

270.6

**ARTICLE 5**

270.7

**HEALTH-RELATED LICENSING BOARDS**

337.15

**ARTICLE 14**

337.16

**HEALTH-RELATED LICENSING BOARDS AND SCOPE OF PRACTICE**

337.17 Section 1. Minnesota Statutes 2020, section 144.051, subdivision 6, is amended to read:

337.18 Subd. 6. **Release of private or confidential data.** For providers regulated pursuant to  
337.19 sections 144A.43 to 144A.482, 148.5185, and chapter 144G, the department may release  
337.20 private or confidential data, except Social Security numbers, to the appropriate state, federal,  
337.21 or local agency and law enforcement office to enhance investigative or enforcement efforts  
337.22 or further a public health protective process. Types of offices include Adult Protective  
337.23 Services, Office of the Ombudsman for Long-Term Care and Office of the Ombudsman for  
337.24 Mental Health and Developmental Disabilities, the health licensing boards, Department of  
337.25 Human Services, county or city attorney's offices, police, and local or county public health  
337.26 offices.

337.27 Sec. 2. Minnesota Statutes 2020, section 144E.01, subdivision 1, is amended to read:

337.28 Subdivision 1. **Membership.** (a) The Emergency Medical Services Regulatory Board  
337.29 consists of the following members, all of whom must work in Minnesota, except for the  
337.30 ~~person~~ persons listed in clause ~~(14)~~ (8):

337.31 (1) an emergency physician certified by the American Board of Emergency Physicians;

338.1 (2) a ~~representative of Minnesota hospitals~~ hospital administrator who does not have  
338.2 direct oversight or management of a licensed ambulance service;

338.3 (3) a representative of ~~fire chiefs~~ a licensed ambulance service with a base of operation  
338.4 located in a fire department;

338.5 (4) a ~~full-time firefighter who serves as an emergency medical responder on or within~~  
338.6 ~~a nontransporting or nonregistered agency and who is a member of a professional firefighter's~~  
338.7 ~~union~~ representative of a licensed ambulance service with a base of operation located in a  
338.8 hospital;

338.9 (5) a ~~volunteer firefighter who serves as an emergency medical responder on or within~~  
338.10 ~~a nontransporting or nonregistered agency~~ representative of a licensed ambulance service  
338.11 owned by a municipality;

338.12 (6) ~~an~~ a volunteer ambulance attendant currently practicing on a licensed ambulance  
338.13 service who is a paramedic ~~or~~, an advanced emergency medical technician, or an emergency  
338.14 medical technician;

338.15 (7) an ~~ambulance director for a licensed ambulance service~~ emergency medical technician  
338.16 instructor who meets the requirements of section 144E.283 and is affiliated with an education  
338.17 program approved by the board under section 144E.285;

338.18 (8) a representative of sheriffs;

- 338.19 ~~(9) a member of a community health board to represent community health services;~~
- 338.20 ~~(10) two representatives of regional emergency medical services programs, one of whom~~
- 338.21 ~~must be from the metropolitan regional emergency medical services program;~~
- 338.22 ~~(11) a registered nurse currently practicing in a hospital emergency department;~~
- 338.23 ~~(12) a pediatrician, certified by the American Board of Pediatrics, with experience in~~
- 338.24 ~~emergency medical services;~~
- 338.25 ~~(13) a family practice physician who is currently involved in emergency medical services;~~
- 338.26 ~~(14) a~~ (8) three public member members who resides reside in Minnesota; and
- 338.27 ~~(15) (9) the commissioners of health and public safety or their designees.~~
- 338.28 (b) The governor shall appoint members under paragraph (a). Appointments under
- 338.29 paragraph (a), clauses (1) to ~~(9) and (11) to (13)~~ (8), are subject to the advice and consent
- 338.30 of the senate. In making appointments under paragraph (a), clauses (1) to ~~(9) and (11) to~~
- 338.31 ~~(13)~~ (8), the governor shall consider recommendations of the American College of Emergency
- 339.1 Physicians, the Minnesota Hospital Association, the Minnesota and State Fire Chief's
- 339.2 Association, the Minnesota Ambulance Association, the Minnesota Emergency Medical
- 339.3 Services Association, the Minnesota State Sheriff's Association, the Association of Minnesota
- 339.4 Counties, the Minnesota Nurses Association, and the Minnesota chapter of the Academy
- 339.5 of Pediatrics.
- 339.6 (c) At least ~~seven~~ five members appointed under paragraph (a), clauses (1) to (8), must
- 339.7 reside outside of the seven-county metropolitan area, as defined in section 473.121.
- 339.8 Sec. 3. Minnesota Statutes 2020, section 144E.01, subdivision 4, is amended to read:
- 339.9 Subd. 4. **Compensation; terms.** (a) Membership terms, compensation, and removal of
- 339.10 members appointed under subdivision 1, are governed by section 15.0575.
- 339.11 (b) Notwithstanding section 15.0575, subdivision 2, the terms of members shall be three
- 339.12 years.
- 339.13 (c) A member of the board may not serve more than two terms.
- 339.14 Sec. 4. Minnesota Statutes 2020, section 144E.35, is amended to read:
- 339.15 **144E.35 REIMBURSEMENT TO NONPROFIT AMBULANCE SERVICES FOR**
- 339.16 **VOLUNTEER EDUCATION COSTS.**
- 339.17 Subdivision 1. **Repayment for volunteer education.** A licensed ambulance service
- 339.18 shall be reimbursed by the board for the necessary expense of the initial education of a
- 339.19 volunteer ambulance attendant upon successful completion by the attendant of an EMT
- 339.20 education course, or a continuing education course for EMT care, or both, which has been
- 339.21 approved by the board, pursuant to section 144E.285. Reimbursement may include tuition,
- 339.22 transportation, food, lodging, hourly payment for the time spent in the education course,

- 339.23 and other necessary expenditures, except that in no instance shall a volunteer ambulance  
339.24 attendant be reimbursed more than ~~\$600~~ \$900 for successful completion of an initial  
339.25 education course, and ~~\$275~~ \$375 for successful completion of a continuing education course.
- 339.26 Subd. 2. **Reimbursement provisions.** Reimbursement ~~will~~ must be paid under provisions  
339.27 of this section when documentation is provided the board that the individual has served for  
339.28 one year from the date of the final certification exam as an active member of a Minnesota  
339.29 licensed ambulance service.
- 340.1 Sec. 5. Minnesota Statutes 2020, section 147.01, subdivision 7, is amended to read:
- 340.2 Subd. 7. **Physician application and license fees.** (a) The board may charge the following  
340.3 nonrefundable application and license fees processed pursuant to sections 147.02, 147.03,  
340.4 147.037, 147.0375, and 147.38:
- 340.5 (1) physician application fee, \$200;
- 340.6 (2) physician annual registration renewal fee, \$192;
- 340.7 (3) physician endorsement to other states, \$40;
- 340.8 (4) physician emeritus license, \$50;
- 340.9 ~~(5) physician temporary license, \$60;~~
- 340.10 ~~(6) (5) physician late fee, \$60;~~
- 340.11 ~~(7) (6) duplicate license fee, \$20;~~
- 340.12 ~~(8) (7) certification letter fee, \$25;~~
- 340.13 ~~(9) (8) education or training program approval fee, \$100;~~
- 340.14 ~~(10) (9) report creation and generation fee, \$60 per hour;~~
- 340.15 ~~(11) (10) examination administration fee (half day), \$50;~~
- 340.16 ~~(12) (11) examination administration fee (full day), \$80;~~
- 340.17 ~~(13) (12) fees developed by the Interstate Commission for determining physician~~  
340.18 ~~qualification to register and participate in the interstate medical licensure compact, as~~  
340.19 ~~established in rules authorized in and pursuant to section 147.38, not to exceed \$1,000; and~~
- 340.20 ~~(14) (13) verification fee, \$25.~~
- 340.21 (b) The board may prorate the initial annual license fee. All licensees are required to  
340.22 pay the full fee upon license renewal. The revenue generated from the fee must be deposited  
340.23 in an account in the state government special revenue fund.
- 340.24 **EFFECTIVE DATE.** This section is effective the day following final enactment.

- 340.25 Sec. 6. Minnesota Statutes 2020, section 147.03, subdivision 1, is amended to read:
- 340.26 Subdivision 1. **Endorsement; reciprocity.** (a) The board may issue a license to practice
- 340.27 medicine to any person who satisfies the requirements in paragraphs (b) to (e).
- 341.1 (b) The applicant shall satisfy all the requirements established in section 147.02,
- 341.2 subdivision 1, paragraphs (a), (b), (d), (e), and (f), or section 147.037, subdivision 1,
- 341.3 paragraphs (a) to (e).
- 341.4 (c) The applicant shall:
- 341.5 (1) have passed an examination prepared and graded by the Federation of State Medical
- 341.6 Boards, the National Board of Medical Examiners, or the United States Medical Licensing
- 341.7 Examination (USMLE) program in accordance with section 147.02, subdivision 1, paragraph
- 341.8 (c), clause (2); the National Board of Osteopathic Medical Examiners; or the Medical Council
- 341.9 of Canada; and
- 341.10 (2) have a current license from the equivalent licensing agency in another state or Canada
- 341.11 and, if the examination in clause (1) was passed more than ten years ago, either:
- 341.12 (i) pass the Special Purpose Examination of the Federation of State Medical Boards with
- 341.13 a score of 75 or better within three attempts; or
- 341.14 (ii) have a current certification by a specialty board of the American Board of Medical
- 341.15 Specialties, of the American Osteopathic Association, the Royal College of Physicians and
- 341.16 Surgeons of Canada, or of the College of Family Physicians of Canada; or
- 341.17 (3) if the applicant fails to meet the requirement established in section 147.02, subdivision
- 341.18 1, paragraph (c), clause (2), because the applicant failed to pass each of steps one, two, and
- 341.19 three of the USMLE within the required three attempts, the applicant may be granted a
- 341.20 license provided the applicant:
- 341.21 (i) has passed each of steps one, two, and three with passing scores as recommended by
- 341.22 the USMLE program within no more than four attempts for any of the three steps;
- 341.23 (ii) is currently licensed in another state; and
- 341.24 (iii) has current certification by a specialty board of the American Board of Medical
- 341.25 Specialties, the American Osteopathic Association Bureau of Professional Education, the
- 341.26 Royal College of Physicians and Surgeons of Canada, or the College of Family Physicians
- 341.27 of Canada.
- 341.28 (d) The applicant must not be under license suspension or revocation by the licensing
- 341.29 board of the state or jurisdiction in which the conduct that caused the suspension or revocation
- 341.30 occurred.
- 341.31 (e) The applicant must not have engaged in conduct warranting disciplinary action against
- 341.32 a licensee, or have been subject to disciplinary action other than as specified in paragraph
- 342.1 (d). If an applicant does not satisfy the requirements stated in this paragraph, the board may

- 342.2 issue a license only on the applicant's showing that the public will be protected through  
342.3 issuance of a license with conditions or limitations the board considers appropriate.
- 342.4 (f) Upon the request of an applicant, the board may conduct the final interview of the  
342.5 applicant by teleconference.
- 342.6 **EFFECTIVE DATE.** This section is effective the day following final enactment.
- 342.7 Sec. 7. Minnesota Statutes 2020, section 147.03, subdivision 2, is amended to read:
- 342.8 Subd. 2. **Temporary permit.** (a) An applicant for licensure under this section may  
342.9 request the board issue a temporary permit in accordance with this subdivision. Upon receipt  
342.10 of the application for licensure, a request for a temporary permit, and a nonrefundable  
342.11 physician application fee specified under section 147.01, subdivision 7, the board may issue  
342.12 a temporary permit to practice medicine to as a physician eligible for licensure under this  
342.13 section only if the application for licensure is complete, all requirements in subdivision 1  
342.14 have been met, and a nonrefundable fee set by the board has been paid if the applicant is:
- 342.15 (1) currently licensed in good standing to practice medicine as a physician in another  
342.16 state, territory, or Canadian province; and
- 342.17 (2) not the subject of a pending investigation or disciplinary action in any state, territory,  
342.18 or Canadian province.
- 342.19 ~~The permit remains~~ (b) A temporary permit issued under this subdivision is nonrenewable  
342.20 and valid only until the meeting of the board at which a decision is made on the physician's  
342.21 application for licensure or for 90 days, whichever occurs first.
- 342.22 (c) The board may revoke a temporary permit issued under this subdivision if the  
342.23 physician is the subject of an investigation or disciplinary action or is disqualified for  
342.24 licensure for any other reason.
- 342.25 (d) Notwithstanding section 13.41, subdivision 2, the board may release information  
342.26 regarding action taken by the board pursuant to this subdivision.
- 342.27 **EFFECTIVE DATE.** This section is effective the day following final enactment.
- 343.1 Sec. 8. Minnesota Statutes 2020, section 147.037, is amended to read:
- 343.2 **147.037 LICENSING OF FOREIGN MEDICAL SCHOOL GRADUATES;**  
343.3 **TEMPORARY PERMIT.**
- 343.4 Subdivision 1. **Requirements.** The board shall issue a license to practice medicine to  
343.5 any person who satisfies the requirements in paragraphs (a) to (g).
- 343.6 (a) The applicant shall satisfy all the requirements established in section 147.02,  
343.7 subdivision 1, paragraphs (a), (e), (f), (g), and (h).
- 343.8 (b) The applicant shall present evidence satisfactory to the board that the applicant is a  
343.9 graduate of a medical or osteopathic school approved by the board as equivalent to accredited

343.10 United States or Canadian schools based upon its faculty, curriculum, facilities, accreditation,  
343.11 or other relevant data. If the applicant is a graduate of a medical or osteopathic program  
343.12 that is not accredited by the Liaison Committee for Medical Education or the American  
343.13 Osteopathic Association, the applicant may use the Federation of State Medical Boards'  
343.14 Federation Credentials Verification Service (FCVS) or its successor. If the applicant uses  
343.15 this service as allowed under this paragraph, the physician application fee may be less than  
343.16 \$200 but must not exceed the cost of administering this paragraph.

343.17 (c) The applicant shall present evidence satisfactory to the board that the applicant has  
343.18 been awarded a certificate by the Educational Council for Foreign Medical Graduates, and  
343.19 the applicant has a working ability in the English language sufficient to communicate with  
343.20 patients and physicians and to engage in the practice of medicine.

343.21 (d) The applicant shall present evidence satisfactory to the board of the completion of  
343.22 one year of graduate, clinical medical training in a program accredited by a national  
343.23 accrediting organization approved by the board or other graduate training approved in  
343.24 advance by the board as meeting standards similar to those of a national accrediting  
343.25 organization. This requirement does not apply:

343.26 (1) to an applicant who is admitted as a permanent immigrant to the United States on or  
343.27 before October 1, 1991, as a person of exceptional ability in the sciences according to Code  
343.28 of Federal Regulations, title 20, section 656.22(d); or

343.29 (2) to an applicant holding a valid license to practice medicine in another country and  
343.30 issued a permanent immigrant visa after October 1, 1991, as a person of extraordinary ability  
343.31 in the field of science or as an outstanding professor or researcher according to Code of  
343.32 Federal Regulations, title 8, section 204.5(h) and (i), or a temporary nonimmigrant visa as  
344.1 a person of extraordinary ability in the field of science according to Code of Federal  
344.2 Regulations, title 8, section 214.2(o),

344.3 provided that a person under clause (1) or (2) is admitted pursuant to rules of the United  
344.4 States Department of Labor.

344.5 (e) The applicant must:

344.6 (1) have passed an examination prepared and graded by the Federation of State Medical  
344.7 Boards, the United States Medical Licensing Examination program in accordance with  
344.8 section 147.02, subdivision 1, paragraph (c), clause (2), or the Medical Council of Canada;  
344.9 and

344.10 (2) if the examination in clause (1) was passed more than ten years ago, either:

344.11 (i) pass the Special Purpose Examination of the Federation of State Medical Boards with  
344.12 a score of 75 or better within three attempts; or

344.13 (ii) have a current certification by a specialty board of the American Board of Medical  
344.14 Specialties, of the American Osteopathic Association, of the Royal College of Physicians  
344.15 and Surgeons of Canada, or of the College of Family Physicians of Canada; or

344.16 (3) if the applicant fails to meet the requirement established in section 147.02, subdivision  
344.17 1, paragraph (c), clause (2), because the applicant failed to pass each of steps one, two, and  
344.18 three of the USMLE within the required three attempts, the applicant may be granted a  
344.19 license provided the applicant:

344.20 (i) has passed each of steps one, two, and three with passing scores as recommended by  
344.21 the USMLE program within no more than four attempts for any of the three steps;

344.22 (ii) is currently licensed in another state; and

344.23 (iii) has current certification by a specialty board of the American Board of Medical  
344.24 Specialties, the American Osteopathic Association, the Royal College of Physicians and  
344.25 Surgeons of Canada, or the College of Family Physicians of Canada.

344.26 (f) The applicant must not be under license suspension or revocation by the licensing  
344.27 board of the state or jurisdiction in which the conduct that caused the suspension or revocation  
344.28 occurred.

344.29 (g) The applicant must not have engaged in conduct warranting disciplinary action  
344.30 against a licensee, or have been subject to disciplinary action other than as specified in  
344.31 paragraph (f). If an applicant does not satisfy the requirements stated in this paragraph, the  
345.1 board may issue a license only on the applicant's showing that the public will be protected  
345.2 through issuance of a license with conditions or limitations the board considers appropriate.

345.3 ~~Subd. 1a. **Temporary permit.** The board may issue a temporary permit to practice~~  
345.4 ~~medicine to a physician eligible for licensure under this section only if the application for~~  
345.5 ~~licensure is complete, all requirements in subdivision 1 have been met, and a nonrefundable~~  
345.6 ~~fee set by the board has been paid. The permit remains valid only until the meeting of the~~  
345.7 ~~board at which a decision is made on the physician's application for licensure.~~

345.8 Subd. 2. **Medical school review.** The board may contract with any qualified person or  
345.9 organization for the performance of a review or investigation, including site visits if  
345.10 necessary, of any medical or osteopathic school prior to approving the school under section  
345.11 147.02, subdivision 1, paragraph (b), or subdivision 1, paragraph (b), of this section. To the  
345.12 extent possible, the board shall require the school being reviewed to pay the costs of the  
345.13 review or investigation.

345.14 **EFFECTIVE DATE.** This section is effective the day following final enactment.

345.15 Sec. 9. **[147A.025] TEMPORARY PERMIT.**

345.16 (a) An applicant for licensure under section 147A.02 may request the board issue a  
345.17 temporary permit in accordance with this section. Upon receipt of the application for  
345.18 licensure, a request for a temporary permit, and a nonrefundable physician assistant  
345.19 application fee as specified under section 147A.28, the board may issue a temporary permit  
345.20 to practice as a physician assistant if the applicant is:

- 345.21 (1) currently licensed in good standing to practice as a physician assistant in another  
345.22 state, territory, or Canadian province; and
- 345.23 (2) not subject to a pending investigation or disciplinary action in any state, territory, or  
345.24 Canadian province.
- 345.25 (b) A temporary permit issued under this section is nonrenewable and valid until a  
345.26 decision is made on the physician assistant's application for licensure or for 90 days,  
345.27 whichever occurs first.
- 345.28 (c) The board may revoke the temporary permit that has been issued under this section  
345.29 if the applicant is the subject of an investigation or disciplinary action or is disqualified for  
345.30 licensure for any other reason.
- 345.31 (d) Notwithstanding section 13.41, subdivision 2, the board may release information  
345.32 regarding any action taken by the board pursuant to this section.
- 346.1 **EFFECTIVE DATE.** This section is effective the day following final enactment.
- 346.2 Sec. 10. Minnesota Statutes 2020, section 147A.28, is amended to read:
- 346.3 **147A.28 PHYSICIAN ASSISTANT APPLICATION AND LICENSE FEES.**
- 346.4 (a) The board may charge the following nonrefundable fees:
- 346.5 (1) physician assistant application fee, \$120;
- 346.6 ~~(2) physician assistant annual registration renewal fee (prescribing authority), \$135;~~
- 346.7 ~~(3) (2) physician assistant annual registration license renewal fee (no prescribing~~  
346.8 ~~authority), \$115;~~
- 346.9 ~~(4) physician assistant temporary registration, \$115;~~
- 346.10 ~~(5) physician assistant temporary permit, \$60;~~
- 346.11 ~~(6) (3) physician assistant locum tenens permit, \$25;~~
- 346.12 ~~(7) (4) physician assistant late fee, \$50;~~
- 346.13 ~~(8) (5) duplicate license fee, \$20;~~
- 346.14 ~~(9) (6) certification letter fee, \$25;~~
- 346.15 ~~(10) (7) education or training program approval fee, \$100;~~
- 346.16 ~~(11) (8) report creation and generation fee, \$60 per hour; and~~
- 346.17 ~~(12) (9) verification fee, \$25.~~



346.18 (b) The board may prorate the initial annual license fee. All licensees are required to  
346.19 pay the full fee upon license renewal. The revenue generated from the fees must be deposited  
346.20 in an account in the state government special revenue fund.

346.21 **EFFECTIVE DATE.** This section is effective the day following final enactment.

346.22 Sec. 11. Minnesota Statutes 2020, section 147C.15, subdivision 3, is amended to read:

346.23 Subd. 3. **Temporary permit.** (a) An applicant for licensure under this section may  
346.24 request the board issue a temporary permit in accordance with this subdivision. Upon receipt  
346.25 of the application for licensure, a request for a temporary permit, and a nonrefundable  
346.26 respiratory therapist application fee as specified under section 147C.40, subdivision 5, the  
346.27 board may issue a temporary permit to practice as a respiratory therapist to an applicant  
346.28 eligible for licensure under this section if the application for licensure is complete, all  
347.1 applicable requirements in this section have been met, and a nonrefundable fee set by the  
347.2 board has been paid applicant is:

347.3 (1) currently licensed to practice as a respiratory therapist in another state, territory, or  
347.4 Canadian province; and

347.5 (2) not subject to a pending investigation or disciplinary action in any state, territory, or  
347.6 Canadian province.

347.7 ~~The~~ (b) A temporary permit ~~remains~~ issued under this subdivision is nonrenewable and  
347.8 valid only until the meeting of the board at which a decision is made on the respiratory  
347.9 therapist's application for licensure or for 90 days, whichever occurs first.

347.10 (c) The board may revoke a temporary permit that has been issued under this subdivision  
347.11 if the applicant is the subject of an investigation or disciplinary action or is disqualified for  
347.12 licensure for any other reason.

347.13 (d) Notwithstanding section 13.41, subdivision 2, the board may release information  
347.14 regarding any action taken by a board pursuant to this section.

347.15 **EFFECTIVE DATE.** This section is effective the day following final enactment.

347.16 Sec. 12. Minnesota Statutes 2020, section 147C.40, subdivision 5, is amended to read:

347.17 Subd. 5. **Respiratory therapist application and license fees.** (a) The board may charge  
347.18 the following nonrefundable fees:

347.19 (1) respiratory therapist application fee, \$100;

347.20 (2) respiratory therapist annual registration renewal fee, \$90;

347.21 (3) respiratory therapist inactive status fee, \$50;

347.22 (4) respiratory therapist temporary registration fee, \$90;

- 347.23 ~~(5)~~ respiratory therapist temporary permit, \$60;
- 347.24 ~~(6)~~ (5) respiratory therapist late fee, \$50;
- 347.25 ~~(7)~~ (6) duplicate license fee, \$20;
- 347.26 ~~(8)~~ (7) certification letter fee, \$25;
- 347.27 ~~(9)~~ (8) education or training program approval fee, \$100;
- 347.28 ~~(10)~~ (9) report creation and generation fee, \$60 per hour; and
- 347.29 ~~(11)~~ (10) verification fee, \$25.
- 348.1 (b) The board may prorate the initial annual license fee. All licensees are required to
- 348.2 pay the full fee upon license renewal. The revenue generated from the fees must be deposited
- 348.3 in an account in the state government special revenue fund.
- 348.4 **EFFECTIVE DATE.** This section is effective the day following final enactment.
- 348.5 Sec. 13. Minnesota Statutes 2020, section 148.212, subdivision 1, is amended to read:
- 348.6 Subdivision 1. **Issuance.** Upon receipt of the applicable licensure or reregistration fee
- 348.7 and permit fee, and in accordance with rules of the board, the board may issue a nonrenewable
- 348.8 temporary permit to practice professional or practical nursing to an applicant for licensure
- 348.9 or reregistration who is not the subject of a pending investigation or disciplinary action, nor
- 348.10 disqualified for any other reason, under the following circumstances:
- 348.11 (a) The applicant for licensure by endorsement under section 148.211, subdivision 2, is
- 348.12 currently licensed to practice professional or practical nursing in another state, territory, or
- 348.13 Canadian province. The permit is valid until the date of board action on the application or
- 348.14 for ~~60~~ 90 days, whichever comes first.
- 348.15 (b) The applicant for licensure by endorsement under section 148.211, subdivision 2,
- 348.16 or for reregistration under section 148.231, subdivision 5, is currently registered in a formal,
- 348.17 structured refresher course or its equivalent for nurses that includes clinical practice.
- 348.18 **EFFECTIVE DATE.** This section is effective the day following final enactment.
- 348.19 Sec. 14. **[148.2855] NURSE LICENSURE COMPACT.**
- 348.20 The Nurse Licensure Compact is enacted into law and entered into with all other
- 348.21 jurisdictions legally joining in it, in the form substantially as follows:
- 348.22 **ARTICLE 1**
- 348.23 **DEFINITIONS**
- 348.24 **As used in this compact:**

- 348.25 (a) "Adverse action" means any administrative, civil, equitable, or criminal action  
348.26 permitted by a state's law that is imposed by a licensing board or other authority against a  
348.27 nurse, including actions against an individual's license or multistate licensure privilege such  
348.28 as revocation, suspension, probation, monitoring of the licensee, limitation on the licensee's  
348.29 practice, or any other encumbrance on licensure affecting a nurse's authorization to practice,  
348.30 including issuance of a cease and desist action.
- 349.1 (b) "Alternative program" means a nondisciplinary monitoring program approved by a  
349.2 licensing board.
- 349.3 (c) "Coordinated licensure information system" means an integrated process for collecting,  
349.4 storing, and sharing information on nurse licensure and enforcement activities related to  
349.5 nurse licensure laws that is administered by a nonprofit organization composed of and  
349.6 controlled by licensing boards.
- 349.7 (d) "Current significant investigative information" means:
- 349.8 (1) investigative information that a licensing board, after a preliminary inquiry that  
349.9 includes notification and an opportunity for the nurse to respond, if required by state law,  
349.10 has reason to believe is not groundless and, if proved true, would indicate more than a minor  
349.11 infraction; or
- 349.12 (2) investigative information that indicates that the nurse represents an immediate threat  
349.13 to public health and safety, regardless of whether the nurse has been notified and had an  
349.14 opportunity to respond.
- 349.15 (e) "Encumbrance" means a revocation or suspension of, or any limitation on, the full  
349.16 and unrestricted practice of nursing imposed by a licensing board.
- 349.17 (f) "Home state" means the party state that is the nurse's primary state of residence.
- 349.18 (g) "Licensing board" means a party state's regulatory body responsible for issuing nurse  
349.19 licenses.
- 349.20 (h) "Multistate license" means a license to practice as a registered or a licensed  
349.21 practical/vocational nurse (LPN/VN) issued by a home state licensing board that authorizes  
349.22 the licensed nurse to practice in all party states under a multistate licensure privilege.
- 349.23 (i) "Multistate licensure privilege" means a legal authorization associated with a multistate  
349.24 license permitting the practice of nursing as either a registered nurse (RN) or LPN/VN in  
349.25 a remote state.
- 349.26 (j) "Nurse" means an RN or LPN/VN, as those terms are defined by each party state's  
349.27 practice laws.
- 349.28 (k) "Party state" means any state that has adopted this compact.
- 349.29 (l) "Remote state" means a party state other than the home state.

