STATE OF MINNESOTA

Journal of the Senate

EIGHTIETH LEGISLATURE

EIGHTEENTH DAY

St. Paul, Minnesota, Monday, March 3, 1997

The Senate met at 10:00 a.m. and was called to order by the President.

CALL OF THE SENATE

Mr. Betzold imposed a call of the Senate. The Sergeant at Arms was instructed to bring in the absent members.

Prayer was offered by the Chaplain, Rev. Wanda R. Copeland.

The members of the Senate gave the pledge of allegiance to the flag of the United States of America.

The roll was called, and the following Senators answered to their names:

Anderson	Hanson
Beckman	Higgins
Belanger	Hottinger
Berg	Janezich
Berglin	Johnson, D.E.
Betzold	Johnson, D.H.
Cohen Day Dille	Johnson, D.J. Johnson, J.B.
Fischbach Flynn	Junge Kelley, S.P. Kiscaden
Foley	Kleis
Frederickson	Knutson

Krentz Laidig Langseth Larson Limmer Lourey Marty Metzen Moe, R.D. Morse Murphy Novak Oliver Olson Ourada Pappas Pariseau Piper Pogemiller Price Ranum Robertson Robling Runbeck Sams Samuelson Scheevel Scheid Solon Stevens Stumpf Ten Eyck Terwilliger Vickerman Wiger

The President declared a quorum present.

The reading of the Journal was dispensed with and the Journal, as printed and corrected, was approved.

MEMBERS EXCUSED

Mr. Kelly, R.C.; Ms. Lesewski, Messrs. Lessard, Neuville, Spear and Ms. Wiener were excused from the Session of today.

EXECUTIVE AND OFFICIAL COMMUNICATIONS

The following communication was received.

CERTIFICATION

February 27, 1997

To the Governor State of Minnesota

To the Senate State of Minnesota

To the House of Representatives State of Minnesota

This is to certify that the House of Representatives and the Senate in Joint Convention on Thursday, February 27, 1997, have elected as members of the Board of Regents of the University of Minnesota the following members each to hold his or her respective office for the term specified for each from the second Friday in March:

H. Bryan Neel, III, First Congressional District, Six Years

David Metzen, Fourth Congressional District, Six Years

Michael O'Keefe, Fifth Congressional District, to fill the remainder of the term of Jean Keffeler to expire in Four Years

Maureen Reed, Sixth Congressional District, Six Years

Robert Bergland, Seventh Congressional District, Six Years

Allan H. Spear President of the Senate

Phil Carruthers Speaker of the House of Representatives

MESSAGES FROM THE HOUSE

Mr. President:

I have the honor to announce the passage by the House of the following Senate File, AS AMENDED by the House, in which amendments the concurrence of the Senate is respectfully requested:

S.F. No. 202: A bill for an act relating to property; validating certain conveyances by religious corporations; requiring published notice of dispositions of certain real property in a marriage dissolution action; regulating property held in revocable trusts upon the dissolution of marriage; regulating specific devises and distributions of property under uniform probate code; amending Minnesota Statutes 1996, sections 315.121; 518.11; 524.2-402; 524.2-403; and 524.2-606; proposing coding for new law in Minnesota Statutes, chapters 501B; and 524.

Senate File No. 202 is herewith returned to the Senate.

Edward A. Burdick, Chief Clerk, House of Representatives

Returned February 27, 1997

Mr. Ten Eyck moved that S.F. No. 202 be laid on the table. The motion prevailed.

Mr. President:

I have the honor to announce the passage by the House of the following House Files, herewith transmitted: H.F. Nos. 100, 219 and 268.

Edward A. Burdick, Chief Clerk, House of Representatives

Transmitted February 27, 1997

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MONDAY, MARCH 3, 1997

FIRST READING OF HOUSE BILLS

The following bills were read the first time and referred to the committees indicated.

H.F. No. 100: A bill for an act relating to public safety; providing for emergency expenditures related to the continuing severe weather conditions and their aftermath; providing additional funding for state road operations and state trooper overtime in fiscal year 1997; making certain cross-reference corrections; appropriating money; amending Minnesota Statutes 1996, sections 84.912, subdivision 1; 86B.337, subdivision 1; 168.042, subdivision 1; 169.121, subdivision 4; 169.1217, subdivision 1; 171.043; 171.24, subdivision 5; 171.30, subdivision 3; and 171.305, subdivision 5.

Mr. Moe, R.D. moved that H.F. No. 100 be laid on the table. The motion prevailed.

H.F. No. 219: A bill for an act relating to employment; requiring leaves of absence without pay for employees rendering services as members of the civil air patrol; proposing coding for new law in Minnesota Statutes, chapter 181.

