Rules

Notice is hereby given that the above-entitled emergency rules (9 SR 1190) which were effective on November 6, 1984 and published in the *State Register* on November 26, 1984 are continued in effect for an additional 180 days according to Minnesota Statutes, section 14.35.

This means that the above-entitled emergency rules will be in effect until November 1, 1985 unless they are superseded by permanent rules or legislative action.

February 27, 1985

Leonard W. Levine Commissioner of Human Services

Department of Human Services

Extension of Emergency Rules Governing County Board Responsibility for Providing Case Management Services to Persons with Mental Retardation

Notice of Continuation of Emergency Rules

Notice is hereby given that the above-entitled emergency rules (9 SR 1098) which were effective on October 29, 1984 and published in the *State Register* on November 19, 1984 are continued in effect for an additional 180 days according to Minnesota Statutes, section 14.35.

This means that the above-entitled emergency rules will be in effect until October 24, 1985 unless they are superseded by permanent rules or legislative action.

February 27, 1985

Leonard W. Levine Commissioner of Human Services

Department of Human Services

Extension of Emergency Rules Governing Exemption from Work and Registration Requirements

Notice of Continuation of Emergency Rules

Notice is hereby given that the above-entitled emergency rules (9 SR 1968) which were effective on October 18, 1984, proposed in the *State Register* on August 27, 1984, and published March 4, 1985, are continued in effect for additional 180 days according to Minnesota Statutes, section 14.35.

This means that the above-entitled emergency rules will be in effect until October 13, 1985 unless they are superseded by permanent rules or legislative action.

February 27, 1985

Leonard W. Levine Commissioner of Human Services

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Department of Human Services

Extension of Emergency Rules Governing General Assistance

Notice of Continuation of Emergency Rules

Notice is hereby given that the above-entitled emergency rules (9 SR 1057) which were effective on October 29, 1984 and published in the *State Register* on November 12, 1984 are continued in effect for an additional 180 days according to Minnesota Statutes, section 14.35.

This means that the above-entitled emergency rules will be in effect until October 24, 1985 unless they are superseded by permanent rules or legislative action.

February 27, 1985

Leonard W. Levine Commissioner of Human Services

Department of Human Services

Extension of Emergency Rules Governing Medical Assistance Prepaid Demonstration Project

Notice of Continuation of Emergency Rules

Notice is hereby given that the above-entitled emergency rules (9 SR 2063) which were effective on October 29, 1984, proposed in the *State Register* on September 3, 1984, and published March 18, 1985, are continued in effect for an additional 180 days according to Minnesota Statutes, section 14.35.

This means that the above-entitled emergency rules will be in effect until October 24, 1985 unless they are superseded by permanent rules or legislative action.

February 27, 1985

Leonard W. Levine Commissioner of Human Services

Department of Human Services

Extension of Emergency Rules Governing Prior Authorization for Health Services and Second Surgical Opinion as a Condition of MA and GAMC Reimbursement

Notice of Continuation of Emergency Rules

Notice is hereby given that the above-entitled emergency rules (9 SR 1250) which were effective on October 26, 1984 and published in the *State Register* on December 3, 1984 are continued in effect for an additional 180 days according to Minnesota Statutes, section 14.35.

This means that the above-entitled emergency rules will be in effect until October 21, 1985 unless they are superseded by permanent rules or legislative action.

February 27, 1985

Leonard W. Levine Commissioner of Human Services

Department of Human Services

Extension of Emergency Rules Governing Special Needs Rate Exception for Very Dependent Persons with Special Needs

Notice of Continuation of Emergency Rules

Notice is hereby given that the above-entitled emergency rules (9 SR 1062) which were effective on October 26, 1984 and

ADOPTED RULES

published in the State Register on November 12, 1984 are continued in effect for an additional 180 days according to Minnesota Statutes, section 14.35.

This means that the above-entitled emergency rules will be in effect until October 21, 1985 unless they are superseded by permanent rules or legislative action.

February 27, 1985

Leonard W. Levine
Commissioner of Human Services

Department of Human Services

Extension of Emergency Rules Governing the Relocation of Nursing Home Residents

Notice of Continuation of Emergency Rules

Notice is hereby given that the above-entitled emergency rules (9 SR 912) which were effective on October 12, 1984 and published in the *State Register* on October 29, 1984 are continued in effect for an additional 180 days according to Minnesota Statutes, section 14.35.

This means that the above-entitled emergency rules will be in effect until October 7, 1985 unless they are superseded by permanent rules or legislative action.

February 27, 1985

Leonard W. Levine
Commissioner of Human Services

Department of Human Services

Extension of Emergency Rules Relating to General Assistance

Notice of Continuation of Emergency Rules

Notice is hereby given that the above-entitled emergency rules (9 SR 1253) which were effective on November 26, 1984 and published in the *State Register* on December 3, 1984 are continued in effect for an additional 180 days according to Minnesota Statutes, section 14.35.

This means that the above-entitled emergency rules will be in effect until November 21, 1985 unless they are superseded by permanent rules or legislative action.

February 27, 1985

Leonard W. Levine Commissioner of Human Services

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ADOPTED RULES =

Department of Human Services

Extension of Emergency Rules Relating to Medical Assistance Funding and Administration of Home and Community-Based Services for Persons Who Are Mentally Retarded

Notice of Continuation of Emergency Rules

Notice is hereby given that the above-entitled emergency rules (9 SR 1066) which were effective on October 22, 1984 and published in the *State Register* on November 12, 1984 are continued in effect for an additional 180 days according to Minnesota Statutes, section 14.35.

This means that the above-entitled emergency rules will be in effect until October 17, 1985 unless they are superseded by permanent rules or legislative action.

February 27, 1985

Leonard W. Levine
Commissioner of Human Services

OFFICIAL NOTICES=

Pursuant to the provisions of Minn. Stat. § 15.0412, subd. 6, an agency, in preparing proposed rules, may seek information or opinion from sources outside the agency. Notices of intent to solicit outside opinion must be published in the *State Register* and all interested persons afforded the opportunity to submit data or views on the subject, either orally or in writing.

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

Department of Commerce

Outside Opinion Sought Regarding Proposed Rules Relating to Prohibiting Discrimination in Insurance Due to Blindness Including the Impact of the Rules on Small Businesses

Notice is hereby given that the Department of Commerce is seeking information or opinions from persons outside the agency in preparing to promulgate new rules governing Prohibiting Discrimination in Insurance Due to Blindness Promulgation of these rules is authorized by Minnesota Statutes, sections 45.023 and 72A.19.

Outside opinion is also being solicited as to how these rules will affect small businesses as defined by Minnesota Laws 1983, ch. 188, codified as Minnesota Statutes, sections 14.115, subd. 1.

The Department of Commerce requests information and comments concerning the subject matter of these rules. Interested or affected persons or groups may submit statements of information or comment orally or in writing to: Richard G. Gomsrud, General Counsel Department of Commerce, 500 Metro Square Building, St. Paul, MN 55101, (612) 296-5689.

All statements of information and comment shall be accepted until April 1, 1985. Any written material received by the Department of Commerce shall become part of the record in the event that the rules are promulgated.

Michael A. Hatch Commissioner of Commerce

Department of Finance

Maximum Interest Rate for Municipal Obligations, April, 1985

Pursuant to Minnesota Statutes, Section 475.55, Subdivision 4, Commissioner of Finance, Gordon M. Donhowe, announced today that the maximum interest rate for municipal obligations in the month of April will be eleven (11) percent per annum. Obligations which are payable wholly or in part from the proceeds of special assessments or which are not secured by general obligations of the municipality may bear an interest rate of up to twelve (12) percent per annum.

For further information, contact:

Peter Sausen, Director Debt Management State of Minnesota Department of Finance (612) 296-8372

March 21, 1985

Metropolitan Council

Notice of Review Schedule, Interim Policy Report—Prescription for Health: Promoting Health and Preventing Disease in the Twin Cities Metropolitan Area

The report identifies the Metropolitan Area's priority health risks and recommends policy and strategies for reducing these risks through health promotion and disease prevention. The report was prepared by a subcommittee of the Metropolitan Health Planning Board, the Metropolitan Council's health planning arm. The board and Council serve jointly as the regional health planning agency for the seven-county Metropolitan Area.

The purpose of this report is to support and strengthen health promotion and disease prevention efforts already under way, to challenge and encourage individuals and organizations within the community to undertake new efforts, and finally, to serve as a basis for Metropolitan Council and Health Planning Board involvement in promoting health and preventing disease. The report will also serve as the basis for upcoming revision of the health status and community-based health services chapters of the Metropolitan Health Systems Plan.

The report recommends policy in each of nine priority areas: alcohol use, automobile occupant safety restraints, environmental health risks, immunization, nutrition, physical activity levels, prenatal care, smoking, and violence and abuse. Strategy recommendations are also made for each of the nine priorities. The general directions taken by the strategies are: 1) providing information to facilitate and motivate healthful decision-making, 2) developing new opportunities for making healthful choices, 3) putting into place economic incentives that encourage healthful choices, and 4) taking legislative or other regulatory action to promote healthful behaviors and environments and to control unhealthful behaviors and environments.

The following is a tentative schedule for review of the report:

March 13 Health Planning Board review and approval of resolution setting joint public hearing on April 24, 1985.

March 14 Metropolitan Council review and adoption of resolution setting joint public hearing on April 24, 1985.

April 24 Public hearing.

May 8 Hearing record closes.

June 12 Health Planning Board review and adoption of final report.

June 13 Council review and adoption of final report.

This schedule is tentative and subject to change. A subsequent notice of public hearing will be published. If you have any questions regarding the schedule or amendment, please call Julie Opitz of the Metropolitan Council's health planning staff at 291-6365.

Metropolitan Council

Public Hearing on Interim Policy Report Prescription for Health: Promoting Health and Preventing Disease in the Twin Cities Metropolitan Area

The Metropolitan Council and Health Planning Board will hold a public hearing Wednesday, April 24, 1985, beginning at 5:00

OFFICIAL NOTICES I

p.m. at the Metropolitan Council Chambers, 300 Metro Square Building, 7th and Robert Streets, St. Paul, Minnesota, on an interim policy report entitled: <u>Prescription for Health: Promoting Health and Preventing Disease in the Twin Cities Metropolitan Area.</u> The report identifies the Metropolitan Area's priority health risks and recommends policy and strategies for reducing these risks through health promotion and disease prevention. The report will also serve as the basis for upcoming revision of the health status and community-based health services chapters of the <u>Metropolitan Health Systems Plan.</u>

The report recommends policy in each of nine priority areas: alcohol use, automobile occupant safety restraints, environmental health risks, immunization, nutrition, physical activity levels, prenatal care, smoking, and violence and abuse. Strategy recommendations are also made for each of the nine priorities. The general directions taken by the strategies are: 1) providing information to facilitate and motivate healthful decision-making, 2) developing new opportunities for making healthful choices, 3) putting into place economic incentives that encourage healthful choices, and 4) taking legislative or other regulatory action to promote healthful behaviors and environments and to control unhealthful behaviors and environments.

All interested people are encouraged to attend the hearing and offer comments. People may register to speak at the hearing in advance by contacting Carol Berens at 291-6495. Questions on the draft report should be directed to Julie Opitz at 291-6365. Copies of the draft report are available free of charge beginning March 20 from the Council's Communications Department at 291-6464. Copies are also available for public inspection beginning March 23 at the following locations:

Metropolitan Council Library 300 Metro Square Building St. Paul, Minnesota 55101

Minneapolis Public Library Government Documents Room 300 Nicollet Mall Minneapolis, Minnesota 55401

St. Paul Public Library Science and Industry Room 90 West Fourth Street St. Paul, Minnesota 55102

Blaine, Minnesota 55434

Anoka County Library—Blaine Branch 707 Highway 10

Carver County Library—Chaska Branch 314 Walnut Street Chaska, Minnesota 55318 Dakota County Library—Burnsville Branch 1101 West County Road 42 Burnsville, Minnesota 55337

Hennepin County Library—Southdale Branch 7001 York Avenue Edina, Minnesota 55435

Ramsey County Library—Roseville Branch 2180 North Hamline Avenue

Roseville, Minnesota 55113

Scott County Library—Shakopee Branch 235 South Lewis Street Shakopee, Minnesota 55379

Washington County Library—Park Grove Branch 7520 - 80th Street South Cottage Grove, Minnesota 55106

Sandra S. Gardebring, Chair Metropolitan Council

Metropolitan Waste Control Commission

Meeting Schedule, April-December, 1985

April, 1985

Tuesday, April 9, 1985—4:00 p.m. Wednesday, April 10, 1985—4:00 p.m. Tuesday, April 16, 1985—2:00 p.m. Committee of the Whole—Operations Section Committee of the Whole—Budget & Administration Section Full Commission Meeting

May, 1985

Tuesday, May 14, 1985—4:00 p.m. Wednesday, May 15, 1985—4:00 p.m. Tuesday, May 21, 1985—2:00 p.m.

Committee of the Whole—Operations Section
Committee of the Whole—Budget & Administration Section
Full Commission Meeting

June, 1985

Tuesday, June 11, 1985—4:00 p.m. Wednesday, June 12, 1985—4:00 p.m. Tuesday, June 18, 1985—2:00 p.m.

Committee of the Whole—Operations Section Committee of the Whole—Budget & Administration Section Full Commission Meeting

July, 1985

Tuesday, July 9, 1985—4:00 p.m. Wednesday, July 10, 1985—4:00 p.m. Tuesday, July 16, 1985—2:00 p.m. Committee of the Whole—Operations Section
Committee of the Whole—Budget & Administration Section
Full Commission Meeting

August, 1985

Tuesday, August 13, 1985—4:00 p.m. Wednesday, August 14, 1985—4:00 p.m. Tuesday, August 20, 1985—2:00 p.m.

Committee of the Whole—Operations Section
Committee of the Whole—Budget & Administration Section
Full Commission Meeting

September, 1985

Tuesday, September 10, 1985—4:00 p.m. Wednesday, September 11, 1985—4:00 p.m.

Committee of the Whole—Operations Section
Committee of the Whole—Budget & Administration Section

p.m. Tuesday, September 17, 1985—2:00 p.m.

Full Commission Meeting October, 1985

Tuesday, October 8, 1985—4:00 p.m. Wednesday, October 9, 1985—4:00 p.m. Tuesday, October 15, 1985—2:00 p.m.

Committee of the Whole—Operations Section
Committee of the Whole—Budget & Administration Section
Full Commission Meeting

November, 1985

Tuesday, November 12, 1985—4:00 p.m. Wednesday, November 13, 1985
Tuesday, November 19, 1985—2:00 p.m.

Committee of the Whole—Operations Section
Committee of the Whole—Budget & Administration Section
Full Commission Meeting

December, 1985

Tuesday, December 10, 1985—4:00 p.m. Wednesday, December 11, 1985—4:00 p.m.

