

# MINNESOTA STATUTES 1975 SUPPLEMENT

## 144.653 DEPARTMENT OF HEALTH

subdivision 6. The hearing and review thereof shall be in accordance with the relevant provisions of the administrative procedures act.

[1975 c 310 s 6,7,37]

[For text of subd 9, see M.S.1974]

### 144.802 Licensing.

No operator shall operate an ambulance service within this state unless it possesses a valid license to do so issued by the state board of health. The cost of the license shall be in an amount prescribed by the board pursuant to section 144.122. Licenses shall expire and be renewed as prescribed by the board pursuant to section 144.122. The state board of health shall not issue licenses for the operation of a newly established ambulance service in the state unless the service meets the standards required by sections 144.801 to 144.806 and the applicant has demonstrated to the satisfaction of the state board of health at a public hearing that the public convenience and necessity require the proposed ambulance service.

[1975 c 310 s 8]

### 144.952 Composition of the board.

[For text of subd 1, see M.S.1974]

Subd. 2. Membership terms, compensation of members, removal of members, the filling of membership vacancies, and fiscal year and reporting requirements shall be as provided in sections 214.07 to 214.09.

[1975 c 136 s 6]

## CHAPTER 145. PROVISIONS RELATING TO PUBLIC HEALTH

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### 145.031 Agreements to perform functions of state board of health.

Subdivision 1. The state board of health may enter into an agreement with any county, two or more contiguous counties, or city, hereafter called the designated agent, under which agreement the designated agent may agree to perform all or part of the licensing, inspection, and enforcement duties authorized under sections 144.075 and 144.12 and chapter 157. The agreement shall also set forth criteria by which the board will determine that the performance by the designated agent complies with state standards and is sufficient to replace licensing by the board. The agreement may specify minimum staff requirements and qualifications and provide for termination procedures if the board finds that the designated agent fails to comply with the terms and requirements of the agreement.

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Subd. 2. No designated agent may perform any licensing, inspection, or enforcement duties pursuant to the agreement in any territory outside of its jurisdiction.

Subd. 3. The scope of the agreements shall be limited to duties and responsibilities agreed upon by the parties and may provide a basis for automatic renewal and provisions for notice of intent to terminate by either party.

Subd. 4. During the life of the agreement the board shall not perform any licensing, inspection, or enforcement duties which the designated agent is required to perform under the agreement, except for inspections necessary to determine compliance with the agreement and this section. The board shall consult with, advise, and assist a designated agent in the performance of its duties under the agreement.

[1975 c 310 s 11]

### 145.12 County public health and home health service personnel; public health nursing committee.

**Subdivision 1. Members; expenses and payments.** The board of county commissioners of any county, except counties now or hereafter having a population of 550,000 or more, and except Cook, Isanti, and Kanabec counties, shall detail county public health nurses and home health service personnel to act under the direction of the county board of health or a public health nursing committee composed of at least five members, as follows:

(1) The county superintendent of schools if there be one, otherwise the county commissioners shall appoint one from among the superintendents of independent school districts in such county;

(2) The county health officer or a physician appointed by the county commissioners;

(3) A county commissioner appointed by the board of county commissioners;

(4) Two residents of the county appointed by the county commissioners.

The public health nursing committee of each county shall effect a permanent organization and meet at regular intervals with the nurses. The public health nursing and home health services shall be available to the entire population and shall not be restricted to persons eligible for public assistance.

The county board of each county having a county board of health or nursing committee may allocate in its annual budget a sum to be determined by the county board which sum may be used by such county board of health or nursing committee for the purpose of purchasing supplies and for the payment of necessary mileage at the legal rate, for the members of such board or committee when attending regular or special meetings of said board or committee such meetings not to exceed 12 in number annually, or for the payment of a per diem to the members of such board or committee for each such meeting necessarily attended; said expenses and payments to be made on verified accounts and payable out of the general revenue fund of such county by auditor's warrant after allowance by the county board. Members of the committee who are full time public employees shall not receive this per diem unless they suffer loss of compensation or benefits due to their service on the committee.

[1975 c 169 s 1]

[For text of subd 2, see M.S.1974]

### 145.425 Pay toilets in public places; prohibitions; penalty.

Pay toilets and urinals in public places, public conveyances or public buildings are prohibited unless at least one-half of the available toilets in the same area or rest room are free and maintained at the same standards of sanitation and upkeep. Violation of this section is a misdemeanor.

