

# HOUSE RESEARCH

## Bill Summary

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### Section

#### Article 1: Department of Health Licensing

##### Overview

This article modifies licensure provisions for speech-language pathologists, audiologists, and occupational therapy professionals, and establishes regulations for speech-language pathology assistants.

- 1 **Scope.** Amends § 148.511. Adds teaching paraprofessionals to the list of persons exempt from the provisions licensing speech-language pathologists and audiologists.
- 2 **Continuing education.** Amends § 148.512, subd. 9. Makes a technical change.
- 3 **Practice of audiology.** Amends § 148.512, subd. 12. Modifies the definition of "practice of audiology."
- 4 **Practice of speech-language pathology.** Amends § 148.512, subd. 13. Modifies the definition of "practice of speech-language pathology."
- 5 **Speech-language pathology assistant.** Amends § 148.512, by adding subd. 17a. Defines "speech-language pathology assistant."
- 6 **Supervision.** Amends § 148.512, subd. 19. Modifies the definition of "supervision" by adding a speech-language pathology assistant to the list of persons who may be supervised.
- 7 **Unlicensed practice prohibited.** Amends § 148.513, subd. 1. Adds language referring to speech-language pathology assistants.
- 8 **Protected titles and restrictions on use.** Amends § 148.513, subd. 2. Prohibits speech-language pathology assistants from practicing or representing themselves as licensed. Makes

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a technical change.

- 9** **Application.** Amends § 148.5161, subd. 1. Requires clinical fellowship and doctoral externship candidates in speech-language pathology or audiology to be licensed with a clinical fellowship or doctoral externship license.
- 10** **Doctoral externship licensure.** Amends § 148.5161, subd. 4. Provides that doctoral candidates in audiology completing their final externship are eligible to receive a doctoral externship license.
- 11** **Title used.** Amends § 148.5161, subd. 6. Requires a licensee with a doctoral externship to be identified by a designation indicating doctoral externship status.
- 12** **Temporary licensure.** Amends § 148.5175. Changes cross references to temporary licensure provisions for speech-language pathologists and audiologists.
- 13** **Licensure following lapse of licensure status.** Amends § 148.518. Adds an option to restore licensure status for a speech-language pathology or audiology applicant whose license has lapsed. Applicants are required to apply for renewal and submit documentation of completion of 160 hours of supervised practice. Applicants seeking supervised practice must apply for temporary licensure.
- 14** **Speech-language pathology assistants.** Adds § 148.5192.

**Subd. 1. Delegation requirements.** Permits licensed speech-language professionals to delegate duties to assistants who have fulfilled certain requirements.

**Subd. 2. Delegated duties; prohibitions.** Lists duties that can be delegated to assistants, and duties speech-language pathology assistants are prohibited from performing. Lists documents a speech-language pathology assistant is required to sign or initial and the documents an assistant is prohibited from signing.

**Subd. 3. Supervision requirements.** Specifies the requirements a supervising speech-language pathologist must meet in order to supervise a certified speech-language pathology assistant. Specifies the supervision schedule for speech-language pathology assistants that must be met. Defines "direct supervision." Requires supervising speech-language pathologists to be available to communicate with a speech-language pathology assistant at any time the assistant is in direct contact with a client. Requires supervising speech-language pathologists to document activities performed by their assistant. Lists the documentation that must be included. Requires supervising speech-language pathologists to review and co-sign all informal treatment notes signed or initialed by the assistant. Allows full-time speech-language pathologists to supervise no more than one full-time assistant, or the equivalent of one full-time assistant.

**Subd. 4. Notification.** Requires any agency that intends to utilize the services of a certified speech-language pathology assistant to provide written notification to the client, or the client's parent or guardian before a certified speech-language pathology assistant performs any duties.

- 15** **Number of contact hours required.** Amends § 148.5193, subd. 1. Modifies continuing education requirements for speech-language pathologists and audiologists by setting a time limit by which professionals must register their continuing education, prorating requirements for licenses issued for less than two years, and prohibiting continuing education hours from being carried over into the next two-year period.

