

Minnesota Attorney General: Administrative Rules Proceedings

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Version 3
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Our File No. 1024

RULE REVIEW CHECKLIST

DATE RULE RECEIVED 4-16-84
DATE FOR REVIEW 4-25-84
DATE DUE 4-30-84

Adopted w/a hearing _____
Adopted w/o hearing _____
Temporary rule _____

Approved _____ Disapproved _____ Returned to Agency _____

Resubmitted _____ Due _____
Approved _____ Disapproved _____ Returned to Agency _____

Date filed w/Secretary of State _____ Revisor approved _____ disapproved _____

✓ Rule as Adopted

_____ Rule as Proposed

✓ Order Adopting 4.12.84 Date

✓ Notice of Intent to Solicit Outside Opinion SR. 5.2.83

_____ Order for rulemaking
_____ date of Hearing not submitted

_____ Certificate of Board's Authorizing Resolution not submitted

✓ Notice of rulemaking (notice as mailed is identical to SR)
✓ Sufficiency

✓ Affidavit of Mailing Notice or rulemaking
12.28-30.83 At least 30 days prior to ~~hearing~~/adoption

✓ Mailing list Certificate

✓ Publication in State Register
12.26.83 At least 30/~~20~~ days prior to ~~hearing~~/adoption

N/A Hearing Examiner's Report

_____ Chief Hearing Examiner's Report(s)
_____ Approving H.E.'s Report
_____ Approving agency action

_____ Agency's Findings of Fact

_____ LCRAR Report or agency Affidavit

✓ Certificate of Board's Resolution Adopting Rules

N/A Order Approving Incorporation by Reference

✓ Statement of Need and Reasonableness

N/A Petition for Adoption of a Rule

✓ Record (includes transcript or tape, exhibits, comments received by agency, requests for a hearing, and other relevant materials)

✓ Certificate of Compliance w/Rulemaking Procedures

✓ Affidavit of Mailing Notice of Submission to Attorney General

✓ Notice of Submission to the Attorney General

SF-00006-03

STATE OF MINNESOTA

DEPARTMENT ATTORNEY GENERAL - Health

Office Memorandum

TO: Judith Wehrwein
Administration
Attorney General

DATE: April 16, 1984

FROM: John A. Breviu
Special Assistant
Attorney General

PHONE: 341-7272

SUBJECT: In the Matter of the Proposed Rule Regarding the Establishment of an Emeritus Registration Status for Those Physicians and Osteopaths no Longer Wishing to Remain in Practice

Pursuant to 1 MCAR § 1.203, please find enclosed for your review and approval:

1. Rule as adopted (original and three copies);
2. Order Adopting Rule (original and one copy);
3. Certificate of Board's Resolution;
4. Notice of Intent to Solicit Outside Opinion;
5. Certificate of Board's Authorizing Resolution;
6. Notice of Intent to adopt a Rule Without Public Hearing;
7. Affidavit of Mailing;
8. Mailing List Certificate;
9. Rule as Proposed;
10. Statement of Need and Reasonableness;
11. Written comments;
12. Certificate of Compliance with Rulemaking Procedures;
13. Affidavit ;
14. Affidavit of Mailing Notice of Submission to the Attorney General; and
15. Notice of Submission to the Attorney General.

If you have any questions, please feel free to call me.

JAB:jrm

Attachments

STATE OF MINNESOTA

DEPARTMENT ATTORNEY GENERAL

Office Memorandum

TO Arthur W. Poore
Executive Secretary

DATE: April 30, 1984

ATTN: John A. Breviu
Special Assistant,
Attorney General

FROM : Larry D. Starns
Special Assistant
Attorney General

PHONE: 297-3493

LDS

SUBJECT:

In the Matter of the Proposed Rule Regarding the Establishment of an Emeritus REgistration Status for Those Physicians and Osteopaths no Longer Wishing to Remain in Practice

Enclosed herewith are the rules you have submitted for approval. These rules have been approved by this office and filed with the Secretary of State. Please note that they have not been filed with the State Register. This must be done promptly by your agency.

Upon receipt and before transmittal to your agency, however, it is important that you recheck these rules as to:

1. Affixation of stamps of the Attorney General and Secretary of State;

2. Coverage by these stamps of all rules submitted; and

3. Inclusion of all pages to the rules in the approved set.

If you have any questions in this regard, please contact me.

Encs.

cc: Ms. Kathy Burek
Mr. Duane Harves

LDS:cb

State Board of Medical Examiners

Adopted Rule Regarding Changes in the Continuing Medical Education Requirement Necessary for Physicians and Osteopaths to Retain Their Licenses to Practice Medicine

Rules as Adopted

7 MCAR S 4.012 Continuing medical education.

A. Continuing education cycles. During three-year cycles, each physician licensed to practice by this board shall obtain 75 hours of continuing medical education credit as required by this rule.

For the purpose of administering this rule, each individual initially licensed after the effective date of this rule commences his or her first three-year cycle on January 1 following the date of initial licensure. Future cycles will run consecutively from that point. Continuing medical education taken between the date of initial licensure and the January 1 following the date of initial licensure may be credited towards the first cycle.

Those individuals assigned three-year reporting prior to the effective date of this rule shall remain in their assigned reporting cycle.

B. Activities for which credit may be obtained. Continuing medical education credit may be obtained from the following activities:

1. Category 1. No less than 45 hours of credit must be obtained in any cycle by attendance at educational activities approved by the board pursuant to D.

2. Category 2. No more than 20 hours of credit may be obtained in any cycle through educational activities sponsored by a hospital, clinic, or medical or osteopathic society and not meeting the standards contained in category 1.

3. Category 3. No more than 20 hours of credit may be obtained in any cycle through medical teaching of medical students, residents, practicing physicians, and allied health

professionals.

4. Category 4. No more than 20 hours of credit may be obtained in any cycle for papers, publications, books, lectures, and exhibits.

a.-c. [Unchanged.]

5. Category 5. No more than 20 hours of credit may be obtained by engaging in professional reading, peer patient care review activities, self-assessment examinations sponsored by a professional organization recognized by the board as maintaining a significant level of quality control, and preparation for certification or recertification examinations administered by a national specialty board.

C. Approval of courses for credit. Persons or organizations intending to offer courses for continuing education credit not included under D.6. may apply to the board in advance for approval. Any person or organization may submit a course for approval by the board. The following information shall be provided to the board, as well as any other information which the board may reasonably require for the purpose of evaluating the course for which approval is sought.

1.-4. [Unchanged.]

D. Category 1 credit. The board shall grant Category 1 continuing education credit for any educational activity which meets the following standards:

1.-5. [Unchanged.]

6. Any course planned, sponsored, or co-sponsored by a medical or osteopathic medical school, state or national medical or osteopathic association, or a national medical specialty society shall be presumed to meet the above standards. This presumption may be withdrawn by the board if it determines that a school, association, or specialty society has sought credit for a course not meeting these standards.

E. [Unchanged.]

F. Alternative compliance. The board may accept certification or recertification by an American specialty board in lieu of compliance with the continuing education requirements

during the cycle in which certification or recertification is granted.

G. Verification of compliance. Licensees shall, at the relicensure period coinciding with the end of their cycle, provide a signed statement to the board on a form provided by the board indicating compliance with this rule. The board may, in its discretion, require such additional evidence as is necessary to verify compliance with the rule. The board may also accept certification of other state or national medical groups whose continuing medical education requirements are the equivalent of or greater than those of this board in lieu of compliance with these standards.

A licensee failing to submit a statement or who submits a statement which, on its face, indicates noncompliance with this rule may be subject to the disciplinary provisions contained in I.

H. Exemptions.

1. The board may grant an exemption from the continuing education requirements of this rule to a licensee for full-time participation in residency or fellowship training at a professionally accredited institution.

2. Physicians under emeritus registration status as provided in 7 MCAR S 4.013 are exempt from the continuing medical education requirements of this rule.

I. Penalties for noncompliance. The board may refuse to renew, suspend, condition, limit, or qualify the license of any person whom the board determines has failed to comply with the requirements of this rule.

If the board refuses to renew a license, a hearing must be held only if the licensee submits a written request for a hearing within 30 days after receiving notice of the refusal to renew. The hearing must be conducted pursuant to the provisions of the Minnesota Administrative Procedure Act.

7 MCAR S 4.0121 Emeritus registration for retired physicians.

A. Application. Any physician duly licensed to practice medicine in the state pursuant to Minnesota Statutes, chapter

147, who declares that he or she is retired from the active practice of medicine may apply to the board for physician emeritus registration. The physician may do so by indicating on his or her annual registration form or by petitioning the board if he or she is in fact completely retired and has not been the subject of disciplinary action resulting in the suspension, revocation, qualification, condition, or restriction of the physician's license to practice medicine.