Referred to the Committee on Rules and Administration for comparison with S.F. No. 118.

H.F. No. 268: A bill for an act relating to corrections; modifying multiple occupancy requirements applicable to state prisons; amending the appropriation to build a close-custody correctional facility of at least 800 beds; providing that the new facility shall be at level four; deleting certain construction bid requirements; amending Minnesota Statutes 1996, section 243.53, subdivision 1; Laws 1996, chapter 463, section 16, subdivision 3; repealing Minnesota Statutes 1996, section 243.53, subdivision 2.

Referred to the Committee on Rules and Administration for comparison with S.F. No. 179, now on General Orders.

REPORTS OF COMMITTEES

Mr. Moe, R.D. moved that the Committee Reports at the Desk be now adopted, with the exception of the report pertaining to the appointment. The motion prevailed.

Mr. Lessard from the Committee on Environment and Natural Resources, to which was referred

S.F. No. 433: A bill for an act relating to the Sauk River watershed district; authorizing a levy for its administrative fund.

Reports the same back with the recommendation that the bill do pass and be re-referred to the Committee on Taxes. Report adopted.

Mr. Lessard from the Committee on Environment and Natural Resources, to which was referred

S.F. No. 474: A bill for an act relating to watershed districts; authorizing an ad valorem tax levy to pay the costs of projects and to secure bonds and notes issued by watershed districts in connection with state loan programs; amending Minnesota Statutes 1996, section 103D.905, subdivisions 4, 5, and by adding a subdivision.

Reports the same back with the recommendation that the bill be amended as follows:

Page 1, line 24, before the period, insert "through December 31, 1996"

Page 2, delete lines 28 to 36 and insert:

"(1) to pay the costs of projects undertaken by the watershed district which are to be funded, in

whole or in part, with the proceeds of grants or construction or implementation loans under sections 103F.701 to 103F.761;

(2) to pay the principal of, or premium or administrative surcharge, if any, and interest on, the bonds and notes issued by the watershed district pursuant to section 103F.725; or

(3) to repay the construction or implementation loans under sections 103F.701 to 103F.761."

Page 3, after line 2, insert:

"Sec. 4. [EFFECTIVE DATE.]

This act is effective the day following final enactment."

And when so amended the bill do pass and be re-referred to the Committee on Taxes. Amendments adopted. Report adopted.

Mr. Metzen from the Committee on Governmental Operations and Veterans, to which was referred

S.F. No. 463: A bill for an act relating to the Minnesota humanities commission; allowing rentals to offset certain costs; amending Laws 1994, chapter 643, section 72, as amended.

Reports the same back with the recommendation that the bill be amended as follows:

Page 1, after line 23, insert:

"Sec. 2. [EFFECTIVE DATE.]

Section 1 is effective the day following final enactment."

Amend the title as follows:

Page 1, line 2, delete "Minnesota humanities commission" and insert "city of St. Paul education center and teacher training institute"

And when so amended the bill do pass and be placed on the Consent Calendar. Amendments adopted. Report adopted.

Mr. Metzen from the Committee on Governmental Operations and Veterans, to which was referred

S.F. No. 96: A bill for an act relating to public safety; preserving certain exempt rules of department of public safety; requiring department to adopt permanent rules in place of some formerly exempt rules; amending Minnesota Statutes 1996, sections 14.387; 169.128; 169.452; 171.321, subdivision 2; 216D.03, subdivision 2; and 624.22, subdivision 1.

Reports the same back with the recommendation that the bill be amended as follows:

Pages 1 to 3, delete section 1

Pages 3 to 8, delete sections 3 to 8

Renumber the sections in sequence

Amend the title as follows:

Page 1, line 2, delete from "preserving" through page 1, line 5, to "rules" and insert "changing certain rulemaking requirements"

Page 1, delete lines 6 to 8 and insert "1996, section 169.128."

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And when so amended the bill do pass. Amendments adopted. Report adopted.

Mr. Vickerman from the Committee on Local and Metropolitan Government, to which was referred

S.F. No. 504: A bill for an act relating to local government; permitting the city of Nashwauk to own and operate a gas utility.

Reports the same back with the recommendation that the bill be amended as follows:

Page 1, delete lines 6 to 8 and insert:

"The city of Nashwauk may construct and own one gas distribution line connecting an area recently acquired by the city, and not currently served by a natural gas utility, with a natural gas pipeline serving the region. Solely for the purpose of operating this gas line, and distributing gas to customers located in the recently acquired area, the city may establish a municipal gas utility without the election required under Minnesota Statutes, section 412.321, subdivision 2."

And when so amended the bill do pass. Amendments adopted. Report adopted.