Committee of the Whole—Operations Section
Committee of the Whole—Budget & Administration Section

Tuesday, December 17, 1985—2:00 p.m. Full Commission Meeting

All meetings are held at 350 Metro Square Building, Conference Room B-1, 7th & Robert Streets, St. Paul, MN 55101.

Public Utilities Commission

Outside Opinion Sought Concerning the Provision of Extended Area Service in the Post-Divestiture Environment

Beginning in December 1981, the Minnesota Public Utilities Commission (the Commission) stopped accepting petitions for the installation of new Extended Area Service (EAS) routes because it had decided to consider proposed EAS rules changes. By mid-year 1982 it became clear to the Commission that it would be a wasted effort to change the EAS rules when the approaching AT&T divestiture might make all the proposed changes incompatible with actual post-divestiture conditions in the industry. The Commission closed its ruling-making procedure and decided to postpone any EAS rule change consideration until after the effects of the divestiture and numerous other federal decisions on the provision of EAS in Minnesota could be evaluated.

The divestiture is now just over a year old. In that one year time period, the industry and regulators have seen a massive reorganization within the telecommunications industry. Divestiture has spurred the steady movement towards increased competition in the telecommunications industry. Industry has reacted to the increasingly competitive telephone marketplace by proposing repricing of telephone services and by proposing the deregulation and detariffing of telephone services.

EAS has not been unaffected by the divestiture and deregulation. In an order rejecting a petition for EAS, the Michigan Public Service Commission found that "EAS is now counterproductive to the type of environment that is envisioned by deregulation. Today, toll competitors pay a fixed fee to access the local exchange areas, irrespective of the exchange size or volume of calls placed. By expanding the size of the exchange area with EAS, toll competitors avoid paying for the use of EAS facilities. Therefore, EAS allows a type of bypass, or avoidance of the toll system, by allowing high-toll-volume users and competitors to selectively operate in sizable EAS systems and avoid paying their proportionate share of costs" (Michigan Public Service Commission Opinion and Order, Case No. U-6491, filed pursuant to its action of July 17, 1984). Michigan found that EAS has shifted over the years from a cost-effective service to a cost-subsidized service and that recent developments on both the federal and state levels necessitate a change in the present EAS policy.

OFFICIAL NOTICES

The Commission has received several inquiries about the possibility of installing new EAS routes and on August 16, 1984, received a letter from Northwestern Bell Telephone Company (NWB) informing the Commission that NWB has a Product Team working to develop a method of compensation for EAS between companies. The Team's goal was to have a Metro Compensation Plan ready for review during the first quarter of 1985. NWB requested that further expansion of Metro EAS be delayed until a compensation plan is agreed upon and ready for implementation.

In view of the activities NWB has undertaken, the increased interest in EAS petitions, the existence of actual post-divestiture experience to possibly provide answers to questions of EAS's viability, and the direct conclusions made by the Michigan Public Service Commission, the Commission finds that it would be appropriate and in the public interest to evaluate the provision of EAS and identify the problems associated with it in the post-divestiture environment. With the advent of competition, EAS may become a luxury offering that some telephone companies may need to restrict, reduce, or alter if they are to remain financially viable in the future.

In order to collect a relevant information base for its evaluation, the Commission will solicit outside opinion from interested persons on the subject of EAS in the post-divestiture environment. Any persons desiring to submit information or comment in this matter may do so either orally or in writing. All comments should provide adequate background information, complete sources of information and detailed justification for the positions taken on the issues. Comments should address both the policy and legal perspectives of an issue. All commenters are encouraged to identify and discuss all the issues that are relevant to their particular situation. However, the Commission requests that the following issues be specifically addressed by all commenters:

- (1) What is a viable EAS policy for the state of Minnesota in the post-divestiture environment? Should EAS be eliminated or grandfathered in Minnesota? Please be specific in discussions of rural versus urban telephone exchange considerations;
- (2) How does EAS fit, or not fit, into the post-divestiture telecommunications environment? Also include in your response a consideration of the restrictions placed on EAS by the Modification of Final Judgment;
- (3) Should the Commission rewrite its EAS rules? If so, what is an appropriate cost methodology to use in pricing new and existing EAS routes?
- (4) Discuss the implications of a petition requesting the installation of an EAS link between 2 cities for the purpose of offering a flat rate service in competition with interexchange toll service offerings between the same two cities; and,
 - (5) Address any specific problems associated with the provisions of EAS such as but not limited to:
- A. Bypass by resellers and other competitive interexchange carriers of the local exchange switched network through EAS trunk connections such as was identified in the Michigan order mentioned above; and,
- B. Problems that might arise when a telephone exchange without local measured service provides EAS into another exchange that has local measured service.

In addition to addressing these specific issues, the Commission requests that interested persons or companies, such as NWB, file any preliminary or final information resulting from any in-house or multi-company evaluations of the EAS issue.

All statements of information or comment must be received by May 17, 1985. Any written materials received by this date will become part of the record in the event that rules are proposed.

Written comments should reference Docket No. P-999/CI-85-147 and should be addressed to:

Karin L. Sonneman Minnesota Public Utilities Commission 780 American Center Building 160 East Kellogg Boulevard St. Paul, MN 55101

If you have any questions or wish to make oral comments regarding this matter, please contact Ms. Sonneman at (612) 296-8994.

Pursuant to the provisions of Minn. Stat. § 16.098, subd. 3, an agency must make reasonable effort to publicize the availability of any consultant services contract or professional and technical services contract which has an estimated cost of over \$2,000.

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

Commodities contracts with an estimated value of \$5,000 or more are listed under the Procurement Division, Department of Administration. All bids are open for 7-10 days before bidding deadline. For bid specifics, time lines, and other general information, contact the appropriate buyers by calling 296-6152. If the appropriate buyer is not available, contact Harvey Leach or Barbara Jolly at 296-3779.

Department of Administration Procurement Division

Commodities Contracts and Requisitions Currently Open for Bidding

				Estimated
		Ordering	Delivery	Dollar
Requisition #	Item	Division	Point	Amount
26-071-15017	Plasma Etching System	Mankato State University	Mankato	Contact buyer
78-620-20757	Hubs	MN Correctional Facility	Stillwater	Contact buyer
32-500-12423	Rental of photocopy machines	Pollution Control Agency	Same	Contact buyer
79-000-46125	Addendum #2 Industrial Tractors	Transportation	Various	Contact buyer
29-001-08474	Painting	Natural Resources	Glenwood	Contact buyer
36-000-02444	Typewriters	Education	St. Paul	Contact buyer
02-310-13738	Personal Alarm System	MN Correctional Facility	Lino Lakes	Contact buyer
REBID Sch 92-TW	Gasoline & Diesel Fuel	Various	Various	Contact buyer
07-300-33247,	Purchase of Photocopy Machine and	Public Safety-Crime	St. Paul	Contact buyer
33236 & 33246	Rental of Finisher	Bureau		
79-050-16231	Controllers	Transportation	Minneapolis	Contract buyer
78-630-06275	Heating Elements	MN Correctional Facility	Oak Park Heights	Contact buyer
21-602-83910	Furnish & Install Van Lift	Economic Security- Vocational Security	Minnetonka	Contact buyer
79-000-46732	Purchase of Photocopy Machine	Transportation	St. Paul	Contact buyer
02-519-45626	Mailing Machines	Administration	St. Paul	Contact buyer
02-307-45535	Floor Machines	Administration — Plant Management	St. Paul	Contact buyer
79-050-16206	Hardware for Storage Sheds	Transportation	Various	Contact buyer
79-000-46355	Tar Kettles	Transportation	Various	Contact buyer
Contract	Reproduction Materials	Various	Various	Contact buyer
21-200-09253	Telephone Systems	Economic Security	White Bear Lake	Contact buyer
79-000-46622	Airport Lighting System	Transportation- Aeronautics	Stanton	Contact buyer
26-072-09230	Builders Hardware	Moorhead State University	Moorhead	Contact buyer
24-000-09250, 6909	Employee Action Forms	Administration- Central Stores	St. Paul	Contact buyer
22-100-7019-20-21, 03229-30-1	Housewarming Guide	Energy & Economic Development	St. Paul	Contact buyer
Contract	Printing, Letterhead, Envelopes, Business Cards, Etc.	State Arts Board	St. Paul	Contact buyer

Requisition #	Item	Ordering Division	Delivery Point	Estimated Dollar Amount
07-500-33442	Rental of Photocopy Machine	Public Safety	St. Paul	Contact buyer
22-400-00815	Film Duplication	Energy & Economic Development — Tourism	St. Paul	Contact buyer
26-072-09234	Audio/Video Switcher	Moorhead State University	Moorhead	Contact buyer
29-002-10597	Seeding Tools & Seeding Cones	Natural Resources	Grand Rapids	Contact buyer
Contract	Purchase of Apple Microcomputer System	Education Institutions in Minnesota	Same	\$300,000-\$500,000
02-307-45590	Unit Heaters	Administration — Plant Management	St. Paul	Contact buyer
78-620-20781	Flame Cutting Machine	MN Correctional Facility	Stillwater	Contact buyer
02-515-7059-60-61, 41542	Official Transp. Maps	Administration — Central Stores	St. Paul	Contact buyer
	MN State Parks Naturally-Reprint	Natural Resources	St. Paul	Contact buyer
	Employee Biweekly Time Report	Administration — Central Stores	St. Paul	Contact buyer
26-073-17436	Purchase of Photocopy Machine	St. Cloud State University	St. Cloud	Contact buyer
22-600-01531	Purchase of CPT Work Processing System	Energy & Economic Development	St. Paul	Contact buyer

Contact 296-6152 fo referral to specific buyers.

Department of Administration Division of State Building Construction

Contracts Available for Architects, Engineers and Landscape Architects

The Department of Administration (DOA) intends to retain the services of qualified professionally registered architects, engineers and landscape architects, to design, prepare construction drawings and monitor construction of a number of projects during the year commencing July 1, 1985. These projects will be varied in nature and scope and will involve new construction, remodeling projects and facility studies. The cost of construction or remodeling projects will be less than \$400,000.00 and the fees associated with facility studies will be less than \$35,000.00. Particular emphasis will be placed on the background and experience of the firm on similar projects as well as the firm's geographic proximity to the project.

Firms wishing to be considered for these projects are asked to submit a short brochure or resume consisting of no more than 10 pages giving qualifications and experience of the firm to the Division of State Building Construction. Attention: George Iwan. Qualified applicants will be contacted as the need arises and may be requested to appear in St. Paul for an interview. Firms which responded during the past year need only respond with a letter indicating continued interest as well as significant organization and experience changes since submission of their last brochure.

In submitting their brochures or resumes, firms shall indicate the area or areas of the list shown below in which they feel qualified.

- 1) Research and Programming
- 3) Health and Medical
- 4) Correctional

2) Educational

- 5) Restoration
- 6) Office and Administration
- 7) Recreational
- 8) Service and Industrial

- 9) Arts, including Performing Arts
- 10) Exhibition and Display
- 11) Landscape and Site Planning
- 12) Interiors
- 13) Water and Waste Facilities
- 14) Energy Supply and Distribution
- 15) Pollution Control
- 16) Acoustics

In some cases, DOA may enter into annual contracts for investigative studies, these annual contracts will be prepared on the basis of the needs of DOA.

The name of firms responding will be provided to other State Agencies having a need for the services described herein.

Names of qualified firms will be retained on file with DOA until June 30, 1986.

Designers for projects with estimated costs or fees in excess of those shown above will be selected by the State Designer Selection Board. Projects referred to the Board will be advertised in the State Register.

Department of Administration Division of State Building Construction

Contracts Available for Registered Professional Testing Services

The Department of Administration (DOA) intends to retain the services of qualified professionally registered individuals to conduct site surveys, materials testing and soil borings and tests during the year commencing July 1, 1985. These projects will be varied in nature and scope. The fees associated with these projects will generally be less than \$2,000.00, although the fees for some projects may exceed this amount.

As projects arise, it is the intention of DOA to contact firms who have expressed an interest in providing such services to the State. The final selection will be made on the basis of the background and experience of the firm, the geographic proximity of the firm to the project site, and an estimate of the fees to be charged for the specific project. Such estimates will be requested when a specific project exists.

Firms wishing to be considered for these projects are asked to submit a short brochure or resume consisting of no more than 10 pages outlining their background, qualifications, and fields of expertise to the Division of State Building Construction, Room G-10, State Administration Building, St. Paul, Minnesota 55155, Attention: George Iwan. Qualified applicants will be contacted as the need arises and may be requested to appear in St. Paul for an interview.

Firms which have previously responded to this request need only provide a letter expressing continued interest as well as significant organization and experience changes since submission of their last brochure.

Names of qualified firms will be retained on file with DOA until June 30, 1986. Names of firms will be provided to other State Agencies having a need for the services described herein.

Department of Corrections Minnesota Correctional Facility — Red Wing

Contracts Available for Medical Clinic Services, Psychological Evaluation Services, Volunteer Services Coordinator, Dietetic Services, Catholic Chaplain, and Certified Driver Education Instruction Services

Contract Available for Medical Clinic Services

The program at the Minnesota Correctional Facility-Red Wing requires the services of a medical clinic. This clinic will provide all clinic services as ordered by the medical staff at MCF-Red Wing. Annual cost is limited to \$9,000.00.

Contract Available for Psychological Evaluation Services

The program at the Minnesota Correctional Facility-Red Wing requires the services of a licensed psychologist. This person will provide the written psychological evaluation — through testing, interviews, etc., on up to a twice weekly basis for all new admission to the institution, to re-test selected youths based upon specific staff referral, plus limited staff training in the area of his/her expertise. Payment is \$258.00 per 8-hour day. Annual cost is limited to \$24,600.00.

Contract Available for Volunteer Services Coordinator

The program at the Minnesota Correctional Facility–Red Wing requires the services of a volunteer coordinator. Position requires up to 50 hours per week. Responsibilities include the providing of professional volunteer services for juvenile clients at the institution through the recruiting and training of volunteers, plus the development of a coordinated scheduling of the volunteers, plus the development of a coordinated scheduling of the volunteers to augment the on-going programs. Payment is \$1,800.00 per month. Annual cost is limited to \$21,600.00

Contract Available for Dietetic Services

The program at the Minnesota Correctional Facility-Red Wing requires the services of a licensed dietician. This person will provide professional dietetic consultation, enabling dietetic staff to provide hygienic dietetic services that meet the daily nutritional needs of residents, ensures that special dietary needs are met, and provides palatable, attractive and acceptable meals. The consultant will provide a minimum of 12 hours per month of professional services. Annual cost is limited to \$3,000.00

Contract Available for Catholic Chaplain

The program at the Minnesota Correctional Facility-Red Wing requires the services of an ordained Catholic priest from 7/1/85 to 6/30/86. This person will provide weekly Mass and spiritual guidance and counseling for the Catholic students at MCF-Red Wing as requested. This person will provide up to 20 hours per week for 50 weeks at \$10.00 per hour. Annual cost is limited to \$10,000.00.