B. Status of registrant. The emeritus registration is not a license to engage in the practice of medicine as defined in Minnesota Statutes, chapter 147, or in the rules of the board. The registrant shall not engage in the practice of medicine.

C. Continuing education requirements not applicable. The continuing medical education requirements of 7 MCAR S 4.012 are not applicable to emeritus registration.

D. Change to active status. A registrant who desires to change to active status may do so by providing the following materials, pending the approval of these materials by the board:

1. completion of a form prepared by the board which includes name, basic medical education, medical license number, duration of medical licensure, date of emeritus registration, membership in medical societies, information on the applicant's physical and mental health, and information on any disciplinary action taken against the physician in regards to his or her medical practice;

2. complying with the continuing medical education requirements for the time period in which one's license was in inactive status and under the emeritus registration pursuant to 7 MCAR S 4.012 A. This requirement must be fulfilled prior to submission of the application;

3. submission of all back licensure fees while one's license was under inactive status and the emeritus registration;

4. submission of references by two physicians licensed to practice medicine in Minnesota verifying that the registrant has the capacity to practice medicine; and

5. submission of a notarized, completed, and signed

information release form, listing all schools attended, hospitals and clinics served at, and branch of military served in.

E. Documentation of status. A physician granted emeritus registration shall, upon payment of a fee, receive a document certifying that he or she has been registered as emeritus and has completed his or her active professional career licensed in good standing with the Minnesota Board of Medical Examiners. The fee for such a document shall be $5. The document fee shall not be a prerequisite for consideration of an application for emeritus registration.

F. Renewal cycle or fees not applicable. Being registered as emeritus will not subject a person to the annual renewal cycle or renewal fees.

1:36PM

APPROVED AS TO LEGALITY

April 30, 19 84

ROBERT H. HUMPHREY, III
ATTORNEY GENERAL

BY [signature]
SPECIAL ASSISTANT ATTORNEY GENERAL

STATE OF MINNESOTA

COUNTY OF HENNEPIN

BEFORE THE MINNESOTA

BOARD OF MEDICAL EXAMINERS

In the Matter of the Proposed Rule Regarding the Establishment of an Emeritus Registration Status for Those Physicians and Osteopaths no Longer Wishing to Remain in Practice

ORDER ADOPTING RULES

Notice of the Minnesota Board of Medical Examiner's intent to adopt the above-entitled rule without a public hearing was published in the State Register on December 26, 1983, and was sent by United States mail to all persons on the list maintained by the Minnesota Board of Medical Examiners, pursuant to Minn. Stat. § 14.4, subd. 1a (Supp. 1983), on December 23, 1983. After affording interested and affected persons an opportunity to submit comments for 30 days after Notice, receiving no requests for a public hearing within the 30-day comment period, and determining the need for the reasonableness of the above-captioned rules,

NOW, THEREFORE, IT IS ORDERED that the rule identified as Rule Regarding the Establishment of an Emeritus Registration Status for Those Physicians and Osteopaths no Longer Wishing to Remain in Practice is adopted this 12th day of April, 1984, pursuant to authority vested in me by Minn. Stat. § 147.02 (1982) and by resolution of the Minnesota Board of Medical Examiners duly adopted at a meeting of the said Board on the 10th day of March, 1984.

STATE OF MINNESOTA

BOARD OF MEDICAL EXAMINERS

Arthur W. Poore

ARTHUR W. POORE
Executive Secretary

Notice of Intent to Solicit Outside Opinion Concerning a Proposed Rule Regarding the Establishment of an Emeritus Registration Status for those Physicians or Osteopaths No Longer Wishing to Remain in Practice

Notice is hereby given that the Minnesota Board of Medical Examiners is considering the adoption of a rule which will establish an emeritus registration for those physicians and osteopaths no longer wishing to practice medicine and who have not been the subject of disciplinary action during their professional careers. The registration is not a license to practice medicine, but will certify the completion of ones career without disciplinary action. The cost of a document certifying the emeritus registration status will be set at five dollars, requirements for the emeritus registration and for reverting back to licensure are included in the rules.

The proposed rule is authorized by Minnesota Statute § 147.02, which establishes authority for the Board of Medical Examiners to license physicians and osteopaths, which includes establishing licensure requirements which are deemed to be in the interest and protection of the public.

All interested or affected persons or groups may submit information on this subject. The rule may be revised on the basis of comments received. Any written material received will become part of the record of any rule hearings held on this subject. Written or oral information and comments should be addressed to:

Arthur W. Poore, Executive Secretary
Minnesota Board of Medical Examiners
717 S.E. Delaware Street, Suite 352
Minneapolis, Minnesota 55414

All statements of information and comments must be received by July 1, 1983.

Arthur W. Poore
Executive Secretary

Minnesota Public Utilities Commission

Notice of Extension of Time for Comments

On April 4, 1983, the Minnesota Public Utilities Commission (the commission) published at 7 S.R. 1429 a Notice of Intent to Adopt Rules without a Public Hearing for a Proposed Rule Governing Schedule Changes of Common Carriers.

That notice stated that interested persons who have 30 days to submit comments on the proposed rule.

The commission hereby provides notice that it will accept comments on the proposed rule through May 16, 1983.

Randall D. Young
Executive Secretary

Department of Public Welfare
Support Services Bureau

Notice of Intent to Solicit Outside Opinion Concerning Proposed Temporary Rules Governing Reimbursement for Nursing Home Providers

Notice is hereby given that the Department of Public Welfare is drafting proposed temporary rules to implement proposed legislation on nursing home reimbursement.

The proposed temporary rules if adopted would replace present 12 MCAR § 2.049, Rules for determining welfare per diem rates for nursing home providers under the Title XIX, Medical Assistance Program (Rule 49).

Authority for present Rule 12 MCAR § 2.049 is found in Minn. Stat. § 2568.

All interested or affected persons or groups are requested to participate. Statements of information and comment may be made orally or in writing. Written statements of information and comment may be addressed to:

STATE OF MINNESOTA

COUNTY OF HENNEPIN

BEFORE THE MINNESOTA

BOARD OF MEDICAL EXAMINERS

In the Matter of the Proposed Rule Regarding the Establishment of an Emeritus Registration Status for Those Physicians and Osteopaths no Longer Wishing to Remain in Practice

AFFIDAVIT

STATE OF MINNESOTA)
) ss.
COUNTY OF HENNEPIN)

Arthur W. Poore, being first duly sworn upon oath, deposes and says:

1. That on December 26, 1983, a Notice of Intent to Adopt Rules Without a Public Hearing was published in the State Register and on December 28-30, 1983, the same Notice was mailed to persons who have requested to be informed of rulemaking activity by the Minnesota Board of Medical Examiners;

2. That to date, no one has requested a rule hearing.

FURTHER AFFIANT SAYETH NOT.

Dated: April 12, 1984

Arthur W. Poore

ARTHUR W. POORE
Executive Secretary

Subscribed and sworn to before me
this 12th day of April, 1984.

Alice D. Hummer

ALICE D. HUMMER
NOTARY PUBLIC-MINNESOTA
RAMSEY COUNTY
MY COMMISSION EXPIRES NOVEMBER 18, 1988

STATE OF MINNESOTA)
) ss.
COUNTY OF HENNEPIN)

In the Matter of the Proposed Rule
Regarding the Establishment of an
Emeritus Registration Status for
Those Physicians and Osteopaths no
Longer Wishing to Remain in Practice

AFFIDAVIT OF MAILING

Barbara DeLong, being first duly sworn, deposes and says:

That between the 28th and 30th days of December, 1983, at the City of Minneapolis, County of Hennepin, State of Minnesota, she served the attached Notice of Intent to Adopt Rules Without a Public Hearing by depositing in the United States mail at said City of Minneapolis, a true and correct copy thereof, properly enveloped, with postage prepaid, to all persons and associations who have requested that their names be placed on file with the Minnesota Board of Medical Examiners for the purpose of receiving notice of the proposed adoption of rules by the Minnesota Board of Medical Examiners.

Barbara DeLong
BARBARA DeLONG

Subscribed and sworn to before me
this 12th day of April, 1984

Alice D. Hummer

ALICE D. HUMMER
NOTARY PUBLIC-MINNESOTA
RAMSEY COUNTY
MY COMMISSION EXPIRES NOVEMBER 18, 1988

STATE OF MINNESOTA

COUNTY OF HENNEPIN

CERTIFICATE

In the Matter of the Proposed Rule
Regarding the Establishment of an
Emeritus Registration Status for
Those Physicians and Osteopaths no
Longer Wishing to Remain in Practice

I hereby certify that the attached list of persons, associations, and other interested groups who have requested, pursuant to Minn. Stat. § 14.14 subd. 1a (Supp. 1983), that their names be placed on file with and maintained by the Minnesota Board of Medical Examiners for the purpose of receiving notice of the proposed adoption of rules by this Board is accurate and complete as of 4:30 PM, the 23rd day of December, 1983.

