CHAPTER 214

EXAMINING AND LICENSING BOARDS

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214.001 POLICY AND REGULATION.

[For text of subds 1 to 3, see M.S.2000]

Subd. 4. Information from council of health boards. The chair of a standing committee in either house of the legislature may request information from the council of health boards on proposals relating to the regulation of health occupations.

History: 2001 c 161 s 37

214.002 EVIDENCE IN SUPPORT OF REGULATION.

Subdivision 1. Written report. Within 15 days of the introduction of a bill proposing new or expanded regulation of an occupation, the proponents of the new or expanded regulation shall submit a written report to the chair of the standing committee in each house of the legislature to which the bill was referred and to the council of health boards setting out the information required by this section. If a committee chair requests that the report be submitted earlier, but no fewer than five days from introduction of the bill, the proponents shall comply with the request.

[For text of subds 2 and 3, see M.S.2000]

History: 2001 c 161 s 38

214.01 DEFINITIONS.

[For text of subd 1, see M.S.2000]

Subd. 1a. **Council of health boards.** "Council of health boards" means a collaborative body established by the health-related licensing boards.

[For text of subd 2, see M.S.2000]

Subd. 3. Non-health-related licensing board. "Non-health-related licensing board" means the board of teaching established pursuant to section 122A.07, the board of barber examiners established pursuant to section 154.22, the board of assessors established pursuant to section 270.41, the board of architecture, engineering, land surveying, landscape architecture, geoscience, and interior design established pursuant to section 326.04, the board of electricity established pursuant to section 326.241, the private detective and protective agent licensing board established pursuant to section 326.33, the board of accountancy established pursuant to section 326A.02, the board of boxing established pursuant to section 341.01, and the peace officer standards and training board established pursuant to section 626.841.

History: 2001 c 109 art 2 s 3; 2001 e 161 s 39

NOTE: The amendment to subdivision 3 by Laws 2001, chapter 109, article 2, section 3, is effective January 1, 2003, Laws 2001, chapter 109, article 2, section 10.

214.025 COUNCIL OF HEALTH BOARDS.

The health-related licensing boards may establish a council of health boards consisting of representatives of the health-related licensing boards and the emergency medical services regulatory board. When reviewing legislation or legislative proposals

relating to the regulation of health occupations, the council shall include the commissioner of health or a designee.

History: 2001 c 161 s 40

214.09 MEMBERSHIP; COMPENSATION; REMOVAL; VACANCIES.

[For text of subds 1 and 2, see M.S.2000]

- Subd. 3. Compensation. (a) Members of the boards may be compensated at the rate of \$55 a day spent on board activities, when authorized by the board, plus expenses in the same manner and amount as authorized by the commissioner's plan adopted under section 43A.18, subdivision 2. Members who, as a result of time spent attending board meetings, incur child care expenses that would not otherwise have been incurred, may be reimbursed for those expenses upon board authorization.
- (b) Members who are state employees or employees of the political subdivisions of the state must not receive the daily payment for activities that occur during working hours for which they are also compensated by the state or political subdivision. However, a state or political subdivision employee may receive the daily payment if the employee uses vacation time or compensatory time accumulated in accordance with a collective bargaining agreement or compensation plan for board activity. Members who are state employees or employees of the political subdivisions of the state may receive the expenses provided for in this subdivision unless the expenses are reimbursed by another source. Members who are state employees or employees of political subdivisions of the state may be reimbursed for child care expenses only for time spent on board activities that are outside their working hours.
- (c) Each board must adopt internal standards prescribing what constitutes a day spent on board activities for purposes of making daily payments under this subdivision.

[For text of subd 4, see M.S.2000]