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- 16**      **Verification of attendance.** Amends § 148.5193, subd. 6a. Makes a technical change.
- 17**      **Grounds for disciplinary action by the commissioner.** Amends § 148.5195, subd. 3. Adds failure to properly supervise a speech-language pathology assistant to the list of grounds for discipline.
- 18**      **Duties.** Amends § 148.5196, subd. 3. Requires the speech-language pathology and audiology advisory council to advise the commissioner regarding delegation to and training of speech-language pathology assistants.
- 19**      **Limited license.** Amends § 148.6402, by adding subd. 22a. Adds a definition for "limited license."
- 20**      **Exempt persons.** Amends § 148.6403, subd. 5. Clarifies exemptions from restrictions on use of titles for occupational therapy professionals performing limited professional services while visiting the state.
- 21**      **Licensure application requirements: procedures and qualifications.** Amends § 148.6405. Makes a terminology change.
- 22**      **Change of address or employment .** Amends § 148.6428. Requires licensed occupational therapy practitioners to inform the commissioner when the licensee changes employers.
- 23**      **General requirements.** Amends § 148.6443, subd. 1. Modifies the accounting for continuing education hours for occupational therapy practitioners.
- 24**      **Reporting continuing education contact hours.** Amends § 148.6443, subd. 5. Changes the deadline for submission of contact hours from at the time of licensure renewal to one month following licensure expiration for occupational therapy practitioners.
- 25**      **Protections.** Amends § 192.502

**Subd. 2. Renewal of professional licenses or certifications.** Provides that renewal of a professional credential by a professional ordered to active military duty is governed by sections 326.55 and 326.56.

- 26**      **Renewal of professional licenses or certifications.** Provides that renewal of a professional credential by a professional ordered to active military duty is governed by sections 326.55 and 326.56.

## Article 2: Physicians' Assistants

### Overview

This article modifies registration provisions for physicians' assistants.

- 1 1**      **Qualifications for registration.** Amends § 147A.02. Removes language limiting the board to grant registration as a physician assistant to applicants who have a physician assistant agreement. Also removes language referring to practice setting descriptions. Makes technical changes.
- 2**      **Delegation.** Amends § 147A.09, subd. 2. Expands the list of patient services a physician's assistant may provide to include radiography. Corrects a statutory reference.
- 3**      **Physician and physician assistant agreement.** Amends § 147A.20. Requires the agreement to be completed and the practice setting description submitted to the board before providing medical care as a physician assistant.
- 4**      **Exception to the registration requirement .** Requires the Board of Medical Practice to register an individual as a physician's assistant if the individual meets certain criteria. The

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board must accept applications under this section until January 1, 2005.

**5** **Provisional registration.** Provides that an individual registered under section 4 must be given full registration after two years under certain conditions.

**6** **Effective date.** Sections 4 and 5 are effective the day after enactment.

### **Article 3: Acupuncturists**

**1 1** **NCCAOM certification.** Amends § 147B.01 by adding subd. 16a. Adds a definition for "NCCAOM certification."

**2 2** **Scope of practice.** Amends § 147B.06, subd. 4. Adds Oriental massage to acupuncturists' scope of practice.

**3 3** **Repealer.** Repeals § 147B.02, subd. 5. Repeals obsolete language describing a licensure during a transition period.

### **Article 4: Nurse Licensure**

## **Overview**

This article modifies licensure provisions for registered nurses and advanced practice registered nurses.

**1 1** **Licensure by examination.** Amends § 148.211, subd. 1. Clarifies requirements for licensure by examination by updating and removing obsolete language and adding new requirements. Applicants must:

- demonstrate that the applicant has not engaged in conduct warranting disciplinary action;
- complete an approved nursing education program; and
- pass an examination.

Graduates from Canadian nursing education programs must show proof of licensure in Canada or the U.S. Graduates from other countries must:

- submit verification of graduation from a nursing education program approved by the board or agent of the board;
- complete coursework required by the board; and
- pass an examination to test the applicant's English language skills under certain circumstances.

**2** **Issuance.** Amends § 148.212, subd. 1. Makes conforming changes and clarifies requirements for a temporary permit to practice nursing for applicants who are graduates of a foreign nursing education program.

**3** **Certification of advanced practice registered nurses.** Amends § 148.284. Prohibits

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advanced practice registered nurses from practicing as such without current certification or without notifying the board of current certification. Charges a fee for violations and provides for calculating the fee.

- 4 **Appropriation.** Appropriates \$24,000 from the special revenue fund for administration of section 3, and identifies a base from which future appropriations may be calculated.

### **Article 5: Board of Behavioral Health and Therapy**

## **Overview**

This article modifies licensure provisions for the Board of Behavioral Health and Therapy.