Arthur W. Poore

ARTHUR W. POORE
Executive Secretary

CITIZENS RECEIVING INFORMATION ON ALL THE RULES

Kathy Meyerle
Minnesota Medical Association
2221 University Avenue SE #400
Minneapolis, MN 55414

Lynn Gruber
Hennepin County Medical Society
2221 University Avenue SE #423
Minneapolis, MN 55414

Frundt, Frundt, & Johnson
Attorneys at Law
117 West 5th Street
Blue Earth, MN 56013

Broeker Hartfeldt Hedges & Grant
Attorneys at Law
2850 Metro Drive - Suite 800
Minneapolis, MN 55420

Dorsey Windhorst Hannaford Whitney
& Halladay
2300 First National Bank Bldg
Minneapolis, MN 55402

Minnesota State Pharmaceutical
Association
2469 University Avenue
St. Paul, MN 5511
Attn: Donald A. Dee, Exec. Dir.

Thomas M. Polt
Attorney at Law
McCarthy Bldg.
Eyota,MN 55934

Peterson Popovich Knutson & Flynn
Professional Association
314 Minnesota Bldg.
St. Paul, MN 55101

Minnesota Association of Health Care
Facilities
Attn: Rick Carter
2850 Metro Drive, Suite 429
Minneapolis, MN 55420

Minnesota Board of Optometry
Executive Secretary
717 Delaware Street SE
Minneapolis, MN 55414

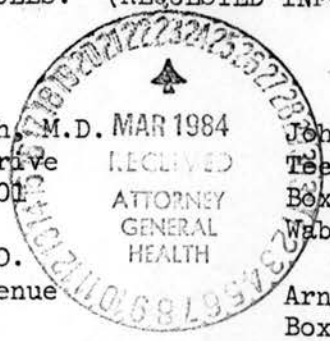
Minnesota Board on Aging
204 Metro Square Building
St. Paul, MN 55101

Board of Psychology
Executive Secretary
717 Delaware Street SE #343
Minneapolis, MN 55414

Department of Professional Regulation
Complaint Analysis Section
2009 Apalachee Parkway
Tallahassee, FL 32301

All other health licensing boards were sent notices, although the notices were not requested.

CITIZENS RECEIVING INFORMATION ON THE PROMULGATION ON THE CONTINUING MEDICAL EDUCATION AND PHYSICIAN EMERITUS REGISTRATION RULES. (REQUESTED INFORMATION ON THESE TWO RULES)



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7505 Humbolt Avenue, South
Richfield, MN 55423

E. J. OShaughnessy, M.D.
439 Keoniana St. #604
Honolulu, HI 96815

State Board of Medical Examiners

Proposed Rule Regarding the Establishment of an Emeritus Registration Status for Those Physicians or Osteopaths no Longer Wishing to Remain in Practice

Notice of Intent to Adopt Rules without a Public Hearing

Notice is hereby given that the Minnesota Board of Medical Examiners proposes to adopt the above entitled rules without a public hearing. The Board has determined that the proposed adoption of the rules will be noncontroversial in nature and has elected to follow the procedures set forth in Minnesota Statutes sections 14.21-14.28 (1982).

Minnesota Statute section 147.02 establishes the authority for the Board of Medical Examiners to license physicians and osteopaths, which includes establishing licensure requirements which are deemed to be in the interest and protection of the public. The Board has developed a rule for the regulation of physicians who no longer wish to practice medicine which falls under the requirements of 147.02. Additionally, a statement of need and reasonableness that describes the need for and reasonableness of the proposed rules has been prepared and is available for inspection by the public during regular business hours or a copy may be provided upon written request to the address below.

Persons interested shall have 30 days, specifically until January 25, 1984, to submit comments on the proposed rules. The proposed rules may be modified if the modifications are supported by the data and views submitted to the agency and do not result in a substantial change in the proposed language.

Upon adoption of the final rule without a public hearing, the proposed rule, this notice, the statement of need and reasonableness, all written comments received, and the final rule as adopted will be delivered to the Attorney General for review as to form and legality, including the issue of substantial change. Persons who wish to be advised of the submission of this material to the Attorney General, or who wish to receive a copy of the final rule as proposed for adoption, should submit a written request to the address below.

Unless seven (7) or more persons submit written requests for a public hearing on the proposed rules within the 30-day comment period, a public hearing will not be held. In the event a public hearing is required, the agency will proceed according to the provisions of Minnesota Statutes 14.13-14.20 (1982). The agency asks that persons requesting a public hearing identify the particular provisions objected to, the suggested modifications to the proposed rules, and the reasons or data relied on to support the suggested modifications.

Please be advised that Minn. Stat. chapter 10A requires each lobbyist to register with the State Ethical Practices Board within five days after he or she commences lobbying. Minn. Stat. § 10A.01. subdivision 11 defines a lobbyist as an individual: (a) engaged for pay or other consideration or authorized by another individual or association to spend money, who spends more than five hours in any month or more than $250, not including his own travel expenses and membership dues, in any year, for the purpose of attempting to influence legislative or administrative action by communicating or urging others to communicate with public officials; or (b) who spends more than $250, not including his own travel expenses and membership dues, in any year, for the purpose of attempting to influence legislative administrative action by communicating or urging others to communicate with public officials. The statute provides certain exceptions. Questions should be directed to the Ethical Practices Board, 41 State Office Building, St. Paul, Minnesota 55155, telephone (612) 296-6515.

A copy of the proposed rule follows this notice. Additional copies may be obtained at the address below.

Persons who wish to submit comments or a written request for a public hearing, or who wish to receive a copy of the final rule or to be informed when the rule is submitted to the Attorney General, should submit such comments to:

Arthur W. Poore, Executive Secretary
Minnesota Board of Medical Examiners
717 Delaware Street SE, Suite #352
Minneapolis, MN 55414

Rules as Proposed (all new material)

7 MCAR § 4.0121 Emeritus registration for retired physicians.

A. Application. Any physician duly licensed to practice medicine in the state pursuant to Minnesota Statutes, chapter 147, who declares that he or she is retired from the active practice of medicine may apply to the board for physician emeritus registration. The physician may do so by indicating on his or her annual registration form or by petitioning the board if he or she is in fact completely retired and has not been the subject of disciplinary action resulting in the suspension, revocation, qualification, condition, or restriction of the physician's license to practice medicine.

B. Status of registrant. The emeritus registration is not a license to engage in the practice of medicine as defined in Minnesota Statutes, chapter 147, or in the rules of the board. The registrant shall not engage in the practice of medicine.

C. Continuing education requirements not applicable. The continuing medical education requirements of 7 MCAR § 4.012 are not applicable to emeritus registration.

D. Change to active status. A registrant who desires to change to active status may do so by providing the following materials, pending the approval of these materials by the board:

1. completion of a form prepared by the board which includes name, basic medical education, medical license number, duration of medical licensure, date of emeritus registration, membership in medical societies, information on the applicant's physical and mental health, and information on any disciplinary action taken against the physician in regards to his or her medical practice;

2. complying with the continuing medical education requirements for the time period in which one's license was in inactive status and under the emeritus registration pursuant to 7 MCAR § 4.012 A. This requirement must be fulfilled prior to submission of the application;

3. submission of all back licensure fees while one's license was under inactive status and the emeritus registration;

4. submission of references by two physicians licensed to practice medicine in Minnesota verifying that the registrant has the capacity to practice medicine; and

5. submission of a notarized, completed, and signed information release form, listing all schools attended, hospitals and clinics served at, and branch of military served in.

E. Documentation of status. A physician granted emeritus registration shall, upon payment of a fee, receive a document certifying that he or she has been registered as emeritus and has completed his or her active professional career licensed in good standing with the Minnesota Board of Medical Examiners. The fee for such a document shall be $5. The document fee shall not be a prerequisite for consideration of an application for emeritus registration.

F. Renewal cycle or fees not applicable. Being registered as emeritus will not subject a person to the annual renewal cycle or renewal fees.