349.30 (m) "Single-state license" means a nurse license issued by a party state that authorizes  
349.31 practice only within the issuing state and does not include a multistate licensure privilege  
349.32 to practice in any other party state.

350.1 (n) "State" means a state, territory, or possession of the United States and the District  
350.2 of Columbia.

350.3 (o) "State practice laws" means a party state's laws, rules, and regulations that govern  
350.4 the practice of nursing, define the scope of nursing practice, and create the methods and  
350.5 grounds for imposing discipline. State practice laws do not include requirements necessary  
350.6 to obtain and retain a license, except for qualifications or requirements of the home state.

350.7 ARTICLE 2

350.8 GENERAL PROVISIONS AND JURISDICTION

350.9 (a) A multistate license to practice registered or licensed practical/vocational nursing  
350.10 issued by a home state to a resident in that state will be recognized by each party state as  
350.11 authorizing a nurse to practice as an RN or LPN/VN under a multistate licensure privilege  
350.12 in each party state.

350.13 (b) A state must implement procedures for considering the criminal history records of  
350.14 applicants for initial multistate license or licensure by endorsement. The procedures shall  
350.15 include the submission of fingerprints or other biometric-based information by applicants  
350.16 for the purpose of obtaining an applicant's criminal history record information from the  
350.17 Federal Bureau of Investigation and the agency responsible for retaining that state's criminal  
350.18 records.

350.19 (c) Each party state shall require the following for an applicant to obtain or retain a  
350.20 multistate license in the home state:

350.21 (1) meets the home state's qualifications for licensure or renewal of licensure, as well  
350.22 as all other applicable state laws;

350.23 (2)(i) has graduated or is eligible to graduate from a licensing board-approved RN or  
350.24 LPN/VN prelicensure education program; or

350.25 (ii) has graduated from a foreign RN or LPN/VN prelicensure education program that:

350.26 (A) has been approved by the authorized accrediting body in the applicable country; and

350.27 (B) has been verified by an independent credentials review agency to be comparable to  
350.28 a licensing board-approved prelicensure education program;

350.29 (3) has, if a graduate of a foreign prelicensure education program not taught in English  
350.30 or if English is not the individual's native language, successfully passed an English  
350.31 proficiency examination that includes the components of reading, speaking, writing, and  
350.32 listening;

- 351.1 (4) has successfully passed an NCLEX-RN or NCLEX-PN Examination or recognized  
351.2 predecessor, as applicable;
- 351.3 (5) is eligible for or holds an active, unencumbered license;
- 351.4 (6) has submitted, in connection with an application for initial licensure or licensure by  
351.5 endorsement, fingerprints or other biometric data for the purpose of obtaining criminal  
351.6 history record information from the Federal Bureau of Investigation and the agency  
351.7 responsible for retaining that state's criminal records;
- 351.8 (7) has not been convicted or found guilty, or has entered into an agreed disposition, of  
351.9 a felony offense under applicable state or federal criminal law;
- 351.10 (8) has not been convicted or found guilty, or has entered into an agreed disposition, of  
351.11 a misdemeanor offense related to the practice of nursing as determined on a case-by-case  
351.12 basis;
- 351.13 (9) is not currently enrolled in an alternative program;
- 351.14 (10) is subject to self-disclosure requirements regarding current participation in an  
351.15 alternative program; and
- 351.16 (11) has a valid United States Social Security number.
- 351.17 (d) All party states shall be authorized, in accordance with existing state due process  
351.18 law, to take adverse action against a nurse's multistate licensure privilege such as revocation,  
351.19 suspension, probation, or any other action that affects a nurse's authorization to practice  
351.20 under a multistate licensure privilege, including cease and desist actions. If a party state  
351.21 takes such action, it shall promptly notify the administrator of the coordinated licensure  
351.22 information system. The administrator of the coordinated licensure information system shall  
351.23 promptly notify the home state of any such actions by remote states.
- 351.24 (e) A nurse practicing in a party state must comply with the state practice laws of the  
351.25 state in which the client is located at the time service is provided. The practice of nursing  
351.26 is not limited to patient care, but shall include all nursing practice as defined by the state  
351.27 practice laws of the party state in which the client is located. The practice of nursing in a  
351.28 party state under a multistate licensure privilege shall subject a nurse to the jurisdiction of  
351.29 the licensing board, the courts, and the laws of the party state in which the client is located  
351.30 at the time service is provided.
- 351.31 (f) Individuals not residing in a party state shall continue to be able to apply for a party  
351.32 state's single-state license as provided under the laws of each party state. However, the  
351.33 single-state license granted to these individuals will not be recognized as granting the  
352.1 privilege to practice nursing in any other party state. Nothing in this compact shall affect  
352.2 the requirements established by a party state for the issuance of a single-state license.

352.3 (g) Any nurse holding a home state multistate license, on the effective date of this  
352.4 compact, may retain and renew the multistate license issued by the nurse's then-current  
352.5 home state, provided that:

352.6 (1) a nurse, who changes primary state of residence after this compact's effective date,  
352.7 must meet all applicable paragraph (c) requirements to obtain a multistate license from a  
352.8 new home state; or

352.9 (2) a nurse who fails to satisfy the multistate licensure requirements in paragraph (c)  
352.10 due to a disqualifying event occurring after this compact's effective date shall be ineligible  
352.11 to retain or renew a multistate license, and the nurse's multistate license shall be revoked  
352.12 or deactivated in accordance with applicable rules adopted by the Interstate Commission  
352.13 of Nurse Licensure Compact Administrators ("Commission").

352.14 ARTICLE 3

352.15 APPLICATIONS FOR LICENSURE IN A PARTY STATE

352.16 (a) Upon application for a multistate license, the licensing board in the issuing party  
352.17 state shall ascertain, through the coordinated licensure information system, whether the  
352.18 applicant has ever held or is the holder of a license issued by any other state, whether there  
352.19 are any encumbrances on any license or multistate licensure privilege held by the applicant,  
352.20 whether any adverse action has been taken against any license or multistate licensure privilege  
352.21 held by the applicant, and whether the applicant is currently participating in an alternative  
352.22 program.

352.23 (b) A nurse may hold a multistate license issued by the home state in only one party  
352.24 state at a time.

352.25 (c) If a nurse changes primary state of residence by moving between two party states,  
352.26 the nurse must apply for licensure in the new home state, and the multistate license issued  
352.27 by the prior home state will be deactivated in accordance with applicable rules adopted by  
352.28 the commission:

352.29 (1) the nurse may apply for licensure in advance of a change in primary state of residence;  
352.30 and

352.31 (2) a multistate license shall not be issued by the new home state until the nurse provides  
352.32 satisfactory evidence of a change in primary state of residence to the new home state and  
352.33 satisfies all applicable requirements to obtain a multistate license from the new home state.

353.1 (d) If a nurse changes primary state of residence by moving from a party state to a  
353.2 nonparty state, the multistate license issued by the prior home state will convert to a  
353.3 single-state license, valid only in the former home state.

353.4 ARTICLE 4

- 353.5 ADDITIONAL AUTHORITIES INVESTED IN PARTY STATE LICENSING BOARDS
- 353.6 (a) In addition to the other powers conferred by state law, a licensing board shall have  
353.7 the authority to:
- 353.8 (1) take adverse action against a nurse's multistate licensure privilege to practice within  
353.9 that party state:
- 353.10 (i) only the home state shall have the power to take adverse action against a nurse's  
353.11 license issued by the home state; and
- 353.12 (ii) for purposes of taking adverse action, the home state licensing board shall give the  
353.13 same priority and effect to reported conduct received from a remote state as it would if the  
353.14 conduct occurred within the home state. In so doing, the home state shall apply its own state  
353.15 laws to determine appropriate action;
- 353.16 (2) issue cease and desist orders or impose an encumbrance on a nurse's authority to  
353.17 practice within that party state;
- 353.18 (3) complete any pending investigations of a nurse who changes primary state of residence  
353.19 during the course of the investigations. The licensing board shall also have the authority to  
353.20 take appropriate action and shall promptly report the conclusions of the investigations to  
353.21 the administrator of the coordinated licensure information system. The administrator of the  
353.22 coordinated licensure information system shall promptly notify the new home state of any  
353.23 such actions;
- 353.24 (4) issue subpoenas for hearings and investigations that require the attendance and  
353.25 testimony of witnesses, as well as the production of evidence. Subpoenas issued by a licensing  
353.26 board in a party state for the attendance and testimony of witnesses or the production of  
353.27 evidence from another party state shall be enforced in the latter state by any court of  
353.28 competent jurisdiction according to the practice and procedure of that court applicable to  
353.29 subpoenas issued in proceedings pending before it. The issuing authority shall pay any  
353.30 witness fees, travel expenses, mileage, and other fees required by the service statutes of the  
353.31 state in which the witnesses or evidence are located;
- 353.32 (5) obtain and submit, for each nurse licensure applicant, fingerprint or other  
353.33 biometric-based information to the Federal Bureau of Investigation for criminal background  
354.1 checks, receive the results of the Federal Bureau of Investigation record search on criminal  
354.2 background checks, and use the results in making licensure decisions;
- 354.3 (6) if otherwise permitted by state law, recover from the affected nurse the costs of  
354.4 investigations and disposition of cases resulting from any adverse action taken against that  
354.5 nurse; and
- 354.6 (7) take adverse action based on the factual findings of the remote state, provided that  
354.7 the licensing board follows its own procedures for taking such adverse action.

354.8 (b) If adverse action is taken by the home state against a nurse's multistate license, the  
354.9 nurse's multistate licensure privilege to practice in all other party states shall be deactivated  
354.10 until all encumbrances have been removed from the multistate license. All home state  
354.11 disciplinary orders that impose adverse action against a nurse's multistate license shall  
354.12 include a statement that the nurse's multistate licensure privilege is deactivated in all party  
354.13 states during the pendency of the order.

354.14 (c) Nothing in this compact shall override a party state's decision that participation in  
354.15 an alternative program may be used in lieu of adverse action. The home state licensing board  
354.16 shall deactivate the multistate licensure privilege under the multistate license of any nurse  
354.17 for the duration of the nurse's participation in an alternative program.

354.18 ARTICLE 5

354.19 COORDINATED LICENSURE INFORMATION SYSTEM AND EXCHANGE OF  
354.20 INFORMATION

354.21 (a) All party states shall participate in a coordinated licensure information system of  
354.22 RNs and LPNs. The system will include information on the licensure and disciplinary history  
354.23 of each nurse, as submitted by party states, to assist in the coordination of nurse licensure  
354.24 and enforcement efforts.

354.25 (b) The commission, in consultation with the administrator of the coordinated licensure  
354.26 information system, shall formulate necessary and proper procedures for the identification,  
354.27 collection, and exchange of information under this compact.

354.28 (c) All licensing boards shall promptly report to the coordinated licensure information  
354.29 system any adverse action, any current significant investigative information, denials of  
354.30 applications, including the reasons for the denials, and nurse participation in alternative  
354.31 programs known to the licensing board, regardless of whether the participation is deemed  
354.32 nonpublic or confidential under state law.

355.1 (d) Current significant investigative information and participation in nonpublic or  
355.2 confidential alternative programs shall be transmitted through the coordinated licensure  
355.3 information system only to party state licensing boards.

355.4 (e) Notwithstanding any other provision of law, all party state licensing boards  
355.5 contributing information to the coordinated licensure information system may designate  
355.6 information that shall not be shared with nonparty states or disclosed to other entities or  
355.7 individuals without the express permission of the contributing state.

355.8 (f) Any personally identifiable information obtained from the coordinated licensure  
355.9 information system by a party state licensing board shall not be shared with nonparty states  
355.10 or disclosed to other entities or individuals except to the extent permitted by the laws of the  
355.11 party state contributing the information.



- 355.12 (g) Any information contributed to the coordinated licensure information system that is  
355.13 subsequently required to be expunged by the laws of the party state contributing that  
355.14 information shall also be expunged from the coordinated licensure information system.
- 355.15 (h) The compact administrator of each party state shall furnish a uniform data set to the  
355.16 compact administrator of each other party state, which shall include, at a minimum:
- 355.17 (1) identifying information;
- 355.18 (2) licensure data;
- 355.19 (3) information related to alternative program participation; and
- 355.20 (4) other information that may facilitate the administration of this compact, as determined  
355.21 by commission rules.
- 355.22 (i) The compact administrator of a party state shall provide all investigative documents  
355.23 and information requested by another party state.
- 355.24 ARTICLE 6
- 355.25 ESTABLISHMENT OF THE INTERSTATE COMMISSION OF NURSE LICENSURE  
355.26 COMPACT ADMINISTRATORS
- 355.27 (a) The party states hereby create and establish a joint public entity known as the Interstate  
355.28 Commission of Nurse Licensure Compact Administrators:
- 355.29 (1) the commission is an instrumentality of the party states;
- 355.30 (2) venue is proper, and judicial proceedings by or against the commission shall be  
355.31 brought solely and exclusively in a court of competent jurisdiction where the principal office  
356.1 of the commission is located. The commission may waive venue and jurisdictional defenses  
356.2 to the extent it adopts or consents to participate in alternative dispute resolution proceedings;  
356.3 and
- 356.4 (3) nothing in this compact shall be construed to be a waiver of sovereign immunity.
- 356.5 (b) Membership, voting, and meetings:
- 356.6 (1) each party state shall have and be limited to one administrator. The head of the state  
356.7 licensing board or designee shall be the administrator of this compact for each party state.  
356.8 Any administrator may be removed or suspended from office as provided by the laws of  
356.9 the state from which the administrator is appointed. Any vacancy occurring in the commission  
356.10 shall be filled in accordance with the laws of the party state in which the vacancy exists;
- 356.11 (2) each administrator shall be entitled to one vote with regard to the promulgation of  
356.12 rules and creation of bylaws and shall otherwise have an opportunity to participate in the  
356.13 business and affairs of the commission. An administrator shall vote in person or by such

356.14 other means as provided in the bylaws. The bylaws may provide for an administrator's  
356.15 participation in meetings by telephone or other means of communication;

356.16 (3) the commission shall meet at least once during each calendar year. Additional  
356.17 meetings shall be held as set forth in the bylaws or rules of the commission;

356.18 (4) all meetings shall be open to the public, and public notice of meetings shall be given  
356.19 in the same manner as required under the rulemaking provisions in article 7;

356.20 (5) the commission may convene in a closed, nonpublic meeting if the commission must  
356.21 discuss:

356.22 (i) noncompliance of a party state with its obligations under this compact;

356.23 (ii) the employment, compensation, discipline, or other personnel matters, practices, or  
356.24 procedures related to specific employees or other matters related to the commission's internal  
356.25 personnel practices and procedures;

356.26 (iii) current, threatened, or reasonably anticipated litigation;

356.27 (iv) negotiation of contracts for the purchase or sale of goods, services, or real estate;

356.28 (v) accusing any person of a crime or formally censuring any person;

356.29 (vi) disclosure of trade secrets or commercial or financial information that is privileged  
356.30 or confidential;

357.1 (vii) disclosure of information of a personal nature where disclosure would constitute a  
357.2 clearly unwarranted invasion of personal privacy;

357.3 (viii) disclosure of investigatory records compiled for law enforcement purposes;

357.4 (ix) disclosure of information related to any reports prepared by or on behalf of the  
357.5 commission for the purpose of investigation of compliance with this compact; or

357.6 (x) matters specifically exempted from disclosure by federal or state statute; and

357.7 (6) if a meeting or portion of a meeting is closed pursuant to this provision, the  
357.8 commission's legal counsel or designee shall certify that the meeting may be closed and  
357.9 shall reference each relevant exempting provision. The commission shall keep minutes that  
357.10 fully and clearly describe all matters discussed in a meeting and shall provide a full and  
357.11 accurate summary of actions taken and the reasons therefore, including a description of the  
357.12 views expressed. All documents considered in connection with an action shall be identified  
357.13 in the minutes. All minutes and documents of a closed meeting shall remain under seal,  
357.14 subject to release by a majority vote of the commission or order of a court of competent  
357.15 jurisdiction.

- 357.16 (c) The commission shall, by a majority vote of the administrators, prescribe bylaws or  
357.17 rules to govern its conduct as may be necessary or appropriate to carry out the purposes and  
357.18 exercise the powers of this compact, including but not limited to:
- 357.19 (1) establishing the fiscal year of the commission;
- 357.20 (2) providing reasonable standards and procedures:
- 357.21 (i) for the establishment and meetings of other committees; and
- 357.22 (ii) governing any general or specific delegation of any authority or function of the  
357.23 commission;
- 357.24 (3) providing reasonable procedures for calling and conducting meetings of the  
357.25 commission, ensuring reasonable advance notice of all meetings and providing an opportunity  
357.26 for attendance of the meetings by interested parties, with enumerated exceptions designed  
357.27 to protect the public's interest, the privacy of individuals, and proprietary information,  
357.28 including trade secrets. The commission may meet in closed session only after a majority  
357.29 of the administrators vote to close a meeting in whole or in part. As soon as practicable, the  
357.30 commission must make public a copy of the vote to close the meeting revealing the vote of  
357.31 each administrator, with no proxy votes allowed;
- 358.1 (4) establishing the titles, duties, and authority and reasonable procedures for the election  
358.2 of the officers of the commission;
- 358.3 (5) providing reasonable standards and procedures for the establishment of the personnel  
358.4 policies and programs of the commission. Notwithstanding any civil service or other similar  
358.5 laws of any party state, the bylaws shall exclusively govern the personnel policies and  
358.6 programs of the commission; and
- 358.7 (6) providing a mechanism for winding up the operations of the commission and the  
358.8 equitable disposition of any surplus funds that may exist after the termination of this compact  
358.9 after the payment or reserving of all of its debts and obligations.
- 358.10 (d) The commission shall publish its bylaws, rules, and any amendments in a convenient  
358.11 form on the website of the commission.
- 358.12 (e) The commission shall maintain its financial records in accordance with the bylaws.
- 358.13 (f) The commission shall meet and take actions consistent with the provisions of this  
358.14 compact and the bylaws.
- 358.15 (g) The commission shall have the following powers:
- 358.16 (1) to promulgate uniform rules to facilitate and coordinate implementation and  
358.17 administration of this compact. The rules shall have the force and effect of law and shall  
358.18 be binding in all party states;

- 358.19 (2) to bring and prosecute legal proceedings or actions in the name of the commission,  
358.20 provided that the standing of any licensing board to sue or be sued under applicable law  
358.21 shall not be affected;
- 358.22 (3) to purchase and maintain insurance and bonds;
- 358.23 (4) to borrow, accept, or contract for services of personnel, including but not limited to  
358.24 employees of a party state or nonprofit organizations;
- 358.25 (5) to cooperate with other organizations that administer state compacts related to the  
358.26 regulation of nursing, including but not limited to sharing administrative or staff expenses,  
358.27 office space, or other resources;
- 358.28 (6) to hire employees, elect or appoint officers, fix compensation, define duties, grant  
358.29 such individuals appropriate authority to carry out the purposes of this compact, and establish  
358.30 the commission's personnel policies and programs relating to conflicts of interest,  
358.31 qualifications of personnel, and other related personnel matters;
- 359.1 (7) to accept any and all appropriate donations, grants, and gifts of money, equipment,  
359.2 supplies, materials, and services, and to receive, utilize, and dispose of the same; provided  
359.3 that at all times the commission shall avoid any appearance of impropriety or conflict of  
359.4 interest;
- 359.5 (8) to lease, purchase, accept appropriate gifts or donations of, or otherwise to own,  
359.6 hold, improve, or use any property, whether real, personal, or mixed; provided that at all  
359.7 times the commission shall avoid any appearance of impropriety;
- 359.8 (9) to sell, convey, mortgage, pledge, lease, exchange, abandon, or otherwise dispose  
359.9 of any property, whether real, personal, or mixed;
- 359.10 (10) to establish a budget and make expenditures;
- 359.11 (11) to borrow money;
- 359.12 (12) to appoint committees, including advisory committees comprised of administrators,  
359.13 state nursing regulators, state legislators or their representatives, and consumer  
359.14 representatives, and other such interested persons;
- 359.15 (13) to provide and receive information from, and to cooperate with, law enforcement  
359.16 agencies;
- 359.17 (14) to adopt and use an official seal; and
- 359.18 (15) to perform other functions as may be necessary or appropriate to achieve the purposes  
359.19 of this compact consistent with the state regulation of nurse licensure and practice.
- 359.20 (h) Financing of the commission:

359.21 (1) the commission shall pay or provide for the payment of the reasonable expenses of  
359.22 its establishment, organization, and ongoing activities;

359.23 (2) the commission may also levy on and collect an annual assessment from each party  
359.24 state to cover the cost of its operations, activities, and staff in its annual budget as approved  
359.25 each year. The aggregate annual assessment amount, if any, shall be allocated based on a  
359.26 formula to be determined by the commission, which shall promulgate a rule that is binding  
359.27 upon all party states;

359.28 (3) the commission shall not incur obligations of any kind prior to securing the funds  
359.29 adequate to meet the same; nor shall the commission pledge the credit of any of the party  
359.30 states, except by and with the authority of the party state; and

359.31 (4) the commission shall keep accurate accounts of all receipts and disbursements. The  
359.32 receipts and disbursements of the commission shall be subject to the audit and accounting  
360.1 procedures established under its bylaws. However, all receipts and disbursements of funds  
360.2 handled by the commission shall be audited yearly by a certified or licensed public  
360.3 accountant, and the report of the audit shall be included in and become part of the annual  
360.4 report of the commission.

360.5 (i) Qualified immunity, defense, and indemnification:

360.6 (1) the administrators, officers, executive director, employees, and representatives of  
360.7 the commission shall be immune from suit and liability, either personally or in their official  
360.8 capacity, for any claim for damage to or loss of property or personal injury or other civil  
360.9 liability caused by or arising out of any actual or alleged act, error, or omission that occurred,  
360.10 or that the person against whom the claim is made had a reasonable basis for believing  
360.11 occurred, within the scope of commission employment, duties, or responsibilities; provided  
360.12 that nothing in this paragraph shall be construed to protect any such person from suit or  
360.13 liability for any damage, loss, injury, or liability caused by the intentional, willful, or wanton  
360.14 misconduct of that person;

360.15 (2) the commission shall defend any administrator, officer, executive director, employee,  
360.16 or representative of the commission in any civil action seeking to impose liability arising  
360.17 out of any actual or alleged act, error, or omission that occurred within the scope of  
360.18 commission employment, duties, or responsibilities, or that the person against whom the  
360.19 claim is made had a reasonable basis for believing occurred within the scope of commission  
360.20 employment, duties, or responsibilities; provided that nothing herein shall be construed to  
360.21 prohibit that person from retaining the person's counsel; and provided further that the actual  
360.22 or alleged act, error, or omission did not result from that person's intentional, willful, or  
360.23 wanton misconduct; and

360.24 (3) the commission shall indemnify and hold harmless any administrator, officer,  
360.25 executive director, employee, or representative of the commission for the amount of any  
360.26 settlement or judgment obtained against that person arising out of any actual or alleged act,  
360.27 error, or omission that occurred within the scope of commission employment, duties, or

360.28 responsibilities, or that the person had a reasonable basis for believing occurred within the  
360.29 scope of commission employment, duties, or responsibilities, provided that the actual or  
360.30 alleged act, error, or omission did not result from the intentional, willful, or wanton  
360.31 misconduct of that person.

360.32 ARTICLE 7

360.33 RULEMAKING

361.1 (a) The commission shall exercise its rulemaking powers pursuant to this article and the  
361.2 rules adopted thereunder. Rules and amendments shall become binding as of the date  
361.3 specified in each rule or amendment and shall have the same force and effect as provisions  
361.4 of this compact.

361.5 (b) Rules or amendments to the rules shall be adopted at a regular or special meeting of  
361.6 the commission.

361.7 (c) Prior to promulgation and adoption of a final rule or rules by the commission, and  
361.8 at least 60 days in advance of the meeting at which the rule will be considered and voted  
361.9 on, the commission shall file a notice of proposed rulemaking:

361.10 (1) on the website of the commission; and

361.11 (2) on the website of each licensing board or the publication in which the state would  
361.12 otherwise publish proposed rules.

361.13 (d) The notice of proposed rulemaking shall include:

361.14 (1) the proposed time, date, and location of the meeting in which the rule will be  
361.15 considered and voted on;

361.16 (2) the text of the proposed rule or amendment, and the reason for the proposed rule;

361.17 (3) a request for comments on the proposed rule from any interested person; and

361.18 (4) the manner in which interested persons may submit notice to the commission of their  
361.19 intention to attend the public hearing and any written comments.

361.20 (e) Prior to adoption of a proposed rule, the commission shall allow persons to submit  
361.21 written data, facts, opinions, and arguments that shall be made available to the public.

361.22 (f) The commission shall grant an opportunity for a public hearing before it adopts a  
361.23 rule or amendment.

361.24 (g) The commission shall publish the place, time, and date of the scheduled public  
361.25 hearing:

361.26 (1) hearings shall be conducted in a manner providing each person who wishes to  
361.27 comment a fair and reasonable opportunity to comment orally or in writing. All hearings  
361.28 will be recorded and a copy will be made available upon request; and

361.29 (2) nothing in this section shall be construed as requiring a separate hearing on each  
361.30 rule. Rules may be grouped for the convenience of the commission at hearings required by  
361.31 this section.

362.1 (h) If no person appears at the public hearing, the commission may proceed with  
362.2 promulgation of the proposed rule.

362.3 (i) Following the scheduled hearing date or by the close of business on the scheduled  
362.4 hearing date if the hearing was not held, the commission shall consider all written and oral  
362.5 comments received.

362.6 (j) The commission shall, by majority vote of all administrators, take final action on the  
362.7 proposed rule and shall determine the effective date of the rule, if any, based on the  
362.8 rulemaking record and the full text of the rule.

362.9 (k) Upon determination that an emergency exists, the commission may consider and  
362.10 adopt an emergency rule without prior notice or opportunity for comment or hearing,  
362.11 provided that the usual rulemaking procedures provided in this compact and in this section  
362.12 shall be retroactively applied to the rule as soon as reasonably possible, in no event later  
362.13 than 90 days after the effective date of the rule. For the purposes of this provision, an  
362.14 emergency rule is one that must be adopted immediately in order to:

362.15 (1) meet an imminent threat to public health, safety, or welfare;

362.16 (2) prevent a loss of commission or party state funds; or

362.17 (3) meet a deadline for the promulgation of an administrative rule that is required by  
362.18 federal law or rule.

362.19 (l) The commission may direct revisions to a previously adopted rule or amendment for  
362.20 purposes of correcting typographical errors, errors in format, errors in consistency, or  
362.21 grammatical errors. Public notice of any revisions shall be posted on the website of the  
362.22 commission. The revision shall be subject to challenge by any person for a period of 30  
362.23 days after posting. The revision may be challenged only on grounds that the revision results  
362.24 in a material change to a rule. A challenge shall be made in writing and delivered to the  
362.25 commission before the end of the notice period. If no challenge is made, the revision will  
362.26 take effect without further action. If the revision is challenged, the revision shall not take  
362.27 effect without the approval of the commission.