For further information on these contracts, contact:

Thomas P. Kernan, Assistant Superintendent Minnesota Correctional Facility-Red Wing Box 45

Red Wing, Minnesota 55066 Telephone: (612) 388-7154

Final submission date for this contract is May 1, 1985.

Contract Available for Certified Driver Education Instructor Services

The program at the Minnesota Correctional Facility requires the services of a certified driver education instructor. This position requires up to 60 hours per month of instruction. Responsibilities include classroom and behind-the-wheel instruction, testing and record keeping. The instructor shall provide a safety certified driver education car. The instructor would also be required to provide special instruction to students on a special need basis. Hours of instruction will be coordinated with general school schedules. Payment is \$10.00/hour. Annual cost would be limited to \$7,200.00.

For further information on this contract, contact:

John Odden, Director of Education
Minnesota Correctional Facility-Red Wing
Box 45

Red Wing, Minnesota 55066 Telephone: (612) 388-7154

Final submission date for this contract is May 1, 1985.

Minnesota Department of Education Executive Division

Request for Proposals for Programming, Systems Analysis and Consulting Services

The Executive Division, Education Data Systems Section, is seeking qualified individuals or organizations with experience in government EDP systems using large scale Burroughs computers to supplement the section staff in the development and maintenance of the State Department of Education Information System (SDE-IS).

The specific services which will be provided under contract are outlined in detail in the Request for Proposal (RFP) statement of Project Tasks.

The formal RFP may be requested and inquiries should be directed to:

Mr. Charles Coskran, Director Education Data Systems Section Room 851, Capitol Square Building 550 Cedar Street St. Paul, Minnesota 55101

It is anticipated that the cost of services, as described in the statement of Project Tasks, to be provided during the contract period from July 1, 1985 through June 30, 1986 will be no more than \$115,000. This is the maximum price to be paid and the Department does not commit itself to spend this entire amount.

The deadline for submission of completed proposals will be the close of the working day April 22, 1985.

Department of Energy and Economic Development Community Development Division

Juvenile Justice Grants Available

The Minnesota Juvenile Justice Advisory Committee announces the availability of \$546,775 for Juvenile Justice Grants. Funds are available in the following areas:

- Prevention
- Courts
- Pre-Adjudication Alternatives
- Post-Adjudication Alternatives
- Training

Funds will be available from the total award for a mini-grant program in the areas of prevention and training to begin October 1, 1985 and end September 30, 1986. Mini-grant applications in the prevention area may request up to \$2,000 per application. Mini-grant applications in the training area may request up to \$1,000 per application. Mini-grant applications will be accepted on a one-time basis.

The balance of the award will be available for projects that meet the requirements stated in the Multi-Year Action Plan. The projects must begin by October 1, 1985 but applicants may request funds for up to fifteen months. The fifteen-month cycle would provide Grantees an opportunity to be included in the local budget process.

Applications for the regular grant and mini-grant programs must be received no later than May 31, 1985. Please indicate whether you are interested in the regular grant program or the mini-grant program when requesting application materials.

The Juvenile Justice Advisory Committee will award the grants on August 9, 1985 for an October 1, 1985 start-up date.

Application forms, the Multi-Year Action Plan, and other program information can be obtained by contacting:

Steve Gustafson
Justice Grant Program
Community Development Division
9th Floor American Center Building
150 East Kellogg Blvd.
St. Paul, MN 55101
(612) 296-8243

Minnesota Department of Energy and Economic Development Energy Finance Division

Request for Proposals for Presentation and Promotional Services

The Energy Finance Division of the Minnesota Department of Energy and Economic Development is requesting proposals from contractors to produce radio spots and two slide presentations. Projects will require that the contractor provide the following services:

- —on-site photography (10 to 12 sites throughout Minnesota)
- ---script-writing
- -preparation of graphic slides
- -production of slide presentations
- -radio spots (10, 30, and 60 second)

The retainer contract will be for \$15,000. Services must be available from April 29, 1985 through June 30, 1985.

Proposals must be submitted by 4:00 p.m., April 22, 1985, stating services offered, hourly rate for those services, and minimum requirements. Samples of work must be included.

Contractors must apply for a Certificate of Compliance from the Minnesota Department of Human Rights. Applications can be obtained by written request from the Minnesota Department of Human Rights, Fifth Floor, Bremer Building, St. Paul, MN 55101. All contract bids must include a statement indicating that the bidder has applied for the certificate.

This notice does not obligate the State to complete the project. The State reserves the right to cancel this solicitation if it is considered to be in the best interest of the State.

Submissions of proposals and questions should be directed to:

Rebecca Filler
Minnesota Department of Energy and
Economic Development
Energy Finance Division
900 American Center Building
150 E. Kellogg Boulevard
St. Paul, MN 55101
(612) 297-4298

Department of Health Health Resources Division Emergency Medical Services Section

Request for Proposals for Minnesota Poison Information Center

The Minnesota Department of Health is requesting proposals from non-profit corporations and units of government to provide 24-hour poison information and referral services to the general public and to health professionals. Maximum State funding for this grant will not exceed \$125,000 for the year July 1, 1985 to June 30, 1986. The availability and specific amount of funding are contingent on the outcome of State and federal budget deliberations.

Criteria for selection include five factors listed in the enabling statute (MN. Stat. §§ 145.93) plus such general considerations as the availability of matching funds and in-kind support and the ability to pursue additional funding for a statewide poison control program from other sources. All section criteria are described in a request for proposal available from the Minnesota Department of Health. Selection will follow the review of all proposals received before the deadline and a recommendation by an advisory task force. Responders will be expected to demonstrate ability to initiate service as soon as possible following selection and awarding of funds. The deadline for applications is 4:00 p.m., May 24, 1985.

Copies of the request for proposal and other information about this project are available from:

Peter Carr Emergency Medical Services Section Minnesota Department of Health 717 Delaware St. S.E. P.O. Box 9441 Minneapolis, Minnesota 55440 612/623-5284

Department of Health Division of Maternal and Child Health Services for Children with Handicaps

Contracts Available for Medical and Related Services for Handicapped

Openings exist for:

- 1. Board certified or approved physicians to provide medical examinations:
- 2. Certified audiologists to provide audiological examinations;
- 3. Registered public health or pediatric nurses to provide nursing services;
- 4. Certified speech pathologists to provide speech assessments;
- 5. Licensed psychologists to provide psychological assessments.

Qualified, interested persons should contact Nancy A. Okinow, Services for Children with Handicaps, 717 Delaware Street SE, Minneapolis, Minnesota, 55440. Phone (612) 623-5168 by April 19, 1985.

A total of \$60,590 has been budgeted to fund these positions. Funding for individual positions varies by category and position.

Legal Services Advisory Committee

Request for Proposals for Legal Services for Low-Income People

The Legal Services Advisory Committee is requesting proposals for legal services and alternative dispute resolution programs for low income people.

Grant funds are contingent on the extension by the Legislature of the civil filing fee surcharge.

Inquiries should be directed to:

J. L. Rehak230 State CapitolSt. Paul, MN 55155(612) 296-6822

Application Deadline: May 15, 1985.

Metropolitan Waste Control Commission

Public Notice for Prequalifications for the Preparation of a Design for a New Rosemount Wastewater Treatment Plant

Notice is hereby given that the Metropolitan Waste Control Commission is soliciting prequalifications for the preparation of a design for a new Rosemount Wastewater Treatment Plant, Project Number 85-51.

The prequalification should include the firm's interest to provide services, background data, qualifications and disciplines of employees, and the demonstratable experience of the firm.

The prequalifications should include information on the firm's programs for compliance with equal employment opportunities, affirmative action and utilization of minority firms. The prequalifications will be used by the Commission as a mechanism for selecting a firm to prepare plans and specifications for a new Rosemount Plant.

Firms not currently on the Commission's prequalification list should submit a letter stating their interest in the project and one copy of its prequalifications. Firms presently on the Commission's prequalification list need only to submit a letter stating their interest in the project and the necessary information, if any, to update their prior prequalifications.

Please submit letters with prequalifications or updated information within one week of this notice to the Chief Administrator at the Metropolitan Waste Control Commission, 350 Metro Square Building, St. Paul, Minnesota 55101. Inquiries regarding the solicitation should be directed to Mr. Ray Payne, Acting Director of Engineering, 612-222-8423.

3/12/85

By Order of the METROPOLITAN WASTE CONTROL COMMISSION Mr. Louis J. Breimhurst Chief Administrator

Supreme Court Lawyer Trust Account Board

Notice of Grant Cycle—July 1, 1985 to June 30, 1986

The Minnesota Supreme Court has established a program to use the interest on lawyer trust accounts to improve the delivery of legal services to the poor, to promote the development of law-related education for the public, and to develop programs to enhance the administration of justice.

The Lawyer Trust Account Board has announced a grant program to distribute funds to projects in any of three program areas. The Board will support not only traditional approaches, but will encourage projects which show innovative approaches to recognized needs throughout the state. The Board is soliciting proposals. For application information, contact the Executive Director, 318 Capitol, St. Paul, MN 55155. The application deadline is April 15, 1985.

Department of Transportation

Contract Available for Lime Sludge Recycling and Site Restoration

NOTICE TO CONTRACTORS—Sealed proposals will be RECEIVED until 9:30 A.M., April 26, 1985 by the Commissioner of Transportation for the State of Minnesota, at the office building of the State of Minnesota Department of Transportation, St. Paul, MN. for the construction of the State Project listed below. Proposals will be OPENED and READ publicly by the Commissioner of Transportation in the Cafeteria of the Transportation Building immediately after the hour set for receiving bids.

Minimum wage rates to be paid by the Contractors have been predetermined. All Projects financed with Federal-Aid are subject to the Work Hours Act of 1962, P.L. 87-581 and implementing regulations.

READ CAREFULLY THE WAGE SCALES AND DIVISION A OF THE SPECIAL PROVISIONS AS THEY AFFECT THESE PROJECTS.

The Minnesota Department of Transportation in accordance with Title VI of the Civil Rights Act of 1964, 78 Stat. 252, 42 U.S.C. 2000d to 2000d-4 and Title 49, Code of Federal Regulations, Department of Transportation, Subtitle A, Office of the Secretary, Part 21, Non-discrimination in Federally-assisted programs of the Department of Transportation issued pursuant to such Act, hereby notifies all bidders it will affirmatively insure that in any contract entered into pursuant to this advertisement, disadvantaged business enterprises will be afforded maximum opportunity to participate and/or to submit bids in response to this invitation, and will not be discriminated against on the grounds of race, color, sex or national origin in consideration for an award.

Proposals, Plans, and Specifications may be examined and secured in Room 705 of the Minnesota Department of Transportation Building.

REQUESTS FOR PLANS MAY BE SUBMITTED ON CONSTRUCTION FORM NO. 21120 OR COMPANY LETTER-HEAD, AND MUST BE ACCOMPANIED BY CHECK, DRAFT, OR MONEY ORDER, PAYABLE TO THE COMMISSIONER OF TRANSPORTATION.

Bids must be accompanied by a certified check made payable to the Commissioner of Transportation or a corporate surety bond made in favor of the State of Minnesota in an amount as designated on the back of the proposal form.

PLEASE NOTE

6% MINNESOTA SALES TAX MUST BE INCLUDED ON ALL COUNTER PURCHASES AND ON ALL ORDERS SHIPPED TO POINTS IN MINNESOTA. FOR SHIPPING CHARGES ADD \$1.15 ON ORDERS OF \$5.00 OR LESS, AND ON ORDERS OVER \$5.00 ADD \$1.15 PLUS 3% OF ANY AMOUNT OVER \$5.00.

COUNTER PURCHASES MAY BE MADE BETWEEN 7:30 a.m. AND 4:00 p.m.

LIME SLUDGE RECYCLING AND SITE RESTORATION

S.P. 2781-334. Located in Hennepin Co. on T.H. 94 from 46th Ave. No. to 49th Ave. No. in Mpls. The major items of work are: 85,604 cu. yd. lime exc., 68,920 cu. yd. sp. pit liner exc., 16.972 cu. yd. salvaged mat'l. from stkpl., 77,099 cu. yd. comm. borr., 7 ac. roadside seed, 300 hale bales.

A min. goal of 12% to be subcontracted by Disadvantaged Bus. Enterprises. Start date: July 15, 1985. Complete by May 30, 1986.

<u>Item</u>	Counter Price
Plans and 1 Proposal	\$ 12.50
Proposal only, per copy	\$ 11.00

Department of Transportation Division of Technical Services

Request for Proposals for Logo Sign Franchise Program for Highway Program

The Minnesota Department of Transportation (Mn/DOT) is planning an expanded highway program. To assist it with the development of this program, Mn/DOT will require the services of a qualified firm to establish, fund and maintain a Logo Sign Franchise Program to provide business signs to be displayed on "Specific Information Signs" relating to gas, food, camping, and lodging on the right of way of Minnesota rural freeways and portions of selected divided trunk highways.

All expressions of interest in being considered shall be delivered to the address indicated below not later than four o'clock (4:00 p.m.) May 03, 1985.

Stanley A. Paulson Office of Environmental Services Transportation Building, Room 704 St. Paul, Minnesota 55155

Telephone: (612) 296-2252

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LOGO SIGN PROGRAM

I. INTRODUCTION

The Minnesota Department of Transportation (Mn/DOT) desires the services of a firm to establish, fund, and maintain a Logo Sign Franchise Program to provide business signs to be displayed on 'Specific Information Signs' relating to gas, food, camping and lodging on the right of way of Minnesota rural freeways and portions of selected divided trunk highways. (See attached map Exhibit 1.)

Firms desiring to submit a proposal should complete the following form with the attached contract provisions and submit these documents with any proposed changes, by May 3, 1985, to the Commissioner of Transportation, Attn: Stanley Paulson, 704

Transportation Office Building, John Ireland Blvd., St. Paul, Mn. 55155. Mr. Paulson's telephone number is (612) 297-2252. The successful firm will be awarded a Statewide Logo Sign Franchise contract by Mn/DOT after any necessary negotiations on specific contract provisions or specifications.

PROPOSAL

To the Commissioner of Transportation of	of the State of Minnesota (Mn/DOT). Proposal of	
(hereinafter the franchise firm)	(name of firm)	
,	(business address)	
	Area code-telephone number	
which was prepared by		
	(name)	
		to furnish
	(title)	, , , , , , , , , , , , , , , , , , , ,

install, maintain, and replace all "specific information sign panels" and "exit ramp sign panels" and to market and lease "business signs" on the specific information sign panels and exit ramp sign panels on freeways and highways (Exhibit 1) to eligible business advertisers. All costs for the marketing, fabrication, installation, operation and maintenance of the logo sign franchise program as set forth in the contract provisions will be paid from the fees and revenues received by the franchise firm from its business advertisers.