State Board of Medical Examiners

Proposed Rule Regarding Changes in the Initial Licensure Requirements, Specifically Regarding the Use of Examinations and the Citizenship Requirements, for Those Physicians and Osteopaths Seeking Licensure to Practice Medicine in Minnesota

Notice of Intent to Adopt Rules without a Public Hearing

Notice is hereby given that the Minnesota Board of Medical Examiners proposes to adopt the above entitled rules without a public hearing. The Board has determined that the proposed adoption of these rules will be noncontroversial in nature and has elected to follow the procedures set forth in Minnesota Statutes sections 14.21-14.28 (1982).

Minnesota Statute section 147.02 establishes the authority for the Board of Medical Examiners to license physicians and osteopaths, which includes establishing licensure requirements which are deemed to be in the interest and protection of the public. The Board has promulgated rules which provide five alternative means of licensure which fulfill the intent of 147.02. However, through the administration of the licensure rules the Board developed these revisions to the rules based upon the Board's experience with the rules. Additionally, a statement of need and reasonableness that describes the need for and reasonableness of the proposed rules has been prepared and is available for inspection by the public during regular business hours or a copy may be provided upon request, at the address below.

Persons interested shall have 30 days, specifically until January 25, 1984, to submit comments on the proposed rules. The proposed rules may be modified if the modifications are supported by the data and views submitted to the agency and do not result in a substantial change in the proposed language.

Upon adoption of the final rule without a public hearing, the proposed rule, this notice, the statement of need and reasonableness, all written comments received, and the final rule as adopted will be delivered to the Attorney General for

KEY: PROPOSED RULES SECTION — Underlining indicates additions to existing rule language. ~~Strike outs~~ indicate deletions from existing rule language. If a proposed rule is totally new, it is designated "all new material." ADOPTED RULES SECTION — Underlining indicates additions to proposed rule language. ~~Strike outs~~ indicate deletions from proposed rule language.

CERTIFICATE OF BOARD'S

ADOPTION OF RULES RESOLUTION

I, Arthur W. Poore, do hereby certify that I am the Executive Secretary of the Minnesota Board of Medical Examiners, a board duly authorized under the laws of the State of Minnesota, and that the following is a true, complete, and correct copy of the resolution adopted at a meeting of the said Board of Medical Examiners duly and properly called and held on the 10th day of March, 1984; that a quorum was presented at said meeting; that a majority of those present voted for the resolution; that said resolution is set forth in the minutes of said meeting and has not been rescinded or modified.

> "RESOLVED, that the rules relating to continuing medical education and physician emeritus status identified as 7 MCAR §§ 4.012-4.013 are found to be reasonable, necessary and supported by the evidence contained in the record, and are hereby approved and adopted, pursuant to authority vested in us by Minn. Stat. §§ 147.01, subd. 3 (1982) and 214.12 (1982), and that Arthur W. Poore, Executive Secretary of the Minnesota Board of Medical Examiners, be and hereby is authorized to sign an order adopting those rules."

IN WITNESS WHEREOF, I have hereunto subscribed my name this 13th, day of April, 1984.

STATE OF MINNESOTA

BOARD OF MEDICAL EXAMINERS

Arthur W. Poore

ARTHUR W. POORE
Executive Secretary

RESOLUTION

"RESOLVED, that the rules relating to continuing medical education and physician emeritus status identified as 7 MCAR §§ 4.012-4.013 are found to be reasonable, necessary and supported by the evidence contained in the record, and are hereby approved and adopted, pursuant to authority vested in us by Minn. Stat. §§ 147.01, subd. 3 (1982) and 214.12 (1982) and that Arthur W. Poore, Executive Secretary of the Minnesota Board of Medical Examiners, be and hereby is authorized to sign an order adopting those rules."

Passed on 3/10/84

EMERITUS REGISTRATION RULES
STATEMENT OF NEED AND REASONABLENESS
DRAFT 3

APR 1984
RECEIVED
ATTORNEY
GENERAL
HEALTH

It is the opinion of the Board that neither 150 hours of Continuing Medical Education over three years in the original rules nor the 75 hours over three years in these rules are either unreasonable or unduly restrictive. In administrating the old rules we have found that no doctor who had taken the effort to understand the rules and attempted to accumulate CME credits has fallen short in the number of hours necessary for relicensure. With the evaluation of CME, various formats have proliferated, including various category one self-teaching devises (video, tapes, reading material) for physicians who may be incapacitated due to illness or accident. Indeed an informed physician, admitted to a hospital, would find unlimited access to category 1, 2, and 5 activities.

Although the Board feels that the CME requirements are not unduly restrictive or harsh, it appears that the requirements are unreasonable for physicians who had been retired for several years before the original rules were promulgated. It should be pointed out that the concept of CME is totally foreign to these doctors, they had gone through their entire professional careers without having to attain CME's and in many cases had been able to retain their licenses during their retirement without worrying about CME's. Now suddenly if they wished to retain their licenses they had to meet a CME requirement. Confronted with this CME requirement, many of the physicians in this situation allowed their licenses to lapse.

The effect of this on these physicians was in many cases devastating. Although a license lapse is not the same thing as licensure suspension, many doctors looked upon the situation as if their licenses had been suspended.

In an editorial of the March, 1979 issue of Minnesota Medicine, Carl O. Rice, M.D., Ph.D., made the following comments, "abrogation of a doctor's license is generally regarded as tantamount to unethical conduct on his (sic) part - a fall from grace with a subtle implication, insinuation, or innuendo of treason or heresy...we would resent being equated or identified with those practitioners who have violated their commitment (to medicine) and thereby forfeited their privilege to practice." The distinction between revocation and a lapse, which a doctor could make up at his or her own discretion by complying with the CME requirements, doesn't mean much to retired physicians like Dr. Rice. In either case they are being told that they may no longer practice medicine, they don't care about the name given to the action. Dr. Rice goes on to say that, "Revocation (sic) of our licenses would appear to brand us 'seniors' as non-doctors, as has-beens, canceling out our long and meritorious service... at retirement it would be difficult to face up to the humiliating psychic trauma that loss of licensure would entail. It would seem like exile to a Gulag archipelago." In a petition dated June 25, 1979 to the Board of Medical Examiners requesting that rules similar to the rules being argued for in this document be adopted, John J. Ryan, M.D. and John J. Ryan, III, make the following statements, "The license becomes significant... because the physician's entire professional career is represented by holding of the license... Beyond conferring permission to practice, the license symbolizes and in effect becomes, the professional status of the physician his career, competency, and acheivements. To take away the license of the retired physician is to deny him his right to self-esteem, professional reputation in the community and among collegues. In short, this memorial of his career is a property right and to have it withheld after retirement for not fulfilling the requirements of continuing education, is fundamentally unfair and inconsistant with sound board policy. The effect is disciplinary in nature and indistinguishable from revocation or suspension for malpractice, malfeasance or criminal conduct.

Non-renewal of the license, therefore, creates a stigma on the retired physician, casting his career and reputation in a negative light. This is an unjustifiable situation."

It should be pointed out that all physicians licensed to practice medicine in Minnesota are required to meet the Continuing Medical Education requirement. However, as stated above, the CME's proved difficult to the retired physician, in that they went decades without having to meet this requirement, but were suddenly having it foisted upon them in retirement. As a result over the last several years since the original CME rules were promulgated, the Board has received countless letters and phone calls from retired physicians, embittered and frustrated over having to meet new CME requirements or else face the loss of their license to practice. Confronted with the CME requirement, most retired physicians in this situation allow their licenses to lapse but in the process express their concern and disappointment to the Board. Typical of these correspondences, although more diplomatic than most, is a letter dated October 2, 1981, from Dean D. Nywall, M.D., of Slayton, Minnesota. In his letter Dr. Nywall states, "it took 20 years from high school till I finished my internship, to aquire my M.D., and I have practiced for 30 years... You have your rules I know, but as I've stated I have no intentions, for reasons of future health, of ever practicing medicine again. I would just like to continue to feel that I am a doctor of medicine."

Essentially, these physicians believe they are not able to renew their medical licenses and have no prospect of retaining anything which will show the years in which they actively practice medicine. What the Board proposes to do is to establish, at a minimal cost, an emeritus registration for retired physicians as a means of bridging this problem.

Under the emeritus registration the public would still be protected in that the retired physician could not practice medicine or prescribe drugs, but the

emeritus registration certificate would show that the doctor had completed his medical career in good standing with the Board. This is important to the retired physician as it emphasizes the fact that his or her license has not been suspended and the physician has the option of reinstating his or her license by complying with the CME requirements stipulated in this rule.