- 1 1 **Duties of the board.** Amends § 148B.52. Withdraws the board's authority to establish procedures to assess whether licensees comply with the board's rules and for treatment of impaired practitioners. Makes conforming changes.
- 2 **General requirements.** Amends § 148B.53, subd. 1. Modifies the requirement that applicants for licensure submit a supervision plan by allowing applicants to submit proof of supervised practice. Withdraws provisions requiring applicants to provide evidence that applicants will comply with professional conduct rules and that applicants declare areas of professional competencies.
- 3 **Fee.** Amends § 148B.53, subd. 3. Establishes applicant fees.
- 4 **Continuing education.** Amends § 148B.54, subd. 2. Modifies continuing education requirements by making a technical change and capping the number of credit hours required.
- 5 **Licenses; transition period.** Amends § 148B.55. Makes a technical change.
- 6 **Grounds for disciplinary action.** Amends § 148B.59. Adds engaging in sexual conduct with a patient to the list of grounds on which the board may discipline a licensee. Corrects a terminology error. Permits the board to refer licensees to the health professions services program.
- 7 **Professional cooperation; applicant or licensee.** Adds § 148B.5915. Requires applicants or licensees to comply with an investigation by the board in a specified manner. The board may access any client records of an applicant or licensee; the applicant or licensee may redact private information as needed. Data obtained through this section are considered private under statutes regulating government data practices.
- 8 **Immunity.** Adds § 148B.5916.

**Subd. 1. Reporting.** Gives immunity to those reporting violations of the Board of Behavioral Health statutes and provides that reports are classified under Minnesota statutes regulating licensing data.

**Subd. 2. Investigation.** Gives immunity to board members and certain associates from civil liability and criminal prosecution for actions relating to duties under the Board of Behavioral Health statutes.

- 9 **Transition plan.** Requires the commissioner of Health in consultation with others, to develop a plan to transfer regulatory authority for alcohol and drug counselors and unlicensed mental health practitioners from the Department of Health to the Board of Behavioral Health and Therapy.

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**10**      **Effective date.** Provides that sections 1 to 8 are effective the day following enactment.

### **Article 6: Alcohol and Drug Counselors**

#### **Overview**

This article modifies alcohol and drug counselor licensure provisions.

- 1 1**      **Temporary permit requirements.** Amends § 148C.04, subd. 6. Adds an option for the commissioner to grant a temporary permit if the applicant follows the requirements to renew a lapsed license.
- 2**      **Continuing education requirements for licensee's first four years.** Amends § 148C.075, subd. 2. Clarifies cultural diversity continuing education requirements.
- 3**      **Course work.** Amends § 148C.075 by adding a subd. Clarifies the continuing education credits a licensee may receive from teaching course work.
- 4**      **Transition period for hospital and city, county, and state agency alcohol and drug counselors.** Amends § 148C.11, subd. 6. Permits alcohol and drug counselors employed by school districts to be granted licensure until January 1, 2006, if they fulfill certain requirements. Currently, alcohol and drug counselors employed by a hospital, city, county, or state agency, are granted the same status: the requirements for licensure until January 1, 2006, are less stringent than requirements for licensure after that time.
- 5**      **School district alcohol and drug counselors.** Amends § 148C.11 by adding a subdivision. Requires school districts employing alcohol and drug counselors to employ only licensed alcohol and drug counselors after January 1, 2006.
- 6**      **Biennial renewal fee.** Amends § 148C.12, subd. 2. Makes a technical change.
- 7**      **Temporary permit fee.** Amends § 148C.12, subd. 3. Requires temporary permit fees to be prorated when the first expiration date occurs in less than one year.

### **Article 7: Board of Dentistry**

#### **Overview**

This article makes technical and substantive changes to the practice act of dentists, dental hygienists, and dental assistants.

- 1 1**      **Licensure.** Amends § 150A.06
- Subd. 1. Dentists.** Modifies requirements for licensure as a dentist.
- Subd. 1a. Faculty dentists.** Modifies requirements for faculty licensure.
- Subd. 1b. Resident dentists.** Makes a technical change.
- Subd. 1c. Specialty dentists.** Deletes references to categories of specialty licensure and substitutes categories recognized by the American Dental Association. Applicants for specialty licensure must fulfill certain requirements and are limited to practicing in the dentist's designated specialty area. All specialty dentists applying for licensure who

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intend to limit their practices must apply for a specialty license, unless the dentist was licensed before a certain date.

**Subd. 2. Dental hygienists.** Modifies requirements for licensure as a dental hygienist.

**Subd. 2a. Registered dental assistants.** Modifies requirements for registration as a registered dental assistant.

**Subd. 2b. Examination.** Makes technical changes.

**Subd. 2c. Guest license or registration.** Requires guest practitioners to limit practice to a public health setting, allows guest practitioners to practice at multiple locations in Minnesota, and makes other technical changes.

