

supervision of a licensed professional nurse. The permit shall not be renewable; or

(4) The practice of practical nursing by a person licensed as a licensed practical nurse in another jurisdiction and qualified for licensure in the state of Minnesota. Practice under this clause is allowable only under a temporary permit issued by the board which shall be issued by the board pursuant to rules as the board may promulgate, and which shall be valid only for the period between the submission of a proper application for licensure by the person and the date of action upon the application by the board.

Sec. 12. **REPEALER.**

Minnesota Statutes 1980, Section 148.231, Subdivision 2, is repealed.

Sec. 13. **EFFECTIVE DATE.**

This act is effective the day following its final enactment.

Approved May 4, 1981

CHAPTER 95 — H.F.No. 29

An act relating to hospitals; requiring adoption of federal medicare standards for hospital licensing; regulating hospital inspections; providing for licensing of hospitals accredited by the joint commission on hospital accreditation; amending Minnesota Statutes 1980, Sections 144.50, Subdivision 1; and 144.55.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MINNESOTA:

Section 1. Minnesota Statutes 1980, Section 144.50, Subdivision 1, is amended to read:

Subdivision 1. No person, partnership, association, or corporation, nor any state, county, or local governmental units, nor any division, department, board, or agency thereof, shall establish, operate, conduct, or maintain in the state any hospital, sanatorium or other institution for the hospitalization or care of human beings without first obtaining a license therefor in the manner provided by law in sections 144.50 to 144.56.

Sec. 2. Minnesota Statutes 1980, Section 144.55, is amended to read:

144.55 LICENSES; ISSUANCE, SUSPENSION AND REVOCATION BY STATE COMMISSIONER OF HEALTH.

Subdivision 1. **ISSUANCE.** The state commissioner of health is hereby authorized to issue licenses to operate hospitals, sanatoriums or other

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institutions for the hospitalization or care of human beings, which ~~after inspection~~ are found to comply with the provisions of sections 144.50 to 144.56 and any reasonable ~~regulations adopted~~ rules promulgated by the state commissioner of health. All decisions of the ~~state commissioner of health~~ thereunder may be reviewed in the district court in the county in which the institution is located or contemplated.

Subd. 2. DEFINITION. For the purposes of this section, "joint commission" means the joint commission on accreditation of hospitals.

Subd. 3. STANDARDS FOR LICENSURE. Notwithstanding the provisions of Minnesota Statutes, Section 144.56, for the purpose of hospital licensure, the commissioner of health shall use as minimum standards the hospital certification regulations promulgated pursuant to Title XVIII of the Social Security Act, 42 U.S.C., Section 1395, et. seq. The commissioner may use as minimum standards changes in the federal hospital certification regulations promulgated after the effective date of this section if he finds that such changes are reasonably necessary to protect public health and safety. The commissioner shall also promulgate in rules additional minimum standards for new construction.

Subd. 4. ROUTINE INSPECTIONS; PRESUMPTION. Any hospital surveyed and accredited under the standards of the hospital accreditation program of the joint commission that submits to the commissioner within a reasonable time copies of (a) its currently valid accreditation certificate and accreditation letter, together with accompanying recommendations and comments and (b) any further recommendations, progress reports and correspondence directly related to the accreditation is presumed to comply with application requirements of subdivision 1 and the standards requirements of subdivision 3 and no further routine inspections or accreditation information shall be required by the commissioner to determine compliance. Notwithstanding the provisions of sections 144.54 and 144.653, subdivisions 2 and 4, hospitals shall be inspected only as provided in this section. The provisions of section 144.653 relating to the assessment and collection of fines shall not apply to any hospital. The commissioner of health shall annually conduct, with notice, validation inspections of a selected sample of the number of hospitals accredited by the joint commission, not to exceed ten percent of accredited hospitals, for the purpose of determining compliance with the provisions of subdivision 3. If a validation survey discloses a failure to comply with subdivision 3, the provisions of section 144.653 relating to correction orders, reinspections, and notices of noncompliance shall apply. The commissioner shall also conduct any inspection necessary to determine whether hospital construction, addition, or remodeling projects comply with standards for construction promulgated in rules pursuant to subdivision 3. Pursuant to section 144.653, the commissioner shall inspect any hospital that does not have a currently valid hospital accreditation certificate from the joint commission. Nothing in this subdivision shall be

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construed to limit the investigative powers of the office of health facility complaints as established in sections 144A.51 to 144A.54.