The emeritus physician registration would represent a new expense for the Board, however it would be self-sufficient. The major coast to the Board would be:

1. *Cost of processing applications for emeritus registration. This should not be a major cost, essentially referring to the doctors' files to make certain that the physician's medical practice has been without disciplinary action. The Board could probably expect a large number of physicians applying for the emeritus registration when the rules are first promulgated, however it would be reasonable to expect the number of emeritus registration applications to tail off. After the initial applications, the burden to the Board in terms of staff time and cost would not be great.*
2. *At a cost of one-fourth of the regular licensure fees for physicians (one fourth would currently be five dollars), if he or she wishes the physician may obtain a certificate signifying ones registration as a physician under the emeritus registration. This should be sufficient to cover the Board's expenses. (Attached at the end of the statement is a memo explaining how the fee was arrived at.)*
3. *The Board would be responsible for the policing of the emeritus registrant to insure that they do not practice medicine and prescribe drugs, and to take appropriate action when they do. Although this is a legitimate expense the surveilance of unlicensed physicians is something the Board would have to perform whether or not the emeritus reg-*

istration rule is promulgated.

4. *The Board will also process the reinstatement of the emeritus physician registrant to active licensure. This is another expense that the Board would have no matter what, as the Board would be processing reinstatements of retired physicians whether they are on inactive status (as they are now) or physician emeritus status. This is an expense which is covered by the annual licensure fee.*

Thus it would seem reasonable that these rules could be promulgated, which will help the retired physicians, without endangering or providing unnecessary expense to the public.

7 MCAR §§ 4.013 EMERITUS REGISTRATION-RETIRED PHYSICIAN (This entire section is new)

A. ANY PHYSICIAN DULY LICENSED TO PRACTICE MEDICINE IN THE STATE PURSUANT TO MINN. STAT. §§ 147.01 EQ. SEQ., WHO DECLARES THAT HE OR SHE IS RETIRED FROM THE ACTIVE PRACTICE OF MEDICINE MAY APPLY TO THE BOARD FOR PHYSICIAN EMERITUS REGISTRATION. THE PHYSICIAN MAY DO SO BY INDICATING ON HIS OR HER ANNUAL REGISTRATION FORM OR BY PETITIONING THE BOARD IF HE OR SHE IS IN FACT COMPLETELY RETIRED AND HAS NOT BEEN THE SUBJECT OF DISCIPLINARY ACTION RESULTING IN THE SUSPENSION, REVOCATION, QUALIFICATION, CONDITION, OR RESTRICTION OF THE PHYSICIAN'S LICENSE TO PRACTICE MEDICINE."

It is reasonable that this rule only apply to those that are completely retired, those who are not completely retired and who are still practicing in any extent would be required to retain their regular licenses to practice medicine. Since the emeritus registration is essentially an honorary commemoration for those physicians who have completed their medical careers in good standing with the Board, it is reasonable that this registration not

be made available to those physicians who have been the subject of disciplinary action resulting in the suspension, revocation, qualification, or restriction of their licenses.

B. THE EMERITUS REGISTRATION IS NOT A LICENSE TO ENGAGE IN THE PRACTICE OF MEDICINE AS DEFINED IN MINN. STAT. §§ 147.10 OR IN THE RULES OF THE BOARD. THE REGISTRANT SHALL NOT ENGAGE IN THE PRACTICE OF MEDICINE.

Since the physician registered as emeritus does not have to meet the licensure requirements, which certify one's capacity to practice medicine, and since the physician under the emeritus registration has declared him or herself as being retired, it is reasonable and in the best interest of the public that the emeritus registration not be considered as a license to practice medicine.

C. THE CONTINUING MEDICAL EDUCATION REQUIREMENTS OF 7 MCAR §§ 4.012 ARE NOT APPLICABLE TO EMERITUS REGISTRATION.

Since the emeritus registration is not a license to practice medicine it isn't reasonable to require the physicians under the emeritus registration to meet the Continuing Medical Education requirements.

D. A REGISTRANT WHO DESIRES TO CHANGE TO ACTIVE STATUS MAY DO SO BY PROVIDING THE FOLLOWING MATERIALS, PENDING THE APPROVAL OF THESE MATERIALS BY THE BOARD.

It is conceivable that a physician on emeritus status may eventually wish to convert back to a regular license, so as to be able to practice medicine or prescribe drugs again. It is reasonable for the Board to set up a procedure for the reinstatement of these physicians, and to set up various requirements which need to be met to insure that the physician has the capacity to practice medicine competently.

1. COMPLETION OF A FORM PREPARED BY THE BOARD WHICH INCLUDES NAME, BASIC MEDICAL EDUCATION, MEDICAL LICENSE NUMBER, DURATION OF MEDICAL LICENSURE, DATE OF EMERITUS REGISTRATION, MEMBERSHIP IN MEDICAL

SOCIETIES, INFORMATION ON THE APPLICANT'S PHYSICAL AND MENTAL HEALTH, AND INFORMATION ON ANY DISCIPLINARY ACTION TAKEN AGAINST THE PHYSICIAN IN REGARDS TO HIS OR HER MEDICAL PRACTICE.

It is reasonable for the Board to stipulate that the physician complete a form which covers the events which occured during the time the physician was on the emeritus registraion to insure that nothing occurred that would effect the physician's ability to practice medicine. The questions on the form specified in the rule would provide information on the physician's medical licensure and activities during the emeritus registration to ensure that the that the physician has retained the capacity to practice medicine.

2. COMPLYING WITH THE CONTINUING MEDICAL EDUCATION REQUIREMENTS FOR THE TIME PERIOD IN WHICH ONE'S LICENSE WAS IN INACTIVE STATUS AND UNDER THE EMERITUS REGISTRATION PURSUANT TO 7 MCAR §§ 4.012.A. THIS REQUIREMENT MUST BE FULFILLED PRIOR TO SUBMISSION OF THE APPLICATION.

It is reasonable for the physician on the emeritus registration wishing to revert back to a license to practice medicine and to comply with the Continuing Medical Education requirements which apply to other licensed physicians. It is reasonable that the CME's be completed prior to submission of the application, so as to prevent abuse of the rule by doctors who might obtain their reinstated license and use it without any intent of complying with the CME requirements. The CME rules were establisehd as a means of up-grading the educational level and medical skills of the physician and keeping the physician abreast of advances in the medical profession. With the intent of the CME rules in mind, it would not be fair to the patients to permit a physician to re-enter the profession without the Continuing Medical Education background of other physicians.

3. SUBMISSION OF ALL BACK LICENSURE FEES WHILE ONE'S LICENSE WAS UNDER INACTIVE STATUS AND THE EMERITUS REGISTRATION.

It is reasonable for the physician on the emeritus registration wishing to revert back to the regular license to practice medicine to submit

the licensure fees that other licensed physicians in Minnesota have to submit. The requirement of paying all back licensure fees discourages the practice of continual licensure status changes by the physician which places an extra burden upon the Board's staff. The payment of back licensure fees would also help to defer the cost of the reinstatement procedures. Establishing this requirement which will encourage physicians to retain their medical licensure will be beneficial to the public in that it will lead to a larger base of qualified, licensed physicians in the state.

4. SUBMISSION OF REFERENCES BY TWO PHYSICIANS LICENSED TO PRACTICE MEDICINE IN MINNESOTA VERIFYING THAT THE REGISTRANT HAS THE CAPACITY TO PRACTICE MEDICINE; AND

It is reasonable for the Board to stipulate that the physician on emeritus status wishing to reinstate his or her license to practice medicine to provide two references from licensed medical doctors. It is vital that before a physician is re-issued a license to practice medicine that the physician is capable of practicing medicine and wouldn't present a risk to the public. These two doctors would understand the practice of medicine and would be able to confirm if the applying doctor still had the capacity to practice medicine.

5. SUBMISSION OF A NOTARIZED, COMPLETED, AND SIGNED INFORMATION RELEASE FORM, LISTING ALL SCHOOLS ATTENDED, HOSPITALS AND CLINICS SERVED AT, AND BRANCH OF MILITARY SERVED IN.

It is reasonable for the Board to have access to education, work and military background of a physician on the emeritus registration requesting a reinstatement to his or her regular license, if such information is necessary for the Board in rendering a decision in regards to reinstatement. In that a long period of time may have passed since the reinstating physician was originally licensed, it is important that the Board have access to those records in order to make certain that the physician is still eligible for licensure. The information release form will provide access to this information.

E. A PHYSICIAN GRANTED EMERITUS PHYSICIAN REGISTRATION SHALL, UPON PAYMENT OF A FEE, RECEIVE A DOCUMENT CERTIFYING THAT HE OR SHE HAS BEEN REGISTERED AS EMERITUS AND HAS COMPLETED HIS OR HER ACTIVE PROFESSIONAL CAREER LICENSED IN GOOD STANDING WITH THE MINNESOTA BOARD OF MEDICAL EXAMINERS. THE FEE FOR SUCH A DOCUMENT SHALL BE FIVE DOLLARS. THE DOCUMENT FEE SHALL NOT BE A PREREQUISITE FOR CONSIDERATION OF AN APPLICATION FOR EMERITUS REGISTRATION.