CONTRACT PROVISIONS

II. DEFINITIONS.

- (a) "Business"—a motorist service commercial establishment that provides gas, food, lodging, or camping as a motorist service.
- (b) "Business Sign"—a separately attached sign mounted on the rectangular specific information sign panel to show the brand, symbol, logo, trademark, or name, or combination of these, for a motorist service available on a crossroad at or near an interchange or an intersection.
 - (c) "Commissioner" —Commissioner of Transportation.
- (c) "Crossroad"—a marked route or other public road intersecting a freeway or a divided trunk highway for which access is provided at an interchange or intersection.
 - (e) "Department"—the Minnesota Department of Transportation.
 - (f) "Exit Ramp"—a connecting roadway between two intersecting roads that are grade separated.
 - (g) "Exit Ramp Sign"—a sign along the exit ramp.
 - (h) "Expressway"—a divided highway with partial or fully controlled access having interchanges and/or intersections.
- (i) "Freeway"—a divided highway for through traffic with full control of access and grade separations at crossroads. This definition includes the Interstate System (those parts shown on Exhibit 1) within the State of Minnesota.
 - (j) "Interchange"—a grade separated intersection with one or more roadways to provide movement between roadways.
- (k) "Intersection"—the general area where two or more roadways join or cross at grade to facilitate movements between roadways.
- (l) "Logo"—A single or multicolored symbolic design unique to a product, a business or a service facility; a national, regional or local commercially recognized pictorial reference to a specific product, service or business used as a means of identification of a business's products, services or business.
 - (m) "Mn/DOT"—Minnesota Department of Transportation.
 - (n) "Program"—logo sign franchise program.
 - (o) "Service"—a facility used by motorists; namely gas, food, lodging, and camping.
- (p) "Specific Information Sign Panel"—a rectangular metal sign panel consisting of the words gas, food, lodging, or camping, and directional information on which a business sign(s) is mounted.
 - (q) "The Franchise Firm"—the firm awarded the logo sign program.

III. RESPONSIBILITIES OF THE PARTIES.

A. Subject to the terms and conditions set forth in this proposal and upon written contract execution. Mn/DOT grants the exclusive right to the franchise firm to construct and to operate a Logo Sign Franchise Program on the right of way of certain (selected) Minnesota rural freeways and portions of certain divided rural trunk highways as described on Exhibit 1 for a term of five

(5) years. The five year term of this agreement will commence July 1, 1985, and will terminate June 30, 1990, unless extended pursuant to Section IX of this agreement. On its part the franchise firm shall have the following responsibilities and duties:

- 1. In establishing and operating the Minnesota Logo Sign Franchise Program the franchise firm shall be governed by and adhere to Minnesota Statute § 160.80 and any other applicable state and federal laws and regulations.
- 2. Equal logo sign access must be provided by the franchise firm at reasonable rates to all potential advertisers considered qualified as specified herein. In conformance with Exhibit 2 attached, no business may discriminate, or be discriminated against with regard to race, color, religion, sex or national origin.
- 3. Existing Mn/DOT installed Motorist Service Signs shall remain inplace at each interchange shown in Exhibit 1 until Specific Information Logo Sign Panels have been installed by the franchise firm. Mn/DOT will then be responsible for the removal of the Motorist Service Signs. In situations where insufficient businesses request Logo signing or where Logo signs are not implemented on rural freeways and expressways, Mn/DOT will continue to install General Motorist Service Signs (food, gas, lodging, camping and hospital) on the mainline near interchanges at Mn/DOT cost.
- 4. Approval required (Right of Way Entry). Prior to start of construction at a particular interchange or intersection, the franchise firm shall apply to the Mn/DOT district maintenance engineer for a right of entry permit. Permit application should include all necessary information concerning the sign panel construction including preliminary site plans. Each time right of way entry is desired after this initial written permit approval, verbal approval from the district maintenance engineer or his representative shall suffice. Entry permit requirements may include the following provisions: existing utility location, providing proper traffic control to assure safe and effective work areas and to warn, control, protect and expedite vehicular and pedestrian traffic.

Traffic control shall be in accordance with Part VI of the Minnesota Manual on Uniform Traffic Control Devices (including Appendix B). Notwithstanding any language to the contrary in that permit document, the permit shall expire at the expiration or termination of this franchise agreement.

Within ninety days upon completion of the construction of the particular logo sign panels within an interchange or intersection, the franchse firm shall submit to Mn/DOT's designated contract officer two copies of the as built plans of the structures within that intersection or interchange.

- 5. The franchise firm will sign a minimum of twenty percent (20%) of the eligible interchanges and intersections each contract year with the construction program complete after five (5) years, depending on advertisers available.
 - 6. Annual Operation Report.

Mn/DOT shall be furnished an annual report signed by an officer of the franchise firm containing the names, addresses of the customers utilizing the program, annual gross revenue for that contract year, percentage of the eligible interchanges and intersections completed. The franchise firm shall also submit such other reports as Mn/DOT from time to time may reasonably require.

7. Commercial Advertising Charges to Customers.

Advertising rates to customers and potential customers for the display of advertising on specific information sign panels shall be as set forth in writing by the franchise firm for all to see and shall be uniform to all commercial advertisers. Costs of display make-up may not be included in such charges and may be charged for separately by the firm. The firm will give Mn/DOT notice of any changes in advertising rates at least sixty (60) days prior to the effective date.

- B. Mn/DOT shall have the following responsibilities as to the Minnesota Logo Franchise Program.
- 1. Mn/DOT to the extent permitted by law, will cooperate fully with the firm in the promotion, development and operation of the program and will assist in obtaining approvals and consents, if required, from other state, federal and governmental agencies.

IV. ELIGIBILITY CRITERIA FOR BUSINESS SIGNS

- 1. A business establishment, meeting the following criteria, may be considered for placement of a business sign on a specific information sign panel.
 - (1) "Fuel Facilities" shall include:
 - (a) Vehicle services, which shall include fuel, oil, tire repair and water;
 - (b) Restroom facilities and drinking water;
 - (c) Continuous operation at least 16 hours per day, 7 days a week:
 - (d) Public Telephone.
 - (2) "Food Facilities" shall include:
 - (a) State or local Licensing or approval, where required;

- (b) Continuous operation to serve three meals a day, 7 days a week;
- (c) Public Telephone.
- (3) "Lodging Facilities" shall include:
 - (a) Adequate sleeping accommodations;
 - (b) Public Telephone.
 - (c) State or local Licensing or approval, where required.
- (4) "Camping Facilities" shall include:
 - (a) Adequate parking accommodations; and
 - (b) Modern sanitary facilities and drinking water;
 - (c) State or local Licensing or approval, where required.

V. STANDARDS FOR SPECIFIC INFORMATION SIGNS

Standards for Specific Information Signs shall comply with provisions of the Federal-Aid Highway Program Manual, Vol. 6, Ch. 8, Sec. 3, Subsec. 8—National Standards for Specific Information Signs, Exhibit 3 attached, except as modified and supplemented as follows:

A. Location of Sign Panels

- 1. Lateral Placement
 - (a) Specific Information Sign Panels

The desirable minimum lateral offset between the edge of thru lane (not edge of the shoulder) and the first post is 40', in no case shall the left edge of panel be less than 18' from the thru lane. Signs shall not be installed in narrow ditch bottoms where they may obstruct drainage and create erosion problems. See Exhibit 4 attached.

(2) Exit Ramp Sign Panels

The lateral offset shall be at least 8' from the curb face or edge of shoulder to edge of the panel.

B. Sign Supports

Sign supports shall conform to Mn/DOT Standards for Type "A" or Type "D" Sign Supports as shown in Exhibit 5 attached. Each installation shall be designed for a windload of 25 psf of panel area normal to the sign face. Type "A" Sign Supports shall be spaced at least 8' apart (not ¢ to ¢). Type "D" Sign Supports shall be spaced at least 51" ¢ to ¢ if 3 or more supports are needed. (See Exhibit 6 for revisions to Mn/DOT Standards Spec. 3401)

C. Sign Materials

Sign materials shall conform to the requirements of Mn/DOT standard specifications 3352 and in particular the following:

- 1. Sign Base Material
- a. Sign base material furnished and installed on Type A sign supports shall be extruded aluminum conforming to the material requirements of Mn/DOT standard specification 3352.2A1c.
- b. Sign base material furnished and installed on Type D sign supports and the "Business Sign" shall be aluminum conforming to the material requirements of Mn/DOT standard specification 3352.2A1b.
 - 2. Sign Face Material
- a. Sign face material shall be reflective sheeting conforming to the requirements of Mn/DOT standard specification 3352.2A2.
 - 3. Sign Legend Material
- a. Sign legend material shall be "Demountable Reflectorized" conforming to the requirements of Mn/DOT standard specification 3352.2A4b or "Direct Applied" conforming to the requirements of Mn/DOT standard specification 3352.2A5b.
 - b. The firm may use reflective material for "Logos" so they will be compatible with the sign backgrounds.

VI. SIGN DESIGN

- A. Specific Information Sign Panel Design
 - a. There shall be no more than six business signs displayed on any GAS panel, or four displayed on FOOD, LODGING,

and CAMPING panels as shown on Exhibit 3 attached. No business shall be allowed more than one space per individual specific information sign panel, but one could qualify for a business sign on more than one type of panel, i.e., both food and lodging.

b. In remote rural areas where very few services are available, two types of services may be combined and displayed on the same specific information sign panel. In such cases, one service shall be displayed on the top half of the panel and the other on the bottom half. GAS shall always be displayed above FOOD, LODGING or CAMPING; and FOOD shall be displayed above LODGING or CAMPING.

B. Business Sign Design

a. These signs may consist of the business name, trademark, or symbol, providing it does not resemble any traffic sign, signal, or device. The business' trademark, name, etc., must be consistent on all business signs for that business.

C. Placement of Business Signs on Panels

Business signs shall be placed on specific information sign panels on a first-come-first-served basis. The first eligible business from which an acceptable application and agreement are received shall have its business sign placed on the top left of the panel, and the second business shall be on the next space horizontally. After the top row is filled (three signs for the gas penal, two for food, lodging, and camping panels), signs shall be placed along the bottom row.

D. Exit Ramp Sign Design

On exit ramp sign panels those businesses to the motorists' left shall have their business signs placed at the top of the panel and those to the right shall be at the bottom. From left to right the business signs shall be placed in ascending order with directional arrows and distance placed on the panel. Services not visible at the top of ramp must have an exit ramp sign as shown in Exhibit 3 attached.

VII. MAINTENANCE OF SIGN PANELS

The various sign panels shall be maintained by the franchise firm in a manner that is a distinct benefit to the safety of the traveler, benefit to the advertisers, and to the reasonable satisfaction of Mn/DOT. The firm will be responsible for the regular clean-up, removal of graffiti, cleaning of the panels, the supply of replacement parts and all general maintenance of the sign panels. The franchise firm shall inspect sign panels at reasonable intervals for any damage or broken parts and shall repair or replace damaged or broken parts within a period not to exceed seven (7) days after the firm becomes aware of the damage or breakage. Sign lighting will not be permitted. Campgrounds and lodging facilities not open year around will have their business signs removed at the end of their business season by the franchise firm.

VIII. CRITERIA FOR SPECIFIC INFORMATION SIGNS

Criteria for Specific Information Signs shall comply with provisions of the Federal-Aid Highway Program Manual, Vol. 6, Ch. 8, Sec. 3, Subsec. 8—National Standards for Specific Information Signs, Exhibit 3 attached, except as modified and supplemented as follows:

A. Priority for Construction of Sign Panels

Priority for construction of sign panels within interchanges and intersections shall be determined by the economic feasibility of placing sign panels at a given interchange or intersection, and by the traveler's needs as mutually determined between Mn/DOT and the franchise firm.

B. Distance to Services and Facilities

The maximum distance that eligible services can be located from the main traveled way to qualify for a business sign should not exceed 3 miles in either direction, except that within the 3-mile limit, services of the type being considered are not available, the limit of eligibility may be extended in 3-mile increments until one (1) or more services of the type being considered are reached. The maximum distance that these eligible services can be located from the main traveled way to qualify for a business sign shall not exceed 15 miles in either direction.

The distance to a qualified business shall be measured by vehicle distance from the center point of the terminus of the exit ramp on an interchange and from the center of an intersection to the nearest point of the intersection of the driveway of the business.

C. Business Signing Priority and Bumping

There may be more businesses eligible for signing within the mileage limit than the number of business signs permitted on a specific information sign panel. Those businesses nearest the exit ramp of an interchange or an intersection with the crossroad will be given first priority for signing. If only one (1) business exists at an interchange or intersection, that business will be given the opportunity to display its business sign.

The first four applicants for food, lodging and camping and the first six applicants for gas that meet the minimum criteria existing at the time of the initial application will be given the opportunity to participate in the program. The franchise firm will allow

a participating business to display its business signs for a period of not less than one year from the date of the initial installation of those signs, provided that business continues to operate under the terms of the agreement and in compliance with the minimum criteria. However, once the maximum number of similar type businesses are participating in the program at a particular interchange or intersection and a similar type business, closer in distance, qualifies and enters into an advertising contract to participate in the program, the farthest participating similar type business will be dropped from the program only after its business sign has been displayed for not less than one year from the date of initial installation.

D. Business Not on the Crossroad

If a business is not on the crossroad, that business will not be allowed to participate in the business sign program until all necessary directional signs have been installed and will be required to coordinate the installation of this type of sign with all appropriate road authorities.

E. Number of Signs Permitted

The number of specific information sign panels permitted shall be limited to one for each type of service along an approach to an interchange or intersection as shown on Exhibit 3 attached. The number of business signs permitted on a sign panel is specified in paragraph VI.

IX. EXTENSION; TERMINATION

- a. This agreement shall be extended for up to three additional five year terms if not terminated pursuant to the following provisions by either the franchise firm or Mn/DOT.
- b. The franchise firm shall have the right to terminate the agreement at any time by giving written notice of termination to Mn/DOT six months prior to the effective date of termination.
- c. Mn-DOT shall have the right to terminate the agreement at the conclusion of any five year term, by giving the firm written notice six months prior to the end of the five year term.
- d. Either party may terminate the agreement for default of the other party. An act of default or breach of contract shall occur in the event that one party:
 - 1) fails to perform any material obligation required under this agreement,
 - 2) commits any act of bankruptcy or insolvency or becomes insolvent or is declared bankrupt.
 - 3) allows any final judgement to stand against it unsatisfied for a period of ten (10) days.
 - 4) makes an assignment for the benefit of creditors.

However, failure by the firm to install a business sign at an interchange or intersection shall not constitute failure to perform a material obligation under this agreement, if such business sign may not be reasonably expected to produce revenues equal to the cost of the sign over a five-year period.