[1975 c 215 s 1]

### 145.43 Hearing aids; restrictions on sales.

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[For text of subds 1 and 2, see M.S.1974]

**Subd. 3.** [Repealed, 1975 c 182 s 2]

### 145.45 Penalties; remedies.

Subdivision 1. Any person who is found to have violated sections 145.43 to 145.45 is guilty of a misdemeanor.

Subd. 2. In addition to the penalties provided in subdivision 1, any person who is found to have violated sections 145.43 to 145.45 is subject to the penalties and remedies provided in section 325.79, subdivision 1.

[1975 c 182 s 1]

### 145.46 Dental health education program.

**Subdivision 1. Development of program.** The board of health shall assist school and community personnel, including dental professionals, to develop a comprehensive preventive oral health program in the elementary school community.

**Subd. 2. Objectives.** The program shall be operated so as to achieve the following:

(a) Decreasing oral disease through an instruction program or oral health education for teachers;

(b) Improving oral health knowledge, attitudes, and behavior of both the student and the wider school community, including educators, administrators, and parents; and

(c) Planning a sequential oral health education curriculum emphasizing behavior modification for the total health education program of a school system.

**Subd. 3. Duties of board of health.** (a) Technical assistance teams; inservice training of educators. The board of health shall establish technical assistance teams of dental hygienists, consulting dentists, and consulting health educators. The initial program will place one team in four state health regions and reflecting rural, suburban, and urban communities. The teams shall provide inservice education to teachers in the district on methods and techniques of dental behavior change.

(b) Guidelines for implementation in schools. The board of health shall provide guidelines to selected schools for the implementation of their programs to train classroom teachers to be dental health educators. The teachers shall participate in oral health education, analysis, and recording of data.

(c) Standards; evaluation. The board of health shall establish standards for program performance. These standards, together with accepted dental indices, shall be used by the technical assistance teams to evaluate school programs of oral health knowledge and behavior modification on test and control groups.

(d) Consultation to dental personnel. The board of health shall provide information and assistance to dental personnel on methods and techniques of oral health behavior improvement.

[1975 c 434 s 25]

### 145.61 Definitions.

[For text of subds 1 to 4a, see M.S.1974]

Subd. 5. "Review organization" means a committee whose membership is limited to professionals and administrative staff, except where otherwise provided for by state or federal law, and which is established by a hospital, by a clinic, by one or more state or local associations of professionals, by an organization of professionals from a particular area or medical institution, by a health maintenance organization as defined in Minnesota Statutes, Chapter

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62D, by a nonprofit health service plan corporation as defined in Minnesota Statutes, Chapter 62C or by a professional standards review organization established pursuant to 42 U.S.C., Section 1320c-1 et seq. to gather and review information relating to the care and treatment of patients for the purposes of:

(a) Evaluating and improving the quality of health care rendered in the area or medical institution;

(b) Reducing morbidity or mortality;

(c) Obtaining and disseminating statistics and information relative to the treatment and prevention of diseases, illness and injuries;

(d) Developing and publishing guidelines showing the norms of health care in the area or medical institution;

(e) Developing and publishing guidelines designed to keep within reasonable bounds the cost of health care;

(f) Reviewing the quality or cost of health care services provided to enrollees of health maintenance organizations;

(g) Acting as a professional standards review organization pursuant to 42 U.S.C., Section 1320c-1 et seq.;

(h) Determining whether a professional shall be granted staff privileges in a medical institution or whether a professional's staff privileges should be limited, suspended or revoked; or

(i) Reviewing, ruling on, or advising on controversies, disputes or questions between:

(1) health insurance carriers or health maintenance organizations and their insureds or enrollees;

(2) professional licensing boards acting under their powers including disciplinary, license revocation or suspension procedures and health providers licensed by them when the matter is referred to a review committee by the professional licensing board;

(3) professionals and their patients concerning diagnosis, treatment or care, or the charges or fees therefor;

(4) professionals and health insurance carriers or health maintenance organizations concerning a charge or fee for health care services provided to an insured or enrollee; or

(5) professionals or their patients and the federal, state, or local government, or agencies thereof.