If the physician wishes to receive a document certifying that he or she is a physician under the emeritus registration it is reasonable that he or she should receive a document assuming the physician is willing to submit a fee for the document. The fee is set at one-fourth the cost of a license to practice medicine so as to cover the cost of the document. For further discussion on why the registration fee was set at five dollars, please see the appendix.

However if the physician doesn't want to spend the money on the document neither the document nor the fee should be considered necessary for the emeritus registration.

F. BEING REGISTERED AS EMERITUS WILL NOT SUBJECT A PERSON TO THE ANNUAL RENEWAL CYCLE OR RENEWAL FEES.

Since the emeritus registration doesn't contain any privileges for practicing medicine, there would be no need for a periodic review of the physician's registration in order to insure that he or she still has the capacity or competence to practice medicine. The only ways in which the emeritus registration could be terminated is if he or she attempts to practice medicine or if he or she wishes to be eligible to revert to a regular license to practice medicine. There are no other reasonable needs in which the emeritus registration should be terminated.

APPENDIX

The following materials were sent out in regards to the application fee for the emeritus registration:

A. Memo to the CME Committee of the Board Examiners making a recommendation for registration fee and rational for the fee.

B. After this fee was approved by the CME Committee this memo was sent to the entire Board, requesting a vote by the entire Board. Memo A was enclosed with this memo.

C. Individual mail votes by the CME Committee and the entire Board in regards to the approval of the five dollar emeritus registration fee. CME Committee members vote as part of the whole Board stayed the same as their Committee vote, unless they expressed a change in opinion.

D. Application to establish a licensure fee to the Commissioner of the Finace Department.

E. Memo of December 22, 1982, from Allen A. Yozamp to Jack Wallace rejecting the emeritus registration fee of five dollars.

F. Memo of February 15, 1983 from Jack Wallace to Allen A. Yozamp, responding to the objections raised by the Department of Finance responding to the objections raised by the Department of Finace to the five dollar emeritus registration fee.

G. Memo of March 3, 1983 from Allen A. Yozamp to Jack Wallace approving the emeritus registration fee.

H. Authorization from Dean D. Nywall to use quote in this document. (all other quotes were from public documents)

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SF 00003-02

STATE OF MINNESOTA

DEPARTMENT Board of Medical Examiners

Office Memorandum

TO : Continuing Medical Education Committee
Jack Breviu, Special Assistant Attorney General
James Cain, M.D., CME Committee Consultant

DATE: November 3, 1982

FROM : Jack Wallace JW
Assistant Executive Secretary

PHONE: (612) 623-5534

SUBJECT: Fee for the Emeritus Registration

The following is a list of the expenses that I anticipate for the emeritus registration for retired physicians. I am basing the costs on the estimate that we will have 250 physicians apply for this registration (since only the first item is fixed, an error in my estimate of numbers shouldn't make any difference):

Cost Items:	Cost:
Registration card and Certificate (cost of paper, reproducing designs)	$ 25.00 *
Clerical personnel, figured at 62.5 hours or fifteen minutes per applicant for a Clerk Typist II at the upper range of the pay scale. (consists of checking applicant's file for disciplinary action, typing wallet card, making Kroy lettering for certificates, xeroxing certificate, mailing out wallet cards and certificates, and any filing)	430.00
Staff personnel, figured at 12½ hours or three minutes per application for a Health Program Representative at the upper range of the pay scale. (would consist of dealing with any special problems related to the processing of applicants registrations)	128.00
	$583.00
	divided by 250 physicians
	$ 2.33 per registration ($. 2.71 counting postage)

* Cost was estimated by Brenda Braun a graphic artist for Information Services, Department of Health who is currently designing the wallet card and certificate. (A draft of the wallet cards and certificate should be ready for Committee approval for the March or May meeting).

continued

One point that I think was not made clear at the last CHE Committee meeting was that in order to obtain approval for a license fee it must be shown that receipts will cover anticipated costs. This concept of reasonableness is not a factor in obtaining approval for a licensure or registration fee.

Because of the low cost of this registration, I cannot make a staff recommendation any greater than five dollars. However, looking at the 1983 budget of current expenditures we have an estimated surplus of $5,583 without the emeritus registration fees, $6,833 if we charge five dollars, and $8,083 if we charge ten dollars. Because this is not as great a safety margin as in previous years, we could argue a greater fee as a way of balancing our overall costs. However, remember that this would help our overall budget for only one year, after the first year, I would doubt that we would ever have more than twenty emeritus registration requests per year.

However, my staff recommendation would still be to set the licensure fee at five dollars. Enclosed is a stamped, addressed envelope for your vote in regards to this matter or if we should have a conference phone call. I would like to get this done as soon as possible as the fee must have Board approval before the Department of Finance approval may proceed.

cc: David Carlson
Brenda Braun
Harold Broman, M.D.
Chester Anderson, M.D.
Wayne S. Burggraff
Terry Rogstad
Arthur Poore

SF-00005-02

b

STATE OF MINNESOTA

Office Memorandum

DEPARTMENT: Board of Medical Examiners

TO: Board of Medical Examiners

DATE: November 17, 1982

FROM: Jack Wallace JW
Assistant Executive Secretary

PHONE: (612) 623-5534

SUBJECT: Fee for the Emeritus Registration

Before the rules may be promulgated for CME and the emeritus registration, the Board must approve the registration fee for the emeritus registration. Before the Department of Finance will approve the emeritus registration fee, the Board of Medical Examiners must approve the fee.

Enclosed is a memo which was sent to the CME Committee which explains the rationale for setting the registration fee at five dollars. The proposal of the five dollar fee has been approved by three of the four members of the Committee, I have not heard from the fourth. In that I don't wish to delay this matter and would like to obtain the approval for the fee by the January Board meeting (and since I had a majority of the Committee vote), I decided to refer this to a Board vote.

Enclosed is a stamped envelope addressed to the Board, please let me know as soon as possible if the five dollar fee is okay, not okay or if the matter should be delayed for a full-board discussion (either at the next Board meeting or a telephone conference call). Those who have already approved the emeritus registration fee need not respond unless they have changed their minds.

cc: David Carlson
Val Vikmanis
Terry Rogstad
Jack Breviu
Arthur Poore

SUMMARY OF CME COMMITTEE
AND BOARD VOTE

CME COMMITTEE:

3 Yes 0 No 1 Abstintion

Board of Medical Examiners:

9 Yes 0 No 2 Abstintion

FALLS CLINIC PROFESSIONAL ASSOCIATION
P. O. Box 407
120 LaBree Avenue South
THIEF RIVER FALLS, MINNESOTA 56701
(218) 681-4747

FAMILY PRACTICE
A. M. Berg, M.D.
R. A. Dicken, M.D.
P. D. Johnson, M.D.
C. B. Martin, M.D.
A. F. Scheuneman, M.D.
E. O. Thorsgard, M.D.

GENERAL SURGERY
W. P. Karg, M.D.

INTERNAL MEDICINE
R. W. Hamrick, M.D.
D. S. Mertery, M.D.

O.B. AND GYNECOLOGY
J. Krepp, M.D.

ORTHOPEDICS
J. T. Garske, M.D.

ADMINISTRATOR

November 11, 1982

To: Jack Wallace
Assistant Executive Secretary
Minnesota Board of Medical Examiners

From: G. B. Martin, M. D.

Subject: Advertising rules and fee for emeritus physician registration

I agree that the fee for emeritus physician registration should be set at $5.00. The memorandum regarding the advertising rules did not include a copy of those rules and I would request a copy since it would appear that this is the appropriate time for any other members of the board to share their feelings with the Advertising Committee.

I feel your point about not being destructively critical of the to refer this to a Board vote.

Enclosed is a stamped envelope addressed to the Board, please let me know as soon as possible if the five dollar fee is okay, not okay or if the matter should be delayed for a full-board discussion (either at the next Board meeting or a telephone conference call). Those who have already approved the emeritus registration fee need not respond unless they have changed their minds.

cc: David Carlson
Val Vikmanis
Terry Rogstad
Jack Breviu
Arthur Poore

OK
Tom Nelson MD

or fifteen minutes per applicant for a Clerk Typist at the upper range of the pay scale. (consists of checking applicant's file for disciplinary action, typing wallet card, making Kroy lettering for certificates, xeroxing certificate, mailing out wallet cards and certificates, and any filing)

Staff personnel, figured at 12½ hours or three minutes per application for a Health Program Representative at the upper range of the pay scale. (would consist of dealing with any special problems related to the processing of applicants registrations) 128.00

$5.00 is OK

$583.00

divided by 250 physicians

$ 2.33 per registration
($. 2.71 counting postage)

* Cost was estimated by Brenda Braun a graphic artist for Information Services, Department of Health who is currently designing the wallet card and certificate. (A draft of the wallet cards and certificate should be ready for Committee approval for the March or May meeting).

continued

Board meeting (and since I had a majority of the Committee vote), I decided to refer this to a Board vote.