After an act of default or breach of contract by a party, the other party, once it learns of the default, shall by written notice, specifying the breach or default, give the defaulting party ten (10) days after such notice to rectify and correct its default or breach. If the defaulting or breaching party, after such notice, does not rectify or correct its breach or default within a period of ten (10) days after such notice, the other party may immediately terminate the agreement by a second written notice.

A notice shall be considered duly served when it is delivered either at a party's business office to a responsible person of suitable age and discretion or by certified or registered mail to a party's last known business address.

- e. After notice of termination has been given by either party, the franchise firm shall have no further obligation to promote, develop or market advertising but it shall continue to operate the program until the effective date of termination.
- f. No default in the performance of the terms, covenants, or conditions of this agreement on the part of either party will be deemed to continue if and so long as Mn/DOT or the franchise firm, as the case may be, is delayed in or prevented from remedying the default by:
 - 1) strike or other labor disputes;
- 2) any order, directive, or other interference by municipal, state, federal, or other governmental official or agency materially affecting the performance of either party under this agreement,
- 3) any other cause reasonably beyond the control of the party in default; provided, however, that if and when the occurrence or condition which delayed or prevented the remedying of such default shall cease or be removed, it shall be the obligation of the defaulting party, without further delay, to commence the correction of such default or to continue the correction thereof.

The delay or failure of Mn/DOT or the franchise firm at any time to insist upon a strict performance of any of the terms.

conditions and covenants herein shall not be deemed a waiver of that breach or any subsequent breach or default in the terms, conditions and covenants herein.

X. OWNERSHIP OF THE LOGO SIGN FRANCHISE PROGRAM AT EXPIRATION OR TERMINATION

- a. If the franchise firm terminates this agreement or defaults prior to the conclusion date of any five year term, ownership of the franchise rights and any rights in the sign panels constructed at the various interchanges and intersections shall pass to Mn/DOT at the effective date of termination and the franchise firm shall not be entitled to any compensation from Mn/DOT.
- b. If Mn/DOT terminates the firm under paragraph IX.d. (default) of this agreement, ownership of the franchise rights and any rights in the sign panels constructed at the various interchanges and intersections shall pass to Mn/DOT at the effective date of termination and the franchise firm shall not be entitled to any compensation from Mn/DOT.
- c. If the franchise with the franchise firm is terminated by Mn/DOT under paragraph IX.c., and then subsequently awarded to a third party, the franchise firm may negotiate with that third party to sell directly to that third party the sign panels, marketing assets and existing advertising contracts on terms acceptable to the franchise firm and the third party. Any compensation for these rights are solely the responsibility of the third party. If the franchise firm and the third party cannot agree as to a buy-out and compensation for the above rights within a reasonable time, the franchise firm shall remove all the sign panels and posts and restore the various sites to their original condition or to a condition satisfactory to Mn/DOT.
- d. Upon termination by either party, the franchise firm will include a provision in all of its advertising contracts with its customers to the effect that in case of expiration or termination of the franchise agreement with Mn/DOT, the unexpired portions of such advertising contracts shall be subject to cancellation and refund by the franchise firm of any unearned, prepaid charges.

As the business signs will be owned by individual customers, the franchise firm, before or on the expiration date of the franchise or the effective termination date, shall remove and properly dispose of those business signs if the program is to terminate. Otherwise the business signs are to remain with the sign panels and becomes the responsibility of the third party.

e. The parties agree that it is the intent of this franchise agreement that the franchise firm shall not be entitled to any compensation from Mn/DOT or the State, for any reason.

XI. ASSIGNMENT

The franchise firm shall not sell, transfer, assign or otherwise dispose of the franchise agreement or any portion thereof, or of its right, title, or interest therein without the prior written consent of Mn/DOT, which consent shall not be unreasonably withheld. Any such attempted disposition by the franchise firm shall be an act of default and Mn/DOT may terminate the franchise pursuant to the terms of paragraph IX.d. of this agreement.

XII. SUPPLEMENTAL AGREEMENT AND REMEDIES

The franchise firm and Mn/DOT may exercise those legal remedies as may be available to them in connection with any dispute arising out of this agreement which cannot be settled by the parties hereto by supplemental agreement.

XIII. BOOKS AND RECORDS

The franchise firm agrees to maintain all books, documents, papers, advertising contracts, generally accepted accounting records and other evidence pertaining to this franchise agreement and its revenues and shall provide such information upon request of Mn/DOT to permit Mn/DOT or its designee, or the legislative auditor or the state auditor, pursuant to Minn. Stat. § 168.06, Subd. 4 to examine those books, records and accounting procedures and practices of the franchise firm relevant to this franchise agreement.

XIV. COMPLIANCE WITH LAW; GOVERNING LAW

- a. The nondiscrimination provisions contained in Exhibit 2 are attached hereto and will be incorporated into franchise agreement by reference. The franchise firm agrees that in carrying out the agreement that it will comply with all provisions contained in Exhibit 2 and that it will require that the provisions of Exhibit 2 be incorporated in all contracts with its contractors, subcontractors and suppliers involved with the franchise agreement and with its advertising customers. The franchise firm may not permit advertising from advertisers who do not provide their services without regard to race, color, religion, sex, handicapped, age, or national origin.
- b. Validity, interpretation and performance of the agreement shall be governed by the laws of the State of Minnesota. The franchise firm hereby consents to the jurisdiction of the courts of the State of Minnesota and to the commencement and maintenance of any suit, action or proceeding based on any claim by Mn/DOT or any third party arising out of or in connection with the franchise firms rights and responsibilities under the agreement.
- c. The franchise firm shall comply with all federal, state and local laws, ordinances and rules applicable to the construction and operation of the program provided for in the agreement.

XV. INDEMNITY AND INSURANCE

a. The franchise firm agrees to indemnify, save and hold harmless Mn/DOT and the State and all of its agents and employees

from any and all claims, demands, action or causes of action of whatsoever nature or character arising out of or by reason of the franchise firm's construction, operation and/or maintenance of the logo sign panels, and the franchise firm's program, and further agrees to defend at its sole cost and expense any action or proceeding commenced for the purpose of asserting any claim of whatsoever character arising as a result of the franchise firm's construction, operation and/or maintenance of the various logo sign panels, whether or not such action or claim alleges negligence of Mn/DOT or the State, its agents or employees in supervision or approval of the franchise firm's activities, or failure to discover and/or prevent the franchise firm's negligence.

- b. It is hereby understood and agreed that any and all employees of Mn/DOT and all other persons employed by it in the performance of Mn/DOT's responsibilities under the franchise agreement shall not be considered employees of the franchise firm and that any and all claims, that may or might arise under the Workers' Compensation Act of the State of Minnesota on behalf of said Mn/DOT employees while so engaged and acting within the scope of their employment shall in no way be the obligation or the responsibility of the franchise firm.
- c. It is hereby understood and agreed that any and all employees of the franchise firm and all other persons employed by the franchise firm in the construction, operation and/or maintenance of the logo sign franchise program as provided for under the agreement shall not be considered employees of Mn/DOT or the State and that any and all claims that may or might arise under the Workers' Compensation Act of the State of Minnesota on behalf of said employees while so engaged and any and all claims made by any third party as a consequence of any act or admission on the part of said franchise firm employees while so engaged in the construction, operation and/or maintenance of the various sign panels shall in no way be the obligation or responsibility of Mn/DOT or the State.
- d. The franchise firm, at its own expense, shall carry and keep in force during the full term of the franchise agreement, including any extensions or renewals thereof, a policy or policies of insurance which also name(s) Mn/DOT as an insured, in the amounts and of the types as follows:
- (1.) Public liability insurance in amounts not less than \$200,000 for injury to or death of any one person resulting from each single occurrence and not less than \$600,000 for an injury to or death of all persons resulting from each single occurrence.
- (2.) Public liability insurance for damage to property in the amount of not less than \$600,000 resulting from each single occurrence.
 - (3.) Workers' compensation insurance in a form and amount as required by state law.

The policy or policies for public liability insurance, (1.) above, and property damage insurance, (2.) above, shall cover the construction and operation and/or maintenance of the logo sign franchise program and the franchise firm shall furnish Mn/DOT's designated contract officer with certificates of insurance evidencing such coverage. These certificates shall also provide that the insurance will not be modified or cancelled without prior written notice to Mn/DOT. Failure by the firm to procure and maintain the insurance as set forth above shall be considered a default and cause for termination under paragraph IX.d. Further, at least fifteen days prior to the expiration date or dates of expiring policies, certified copies of renewal, or new policies, or other acceptable evidence of insurance shall be deposited with Mn/DOT.

XVI. SURETY BOND.

As construction of the logo sign franchise program takes place on State property and results in a structure or improvement with possible attendant lien questions, the franchise firm shall be required to provide a contractor's performance/payment bond for sign panel construction and maintenance under Minn. Stat. § 574.26 to the State of Minnesota, Department of Transportation, in the amount of \$100,000.00 and for the term of the franchise agreement (5 years). The contractor's performance/payment bond will be approved by the appropriate State officers prior to any construction of the sign panels.

XVII. PERMITS, LICENSES AND TAXES

The franchise firm shall procure all permits and licenses; pay all charges, fees, and taxes; and give all notices necessary and incidental to the due and lawful prosecution of the work. When requested, the franchise firm shall furnish Mn/DOT with evidence indicating that it has complied with the permit, license and tax requirements.

XVIII. FEES AND COMMISSIONS

The franchise firm warrants that it has not employed or retained any company or person, other than a bona fide employee working solely for the franchise firm, to solicit or secure the contract, and that it has not paid or agreed to pay any company or person, other than bona fide employees working solely for the franchise firm, any fee, commission, percentage, brokerage fee, gifts or any other consideration, contingent upon or resulting from the award or making of the agreement. For breach or violation of this warranty, Mn/DOT shall have the right to annul the agreement without liability or, in its discretion, otherwise recover, the full amount of such fee, commission, percentage, brokerage fee, gift or contingent fee.

XIX. EXHIBITS

The attached exhibits, which are briefly described below, are incorporated by reference into this agreement.

Those exhibits are:

Exhibit 1 A written list of eligible interchanges and intersections that may be signed on freeway and express highways and an illustrative map showing those highways. The written list of eligible interchanges and intersections shall control over any interchanges and intersections that may seem to be shown on the map. Exhibit 1 and only this exhibit may be amended if both parties agree by the following procedure. Mn/DOT shall prepare a revised Exhibit 1 and submit a copy of that revision to the franchise firm. That revision of Exhibit 1 shall be signed and dated by an appropriate officer of the franchise firm, returned to Mn/DOT, numbered Exhibit 1-1, dated and signed by the Assistant Commissioner for Technical Services or his successor, at which time the revised Exhibit 1-1 shall be incorporated into this agreement superseding the earlier exhibit. Subsequent amendments, if any, of this exhibit would be numbered Exhibit 1-2 etc.

- Exhibit 2 Nondiscrimination Regulations
- Exhibit 3 Federal Highway Administrations National Standards for Specific Information Signs
- Exhibit 4 Lateral Sign Placement
- Exhibit 5 Mn/DOT Sign Standards
- Exhibit 6 Mn/DOT Standard Specification 3401 (Flanged Channel Sign Posts)

XX. APPROVALS

Before the franchise agreement becomes binding and effective, it shall be approved by the franchise firm and shall also receive the approval of the Federal Highway Administration and of such State officers as the law may provide in addition to the Commissioner of Transportation.

XXI. PROPOSAL INFORMATION

EXECUTION OF BRODOCAL

The proposal document incorporating the above provisions and specifications should be received not later than May 3, 1985, Room 704, Transportation Building, St. Paul, Mn. 55155, Attention: Stanley Paulson. All proposals shall contain the following additional information:

- 1. Description of experience and background in advertising and sales.
- 2. Implementation scheduling, marketing sales strategies, projected fees for eligible businesses, and method of advertising to potential Logo Sign advertisers.
- 3. If an interested firm wishes to propose an implementation schedule or other terms which are different than those contained in this proposal they may be included as attachments for Mn/DOT consideration.
 - 4. Additional information you deem important to your proposal.

day of
INDIVIDUAL
P.O. Address
e of
PARTNERSHIP
, for
BUSINESS ADDRESS
=

CORPORATION

Signed:	, for	8
corporation, incorporated under the laws of the State of		
Name of President		
Business Address		
Name of Vice President		
Business Address	A	
Name of Secretary		
Business Address		
Name of Treasurer		
Rusiness Address		

LOGO SIGNING PROGRAM

A list of Eligible Route Locations

April, 1985

Freeways Eligible for the Logo Sign Program

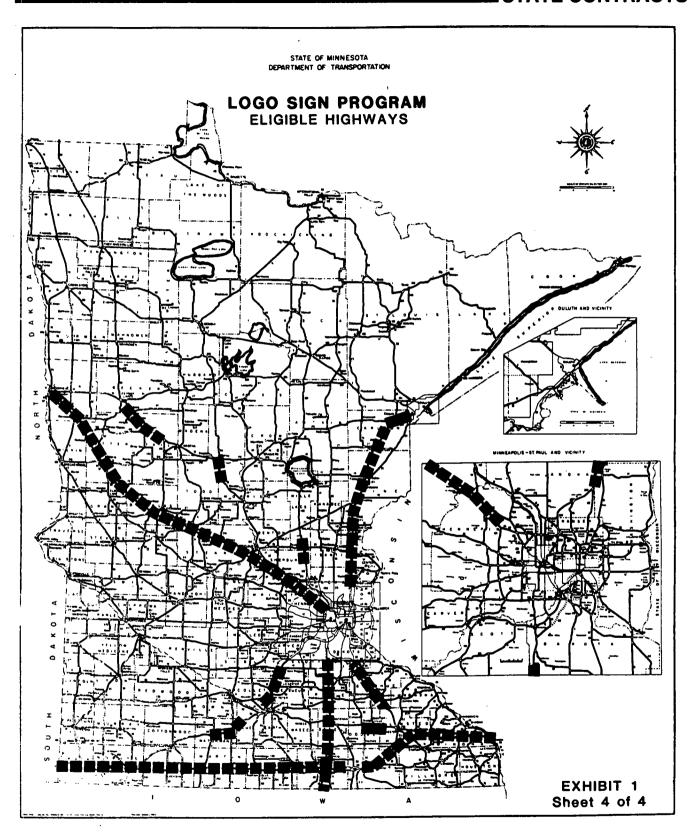
- I35—All interchanges between the Iowa border and Exit 81, inclusive.
 - —All applicable interchanges between Exit 129 and Exit 249 at Duluth, inclusive.
- I90—All interchanges between the South Dakota and Wisconsin borders, with the exception of Exit 175 through 181, inclusive, at Austin, MN.
 - —No signing allowed at Jct. of I90 and I35; I35E and I35W north and south; I35 and I535.
- 194—All interchanges between Exit 2 and Exit 213, inclusive.
 - —No signing allowed on I494 and I694 or within the Twin Cities metropolitan freeway routes I35E, I35W, I94, I394.

