

House Research Act Summary

CHAPTER: 43

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Overview

This act modifies provisions related to the Department of Health (MDH).

Section

- 1** **Minnesota responds medical reserve corps.** Amends § 13.381 by adding subdivision 14a. Adds a cross-reference related to classification of data.
- 2** **Dispute resolution by commissioner.** Amends § 62Q.106. Requires the commissioner, when investigating a vulnerable adult complaint against a health maintenance organization, to interview at least one family member of the complainant. Provides that if the complainant does not want family members interviewed, then this will be included in the file.
- 3** **Loan forgiveness.** Amends § 144.1501, subd. 4. Requires loan forgiveness participants to provide MDH with confirmation, rather than an affidavit, that they meet practice requirements of the program.
- 4** **Radon awareness act.** Adds § 144.496. Titles this section the “Minnesota Radon Awareness Act.” Defines terms for purposes of this section. Requires certain radon-related information be provided by a seller to a buyer as part of certain real estate transactions, including a radon warning statement, which is provided. Establishes liability for a seller who fails to make a radon disclosure but is aware of material facts pertaining to radon in the home. Provides that this section is effective January 1, 2014, and applies to real estate transactions executed on or after that date.

Section

- 5 Supervised living facility provider; tuberculosis prevention and control.** Amends § 144.50, subd. 8. Requires supervised living facility providers to establish and maintain a TB infection control program consistent with the CDC guidelines. Provides that the program must cover all employees, contractors, students, and volunteers. Requires MDH to provide technical assistance in implementing the guidelines. Requires written compliance with this provision.
- 6 Standards for licensure.** Amends § 144.55, subd. 3. Requires outpatient surgical centers to establish and maintain a TB infection control program consistent with the CDC guidelines. Provides that the program must cover all employees, contractors, students and volunteers. Requires the department of health to provide technical assistance in implementing the guidelines. Requires written compliance with this provision.
- 7 Boarding care home provider; tuberculosis prevention and control.** Amends § 144.56 by adding subd. 2c. Requires boarding care home providers to establish and maintain a TB infection control program consistent with the CDC guidelines. Provides that the program must cover all employees, contractors, students and volunteers. Requires MDH to provide technical assistance in implementing the guidelines. Requires written compliance with this provision.
- 8 Surgical events.** Amends § 144.7065, subd. 2. Modifies adverse events reporting requirements for hospitals by including certain outcomes for other invasive procedures, in addition to surgery.
- 9 Product or device events.** Amends § 144.7065, subd. 3. Modifies adverse events reporting requirements for hospitals by referring to serious injury rather than disability.
- 10 Patient protection events.** Amends § 144.7065, subd. 4. Modifies adverse events reporting requirements for hospitals by requiring reporting of discharge to the wrong person of any patient without decision-making capacity; referring to serious injury rather than disability; and requiring reporting of any patient causing self-harm that results in serious injury or death.
- 11 Care management events.** Amends § 144.7065, subd. 5. Modifies adverse events reporting requirements for hospitals by referring to serious injury rather than disability; referring to reasons for such reportable injury more broadly; moving a reportable event from another category; and adding reporting for the following:
- ▶ irretrievable loss of an irreplaceable biological specimen; and
 - ▶ death or serious injury resulting from failure to follow-up on lab, pathology or radiology results.
- 12 Environmental events.** Amends § 144.7065, subd. 6. Modifies adverse events reporting requirements for hospitals by referring to serious injury rather than disability and moves reportable falls to the care management category.

