

Questionnaire B – Scope of Practice

Proposal Summary/ Overview

To be completed by proposal sponsor. (500 Word Count Limit for this page)

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Is this proposal regarding:

- New or increased regulation of an existing profession/occupation? If so, complete this form, Questionnaire A.
- Increased scope of practice or decreased regulation of an existing profession? If so, complete Questionnaire B.
- Any other change to regulation or scope of practice? If so, please contact the Committee Administrator to discuss how to proceed.

1) State the profession/occupation that is the subject of the proposal.

FUNERAL CARE SERVICE (MORTUARY SCIENCE)

2) Briefly describe the proposed change.

TO ALLOW FOR NON-LICENSED, FULL-TIME REMOVAL CARE SPECIALISTS

3) If the proposal has been introduced, provide the bill number and names of House and Senate sponsors. If the proposal has not been introduced, indicate whether legislative sponsors have been identified. If the bill has been proposed in previous sessions, please list previous bill numbers and years of introduction.

SF 1847 KORAN

HF 1888 HUOT

Questionnaire B: Change in scope of practice or reduced regulation of a health-related profession (adapted from Mn Stat 214.002 subd 2 and MDH Scope of Practice Tools)

This questionnaire is intended to assist the House Health Finance and Policy Committee in deciding which legislative proposals for change in scope of practice or reduced regulation of health professions should receive a hearing and advance through the legislative process. It is also intended to alert the public to these proposals and to narrow the issues for hearing.

This form must be completed by the sponsor of the legislative proposal. The completed form will be posted on the committee's public web page. At any time before the bill is heard in committee, opponents may respond in writing with concerns, questions, or opposition to the information stated and these documents will also be posted. The Chair may request that the sponsor respond in writing to any concerns raised before a hearing will be scheduled.

A response is not required for questions that do not pertain to the profession/occupation (indicate "not applicable"). Please be concise. Refer to supporting evidence and provide citation to the source of the information where appropriate.

While it is often impossible to reach complete agreement with all interested parties, sponsors are advised to try to understand and to address the concerns of any opponents before submitting the form.

1) Who does the proposal impact?

- a. Define the occupations, practices, or practitioners who are the subject of this proposal.

FUNERAL CARE SERVICE
FUNERAL DIRECTORS
MEDICAL EXAMINERS

- b. List any associations or other groups representing the occupation seeking regulation and the approximate number of members of each in Minnesota

MFDA M.J. FUNERAL DIRECTORS ASSOCIATION
APPROX 400 FIRMS 1,000 MEMBERS

- c. Describe the work settings, and conditions for practitioners of the occupation, including any special geographic areas or populations frequently served.

DEATH CARE TRANSFER OF DECEASED FROM PLACE OF
DEATH OR FACILITY TO FUNERAL HOMES, CREMATORIES, MEDICAL
EXAMINERS OR HEALTH FACILITIES IN MINNESOTA

- d. Describe the work duties or functions typically performed by members of this occupational group and whether they are the same or similar to those performed by any other occupational groups.

TRANSFER AND CARE OF DECEASED PEOPLE IN
MINNESOTA

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- e. Discuss the fiscal impact.

2) Specialized training, education, or experience ("preparation") required to engage in the occupation

- a. What preparation is required to engage in the occupation? How have current practitioners acquired that preparation?

MORTUARY LICENSE OR WORK EXPERIENCE & TRAINING IN THE
FIELD OF FUNERAL SERVICE

- b. Would the proposed scope change or reduction in regulation change the way practitioners become prepared? If so, why and how? Include any change in the cost of entry to the occupation. Who would bear the increase or benefit from reduction in cost of entry? Are current practitioners required to provide evidence of preparation or pass an examination? How, if at all, would this change under the proposal?

HELP IN SOLVING WORKER SHORTAGE ISSUES IN FUNERAL
SERVICE

- c. Is there an existing model of this change being implemented in another state? Please list state, originating bill and year of passage?

OHIO

3) Supervision of practitioners

- a. How are practitioners of the occupation currently supervised, including any supervision within a regulated institution or by a regulated health professional? How would the proposal change the provision of supervision?

CURRENTLY SUPERVISED BY THE MN DEPARTMENT OF HEALTH

- b. If regulatory entity currently has authority over the occupation, what is the scope of authority of the entity? (For example, does it have authority to develop rules, determine standards for education and training, assess practitioners' competence levels?) How does the proposal change the duties or scope of authority of the regulatory entity? Has the proposal been discussed with the current regulatory authority? If so, please list participants and date.