Expressways Eligible for the Logo Sign Program

- T.H. 10—Frazee, Jct. of T.H. 87
 - -Perham, Jct. of T.H. 78
 - -New York Mills, Jct. of CSAH 67.
 - -Little Falls, Jct. of T.H. 27
 - -Little Falls, Jct. of CR 260
- T.H. 14—Kasson, Jct. of T.H. 57
- T.H. 52—Hampton, Jct. of T.H. 50
 - -Cannon Falls, Jct. of T.H. 19
 - -Zumbrota, Jct. of T.H. 60
 - -Zumbrota, Jct. of T.H. 58
 - -S.E. of Zumbrota, Jct. of T.H. 60
 - -Pine Island, Jct. of CSAH 11
- T.H. 60—East of St. James, Jct. CSAH 12
 - -S.W. of St. James, Jct. of T.H. 4/CSAH 57
 - -So. of St. James, Jct. of T.H. 4/CSAH 14/T.H. 30
 - -Madelia, Jct. of CSAH 9
 - -Madelia, Jct. of CSAH 3
 - -Madelia, Jct. of T.H. 15
- T.H. 169—No. of Princeton, Jct. of CSAH 29, North Jct.
 - -Princeton, Jct. of T.H. 95

- -Princeton, Jct. of CSAH 29, South Jct.
- -LeSueur, Jct. of T.H. 112
- -LeSueur, Jct. of T.H. 93/CSAH 8

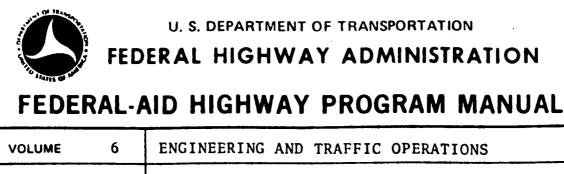
All interchanges eligible for Logo Signing Program subject to permit approval by District Traffic Engineer to insure compliance with applicable Logo Signing Program criteria and inplace signing devices.



NONDISCRIMINATION REGULATIONS

Compliance with Regulations

During the performance of the work and services hereunder, CDI for itself, its assignees, and successors in interest shall comply with Title VI of the Civil Rights Act of 1964, as amended. Accordingly, 49 Code of Federal Regulations (CFR) 21 through Appendix H and 23 CFR 710.405(b) are made a part hereof by reference with the same force and effect as though fully set forth herein.



VOLUME 6 ENGINEERING AND TRAFFIC OPERATIONS CHAPTER 8 TRAFFIC OPERATIONS SECTION 3 TRAFFIC CONTROL

SUBSECTION 8

NATIONAL STANDARDS FOR SPECIFIC INFORMATION SIGNS

EXHIBIT 3

Transmittal 297 February 9, 1979 HTO-21

- Par. 1. Purpose
 - 2. Authority
 - 3. Applicability
 - 4. Definitions
 - 5. Location
 - 6. Criteria for Specific Information Permitted
 - 7. Composition
 - 8. Special Requirements—Interstate Highways and Other Freeways
 - 9. Special Requirements—Expressways
 - 10. Special Requirements—Conventional Roads
 - 11. Procedures
- 1. PURPOSE. *To establish standards for signs erected within highway rights-of-way to provide directional information for business establishments offering goods and services in the interest of the traveling public.
- 2. AUTHORITY. 23 U.S.C. 109(d), 131(f), 315, and 49 CFR 1.48(b).
- 3. APPLICABILITY. The provisions of this directive are applicable to the Federal-aid primary highway system, including Interstate highways. However, nothing in this directive shall be construed to prevent any State from applying the standards to other classes of highways.
- 4. <u>DEFINITIONS</u>. Except as defined in this paragraph, the terms used in this directive shall be defined in accordance with the definitions and usage of the Manual on Uniform Traffic Control Devices (MUTCD).
- a. Business Sign—a separately attached sign mounted on the rectangular sign panel to show the brand, symbol, trademark, or name, or combination of these, for a motorist service available on a crossroad at or near an interchange or an intersection.
 - b. Specific Information Sign—a rectangular sign panel with:
 - (1) The words "GAS," "FOOD," "LODGING," or "CAMPING;"
 - (2) Directional information; and
- * Regulatory material is italicized and published in 23 CFR 655(c).

- (3) One or more business signs.
- c. State—any one of the 50 States, the District of Columbia, Puerto Rico, the Virgin Islands, Guam, or American Samoa.

5. LOCATION.

- a. <u>Intended for Rural Areas</u>. Specific information signs are intended for use primarily in rural areas. Any installation of such signs outside rural areas shall be consistent with the State signing policy criteria of paragraph 11b.
- b. <u>Lateral Location</u>. The specific information signs should be located so as to take advantage of natural terrain, to have the least impact on the scenic environment, and to avoid visual conflict with other signs within the highway right-of-way. Unprotected sign panel supports located within the clear zone shall be of a breakaway design.
- c. Relative Location. In the direction of traffic, successive specific information signs shall be those for "CAMPING," "LODGING," "FOOD," and "GAS" in that order.

6. CRITERIA FOR SPECIFIC INFORMATION PERMITTED

- a. <u>Conformity with Laws</u>. Each business identified on a specific information sign shall have given written assurance to the State of its conformity with all applicable laws concerning the provision of public accommodations without regard to race, religion, color, sex, or national origin, and shall not be in breach of that assurance.
- b. Distance to Services. The maximum distance that service facilities can be located from the main traveled way to qualify for a business sign shall be in accordance with State standards, but not to exceed 3 miles in either direction; except that, if within that 3-mile limit services of the type being considered are not available, the limit of eligibility may be extended in 3-mile increments until services of the type being considered, or 15 miles, are reached.
- c. Types of Services Permitted. The types of services permitted shall be limited to "GAS," "FOOD," "LODGING," and "CAMPING." To qualify for display on a specific information sign:
 - (1) "GAS" shall include:
 - (a) Vehicle services, which shall include fuel, oil, tire repair, and water;
 - (b) Restroom facilities and drinking water;
- (c) Continuous operation at least 16 hours per day, 7 days a week for freeways and expressways, and continuous operation at least 12 hours per day, 7 days per week for conventional roads; and
 - (d) Telephone.
 - (2) "FOOD" shall include:
 - (a) Licensing or approval, where required;
 - (b) Continuous operation to serve three meals a day, 7 days a week; and
 - (c) Telephone.
 - (3) "LODGING" shall include:
 - (a) Licensing or approval, where required;
 - (b) Adequate sleeping accommodations; and
 - (c) Telephone.
 - (4) "CAMPING" shall include:
 - (a) Licensing or approval, where required;
 - (b) Adequate parking accommodations; and
 - (c) Modern sanitary facilities and drinking water.
- d. Number of Signs Permitted. The number of specific information signs permitted shall be limited to one for each type of service along an approach to an interchange or intersection. The number of business signs permitted on a sign panel is specified in paragraphs 8b, 9b, and 10b. In exceptional cases, additional business signs may be considered.

7. COMPOSITION.

- a. Sign Panels. The sign panels shall have a blue background with a white reflectorized border. The panels may be illuminated. The size of the sign panels shall not exceed the minimum size necessary to accommodate the maximum number of business signs permitted using the required legend height and the interline and edge spacing specified in the MUTCD.
 - b. Business Signs. Business signs shall have a blue background with a white legend and border. The principal legend should be at

least equal in height to the directional legend on the sign panel. Where business identification symbols or trademarks are used alone for a business sign, the border may be omitted, the symbol or trademark shall be reproduced in the colors and general shape consistent with customary use, and any integral legend shall be in proportionate size. Messages, symbols, and trademarks which resemble any official traffic control device are prohibited. The vertical and horizontal spacing between business signs on sign panels shall not exceed 8 inches and 12 inches, respectively. Typical sign locations prepared from these standards are shown in Figures 8-1 and 8-2.

c. <u>Legends</u>. All directional arrows and all letters and numbers used in the name of the type of service and the directional legend shall be white and reflectorized.

8. SPECIAL REQUIREMENTS—INTERSTATE HIGHWAYS AND OTHER FREEWAYS.

a. Location

- (1) Separate Sign Panel. Except as provided in paragraph 8b(3), a separate sign panel shall be provided for each type of service for which business signs are displayed.
- (2) <u>Relationship to Exit Gore</u>. The specific information signs shall be erected between the previous interchange and 800 feet in advance of the exit direction sign at the interchange from which the services are available. There should be at least 800 feet spacing between the signs. Excessive spacing should be avoided.
- (3) Convenient Reentry Required. Specific information signs shall not be erected at an interchange where the motorist cannot conveniently reenter the freeway and continue in the same direction of travel, or at interchanges between freeways.
- (4) Exit Ramp Signs. At single-exit interchanges where service facilities are not visible from a ramp terminal, ramp signs shall be installed along the ramp or at the ramp terminal, and may be provided along the crossroad. These signs shall be duplicates of the corresponding specific information signs along the main roadway but reduced in size. Service information for visible facilities may be omitted. The signs shall include the distances to the service installations and directional arrows in lieu of words. The minimum letter height should be 4 inches except that any legend on a symbol shall be proportional to the size of the symbol. Ramp signing may be used on ramps and crossroads at double-exit interchanges.

b. Composition

- (1) Single-Exit Interchanges. The name of the type of service followed by the exit number shall be displayed in one line above the business signs. At unnumbered interchanges, the directional legend NEXT RIGHT (LEFT) shall be substituted for the exit number. The "GAS" specific information sign shall be limited to six business signs; the "FOOD," "LODGING," and "CAMP-ING" specific information signs shall be limited to four business signs each.
- (2) <u>Double-Exit Interchanges</u>. The specific information signs shall consist of two sections, one for each exit. The top section shall display the business signs for the first exit and the lower section shall display the business signs for the first exit and the lower section shall display the business signs for the second exit. The name of the type of service followed by the exit number shall be displayed in a line above the business signs in each section. At unnumbered interchanges, the legends NEXT RIGHT (LEFT) and SECOND RIGHT (LEFT) shall be substituted for the exit numbers. Where a type of motorist service is to be signed for at only one exit, one section of the specific information sign may be omitted, or a single-exit interchange sign may be used. The number of business signs on the sign panel (total of both sections) shall be limited to six for "GAS" and four each for "FOOD," "LODG-ING," and "CAMPING."
- (3) Remote Rural Interchanges. In remote rural areas, where not more than two qualified facilities are available for each of two or more types of services, business signs for two types of services may be displayed on the same sign panel. Not more than two business signs for each type of service shall be displayed in combination on a panel. The name of each type of service shall be displayed above its respective business sign(s), and the exit number shall be displayed above the names of the types of services. At unnumbered interchanges, the legend NEXT RIGHT (LEFT) shall be substituted for the exit number. Business signs should not be combined on a panel when it is anticipated that additional service facilities will become available in the near future. When it becomes necessary to display a third business sign for a type of service displayed in combination, the business signs involved shall then be displayed in compliance with paragraph 8b(1) and 8b(2).

c. Size

(1) Business Signs

- (a) Each business sign displayed on the "GAS" specific information sign shall be contained within a 48-inch wide and 36-inch high rectangular background area, including border.
- (b) Each business sign on the "FOOD," "LODGING," and "CAMPING" specific information signs shall be contained within a 60-inch wide and 36-inch high rectangular background area, including border.
- (2) <u>Legends</u>. All letters used in the name of the type of service and the directional legend shall be 10-inch capital letters. Numbers shall be 10 inches in height.

9. SPECIAL REQUIREMENTS—EXPRESSWAYS

a. Location

- (1) <u>Interchanges</u>. The location of specific information signs and exit ramp signs erected for interchanges shall be in accordance with the provisions of paragraph 8a.
- (2) Intersections. The specific information signs should be erected between the previous interchange or intersection and 300 feet in advance of the intersection from which the services are available. The spacing between sign panels, and between sign panels and other traffic control devices, should be determined on the basis of an engineering study. Business signs should not be displayed for a type of service for which a qualified facility is visible from a point on the traveled way 300 feet from the intersection. Signs similar to exit ramp signs of paragraph 8a(4) may be provided on the crossroad.

b. Composition

- (1) Interchanges. The composition of specific information signs and exit ramp signs erected for interchanges shall be in accordance with paragraph 8b.
- (2) Intersections. A maximum of four business signs for each type of service shall be displayed along each approach to the intersection. No more than four business signs shall be displayed on each sign panel. A maximum of two business signs for each of two different types of services may be combined on the same sign panel. The name of each type of service shall be displayed above its business sign(s) together with an appropriate legend such as NEXT RIGHT (LEFT) or a directional arrow.

c. Size

(1) Interchanges

- (a) Business Signs. Business signs shall conform to the sizes specified in paragraph 8c(1).
- (b) Legends. Legends shall conform to the requirements of paragraph 8c(2).

(2) Intersections

- (a) <u>Business Signs</u>. Each business sign shall be contained within a 36-inch wide and 24-inch high rectangular background area, including border; except that, where permitted in the State signing policy of paragraph 11b, the business signs may conform to the requirements of paragraph 8c(1).
- (b) <u>Legends</u>. All letters used in the name of the type of service and the directional legend shall be 6-inch capital letters; except that, where permitted in the State signing policy of paragraph 11b, the legends may conform to the requirements of paragraph 8c(2).
- (c) Coordination of Sizes. Business signs and legends in accordance with paragraph 8c(1) and 8c(2), respectively, shall be used only in combination with each other. They shall not be used on conventional roads.

10. SPECIAL REQUIREMENTS—CONVENTIONAL ROADS.

- a. Location. The location of the specific information signs shall be as specified in paragraph 9a(2).
- b. Composition. The composition of the specific information signs shall be as specified in paragraph b(2).
- c. Size
- (1) <u>Business Signs</u>. Each business sign shall be contained within a 24-inch wide and 18-inch high rectangular background area, including border.
 - (2) Legends. All letters used in the name of the type of service and the directional legend shall be 4-inch capital letters.

11. PROCEDURES.

- a. <u>State's Prerogative</u>. Specific information signs may be erected at the option of the State. All specific information signs erected on any highway open to public travel shall conform to the provisions of this directive.
- b. State Signing Policy. The State should develop a policy for specific information signing prior to sign installation. This policy, as a minimum, shall include criteria for:
 - (1) distances to eligible services;
 - (2) selection of eligible businesses;
- (3) use of business signs and legends conforming to the provisions of paragraph 8c(1) and 8c(2), respectively, at intersections on expressways:
 - (4) removing or covering business signs during off seasons for businesses operated on a seasonal basis:
 - (5) prescribing the circumstances, if any, in which specific information signs may be used outside rural areas; and

- (6) determining the costs to businesses for initial permits, installation, annual maintenance, removal, etc., of business signs.
- c. Eligibility of Funds. Federal-aid highway funds are eligible to participate in the cost and erection of specific information signs on Federal-aid highways in the same manner that such funds are eligible for other highway traffic control devices on the Federal-aid highway systems. Specific information signing installed as a subsequent phase to a completed Interstate segment is not eligible for Federal-aid Interstate construction funds. Federal-aid highway funds are not eligible to participate in the cost of procuring and installing business signs on sign panels or on ramp signs.
- d. Approvals. The procedures for obtaining approval for programming, project authorizations, and other actions for Federal-aid projects which include these signs shall follow the same procedures as other Federal-aid projects in the State.