History: 2001 c 61 s 3; 1Sp2001 c 10 art 2 s 70

214.104 HEALTH-RELATED LICENSING BOARDS; DETERMINATIONS REGARDING MALTREATMENT.

- (a) A health-related licensing board shall make determinations as to whether regulated persons who are under the board's jurisdiction should be the subject of disciplinary or corrective action because of substantiated maltreatment under section 626.556 or 626.557. The board shall make a determination upon receipt, and after the review, of an investigation memorandum or other notice of substantiated maltreatment under section 626.556 or 626.557, or of a notice from the commissioner of human services that a background study of a regulated person shows substantiated maltreatment.
- (b) Upon completion of its review of a report of substantiated maltreatment, the board shall notify the commissioner of human services of its determination. The board shall notify the commissioner of human services if, following a review of the report of substantiated maltreatment, the board determines that it does not have jurisdiction in the matter and the commissioner shall make the appropriate disqualification decision regarding the regulated person as otherwise provided in chapter 245A. The board shall also notify the commissioner of health or the commissioner of human services immediately upon receipt of knowledge of a facility or program allowing a regulated person to provide direct contact services at the facility or program while not complying with requirements placed on the regulated person.
- (c) In addition to any other remedy provided by law, the board may, through its designated board member, temporarily suspend the license of a licensee; deny a credential to an applicant; or require the regulated person to be continuously supervised, if the board finds there is probable cause to believe the regulated person referred to the board according to paragraph (a) poses an immediate risk of harm to vulnerable

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persons. The board shall consider all relevant information available, which may include but is not limited to:

- (1) the extent the action is needed to protect persons receiving services or the public;
 - (2) the recency of the maltreatment;

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(3) the number of incidents of maltreatment;

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- (4) the intrusiveness or violence of the maltreatment; and
- (5) the vulnerability of the victim of maltreatment.

The action shall take effect upon written notice to the regulated person, served by certified mail, specifying the statute violated. The board shall notify the commissioner of health or the commissioner of human services of the suspension or denial of a credential. The action shall remain in effect until the board issues a temporary stay or a final order in the matter after a hearing or upon agreement between the board and the regulated person. At the time the board issues the notice, the regulated person shall inform the board of all settings in which the regulated person is employed or practices. The board shall inform all known employment and practice settings of the board action and schedule a disciplinary hearing to be held under chapter 14. The board shall provide the regulated person with at least 30 days' notice of the hearing, unless the parties agree to a hearing date that provides less than 30 days' notice, and shall schedule the hearing to begin no later than 90 days after issuance of the notice of hearing.

History: 1Sp2001 c 9 art 14 s 3

214.105 HEALTH-RELATED LICENSING BOARDS; DEFAULT ON FEDERAL LOANS OR SERVICE OBLIGATIONS.

A health-related licensing board may refuse to grant a license or may impose disciplinary action against a person regulated by the board if the person is intentionally in nonpayment, default, or breach of a repayment or service obligation under any federal educational loan, loan repayment, or service conditional scholarship program. The board shall consider the reasons for nonpayment, default, or breach of a repayment or service obligation and may not impose disciplinary action against a person in cases of total and permanent disability or long-term temporary disability lasting more than a year.

History: 1Sp2001 c 9 art 13 s 6

214.32 PROGRAM MANAGEMENT, SERVICES, PARTICIPANT COSTS, ELIGIBIL-ITY, COMPLETIONS, VOLUNTARY TERMINATION AND DISCHARGE.

Subdivision 1. Management. (a) A health professionals services program committee is established, consisting of one person appointed by each participating board, with each participating board having one vote. The committee shall designate one board to provide administrative management of the program, set the program budget and the pro rata share of program expenses to be borne by each participating board, provide guidance on the general operation of the program, including hiring of program personnel, and ensure that the program's direction is in accord with its authority. If the participating boards change which board is designated to provide administrative management of the program, any appropriation remaining for the program shall transfer to the newly designated board on the effective date of the change. The participating boards must inform the appropriate legislative committees and the commissioner of finance of any change in the administrative management of the program, and the amount of any appropriation transferred under this provision.

(b) The designated board, upon recommendation of the health professional services program committee, shall hire the program manager and employees and pay expenses of the program from funds appropriated for that purpose. The designated board may apply for grants to pay program expenses and may enter into contracts on behalf of the program to carry out the purposes of the program. The participating boards shall enter into written agreements with the designated board.

- (c) An advisory committee is established to advise the program committee consisting of:
- (1) one member appointed by each of the following: the Minnesota Academy of Physician Assistants, the Minnesota Dental Association, the Minnesota Chiropractic Association, the Minnesota Licensed Practical Nurse Association, the Minnesota Medical Association, the Minnesota Nurses Association, and the Minnesota Podiatric Medicine Association;
- (2) one member appointed by each of the professional associations of the other professions regulated by a participating board not specified in clause (1); and
 - (3) two public members, as defined by section 214.02.

Members of the advisory committee shall be appointed for two years and members may be reappointed.

The advisory committee expires June 30, 2003.

[For text of subds 2 to 5, see M.S.2000]

History: 2001 c 161 s 41