Enclosed is a stamped envelope addressed to the Board, please let me know as soon as possible if the five dollar fee is okay, not okay or if the matter should be delayed for a full-board discussion (either at the next Board meeting or a telephone conference call). Those who have already approved the emeritus registration fee need not respond unless they have changed their minds.

cc: David Carlson
Val Vikmanis
Terry Rogstad
Jack Breviu
Arthur Poore

Approve - Dorothy Bowden, M.D.

Mayo Clinic

Rochester, Minnesota 55905 Telephone 507 284-2511

Richard B. Tompkins, M.D.
Department of Internal Medicine
Division of Rheumatology

November 23, 1982

Mr. Jack Wallace
Minnesota State Board of Medical Examiners
Suite 352
717 Delaware Street SE
Minneapolis, MN 55414

Dear Jack:

I think the $5 fee for emeritus registration is entirely appropriate and I think you should pursue it with the Department of Finance.

Sincerely yours,

Richard B. Tompkins, M.D.

RBT/dr

[illegible]
Chester Anderson, M.D.
Wayne S. Burggraff
Terry Rogstad
Arthur Poore

Jack,
I am in favor of the $5 fee.

Enclosed is a stamped envelope addressed to the Board, please let me know as soon as possible if the five dollar fee is okay, not okay or if the matter should be delayed for a full-board discussion (either at the next Board meeting or a telephone conference call). Those who have already approved the emeritus registration fee need not respond unless they have changed their minds.

cc: David Carlson
Val Vikmanis
Terry Rogstad
Jack Breviu
Arthur Poore

OK for $5
David Thomas

Board meeting (and since I had a majority of the Committee vote), I decided to refer this to a Board vote.

Enclosed is a stamped envelope addressed to the Board, please let me know as soon as possible if the five dollar fee is okay, not okay or if the matter should be delayed for a full-board discussion (either at the next Board meeting or a telephone conference call). Those who have already approved the emeritus registration fee need not respond unless they have changed their minds.

cc: David Carlson
Val Vikmanis
Terry Rogstad
Jack Breviu
Arthur Poore

5 ok
or

Enclosed is a stamped envelope addressed to the Board, please let me know as soon as possible if the five dollar fee is okay, not okay or if the matter should be delayed for a full-board discussion (either at the next Board meeting or a telephone conference call). Those who have already approved the emeritus registration fee need not respond unless they have changed their minds.

cc: David Carlson
Val Vikmanis
Terry Rogstad
Jack Breviu
Arthur Poore

If we are within the $5.00 fee is fine with me. If Board wants to go as high as $10.00 that is fine also

Terry Olson
Bd. Member

to refer this to a Board vote.

Enclosed is a stamped envelope addressed to the Board, please let me know as soon as possible if the five dollar fee is okay, not okay or if the matter should be delayed for a full-board discussion (either at the next Board meeting or a telephone conference call). Those who have already approved the emeritus registration fee need not respond unless they have changed their minds.

cc: David Carlson
Val Vikmanis
Terry Rogstad
Jack Breviu
Arthur Poore

SF-00003-02

STATE OF MINNESOTA

Office Memorandum

DEPARTMENT: BOARD OF MEDICAL EXAMINERS

TO : Dave Carlson
Section of Accounts and Finance

DATE: November 23, 1982

FROM : Jack Wallace JW
Assistant Executive Secretary

PHONE: 623-5534

SUBJECT: Approval of the Emeritus Registration Fee for retired physicians

Enclosed are the documents necessary in order to obtain the approval of the registration fee at $5.00. The $5.00 fee has been approved by seven of the eleven Board members. I am still awaiting a response from the other four. However, since seven does constitute a quorum and a majority, I am proceeding. Please contact me if anything further is necessary.

cc: Board of Medical Examiners
Jack Breviu
Arthur Poore
James Cain, M.D.
Val Vikmanis
Terry Rogstad

SF-00008-02

STATE OF MINNESOTA

Office Memorandum

DEPARTMENT: BOARD OF MEDICAL EXAMINERS

DATE: November 23, 1982

TO : Allen Yozamp, Director
Budget Planning and Control

PHONE: 623-5534

FROM : Jack Wallace
Assistant Executive Secretary

SUBJECT: Board of Medical Examiners fee for the Emeritus Registration

Listed below is the fee approved for the emeritus registration adopted by the Board of Medical Examiners through a mail vote. The vote was initiated in response to a memo dated November 17. The fees are in accordance with Minnesota Statutes Sections 16 A. 128 and 214.06. in status and will not be subject to renewal fees.

The total amount of revenue anticipated to be generated by the emeritus registration, when combined with the total amount of revenue anticipated to be generated from other fees charged by the Board approximates the amount appropriated plus the portion of the general support costs and statewide indirect costs of the agency.

	FY 83
Emeritus Registration	$5.00

Approved:

_____ _____

Allen Yozamp
Director
Budget Planning and Control Division

Date

BOARD OF MEDICAL EXAMINERS

Proposed Fees to Cover F.Y. 83 Anticipated Expenditures

Source

Type of Service	Quantity	Proposed Fee	Proposed Income
Physician Annual Registrations	13,340	$20.00	266,800.00
Examination/Endorsement Application Fees	100/154	125.00/ 100.00	66,900.00
Temporary Graduate Training Permits	9	15.00	135.00
Certification to Other States	160	10.00	1,600.00
Temporary Licenses	210	40.00	8,400.00
Osteopathic Annual Registrations	15	20.00	300.00
Physical Therapy Annual Registrations	1,932	5.00	9,660.00
Physical Therapy App/Endors	100/70	70.00/15.00	8,050.00
Corp. Renewals/New Registration	712/100	25.00/100.00	27,800.00
Emeritus Physician Registration	250	5.00	1,250.00
			390,895.00

F.Y. 83 Appropriations	376,032.00
Anticipated Indirect Cost for Statewide Services	5,654.00
Anticipated Minnesota Department of Health General Support Costs	3,401.00
Total Anticipated Costs	385,087.00
F.Y. 83	5,808.00

SF-00004-02

STATE OF MINNESOTA

Office Memorandum

DEPARTMENT of Finance

TO : Jack Wallace, Assistant Executive Secretary
Board of Medical Examiners

DATE: December 22, 1982

FROM : Allen A. Yozamp
Assistant State Budget Director

PHONE: 296-5188

SUBJECT: Physician Emeritus Fee Request

The purpose of this memorandum is to respond to your request for approval of a $5.00 fee for physician emeritus registration.

We are unable to approve the fee at this time unless your agency indicates it plans to hold a public hearing regarding the fee. This decision is based on our interpretation of M.S. 16A.128 as amended by the 1981 third special session of the legislature. The last sentence of this statute now reads; "Fee adjustments authorized under this section may be made without a public hearing when the total fees estimated to be received during the fiscal biennium will not exceed the sum of all direct appropriations, indirect costs, transfers in, and salary supplements for that purpose for the biennium."

The following is the actual/anticipated receipts and costs for the Medical Examiners Board for the current biennium. The information was taken from your most recently submitted fee review.

	F.Y. 82	F.Y. 83
Receipts	$408.0	$390.6
Receipts - Emeritus Registration		2.3
Total Receipts	$408.0	$392.9
Costs	361.3	385.2
Difference	$ 46.7	$ 7.7

The total receipts estimated for the biennium exceed the estimated biennial cost before the addition of the new fee. By our interpretation; any fee adjustment that does not bring the difference between estimated receipts and costs for the biennium to a negative amount will require a public hearing. The fact that revenue approximates costs is no longer relevant when determining if a public hearing must be held.

We also will be requiring additional information for future rate change requests. At a hearing with the Legislative Commission to Review Administrative Rules, it was felt we should review the reasonableness of individual

fees along with groups of fees. This is a valid concern and we will require that requests include the approximation of cost of processing each individual fee charged. For example; the Physician annual registration could be shown as follows:

1 hour clerical at $8.00 per hour	=	$8.00
1/2 hour professional at $12 per hour	=	6.00
Overhead, Supply & Expense	=	2.00
		$16.00

If you wish to discuss our interpretation of M.S. 16A.128 or the fee change procedures please contact me or Richard Hoeft (296-5155).