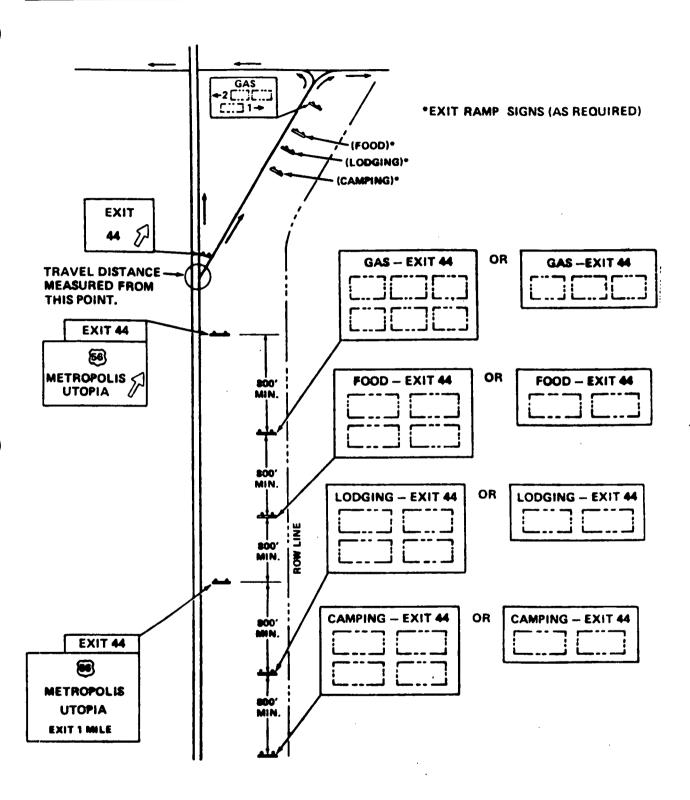
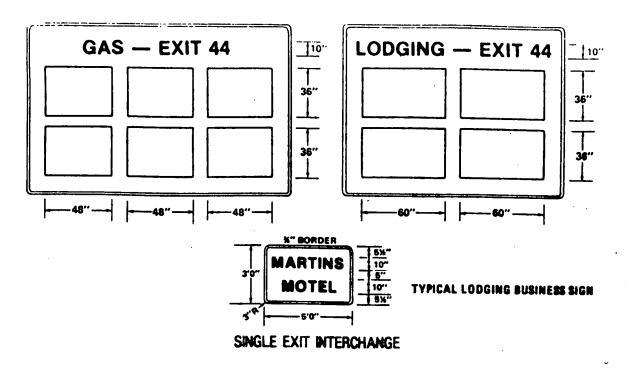
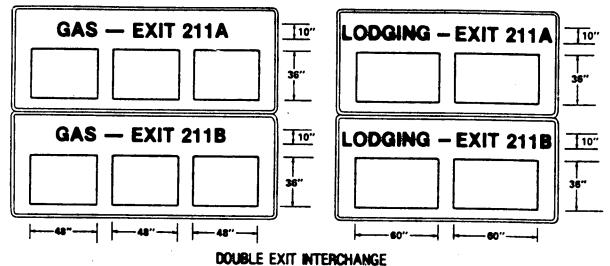


FIGURE 8-1. TYPICAL SIGNING FOR SINGLE EXIT INTERCHANGES





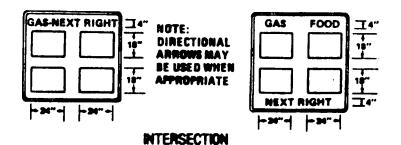


FIGURE 8-2. TYPICAL SPECIFIC INFORMATION SIGNS

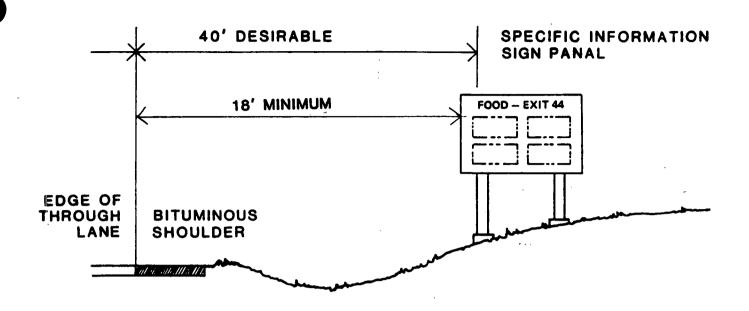
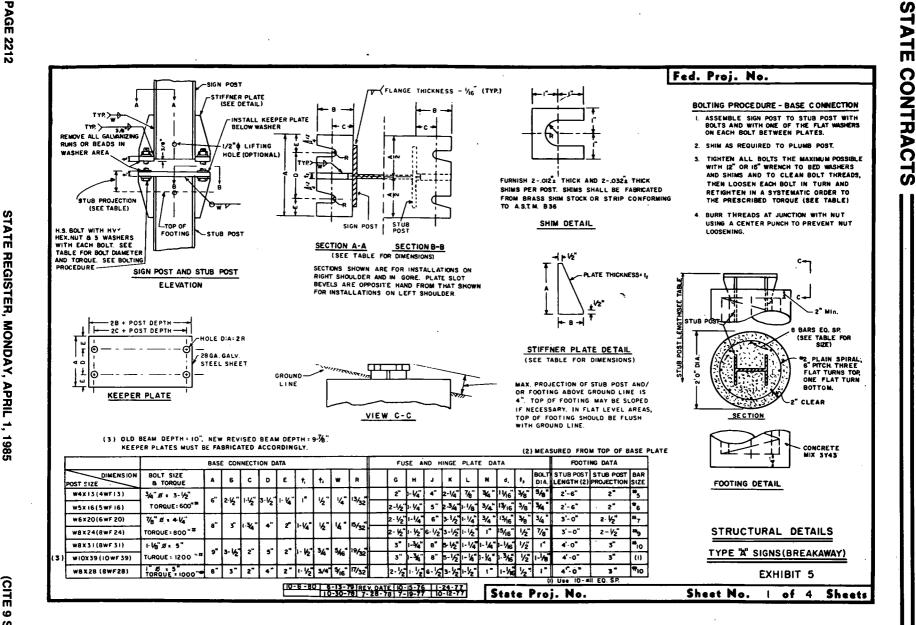
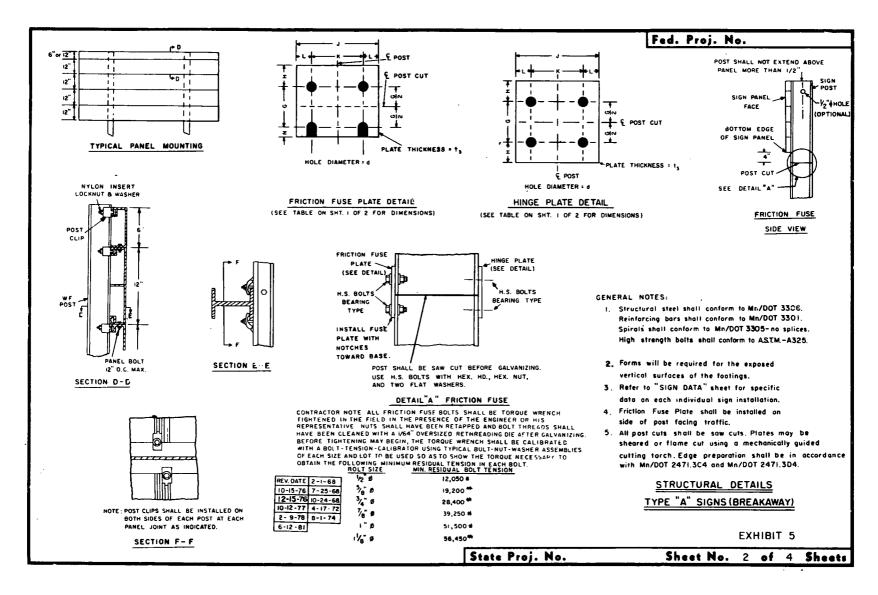
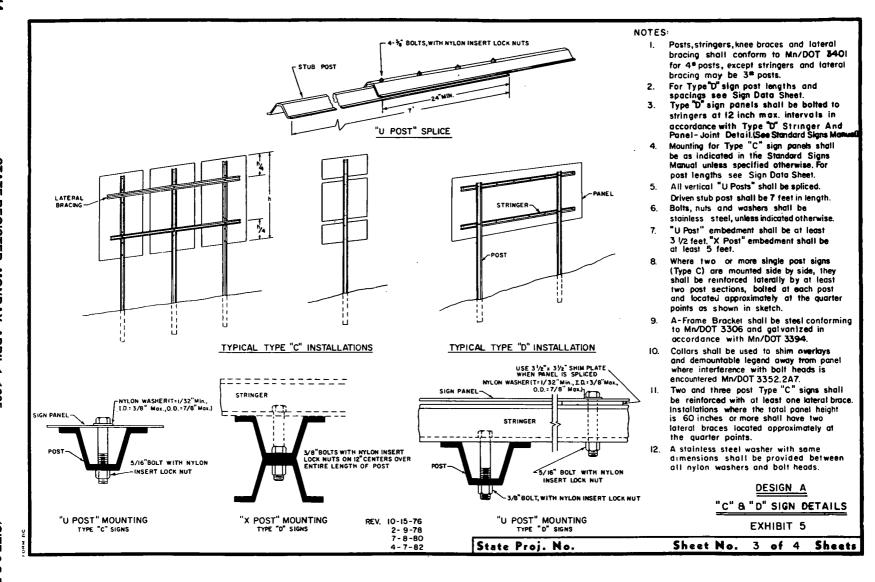


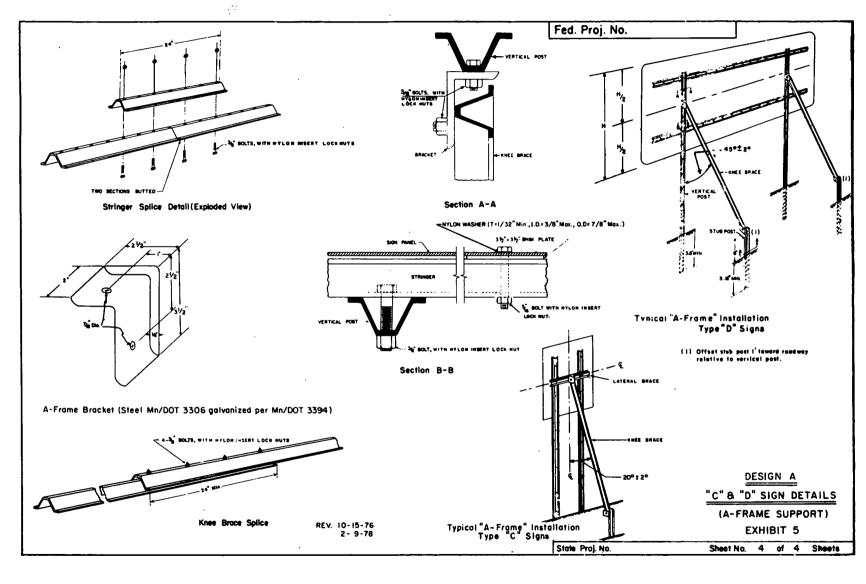
EXHIBIT 4 LATERAL SIGN PLACEMENT

EXHIBIT 4









STATE CONTRACTS

(3401) FLANGED CHANNEL SIGN POSTS

Flanged channel sign posts shall conform to the requirements of Mn/DOT 3401 except as modified below:

(A) Delete the provisions of Mn/DOT 3401.1 and Mn/DOT 3401.2A and substitute the following:

3401.1 SCOPE

This specification covers rerolled rail steel and comparable new billet steel posts for signs, delineators and guide posts.

3401.2 REQUIREMENTS

A. Material

The steel used in the manufacture of posts shall be rerolled rail steel or a comparable new billet steel. The steel shall conform to the mechanical requirements of ASTM A 499, Grade 60 and to the chemical requirements of ASTM A1 for rails having nominal weights of 91 pounds or heavier per yard.

SUPREME COURT

Decisions Filed Friday, March 22, 1985

Compiled by Wayne O. Tschimperle, Clerk

C3-83-1108 State of Minnesota v. Angel B. Gonzales-Guerrero, Appellant. Hennepin County.

Trial court did not abuse it discretion in admitting statement of defendant to police without excising reference to prior arrest on similar charge, where purpose of admitting the evidence was to show jury that defendant tried to escape prosecution by lying to police.

Affirmed. Amdahl, C.J.

C0-84-1058 Kling Emmett Berry, Petitioner-Appellant, v. State of Minnesota. Hennepin County.

Trial court did not abuse it discretion by denying appellant's petition for postconviction relief.

Affirmed. Amdahl, C.J.

C3-83-1139 Raymond Case, Petitioner, Appellant, v. State of Minnesota. Court of Appeals.

We adhere to our holding in *State v. Knaffla*, 309 Minn. 246, 243 N.W. 2d 737 (1976), that where a direct appeal has once been taken in a criminal case, all matters raised therein and all claims known but not raised will not be considered upon a subsequent petition for postconviction relief. Only where a claim is so novel that it can be said that its legal basis was not reasonably available to counsel at the time of direct appeal should postconviction relief be allowed.

Affirmed. Scott, J.

Concurring specially, Wahl, J., Yetka, J., & Coyne, J.

C3-84-1040 Charles H. Hansen v. Jer Her Builders and General Accident Group, Relators. Workers' Compensation Court of Appeals.

Employee sustained comminuted fractures of bones in the left cheek and subsequently was awarded compensation for 50 weeks representing "10% permanent partial disability of the body as a whole," pursuant to a stipulation based on an ophthalmologist's opinion that employee has sustained a "13% permanent partial disability to the visual field or the body as a whole." In this proceeding to obtain benefits for a 15% permanent partial disability of the head resulting from the same injury, based on a plastic surgeon's opinion, it is held:

The prior settlement award does not bar employee from asserting this claim for permanent partial disability of the head.

The Workers' Compensation Court of Appeals did not err in determining that the compensation judge's finding of a 5% noncompensable permanent partial disability of the head was manifestly contrary to the evidence. That court's substituted finding that employee sustained a compensable permanent partial disability of the head has substantial evidentiary support.

This case is remanded to determine to what extent the disability rating awarded on the second claim petition includes disabilities already included in the prior settlement.

Affirmed in part, reversed in part, and remanded. Simonett, J.