362.28

ARTICLE 8

362.29

OVERSIGHT, DISPUTE RESOLUTION, AND ENFORCEMENT

- 362.30 (a) Oversight:
- 362.31 (1) each party state shall enforce this compact and take all actions necessary and  
362.32 appropriate to effectuate this compact's purposes and intent; and
- 363.1 (2) the commission shall be entitled to receive service of process in any proceeding that  
363.2 may affect the powers, responsibilities, or actions of the commission and shall have standing  
363.3 to intervene in such a proceeding for all purposes. Failure to provide service of process in  
363.4 the proceeding to the commission shall render a judgment or order void as to the commission.  
363.5 this compact, or promulgated rules.
- 363.6 (b) Default, technical assistance, and termination:
- 363.7 (1) if the commission determines that a party state has defaulted in the performance of  
363.8 its obligations or responsibilities under this compact or the promulgated rules, the commission  
363.9 shall:
- 363.10 (i) provide written notice to the defaulting state and other party states of the nature of  
363.11 the default, the proposed means of curing the default, or any other action to be taken by the  
363.12 commission; and
- 363.13 (ii) provide remedial training and specific technical assistance regarding the default;
- 363.14 (2) if a state in default fails to cure the default, the defaulting state's membership in this  
363.15 compact may be terminated upon an affirmative vote of a majority of the administrators,  
363.16 and all rights, privileges, and benefits conferred by this compact may be terminated on the  
363.17 effective date of termination. A cure of the default does not relieve the offending state of  
363.18 obligations or liabilities incurred during the period of default;
- 363.19 (3) termination of membership in this compact shall be imposed only after all other  
363.20 means of securing compliance have been exhausted. Notice of intent to suspend or terminate  
363.21 shall be given by the commission to the governor of the defaulting state and to the executive  
363.22 officer of the defaulting state's licensing board and each of the party states;
- 363.23 (4) a state whose membership in this compact has been terminated is responsible for all  
363.24 assessments, obligations, and liabilities incurred through the effective date of termination,  
363.25 including obligations that extend beyond the effective date of termination;
- 363.26 (5) the commission shall not bear any costs related to a state that is found to be in default  
363.27 or whose membership in this compact has been terminated, unless agreed upon in writing  
363.28 between the commission and the defaulting state; and
- 363.29 (6) the defaulting state may appeal the action of the commission by petitioning the U.S.  
363.30 District Court for the District of Columbia or the federal district in which the commission  
363.31 has its principal offices. The prevailing party shall be awarded all costs of the litigation,  
363.32 including reasonable attorney fees.



- 363.33 (c) Dispute resolution:
- 364.1 (1) upon request by a party state, the commission shall attempt to resolve disputes related  
364.2 to the compact that arise among party states and between party and nonparty states;
- 364.3 (2) the commission shall promulgate a rule providing for both mediation and binding  
364.4 dispute resolution for disputes, as appropriate; and
- 364.5 (3) in the event the commission cannot resolve disputes among party states arising under  
364.6 this compact:
- 364.7 (i) the party states may submit the issues in dispute to an arbitration panel, that will be  
364.8 comprised of individuals appointed by the compact administrator in each of the affected  
364.9 party states and an individual mutually agreed upon by the compact administrators of all  
364.10 the party states involved in the dispute; and
- 364.11 (ii) the decision of a majority of the arbitrators shall be final and binding.
- 364.12 (d) Enforcement:
- 364.13 (1) the commission, in the reasonable exercise of its discretion, shall enforce the  
364.14 provisions and rules of this compact;
- 364.15 (2) by majority vote, the commission may initiate legal action in the U.S. District Court  
364.16 for the District of Columbia or the federal district in which the commission has its principal  
364.17 offices against a party state that is in default to enforce compliance with this compact and  
364.18 its promulgated rules and bylaws. The relief sought may include both injunctive relief and  
364.19 damages. In the event judicial enforcement is necessary, the prevailing party shall be awarded  
364.20 all costs of the litigation, including reasonable attorney fees; and
- 364.21 (3) the remedies herein shall not be the exclusive remedies of the commission. The  
364.22 commission may pursue any other remedies available under federal or state law.
- 364.23 ARTICLE 9
- 364.24 EFFECTIVE DATE, WITHDRAWAL, AND AMENDMENT
- 364.25 (a) This compact shall become effective and binding on July 1, 2022. All party states to  
364.26 this compact that also were parties to the prior Nurse Licensure Compact that was superseded  
364.27 by this compact shall be deemed to have withdrawn from the prior compact within six  
364.28 months after the effective date of this compact.
- 364.29 (b) Each party state to this compact shall continue to recognize a nurse's multistate  
364.30 licensure privilege to practice in that party state issued under the prior compact until the  
364.31 party state has withdrawn from the prior compact.

365.1 (c) Any party state may withdraw from this compact by legislative enactment. A party  
365.2 state's withdrawal shall not take effect until six months after enactment of the repealing  
365.3 statute.

365.4 (d) A party state's withdrawal or termination shall not affect the continuing requirement  
365.5 of the withdrawing or terminated state's licensing board to report adverse actions and  
365.6 significant investigations occurring prior to the effective date of the withdrawal or  
365.7 termination.

365.8 (e) Nothing in this compact shall be construed to invalidate or prevent any nurse licensure  
365.9 agreement or other cooperative arrangement between a party state and a nonparty state that  
365.10 is made in accordance with the other provisions of this compact.

365.11 (f) This compact may be amended by the party states. No amendment to this compact  
365.12 shall become effective and binding upon the party states unless and until it is enacted into  
365.13 the laws of all party states.

365.14 (g) Representatives of nonparty states to this compact shall be invited to participate in  
365.15 the activities of the commission on a nonvoting basis prior to the adoption of this compact  
365.16 by all states.

365.17 ARTICLE 10

365.18 CONSTRUCTION AND SEVERABILITY

365.19 This compact shall be liberally construed so as to effectuate the purposes thereof. This  
365.20 compact shall be severable, and if any phrase, clause, sentence, or provision of this compact  
365.21 is declared to be contrary to the constitution of any party state or of the United States, or if  
365.22 the applicability thereof to any government, agency, person, or circumstance is held invalid,  
365.23 the validity of the remainder of this compact and the applicability thereof to any government,  
365.24 agency, person, or circumstance shall not be affected thereby. If this compact is held to be  
365.25 contrary to the constitution of any party state, this compact shall remain in full force and  
365.26 effect for the remaining party states and in full force and effect for the party state affected  
365.27 as to all severable matters.

365.28 Sec. 15. [148.2856] APPLICATION OF NURSE LICENSURE COMPACT TO  
365.29 EXISTING LAWS.

365.30 (a) Section 148.2855 does not supersede existing state labor laws.

366.1 (b) If the board takes action against an individual's multistate privilege, the action must  
366.2 be adjudicated following the procedures in sections 14.50 to 14.62 and must be subject to  
366.3 the judicial review provided for in sections 14.63 to 14.69.

366.4 (c) The board may take action against an individual's multistate privilege based on the  
366.5 grounds listed in section 148.261, subdivision 1, and any other statute authorizing or requiring  
366.6 the board to take corrective or disciplinary action.

366.7 (d) The board may take all forms of disciplinary action provided in section 148.262,  
366.8 subdivision 1, and corrective action provided in section 214.103, subdivision 6, against an  
366.9 individual's multistate privilege.

366.10 (e) The cooperation requirements of section 148.265 apply to individuals who practice  
366.11 professional or practical nursing in Minnesota under section 148.2855.

366.12 (f) Complaints against individuals who practice professional or practical nursing in  
366.13 Minnesota under section 148.2855 must be addressed according to sections 214.10 and  
366.14 214.103.

366.15 Sec. 16. **[148.5185] AUDIOLOGY AND SPEECH-LANGUAGE PATHOLOGY**  
366.16 **INTERSTATE COMPACT.**

366.17 **Section 1. Definitions**

366.18 As used in this Compact, and except as otherwise provided, the following definitions  
366.19 shall apply:

366.20 A. "Active duty military" means full-time duty status in the active uniformed service of  
366.21 the United States, including members of the National Guard and Reserve on active duty  
366.22 orders pursuant to 10 U.S.C. sections 1209 and 1211.

366.23 B. "Adverse action" means any administrative, civil, equitable, or criminal action  
366.24 permitted by a state's laws which is imposed by a licensing board or other authority against  
366.25 an audiologist or speech-language pathologist, including actions against an individual's  
366.26 license or privilege to practice such as revocation, suspension, probation, monitoring of the  
366.27 licensee, or restriction on the licensee's practice.

366.28 C. "Alternative program" means a non-disciplinary monitoring process approved by an  
366.29 audiology or speech-language pathology licensing board to address impaired practitioners.

366.30 D. "Audiologist" means an individual who is licensed by a state to practice audiology.

366.31 E. "Audiology" means the care and services provided by a licensed audiologist as set  
366.32 forth in the member state's statutes and rules.

367.1 F. "Audiology and Speech-Language Pathology Compact Commission" or "Commission"  
367.2 means the national administrative body whose membership consists of all states that have  
367.3 enacted the Compact.

367.4 G. "Audiology and speech-language pathology licensing board," "audiology licensing  
367.5 board," "speech-language pathology licensing board," or "licensing board" means the agency  
367.6 of a state that is responsible for the licensing and regulation of audiologists or  
367.7 speech-language pathologists or both.

367.8 H. "Compact privilege" means the authorization granted by a remote state to allow a  
367.9 licensee from another member state to practice as an audiologist or speech-language  
367.10 pathologist in the remote state under its laws and rules. The practice of audiology or

- 367.11 speech-language pathology occurs in the member state where the patient, client, or student  
367.12 is located at the time of the patient, client, or student encounter.
- 367.13 I. "Current significant investigative information" means investigative information that  
367.14 a licensing board, after an inquiry or investigation that includes notification and an  
367.15 opportunity for the audiologist or speech-language pathologist to respond, if required by  
367.16 state law, has reason to believe is not groundless and, if proved true, would indicate more  
367.17 than a minor infraction.
- 367.18 J. "Data system" means a repository of information about licensees, including, but not  
367.19 limited to, continuing education, examination, licensure, investigation, compact privilege,  
367.20 and adverse action.
- 367.21 K. "Encumbered license" means a license in which an adverse action restricts the practice  
367.22 of audiology or speech-language pathology by the licensee and said adverse action has been  
367.23 reported to the National Practitioners Data Bank (NPDB).
- 367.24 L. "Executive Committee" means a group of directors elected or appointed to act on  
367.25 behalf of, and within the powers granted to them by, the Commission.
- 367.26 M. "Home state" means the member state that is the licensee's primary state of residence.
- 367.27 N. "Impaired practitioner" means individuals whose professional practice is adversely  
367.28 affected by substance abuse, addiction, or other health-related conditions.
- 367.29 O. "Licensee" means an individual who currently holds an authorization from the state  
367.30 licensing board to practice as an audiologist or speech-language pathologist.
- 367.31 P. "Member state" means a state that has enacted the Compact.
- 368.1 Q. "Privilege to practice" means a legal authorization permitting the practice of audiology  
368.2 or speech-language pathology in a remote state.
- 368.3 R. "Remote state" means a member state other than the home state where a licensee is  
368.4 exercising or seeking to exercise the compact privilege.
- 368.5 S. "Rule" means a regulation, principle, or directive promulgated by the Commission  
368.6 that has the force of law.
- 368.7 T. "Single-state license" means an audiology or speech-language pathology license  
368.8 issued by a member state that authorizes practice only within the issuing state and does not  
368.9 include a privilege to practice in any other member state.
- 368.10 U. "Speech-language pathologist" means an individual who is licensed by a state to  
368.11 practice speech-language pathology.
- 368.12 V. "Speech-language pathology" means the care and services provided by a licensed  
368.13 speech-language pathologist as set forth in the member state's statutes and rules.

368.14 W. "State" means any state, commonwealth, district, or territory of the United States of  
368.15 America that regulates the practice of audiology and speech-language pathology.

368.16 X. "State practice laws" means a member state's laws, rules, and regulations that govern  
368.17 the practice of audiology or speech-language pathology, define the scope of audiology or  
368.18 speech-language pathology practice, and create the methods and grounds for imposing  
368.19 discipline.

368.20 Y. "Telehealth" means the application of telecommunication technology to deliver  
368.21 audiology or speech-language pathology services at a distance for assessment, intervention,  
368.22 or consultation.

368.23 Section 2. State Participation in the Compact

368.24 A. A license issued to an audiologist or speech-language pathologist by a home state to  
368.25 a resident in that state shall be recognized by each member state as authorizing an audiologist  
368.26 or speech-language pathologist to practice audiology or speech-language pathology, under  
368.27 a privilege to practice, in each member state.

368.28 B. A state must implement or utilize procedures for considering the criminal history  
368.29 records of applicants for initial privilege to practice. These procedures shall include the  
368.30 submission of fingerprints or other biometric-based information by applicants for the purpose  
368.31 of obtaining an applicant's criminal history record information from the Federal Bureau of  
368.32 Investigation and the agency responsible for retaining that state's criminal records.

369.1 1. A member state must fully implement a criminal background check requirement,  
369.2 within a time frame established by rule, by receiving the results of the Federal Bureau of  
369.3 Investigation record search on criminal background checks and use the results in making  
369.4 licensure decisions.

369.5 2. Communication between a member state and the Commission and among member  
369.6 states regarding the verification of eligibility for licensure through the Compact shall not  
369.7 include any information received from the Federal Bureau of Investigation relating to a  
369.8 federal criminal records check performed by a member state under Public Law 92-544.

369.9 C. Upon application for a privilege to practice, the licensing board in the issuing remote  
369.10 state shall ascertain, through the data system, whether the applicant has ever held, or is the  
369.11 holder of, a license issued by any other state, whether there are any encumbrances on any  
369.12 license or privilege to practice held by the applicant, and whether any adverse action has  
369.13 been taken against any license or privilege to practice held by the applicant.

369.14 D. Each member state shall require an applicant to obtain or retain a license in the home  
369.15 state and meet the home state's qualifications for licensure or renewal of licensure, as well  
369.16 as all other applicable state laws.

369.17 E. For an audiologist:

- 369.18 1. Must meet one of the following educational requirements:
- 369.19 a. On or before December 31, 2007, has graduated with a master's degree or doctoral  
369.20 degree in audiology, or equivalent degree regardless of degree name, from a program that  
369.21 is accredited by an accrediting agency recognized by the Council for Higher Education  
369.22 Accreditation, or its successor, or by the United States Department of Education and operated  
369.23 by a college or university accredited by a regional or national accrediting organization  
369.24 recognized by the board; or
- 369.25 b. On or after January 1, 2008, has graduated with a doctoral degree in audiology, or  
369.26 equivalent degree regardless of degree name, from a program that is accredited by an  
369.27 accrediting agency recognized by the Council for Higher Education Accreditation, or its  
369.28 successor, or by the United States Department of Education and operated by a college or  
369.29 university accredited by a regional or national accrediting organization recognized by the  
369.30 board; or
- 369.31 c. Has graduated from an audiology program that is housed in an institution of higher  
369.32 education outside of the United States (a) for which the program and institution have been  
369.33 approved by the authorized accrediting body in the applicable country and (b) the degree  
370.1 program has been verified by an independent credentials review agency to be comparable  
370.2 to a state licensing board-approved program;
- 370.3 2. Has completed a supervised clinical practicum experience from an accredited  
370.4 educational institution or its cooperating programs as required by the board;
- 370.5 3. Has successfully passed a national examination approved by the Commission;
- 370.6 4. Holds an active, unencumbered license;
- 370.7 5. Has not been convicted or found guilty, and has not entered into an agreed disposition,  
370.8 of a felony related to the practice of audiology, under applicable state or federal criminal  
370.9 law; and
- 370.10 6. Has a valid United States Social Security or National Practitioner Identification  
370.11 number.
- 370.12 F. For a speech-language pathologist:
- 370.13 1. Must meet one of the following educational requirements:
- 370.14 a. Has graduated with a master's degree from a speech-language pathology program that  
370.15 is accredited by an organization recognized by the United States Department of Education  
370.16 and operated by a college or university accredited by a regional or national accrediting  
370.17 organization recognized by the board; or
- 370.18 b. Has graduated from a speech-language pathology program that is housed in an  
370.19 institution of higher education outside of the United States (a) for which the program and  
370.20 institution have been approved by the authorized accrediting body in the applicable country

- 370.21 and (b) the degree program has been verified by an independent credentials review agency  
370.22 to be comparable to a state licensing board-approved program;
- 370.23 2. Has completed a supervised clinical practicum experience from an educational  
370.24 institution or its cooperating programs as required by the Commission;
- 370.25 3. Has completed a supervised postgraduate professional experience as required by the  
370.26 Commission;
- 370.27 4. Has successfully passed a national examination approved by the Commission;
- 370.28 5. Holds an active, unencumbered license;
- 370.29 6. Has not been convicted or found guilty, and has not entered into an agreed disposition,  
370.30 of a felony related to the practice of speech-language pathology, under applicable state or  
370.31 federal criminal law; and
- 371.1 7. Has a valid United States Social Security or National Practitioner Identification  
371.2 number.
- 371.3 G. The privilege to practice is derived from the home state license.
- 371.4 H. An audiologist or speech-language pathologist practicing in a member state must  
371.5 comply with the state practice laws of the state in which the client is located at the time  
371.6 service is provided. The practice of audiology and speech-language pathology shall include  
371.7 all audiology and speech-language pathology practice as defined by the state practice laws  
371.8 of the member state in which the client is located. The practice of audiology and  
371.9 speech-language pathology in a member state under a privilege to practice shall subject an  
371.10 audiologist or speech-language pathologist to the jurisdiction of the licensing board, the  
371.11 courts and the laws of the member state in which the client is located at the time service is  
371.12 provided.
- 371.13 I. Individuals not residing in a member state shall continue to be able to apply for a  
371.14 member state's single-state license as provided under the laws of each member state.  
371.15 However, the single-state license granted to these individuals shall not be recognized as  
371.16 granting the privilege to practice audiology or speech-language pathology in any other  
371.17 member state. Nothing in this Compact shall affect the requirements established by a member  
371.18 state for the issuance of a single-state license.
- 371.19 J. Member states may charge a fee for granting a compact privilege.
- 371.20 K. Member states must comply with the bylaws and rules and regulations of the  
371.21 Commission.
- 371.22 Section 3. Compact Privilege
- 371.23 A. To exercise the compact privilege under the terms and provisions of the Compact,  
371.24 the audiologist or speech-language pathologist shall:

- 371.25 1. Hold an active license in the home state;  
371.26 2. Have no encumbrance on any state license;  
371.27 3. Be eligible for a compact privilege in any member state in accordance with Section  
371.28 2;  
371.29 4. Have not had any adverse action against any license or compact privilege within the  
371.30 previous two years from date of application;  
371.31 5. Notify the Commission that the licensee is seeking the compact privilege within a  
371.32 remote state(s);  
372.1 6. Pay any applicable fees, including any state fee, for the compact privilege; and  
372.2 7. Report to the Commission adverse action taken by any non-member state within 30  
372.3 days from the date the adverse action is taken.  
372.4 B. For the purposes of the compact privilege, an audiologist or speech-language  
372.5 pathologist shall only hold one home state license at a time.  
372.6 C. Except as provided in Section 5, if an audiologist or speech-language pathologist  
372.7 changes primary state of residence by moving between two member states, the audiologist  
372.8 or speech-language pathologist must apply for licensure in the new home state, and the  
372.9 license issued by the prior home state shall be deactivated in accordance with applicable  
372.10 rules adopted by the Commission.  
372.11 D. The audiologist or speech-language pathologist may apply for licensure in advance  
372.12 of a change in primary state of residence.  
372.13 E. A license shall not be issued by the new home state until the audiologist or  
372.14 speech-language pathologist provides satisfactory evidence of a change in primary state of  
372.15 residence to the new home state and satisfies all applicable requirements to obtain a license  
372.16 from the new home state.  
372.17 F. If an audiologist or speech-language pathologist changes primary state of residence  
372.18 by moving from a member state to a non-member state, the license issued by the prior home  
372.19 state shall convert to a single-state license, valid only in the former home state.  
372.20 G. The compact privilege is valid until the expiration date of the home state license. The  
372.21 licensee must comply with the requirements of Section 3A to maintain the compact privilege  
372.22 in the remote state.  
372.23 H. A licensee providing audiology or speech-language pathology services in a remote  
372.24 state under the compact privilege shall function within the laws and regulations of the remote  
372.25 state.  
372.26 I. A licensee providing audiology or speech-language pathology services in a remote  
372.27 state is subject to that state's regulatory authority. A remote state may, in accordance with



- 372.28 due process and that state's laws, remove a licensee's compact privilege in the remote state  
372.29 for a specific period of time, impose fines, or take any other necessary actions to protect  
372.30 the health and safety of its citizens.
- 372.31 J. If a home state license is encumbered, the licensee shall lose the compact privilege in  
372.32 any remote state until the following occur:
- 373.1 1. The home state license is no longer encumbered; and  
373.2 2. Two years have elapsed from the date of the adverse action.
- 373.3 K. Once an encumbered license in the home state is restored to good standing, the licensee  
373.4 must meet the requirements of Section 3A to obtain a compact privilege in any remote state.
- 373.5 L. Once the requirements of Section 3J have been met, the licensee must meet the  
373.6 requirements in Section 3A to obtain a compact privilege in a remote state.
- 373.7 Section 4. Compact Privilege to Practice Telehealth
- 373.8 Member states shall recognize the right of an audiologist or speech-language pathologist,  
373.9 licensed by a home state in accordance with Section 2 and under rules promulgated by the  
373.10 Commission, to practice audiology or speech-language pathology in a member state via  
373.11 telehealth under a privilege to practice as provided in the Compact and rules promulgated  
373.12 by the Commission.
- 373.13 Section 5. Active Duty Military Personnel or Their Spouses
- 373.14 Active duty military personnel, or their spouse, shall designate a home state where the  
373.15 individual has a current license in good standing. The individual may retain the home state  
373.16 designation during the period the service member is on active duty. Subsequent to designating  
373.17 a home state, the individual shall only change their home state through application for  
373.18 licensure in the new state.
- 373.19 Section 6. Adverse Actions
- 373.20 A. In addition to the other powers conferred by state law, a remote state shall have the  
373.21 authority, in accordance with existing state due process law, to:
- 373.22 1. Take adverse action against an audiologist's or speech-language pathologist's privilege  
373.23 to practice within that member state.
- 373.24 2. Issue subpoenas for both hearings and investigations that require the attendance and  
373.25 testimony of witnesses as well as the production of evidence. Subpoenas issued by a licensing  
373.26 board in a member state for the attendance and testimony of witnesses or the production of  
373.27 evidence from another member state shall be enforced in the latter state by any court of  
373.28 competent jurisdiction, according to the practice and procedure of that court applicable to  
373.29 subpoenas issued in proceedings pending before it. The issuing authority shall pay any

- 373.30 witness fees, travel expenses, mileage and other fees required by the service statutes of the  
373.31 state in which the witnesses or evidence are located.
- 374.1 B. Only the home state shall have the power to take adverse action against an audiologist's  
374.2 or speech-language pathologist's license issued by the home state.
- 374.3 C. For purposes of taking adverse action, the home state shall give the same priority and  
374.4 effect to reported conduct received from a member state as it would if the conduct had  
374.5 occurred within the home state. In so doing, the home state shall apply its own state laws  
374.6 to determine appropriate action.
- 374.7 D. The home state shall complete any pending investigations of an audiologist or  
374.8 speech-language pathologist who changes primary state of residence during the course of  
374.9 the investigations. The home state shall also have the authority to take appropriate action(s)  
374.10 and shall promptly report the conclusions of the investigations to the administrator of the  
374.11 data system. The administrator of the data system shall promptly notify the new home state  
374.12 of any adverse actions.
- 374.13 E. If otherwise permitted by state law, the member state may recover from the affected  
374.14 audiologist or speech-language pathologist the costs of investigations and disposition of  
374.15 cases resulting from any adverse action taken against that audiologist or speech-language  
374.16 pathologist.
- 374.17 F. The member state may take adverse action based on the factual findings of the remote  
374.18 state, provided that the home state follows its own procedures for taking the adverse action.
- 374.19 G. Joint Investigations
- 374.20 1. In addition to the authority granted to a member state by its respective audiology or  
374.21 speech-language pathology practice act or other applicable state law, any member state may  
374.22 participate with other member states in joint investigations of licensees.
- 374.23 2. Member states shall share any investigative, litigation, or compliance materials in  
374.24 furtherance of any joint or individual investigation initiated under the Compact.
- 374.25 H. If adverse action is taken by the home state against an audiologist's or speech-language  
374.26 pathologist's license, the audiologist's or speech-language pathologist's privilege to practice  
374.27 in all other member states shall be deactivated until all encumbrances have been removed  
374.28 from the state license. All home state disciplinary orders that impose adverse action against  
374.29 an audiologist's or speech-language pathologist's license shall include a statement that the  
374.30 audiologist's or speech-language pathologist's privilege to practice is deactivated in all  
374.31 member states during the pendency of the order.
- 375.1 I. If a member state takes adverse action, it shall promptly notify the administrator of  
375.2 the data system. The administrator of the data system shall promptly notify the home state  
375.3 of any adverse actions by remote states.

375.4 J. Nothing in this Compact shall override a member state's decision that participation in  
375.5 an alternative program may be used in lieu of adverse action.

375.6 Section 7. Establishment of the Audiology and Speech-Language Pathology Compact  
375.7 Commission

375.8 A. The Compact member states hereby create and establish a joint public agency known  
375.9 as the Audiology and Speech-Language Pathology Compact Commission:

375.10 1. The Commission is an instrumentality of the Compact states.

375.11 2. Venue is proper and judicial proceedings by or against the Commission shall be  
375.12 brought solely and exclusively in a court of competent jurisdiction where the principal office  
375.13 of the Commission is located. The Commission may waive venue and jurisdictional defenses  
375.14 to the extent it adopts or consents to participate in alternative dispute resolution proceedings.

375.15 3. Nothing in this Compact shall be construed to be a waiver of sovereign immunity.

375.16 B. Membership, Voting, and Meetings

375.17 1. Each member state shall have two delegates selected by that member state's licensing  
375.18 board. The delegates shall be current members of the licensing board. One shall be an  
375.19 audiologist and one shall be a speech-language pathologist.

375.20 2. An additional five delegates, who are either a public member or board administrator  
375.21 from a state licensing board, shall be chosen by the Executive Committee from a pool of  
375.22 nominees provided by the Commission at Large.

375.23 3. Any delegate may be removed or suspended from office as provided by the law of  
375.24 the state from which the delegate is appointed.

375.25 4. The member state board shall fill any vacancy occurring on the Commission, within  
375.26 90 days.

375.27 5. Each delegate shall be entitled to one vote with regard to the promulgation of rules  
375.28 and creation of bylaws and shall otherwise have an opportunity to participate in the business  
375.29 and affairs of the Commission.

375.30 6. A delegate shall vote in person or by other means as provided in the bylaws. The  
375.31 bylaws may provide for delegates' participation in meetings by telephone or other means  
375.32 of communication.

376.1 7. The Commission shall meet at least once during each calendar year. Additional  
376.2 meetings shall be held as set forth in the bylaws.