[1975 c 73 s 1]

### **145.64 Confidentiality of records of review organization.**

All data and information acquired by a review organization, in the exercise of its duties and functions, shall be held in confidence, shall not be disclosed to anyone except to the extent necessary to carry out one or more of the purposes of the review organization, and shall not be subject to subpoena

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or discovery. No person described in section 145.63 shall disclose what transpired at a meeting of a review organization except to the extent necessary to carry out one or more of the purposes of a review organization. The proceedings and records of a review organization shall not be subject to discovery or introduction into evidence in any civil action against a professional arising out of the matter or matters which are the subject of consideration by the review organization. Information, documents or records otherwise available from original sources shall not be immune from discovery or use in any civil action merely because they were presented during proceedings of a review organization, nor shall any person who testified before a review organization or who is a member of it be prevented from testifying as to matters within his knowledge, but a witness cannot be asked about his testimony before a review organization or opinions formed by him as a result of its hearings. The provisions of this section shall not apply to a review organization of the type described in section 145.61, subdivision 5, clause (h).

[1975 c 73 s 2]

### 145.72 Definitions.

[For text of subd 1, see M.S.1974]

Subd. 2. "Health care facility" means any hospital licensed as such under Minnesota Statutes 1969, Sections 144.50 to 144.56; any nursing home licensed as such under Minnesota Statutes 1969, Sections 144.50 to 144.56; or any boarding care home licensed as such under Minnesota Statutes 1969, Sections 144.50 to 144.56.

Subd. 3. "Construction or modification" means the erection, building, alteration, reconstruction, modernization, improvement, extension, or purchase or acquisition of diagnostic or therapeutic equipment, by a health care facility, involving an expenditure which, under generally accepted accounting principles, is not properly chargeable as an expense of operation and maintenance and which

(1) requires a total capital expenditure in excess of \$100,000; or

(2) expands or extends the scope or type of service rendered and requires a capital expenditure in excess of \$50,000; or

(3) increases the bed complement of the facility and requires a capital expenditure in excess of \$50,000.

"Construction or modification" also means the purchase or acquisition of diagnostic or therapeutic equipment by a licensed medical doctor, a group of licensed medical doctors, or a professional corporation of licensed medical doctors organized pursuant to chapter 319A, which

(1) requires a capital expenditure in excess of \$100,000 for any one item of equipment or \$200,000 for two or more items of equipment; and

(2) is determined by the state board of health to be designed to circumvent the provisions of sections 145.71 to 145.83.

[For text of subd 4, see M.S.1974]

Subd. 5. "Area wide comprehensive health planning agency" means an agency established to meet the requirements of the Partnership for Health Act, P.L.89-749, as amended, and designated as such by the Minnesota state plan-

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ning agency, or a successor agency designated pursuant to the National Health Planning and Resources Development Act, P.L.93-641; provided that in the metropolitan area the area wide comprehensive health planning agency shall be the metropolitan council, if it has appointed a health board to advise it meeting the requirements of section 145.74.

[1975 c 299 s 1-3]

[For text of subd 6, see M.S.1974]

### 145.74 Health planning agencies; membership regulations.

The state planning agency shall, subject to chapter 15, after consulting with the state board of health promulgate regulations concerning the membership of area wide comprehensive health planning agencies. The regulations shall include, but not be limited to, the following factors. The regulations shall:

(1) comply with the provisions of the Partnership for Health Act, P.L.89-749, as amended, and with the National Health Planning and Resources Development Act, P.L.93-641;

(2) provide that a majority of the membership be composed of consumers;

(3) provide for representation of providers of each of the following: hospital, nursing home and boarding care;

(4) provide for representation of licensed medical doctors and other health professionals;

(5) provide for a fixed term of membership; and

(6) provide that members of an area wide comprehensive health planning agency shall not select their successors.

No existing area wide comprehensive health planning agency shall exercise the functions provided in sections 145.71 to 145.83 until it is in compliance with regulations issued pursuant to this section.

If there is no area wide comprehensive health planning agency in a designated area of the state in compliance with sections 145.71 to 145.83, the Minnesota state planning agency shall perform the functions and duties of an area wide comprehensive health planning agency for that area.

[1975 c 299 s 4]

### 145.751 Comprehensive study.

The areawide comprehensive health planning agency shall conduct a comprehensive study in its jurisdiction to:

(a) determine the needs for health care services or facilities which are not met by existing services or facilities;

(b) identify health care services and facilities which are duplicative; and

(c) develop guidelines for the sharing of costly technical equipment and services by health care facilities.

The areawide comprehensive health planning agency shall annually review and amend the conclusions of the study.