**Subd. 2d. Volunteer and retired dentists, dental hygienists, and registered dental assistants continuing education and professional development waiver.** Makes technical changes.

**Subd. 3. Waiver of examination.** Clarifies and modifies regulations allowing the board to waive the required examination for dentists.

**Subd. 4. Licensure by credentials.** Modifies requirements for licensure by credential.

**Subd. 4a. Appeal of denial of application.** Makes conforming changes.

**Subd. 5. Fraud in securing licenses or registration.** Makes conforming changes.

**Subd. 6. Display of name and certifications.** Modifies credential and name display requirements to require offices in which dentistry is practiced to display the name of each current dentist practicing, instead of displaying the name of each credentialed dental professional.

**Subd. 7. Additional remedies for licensure and registration.** Gives the board discretion to issue additional remedies for deficiencies found for initial or renewal of credentials.

**Subd. 8. Registration by credentials.** Outlines requirements for registration of dental assistants by credential.

**2 Grounds.** Amends § 150A.08, subd. 1. Makes a technical change.

**3 Duplicate certificates.** Amends § 150A.09, subd. 4. Makes a technical change.

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### **Article 8: Podiatrists Medical Licensing Modifications**

#### **Overview**

This article modifies provisions regarding licensure of podiatrists.

- 1 1 Podiatric medicine.** Amends § 153.01, subd. 2. Clarifies the definition of "podiatric medicine" by deleting provisions excluding prescribing drugs or medication outside the scope of practice. Podiatric medicine includes performing medical history and physical exams for hospital admission for podiatrists who have completed a residency.
- 2 License requirements.** Amends § 153.16, subd. 1. Requires applicants for podiatric medicine licensure to have received a passing score on each part of the national board examinations. The passing score is as defined by the National Board of Podiatric Medical Examiners. Under current law, the board determines by rule what constitutes a passing score on the examination. This section also specifies the type of knowledge an applicant must demonstrate to the board to show that the applicant meets the requirements of this section.
- 3 Applicants licensed in another state.** Amends § 153.16, subd. 2. Requires applicants to present evidence to the board indicating the current status of a license to practice podiatric medicine issued by the first state of licensure and all other states and countries in which the individual has held a license. Makes clarifying changes. Specifies continuing education requirements an applicant must meet if the applicant holds an active license in another state. Specifies continuing education requirements an applicant must meet if the applicant holds an inactive license in another state.
- 4 Grounds listed.** Amends § 153.19, subd. 1. Expands the list of prohibited conduct to include failure to supervise graduate trainees or undergraduate students.
- 5 Insurers.** Amends § 153.24, subd. 4. Specifies the dates upon which insurers providing professional liability insurance to podiatrists must submit to the board a report concerning the podiatrists against whom podiatric medical malpractice settlements or awards have been made to the plaintiff.
- 6 Reporting.** Amends § 153.25, subd. 1. Clarifies that reports are confidential data on individuals and are privileged communications.
- 7 Repealer.** Repeals Minnesota Rules, parts 6900.0020 (podiatrist licensure), subparts 3 (examination), 3a (state clinical examination), 9 (personal appearance), and 10 (license in other states); and 6900.0400 (discipline).

### **Article 9: Application for Designation of an Essential Community Provider**

- 1 1 Application.** Amends § 62Q.19. Modifies list of those eligible to apply for Essential Community Provider status and changes the application due date to June 30, 2004.
- 2 Effective date.** Section 1 is effective the day following enactment.



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### Article 10: Education and Precautions Regarding Vaccines

#### Overview

Modifies requirements for the commissioners of Education and Health in regulating vaccinations.

- 1 1 **Disclosures required.** Amends § 121A.15, subd. 3a. Requires the commissioner of Education to
  - continue the specified educational campaign on vaccine safety;
  - encourage providers to offer vaccine information in specified circumstances;
  - encourage providers to use specified vaccination precautions, contraindication materials, the vaccine adverse events reporting system and thimerosal-free vaccines when available; and
  - continue to develop and make available specified patient education materials in consultation with certain groups.
- 2 **Modifications to schedule.** Amends § 121A.15, subd. 12. Adds the names of six organizations to the list of entities with which the commissioner of Health must consult in order to modify the immunization schedule.

### Article 11

#### Overview

This bill modifies the Emergency Health Powers Act and provides for a new sunset date.