376.3 C. The Commission shall have the following powers and duties:

376.4 1. Establish the fiscal year of the Commission;

- 376.5 2. Establish bylaws;
- 376.6 3. Establish a Code of Ethics;
- 376.7 4. Maintain its financial records in accordance with the bylaws;
- 376.8 5. Meet and take actions as are consistent with the provisions of this Compact and the  
376.9 bylaws;
- 376.10 6. Promulgate uniform rules to facilitate and coordinate implementation and  
376.11 administration of this Compact. The rules shall have the force and effect of law and shall  
376.12 be binding in all member states;
- 376.13 7. Bring and prosecute legal proceedings or actions in the name of the Commission,  
376.14 provided that the standing of any state audiology or speech-language pathology licensing  
376.15 board to sue or be sued under applicable law shall not be affected;
- 376.16 8. Purchase and maintain insurance and bonds;
- 376.17 9. Borrow, accept, or contract for services of personnel, including, but not limited to,  
376.18 employees of a member state;
- 376.19 10. Hire employees, elect or appoint officers, fix compensation, define duties, grant  
376.20 individuals appropriate authority to carry out the purposes of the Compact, and establish  
376.21 the Commission's personnel policies and programs relating to conflicts of interest,  
376.22 qualifications of personnel, and other related personnel matters;
- 376.23 11. Accept any and all appropriate donations and grants of money, equipment, supplies,  
376.24 materials and services, and to receive, utilize and dispose of the same; provided that at all  
376.25 times the Commission shall avoid any appearance of impropriety and/or conflict of interest;
- 376.26 12. Lease, purchase, accept appropriate gifts or donations of, or otherwise own, hold,  
376.27 improve or use, any property, real, personal, or mixed; provided that at all times the  
376.28 Commission shall avoid any appearance of impropriety;
- 376.29 13. Sell, convey, mortgage, pledge, lease, exchange, abandon, or otherwise dispose of  
376.30 any property real, personal, or mixed;
- 376.31 14. Establish a budget and make expenditures;
- 377.1 15. Borrow money;
- 377.2 16. Appoint committees, including standing committees composed of members, and  
377.3 other interested persons as may be designated in this Compact and the bylaws;
- 377.4 17. Provide and receive information from, and cooperate with, law enforcement agencies;
- 377.5 18. Establish and elect an Executive Committee; and

- 377.6 19. Perform other functions as may be necessary or appropriate to achieve the purposes  
377.7 of this Compact consistent with the state regulation of audiology and speech-language  
377.8 pathology licensure and practice.
- 377.9 D. The Executive Committee
- 377.10 The Executive Committee shall have the power to act on behalf of the Commission  
377.11 according to the terms of this Compact.
- 377.12 1. The Executive Committee shall be composed of ten members:
- 377.13 a. Seven voting members who are elected by the Commission from the current  
377.14 membership of the Commission;
- 377.15 b. Two ex-officios, consisting of one nonvoting member from a recognized national  
377.16 audiology professional association and one nonvoting member from a recognized national  
377.17 speech-language pathology association; and
- 377.18 c. One ex-officio, nonvoting member from the recognized membership organization of  
377.19 the audiology and speech-language pathology licensing boards.
- 377.20 E. The ex-officio members shall be selected by their respective organizations.
- 377.21 1. The Commission may remove any member of the Executive Committee as provided  
377.22 in bylaws.
- 377.23 2. The Executive Committee shall meet at least annually.
- 377.24 3. The Executive Committee shall have the following duties and responsibilities:
- 377.25 a. Recommend to the entire Commission changes to the rules or bylaws, changes to this  
377.26 Compact legislation, fees paid by Compact member states such as annual dues, and any  
377.27 commission Compact fee charged to licensees for the compact privilege;
- 377.28 b. Ensure Compact administration services are appropriately provided, contractual or  
377.29 otherwise;
- 377.30 c. Prepare and recommend the budget;
- 378.1 d. Maintain financial records on behalf of the Commission;
- 378.2 e. Monitor Compact compliance of member states and provide compliance reports to  
378.3 the Commission;
- 378.4 f. Establish additional committees as necessary; and
- 378.5 g. Other duties as provided in rules or bylaws.
- 378.6 4. Meetings of the Commission

- 378.7 All meetings shall be open to the public, and public notice of meetings shall be given  
378.8 in the same manner as required under the rulemaking provisions in Section 9.
- 378.9 5. The Commission or the Executive Committee or other committees of the Commission  
378.10 may convene in a closed, non-public meeting if the Commission or Executive Committee  
378.11 or other committees of the Commission must discuss:
- 378.12 a. Non-compliance of a member state with its obligations under the Compact;  
378.13 b. The employment, compensation, discipline, or other matters, practices, or procedures  
378.14 related to specific employees or other matters related to the Commission's internal personnel  
378.15 practices and procedures;
- 378.16 c. Current, threatened, or reasonably anticipated litigation;  
378.17 d. Negotiation of contracts for the purchase, lease, or sale of goods, services, or real  
378.18 estate;
- 378.19 e. Accusing any person of a crime or formally censuring any person;  
378.20 f. Disclosure of trade secrets or commercial or financial information that is privileged  
378.21 or confidential;
- 378.22 g. Disclosure of information of a personal nature where disclosure would constitute a  
378.23 clearly unwarranted invasion of personal privacy;
- 378.24 h. Disclosure of investigative records compiled for law enforcement purposes;  
378.25 i. Disclosure of information related to any investigative reports prepared by or on behalf  
378.26 of or for use of the Commission or other committee charged with responsibility of  
378.27 investigation or determination of compliance issues pursuant to the Compact; or
- 378.28 j. Matters specifically exempted from disclosure by federal or member state statute.
- 379.1 6. If a meeting, or portion of a meeting, is closed pursuant to this provision, the  
379.2 Commission's legal counsel or designee shall certify that the meeting may be closed and  
379.3 shall reference each relevant exempting provision.
- 379.4 7. The Commission shall keep minutes that fully and clearly describe all matters discussed  
379.5 in a meeting and shall provide a full and accurate summary of actions taken, and the reasons  
379.6 therefore, including a description of the views expressed. All documents considered in  
379.7 connection with an action shall be identified in minutes. All minutes and documents of a  
379.8 closed meeting shall remain under seal, subject to release by a majority vote of the  
379.9 Commission or order of a court of competent jurisdiction.
- 379.10 8. Financing of the Commission
- 379.11 a. The Commission shall pay, or provide for the payment of, the reasonable expenses  
379.12 of its establishment, organization, and ongoing activities.

379.13 b. The Commission may accept any and all appropriate revenue sources, donations, and  
379.14 grants of money, equipment, supplies, materials, and services.

379.15 c. The Commission may levy on and collect an annual assessment from each member  
379.16 state or impose fees on other parties to cover the cost of the operations and activities of the  
379.17 Commission and its staff, which must be in a total amount sufficient to cover its annual  
379.18 budget as approved each year for which revenue is not provided by other sources. The  
379.19 aggregate annual assessment amount shall be allocated based upon a formula to be determined  
379.20 by the Commission, which shall promulgate a rule binding upon all member states.

379.21 9. The Commission shall not incur obligations of any kind prior to securing the funds  
379.22 adequate to meet the same; nor shall the Commission pledge the credit of any of the member  
379.23 states, except by and with the authority of the member state.

379.24 10. The Commission shall keep accurate accounts of all receipts and disbursements. The  
379.25 receipts and disbursements of the Commission shall be subject to the audit and accounting  
379.26 procedures established under its bylaws. However, all receipts and disbursements of funds  
379.27 handled by the Commission shall be audited yearly by a certified or licensed public  
379.28 accountant, and the report of the audit shall be included in and become part of the annual  
379.29 report of the Commission.

379.30 **F. Qualified Immunity, Defense, and Indemnification**

379.31 1. The members, officers, executive director, employees and representatives of the  
379.32 Commission shall be immune from suit and liability, either personally or in their official  
379.33 capacity, for any claim for damage to or loss of property or personal injury or other civil  
380.1 liability caused by or arising out of any actual or alleged act, error, or omission that occurred,  
380.2 or that the person against whom the claim is made had a reasonable basis for believing  
380.3 occurred within the scope of Commission employment, duties, or responsibilities; provided  
380.4 that nothing in this paragraph shall be construed to protect any person from suit or liability  
380.5 for any damage, loss, injury, or liability caused by the intentional or willful or wanton  
380.6 misconduct of that person.

380.7 2. The Commission shall defend any member, officer, executive director, employee, or  
380.8 representative of the Commission in any civil action seeking to impose liability arising out  
380.9 of any actual or alleged act, error, or omission that occurred within the scope of Commission  
380.10 employment, duties, or responsibilities, or that the person against whom the claim is made  
380.11 had a reasonable basis for believing occurred within the scope of Commission employment,  
380.12 duties, or responsibilities; provided that nothing herein shall be construed to prohibit that  
380.13 person from retaining his or her own counsel; and provided further, that the actual or alleged  
380.14 act, error, or omission did not result from that person's intentional or willful or wanton  
380.15 misconduct.

380.16 3. The Commission shall indemnify and hold harmless any member, officer, executive  
380.17 director, employee, or representative of the Commission for the amount of any settlement  
380.18 or judgment obtained against that person arising out of any actual or alleged act, error or

380.19 omission that occurred within the scope of Commission employment, duties, or  
380.20 responsibilities, or that person had a reasonable basis for believing occurred within the scope  
380.21 of Commission employment, duties, or responsibilities, provided that the actual or alleged  
380.22 act, error, or omission did not result from the intentional or willful or wanton misconduct  
380.23 of that person.

380.24 Section 8. Data System

380.25 A. The Commission shall provide for the development, maintenance, and utilization of  
380.26 a coordinated database and reporting system containing licensure, adverse action, and  
380.27 investigative information on all licensed individuals in member states.

380.28 B. Notwithstanding any other provision of state law to the contrary, a member state shall  
380.29 submit a uniform data set to the data system on all individuals to whom this Compact is  
380.30 applicable as required by the rules of the Commission, including:

380.31 1. Identifying information;

380.32 2. Licensure data;

380.33 3. Adverse actions against a license or compact privilege;

381.1 4. Non-confidential information related to alternative program participation;

381.2 5. Any denial of application for licensure, and the reason(s) for denial; and

381.3 6. Other information that may facilitate the administration of this Compact, as determined  
381.4 by the rules of the Commission.

381.5 C. Investigative information pertaining to a licensee in any member state shall only be  
381.6 available to other member states.

381.7 D. The Commission shall promptly notify all member states of any adverse action taken  
381.8 against a licensee or an individual applying for a license. Adverse action information  
381.9 pertaining to a licensee in any member state shall be available to any other member state.

381.10 E. Member states contributing information to the data system may designate information  
381.11 that may not be shared with the public without the express permission of the contributing  
381.12 state.

381.13 F. Any information submitted to the data system that is subsequently required to be  
381.14 expunged by the laws of the member state contributing the information shall be removed  
381.15 from the data system.

381.16 Section 9. Rulemaking

381.17 A. The Commission shall exercise its rulemaking powers pursuant to the criteria set  
381.18 forth in this Section and the rules adopted thereunder. Rules and amendments shall become  
381.19 binding as of the date specified in each rule or amendment.



- 381.20 B. If a majority of the legislatures of the member states rejects a rule, by enactment of  
381.21 a statute or resolution in the same manner used to adopt the Compact within four years of  
381.22 the date of adoption of the rule, the rule shall have no further force and effect in any member  
381.23 state.
- 381.24 C. Rules or amendments to the rules shall be adopted at a regular or special meeting of  
381.25 the Commission.
- 381.26 D. Prior to promulgation and adoption of a final rule or rules by the Commission, and  
381.27 at least 30 days in advance of the meeting at which the rule shall be considered and voted  
381.28 upon, the Commission shall file a Notice of Proposed Rulemaking:
- 381.29 1. On the website of the Commission or other publicly accessible platform; and
- 381.30 2. On the website of each member state audiology or speech-language pathology licensing  
381.31 board or other publicly accessible platform or the publication in which each state would  
381.32 otherwise publish proposed rules.
- 382.1 E. The Notice of Proposed Rulemaking shall include:
- 382.2 1. The proposed time, date, and location of the meeting in which the rule shall be  
382.3 considered and voted upon;
- 382.4 2. The text of the proposed rule or amendment and the reason for the proposed rule;
- 382.5 3. A request for comments on the proposed rule from any interested person; and
- 382.6 4. The manner in which interested persons may submit notice to the Commission of  
382.7 their intention to attend the public hearing and any written comments.
- 382.8 F. Prior to the adoption of a proposed rule, the Commission shall allow persons to submit  
382.9 written data, facts, opinions, and arguments, which shall be made available to the public.
- 382.10 G. The Commission shall grant an opportunity for a public hearing before it adopts a  
382.11 rule or amendment if a hearing is requested by:
- 382.12 1. At least 25 persons;
- 382.13 2. A state or federal governmental subdivision or agency; or
- 382.14 3. An association having at least 25 members.
- 382.15 H. If a hearing is held on the proposed rule or amendment, the Commission shall publish  
382.16 the place, time, and date of the scheduled public hearing. If the hearing is held via electronic  
382.17 means, the Commission shall publish the mechanism for access to the electronic hearing.
- 382.18 1. All persons wishing to be heard at the hearing shall notify the executive director of  
382.19 the Commission or other designated member in writing of their desire to appear and testify  
382.20 at the hearing not less than five business days before the scheduled date of the hearing.

- 382.21 2. Hearings shall be conducted in a manner providing each person who wishes to comment  
382.22 a fair and reasonable opportunity to comment orally or in writing.
- 382.23 3. All hearings shall be recorded. A copy of the recording shall be made available on  
382.24 request.
- 382.25 4. Nothing in this section shall be construed as requiring a separate hearing on each rule.  
382.26 Rules may be grouped for the convenience of the Commission at hearings required by this  
382.27 section.
- 382.28 I. Following the scheduled hearing date, or by the close of business on the scheduled  
382.29 hearing date if the hearing was not held, the Commission shall consider all written and oral  
382.30 comments received.
- 383.1 J. If no written notice of intent to attend the public hearing by interested parties is  
383.2 received, the Commission may proceed with promulgation of the proposed rule without a  
383.3 public hearing.
- 383.4 K. The Commission shall, by majority vote of all members, take final action on the  
383.5 proposed rule and shall determine the effective date of the rule, if any, based on the  
383.6 rulemaking record and the full text of the rule.
- 383.7 L. Upon determination that an emergency exists, the Commission may consider and  
383.8 adopt an emergency rule without prior notice, opportunity for comment, or hearing, provided  
383.9 that the usual rulemaking procedures provided in the Compact and in this section shall be  
383.10 retroactively applied to the rule as soon as reasonably possible, in no event later than 90  
383.11 days after the effective date of the rule. For the purposes of this provision, an emergency  
383.12 rule is one that must be adopted immediately in order to:
- 383.13 1. Meet an imminent threat to public health, safety, or welfare;
- 383.14 2. Prevent a loss of Commission or member state funds; or
- 383.15 3. Meet a deadline for the promulgation of an administrative rule that is established by  
383.16 federal law or rule.
- 383.17 M. The Commission or an authorized committee of the Commission may direct revisions  
383.18 to a previously adopted rule or amendment for purposes of correcting typographical errors,  
383.19 errors in format, errors in consistency, or grammatical errors. Public notice of any revisions  
383.20 shall be posted on the website of the Commission. The revision shall be subject to challenge  
383.21 by any person for a period of 30 days after posting. The revision may be challenged only  
383.22 on grounds that the revision results in a material change to a rule. A challenge shall be made  
383.23 in writing and delivered to the chair of the Commission prior to the end of the notice period.  
383.24 If no challenge is made, the revision shall take effect without further action. If the revision  
383.25 is challenged, the revision may not take effect without the approval of the Commission.
- 383.26 Section 10. Oversight, Dispute Resolution, and Enforcement

383.27 A. Dispute Resolution

383.28 1. Upon request by a member state, the Commission shall attempt to resolve disputes  
383.29 related to the Compact that arise among member states and between member and non-member  
383.30 states.

383.31 2. The Commission shall promulgate a rule providing for both mediation and binding  
383.32 dispute resolution for disputes as appropriate.

384.1 B. Enforcement

384.2 1. The Commission, in the reasonable exercise of its discretion, shall enforce the  
384.3 provisions and rules of this Compact.

384.4 2. By majority vote, the Commission may initiate legal action in the United States District  
384.5 Court for the District of Columbia or the federal district where the Commission has its  
384.6 principal offices against a member state in default to enforce compliance with the provisions  
384.7 of the Compact and its promulgated rules and bylaws. The relief sought may include both  
384.8 injunctive relief and damages. In the event judicial enforcement is necessary, the prevailing  
384.9 member shall be awarded all costs of litigation, including reasonable attorney's fees.

384.10 3. The remedies herein shall not be the exclusive remedies of the Commission. The  
384.11 Commission may pursue any other remedies available under federal or state law.

384.12 Section 11. Date of Implementation of the Interstate Commission for Audiology and  
384.13 Speech-Language Pathology Practice and Associated Rules, Withdrawal, and Amendment

384.14 A. The Compact shall come into effect on the date on which the Compact statute is  
384.15 enacted into law in the tenth member state. The provisions, which become effective at that  
384.16 time, shall be limited to the powers granted to the Commission relating to assembly and the  
384.17 promulgation of rules. Thereafter, the Commission shall meet and exercise rulemaking  
384.18 powers necessary to the implementation and administration of the Compact.

384.19 B. Any state that joins the Compact subsequent to the Commission's initial adoption of  
384.20 the rules shall be subject to the rules as they exist on the date on which the Compact becomes  
384.21 law in that state. Any rule that has been previously adopted by the Commission shall have  
384.22 the full force and effect of law on the day the Compact becomes law in that state.

384.23 C. Any member state may withdraw from this Compact by enacting a statute repealing  
384.24 the same.

384.25 1. A member state's withdrawal shall not take effect until six months after enactment of  
384.26 the repealing statute.

384.27 2. Withdrawal shall not affect the continuing requirement of the withdrawing state's  
384.28 audiology or speech-language pathology licensing board to comply with the investigative  
384.29 and adverse action reporting requirements of this act prior to the effective date of withdrawal.

384.30 D. Nothing contained in this Compact shall be construed to invalidate or prevent any  
384.31 audiology or speech-language pathology licensure agreement or other cooperative  
384.32 arrangement between a member state and a non-member state that does not conflict with  
384.33 the provisions of this Compact.

385.1 E. This Compact may be amended by the member states. No amendment to this Compact  
385.2 shall become effective and binding upon any member state until it is enacted into the laws  
385.3 of all member states.

385.4 Section 12. Construction and Severability

385.5 This Compact shall be liberally construed so as to effectuate the purposes thereof. The  
385.6 provisions of this Compact shall be severable and if any phrase, clause, sentence, or provision  
385.7 of this Compact is declared to be contrary to the constitution of any member state or of the  
385.8 United States or the applicability thereof to any government, agency, person, or circumstance  
385.9 is held invalid, the validity of the remainder of this Compact and the applicability thereof  
385.10 to any government, agency, person, or circumstance shall not be affected thereby. If this  
385.11 Compact shall be held contrary to the constitution of any member state, the Compact shall  
385.12 remain in full force and effect as to the remaining member states and in full force and effect  
385.13 as to the member state affected as to all severable matters.

385.14 Section 13. Binding Effect of Compact and Other Laws

385.15 A. Nothing herein prevents the enforcement of any other law of a member state that is  
385.16 not inconsistent with the Compact.

385.17 B. All laws in a member state in conflict with the Compact are superseded to the extent  
385.18 of the conflict.

385.19 C. All lawful actions of the Commission, including all rules and bylaws promulgated  
385.20 by the Commission, are binding upon the member states.

385.21 D. All agreements between the Commission and the member states are binding in  
385.22 accordance with their terms.

385.23 E. In the event any provision of the Compact exceeds the constitutional limits imposed  
385.24 on the legislature of any member state, the provision shall be ineffective to the extent of the  
385.25 conflict with the constitutional provision in question in that member state.

385.26 **EFFECTIVE DATE.** This section is effective on the date on which the compact statute  
385.27 is enacted into law in the tenth member state in accordance with section 11 of this Compact.

270.8 Section 1. Minnesota Statutes 2020, section 148B.33, is amended by adding a subdivision  
270.9 to read:

270.10 Subd. 1a. **Supervision requirement; postgraduate experience.** The board must allow  
270.11 an applicant to satisfy the requirement for supervised postgraduate experience in marriage  
270.12 and family therapy with all required hours of supervision provided through real-time,  
270.13 two-way interactive audio and visual communication.

270.14 **EFFECTIVE DATE.** This section is effective the day following final enactment and  
270.15 applies to supervision requirements in effect on or after that date.

270.16 Sec. 2. Minnesota Statutes 2021 Supplement, section 148B.5301, subdivision 2, is amended  
270.17 to read:

270.18 Subd. 2. **Supervision.** (a) To qualify as a LPCC, an applicant must have completed  
270.19 4,000 hours of post-master's degree supervised professional practice in the delivery of  
270.20 clinical services in the diagnosis and treatment of mental illnesses and disorders in both  
270.21 children and adults. The supervised practice shall be conducted according to the requirements  
270.22 in paragraphs (b) to (e).

270.23 (b) The supervision must have been received under a contract that defines clinical practice  
270.24 and supervision from a mental health professional who is qualified according to section  
270.25 245I.04, subdivision 2, or by a board-approved supervisor, who has at least two years of  
270.26 postlicensure experience in the delivery of clinical services in the diagnosis and treatment  
270.27 of mental illnesses and disorders. All supervisors must meet the supervisor requirements in  
270.28 Minnesota Rules, part 2150.5010.

270.29 (c) The supervision must be obtained at the rate of two hours of supervision per 40 hours  
270.30 of professional practice. The supervision must be evenly distributed over the course of the  
270.31 supervised professional practice. At least 75 percent of the required supervision hours must  
270.32 be received in person or through real-time, two-way interactive audio and visual  
271.1 communication, and the board must allow an applicant to satisfy this supervision requirement  
271.2 with all required hours of supervision received through real-time, two-way interactive audio

385.28 Sec. 17. **[148.5186] APPLICATION OF AUDIOLOGY AND SPEECH-LANGUAGE**  
385.29 **PATHOLOGY INTERSTATE COMPACT TO EXISTING LAWS.**

385.30 Subdivision 1. **Rulemaking.** Rules developed by the Audiology and Speech-Language  
385.31 Pathology Compact Commission under section 148.5185 are not subject to sections 14.05  
385.32 to 14.389.

386.1 Subd. 2. **Background studies.** The commissioner of health is authorized to require an  
386.2 audiologist or speech-language pathologist licensed in Minnesota as the home state to submit  
386.3 to a criminal history background check under section 144.0572.

386.4 Subd. 3. **Provision of data.** All provisions of section 148.5185 authorizing or requiring  
386.5 the commissioner to provide data to the Audiology and Speech-Language Pathology Compact  
386.6 Commission are authorized by section 144.051, subdivision 6.

271.3 and visual communication. The remaining 25 percent of the required hours may be received  
271.4 by telephone or by audio or audiovisual electronic device. At least 50 percent of the required  
271.5 hours of supervision must be received on an individual basis. The remaining 50 percent  
271.6 may be received in a group setting.

271.7 (d) The supervised practice must include at least 1,800 hours of clinical client contact.

271.8 (e) The supervised practice must be clinical practice. Supervision includes the observation  
271.9 by the supervisor of the successful application of professional counseling knowledge, skills,  
271.10 and values in the differential diagnosis and treatment of psychosocial function, disability,  
271.11 or impairment, including addictions and emotional, mental, and behavioral disorders.

271.12 **EFFECTIVE DATE.** This section is effective the day following final enactment and  
271.13 applies to supervision requirements in effect on or after that date.

386.7 Sec. 18. **[148B.75] LICENSED PROFESSIONAL COUNSELOR INTERSTATE**  
386.8 **COMPACT.**

386.9 The licensed professional counselor interstate compact is enacted into law and entered  
386.10 into with all other jurisdictions legally joining in it, in the form substantially specified in  
386.11 this section.

386.12 **ARTICLE I**  
386.13 **DEFINITIONS**

386.14 (a) As used in this compact, and except as otherwise provided, the following definitions  
386.15 shall apply.

386.16 (b) "Active duty military" means full-time duty status in the active uniformed service  
386.17 of the United States, including members of the national guard and reserve on active duty  
386.18 orders pursuant to United States Code, title 10, chapters 1209 and 1211.

386.19 (c) "Adverse action" means any administrative, civil, equitable, or criminal action  
386.20 permitted by a state's laws which is imposed by a licensing board or other authority against  
386.21 a licensed professional counselor, including actions against an individual's license or privilege  
386.22 to practice such as revocation, suspension, probation, monitoring of the licensee, limitation  
386.23 on the licensee's practice, or any other encumbrance on licensure affecting a licensed  
386.24 professional counselor's authorization to practice, including issuance of a cease and desist  
386.25 action.

386.26 (d) "Alternative program" means a non-disciplinary monitoring or practice remediation  
386.27 process approved by a professional counseling licensing board to address impaired  
386.28 practitioners.

- 386.29 (e) "Continuing competence" and "continuing education" means a requirement, as a  
386.30 condition of license renewal, to provide evidence of participation in, and completion of,  
386.31 educational and professional activities relevant to practice or area of work.
- 387.1 (f) "Counseling compact commission" or "commission" means the national administrative  
387.2 body whose membership consists of all states that have enacted the compact.
- 387.3 (g) "Current significant investigative information" means:
- 387.4 (1) investigative information that a licensing board, after a preliminary inquiry that  
387.5 includes notification and an opportunity for the licensed professional counselor to respond,  
387.6 if required by state law, has reason to believe is not groundless and, if proved true, would  
387.7 indicate more than a minor infraction; or
- 387.8 (2) investigative information that indicates that the licensed professional counselor  
387.9 represents an immediate threat to public health and safety regardless of whether the licensed  
387.10 professional counselor has been notified and had an opportunity to respond.
- 387.11 (h) "Data system" means a repository of information about licensees, including but not  
387.12 limited to continuing education, examination, licensure, investigative, privilege to practice,  
387.13 and adverse action information.
- 387.14 (i) "Encumbered license" means a license in which an adverse action restricts the practice  
387.15 of licensed professional counseling by the licensee and said adverse action has been reported  
387.16 to the National Practitioners Data Bank (NPDB).
- 387.17 (j) "Encumbrance" means a revocation or suspension of, or any limitation on, the full  
387.18 and unrestricted practice of licensed professional counseling by a licensing board.
- 387.19 (k) "Executive committee" means a group of directors elected or appointed to act on  
387.20 behalf of, and within the powers granted to them by, the commission.
- 387.21 (l) "Home state" means the member state that is the licensee's primary state of residence.
- 387.22 (m) "Impaired practitioner" means an individual who has a condition that may impair  
387.23 their ability to practice as a licensed professional counselor without some type of intervention  
387.24 and may include but is not limited to alcohol and drug dependence, mental health impairment,  
387.25 and neurological or physical impairment.
- 387.26 (n) "Investigative information" means information, records, and documents received or  
387.27 generated by a professional counseling licensing board pursuant to an investigation.
- 387.28 (o) "Jurisprudence requirement," if required by a member state, means the assessment  
387.29 of an individual's knowledge of the laws and rules governing the practice of professional  
387.30 counseling in a state.