Subd. 5. COORDINATION OF INSPECTIONS. Prior to conducting routine inspections of hospitals, a state agency shall notify the commissioner of its intention to inspect. The commissioner shall then determine whether the inspection is necessary in light of any previous inspections conducted by the commissioner, any other state agency, or the joint commission. The commissioner shall notify the agency of his determination and may authorize the agency to conduct the inspection. No state agency may routinely inspect any hospital without the authorization of the commissioner. The commissioner shall coordinate, insofar as is possible, routine inspections conducted by state agencies, so as to minimize the number of inspections to which hospitals are subject.

Subd. 6. SUSPENSION, REVOCATION, AND REFUSAL TO RENEW. The state commissioner of health may refuse to grant, ~~refuse to~~ or renew, or may suspend or revoke, a license on any of the following grounds:

- (1) Violation of any of the provisions of sections 144.50 to 144.56 or the rules, regulations, or standards issued pursuant thereto;
- (2) Permitting, aiding, or abetting the commission of any illegal act in the institution;
- (3) Conduct or practices detrimental to the welfare of the patient; or
- (4) Obtaining, or attempting to obtain a license by ~~fraudulent means~~ fraud or misrepresentation.

Before any license issued thereunder is suspended, or revoked, or its renewal refused, 30 days written notice shall be given the holder thereof of the date set for hearing of the complaint. The holder of the license shall be furnished with a copy of the complaint and be entitled to be represented by legal counsel at the hearing. The notice may be given by the state commissioner of health by certified mail. The commissioner may appoint, in writing, any competent person to preside at the hearing who shall take testimony, administer oaths, issue subpoenas, and compel the attendance of witnesses and transmit the record of the hearing to the commissioner. The decision of the commissioner shall be based on the testimony and records.

Subd. 7. HEARING. Prior to any suspension, revocation or refusal to renew a license, the licensee shall be entitled to notice and a hearing as provided by sections 15.0418 to 15.0426. At each hearing, the commissioner shall have the burden of establishing that a violation described in subdivision 6 has occurred.

If a license is revoked as herein provided, suspended, or not renewed, a new application for license may be considered by the state commissioner of

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~~health if, when, and after~~ the conditions upon which revocation, suspension, or refusal to renew was based have been corrected and evidence of this fact has been satisfactorily furnished. A new license may then be granted after proper inspection has been made and all provisions of sections 144.50 to 144.56 and any rules promulgated thereunder have been complied with and recommendation has been made ~~therefor~~ by the ~~hospital~~ inspector as an agent of the state commissioner of ~~health~~.

Subd. 8. RULES. The commissioner may promulgate rules necessary to implement the provisions of this section, except that the standards described in subdivision 3 shall constitute the sole minimum quality standards for licensure of hospitals.

Subd. 9. EXPIRATION OF PRESENTLY VALID LICENSES. All licenses presently in effect shall remain valid following the effective date of this section and shall expire on the dates specified on the licenses unless suspended or revoked.

Subd. 10. EVALUATION REPORT. On November 15, 1983, the commissioner shall provide the legislature and the governor with a written report evaluating the utilization of the accreditation program, paying particular attention to its effect upon the public health and safety.

Subd. 11. STATE HOSPITALS NOT AFFECTED. Subdivisions 3, 4 and 5 do not apply to state hospitals and other facilities operated under the direction of the commissioner of public welfare.

Sec. 3. EFFECTIVE DATE.

Sections 1 and 2 are effective the day following final enactment.

Approved May 6, 1981

CHAPTER 96 — H.F.No. 171

An act relating to historic sites; changing the classification of the Kensington Runestone historic site; amending Minnesota Statutes 1980, Section 138.56, by adding a subdivision; repealing Minnesota Statutes 1980, Section 138.58, Subdivision 7.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MINNESOTA:

Section 1. Minnesota Statutes 1980, Section 138.56, is amended by adding a subdivision to read:

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