AY/R.H./pm
cc: Tom Rice

SF-00008-02

STATE OF MINNESOTA

Office Memorandum

DEPARTMENT BOARD OF MEDICAL EXAMINERS

DATE: February 15, 1983

TO : Allen A. Yozamp
Assistant State Budget Director

FROM : Jack Wallace JW
Assistant Executive Secretary

PHONE: 623-5534

SUBJECT: Physician Emeritus Fee Request

This is in response to your letter of December 22, 1982, in which your agency was unable to approve our request for $5.00 fee for the physician emeritus registration. The main problem concerned the fact that for fiscal year 1983, our estimated receipts exceed estimated costs. According to M.S.16A.128, when an agency's estimated fees exceed estimated costs, a public hearing must be held if that agency wishes to implement a new fee or adjust an existing fee.

The emeritus registration for physicians is a newly proposed status, and is covered in proposed rule which will have to go through a public hearing before it becomes law. Subsection E. of the proposed emeritus registration rule establishes the fee for the registration, "The fee for such a document shall be one-fourth of the annual licensure fee." (The current annual licensure fee being twenty dollars, we would be willing to change the rule to a flat five dollars.) Since the emeritus registration fee is covered in the rule, and since the rule will go to public hearing, will this satisfy the legal requirement of M.S.16A.128? We are willing to highlight the subsection and to specify that the Board is planning on setting the fee at five dollars on the notices of the public hearing, if necessary. As you know the hearing examiner will not schedule a hearing for the rule unless all fees have been approved by your department. A copy of the proposed rule is enclosed (page 5).

Also in your memo you requested an approximate breakdown on the cost of processing an individual emeritus registration. The breakdown is as follows:

COST ITEM	COST
Registration card and Certificate (cost of paper, reproducing designs)	$ .10
Clerical personnel for the processing of initial registration, figured at fifteen minutes per applicant for a Clerk Typist II at the upper range of the pay scale. (consists of checking applicant's file for disciplinary action, typing wallet card, making Kroy lettering for certificates, xeroxing certificate, mailing out wallet cards and certificates, and any filing)	1.72

Staff personnel for the processing of initial registration, figured at three minutes per application for a Health Program Representative at the upper range of the pay scale. (would consist of dealing with any special problems related to the processing of applicants registrations)	.51
Postage and envelope for certificate	.47
Allowances for additional processing after licensure, figured at two minutes of clerical time and two minutes of staff time. (would consist of receiving and processing of any complaints and forward the complaints to the Board of Pharmacy and the Attorney General when applicable)	.56
	3.36

Please contact me in regards to this matter, should you have any questions, please contact our office.

cc: CME Committee
Chester Anderson, M.D.
James Cain, M.D.
Arthur Poore
Terry Rogstad
Dave Carlson
Tom Rice
Richard Hoeft

SF-00006-02

DEPARTMENT

STATE OF MINNESOTA

Office Memorandum

TO : Jack Wallace, Assistant Executive Secretary
Board of Medical Examiners

DATE: March 3, 1983

FROM : Allen A. Yozamp
Assistant State Budget Director

PHONE: 296-5188

SUBJECT: Physician Emeritus Fee Request

The purpose of this memorandum is to inform you that your request of a $5.00 fee for physician emeritus registration is approved.

Since your board indicates it intends to hold a public hearing the requirements of M.S. 16A. 128 will be met.

If you wish to discuss this fee approval or the fee procedures please contact me or Richard Hoeft (296-5155).

AY:RH/pa

H

The Minnesota State Board of Medical Examiners

EXECUTIVE OFFICE
Suite 332
717 Delaware Street S.E.
Minneapolis, Minnesota 55414
(612) 296-5334

November 4, 1982

Dean D. Nywall, M.D.
2744 Broadway Avenue
Dayton, Minnesota 56172

Dear Doctor Nywall:

The Board of Medical Examiners is presently attempting to promulgate rules which will establish an "emeritus registration" for those physicians who are retired. The rules have been drafted, I am currently finishing up a Statement of Need and Reasonableness for the new rule. The Statement of Need and Reasonableness is a very long and tedious document which establishes the fairness and need for a new rule. As part of my arguement for the new rule I was wondering if I could use your letter of October 2, 1981, addressed to the Board. I feel that your letter was an excellent summarization of the feelings of many retired doctors suddenly faced with a new requirement in order to keep their medical license, a requirement which they didn't have to meet when they were practicing.

The quote I wish to use is as follows: "it took 20 years, from high school till I finished my internship, to acquire my M.D., and I have practiced for 30 years... You have rules I know, but as I've stated, I have no intentions, for reasons of future health, of ever practicing medicine again. I would just like to continue to feel that I am a doctor of medicine."

Please let me know if it is okay for me to use this quote. Enclosed is a copy of the latest draft of the rules for your review, I can send you a copy of the Statement of Need and Reasonableness when it is completed.

Sincerely yours,

Jack Wallace

JACK WALLACE
Assistant Executive Secretary

You certainly may use the quote!
DDN

JW/bd

cc: Jack Breviu
Sam Grais
James Cain, M.D.
Arthur Poore

STATE OF MINNESOTA

COUNTY OF HENNEPIN

BEFORE THE MINNESOTA

BOARD OF MEDICAL EXAMINERS

In the Matter of the Proposed Rule Regarding the Establishment of an Emeritus Registration Status for Those Physicians and Osteopaths no Longer Wishing to Remain in Practice

CERTIFICATE OF COMPLIANCE WITH RULEMAKING PROCEDURES

I, Special Assistant Attorney General John A. Breviu, do hereby declare that I have examined the above-captioned and all related documents and that, based on my examination and my personal familiarity with the applicable procedures, the Administrative Procedure Act, the rules of the Office of Administrative Hearings, and the rules of the Attorney General have been followed without any exceptions.

Dated: April 16, 1984

JOHN A. BREVIU
Special Assistant
Attorney General

STATE OF MINNESOTA)
) ss.
COUNTY OF HENNEPIN)

In the Matter of the Proposed Rule Regarding the Establishment of an Emeritus Registration Status for Those Physicians and Osteopaths no Longer Wishing to Remain in Practice

AFFIDAVIT OF MAILING NOTICE OF SUBMISSION TO THE ATTORNEY GENERAL

Barbara DeLong, being first duly sworn, deposes and says:

That on the 16th day of April, 1984, in the City of Minneapolis, County of Hennepin, State of Minnesota, she served the attached Notice of Submission to the Attorney General by depositing in the United States mail at said City of Minneapolis, a copy thereof, properly enveloped, with postage prepaid, on all persons and associations who requested notice that the rule in the above-entitled matter has been submitted to the Attorney General.

Barbara J. DeLong
BARBARA DeLONG

Subscribed and sworn to before me
this 16th day of April, 1984.

Alice D. Hummer

ALICE D. HUMMER
NOTARY PUBLIC-MINNESOTA
RAMSEY COUNTY
MY COMMISSION EXPIRES NOVEMBER 18, 1988

STATE OF MINNESOTA

COUNTY OF HENNEPIN

BEFORE THE MINNESOTA

BOARD OF MEDICAL EXAMINERS

In the Matter of the Proposed Rule Regarding the Establishment of an Emeritus Registration Status for Those Physicians and Osteopaths no Longer Wishing to Remain in Practice

NOTICE OF SUBMISSION TO THE ATTORNEY GENERAL

Pursuant to your request and in accordance with Minn. Stat. § 14.26 (Supp. 1983):

PLEASE TAKE NOTICE that the above-captioned rule was submitted to the Office of the Attorney General on April 16, 1984, for review as to form and legality. Pursuant to 1 MCAR § 1.206 C, the Attorney General will not approve the rule for at least 10 calendar days after receipt to allow any person or association time to comment on the legality of the rule. If you desire to comment on the legality of the above-captioned rule, you should direct your comments to the Office of the Attorney General, 204 Administration Building, 50 Sherburne Avenue, St. Paul, Minnesota 55155, telephone (612) 296-1288. Please note that the above-cited rule of the Attorney General also provides that a copy of any written comments submitted to the Attorney General must be submitted simultaneously to this Board.

If you are interested in determining what changes, if any, were made in the proposed rule before submission to the Attorney General, you may contact:

Jack Wallace, Minnesota Board of Medical Examiners, 717 Delaware Street Southeast, Minneapolis, Minnesota 55414, telephone: (612) 623-5534.

Dated: April 16th, 1984

BEFORE THE MINNESOTA

BOARD OF MEDICAL EXAMINERS

Arthur W Poore

ARTHUR W. POORE
Executive Secretary