[1975 c 299 s 5]

### 145.76 Procedure prior to proposal.

Subdivision 1. Except as provided in subdivision 2, no health care facility, or person, group, corporation or association intending to embark upon a program of construction or modification of a health care facility, shall engage architectural, professional consultation, or fund raising services with respect to the project until it has notified the area wide comprehensive health planning agency of its intention to engage such services. The notice shall state simply the nature of the architectural, professional consultation, or fund raising services to be engaged and the nature of the construction or modification contem-

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plated. Upon receipt of notice under this section, the area wide comprehensive health planning agency shall promptly notify the state board of health and the state planning agency. Any person submitting a notice may, at the time of submission of the notice to the area wide comprehensive health planning agency, request a written determination by the state board of health as to whether the project is subject to the provisions of sections 145.71 to 145.83 and whether a proposal must be submitted. Upon receipt of a request, the area wide comprehensive health planning agency shall within ten days notify the state board of health and the state planning agency for the purpose of determining whether a proposal is required to be submitted. The applicant shall be notified by the state board of health of the determination in writing not later than 60 days after the request is submitted to the area wide comprehensive health planning agency. No area wide comprehensive health planning agency shall be required to accept or act upon a proposal if the notice required by this section has not been given. Nothing in this section shall be construed to limit in any way the right to engage architectural, professional consultation, or fund raising services.

Subd. 2. A licensed medical doctor, a group of licensed medical doctors, or a professional corporation of licensed medical doctors proposing to purchase or acquire one or more items of diagnostic or therapeutic equipment which require capital expenditure in excess of \$100,000 for a single item or \$200,000 for two or more items shall, prior to purchasing or acquiring the equipment, notify the area wide comprehensive health planning agency and the state board of health of the proposed acquisition or purchase. The state board of health shall, within 60 days of receipt of the notice, determine whether or not the proposed acquisition or purchase is designed to circumvent the provisions of sections 145.71 to 145.83. A hearing shall be held if requested by the applicant or the area wide comprehensive health planning agency. The board of health shall notify the applicant and the area wide comprehensive health planning agency in writing of its determination. If the state board of health determines that the proposed acquisition or purchase is not designed to circumvent the provisions of sections 145.71 to 145.83, no certificate of need shall be required of the applicant. If the state board of health determines that the proposed acquisition or purchase is designed to circumvent the provisions of sections 145.71 to 145.83, the applicant must obtain a certificate of need.

[1975 c 299 s 6]

### 145.78 Proposal procedure.

Proposals for health care facility construction or modification shall be made to the area wide comprehensive health planning agency serving the area in which the proposed construction or modification is to take place. Prior to acting on the proposal, the area wide comprehensive health planning agency shall send a copy to the state board of health and to the state planning agency. In reviewing each proposal, the area wide comprehensive health planning agency shall:

- (1) hold a public hearing;
- (2) provide notice of the public hearing by publication in a legal newspaper of general circulation in the area for two successive weeks at least ten days before the date of such hearing;
- (3) allow any interested person the opportunity to be heard, to be represented by counsel, to present oral and written evidence, and to confront and cross-examine opposing witnesses at the public hearing;
- (4) provide a transcript of the hearing at the expense of any individual requesting it, if the transcript is requested at least three days prior to the hearing;
- (5) make findings of fact and recommendations concerning the proposal which findings and recommendations shall be available to any individual requesting them; and
- (6) follow any further procedure not inconsistent with sections 145.71 to

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145.83 or Minnesota Statutes 1969, Chapter 15, which it deems appropriate.

Within 90 days after receiving the proposal, the area wide comprehensive health planning agency shall make its recommendation to the state board of health. The area wide comprehensive health planning agency shall either recommend that the state board of health issue, or refuse to issue, a certificate of need or forward the proposal with recommendations for modification of the proposal. The reasons for the recommendation shall be set forth in detail.

[1975 c 299 s 7]

### 145.80 Expiration of certificate.

A certificate of need shall expire if the construction or modification is not commenced within one year following the issuance of the certificate.

No certificate of need shall be renewed automatically after expiring before the commencement of the construction or modification. Upon expiration of the certificate, the facility shall present an updated proposal and the agency shall redetermine its recommendation.

[1975 c 299 s 8]

### 145.81 [Repealed, 1975 c 299 s 12]

### 145.811 Appeals.

The decision of the state board of health made pursuant to section 145.79, clauses (a) and (b) shall be the final administrative decision. Notwithstanding that the proceeding before the state board of health is not a contested case, any person aggrieved by the decision of the state board of health denying a certificate of need shall be entitled to judicial review in the manner provided for in sections 15.0424 to 15.0426.