- 388.1 (p) "Licensed professional counselor" means a counselor licensed by a member state,  
388.2 regardless of the title used by that state, to independently assess, diagnose, and treat  
388.3 behavioral health conditions.
- 388.4 (q) "Licensee" means an individual who currently holds an authorization from the state  
388.5 to practice as a licensed professional counselor.
- 388.6 (r) "Licensing board" means the agency of a state, or equivalent, that is responsible for  
388.7 the licensing and regulation of licensed professional counselors.
- 388.8 (s) "Member state" means a state that has enacted the compact.
- 388.9 (t) "Privilege to practice" means a legal authorization, which is equivalent to a license,  
388.10 permitting the practice of professional counseling in a remote state.
- 388.11 (u) "Professional counseling" means the assessment, diagnosis, and treatment of  
388.12 behavioral health conditions by a licensed professional counselor.
- 388.13 (v) "Remote state" means a member state other than the home state, where a licensee is  
388.14 exercising or seeking to exercise the privilege to practice.
- 388.15 (w) "Rule" means a regulation promulgated by the commission that has the force of law.
- 388.16 (x) "Single state license" means a licensed professional counselor license issued by a  
388.17 member state that authorizes practice only within the issuing state and does not include a  
388.18 privilege to practice in any other member state.
- 388.19 (y) "State" means any state, commonwealth, district, or territory of the United States  
388.20 that regulates the practice of professional counseling.
- 388.21 (z) "Telehealth" means the application of telecommunication technology to deliver  
388.22 professional counseling services remotely to assess, diagnose, and treat behavioral health  
388.23 conditions.
- 388.24 (aa) "Unencumbered license" means a license that authorizes a licensed professional  
388.25 counselor to engage in the full and unrestricted practice of professional counseling.

**ARTICLE II**

**STATE PARTICIPATION IN THE COMPACT**

- 388.26
- 388.27
- 388.28 (a) To participate in the compact, a state must currently:
- 388.29 (1) license and regulate licensed professional counselors;
- 388.30 (2) require licensees to pass a nationally recognized exam approved by the commission;
- 389.1 (3) require licensees to have a 60 semester-hour or 90 quarter-hour master's degree in  
389.2 counseling or 60 semester-hours or 90 quarter-hours of graduate coursework including the  
389.3 following topic areas:



- 389.4 (i) professional counseling orientation and ethical practice;  
389.5 (ii) social and cultural diversity;  
389.6 (iii) human growth and development;  
389.7 (iv) career development;  
389.8 (v) counseling and helping relationships;  
389.9 (vi) group counseling and group work;  
389.10 (vii) diagnosis and treatment; assessment and testing;  
389.11 (viii) research and program evaluation; and  
389.12 (ix) other areas as determined by the commission;  
389.13 (4) require licensees to complete a supervised postgraduate professional experience as  
389.14 defined by the commission; and  
389.15 (5) have a mechanism in place for receiving and investigating complaints about licensees.  
389.16 (b) A member state shall:  
389.17 (1) participate fully in the commission's data system, including using the commission's  
389.18 unique identifier as defined in rules;  
389.19 (2) notify the commission, in compliance with the terms of the compact and rules, of  
389.20 any adverse action or the availability of investigative information regarding a licensee;  
389.21 (3) implement or utilize procedures for considering the criminal history records of  
389.22 applicants for an initial privilege to practice. These procedures shall include the submission  
389.23 of fingerprints or other biometric-based information by applicants for the purpose of obtaining  
389.24 an applicant's criminal history record information from the Federal Bureau of Investigation  
389.25 and the agency responsible for retaining that state's criminal records;  
389.26 (i) a member state must fully implement a criminal background check requirement,  
389.27 within a time frame established by rule, by receiving the results of the Federal Bureau of  
389.28 Investigation record search and shall use the results in making licensure decisions; and  
389.29 (ii) communication between a member state, the commission, and among member states  
389.30 regarding the verification of eligibility for licensure through the compact shall not include  
390.1 any information received from the Federal Bureau of Investigation relating to a federal  
390.2 criminal records check performed by a member state under Public Law 92-544;  
390.3 (4) comply with the rules of the commission;

390.4 (5) require an applicant to obtain or retain a license in the home state and meet the home  
390.5 state's qualifications for licensure or renewal of licensure, as well as all other applicable  
390.6 state laws;

390.7 (6) grant the privilege to practice to a licensee holding a valid unencumbered license in  
390.8 another member state in accordance with the terms of the compact and rules; and

390.9 (7) provide for the attendance of the state's commissioner to the counseling compact  
390.10 commission meetings.

390.11 (c) Member states may charge a fee for granting the privilege to practice.

390.12 (d) Individuals not residing in a member state shall continue to be able to apply for a  
390.13 member state's single state license as provided under the laws of each member state. However,  
390.14 the single state license granted to these individuals shall not be recognized as granting a  
390.15 privilege to practice professional counseling in any other member state.

390.16 (e) Nothing in this compact shall affect the requirements established by a member state  
390.17 for the issuance of a single state license.

390.18 (f) A license issued to a licensed professional counselor by a home state to a resident in  
390.19 that state shall be recognized by each member state as authorizing a licensed professional  
390.20 counselor to practice professional counseling, under a privilege to practice, in each member  
390.21 state.

390.22 **ARTICLE III**

390.23 **PRIVILEGE TO PRACTICE**

390.24 (a) To exercise the privilege to practice under the terms and provisions of the compact,  
390.25 the licensee shall:

390.26 (1) hold a license in the home state;

390.27 (2) have a valid United States Social Security number or national practitioner identifier;

390.28 (3) be eligible for a privilege to practice in any member state in accordance with this  
390.29 article, paragraphs (d), (g), and (h);

390.30 (4) have not had any encumbrance or restriction against any license or privilege to  
390.31 practice within the previous two years;

391.1 (5) notify the commission that the licensee is seeking the privilege to practice within a  
391.2 remote state(s);

391.3 (6) pay any applicable fees, including any state fee, for the privilege to practice;

391.4 (7) meet any continuing competence or education requirements established by the home  
391.5 state;

- 391.6 (8) meet any jurisprudence requirements established by the remote state in which the  
391.7 licensee is seeking a privilege to practice; and
- 391.8 (9) report to the commission any adverse action, encumbrance, or restriction on license  
391.9 taken by any nonmember state within 30 days from the date the action is taken.
- 391.10 (b) The privilege to practice is valid until the expiration date of the home state license.  
391.11 The licensee must comply with the requirements of this article, paragraph (a), to maintain  
391.12 the privilege to practice in the remote state.
- 391.13 (c) A licensee providing professional counseling in a remote state under the privilege  
391.14 to practice shall adhere to the laws and regulations of the remote state.
- 391.15 (d) A licensee providing professional counseling services in a remote state is subject to  
391.16 that state's regulatory authority. A remote state may, in accordance with due process and  
391.17 that state's laws, remove a licensee's privilege to practice in the remote state for a specific  
391.18 period of time, impose fines, or take any other necessary actions to protect the health and  
391.19 safety of its citizens. The licensee may be ineligible for a privilege to practice in any member  
391.20 state until the specific time for removal has passed and all fines are paid.
- 391.21 (e) If a home state license is encumbered, the licensee shall lose the privilege to practice  
391.22 in any remote state until the following occur:
- 391.23 (1) the home state license is no longer encumbered; and
- 391.24 (2) have not had any encumbrance or restriction against any license or privilege to  
391.25 practice within the previous two years.
- 391.26 (f) Once an encumbered license in the home state is restored to good standing, the  
391.27 licensee must meet the requirements of this article, paragraph (a), to obtain a privilege to  
391.28 practice in any remote state.
- 391.29 (g) If a licensee's privilege to practice in any remote state is removed, the individual  
391.30 may lose the privilege to practice in all other remote states until the following occur:
- 391.31 (1) the specific period of time for which the privilege to practice was removed has ended;
- 392.1 (2) all fines have been paid; and
- 392.2 (3) have not had any encumbrance or restriction against any license or privilege to  
392.3 practice within the previous two years.
- 392.4 (h) Once the requirements of this article, paragraph (g), have been met, the licensee must  
392.5 meet the requirements in this article, paragraph (g), to obtain a privilege to practice in a  
392.6 remote state.
- 392.7 **ARTICLE IV**

- 392.8 **OBTAINING A NEW HOME STATE LICENSE BASED ON A PRIVILEGE TO**  
392.9 **PRACTICE**
- 392.10 **(a) A licensed professional counselor may hold a home state license, which allows for**  
392.11 **a privilege to practice in other member states, in only one member state at a time.**
- 392.12 **(b) If a licensed professional counselor changes primary state of residence by moving**  
392.13 **between two member states:**
- 392.14 **(1) the licensed professional counselor shall file an application for obtaining a new home**  
392.15 **state license based on a privilege to practice, pay all applicable fees, and notify the current**  
392.16 **and new home state in accordance with applicable rules adopted by the commission;**
- 392.17 **(2) upon receipt of an application for obtaining a new home state license by virtue of a**  
392.18 **privilege to practice, the new home state shall verify that the licensed professional counselor**  
392.19 **meets the pertinent criteria outlined in article III via the data system, without need for**  
392.20 **primary source verification, except for:**
- 392.21 **(i) a Federal Bureau of Investigation fingerprint-based criminal background check if not**  
392.22 **previously performed or updated pursuant to applicable rules adopted by the commission**  
392.23 **in accordance with Public Law 92-544;**
- 392.24 **(ii) other criminal background checks as required by the new home state; and**
- 392.25 **(iii) completion of any requisite jurisprudence requirements of the new home state;**
- 392.26 **(3) the former home state shall convert the former home state license into a privilege to**  
392.27 **practice once the new home state has activated the new home state license in accordance**  
392.28 **with applicable rules adopted by the commission;**
- 392.29 **(4) notwithstanding any other provision of this compact, if the licensed professional**  
392.30 **counselor cannot meet the criteria in article V, the new home state may apply its requirements**  
392.31 **for issuing a new single state license; and**
- 393.1 **(5) the licensed professional counselor shall pay all applicable fees to the new home**  
393.2 **state in order to be issued a new home state license.**
- 393.3 **(c) If a licensed professional counselor changes primary state of residence by moving**  
393.4 **from a member state to a nonmember state, or from a nonmember state to a member state,**  
393.5 **the state criteria shall apply for issuance of a single state license in the new state.**
- 393.6 **(d) Nothing in this compact shall interfere with a licensee's ability to hold a single state**  
393.7 **license in multiple states, however, for the purposes of this compact, a licensee shall have**  
393.8 **only one home state license.**
- 393.9 **(e) Nothing in this compact shall affect the requirements established by a member state**  
393.10 **for the issuance of a single state license.**

393.11

**ARTICLE V**

393.12

**ACTIVE DUTY MILITARY PERSONNEL OR THEIR SPOUSES**

393.13 Active duty military personnel, or their spouse, shall designate a home state where the  
393.14 individual has a current license in good standing. The individual may retain the home state  
393.15 designation during the period the service member is on active duty. Subsequent to designating  
393.16 a home state, the individual shall only change their home state through application for  
393.17 licensure in the new state or through the process outlined in article IV.

393.18

**ARTICLE VI**

393.19

**COMPACT PRIVILEGE TO PRACTICE TELEHEALTH**

393.20 (a) Member states shall recognize the right of a licensed professional counselor, licensed  
393.21 by a home state in accordance with article II and under rules promulgated by the commission,  
393.22 to practice professional counseling in any member state via telehealth under a privilege to  
393.23 practice as provided in the compact and rules promulgated by the commission.

393.24 (b) A licensee providing professional counseling services in a remote state under the  
393.25 privilege to practice shall adhere to the laws and regulations of the remote state.

393.26

**ARTICLE VII**

393.27

**ADVERSE ACTIONS**

393.28 (a) In addition to the other powers conferred by state law, a remote state shall have the  
393.29 authority, in accordance with existing state due process law, to:

393.30 (1) take adverse action against a licensed professional counselor's privilege to practice  
393.31 within that member state; and

394.1 (2) issue subpoenas for both hearings and investigations that require the attendance and  
394.2 testimony of witnesses as well as the production of evidence. Subpoenas issued by a licensing  
394.3 board in a member state for the attendance and testimony of witnesses or the production of  
394.4 evidence from another member state shall be enforced in the latter state by any court of  
394.5 competent jurisdiction according to the practice and procedure of that court applicable to  
394.6 subpoenas issued in proceedings pending before it. The issuing authority shall pay any  
394.7 witness fees, travel expenses, mileage, and other fees required by the service statutes of the  
394.8 state in which the witnesses or evidence are located.

394.9 (b) Only the home state shall have the power to take adverse action against a licensed  
394.10 professional counselor's license issued by the home state.

394.11 (c) For purposes of taking adverse action, the home state shall give the same priority  
394.12 and effect to reported conduct received from a member state as it would if the conduct had  
394.13 occurred within the home state. In so doing, the home state shall apply its own state laws  
394.14 to determine appropriate action.

394.15 (d) The home state shall complete any pending investigations of a licensed professional  
394.16 counselor who changes primary state of residence during the course of the investigations.  
394.17 The home state shall also have the authority to take appropriate action and shall promptly  
394.18 report the conclusions of the investigations to the administrator of the data system. The  
394.19 administrator of the coordinated licensure information system shall promptly notify the new  
394.20 home state of any adverse actions.

394.21 (e) A member state, if otherwise permitted by state law, may recover from the affected  
394.22 licensed professional counselor the costs of investigations and dispositions of cases resulting  
394.23 from any adverse action taken against that licensed professional counselor.

394.24 (f) A member state may take adverse action based on the factual findings of the remote  
394.25 state, provided that the member state follows its own procedures for taking the adverse  
394.26 action.

394.27 (g) Joint investigations:

394.28 (1) in addition to the authority granted to a member state by its respective professional  
394.29 counseling practice act or other applicable state law, any member state may participate with  
394.30 other member states in joint investigations of licensees; and

394.31 (2) member states shall share any investigative, litigation, or compliance materials in  
394.32 furtherance of any joint or individual investigation initiated under the compact.

395.1 (h) If adverse action is taken by the home state against the license of a licensed  
395.2 professional counselor, the licensed professional counselor's privilege to practice in all other  
395.3 member states shall be deactivated until all encumbrances have been removed from the  
395.4 state license. All home state disciplinary orders that impose adverse action against the license  
395.5 of a licensed professional counselor shall include a statement that the licensed professional  
395.6 counselor's privilege to practice is deactivated in all member states during the pendency of  
395.7 the order.

395.8 (i) If a member state takes adverse action, it shall promptly notify the administrator of  
395.9 the data system. The administrator of the data system shall promptly notify the home state  
395.10 of any adverse actions by remote states.

395.11 (j) Nothing in this compact shall override a member state's decision that participation  
395.12 in an alternative program may be used in lieu of adverse action.

395.13

#### **ARTICLE VIII**

395.14

#### **ESTABLISHMENT OF COUNSELING COMPACT COMMISSION**

395.15 (a) The compact member states hereby create and establish a joint public agency known  
395.16 as the counseling compact commission:

395.17 (1) the commission is an instrumentality of the compact states;

- 395.18 (2) venue is proper and judicial proceedings by or against the commission shall be  
395.19 brought solely and exclusively in a court of competent jurisdiction where the principal office  
395.20 of the commission is located. The commission may waive venue and jurisdictional defenses  
395.21 to the extent it adopts or consents to participate in alternative dispute resolution proceedings;  
395.22 and
- 395.23 (3) nothing in this compact shall be construed to be a waiver of sovereign immunity.
- 395.24 (b) Membership, voting, and meetings:
- 395.25 (1) each member state shall have and be limited to one delegate selected by that member  
395.26 state's licensing board;
- 395.27 (2) the delegate shall be either:
- 395.28 (i) a current member of the licensing board at the time of appointment who is a licensed  
395.29 professional counselor or public member; or
- 395.30 (ii) an administrator of the licensing board;
- 396.1 (3) any delegate may be removed or suspended from office as provided by the law of  
396.2 the state from which the delegate is appointed;
- 396.3 (4) the member state licensing board shall fill any vacancy occurring on the commission  
396.4 within 60 days;
- 396.5 (5) each delegate shall be entitled to one vote with regard to the promulgation of rules  
396.6 and creation of bylaws and shall otherwise have an opportunity to participate in the business  
396.7 and affairs of the commission;
- 396.8 (6) a delegate shall vote in person or by such other means as provided in the bylaws.  
396.9 The bylaws may provide for delegates' participation in meetings by telephone or other means  
396.10 of communication;
- 396.11 (7) the commission shall meet at least once during each calendar year. Additional  
396.12 meetings shall be held as set forth in the bylaws; and
- 396.13 (8) the commission shall by rule establish a term of office for delegates and may by rule  
396.14 establish term limits.
- 396.15 (c) The commission shall have the following powers and duties:
- 396.16 (1) establish the fiscal year of the commission;
- 396.17 (2) establish bylaws;
- 396.18 (3) maintain its financial records in accordance with the bylaws;
- 396.19 (4) meet and take such actions as are consistent with the provisions of this compact and  
396.20 the bylaws;

- 396.21 (5) promulgate rules which shall be binding to the extent and in the manner provided  
396.22 for in the compact;
- 396.23 (6) bring and prosecute legal proceedings or actions in the name of the commission,  
396.24 provided that the standing of any state licensing board to sue or be sued under applicable  
396.25 law shall not be affected;
- 396.26 (7) purchase and maintain insurance and bonds;
- 396.27 (8) borrow, accept, or contract for services of personnel, including but not limited to  
396.28 employees of a member state;
- 396.29 (9) hire employees, elect or appoint officers, fix compensation, define duties, grant such  
396.30 individuals appropriate authority to carry out the purposes of the compact, and establish the  
397.1 commission's personnel policies and programs relating to conflicts of interest, qualifications  
397.2 of personnel, and other related personnel matters;
- 397.3 (10) accept any and all appropriate donations and grants of money, equipment, supplies,  
397.4 materials, and services and to receive, utilize, and dispose of the same; provided that at all  
397.5 times the commission shall avoid any appearance of impropriety and conflict of interest;
- 397.6 (11) lease, purchase, accept appropriate gifts or donations of, or otherwise to own, hold,  
397.7 improve, or use any property, real, personal, or mixed; provided that at all times the  
397.8 commission shall avoid any appearance of impropriety;
- 397.9 (12) sell convey, mortgage, pledge, lease, exchange, abandon, or otherwise dispose of  
397.10 any property real, personal, or mixed;
- 397.11 (13) establish a budget and make expenditures;
- 397.12 (14) borrow money;
- 397.13 (15) appoint committees, including standing committees composed of members, state  
397.14 regulators, state legislators or their representatives, and consumer representatives, and such  
397.15 other interested persons as may be designated in this compact and the bylaws;
- 397.16 (16) provide and receive information from, and cooperate with, law enforcement agencies;
- 397.17 (17) establish and elect an executive committee; and
- 397.18 (18) perform such other functions as may be necessary or appropriate to achieve the  
397.19 purposes of this compact consistent with the state regulation of professional counseling  
397.20 licensure and practice.
- 397.21 (d) The executive committee:
- 397.22 (1) The executive committee shall have the power to act on behalf of the commission  
397.23 according to the terms of this compact;



- 397.24 (2) The executive committee shall be composed of up to eleven members:
- 397.25 (i) seven voting members who are elected by the commission from the current
- 397.26 membership of the commission;
- 397.27 (ii) up to four ex-officio, nonvoting members from four recognized national professional
- 397.28 counselor organizations; and
- 397.29 (iii) the ex-officio members will be selected by their respective organizations;
- 397.30 (3) The commission may remove any member of the executive committee as provided
- 397.31 in bylaws;
- 398.1 (4) The executive committee shall meet at least annually; and
- 398.2 (5) The executive committee shall have the following duties and responsibilities:
- 398.3 (i) recommend to the entire commission changes to the rules or bylaws, changes to this
- 398.4 compact legislation, fees paid by compact member states such as annual dues, and any
- 398.5 commission compact fee charged to licensees for the privilege to practice;
- 398.6 (ii) ensure compact administration services are appropriately provided, contractual or
- 398.7 otherwise;
- 398.8 (iii) prepare and recommend the budget;
- 398.9 (iv) maintain financial records on behalf of the commission;
- 398.10 (v) monitor compact compliance of member states and provide compliance reports to
- 398.11 the commission;
- 398.12 (vi) establish additional committees as necessary; and
- 398.13 (vii) other duties as provided in rules or bylaws.
- 398.14 (e) Meetings of the commission:
- 398.15 (1) all meetings shall be open to the public, and public notice of meetings shall be given
- 398.16 in the same manner as required under the rulemaking provisions in article X;
- 398.17 (2) the commission or the executive committee or other committees of the commission
- 398.18 may convene in a closed, non-public meeting if the commission or executive committee or
- 398.19 other committees of the commission must discuss:
- 398.20 (i) non-compliance of a member state with its obligations under the compact;
- 398.21 (ii) the employment, compensation, discipline, or other matters, practices, or procedures
- 398.22 related to specific employees or other matters related to the commission's internal personnel
- 398.23 practices and procedures;

- 398.24 (iii) current, threatened, or reasonably anticipated litigation;
- 398.25 (iv) negotiation of contracts for the purchase, lease, or sale of goods, services, or real  
398.26 estate;
- 398.27 (v) accusing any person of a crime or formally censuring any person;
- 398.28 (vi) disclosure of trade secrets or commercial or financial information that is privileged  
398.29 or confidential;
- 399.1 (vii) disclosure of information of a personal nature where disclosure would constitute a  
399.2 clearly unwarranted invasion of personal privacy;
- 399.3 (viii) disclosure of investigative records compiled for law enforcement purposes;
- 399.4 (ix) disclosure of information related to any investigative reports prepared by or on  
399.5 behalf of or for use of the commission or other committee charged with responsibility of  
399.6 investigation or determination of compliance issues pursuant to the compact; or
- 399.7 (x) matters specifically exempted from disclosure by federal or member state statute;
- 399.8 (3) if a meeting, or portion of a meeting, is closed pursuant to this provision, the  
399.9 commission's legal counsel or designee shall certify that the meeting may be closed and  
399.10 shall reference each relevant exempting provision; and
- 399.11 (4) the commission shall keep minutes that fully and clearly describe all matters discussed  
399.12 in a meeting and shall provide a full and accurate summary of actions taken and the reasons  
399.13 therefore, including a description of the views expressed. All documents considered in  
399.14 connection with an action shall be identified in such minutes. All minutes and documents  
399.15 of a closed meeting shall remain under seal, subject to release by a majority vote of the  
399.16 commission or order of a court of competent jurisdiction.
- 399.17 (f) Financing of the commission:
- 399.18 (i) the commission shall pay, or provide for the payment of, the reasonable expenses of  
399.19 its establishment, organization, and ongoing activities;
- 399.20 (ii) the commission may accept any and all appropriate revenue sources, donations, and  
399.21 grants of money, equipment, supplies, materials, and services;
- 399.22 (iii) the commission may levy on and collect an annual assessment from each member  
399.23 state or impose fees on other parties to cover the cost of the operations and activities of the  
399.24 commission and its staff, which must be in a total amount sufficient to cover its annual  
399.25 budget as approved each year for which revenue is not provided by other sources. The  
399.26 aggregate annual assessment amount shall be allocated based upon a formula to be determined  
399.27 by the commission, which shall promulgate a rule binding upon all member states;

399.28 (iv) the commission shall not incur obligations of any kind prior to securing the funds  
399.29 adequate to meet the same; nor shall the commission pledge the credit of any of the member  
399.30 states, except by and with the authority of the member state; and

399.31 (v) the commission shall keep accurate accounts of all receipts and disbursements. The  
399.32 receipts and disbursements of the commission shall be subject to the audit and accounting  
400.1 procedures established under its bylaws. However, all receipts and disbursements of funds  
400.2 handled by the commission shall be audited yearly by a certified or licensed public  
400.3 accountant, and the report of the audit shall be included in and become part of the annual  
400.4 report of the commission.

400.5 (g) Qualified immunity, defense, and indemnification:

400.6 (1) the members, officers, executive director, employees, and representatives of the  
400.7 commission shall be immune from suit and liability, either personally or in their official  
400.8 capacity, for any claim for damage to or loss of property or personal injury or other civil  
400.9 liability caused by or arising out of any actual or alleged act, error, or omission that occurred,  
400.10 or that the person against whom the claim is made had a reasonable basis for believing  
400.11 occurred within the scope of commission employment, duties or responsibilities; provided  
400.12 that nothing in this paragraph shall be construed to protect any such person from suit or  
400.13 liability for any damage, loss, injury, or liability caused by the intentional or willful or  
400.14 wanton misconduct of that person;

400.15 (2) the commission shall defend any member, officer, executive director, employee or  
400.16 representative of the commission in any civil action seeking to impose liability arising out  
400.17 of any actual or alleged act, error, or omission that occurred within the scope of commission  
400.18 employment, duties, or responsibilities, or that the person against whom the claim is made  
400.19 had a reasonable basis for believing occurred within the scope of commission employment,  
400.20 duties, or responsibilities; provided that nothing herein shall be construed to prohibit that  
400.21 person from retaining his or her own counsel; and provided further, that the actual or alleged  
400.22 act, error, or omission did not result from that person's intentional or willful or wanton  
400.23 misconduct; and

400.24 (3) the commission shall indemnify and hold harmless any member, officer, executive  
400.25 director, employee, or representative of the commission for the amount of any settlement  
400.26 or judgment obtained against that person arising out of any actual or alleged act, error, or  
400.27 omission that occurred within the scope of commission employment, duties, or  
400.28 responsibilities, or that such person had a reasonable basis for believing occurred within  
400.29 the scope of commission employment, duties, or responsibilities, provided that the actual  
400.30 or alleged act, error, or omission did not result from the intentional or willful or wanton  
400.31 misconduct of that person.

400.32 **ARTICLE IX**

400.33 **DATA SYSTEM**

- 401.1 (a) The commission shall provide for the development, maintenance, operation, and  
401.2 utilization of a coordinated database and reporting system containing licensure, adverse  
401.3 action, and investigative information on all licensed individuals in member states.
- 401.4 (b) Notwithstanding any other provision of state law to the contrary, a member state  
401.5 shall submit a uniform data set to the data system on all individuals to whom this compact  
401.6 is applicable as required by the rules of the commission, including:
- 401.7 (1) identifying information;
- 401.8 (2) licensure data;
- 401.9 (3) adverse actions against a license or privilege to practice;
- 401.10 (4) nonconfidential information related to alternative program participation;
- 401.11 (5) any denial of application for licensure and the reason for such denial;
- 401.12 (6) current significant investigative information; and
- 401.13 (7) other information that may facilitate the administration of this compact, as determined  
401.14 by the rules of the commission.
- 401.15 (c) Investigative information pertaining to a licensee in any member state will only be  
401.16 available to other member states.
- 401.17 (d) The commission shall promptly notify all member states of any adverse action taken  
401.18 against a licensee or an individual applying for a license. Adverse action information  
401.19 pertaining to a licensee in any member state will be available to any other member state.
- 401.20 (e) Member states contributing information to the data system may designate information  
401.21 that may not be shared with the public without the express permission of the contributing  
401.22 state.
- 401.23 (f) Any information submitted to the data system that is subsequently required to be  
401.24 expunged by the laws of the member state contributing the information shall be removed  
401.25 from the data system.
- 401.26 **ARTICLE X**
- 401.27 **RULEMAKING**
- 401.28 (a) The commission shall promulgate reasonable rules in order to effectively and  
401.29 efficiently achieve the purpose of the compact. Notwithstanding the foregoing, in the event  
401.30 the commission exercises its rulemaking authority in a manner that is beyond the scope of  
402.1 the purposes of the compact, or the powers granted hereunder, then such an action by the  
402.2 commission shall be invalid and have no force or effect.