C8-84-1664 Robert J. Bertrand, Employee, v. API, Inc. and Bituminous Insurance Company; API, Inc., and Insurance Company of North America; API, Inc. and Employers Insurance of Wausau; G.A. MacArthur Company and American Mutual Insurance Company; G.A. MacArthur Company and Hartford Insurance Company; Vono Pipe Covering and Iowa National Mutual Insurance Company; Hayes Insulation and Associated Indemnity Company; E.H. Anderson Company and AID Insurance Company; E.H. Anderson Company and Fireman's Fund Insurance Company; E.H. Anderson Company and Connecticut Indemnity Company; Hickory Insulation and Argonaut Insurance Company; E & S Insulation Company and Aetna Life and Casualty; State Treasurer, Custodian of the Special Compensation Fund; General Pipe Covering and Great Central Insurance Company; and General Pipe Covering and Minnesota Mutual Insurance Company, Relators. Workers' Compensation Court of Appeals.

The "bright line" rule of Flowers v. Consolidated Container Corp., 336 N.W. 2d 255 (Minn. 1983) is not applicable when an employee contracted asbestosis while working for numerous employers.

The employer and insurer who were on the risk during the period of last substantial exposure to asbestos is liable to the employee for workers' compensation benefits.

Affirmed. Kelley, J.

TAX COURT =

Pursuant to Minn. Stat. § 271.06, subd. 1, an appeal to the tax court may be taken from any official order of the Commissioner of Revenue regarding any tax, fee or assessment, or any matter concerning the tax laws listed in § 271.01, subd. 5, by an interested or affected person, by any political subdivision of the state, by the Attorney General in behalf of the state, or by any resident taxpayer of the state in behalf of the state in case the Attorney General, upon request, shall refuse to appeal. Decisions of the tax court are printed in the State Register, except in the case of appeals dealing with property valuation, assessment, or taxation for property tax purposes.

State of Minnesota Tax Court

John R. Sandberg, Appellant, v. Commissioner of Revenue, Appellee, Docket No. 4031

Findings of Fact, Conclusions of Law, and Order for Judgement Dated March 18, 1985

The above-entitled matter was tried by the Minnesota Tax Court, Judge Carl A. Jensen presiding, at the Hennepin County Government Center in Minneapolis, Minnesota on November 20, 1984. Briefs were subsequently submitted by the parties.

Ford M. Robbins, Attorney with Robbins and Rashke, appeared on behalf of appellant.

Amy Eisenstadt, Special Assistant Attorney General, appeared on behalf of appellee.

Findings of Fact

- 1. Appellant John R. Sandberg was born and raised in the State of Minnesota. Except for one and one-half years in California, appellant had always lived in the Twin Cities area prior to the spring of 1978. Appellant was a resident and domiciliary of the State of Minnesota until at least April, 1978.
- 2. In April, 1978, appellant was divorced from his wife, Patricia Sandberg. Appellant transferred his interest in their home to Patricia Sandberg. In June, 1978, he purchased a condominium in Brooklyn Center on his ex-wife's behalf, as she was unable to obtain financing.
- 3. Since April, 1978, appellant has had the use of a bedroom and sitting room in the home of a friend, Bill Scoggin, located at 304 Kissling, Robstown, Texas. Robstown is located outside of Corpus Christi. Appellant did not have a phone at this address, nor did he receive mail at this address. Appellant never entered into a written lease during the period of April, 1978 through December, 1981, having an oral month-to-month agreement.
- 4. In March, 1979, appellant purchased a new home located at 4195 Ximenes Lane, Plymouth, Minnesota. Appellant owned this home until 1983, when he sold it to his daughter, Janet Sandberg. The Plymouth house is approximately 1600 square feet, has three bedrooms and two finished rooms downstairs, and a three-car garage. Appellant's mother lived in the house for approximately one year. His daughters Sharon and Linda lived there for short periods. Janet Sandberg lived in the home during the period of June 1, 1981 through December 31, 1981. Ms. Sandberg paid \$400 per month rent during these months. Appellant gave his daughter \$400 per month during the period she paid rent for the home.
- 5. The mortgage payments to Crystal State Bank, Crystal, Minnesota, for the Plymouth home were a little over \$500 per month. The mortgage, for \$50,000, did not cover the entire cost of the home, which was approximately \$120,000.

TAX COURT:

- 6. Sandberg Leasing, a sole proprietorship formed in 1976, owned an industrial building located at 5475 North County Road 18, Plymouth, Minnesota, during the period of 1979 through 1981. This building housed Sandberg Leasing and two companies owned by appellant, Metal Masters of Minneapolis, Inc. and J.R.S. Enterprises, Inc. Sandberg Leasing purchased equipment and vehicles for lease to Metal Masters of Minneapolis, Inc. and J.R.S. Enterprises, Inc.
 - 7. Appellant built a home in Phoenix, Arizona which was completed in 1981.
 - 8. Appellant owned no real property in the state of Texas during the period in question.
- 9. Appellant was the president and sole shareholder of Metal Masters of Minneapolis, Inc., a Minnesota corporation, during the period in question. All assets of the company were located in Minnesota. The company was engaged in the precision machining of computer parts. During the period in question, appellant received the following employee wages from Metal Masters of Minneapolis, Inc.: 1979—\$117,600; 1980—\$127,000; 1981—\$197,270. Appellant reported these amounts as the total wages received on his federal tax return for the appropriate year.
- 10. Appellant was the president and sole shareholder of J.R.S. Enterprises, Inc., a Minnesota corporation, during the period in question. This company was engaged in the business of overhauling large aircraft engines. The company has been the sole supplier of an overhauler of engines for the Confederate Air Force ("CAF") since 1976.
- 11. The CAF is a national non-profit organization dedicated to the preservation of World War II airplanes. The organization is located in Harlingen, Texas, on the Mexican border. Appellant has been a member of the CAF since 1968 and has served on the advisory board since the mid-1970's. Athough there is a Minnesota wing of the CAF, appellant has never joined it because he was opposed to the local wing concept since its inception.
- 12. During the period in question, appellant was the president of Metal Masters, Inc., located in Reno, Nevada, and had other partnerships and business investments located in Arizona, California and Minnesota. Appellant had no business investments in Texas during this period.
- 13. On appellant's 1979 and 1980 Federal Income Tax Returns he reported income from Sandberg Leasing of \$10,096 in 1979 and \$6,527 in 1980. In 1981 appellant reported income of \$21,996 from Sandberg Leasing. In 1981 appellant also reported income of \$10,400 for consulting services.
- 14. During the period in question, the proportion of appellant's income earned from Metal Masters to his total income from Metal Masters and his sole proprietorships is as follows: 1979—92%; 1980—95%; 1981—86%.
- 15. Appellant renewed his Minnesota driver's license on November 29, 1979. He did not surrender that license during the period in question.
- 16. Appellant owned a 1979 Porsche and a 1970 Cadillac Eldorado registered in the State of Minnesota during the period in question. Various vehicles owned by Sandberg Leasing were also registered in appellant's name. All the vehicles were insured through fleet insurance obtained from the Jeff Nelson Agency, State Farm Mutual, Minneapolis, Minnesota. Appellant registered a 1979 Trans Am in Texas in 1980.
- 17. Appellant owned two aircraft that were registered in the State of Minnesota. He owned hangars at Crystal Airport and at Anoka County Airport in his own name. Metal Masters of Minneapolis, Inc. and J.R.S. Enterprises paid the expenses for the hangars in return for their use.
 - 18. Appellant did not change his address of record with the FAA to Texas until June 27, 1981.
- 19. During the period in question, appellant obtained medical services from the Mercy Medical Center, Coon Rapids, Minnesota on three occasions, and from the Mork Clinic, Anoka, Minnesota on five occasions. He received dental treatment from Ann Norlander, DDS, Minneapolis, Minnesota on three occasions in 1981 and had a flight physical in Minnesota in 1980. Appellant did not consult or seek treatment from any doctors located in Texas during the period in question.
- 20. Appellant paid rent, utilities and other bills for Lynn Schultz, a "personal friend" living in the Twin Cities during all or part of the period in question. He also paid rent for another "personal friend" who resided in the Twin Cities during part of this period.
- 21. When in Minnesota, appellant would stay at the home located at 4195 Ximenes Lane, Plymouth and with lady friends. Occasionally he stayed at hotels.
- 22. Much of the time appellant spent in Texas was spent in Harlingen. When in Harlingen, appellant would stay with friends or at a hotel.
- 23. From appellant's memory, he believes he spent approximately 115 days per year traveling in Reno, Los Angeles, Arizona, England, Jamaica, Bahamas, Honduras, Canada and Wisconsin; 50 to 60 days per year in Minneapolis and the remainder in Texas.
- 24. Appellant would spend some holidays in Minnesota, including every Fourth of July, and attended family functions here. He had social and personal reasons to be in Minnesota, as well as business purposes.

- 25. Appellant traveled a great deal both before and after April, 1978. Two long-time friends of appellant, Randall Sohn and Thomas Lipinski, testified that the amount they would see him had always been irregular because of appellant's extensive traveling. Mr. Sohn testified that he saw appellant in Minnesota more prior to 1978; Mr. Lipinski testified that he saw appellant in Minnesota about the same amount of time before and after 1978.
 - 26. Appellant was not registered to vote in any state during the period in question.
- 27. Since 1979, R. Thomas Coughlin has been employed by Metal Masters of Minneapolis, Inc. as the general manager. He would meet with appellant in Plymouth regarding business approximately four or five days a month. Maxine Smodell had responsibility for financial matters of the corporation. Ms. Smodell had been appellant's personal secretary for many years.
- 28. When appellant was not in Minneapolis, he would supervise his Minnesota businesses by calling Ms. Smodell. Occasionally Ms: Smodell would have a number where he could be reached.
- 29. Sometime after April, 1978, appellant opened a checking account with the First National Bank, Mercedes, Texas. Mercedes is located outside Harlingen, Texas. During the years in question appellant wrote 0-2 checks on this account per month. Account statements were mailed to 5475 North County Road 18, Minneapolis, Minnesota throughout the period in question. There was no address printed on the checks. Appellant did not open any other bank accounts in Texas during the period in question.
 - 30. Appellant opened a checking account in Arizona in 1981.
- 31. Appellant had a Cash Management Account with Merrill Lynch, New York, New York, during the period of 1979-1981. Account statements were mailed to 5475 North County Road 18, Plymouth, Minnesota.
- 32. Throughout the period in question, appellant had a checking account at Crystal State Bank, Crystal, Minnesota. The address printed on the checks was 5475 North County Road 18, Minneapolis, Minnesota and account statements were mailed to that address.
- 33. Appellant's most active checking account during 1979 through 1981 was located at Northwestern State Bank, Osseo, Minnesota. The address printed on the checks was 5475 North County Road 18, Minneapolis, Minnesota and account statements were mailed to that address.
- 34. During the period in question, appellant received numerous loans from the Crystal State Bank. The loans were used to purchase vehicles for Sandberg Leasing. The loans were taken out in the name of John R. Sandberg.
- 35. Appellant's only savings account during the period in question was located at First Federal, Minneapolis, Minneapolis,
 - 36. Throughout the period in question, appellant retained an accountant and an attorney located in Minnesota.
- 37. Appellant purchased a 19-foot runabout, motor and trailer in May. 1978. The boat and trailer were insured through State Farm Insurance, Jeff Nelson Agency, Minneapolis, Minnesota.
- 38. Throughout the period in question, appellant had life insurance obtained from State Farm Insurance, Jeff Nelson Agency, Minneapolis, Minnesota.
- 39. Although appellant had income subject to taxation by the State of Minnesota during 1979, 1980 and 1981, he did not file timely Minnesota income tax returns for these years. Appellant filed non-resident 1979, 1980 and 1981 returns in June, 1983, after demand was made by the Department of Revenue. Appellant did not report all income earned within Minnesota or from Minnesota property.
 - 40. Appellant wished to avoid Minnesota state income taxation.
- 41. Appellant filed an Appeal from the Commissioner's Orders for tax years 1979, 1980 and 1981 determining that appellant was a resident of Minnesota in Hennepin County.
 - 42. The facts support a finding that appellant was a resident of and domiciled in Minnesota during 1979, 1980 and 1981.

Conclusions of Law

- 1. During all of the period January 1, 1979 through December 31, 1981, appellant remained domiciled in Minnesota within the meaning of Minn. Stat. § 290.01, subd. 7.
- 2. Appellant's entire income for the period of January 1, 1979 through December 31, 1981 is assignable to Minnesota under Minn. Stat. § 290.17 (1).
 - 3. The Commissioner's Orders with respect to tax years 1979, 1980 and 1981 are affirmed in all respects.

LET JUDGMENT BE ENTERED ACCORDINGLY. A STAY OF 15 DAYS IS HEREBY ORDERED.

March 18, 1985

By the Court, Carl A. Jensen, Judge Minnesota Tax Court

State of Minnesota Tax Court

Dale B. Korkowski and Rhonda L. Korkowski, Appellants, v. The Commissioner of Revenue, Appellee, Docket No. 3956

Findings of Fact, Conclusions of Law, and Order for Judgement Dated March 25, 1985

The above-entitled matter came on for hearing before the Minnesota Tax Court in St. Paul on February 6, 1985, Judge Earl B. Gustafson presiding.

Dale Korkowski appeared pro se on behalf of appellants.

Neil F. Scott, Special Assistant Attorney General, appeared on behalf of appellee.

Findings of Fact

- 1. The appellants herein, Dale and Rhonda Korkowski, are cash basis calendar year taxpayers and residents of the State of Minnesota. The taxable year at issue is 1981.
- 2. During 1981, Dale Korkowski was employed as a machinist by Remmele Engineering, Inc., in St. Paul, and earned gross wages of \$27,617.03.
- 3. Appellants claim that, based on a contract entered into between Dale Korkowski and an organization referred to as Professional and Technical Service (P&TS), Mr. Korkowski sold his lifetime services to P&TS and that P&TS was entitled to all of Korkowski's earnings.
- 4. Appellant Dale Korkowski was subject to the same controls and supervision of his employer Remmele Engineering, Inc. as his fellow employees and entitled to the same benefits. Payments for his services were made payable directly to Korkowski as an employee of Remmele.
- 5. Appellants claim they are not liable for any 1981 income tax because, under this arrangement with P&TS, they received no income.
 - 6. Appellants' appeal is denied and found to be frivolous and also to be instituted for the purposes of delay.

Conclusions of Law

- 1. The Commissioner's Order of June 30, 1983 assessing taxes for 1981 is hereby affirmed.
- 2. The appellants are ordered to pay an additional \$1,200 in costs.

LET JUDGMENT BE ENTERED ACCORDINGLY. A STAY OF 15 DAYS IS HEREBY ORDERED.

March 25, 1985

By the Court, Earl B. Gustafson, Chief Judge Minnesota Tax Court

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