[1975 c 299 s 9]

### 145.812 Board may appeal to the supreme court.

In order to effectively carry out the public policy of the certificate of need law as expressed in section 145.71, the state board of health shall not be prohibited from securing a review of any final order or judgment of the district court under sections 15.0424 or 15.0425 by appeal to the supreme court. Appeal shall be taken in the manner provided by law for appeals from orders or judgments of the district court in other civil cases.

[1975 c 299 s 10]

### 145.82 Evasions.

No health care facility shall separate portions of a single project into components in order to evade the cost limitations of section 145.72, subdivision 3.

[1975 c 299 s 11]

### 145.865 Advisory committee.

Subdivision 1. The board shall establish an advisory committee to assist in formulating policies pursuant to sections 145.861 to 145.866. The board shall determine the duties of the committee, shall establish procedures for the proper functioning of the committee including, but not limited to the following, the method of selection of membership, the terms of membership, the selection of a committee chairman and methods of communicating recommendations and advice to the board for its consideration. Each of the health-related licensing boards as defined in section 214.01, subdivision 2, the state examining committee for physical therapists, the advisory council for hospital administrator's registration, the consumer services section of the department of commerce, the state comprehensive health planning advisory council and the higher education coordinating commission shall have a representative selected by such boards, section or commission. The governor shall appoint the remaining members which shall not exceed eleven and shall include six persons



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broadly representative of health care services particularly allied health professions not presently licensed, registered or certified pursuant to existing law and five public members unrelated to any health care delivery profession. The committee shall expire and the terms of the appointed members and the compensation and removal of all members shall be as provided in section 15.059.

**Subd. 2.** [Repealed, 1975 c 315 s 26]

[1975 c 234 s 2; 1975 c 315 s 11]

[For text of subd 3, see M.S.1974]

### 145.866 Fees.

A fee prescribed by the board pursuant to section 144.122 shall be submitted with each application for examination and issuance of a credential established by the board pursuant to sections 145.861 to 145.865. Each credential shall expire and be renewed as prescribed by the board pursuant to section 144.122.

[1975 c 310 s 10]

### 145.891 Citation.

Sections 145.891 to 145.897 shall be known as the "maternal and child nutrition act of 1975."

[1975 c 346 s 1]

### 145.892 Definitions.

Subdivision 1. For purposes of sections 145.891 to 145.897, the terms defined in this section have the meanings given them.

Subd. 2. "Local health agency" means the county public health nursing service or any public or private nonprofit organization which enters into a contract with the board of health pursuant to sections 145.891 to 145.897.

Subd. 3. "Pregnant woman" means an individual determined by a licensed physician, midwife, or appropriately trained registered nurse to have one or more fetuses in utero.

Subd. 4. "Lactating woman" means any breast feeding individual who presents competent evidence of having been delivered of a surviving child within the 12 months immediately preceding the filing of an application for nutritional supplements.

Subd. 5. "Infant" means an individual under one year of age.

Subd. 6. "Child" means an individual one to four years of age.

Subd. 7. "Nutritional risk" means individuals with any of the following characteristics:

(a) For pregnant and lactating women:

(i) Known inadequate nutritional patterns;

(ii) Anemia;

(iii) History of prematurity or miscarriage; or

(iv) Inadequate patterns of growth (underweight, obesity, or stunting).

(b) For infants and children:

(i) Low birth weight;

(ii) Deficient patterns of growth;

(iii) Anemia; or

(iv) Known inadequate nutritional patterns.

Subd. 8. "Low birth weight" means a birth weight of less than 2,500 grams.

Subd. 9. "Nutritional supplements" means any food authorized by the board to be made available under this program.

Subd. 10. "Board" means the state board of health or its representative.

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[1975 c 346 s 2]

### 145.893 Nutritional supplement program.

Subdivision 1. An eligible individual shall receive vouchers for the purchase of specified nutritional supplements in type and quantity approved by the board. Alternate forms of delivery may be developed by the board in appropriate cases.

Subd. 2. An individual shall be eligible for nutritional supplements who is not receiving a similar supplement under any federal, state, or local program and

- (a) Is pregnant or lactating; or
- (b) Is an infant or a child; and
- (c) Is eligible for or a recipient of any form of public assistance authorized by law and is certified by the local health agency to be a nutritional risk; or
- (d) Is certified by the local health agency to be a nutritional risk and is without sufficient resources to purchase necessary nutritional supplements.