Section

- 13 Potential criminal events.** Amends § 144.7065, subd. 7. Modifies adverse events reporting requirements for hospitals by referring to serious injury rather than significant, consistent with elsewhere in the section.
- 14 Radiological events.** Amends § 144.7065, by adding subd. 7a. Modifies adverse events reporting requirements for hospitals by adding reporting for death or serious injury associated with a metallic object in an MRI area.
- 15 Nursing homes; tuberculosis prevention and control.** Amends § 144A.04, by adding subd. 3b. Requires nursing home providers to establish and maintain a TB infection control program consistent with the CDC guidelines. Provides that the program must cover all employees, contractors, students, and volunteers. Requires MDH to provide technical assistance in implementing the guidelines. Requires written compliance with this provision.
- 16 Home care providers; tuberculosis prevention and control.** Amends § 144A.45, by adding subd. 6. Requires home care providers to establish and maintain a TB infection control program consistent with the CDC guidelines. Provides that the program must cover all employees, contractors, students, and volunteers. Requires MDH to provide technical assistance in implementing the guidelines. Requires written compliance with this provision.
- 17 Complaints.** Amends § 144A.53, subd. 2. Requires investigators with the Office of Health Facilities Complaints to interview family members of vulnerable adults and requires that complainants be given a copy of the public report upon completion of the investigation.
- 18 Hospice providers; tuberculosis prevention and control.** Amends § 144A.752, by adding subd. 5. Requires hospice providers to establish and maintain a TB infection control program consistent with the CDC guidelines. Provides that the program must cover all employees, contractors, students, and volunteers. Requires MDH to provide technical assistance in implementing the guidelines. Requires written compliance with this provision.
- 19 Uniform consumer information guide.** Amends § 144D.08. Exempts housing with services establishments that serve the homeless from providing certain consumer information.
- 20 Grant award; designation; payments under grant.** Amends § 145.93, subd. 3. Changes the grant period between applications for the poison information center from every other year to every five years.
- 21 Minnesota Responds Medical Reserve Corp; liability coverage.** Amends § 145A.04, by adding subd. 6d. Modifies the Minnesota Responds Medical Reserve Corp with regard to liability coverage for volunteers by deeming volunteers as employees of the city or county during requested training.
- 22 Commissioner requests for health volunteers.** Amends § 145A.06, subd. 7. Modifies the Minnesota Responds Medical Reserve Corp with regard to liability coverage for volunteers by deeming volunteers as employees of the state during requested training.
- 23 Criminal background studies.** Adds § 145A.061. Permits the commissioner of health to

Section

conduct criminal background checks on persons who register to volunteer in the Minnesota Responds Medical Reserve Corp. Requires applicants to provide written consent authorizing MDH to obtain criminal background information. Permits the commissioner to deny an applicant the opportunity to serve based on conviction of listed crimes and requires that the applicant has an opportunity to challenge accuracy of the report. Defines “conviction” for purposes of this section. Classifies data used in conducting the background check as private data on individuals under Minnesota Statutes, chapter 13. Permits the commissioner to deny a volunteer membership on a mobile medical or behavioral health team for any reason. Exempts the commissioner from the requirements of the Criminal Offenders Rehabilitation Act in selecting volunteers.

- 24 Requirements.** Amends § 146B.02, subd. 2. Clarifies license requirement for body art establishments to include “mobile or fixed-site” establishments.
- 25 Temporary events permit.** Amends § 146B.02, subd. 8. Modifies process requirements for temporary event permits for body art establishment by allowing the commissioner to process applications received less than 14 days prior to the event if there is time for required inspections.
- 26 Penalty.** Amends § 146B.03, by adding subd. 11. Establishes a gross misdemeanor for anyone who operates without a license as required in Minnesota Statutes, § 146B.03, subdivision 1.
- 27 Aftercare.** Amends § 146B.07, subd. 5. Modifies requirements for information that must be provided to clients for aftercare instruction.
- 28 Occupational therapy practitioner.** Amends § 148.6402, by adding subd. 16a. Defines the term “occupational therapy practitioner” to include a licensed occupational therapist or an occupation therapy assistant.
- 29 Physical agent modalities.** Amends § 148.6440. Modifies the occupation therapy physical agent modalities provisions by replacing occupational therapist with the term “occupational therapy practitioner,” which includes occupational therapy assistants.
- 30 Prescribing and filing.** Amends § 151.37, subd. 2. Provides that nothing in this section, which regulates who may prescribe legend drugs, prohibits the commissioner of health, or a designated person, so long as a licensed practitioner, from prescribing legend drugs for field-delivered therapies in treating communicable diseases.
- 31 Radon disclosure requirements.** Adds § 513.16. Adds a cross-reference to the radon disclosure requirements in Minnesota Statutes, § 144.496.
- 32 Repealer.** Repeals Minnesota Statutes, §§ 144.1487; 144.1488; 144.1489; 144.1490; and 144.1491 (loan repayment program for health professionals) and Minnesota Statutes, §§ 146B.03, subd. 10 (body art regulation transition period) ; 325F.814 (body piercing) and 609.2246 (tattoos for minors, criminal code provision).