- 1 1 **Facility.** Amends § 12.03, subd. 4. Modifies the definition of "facility" to include a licensed health care facility when other alternatives are not feasible.
- 2 **Information given.** Amends § 12.39, subd. 2. Requires health care providers to always notify individuals of rights to refuse certain services and of the consequences of refusal before performing certain health care services.
- 3 **Definitions.** Adds § 12.60.

**Subd. 1. Applicability.** Describes the scope of the definitions.

**Subd. 2. Commissioner.** Defines "commissioner" as the Commissioner of Health.

**Subd. 3. Director.** Defines "director" as the director of the Division of Homeland Security and Emergency Management.

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**Subd. 4. Emergency plans.** Adds a definition for "emergency plans."

**Subd. 5. Local government.** Adds a definition for "local government."

**Subd. 6. Public health emergency responder or responder .** Adds a definition for "public health emergency responder" or "responder."

**Subd. 7. State.** Adds a definition for "state."

- 4 Responder liability limitation; hospital capacity exceeded.** Adds § 12.63. Permits the governor to issue an executive order allowing care to be given in temporary facilities, when the need exceeds regional hospital system capacity. A paid or unpaid responder, acting in accordance with emergency plans, is not liable for civil damages while providing care in temporary facilities, under specified conditions. A definition for "regional hospital system" is given.
- 5 Emergency vaccine administration and legend drug dispensing.** Adds § 12.64. Permits the commissioner to authorize any person, including certain credentialed health professionals, to administer vaccinations or dispense legend drugs during declared emergencies. The commissioner must state in writing the categories of persons authorized, and the duration of the authorization and may require additional training and supervision. The commissioner may extend the authorization as needed.
- 6 Data dissemination.** Amends § 13.37, subd. 3. Permits government entities to disseminate security information under certain circumstances to a person, organization, or government unit when the data will assist in certain situations. Data disclosed to a private entity must not be further disseminated without permission from the sending agency. Nonstate entities must agree not to further disclose the data.
- 7 Definitions.** Amends § 144.419, subd. 1. Makes a technical change.
- 8 Ex parte order for isolation or quarantine.** Amends § 144.4195, subd. 1. Permits peace officers to use all necessary and lawful means, including reasonable force but not deadly force, to enforce a quarantine or isolation order. On request, specified parties must advise the peace officer on measures against disease transmission. Peace officers must act on electronic communication from specified authorities.
- 9 Temporary hold upon commissioner's directive.** Amends § 144.4195, subd. 2. Requires the commissioner of health to initiate the process of applying for an ex parte order authorizing isolation or quarantine at the same time the commissioner issues a directive for temporary isolation or quarantine. Permits peace officers to use all necessary and lawful means to enforce a temporary quarantine or isolation order. On request, specified parties must advise the peace officer on measures against disease transmission. Peace officers must act on electronic communication from the court. The commissioner may direct a health care facility to continue to hold a person subject to the commissioner's isolation or quarantine directive. The facility must take reasonable measures to prevent others from exposure to communicable diseases.
- 10 Court hearing.** Amends § 144.4195, subd. 3. Corrects a statutory reference.
- 11 Judicial procedures and decisions.** Amends § 144.4195, subd. 5. Permits courts to conduct hearings by electronic means to mitigate the risk of transmitting a communicable disease.
- 12 Employee protection.** Adds § 144.4196.

**Subd. 1. Definitions.** (a) Defines "qualifying employee" as an employee who has been

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the subject of isolation or quarantine for a communicable disease. Persons must have complied with restrictions of specified conditions.

(b) Defines "employer" as a person with one or more employees including any governmental entity.

**Subd. 2. Protections.** Prohibits an employer from punishing or discriminating against a qualifying employee. A qualifying employee can bring a civil action against an employer who violates these provisions, and can receive reasonable attorney fees. These provisions are not intended to alter sick compensation terms of the employment relationship.

**Subd. 3. Limitation.** Provides that work absences due to isolation or quarantine longer than 21 days do not qualify under this section.

- 13 **Workers' compensation advisory council report.** Requires the Council on Workers' Compensation to study extending workers' compensation to volunteers in an emergency.
- 14 **Health study.** Requires the Commissioner of Health to prepare a specified plan for the implementation and development of a statewide public health data management system in consultation with local public health representatives, and present the plan by January 15, 2005.
- 15 **Repealer.** Repeals the 2002 sunset provision. Replaces it with technically correct language.
- 16 **Expiration.** Provides for the emergency health powers law to expire August 1, 2008.
- 17 **Effective date.** Effective the day following final enactment.