- 402.3 (b) The commission shall exercise its rulemaking powers pursuant to the criteria set  
402.4 forth in this article and the rules adopted thereunder. Rules and amendments shall become  
402.5 binding as of the date specified in each rule or amendment.
- 402.6 (c) If a majority of the legislatures of the member states rejects a rule, by enactment of  
402.7 a statute or resolution in the same manner used to adopt the compact within four years of  
402.8 the date of adoption of the rule, then such rule shall have no further force and effect in any  
402.9 member state.
- 402.10 (d) Rules or amendments to the rules shall be adopted at a regular or special meeting of  
402.11 the commission.
- 402.12 (e) Prior to promulgation and adoption of a final rule or rules by the commission, and  
402.13 at least thirty days in advance of the meeting at which the rule will be considered and voted  
402.14 upon, the commission shall file a notice of proposed rulemaking:
- 402.15 (1) on the website of the commission or other publicly accessible platform; and  
402.16 (2) on the website of each member state professional counseling licensing board or other  
402.17 publicly accessible platform or the publication in which each state would otherwise publish  
402.18 proposed rules.
- 402.19 (f) The notice of proposed rulemaking shall include:
- 402.20 (1) the proposed time, date, and location of the meeting in which the rule will be  
402.21 considered and voted upon;
- 402.22 (2) the text of the proposed rule or amendment and the reason for the proposed rule;  
402.23 (3) a request for comments on the proposed rule from any interested person; and  
402.24 (4) the manner in which interested persons may submit notice to the commission of their  
402.25 intention to attend the public hearing and any written comments.
- 402.26 (g) Prior to adoption of a proposed rule, the commission shall allow persons to submit  
402.27 written data, facts, opinions, and arguments, which shall be made available to the public.
- 402.28 (h) The commission shall grant an opportunity for a public hearing before it adopts a  
402.29 rule or amendment if a hearing is requested by:
- 402.30 (1) at least 25 persons;  
402.31 (2) a state or federal governmental subdivision or agency; or  
403.1 (3) an association having at least 25 members.
- 403.2 (i) If a hearing is held on the proposed rule or amendment, the commission shall publish  
403.3 the place, time, and date of the scheduled public hearing. If the hearing is held via electronic  
403.4 means, the commission shall publish the mechanism for access to the electronic hearing;

- 403.5 (1) all persons wishing to be heard at the hearing shall notify the executive director of  
403.6 the commission or other designated member in writing of their desire to appear and testify  
403.7 at the hearing not less than five business days before the scheduled date of the hearing;
- 403.8 (2) hearings shall be conducted in a manner providing each person who wishes to  
403.9 comment a fair and reasonable opportunity to comment orally or in writing;
- 403.10 (3) all hearings will be recorded. A copy of the recording will be made available on  
403.11 request; and
- 403.12 (4) nothing in this article shall be construed as requiring a separate hearing on each rule.  
403.13 Rules may be grouped for the convenience of the commission at hearings required by this  
403.14 article.
- 403.15 (j) Following the scheduled hearing date, or by the close of business on the scheduled  
403.16 hearing date if the hearing was not held, the commission shall consider all written and oral  
403.17 comments received.
- 403.18 (k) If no written notice of intent to attend the public hearing by interested parties is  
403.19 received, the commission may proceed with promulgation of the proposed rule without a  
403.20 public hearing.
- 403.21 (l) The commission shall, by majority vote of all members, take final action on the  
403.22 proposed rule and shall determine the effective date of the rule, if any, based on the  
403.23 rulemaking record and the full text of the rule.
- 403.24 (m) Upon determination that an emergency exists, the commission may consider and  
403.25 adopt an emergency rule without prior notice, opportunity for comment, or hearing, provided  
403.26 that the usual rulemaking procedures provided in the compact and in this article shall be  
403.27 retroactively applied to the rule as soon as reasonably possible, in no event later than 90  
403.28 days after the effective date of the rule. For the purposes of this provision, an emergency  
403.29 rule is one that must be adopted immediately in order to:
- 403.30 (1) meet an imminent threat to public health, safety, or welfare;
- 403.31 (2) prevent a loss of commission or member state funds;
- 404.1 (3) meet a deadline for the promulgation of an administrative rule that is established by  
404.2 federal law or rule; or
- 404.3 (4) protect public health and safety.
- 404.4 (n) The commission or an authorized committee of the commission may direct revisions  
404.5 to a previously adopted rule or amendment for purposes of correcting typographical errors,  
404.6 errors in format, errors in consistency, or grammatical errors. Public notice of any revisions  
404.7 shall be posted on the website of the commission. The revision shall be subject to challenge  
404.8 by any person for a period of thirty days after posting. The revision may be challenged only  
404.9 on grounds that the revision results in a material change to a rule. A challenge shall be made

404.10 in writing and delivered to the chair of the commission prior to the end of the notice period.  
404.11 If no challenge is made, the revision will take effect without further action. If the revision  
404.12 is challenged, the revision may not take effect without the approval of the commission.

404.13

**ARTICLE XI**

404.14

**OVERSIGHT, DISPUTE RESOLUTION, AND ENFORCEMENT**

404.15

**(a) Oversight:**

404.16

404.17 (1) the executive, legislative, and judicial branches of state government in each member  
404.18 state shall enforce this compact and take all actions necessary and appropriate to effectuate  
404.19 the compact's purposes and intent. The provisions of this compact and the rules promulgated  
404.20 hereunder shall have standing as statutory law;

404.21

404.22 (2) all courts shall take judicial notice of the compact and the rules in any judicial or  
404.23 administrative proceeding in a member state pertaining to the subject matter of this compact  
404.24 which may affect the powers, responsibilities, or actions of the commission; and

404.25

404.26 (3) the commission shall be entitled to receive service of process in any such proceeding  
404.27 and shall have standing to intervene in such a proceeding for all purposes. Failure to provide  
404.28 service of process to the commission shall render a judgment or order void as to the  
404.29 commission, this compact, or promulgated rules.

404.30

**(b) Default, technical assistance, and termination:**

404.31

404.32 (1) if the commission determines that a member state has defaulted in the performance  
404.33 of its obligations or responsibilities under this compact or the promulgated rules, the  
404.34 commission shall:

405.1

405.2 (i) provide written notice to the defaulting state and other member states of the nature  
405.3 of the default, the proposed means of curing the default, or any other action to be taken by  
405.4 the commission; and

405.5

(ii) provide remedial training and specific technical assistance regarding the default.

405.6

405.7 (c) If a state in default fails to cure the default, the defaulting state may be terminated  
405.8 from the compact upon an affirmative vote of a majority of the member states, and all rights,  
405.9 privileges, and benefits conferred by this compact may be terminated on the effective date  
405.10 of termination. A cure of the default does not relieve the offending state of obligations or  
405.11 liabilities incurred during the period of default.

405.12

405.13 (d) Termination of membership in the compact shall be imposed only after all other  
405.14 means of securing compliance have been exhausted. Notice of intent to suspend or terminate  
405.15 shall be given by the commission to the governor, the majority and minority leaders of the  
405.16 defaulting state's legislature, and each of the member states.

405.14 (e) A state that has been terminated is responsible for all assessments, obligations, and  
405.15 liabilities incurred through the effective date of termination, including obligations that  
405.16 extend beyond the effective date of termination.

405.17 (f) The commission shall not bear any costs related to a state that is found to be in default  
405.18 or that has been terminated from the compact, unless agreed upon in writing between the  
405.19 commission and the defaulting state.

405.20 (g) The defaulting state may appeal the action of the commission by petitioning the  
405.21 United States District Court for the District of Columbia or the federal district where the  
405.22 commission has its principal offices. The prevailing member shall be awarded all costs of  
405.23 such litigation, including reasonable attorney's fees.

405.24 (h) Dispute resolution:

405.25 (1) Upon request by a member state, the commission shall attempt to resolve disputes  
405.26 related to the compact that arise among member states and between member and nonmember  
405.27 states; and

405.28 (2) the commission shall promulgate a rule providing for both mediation and binding  
405.29 dispute resolution for such disputes as appropriate.

405.30 (i) Enforcement:

405.31 (1) The commission, in the reasonable exercise of its discretion, shall enforce the  
405.32 provisions and rules of this compact;

406.1 (2) by majority vote, the commission may initiate legal action in the United States District  
406.2 Court for the District of Columbia or the federal district where the commission has its  
406.3 principal offices against a member state in default to enforce compliance with the provisions  
406.4 of the compact and its promulgated rules and bylaws. The relief sought may include both  
406.5 injunctive relief and damages. In the event judicial enforcement is necessary, the prevailing  
406.6 member shall be awarded all costs of such litigation, including reasonable attorney's fees;  
406.7 and

406.8 (3) the remedies herein shall not be the exclusive remedies of the commission. The  
406.9 commission may pursue any other remedies available under federal or state law.

406.10 **ARTICLE XII**

406.11 **DATE OF IMPLEMENTATION OF THE COUNSELING COMPACT COMMISSION**  
406.12 **AND ASSOCIATED RULES, WITHDRAWAL, AND AMENDMENT**

406.13 (a) The compact shall come into effect on the date on which the compact statute is  
406.14 enacted into law in the tenth member state. The provisions, which become effective at that  
406.15 time, shall be limited to the powers granted to the commission relating to assembly and the



406.16 promulgation of rules. Thereafter, the commission shall meet and exercise rulemaking  
406.17 powers necessary to the implementation and administration of the compact.

406.18 (b) Any state that joins the compact subsequent to the commission's initial adoption of  
406.19 the rules shall be subject to the rules as they exist on the date on which the compact becomes  
406.20 law in that state. Any rule that has been previously adopted by the commission shall have  
406.21 the full force and effect of law on the day the compact becomes law in that state.

406.22 (c) Any member state may withdraw from this compact by enacting a statute repealing  
406.23 the same.

406.24 (1) a member state's withdrawal shall not take effect until six months after enactment  
406.25 of the repealing statute; and

406.26 (2) withdrawal shall not affect the continuing requirement of the withdrawing state's  
406.27 professional counseling licensing board to comply with the investigative and adverse action  
406.28 reporting requirements of this act prior to the effective date of withdrawal.

406.29 (d) Nothing contained in this compact shall be construed to invalidate or prevent any  
406.30 professional counseling licensure agreement or other cooperative arrangement between a  
406.31 member state and a nonmember state that does not conflict with the provisions of this  
406.32 compact.

407.1 (e) This compact may be amended by the member states. No amendment to this compact  
407.2 shall become effective and binding upon any member state until it is enacted into the laws  
407.3 of all member states.

407.4 **ARTICLE XIII**

407.5 **CONSTRUCTION AND SEVERABILITY**

407.6 This compact shall be liberally construed so as to effectuate the purposes thereof. The  
407.7 provisions of this compact shall be severable and if any phrase, clause, sentence, or provision  
407.8 of this compact is declared to be contrary to the constitution of any member state or of the  
407.9 United States or the applicability thereof to any government, agency, person, or circumstance  
407.10 is held invalid, the validity of the remainder of this compact and the applicability thereof  
407.11 to any government, agency, person, or circumstance shall not be affected thereby. If this  
407.12 compact shall be held contrary to the constitution of any member state, the compact shall  
407.13 remain in full force and effect as to the remaining member states and in full force and effect  
407.14 as to the member state affected as to all severable matters.

407.15 **ARTICLE XIV**

407.16 **BINDING EFFECT OF COMPACT AND OTHER LAWS**

271.14 Sec. 3. Minnesota Statutes 2020, section 148E.100, subdivision 3, is amended to read:

271.15 Subd. 3. **Types of supervision.** Of the 100 hours of supervision required under  
271.16 subdivision 1:

271.17 (1) 50 hours must be provided through one-on-one supervision, including: (i) a minimum  
271.18 of 25 hours of in-person supervision, and (ii) no more than 25 hours of supervision. The  
271.19 supervision must be provided either in person or via eye-to-eye electronic media, while  
271.20 maintaining visual contact. The board must allow a licensed social worker to satisfy the  
271.21 supervision requirement of this clause with all required hours of supervision provided via  
271.22 eye-to-eye electronic media, while maintaining visual contact; and

271.23 (2) 50 hours must be provided through: (i) one-on-one supervision, or (ii) group  
271.24 supervision. The supervision may be in person, by telephone, or via eye-to-eye electronic  
271.25 media, while maintaining visual contact. The supervision must not be provided by e-mail.  
271.26 Group supervision is limited to six supervisees.

271.27 **EFFECTIVE DATE.** This section is effective the day following final enactment and  
271.28 applies to supervision requirements in effect on or after that date.

271.29 Sec. 4. Minnesota Statutes 2020, section 148E.105, subdivision 3, is amended to read:

271.30 Subd. 3. **Types of supervision.** Of the 100 hours of supervision required under  
271.31 subdivision 1:

272.1 (1) 50 hours must be provided through one-on-one supervision, including: (i) a  
272.2 minimum of 25 hours of in-person supervision, and (ii) no more than 25 hours of supervision.  
272.3 The supervision must be provided either in person or via eye-to-eye electronic media, while  
272.4 maintaining visual contact. The board must allow a licensed graduate social worker to satisfy

407.17 (a) A licensee providing professional counseling services in a remote state under the  
407.18 privilege to practice shall adhere to the laws and regulations, including scope of practice,  
407.19 of the remote state.

407.20 (b) Nothing herein prevents the enforcement of any other law of a member state that is  
407.21 not inconsistent with the compact.

407.22 (c) Any laws in a member state in conflict with the compact are superseded to the extent  
407.23 of the conflict.

407.24 (d) Any lawful actions of the commission, including all rules and bylaws properly  
407.25 promulgated by the commission, are binding upon the member states.

407.26 (e) All permissible agreements between the commission and the member states are  
407.27 binding in accordance with their terms.

407.28 (f) In the event any provision of the compact exceeds the constitutional limits imposed  
407.29 on the legislature of any member state, the provision shall be ineffective to the extent of the  
407.30 conflict with the constitutional provision in question in that member state.

272.5 the supervision requirement of this clause with all required hours of supervision provided  
272.6 via eye-to-eye electronic media, while maintaining visual contact; and

272.7 (2) 50 hours must be provided through: (i) one-on-one supervision, or (ii) group  
272.8 supervision. The supervision may be in person, by telephone, or via eye-to-eye electronic  
272.9 media, while maintaining visual contact. The supervision must not be provided by e-mail.  
272.10 Group supervision is limited to six supervisees.

272.11 **EFFECTIVE DATE.** This section is effective the day following final enactment and  
272.12 applies to supervision requirements in effect on or after that date.

272.13 Sec. 5. Minnesota Statutes 2020, section 148E.106, subdivision 3, is amended to read:

272.14 Subd. 3. **Types of supervision.** Of the 200 hours of supervision required under  
272.15 subdivision 1:

272.16 (1) 100 hours must be provided through one-on-one supervision, including: (i) a minimum  
272.17 of 50 hours of in-person supervision, and (ii) no more than 50 hours of supervision. The  
272.18 supervision must be provided either in person or via eye-to-eye electronic media, while  
272.19 maintaining visual contact. The board must allow a licensed graduate social worker to satisfy  
272.20 the supervision requirement of this clause with all required hours of supervision provided  
272.21 via eye-to-eye electronic media, while maintaining visual contact; and

272.22 (2) 100 hours must be provided through: (i) one-on-one supervision, or (ii) group  
272.23 supervision. The supervision may be in person, by telephone, or via eye-to-eye electronic  
272.24 media, while maintaining visual contact. The supervision must not be provided by e-mail.  
272.25 Group supervision is limited to six supervisees.

272.26 **EFFECTIVE DATE.** This section is effective the day following final enactment and  
272.27 applies to supervision requirements in effect on or after that date.

272.28 Sec. 6. Minnesota Statutes 2020, section 148E.110, subdivision 7, is amended to read:

272.29 Subd. 7. **Supervision; clinical social work practice after licensure as licensed**  
272.30 **independent social worker.** Of the 200 hours of supervision required under subdivision  
272.31 5:

273.1 (1) 100 hours must be provided through one-on-one supervision, including: The  
273.2 supervision must be provided either in person or via eye-to-eye electronic media, while  
273.3 maintaining visual contact. The board must allow a licensed independent social worker to  
273.4 satisfy the supervision requirement of this clause with all required hours of supervision  
273.5 provided via eye-to-eye electronic media, while maintaining visual contact; and

273.6 (i) a minimum of 50 hours of in-person supervision; and

273.7 (ii) no more than 50 hours of supervision via eye-to-eye electronic media, while  
273.8 maintaining visual contact; and

273.9 (2) 100 hours must be provided through:

273.10 (i) one-on-one supervision; or

273.11 (ii) group supervision.

273.12 The supervision may be in person, by telephone, or via eye-to-eye electronic media, while  
273.13 maintaining visual contact. The supervision must not be provided by e-mail. Group  
273.14 supervision is limited to six supervisees.

273.15 **EFFECTIVE DATE.** This section is effective the day following final enactment and  
273.16 applies to supervision requirements in effect on or after that date.

273.17 Sec. 7. Minnesota Statutes 2020, section 150A.06, subdivision 1c, is amended to read:

273.18 Subd. 1c. **Specialty dentists.** (a) The board may grant one or more specialty licenses in  
273.19 the specialty areas of dentistry that are recognized by the Commission on Dental  
273.20 Accreditation.

273.21 (b) An applicant for a specialty license shall:

273.22 (1) have successfully completed a postdoctoral specialty program accredited by the  
273.23 Commission on Dental Accreditation, or have announced a limitation of practice before  
273.24 1967;

273.25 (2) have been certified by a specialty board approved by the Minnesota Board of  
273.26 Dentistry, or provide evidence of having passed a clinical examination for licensure required  
273.27 for practice in any state or Canadian province, or in the case of oral and maxillofacial  
273.28 surgeons only, have a Minnesota medical license in good standing;

408.1 Sec. 19. Minnesota Statutes 2020, section 148F.11, is amended by adding a subdivision  
408.2 to read:

408.3 Subd. 2a. **Former students.** (a) A former student may practice alcohol and drug  
408.4 counseling without a license for 90 days after the former student's degree conferral date  
408.5 from an accredited school or educational program or after the last date the former student  
408.6 received credit for an alcohol and drug counseling course from an accredited school or  
408.7 educational program. The former student's practice under this subdivision must be supervised  
408.8 by an alcohol and drug counselor as defined under section 245G.11, subdivision 5, an alcohol  
408.9 and drug counselor supervisor as defined under section 245G.11, subdivision 4, or a treatment  
408.10 director as defined under section 245G.11, subdivision 3.

408.11 (b) The former student's right to practice under this subdivision expires after 90 days  
408.12 from the former student's degree conferral date or date of last course credit for an alcohol  
408.13 and drug counseling course, whichever occurs last.

408.14 **EFFECTIVE DATE.** This section is effective the day following final enactment.

273.29 (3) have been in active practice or a postdoctoral specialty education program or United  
273.30 States government service at least 2,000 hours in the 36 months prior to applying for a  
273.31 specialty license;

274.1 (4) if requested by the board, be interviewed by a committee of the board, which may  
274.2 include the assistance of specialists in the evaluation process, and satisfactorily respond to  
274.3 questions designed to determine the applicant's knowledge of dental subjects and ability to  
274.4 practice;

274.5 (5) if requested by the board, present complete records on a sample of patients treated  
274.6 by the applicant. The sample must be drawn from patients treated by the applicant during  
274.7 the 36 months preceding the date of application. The number of records shall be established  
274.8 by the board. The records shall be reasonably representative of the treatment typically  
274.9 provided by the applicant for each specialty area;

274.10 (6) at board discretion, pass a board-approved English proficiency test if English is not  
274.11 the applicant's primary language;

274.12 (7) pass all components of the National Board Dental Examinations;

274.13 (8) pass the Minnesota Board of Dentistry jurisprudence examination;

274.14 (9) abide by professional ethical conduct requirements; and

274.15 (10) meet all other requirements prescribed by the Board of Dentistry.

274.16 (c) The application must include:

274.17 (1) a completed application furnished by the board;

274.18 ~~(2) at least two character references from two different dentists for each specialty area,~~  
274.19 ~~one of whom must be a dentist practicing in the same specialty area, and the other from the~~  
274.20 ~~director of each specialty program attended;~~

274.21 ~~(3) a licensed physician's statement attesting to the applicant's physical and mental~~  
274.22 ~~condition;~~

274.23 (4) a statement from a licensed ophthalmologist or optometrist attesting to the applicant's  
274.24 visual acuity;

274.25 ~~(5)~~ (2) a nonrefundable fee; and

274.26 ~~(6)~~ (3) a notarized, unmounted passport-type photograph, three inches by three inches,  
274.27 ~~taken not more than six months before the date of application~~ copy of the applicant's  
274.28 government issued photo identification card.

274.29 (d) A specialty dentist holding one or more specialty licenses is limited to practicing in  
274.30 the dentist's designated specialty area or areas. The scope of practice must be defined by  
274.31 each national specialty board recognized by the Commission on Dental Accreditation.

275.1 (e) A specialty dentist holding a general dental license is limited to practicing in the  
275.2 dentist's designated specialty area or areas if the dentist has announced a limitation of  
275.3 practice. The scope of practice must be defined by each national specialty board recognized  
275.4 by the Commission on Dental Accreditation.

275.5 (f) All specialty dentists who have fulfilled the specialty dentist requirements and who  
275.6 intend to limit their practice to a particular specialty area or areas may apply for one or more  
275.7 specialty licenses.

275.8 Sec. 8. Minnesota Statutes 2020, section 150A.06, subdivision 2c, is amended to read:

275.9 Subd. 2c. **Guest license.** (a) The board shall grant a guest license to practice as a dentist,  
275.10 dental hygienist, or licensed dental assistant if the following conditions are met:

275.11 (1) the dentist, dental hygienist, or dental assistant is currently licensed in good standing  
275.12 in another United States jurisdiction;

275.13 (2) the dentist, dental hygienist, or dental assistant is currently engaged in the practice  
275.14 of that person's respective profession in another United States jurisdiction;

275.15 (3) the dentist, dental hygienist, or dental assistant will limit that person's practice to a  
275.16 public health setting in Minnesota that (i) is approved by the board; (ii) was established by  
275.17 a nonprofit organization that is tax exempt under chapter 501(c)(3) of the Internal Revenue  
275.18 Code of 1986; and (iii) provides dental care to patients who have difficulty accessing dental  
275.19 care;

275.20 (4) the dentist, dental hygienist, or dental assistant agrees to treat indigent patients who  
275.21 meet the eligibility criteria established by the clinic; and

275.22 (5) the dentist, dental hygienist, or dental assistant has applied to the board for a guest  
275.23 license and has paid a nonrefundable license fee to the board ~~not to exceed \$75~~.

275.24 (b) A guest license must be renewed annually with the board and an annual renewal fee  
275.25 ~~not to exceed \$75~~ must be paid to the board. Guest licenses expire on December 31 of each  
275.26 year.

275.27 (c) A dentist, dental hygienist, or dental assistant practicing under a guest license under  
275.28 this subdivision shall have the same obligations as a dentist, dental hygienist, or dental  
275.29 assistant who is licensed in Minnesota and shall be subject to the laws and rules of Minnesota  
275.30 and the regulatory authority of the board. If the board suspends or revokes the guest license  
275.31 of, or otherwise disciplines, a dentist, dental hygienist, or dental assistant practicing under  
275.32 this subdivision, the board shall promptly report such disciplinary action to the dentist's,  
276.1 dental hygienist's, or dental assistant's regulatory board in the jurisdictions in which they  
276.2 are licensed.

276.3 (d) The board may grant a guest license to a dentist, dental hygienist, or dental assistant  
276.4 licensed in another United States jurisdiction to provide dental care to patients on a voluntary

276.5 basis without compensation for a limited period of time. The board shall not assess a fee  
276.6 for the guest license for volunteer services issued under this paragraph.

276.7 (e) The board shall issue a guest license for volunteer services if:

276.8 (1) the board determines that the applicant's services will provide dental care to patients  
276.9 who have difficulty accessing dental care;

276.10 (2) the care will be provided without compensation; and

276.11 (3) the applicant provides adequate proof of the status of all licenses to practice in other  
276.12 jurisdictions. The board may require such proof on an application form developed by the  
276.13 board.

276.14 (f) The guest license for volunteer services shall limit the licensee to providing dental  
276.15 care services for a period of time not to exceed ten days in a calendar year. Guest licenses  
276.16 expire on December 31 of each year.

276.17 (g) The holder of a guest license for volunteer services shall be subject to state laws and  
276.18 rules regarding dentistry and the regulatory authority of the board. The board may revoke  
276.19 the license of a dentist, dental hygienist, or dental assistant practicing under this subdivision  
276.20 or take other regulatory action against the dentist, dental hygienist, or dental assistant. If an  
276.21 action is taken, the board shall report the action to the regulatory board of those jurisdictions  
276.22 where an active license is held by the dentist, dental hygienist, or dental assistant.

276.23 Sec. 9. Minnesota Statutes 2020, section 150A.06, subdivision 6, is amended to read:

276.24 Subd. 6. **Display of name and certificates.** (a) The renewal certificate of ~~every dentist,~~  
276.25 ~~dental therapist, dental hygienist, or dental assistant~~ every licensee or registrant must be  
276.26 conspicuously displayed in plain sight of patients in every office in which that person  
276.27 practices. Duplicate renewal certificates may be obtained from the board.

276.28 (b) Near or on the entrance door to every office where dentistry is practiced, the name  
276.29 of each dentist practicing there, as inscribed on the current license certificate, must be  
276.30 displayed in plain sight.

276.31 (c) The board must allow the display of a mini-license for guest license holders  
276.32 performing volunteer dental services. There is no fee for the mini-license for guest volunteers.

