Overview

This bill modifies reporting requirements for health-related licensing boards and eliminates requirements for the gender makeup of the health professionals services program committee and advisory committee. The bill also requires health-related licensing boards, including the EMS Regulatory Board, to participate in either a health professionals services program or contract for an alternative diversion program, for professionals unable to practice with reasonable skill and safety for various reasons.

Section

Amends §§ 147.01, subd. 4; 148.691, subd. 3; 148B.04, subd. 4; and 148B.285, subd. 3. Modifies cross-references in sections on the board of medical practice, board of physical therapy, board of marriage and family therapy, and board of social work, to conform with the deletion of language in section 6.

Reports. Amends § 214.07. Modifies reporting requirements for health-related licensing boards.

Subd. 1. Non-health-related board reports. In a subdivision establishing reporting requirements for licensing boards, removes references to health-related licensing boards and makes this subdivision apply only to non-health-related boards. Reporting requirements for health-related licensing boards are established in a new subdivision 1b.

Subd. 1a. Report requirement for board of medical practice and board of nursing. Strikes a subdivision requiring the boards of medical practice and nursing to report specific information on complaints received regarding obstetrics, gynecology, prenatal care, and delivery, and the boards' responses.

Subd. 1b. Health-related licensing board reports. This new subdivision establishes reporting requirements for health-related licensing boards. Requires the reports to use a common terminology and format and to be submitted to the administrative services unit, rather than the governor and the commissioner of health as in current law. Requires the boards to report on the
number and type of credentials issued or renewed; numbers of complaints received and open at the end of the reporting period; receipts, disbursements, and fees; historical trends; and other information. No longer requires the boards to report information on general board activities, board meetings and hours spent on board activities, information on board members and employees, summaries of proposed and adopted rules, information on examinations and persons examined, specific information on license revocation or suspension, and substantive information on complaints received.

**Subd. 2. Administrative services report.** Strikes language requiring the commissioner of health to biennially provide the legislature and governor with summary reports of information provided in reports of health-related licensing boards. Instead, requires the administrative services unit to provide summary reports to the governor, commissioner of health, chairs of appropriate house and senate committees, and legislative reference library. Specifies the information the report must include. Changes headnote.

**Special requirements for health-related licensing boards.** Amends § 214.10, subd. 8. Removes a requirement that each health-related licensing boards must include in its report to the legislature summaries of each individual case involving possible sexual contact with a patient or client.

**Alternative diversion program.** Adds § 214.28. Allows a health-related licensing board, including the EMS Regulatory Board, to establish performance criteria for and contract for a diversion program for health professionals unable to practice with reasonable skill and safety because of illness, use of alcohol or drugs, or any mental, physical, or psychological condition.

**Participation in diversion program or health professionals services program required.** Adds § 214.29. Requires all health-related licensing boards, including the EMS Regulatory Board, to either participate in the health professionals services program or contract for an alternative diversion program.

**Authority.** Amends § 214.31. In a section allowing health-related licensing boards to jointly conduct a health professionals services program, allows the EMS Regulatory Board to participate in the program.

**Management.** Amends § 214.32, subd. 1. Strikes language that, for the health professionals services program committee and advisory committee, prohibits more than one half plus one members of the committee from being of one gender.