MN DEPARTMENT OF HEALTH IS ASSOCIATED WITH THE MORTUARY
SCIENCE DEPARTMENT OF THE UNIVERSITY OF MN INFLUENCE
RULES & REGULATIONS OF THE FUNERAL INDUSTRY

- c. Do provisions exist to ensure that practitioners maintain competency? Under the proposal, how would competency be ensured?

OBTAIN A CERTIFICATE OF AUTHORIZATION FROM MN DEPARTMENT
OF COMMERCE

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- 4) Level of regulation (See Mn Stat 214.001, subd. 2, declaring that "no regulations shall be imposed upon any occupation unless required for the safety and wellbeing of the citizens of the state." The harm must be "recognizable, and not remote." Ibid.)

- a. Describe how the safety and wellbeing of Minnesotans can be protected under the expanded scope or reduction in regulation.

WE ARE AN AT NEED SERVICE THE PACE WHO CAN US WILL BE THE SAME AND DECIDE IF THEY WANT OUR SERVICES FURTHER HOMES, MEDICAL EXAMINERS, TISSUE DONATION & HOSPITALS ARE STILL

- b. Can existing civil or criminal laws or procedures be used to prevent or remedy any harm to the public?

I PROPOSE REQUIRING A \$2 MILLION DONOR LIABILITY POLICY

5) Implications for Health Care Access, Cost, Quality, and Transformation

- a. Describe how the proposal will affect the availability, accessibility, cost, delivery, and quality of health care, including the impact on unmet health care needs and underserved populations. How does the proposal contribute to meeting these needs?

BY ALLOWING MORE PRACTICE TO SERVE A VASTLY UNDERSTAFFED INDUSTRY

- b. Describe the expected impact of the proposal on the supply of practitioners and on the cost of services or goods provided by the occupation. If possible, include the geographic availability of proposed providers/services. Cite any sources used.

COSTS OF SERVICES SHOULD GO DOWN IMMEDIATELY FOR BODY TRANSFER FIRMS

- c. Does the proposal change how and by whom the services are compensated? What costs and what savings would accrue to patients, insurers, providers, and employers?

FURTHER HOMES COULD TRAIN ADDITIONAL STAFF AND NOT HAVE TO OUTSOURCE A MAJORITY OF CALLS IF THEY SO DESIRE

- d. Describe any impact of the proposal on an evolving health care delivery and payment system (eg collaborative practice, innovations in technology, ensuring cultural competency, value based payments)?

UNKNOWN TO ME

- e. What is the expected regulatory cost or savings to state government? How are these amounts accounted for under the proposal? Is there an up-to-date fiscal note for the proposal?

REMOVE CARE STANDARDS SHOULD BE REQUIRED TO PAY AN ANNUAL FEE TO BE REGISTERED WITH THE STATE OF MN

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6) Evaluation/Reports

Describe any plans to evaluate and report on the impact of the proposal if it becomes law, including focus and timeline. List the evaluating agency and frequency of reviews.

MFDA

COUNTY MEDICAL EXAMINERS OFFICES

ANNUAL OR SEMI ANNUAL REVIEWS

7) Support for and opposition to the proposal

- a. What organizations are sponsoring the proposal? How many members do these organizations represent in Minnesota?

MFDA SHOWS 59% SUPPORT FOR AVOIDING NON-LICENSED

PERSONNEL TO DO REMAINS IN THEIR MOST RECENT SURVEY THROUGHOUT

- b. List organizations, including professional, regulatory boards, consumer advocacy groups, and others, who support the proposal.

UOPM MODERATE
SCIENCE

FEDERAL HOUSES & CUSTOMERS OR MORE

I HAVE A LIST OF SUPPORTERS

- c. List any organizations, including professional, regulatory boards, consumer advocacy groups, and others, who have indicated concerns/opposition to the proposal or who are likely to have concerns/opposition. Explain the concerns/opposition of each, as the sponsor understands it.

MINN-DEPT OF HEALTH - REGULATORY CONCERNS LOSS OF POWER
MINN-DEPT OF HEALTH - WORRIES OVER LICENSING INTEGRITY & DILUTION
METRO FIRST CARE - LOSS OF THEIR MONOPOLY CONTROL & PRICING POWER

- d. What actions has the sponsor taken to minimize or resolve disagreement with those opposing or likely to oppose the proposal?

I AM WILLING TO SIT DOWN WITH ANY COUNTER
PROPOSAL

I CAN NOT PERSUADE THIS ENOUGH.

THE SAME FEDERAL HOUSES AND MEDICAL EXAMINERS
OFFICES WILL STILL BE IN CONTROL OF WHO
THEY USE FOR DEATH CASE SERVICES.

WE ARE AT NEED. WE DO NOT KNOW WHERE TO
GO UNLESS SOMEONE REQUESTS OUR SERVICES

THANKS