277.1 Sec. 10. Minnesota Statutes 2020, section 150A.06, is amended by adding a subdivision  
277.2 to read:

277.3 Subd. 12. **Licensure by credentials for dental therapy.** (a) Any dental therapist may,  
277.4 upon application and payment of a fee established by the board, apply for licensure based  
277.5 on an evaluation of the applicant's education, experience, and performance record. The  
277.6 applicant may be interviewed by the board to determine if the applicant:

- 277.7 (1) graduated with a baccalaureate or master's degree from a dental therapy program  
277.8 accredited by the Commission on Dental Accreditation;
- 277.9 (2) provided evidence of successfully completing the board's jurisprudence examination;
- 277.10 (3) actively practiced at least 2,000 hours within 36 months of the application date or  
277.11 passed a board-approved reentry program within 36 months of the application date;
- 277.12 (4) either:
- 277.13 (i) is currently licensed in another state or Canadian province and not subject to any  
277.14 pending or final disciplinary action; or
- 277.15 (ii) was previously licensed in another state or Canadian province in good standing and  
277.16 not subject to any final or pending disciplinary action at the time of surrender;
- 277.17 (5) passed a board-approved English proficiency test if English is not the applicant's  
277.18 primary language required at the board's discretion; and
- 277.19 (6) met all curriculum equivalency requirements regarding dental therapy scope of  
277.20 practice in Minnesota.
- 277.21 (b) The 2,000 practice hours required by clause (3) may count toward the 2,000 practice  
277.22 hours required for consideration for advanced dental therapy certification, provided that all  
277.23 other requirements of section 150A.106, subdivision 1, are met.
- 277.24 (c) The board, at its discretion, may waive specific licensure requirements in paragraph  
277.25 (a).
- 277.26 (d) The board must license an applicant who fulfills the conditions of this subdivision  
277.27 and demonstrates the minimum knowledge in dental subjects required for licensure under  
277.28 subdivision 1d to practice the applicant's profession.
- 277.29 (e) The board must deny the application if the applicant does not demonstrate the  
277.30 minimum knowledge in dental subjects required for licensure under subdivision 1d. If  
277.31 licensure is denied, the board may notify the applicant of any specific remedy the applicant  
278.1 could take to qualify for licensure. A denial does not prohibit the applicant from applying  
278.2 for licensure under subdivision 1d.
- 278.3 (e) A candidate may appeal a denied application to the board according to subdivision  
278.4 4a.
- 278.5 Sec. 11. Minnesota Statutes 2020, section 150A.09, is amended to read:
- 278.6 **150A.09 REGISTRATION OF LICENSES AND OR REGISTRATION**  
278.7 **CERTIFICATES.**
- 278.8 Subdivision 1. **Registration information and procedure.** On or before the license  
278.9 certificate expiration date every licensed dentist, dental therapist, dental hygienist, and  
278.10 dental assistant licensee or registrant shall transmit to the executive secretary of the board,



278.11 ~~pertinent information~~ submit the renewal required by the board, together with the applicable  
278.12 ~~fee established by the board~~ under section 150A.091. At least 30 days before a license  
278.13 certificate expiration date, the board shall send a written notice stating the amount and due  
278.14 date of the fee ~~and the information to be provided to every licensed dentist, dental therapist,~~  
278.15 ~~dental hygienist, and dental assistant.~~

278.16 Subd. 3. **Current address, change of address.** Every ~~dentist, dental therapist, dental~~  
278.17 ~~hygienist, and dental assistant~~ licensee or registrant shall maintain with the board a correct  
278.18 and current mailing address and electronic mail address. For dentists engaged in the practice  
278.19 of dentistry, the postal address shall be that of the location of the primary dental practice.  
278.20 Within 30 days after changing postal or electronic mail addresses, every ~~dentist, dental~~  
278.21 ~~therapist, dental hygienist, and dental assistant~~ licensee or registrant shall provide the board  
278.22 ~~written notice of the new address either personally or by first class mail.~~

278.23 Subd. 4. **Duplicate certificates.** Duplicate licenses or duplicate certificates of ~~license~~  
278.24 renewal may be issued by the board upon satisfactory proof of the need for the duplicates  
278.25 and upon payment of the fee established by the board.

278.26 Subd. 5. **Late fee.** A late fee established by the board shall be paid if the ~~information~~  
278.27 ~~and~~ fee required by subdivision 1 is not received by ~~the executive secretary~~ of the board on  
278.28 or before the registration or ~~license~~ renewal date.

278.29 Sec. 12. Minnesota Statutes 2020, section 150A.091, subdivision 2, is amended to read:

278.30 Subd. 2. **Application and initial license or registration fees.** Each applicant shall  
278.31 submit with a license, advanced dental therapist certificate, or permit application a  
279.1 nonrefundable fee in the following amounts in order to administratively process an  
279.2 application:

279.3 (1) dentist, ~~\$140~~ \$308;

279.4 (2) full faculty dentist, ~~\$140~~ \$308;

279.5 (3) limited faculty dentist, \$140;

279.6 (4) resident dentist or dental provider, \$55;

279.7 (5) advanced dental therapist, \$100;

279.8 (6) dental therapist, ~~\$100~~ \$220;

279.9 (7) dental hygienist, ~~\$55~~ \$115;

279.10 (8) licensed dental assistant, ~~\$55; and~~ \$115;

279.11 (9) dental assistant with a ~~permit~~ registration as described in Minnesota Rules, part

279.12 3100.8500, subpart 3, ~~\$15-~~ \$27; and

279.13 (10) guest license, \$50.

279.14 Sec. 13. Minnesota Statutes 2020, section 150A.091, subdivision 5, is amended to read:

279.15 Subd. 5. **Biennial license or permit registration renewal fees.** Each of the following  
279.16 applicants shall submit with a biennial license or permit renewal application a fee as  
279.17 established by the board, not to exceed the following amounts:

279.18 (1) dentist or full faculty dentist, \$475;

279.19 (2) dental therapist, \$300;

279.20 (3) dental hygienist, \$200;

279.21 (4) licensed dental assistant, \$150; and

279.22 (5) dental assistant with a permit registration as described in Minnesota Rules, part  
279.23 3100.8500, subpart 3, \$24.

279.24 Sec. 14. Minnesota Statutes 2020, section 150A.091, subdivision 8, is amended to read:

279.25 Subd. 8. **Duplicate license or certificate fee.** Each applicant shall submit, with a request  
279.26 for issuance of a duplicate of the original license, or of an annual or biennial renewal  
279.27 certificate for a license or permit, a fee in the following amounts:

280.1 (1) original dentist, full faculty dentist, dental therapist, dental hygiene, or dental assistant  
280.2 license, \$35; and

280.3 (2) annual or biennial renewal certificates, \$10; and

280.4 (3) wallet-sized license and renewal certificate, \$15;

280.5 Sec. 15. Minnesota Statutes 2020, section 150A.091, subdivision 9, is amended to read:

280.6 Subd. 9. **Licensure by credentials.** Each applicant for licensure as a dentist, dental  
280.7 hygienist, or dental assistant by credentials pursuant to section 150A.06, subdivisions 4 and  
280.8 8, and Minnesota Rules, part 3100.1400, shall submit with the license application a fee in  
280.9 the following amounts:

280.10 (1) dentist, ~~\$725~~ \$893;

280.11 (2) dental hygienist, ~~\$175; and~~ \$235;

280.12 (3) dental assistant, ~~\$35;~~ \$71; and

280.13 (4) dental therapist, \$340.

280.14 Sec. 16. Minnesota Statutes 2020, section 150A.091, is amended by adding a subdivision  
280.15 to read:

280.16 Subd. 21. **Failure to practice with a current license.** (a) If a licensee practices without  
280.17 a current license and pursues reinstatement, the board may take the following administrative  
280.18 actions based on the length of time practicing without a current license:

280.19 (1) for under one month, the board may not assess a penalty fee;

280.20 (2) for one month to six months, the board may assess a penalty of \$250;

280.21 (3) for over six months, the board may assess a penalty of \$500; and

280.22 (4) for over 12 months, the board may assess a penalty of \$1,000.

280.23 (b) In addition to the penalty fee, the board shall initiate the complaint process against  
280.24 the licensee for failure to practice with a current license for over 12 months.

280.25 Sec. 17. Minnesota Statutes 2020, section 150A.091, is amended by adding a subdivision  
280.26 to read:

280.27 Subd. 22. **Delegating regulated procedures to an individual with a terminated**  
280.28 **license.** (a) If a dentist or dental therapist delegates regulated procedures to another dental  
280.29 professional who had their license terminated, the board may take the following  
281.1 administrative actions against the delegating dentist or dental therapist based on the length  
281.2 of time they delegated regulated procedures:

281.3 (1) for under one month, the board may not assess a penalty fee;

281.4 (2) for one month to six months, the board may assess a penalty of \$100;

281.5 (3) for over six months, the board may assess a penalty of \$250; and

281.6 (4) for over 12 months, the board may assess a penalty of \$500.

281.7 (b) In addition to the penalty fee, the board shall initiate the complaint process against  
281.8 a dentist or dental therapist who delegated regulated procedures to a dental professional  
281.9 with a terminated license for over 12 months.

408.15 Sec. 20. Minnesota Statutes 2020, section 150A.10, subdivision 1a, is amended to read:

408.16 Subd. 1a. **Collaborative practice authorization for dental hygienists in community**  
408.17 **settings.** (a) Notwithstanding subdivision 1, a dental hygienist licensed under this chapter  
408.18 may be employed or retained by a health care facility, program, ~~or~~ nonprofit organization,  
408.19 or licensed dentist to perform the dental hygiene services listed in Minnesota Rules, part  
408.20 3100.8700, subpart 1, without the patient first being examined by a licensed dentist if the  
408.21 dental hygienist:

- 408.22 (1) has entered into a collaborative agreement with a licensed dentist that designates  
408.23 authorization for the services provided by the dental hygienist; and
- 408.24 (2) has documented completion of a course on medical emergencies within each  
408.25 continuing education cycle.
- 408.26 (b) A collaborating dentist must be licensed under this chapter and may enter into a  
408.27 collaborative agreement with no more than four dental hygienists unless otherwise authorized  
408.28 by the board. The board shall develop parameters and a process for obtaining authorization  
408.29 to collaborate with more than four dental hygienists. The collaborative agreement must  
408.30 include:
- 408.31 (1) consideration for medically compromised patients and medical conditions for which  
408.32 a dental evaluation and treatment plan must occur prior to the provision of dental hygiene  
408.33 services;
- 409.1 (2) age- and procedure-specific standard collaborative practice protocols, including  
409.2 recommended intervals for the performance of dental hygiene services and a period of time  
409.3 in which an examination by a dentist should occur;
- 409.4 (3) copies of consent to treatment form provided to the patient by the dental hygienist;
- 409.5 (4) specific protocols for the placement of pit and fissure sealants and requirements for  
409.6 follow-up care to assure the ensure efficacy of the sealants after application; and
- 409.7 (5) the procedure for creating and maintaining dental records for patients who are treated  
409.8 by the dental hygienist under Minnesota Rules, part 3100.9600, including specifying where  
409.9 records will be located.
- 409.10 ~~The collaborative agreement must be signed and maintained by the dentist, the dental~~  
409.11 ~~hygienist, and the facility, program, or organization; must be reviewed annually by the~~  
409.12 ~~collaborating dentist and dental hygienist and must be made available to the board upon~~  
409.13 ~~request.~~
- 409.14 (c) The collaborative agreement must be:
- 409.15 (1) signed and maintained by the dentist; the dental hygienist; and the facility, program,  
409.16 or organization;
- 409.17 (2) reviewed annually by the collaborating dentist and the dental hygienist; and
- 409.18 (3) made available to the board upon request.
- 409.19 ~~(d)~~ (d) Before performing any services authorized under this subdivision, a dental  
409.20 hygienist must provide the patient with a consent to treatment form which must include a  
409.21 statement advising the patient that the dental hygiene services provided are not a substitute  
409.22 for a dental examination by a licensed dentist. When the patient requires a referral for  
409.23 additional dental services, the dental hygienist shall complete a referral form and provide  
409.24 a copy to the patient, the facility, if applicable, the dentist to whom the patient is being

409.25 referred, and the collaborating dentist, if specified in the collaborative agreement. A copy  
409.26 of the referral form shall be maintained in the patient's health care record. The patient does  
409.27 not become a new patient of record of the dentist to whom the patient was referred until the  
409.28 dentist accepts the patient for follow-up services after referral from the dental hygienist.

409.29 ~~(d)~~ (c) For the purposes of this subdivision, a "health care facility, program, or nonprofit  
409.30 organization" includes a hospital; nursing home; home health agency; group home serving  
409.31 the elderly, disabled, or juveniles; state-operated facility licensed by the commissioner of  
409.32 human services or the commissioner of corrections; a state agency administered public  
409.33 health program or event; and federal, state, or local public health facility, community clinic,  
410.1 tribal clinic, school authority, Head Start program, or nonprofit organization that serves  
410.2 individuals who are uninsured or who are Minnesota health care public program recipients.

410.3 ~~(e)~~ (f) For purposes of this subdivision, a "collaborative agreement" means a written  
410.4 agreement with a licensed dentist who authorizes and accepts responsibility for the services  
410.5 performed by the dental hygienist.

410.6 (g) A collaborative practice dental hygienist must be reimbursed for all services performed  
410.7 through a health care facility, program, nonprofit organization, or licensed dentist.

410.8 (h) The commissioner of human services shall report annually, beginning February 15,  
410.9 2023, and each February 15 thereafter, to the Board of Dentistry on the services provided  
410.10 by collaborative practice dental hygienists to medical assistance and MinnesotaCare enrollees  
410.11 during the previous calendar year. The information reported must include, at a minimum,  
410.12 the geographic location and type of setting at which care was delivered, the number of  
410.13 medical assistance and MinnesotaCare patients served, and the characteristics of the patient  
410.14 population.

410.15 Sec. 21. Minnesota Statutes 2020, section 150A.105, subdivision 8, is amended to read:

410.16 Subd. 8. **Definitions.** (a) For the purposes of this section, the following definitions apply.

410.17 (b) "Practice settings that serve the low-income and underserved" mean:

410.18 (1) critical access dental provider settings as designated by the commissioner of human  
410.19 services under section 256B.76, subdivision 4;

410.20 (2) dental hygiene collaborative practice settings identified in section 150A.10,  
410.21 subdivision 1a, paragraph ~~(d)~~ (c), and including medical facilities, assisted living facilities,  
410.22 federally qualified health centers, and organizations eligible to receive a community clinic  
410.23 grant under section 145.9268, subdivision 1;

410.24 (3) military and veterans administration hospitals, clinics, and care settings;

410.25 (4) a patient's residence or home when the patient is home-bound or receiving or eligible  
410.26 to receive home care services or home and community-based waived services, regardless  
410.27 of the patient's income;

281.10 Sec. 18. Minnesota Statutes 2020, section 151.01, subdivision 27, is amended to read:

NOTE: MINNESOTA STATUTES, SECTION 151.01, SUBDIVISION 27, IS ALSO AMENDED IN UES4410-2, ARTICLE 6, SECTION 47.

281.11 Subd. 27. **Practice of pharmacy.** "Practice of pharmacy" means:

281.12 (1) interpretation and evaluation of prescription drug orders;

281.13 (2) compounding, labeling, and dispensing drugs and devices (except labeling by a  
281.14 manufacturer or packager of nonprescription drugs or commercially packaged legend drugs  
281.15 and devices);

281.16 (3) participation in clinical interpretations and monitoring of drug therapy for assurance  
281.17 of safe and effective use of drugs, including the performance of laboratory tests that are  
281.18 waived under the federal Clinical Laboratory Improvement Act of 1988, United States Code,  
281.19 title 42, section 263a et seq., provided that a pharmacist may interpret the results of laboratory  
281.20 tests but may modify drug therapy only pursuant to a protocol or collaborative practice  
281.21 agreement;

281.22 (4) participation in drug and therapeutic device selection; drug administration for first  
281.23 dosage and medical emergencies; intramuscular and subcutaneous drug administration used

410.28 (5) oral health educational institutions; or

410.29 (6) any other clinic or practice setting, including mobile dental units, in which at least  
410.30 50 percent of the total patient base of the dental therapist or advanced dental therapist  
410.31 consists of patients who:

411.1 (i) are enrolled in a Minnesota health care program;

411.2 (ii) have a medical disability or chronic condition that creates a significant barrier to  
411.3 receiving dental care;

411.4 (iii) do not have dental health coverage, either through a public health care program or  
411.5 private insurance, and have an annual gross family income equal to or less than 200 percent  
411.6 of the federal poverty guidelines; or

411.7 (iv) do not have dental health coverage, either through a state public health care program  
411.8 or private insurance, and whose family gross income is equal to or less than 200 percent of  
411.9 the federal poverty guidelines.

411.10 (c) "Dental health professional shortage area" means an area that meets the criteria  
411.11 established by the secretary of the United States Department of Health and Human Services  
411.12 and is designated as such under United States Code, title 42, section 254e.

411.13 Sec. 22. Minnesota Statutes 2020, section 151.01, subdivision 27, is amended to read:

411.14 Subd. 27. **Practice of pharmacy.** "Practice of pharmacy" means:

411.15 (1) interpretation and evaluation of prescription drug orders;

411.16 (2) compounding, labeling, and dispensing drugs and devices (except labeling by a  
411.17 manufacturer or packager of nonprescription drugs or commercially packaged legend drugs  
411.18 and devices);

411.19 (3) participation in clinical interpretations and monitoring of drug therapy for assurance  
411.20 of safe and effective use of drugs, including the performance of ordering and performing  
411.21 laboratory tests that are waived under the federal Clinical Laboratory Improvement Act of  
411.22 1988, United States Code, title 42, section 263a et seq., provided that a pharmacist may  
411.23 interpret the results of laboratory tests but may modify A pharmacist may collect specimens,  
411.24 interpret results, notify the patient of results, and refer patients to other health care providers  
411.25 for follow-up care and may initiate, modify, or discontinue drug therapy only pursuant to  
411.26 a protocol or collaborative practice agreement. A pharmacy technician or pharmacist intern  
411.27 may perform tests authorized under this clause if the technician or intern is working under  
411.28 the direct supervision of a pharmacist;

411.29 (4) participation in drug and therapeutic device selection; drug administration for first  
411.30 dosage and medical emergencies; intramuscular and subcutaneous administration used for

281.24 ~~for the treatment of alcohol or opioid dependence under a prescription drug order;~~ drug  
281.25 regimen reviews; and drug or drug-related research;

281.26 (5) drug administration, through intramuscular and subcutaneous administration used  
281.27 to treat mental illnesses as permitted under the following conditions:

281.28 (i) upon the order of a prescriber and the prescriber is notified after administration is  
281.29 complete; or

281.30 (ii) pursuant to a protocol or collaborative practice agreement as defined by section  
281.31 151.01, subdivisions 27b and 27c, and participation in the initiation, management,  
282.1 modification, administration, and discontinuation of drug therapy is according to the protocol  
282.2 or collaborative practice agreement between the pharmacist and a dentist, optometrist,  
282.3 physician, podiatrist, or veterinarian, or an advanced practice registered nurse authorized  
282.4 to prescribe, dispense, and administer under section 148.235. Any changes in drug therapy  
282.5 or medication administration made pursuant to a protocol or collaborative practice agreement  
282.6 must be documented by the pharmacist in the patient's medical record or reported by the  
282.7 pharmacist to a practitioner responsible for the patient's care;

282.8 (6) participation in administration of influenza vaccines and vaccines approved by the  
282.9 United States Food and Drug Administration related to COVID-19 or SARS-CoV-2 to all  
282.10 eligible individuals six years of age and older and all other vaccines to patients 13 years of  
282.11 age and older by written protocol with a physician licensed under chapter 147, a physician  
282.12 assistant authorized to prescribe drugs under chapter 147A, or an advanced practice registered  
282.13 nurse authorized to prescribe drugs under section 148.235, provided that:

282.14 (i) ~~the protocol includes, at a minimum:~~

282.15 (A) ~~the name, dose, and route of each vaccine that may be given;~~

282.16 (B) ~~the patient population for whom the vaccine may be given;~~

282.17 (C) ~~contraindications and precautions to the vaccine;~~

282.18 (D) ~~the procedure for handling an adverse reaction;~~

282.19 (E) ~~the name, signature, and address of the physician, physician assistant, or advanced~~  
282.20 ~~practice registered nurse;~~

282.21 (F) ~~a telephone number at which the physician, physician assistant, or advanced practice~~  
282.22 ~~registered nurse can be contacted; and~~

282.23 (G) ~~the date and time period for which the protocol is valid;~~

282.24 (ii) ~~the pharmacist~~ has successfully completed a program approved by the Accreditation  
282.25 Council for Pharmacy Education specifically for the administration of immunizations or a  
282.26 program approved by the board;

411.31 ~~the treatment of alcohol or opioid dependence;~~ drug regimen reviews; and drug or  
411.32 drug-related research;

412.1 (5) drug administration, through intramuscular and subcutaneous administration used  
412.2 to treat mental illnesses as permitted under the following conditions:

412.3 (i) upon the order of a prescriber and the prescriber is notified after administration is  
412.4 complete; or

412.5 (ii) pursuant to a protocol or collaborative practice agreement as defined by section  
412.6 151.01, subdivisions 27b and 27c, and participation in the initiation, management,  
412.7 modification, administration, and discontinuation of drug therapy is according to the protocol  
412.8 or collaborative practice agreement between the pharmacist and a dentist, optometrist,  
412.9 physician, podiatrist, or veterinarian, or an advanced practice registered nurse authorized  
412.10 to prescribe, dispense, and administer under section 148.235. Any changes in drug therapy  
412.11 or medication administration made pursuant to a protocol or collaborative practice agreement  
412.12 must be documented by the pharmacist in the patient's medical record or reported by the  
412.13 pharmacist to a practitioner responsible for the patient's care;

412.14 (6) participation in administration of influenza vaccines and vaccines approved by the  
412.15 United States Food and Drug Administration related to COVID-19 or SARS-CoV-2 to all  
412.16 eligible individuals six years of age and older and all other vaccines to patients 13 years of  
412.17 age and older by written protocol with a physician licensed under chapter 147, a physician  
412.18 assistant authorized to prescribe drugs under chapter 147A, or an advanced practice registered  
412.19 nurse authorized to prescribe drugs under section 148.235, provided that ~~the protocol includes~~  
412.20 ~~a procedure for handling an adverse reaction, and the pharmacist:~~

412.21 (i) ~~the protocol includes, at a minimum:~~

412.22 (A) ~~the name, dose, and route of each vaccine that may be given;~~

412.23 (B) ~~the patient population for whom the vaccine may be given;~~

412.24 (C) ~~contraindications and precautions to the vaccine;~~

412.25 (D) ~~the procedure for handling an adverse reaction;~~

412.26 (E) ~~the name, signature, and address of the physician, physician assistant, or advanced~~  
412.27 ~~practice registered nurse;~~

412.28 (F) ~~a telephone number at which the physician, physician assistant, or advanced practice~~  
412.29 ~~registered nurse can be contacted; and~~

412.30 (G) ~~the date and time period for which the protocol is valid;~~

413.1 (ii) ~~the pharmacist~~ (i) has successfully completed a program approved by the Accreditation  
413.2 Council for Pharmacy Education specifically for the administration of immunizations or a  
413.3 program approved by the board;

282.27 (iii) the pharmacist utilizes the Minnesota Immunization Information Connection to  
282.28 assess the immunization status of individuals prior to the administration of vaccines, except  
282.29 when administering influenza vaccines to individuals age nine and older;

282.30 (iv) the pharmacist reports the administration of the immunization to the Minnesota  
282.31 Immunization Information Connection; and

283.1 (v) the pharmacist complies with guidelines for vaccines and immunizations established  
283.2 by the federal Advisory Committee on Immunization Practices, except that a pharmacist  
283.3 does not need to comply with those portions of the guidelines that establish immunization  
283.4 schedules when administering a vaccine pursuant to a valid, patient-specific order issued  
283.5 by a physician licensed under chapter 147, a physician assistant authorized to prescribe  
283.6 drugs under chapter 147A, or an advanced practice registered nurse authorized to prescribe  
283.7 drugs under section 148.235, provided that the order is consistent with the United States  
283.8 Food and Drug Administration approved labeling of the vaccine;

283.9 (7) participation in the initiation, management, modification, and discontinuation of  
283.10 drug therapy according to a written protocol or collaborative practice agreement between:  
283.11 (i) one or more pharmacists and one or more dentists, optometrists, physicians, podiatrists,  
283.12 or veterinarians; or (ii) one or more pharmacists and one or more physician assistants  
283.13 authorized to prescribe, dispense, and administer under chapter 147A, or advanced practice  
283.14 registered nurses authorized to prescribe, dispense, and administer under section 148.235.  
283.15 Any changes in drug therapy made pursuant to a protocol or collaborative practice agreement  
283.16 must be documented by the pharmacist in the patient's medical record or reported by the  
283.17 pharmacist to a practitioner responsible for the patient's care;

283.18 (8) participation in the storage of drugs and the maintenance of records;

283.19 (9) patient counseling on therapeutic values, content, hazards, and uses of drugs and  
283.20 devices;

283.21 (10) offering or performing those acts, services, operations, or transactions necessary  
283.22 in the conduct, operation, management, and control of a pharmacy;

283.23 (11) participation in the initiation, management, modification, and discontinuation of  
283.24 therapy with opiate antagonists, as defined in section 604A.04, subdivision 1, pursuant to:

283.25 (i) a written protocol as allowed under clause (7); or

413.4 (iii) the pharmacist (ii) utilizes the Minnesota Immunization Information Connection to  
413.5 assess the immunization status of individuals prior to the administration of vaccines, except  
413.6 when administering influenza vaccines to individuals age nine and older;

413.7 (iv) the pharmacist (iii) reports the administration of the immunization to the Minnesota  
413.8 Immunization Information Connection; and

413.9 (v) the pharmacist (iv) complies with guidelines for vaccines and immunizations  
413.10 established by the federal Advisory Committee on Immunization Practices, except that a  
413.11 pharmacist does not need to comply with those portions of the guidelines that establish  
413.12 immunization schedules when if the pharmacist is administering a vaccine pursuant to a  
413.13 valid, patient-specific order issued by a physician licensed under chapter 147, a physician  
413.14 assistant authorized to prescribe drugs under chapter 147A, or an advanced practice registered  
413.15 nurse authorized to prescribe drugs under section 148.235, provided that the order is  
413.16 consistent with the United States Food and Drug Administration approved labeling of the  
413.17 vaccine;

413.18 (v) informs the patient of any contraindications and precautions to the vaccine before  
413.19 administering the vaccine; and

413.20 (vi) if the patient is 18 years of age or younger, informs the patient and any adult caregiver  
413.21 accompanying the patient of the importance of a well-child visit with a pediatrician or other  
413.22 licensed primary care provider;

413.23 (7) participation in the initiation, management, modification, and discontinuation of  
413.24 drug therapy according to a written protocol or collaborative practice agreement between:  
413.25 (i) one or more pharmacists and one or more dentists, optometrists, physicians, podiatrists,  
413.26 or veterinarians; or (ii) one or more pharmacists and one or more physician assistants  
413.27 authorized to prescribe, dispense, and administer under chapter 147A, or advanced practice  
413.28 registered nurses authorized to prescribe, dispense, and administer under section 148.235.  
413.29 Any changes in drug therapy made pursuant to a protocol or collaborative practice agreement  
413.30 must be documented by the pharmacist in the patient's medical record or reported by the  
413.31 pharmacist to a practitioner responsible for the patient's care;

413.32 (8) participation in the storage of drugs and the maintenance of records;

414.1 (9) patient counseling on therapeutic values, content, hazards, and uses of drugs and  
414.2 devices;

414.3 (10) offering or performing those acts, services, operations, or transactions necessary  
414.4 in the conduct, operation, management, and control of a pharmacy;

414.5 (11) participation in the initiation, management, modification, and discontinuation of  
414.6 therapy with opiate antagonists, as defined in section 604A.04, subdivision 1, pursuant to:

414.7 (i) a written protocol as allowed under clause (7); or



283.26 (ii) a written protocol with a community health board medical consultant or a practitioner  
283.27 designated by the commissioner of health, as allowed under section 151.37, subdivision 13;  
283.28 ~~and~~  
283.29 (12) prescribing self-administered hormonal contraceptives; nicotine replacement  
283.30 medications; and opiate antagonists for the treatment of an acute opiate overdose pursuant  
283.31 to section 151.37, subdivision 14, 15, or 16; ~~and~~  
283.32 (13) participation in the placement of drug monitoring devices according to a prescription,  
283.33 protocol, or collaborative practice agreement.