Subd. 3. Eligibility for nutritional supplements shall cease upon certification by the local health agency that the individual is no longer a nutritional risk, but in no case later than:

- (a) For lactating women, 12 months after the birth of a surviving child; and
- (b) For children, at four years of age.

[1975 c 346 s 3]

### 145.894 State board of health; duties, responsibilities.

The board of health shall:

- (a) Develop a comprehensive state plan for the delivery of nutritional supplements to pregnant and lactating women, infants, and children;
- (b) Contract with existing local public or private nonprofit organizations for the administration of the nutritional supplement program;
- (c) Develop and implement a public education program promoting the provisions of sections 145.891 to 145.897, and provide for the delivery of individual and family nutrition education and counseling at project sites;
- (d) Develop in cooperation with other agencies and vendors a uniform state voucher system for the delivery of nutritional supplements;
- (e) Develop, analyze and evaluate the health aspects of the nutritional supplement program and establish nutritional guidelines for the program;
- (f) Apply for and administer any available federal or private funds;
- (g) Coordinate with the state and local public welfare agencies in identifying eligible individuals;
- (h) Promulgate all rules and regulations necessary to carry out the provisions of sections 145.891 to 145.897;
- (i) Report to the legislature by November 15 of every year on the expenditures and activities under sections 145.891 to 145.897 of the state and local health agencies for the preceding fiscal year.

[1975 c 346 s 4]

### 145.895 Department of public welfare.

The commissioner of public welfare shall cooperate with the board of health in identifying eligible individuals. The commissioner shall provide a procedure for the notification of pregnant or lactating women, infants and children receiving any form of public assistance of eligibility for benefits under this program.

[1975 c 346 s 5]

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### 145.896 Program not a substitute or replacement.

This program shall not be a replacement or substitute for any other local, state, or federal program administered through the departments of health or public welfare, nor shall the value of the nutritional supplements be included in eligibility determination for other assistance programs.

[1975 c 346 s 6]

### 145.897 Vouchers.

Vouchers issued pursuant to sections 145.891 to 145.897 shall be only for the purchase of those foods determined by the board to be desirable nutritional supplements for pregnant and lactating women, infants and children. These foods shall include, but not be limited to, iron fortified infant formula, vegetable or fruit juices, cereal, milk, cheese, and eggs.

[1975 c 346 s 7]

## CHAPTER 146. HEALING ARTS, REGISTRATION

### Sec. 146.13 Registration fees.

#### 146.13 Registration fees.

Every person not hereinafter excepted from the provisions of this chapter authorized to practice healing in this state shall, in the month of January each year, register with the secretary of the particular board of examiners which examined and registered or licensed him to practice that branch or system of healing which he pursues; and shall, at that time, for the purpose of making such registration, send to such secretary in writing signed by him his name, the name of the place, and the address, at which he is engaged in the practice of healing and pay to the secretary each year a fee in an amount to be fixed by rule of the respective board of examiners. Any person who shall change the address or place at which he practices healing during the year shall forthwith notify such secretary in writing of such change, giving such new address or place. The secretary of each board of examiners shall keep a proper register of all such persons and to each person so registering the proper board shall issue a certificate for the current year, signed by the president and the secretary and sealed with the seal of such board, setting forth his name, the name of the place and the address at which he is engaged in the practice of healing, and the branch or system of healing by him pursued. Any person not hereinafter excepted from the provisions of this chapter lawfully entitled to engage in the practice of healing in this state after the month of January in any year, and who shall not be registered as provided in this section, shall, within 30 days after first so engaging in the practice of healing, register with the proper examining board in the manner provided in this chapter, pay to the secretary of such board the fee above required, and received from such board a certificate as above prescribed for the balance of such year. Every person receiving a certificate, as herein provided, shall display the same in a conspicuous place in the office or other corresponding place where he pursues the practice of healing.

All fees received by the secretary of any examining board for registration required by this section shall be paid to the general fund. The expenses of keeping proper registers, furnishing the certificates herein provided for, employing inspectors for procuring evidence of any violation of the laws administered thereby and aiding in the enforcement of such laws, and for such other expenses as may be necessarily paid or incurred in the exercise of its powers or performance of its duties, shall be paid from the appropriation made to the examining board.

[1975 c 233 s 1]