414.8 (ii) a written protocol with a community health board medical consultant or a practitioner  
414.9 designated by the commissioner of health, as allowed under section 151.37, subdivision 13;  
414.10 ~~and~~  
414.11 (12) prescribing self-administered hormonal contraceptives; nicotine replacement  
414.12 medications; and opiate antagonists for the treatment of an acute opiate overdose pursuant  
414.13 to section 151.37, subdivision 14, 15, or 16.

414.14 Sec. 23. Minnesota Statutes 2020, section 151.065, subdivision 1, is amended to read:  
414.15 Subdivision 1. Application fees. Application fees for licensure and registration are as  
414.16 follows:  
414.17 (1) pharmacist licensed by examination, \$175;  
414.18 (2) pharmacist licensed by reciprocity, \$275;  
414.19 (3) pharmacy intern, \$50;  
414.20 (4) pharmacy technician, \$50;  
414.21 (5) pharmacy, \$260;  
414.22 (6) drug wholesaler, legend drugs only, \$5,260;  
414.23 (7) drug wholesaler, legend and nonlegend drugs, \$5,260;  
414.24 (8) drug wholesaler, nonlegend drugs, veterinary legend drugs, or both, \$5,260;  
414.25 (9) drug wholesaler, medical gases, \$5,260 for the first facility and \$260 for each  
414.26 additional facility;  
414.27 (10) third-party logistics provider, \$260;  
414.28 (11) drug manufacturer, nonopiate legend drugs only, \$5,260;  
414.29 (12) drug manufacturer, nonopiate legend and nonlegend drugs, \$5,260;  
415.1 (13) drug manufacturer, nonlegend or veterinary legend drugs, \$5,260;  
415.2 (14) drug manufacturer, medical gases, \$5,260 for the first facility and \$260 for each  
415.3 additional facility;  
415.4 (15) drug manufacturer, also licensed as a pharmacy in Minnesota, \$5,260;  
415.5 (16) drug manufacturer of opiate-containing controlled substances listed in section  
415.6 152.02, subdivisions 3 to 5, \$5,260;

- 415.7 (17) medical gas dispenser, \$260;
- 415.8 (18) controlled substance researcher, \$75; and
- 415.9 (19) pharmacy professional corporation, \$150.
- 415.10 Sec. 24. Minnesota Statutes 2020, section 151.065, subdivision 3, is amended to read:
- 415.11 Subd. 3. **Annual renewal fees.** Annual licensure and registration renewal fees are as
- 415.12 follows:
- 415.13 (1) pharmacist, \$175;
- 415.14 (2) pharmacy technician, \$50;
- 415.15 (3) pharmacy, \$260;
- 415.16 (4) drug wholesaler, legend drugs only, \$5,260;
- 415.17 (5) drug wholesaler, legend and nonlegend drugs, \$5,260;
- 415.18 (6) drug wholesaler, nonlegend drugs, veterinary legend drugs, or both, \$5,260;
- 415.19 (7) drug wholesaler, medical gases, \$5,260 for the first facility and \$260 for each
- 415.20 additional facility;
- 415.21 (8) third-party logistics provider, \$260;
- 415.22 (9) drug manufacturer, nonopiate legend drugs only, \$5,260;
- 415.23 (10) drug manufacturer, nonopiate legend and nonlegend drugs, \$5,260;
- 415.24 (11) drug manufacturer, nonlegend, veterinary legend drugs, or both, \$5,260;
- 415.25 (12) drug manufacturer, medical gases, \$5,260 for the first facility and \$260 for each
- 415.26 additional facility;
- 415.27 (13) drug manufacturer, also licensed as a pharmacy in Minnesota, \$5,260;
- 416.1 (14) drug manufacturer of opiate-containing controlled substances listed in section
- 416.2 152.02, subdivisions 3 to 5, \$55,260;
- 416.3 (15) medical gas dispenser, \$260;
- 416.4 (16) controlled substance researcher, \$75; and
- 416.5 (17) pharmacy professional corporation, \$100.
- 416.6 Sec. 25. Minnesota Statutes 2020, section 151.065, subdivision 7, is amended to read:
- 416.7 Subd. 7. **Deposit of fees.** (a) The license fees collected under this section, with the
- 416.8 exception of the fees identified in paragraphs (b) and (c), shall be deposited in the state
- 416.9 government special revenue fund.

416.10 (b) \$5,000 of each fee collected under subdivision 1, clauses (6) to ~~(9)~~ (8), ~~and~~ (11) to  
416.11 (13), ~~and~~ (15), and subdivision 3, clauses (4) to ~~(7)~~ (6), ~~and~~ (9) to (11), and (13), and \$55,000  
416.12 of each fee collected under subdivision 1, clause (16), and subdivision 3, clause (14), shall  
416.13 be deposited in the opiate epidemic response fund established in section 256.043.

416.14 (c) If the fees collected under subdivision 1, clause (16), or subdivision 3, clause (14),  
416.15 are reduced under section 256.043, \$5,000 of the reduced fee shall be deposited in the opiate  
416.16 epidemic response fund in section 256.043.

416.17 Sec. 26. **[151.103] DELEGATION OF VACCINE ADMINISTRATION.**

416.18 (a) A pharmacy technician or pharmacist intern may administer vaccines under section  
416.19 151.01, subdivision 27, clause (6), if the technician or intern:

416.20 (1) is under the direct supervision of a pharmacist while administering the vaccine;

416.21 (2) has successfully completed a program approved by the Accreditation Council for  
416.22 Pharmacy Education (ACPE) specifically for the administration of immunizations or a  
416.23 program approved by the board;

416.24 (3) has a current certificate in basic cardiopulmonary resuscitation; and

416.25 (4) if delegated to a pharmacy technician, the technician has completed:

416.26 (i) one of the training programs listed under Minnesota Rules, part 6800.3850, subpart  
416.27 1h, item B; and

416.28 (ii) a minimum of two hours of ACPE-approved, immunization-related continuing  
416.29 pharmacy education as part of the pharmacy technician's two-year continuing education  
416.30 schedule.

417.1 (b) Direct supervision under this section must be in-person and must not be done through  
417.2 telehealth as defined under section 62A.673, subdivision 2.

NOTE: SEC. 27. MINNESOTA STATUTES 2020, SECTION 152.125,  
AMENDMENT MOVED TO ARTICLE 6 TO MATCH UES4410-2, ARTICLE  
6, SECTION 56.

284.1 Sec. 19. Minnesota Statutes 2020, section 153.16, subdivision 1, is amended to read:

284.2 Subdivision 1. **License requirements.** The board shall issue a license to practice podiatric  
284.3 medicine to a person who meets the following requirements:

284.4 (a) The applicant for a license shall file a written notarized application on forms provided  
284.5 by the board, showing to the board's satisfaction that the applicant is of good moral character  
284.6 and satisfies the requirements of this section.

284.7 (b) The applicant shall present evidence satisfactory to the board of being a graduate of  
284.8 a podiatric medical school approved by the board based upon its faculty, curriculum, facilities,

284.9 accreditation by a recognized national accrediting organization approved by the board, and  
284.10 other relevant factors.

284.11 (c) The applicant must have received a passing score on each part of the national board  
284.12 examinations, parts one and two, prepared and graded by the National Board of Podiatric  
284.13 Medical Examiners. The passing score for each part of the national board examinations,  
284.14 parts one and two, is as defined by the National Board of Podiatric Medical Examiners.

284.15 (d) Applicants graduating after ~~1986~~ 1990 from a podiatric medical school shall present  
284.16 evidence of successful completion of a residency program approved by a national accrediting  
284.17 podiatric medicine organization.

284.18 (e) The applicant shall appear in person before the board or its designated representative  
284.19 to show that the applicant satisfies the requirements of this section, including knowledge  
284.20 of laws, rules, and ethics pertaining to the practice of podiatric medicine. The board may  
284.21 establish as internal operating procedures the procedures or requirements for the applicant's  
284.22 personal presentation. Upon completion of all other application requirements, a doctor of  
284.23 podiatric medicine applying for a temporary military license has six months in which to  
284.24 comply with this subdivision.

284.25 (f) The applicant shall pay a fee established by the board by rule. The fee shall not be  
284.26 refunded.

284.27 (g) The applicant must not have engaged in conduct warranting disciplinary action  
284.28 against a licensee. If the applicant does not satisfy the requirements of this paragraph, the  
284.29 board may refuse to issue a license unless it determines that the public will be protected  
284.30 through issuance of a license with conditions and limitations the board considers appropriate.

284.31 (h) Upon payment of a fee as the board may require, an applicant who fails to pass an  
284.32 examination and is refused a license is entitled to reexamination within one year of the  
285.1 board's refusal to issue the license. No more than two reexaminations are allowed without  
285.2 a new application for a license.

285.3 **EFFECTIVE DATE.** This section is effective the day following final enactment.

285.4 **Sec. 20. TEMPORARY REQUIREMENTS GOVERNING AMBULANCE SERVICE**  
285.5 **OPERATIONS AND THE PROVISION OF EMERGENCY MEDICAL SERVICES.**

285.6 Subdivision 1. **Application.** Notwithstanding any law to the contrary in Minnesota  
285.7 Statutes, chapter 144E, an ambulance service may operate according to this section, and  
285.8 emergency medical technicians, advanced emergency medical technicians, and paramedics  
285.9 may provide emergency medical services according to this section.

285.10 Subd. 2. **Definitions.** (a) The terms defined in this subdivision apply to this section.

285.11 (b) "Advanced emergency medical technician" has the meaning given in Minnesota  
285.12 Statutes, section 144E.001, subdivision 5d.

420.20 **Sec. 28. TEMPORARY REQUIREMENTS GOVERNING AMBULANCE SERVICE**  
420.21 **OPERATIONS AND THE PROVISION OF EMERGENCY MEDICAL SERVICES.**

420.22 Subdivision 1. **Application.** Notwithstanding any law to the contrary in Minnesota  
420.23 Statutes, chapter 144E, an ambulance service may operate according to this section, and  
420.24 emergency medical technicians, advanced emergency medical technicians, and paramedics  
420.25 may provide emergency medical services according to this section.

420.26 Subd. 2. **Definitions.** (a) The terms defined in this subdivision apply to this section.

420.27 (b) "Advanced emergency medical technician" has the meaning given in Minnesota  
420.28 Statutes, section 144E.001, subdivision 5d.

285.13 (c) "Advanced life support" has the meaning given in Minnesota Statutes, section  
285.14 144E.001, subdivision 1b.

285.15 (d) "Ambulance" has the meaning given in Minnesota Statutes, section 144E.001,  
285.16 subdivision 2.

285.17 (e) "Ambulance service personnel" has the meaning given in Minnesota Statutes, section  
285.18 144E.001, subdivision 3a.

285.19 (f) "Basic life support" has the meaning given in Minnesota Statutes, section 144E.001,  
285.20 subdivision 4b.

285.21 (g) "Board" means the Emergency Medical Services Regulatory Board.

285.22 (h) "Emergency medical technician" has the meaning given in Minnesota Statutes, section  
285.23 144E.001, subdivision 5c.

285.24 (i) "Paramedic" has the meaning given in Minnesota Statutes, section 144E.001,  
285.25 subdivision 5e.

285.26 (j) "Primary service area" means the area designated by the board according to Minnesota  
285.27 Statutes, section 144E.06, to be served by an ambulance service.

285.28 Subd. 3. **Staffing.** (a) For emergency ambulance calls and interfacility transfers in an  
285.29 ambulance service's primary service area, an ambulance service must staff an ambulance  
285.30 that provides basic life support with at least:

286.1 (1) one emergency medical technician, who must be in the patient compartment when  
286.2 a patient is being transported; and

286.3 (2) one individual to drive the ambulance. The driver must hold a valid driver's license  
286.4 from any state, must have attended an emergency vehicle driving course approved by the  
286.5 ambulance service, and must have completed a course on cardiopulmonary resuscitation  
286.6 approved by the ambulance service.

286.7 (b) For emergency ambulance calls and interfacility transfers in an ambulance service's  
286.8 primary service area, an ambulance service must staff an ambulance that provides advanced  
286.9 life support with at least:

286.10 (1) one paramedic; one registered nurse who meets the requirements in Minnesota  
286.11 Statutes, section 144E.001, subdivision 3a, clause (2); or one physician assistant who meets  
286.12 the requirements in Minnesota Statutes, section 144E.001, subdivision 3a, clause (3), and  
286.13 who must be in the patient compartment when a patient is being transported; and

286.14 (2) one individual to drive the ambulance. The driver must hold a valid driver's license  
286.15 from any state, must have attended an emergency vehicle driving course approved by the  
286.16 ambulance service, and must have completed a course on cardiopulmonary resuscitation  
286.17 approved by the ambulance service.

420.29 (c) "Advanced life support" has the meaning given in Minnesota Statutes, section  
420.30 144E.001, subdivision 1b.

420.31 (d) "Ambulance" has the meaning given in Minnesota Statutes, section 144E.001,  
420.32 subdivision 2.

421.1 (e) "Ambulance service personnel" has the meaning given in Minnesota Statutes, section  
421.2 144E.001, subdivision 3a.

421.3 (f) "Basic life support" has the meaning given in Minnesota Statutes, section 144E.001,  
421.4 subdivision 4b.

421.5 (g) "Board" means the Emergency Medical Services Regulatory Board.

421.6 (h) "Emergency medical technician" has the meaning given in Minnesota Statutes, section  
421.7 144E.001, subdivision 5c.

421.8 (i) "Paramedic" has the meaning given in Minnesota Statutes, section 144E.001,  
421.9 subdivision 5e.

421.10 (j) "Primary service area" means the area designated by the board according to Minnesota  
421.11 Statutes, section 144E.06, to be served by an ambulance service.

421.12 Subd. 3. **Staffing.** (a) For emergency ambulance calls in an ambulance service's primary  
421.13 service area, an ambulance service must staff an ambulance that provides basic life support  
421.14 with at least:

421.15 (1) one emergency medical technician, who must be in the patient compartment when  
421.16 a patient is being transported; and

421.17 (2) one individual to drive the ambulance. The driver must hold a valid driver's license  
421.18 from any state, must have attended an emergency vehicle driving course approved by the  
421.19 ambulance service, and must have completed a course on cardiopulmonary resuscitation  
421.20 approved by the ambulance service.

421.21 (b) For emergency ambulance calls in an ambulance service's primary service area, an  
421.22 ambulance service must staff an ambulance that provides advanced life support with at least:

421.23 (1) one paramedic; one registered nurse who meets the requirements in Minnesota  
421.24 Statutes, section 144E.001, subdivision 3a, clause (2); or one physician assistant who meets  
421.25 the requirements in Minnesota Statutes, section 144E.001, subdivision 3a, clause (3), and  
421.26 who must be in the patient compartment when a patient is being transported; and

421.27 (2) one individual to drive the ambulance. The driver must hold a valid driver's license  
421.28 from any state, must have attended an emergency vehicle driving course approved by the  
421.29 ambulance service, and must have completed a course on cardiopulmonary resuscitation  
421.30 approved by the ambulance service.

286.18 (c) The ambulance service director and medical director must approve the staffing of  
286.19 an ambulance according to this subdivision.

286.20 (d) An ambulance service staffing an ambulance according to this subdivision must  
286.21 immediately notify the board in writing and in a manner prescribed by the board. The notice  
286.22 must specify how the ambulance service is staffing its basic life support or advanced life  
286.23 support ambulances and the time period the ambulance service plans to staff the ambulances  
286.24 according to this subdivision. If an ambulance service continues to staff an ambulance  
286.25 according to this subdivision after the date provided to the board in its initial notice, the  
286.26 ambulance service must provide a new notice to the board in a manner that complies with  
286.27 this paragraph.

286.28 (e) If an individual serving as a driver under this subdivision commits an act listed in  
286.29 Minnesota Statutes, section 144E.27, subdivision 5, paragraph (a), the board may temporarily  
286.30 suspend or prohibit the individual from driving an ambulance or place conditions on the  
286.31 individual's ability to drive an ambulance using the procedures and authority in Minnesota  
286.32 Statutes, section 144E.27, subdivisions 5 and 6.

287.1 **Subd. 4. Use of expired emergency medications and medical supplies. (a) If an**  
287.2 **ambulance service experiences a shortage of an emergency medication or medical supply,**  
287.3 **ambulance service personnel may use an emergency medication or medical supply for up**  
287.4 **to six months after the emergency medication's or medical supply's specified expiration**  
287.5 **date, provided:**

287.6 (1) the ambulance service director and medical director approve the use of the expired  
287.7 emergency medication or medical supply;

287.8 (2) ambulance service personnel use an expired emergency medication or medical supply  
287.9 only after depleting the ambulance service's supply of that emergency medication or medical  
287.10 supply that is unexpired;

287.11 (3) the ambulance service has stored and maintained the expired emergency medication  
287.12 or medical supply according to the manufacturer's instructions;

287.13 (4) if possible, ambulance service personnel obtain consent from the patient to use the  
287.14 expired emergency medication or medical supply prior to its use; and

287.15 (5) when the ambulance service obtains a supply of that emergency medication or medical  
287.16 supply that is unexpired, ambulance service personnel cease use of the expired emergency  
287.17 medication or medical supply and instead use the unexpired emergency medication or  
287.18 medical supply.

287.19 (b) Before approving the use of an expired emergency medication, an ambulance service  
287.20 director and medical director must consult with the Board of Pharmacy regarding the safety  
287.21 and efficacy of using the expired emergency medication.

287.22 (c) An ambulance service must keep a record of all expired emergency medications and  
287.23 all expired medical supplies used and must submit that record in writing to the board in a

421.31 (c) The ambulance service director and medical director must approve the staffing of  
421.32 an ambulance according to this subdivision.

422.1 (d) An ambulance service staffing an ambulance according to this subdivision must  
422.2 immediately notify the board in writing and in a manner prescribed by the board. The notice  
422.3 must specify how the ambulance service is staffing its basic life support or advanced life  
422.4 support ambulances and the time period the ambulance service plans to staff the ambulances  
422.5 according to this subdivision. If an ambulance service continues to staff an ambulance  
422.6 according to this subdivision after the date provided to the board in its initial notice, the  
422.7 ambulance service must provide a new notice to the board in a manner that complies with  
422.8 this paragraph.

422.9 (e) If an individual serving as a driver under this subdivision commits an act listed in  
422.10 Minnesota Statutes, section 144E.27, subdivision 5, paragraph (a), the board may temporarily  
422.11 suspend or prohibit the individual from driving an ambulance or place conditions on the  
422.12 individual's ability to drive an ambulance using the procedures and authority in Minnesota  
422.13 Statutes, section 144E.27, subdivisions 5 and 6.

422.14 **Subd. 4. Use of expired emergency medications and medical supplies. (a) If an**  
422.15 **ambulance service experiences a shortage of an emergency medication or medical supply,**  
422.16 **ambulance service personnel may use an emergency medication or medical supply for up**  
422.17 **to six months after the emergency medication's or medical supply's specified expiration**  
422.18 **date, provided:**

422.19 (1) the ambulance service director and medical director approve the use of the expired  
422.20 emergency medication or medical supply;

422.21 (2) ambulance service personnel use an expired emergency medication or medical supply  
422.22 only after depleting the ambulance service's supply of that emergency medication or medical  
422.23 supply that is unexpired;

422.24 (3) the ambulance service has stored and maintained the expired emergency medication  
422.25 or medical supply according to the manufacturer's instructions;

422.26 (4) if possible, ambulance service personnel obtain consent from the patient to use the  
422.27 expired emergency medication or medical supply prior to its use; and

422.28 (5) when the ambulance service obtains a supply of that emergency medication or medical  
422.29 supply that is unexpired, ambulance service personnel cease use of the expired emergency  
422.30 medication or medical supply and instead use the unexpired emergency medication or  
422.31 medical supply.

423.1 (b) Before approving the use of an expired emergency medication, an ambulance service  
423.2 director and medical director must consult with the Board of Pharmacy regarding the safety  
423.3 and efficacy of using the expired emergency medication.

423.4 (c) An ambulance service must keep a record of all expired emergency medications and  
423.5 all expired medical supplies used and must submit that record in writing to the board in a

287.24 time and manner specified by the board. The record must list the specific expired emergency  
287.25 medications and medical supplies used and the time period during which ambulance service  
287.26 personnel used the expired emergency medication or medical supply.

287.27 Subd. 5. **Provision of emergency medical services after certification expires.** (a) At  
287.28 the request of an emergency medical technician, advanced emergency medical technician,  
287.29 or paramedic, and with the approval of the ambulance service director, an ambulance service  
287.30 medical director may authorize the emergency medical technician, advanced emergency  
287.31 medical technician, or paramedic to provide emergency medical services for the ambulance  
287.32 service for up to three months after the certification of the emergency medical technician,  
287.33 advanced emergency medical technician, or paramedic expires.

288.1 (b) An ambulance service must immediately notify the board each time its medical  
288.2 director issues an authorization under paragraph (a). The notice must be provided in writing  
288.3 and in a manner prescribed by the board and must include information on the time period  
288.4 each emergency medical technician, advanced emergency medical technician, or paramedic  
288.5 will provide emergency medical services according to an authorization under this subdivision;  
288.6 information on why the emergency medical technician, advanced emergency medical  
288.7 technician, or paramedic needs the authorization; and an attestation from the medical director  
288.8 that the authorization is necessary to help the ambulance service adequately staff its  
288.9 ambulances.

288.10 Subd. 6. **Reports.** The board must provide quarterly reports to the chairs and ranking  
288.11 minority members of the legislative committees with jurisdiction over the board regarding  
288.12 actions taken by ambulance services according to subdivisions 3, 4, and 5. The board must  
288.13 submit reports by June 30, September 30, and December 31 of 2022; and by March 31, June  
288.14 30, September 30, and December 31 of 2023. Each report must include the following  
288.15 information:

288.16 (1) for each ambulance service staffing basic life support or advanced life support  
288.17 ambulances according to subdivision 3, the primary service area served by the ambulance  
288.18 service, the number of ambulances staffed according to subdivision 3, and the time period  
288.19 the ambulance service has staffed and plans to staff the ambulances according to subdivision  
288.20 3;

288.21 (2) for each ambulance service that authorized the use of an expired emergency  
288.22 medication or medical supply according to subdivision 4, the expired emergency medications  
288.23 and medical supplies authorized for use and the time period the ambulance service used  
288.24 each expired emergency medication or medical supply; and

288.25 (3) for each ambulance service that authorized the provision of emergency medical  
288.26 services according to subdivision 5, the number of emergency medical technicians, advanced  
288.27 emergency medical technicians, and paramedics providing emergency medical services  
288.28 under an expired certification and the time period each emergency medical technician,

423.6 time and manner specified by the board. The record must list the specific expired emergency  
423.7 medications and medical supplies used and the time period during which ambulance service  
423.8 personnel used the expired emergency medication or medical supply.

423.9 Subd. 5. **Provision of emergency medical services after certification expires.** (a) At  
423.10 the request of an emergency medical technician, advanced emergency medical technician,  
423.11 or paramedic, and with the approval of the ambulance service director, an ambulance service  
423.12 medical director may authorize the emergency medical technician, advanced emergency  
423.13 medical technician, or paramedic to provide emergency medical services for the ambulance  
423.14 service for up to three months after the certification of the emergency medical technician,  
423.15 advanced emergency medical technician, or paramedic expires.

423.16 (b) An ambulance service must immediately notify the board each time its medical  
423.17 director issues an authorization under paragraph (a). The notice must be provided in writing  
423.18 and in a manner prescribed by the board and must include information on the time period  
423.19 each emergency medical technician, advanced emergency medical technician, or paramedic  
423.20 will provide emergency medical services according to an authorization under this subdivision;  
423.21 information on why the emergency medical technician, advanced emergency medical  
423.22 technician, or paramedic needs the authorization; and an attestation from the medical director  
423.23 that the authorization is necessary to help the ambulance service adequately staff its  
423.24 ambulances.

423.25 Subd. 6. **Reports.** The board must provide quarterly reports to the chairs and ranking  
423.26 minority members of the legislative committees with jurisdiction over the board regarding  
423.27 actions taken by ambulance services according to subdivisions 3, 4, and 5. The board must  
423.28 submit reports by June 30, September 30, and December 31 of 2022; and by March 31, June  
423.29 30, September 30, and December 31 of 2023. Each report must include the following  
423.30 information:

423.31 (1) for each ambulance service staffing basic life support or advanced life support  
423.32 ambulances according to subdivision 3, the primary service area served by the ambulance  
423.33 service, the number of ambulances staffed according to subdivision 3, and the time period  
424.1 the ambulance service has staffed and plans to staff the ambulances according to subdivision  
424.2 3;

424.3 (2) for each ambulance service that authorized the use of an expired emergency  
424.4 medication or medical supply according to subdivision 4, the expired emergency medications  
424.5 and medical supplies authorized for use and the time period the ambulance service used  
424.6 each expired emergency medication or medical supply; and

424.7 (3) for each ambulance service that authorized the provision of emergency medical  
424.8 services according to subdivision 5, the number of emergency medical technicians, advanced  
424.9 emergency medical technicians, and paramedics providing emergency medical services  
424.10 under an expired certification and the time period each emergency medical technician,

288.29 advanced emergency medical technician, or paramedic provided and will provide emergency  
288.30 medical services under an expired certification.

288.31 Subd. 7. **Expiration.** This section expires January 1, 2024.

288.32 **EFFECTIVE DATE.** This section is effective the day following final enactment.

289.1 Sec. 21. **REPEALER.**

289.2 Minnesota Statutes 2020, section 150A.091, subdivisions 3, 15, and 17, are repealed.

424.11 advanced emergency medical technician, or paramedic provided and will provide emergency  
424.12 medical services under an expired certification.

424.13 Subd. 7. **Expiration.** This section expires January 1, 2024.

424.14 **EFFECTIVE DATE.** This section is effective the day following final enactment.

424.15 Sec. 29. **EXPEDITED REREGISTRATION FOR LAPSED NURSING LICENSES.**

424.16 (a) Notwithstanding Minnesota Statutes, section 148.231, a nurse who desires to resume  
424.17 the practice of professional or practical nursing at a licensed nursing facility or licensed  
424.18 assisted living facility but whose license to practice nursing has lapsed effective on or after  
424.19 January 1, 2019, may submit an application to the Board of Nursing for reregistration. The  
424.20 application must be submitted and received by the board between March 31, 2022, and  
424.21 March 31, 2023, and must be accompanied with the reregistration fee specified in Minnesota  
424.22 Statutes, section 148.243, subdivision 5. The applicant must include with the application  
424.23 the name and location of the facility where the nurse is or will be employed.

424.24 (b) The board shall issue a current registration if upon a licensure history review, the  
424.25 board determines that at the time the nurse's license lapsed:

424.26 (1) the nurse's license was in good standing; and

424.27 (2) the nurse was not the subject of any pending investigations or disciplinary actions  
424.28 or was not disqualified to practice in any way.

424.29 The board shall waive any other requirements for reregistration including any continuing  
424.30 education requirements.

424.31 (c) The registration issued under this section shall remain valid until the nurse's next  
424.32 registration period. If the nurse desires to continue to practice after that date, the nurse must  
425.1 meet the reregistration requirements under Minnesota Statutes, section 148.231, including  
425.2 any penalty fees required.

425.3 **EFFECTIVE DATE.** This section is effective the day following final enactment.

425.4 Sec. 30. **REPEALER.**

425.5 Minnesota Statutes 2020, section 147.02, subdivision 2a, is repealed.

425.6 **EFFECTIVE DATE.** This section is effective the day following final enactment.