Mr. Vickerman from the Committee on Local and Metropolitan Government, to which was referred

S.F. No. 388: A bill for an act relating to municipalities; authorizing bankruptcy filing; proposing coding for new law in Minnesota Statutes, chapter 471.

Reports the same back with the recommendation that the bill be amended as follows:

Page 1, line 15, before the period, insert ", but limited to a county, statutory or home rule charter city, or town; or a housing and redevelopment authority, port authority, economic development authority, or rural development financing authority established under chapter 469, a home rule charter, or special law"

And when so amended the bill do pass. Amendments adopted. Report adopted.

Mr. Vickerman from the Committee on Local and Metropolitan Government, to which was referred

S.F. No. 562: A bill for an act relating to metropolitan government; metropolitan area transit; providing for the financing of metropolitan area transit and paratransit capital expenditures; modifying the requirements for employer sales of discount bus passes; deleting obsolete and duplicative language; authorizing a demonstration program for alternative allocations of regional transit subsidies and changes in eligibility for transit tax-feathering; repealing obsolete rules; amending Minnesota Statutes 1996, sections 473.39, by adding a subdivision; 473.408, subdivision 7; and 473.446, subdivision 1a; repealing Minnesota Rules, parts 8840.0100; 8840.0200; 8840.0300; 8840.0400; 8840.0500; 8840.0600; 8840.0700; 8840.0800; 8840.0900; 8840.1000; 8840.1100; 8840.1200; and 8840.1300.

Reports the same back with the recommendation that the bill do pass and be re-referred to the Committee on Transportation. Report adopted.

Mr. Vickerman from the Committee on Local and Metropolitan Government, to which was referred

S.F. No. 700: A bill for an act relating to statutory cities; providing that the offices of mayor of a statutory city and fire chief of an independent nonprofit firefighting corporation are not incompatible under certain circumstances; proposing coding for new law in Minnesota Statutes, chapter 412.

Reports the same back with the recommendation that the bill be amended as follows:

Page 1, line 16, after "salary" insert "or benefits"

And when so amended the bill do pass. Amendments adopted. Report adopted.

Mr. Vickerman from the Committee on Local and Metropolitan Government, to which was referred

S.F. No. 124: A bill for an act relating to towns; authorizing the charging and collection of certain service charges; proposing coding for new law in Minnesota Statutes, chapter 366.

Reports the same back with the recommendation that the bill be amended as follows:

Page 1, line 8, after "a" insert "reasonable"

And when so amended the bill do pass. Amendments adopted. Report adopted.

Mr. Novak from the Committee on Jobs, Energy and Community Development, to which was referred

S.F. No. 118: A bill for an act relating to employment; requiring leaves of absence without pay for employees rendering services as members of the civil air patrol; proposing coding for new law in Minnesota Statutes, chapter 181.

Reports the same back with the recommendation that the bill be amended as follows:

Page 1, line 11, before "<u>An</u>" insert "<u>Unless the leave would unduly disrupt the operations of the</u> employer,"

And when so amended the bill do pass. Amendments adopted. Report adopted.

Mr. Solon from the Committee on Commerce, to which was referred

S.F. No. 495: A bill for an act relating to insurance; health; requiring coverage for diabetes outpatient self-management training and education; amending Minnesota Statutes 1996, section 62A.45.

Reports the same back with the recommendation that the bill do pass. Report adopted.

Mr. Hottinger from the Committee on Health and Family Security, to which was referred

S.F. No. 652: A bill for an act relating to human services; establishing a task force to study treatment options for autism.

Reports the same back with the recommendation that the bill do pass and be re-referred to the Committee on Governmental Operations and Veterans. Report adopted.

Ms. Berglin from the Committee on Human Resources Finance, to which was re-referred

S.F. No. 114: A bill for an act relating to local and state government; providing for emergency expenditures related to the continuing severe weather conditions and their aftermath; appropriating money.

Reports the same back with the recommendation that the bill be amended as follows:

Page 2, line 5, delete everything after "1"

Page 2, line 6, delete everything before the period

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Page 2, line 15, after the period, insert "The commissioner may use up to \$13,800 for administration of the program out of the \$5,000,000 available to match federal disaster assistance related to 1997 snowfall."

And when so amended the bill do pass. Amendments adopted. Report adopted.

Mr. Novak from the Committee on Jobs, Energy and Community Development, to which was referred

S.F. No. 120: A bill for an act relating to housing programs; modifying eligibility for accessibility loans; authorizing equity take-out loans for section 236 rental property; clarifying eligible projects under the housing trust fund; modifying eligible uses of the mortgage foreclosure prevention and emergency rental assistance program; repealing the special needs housing for homeless persons program; amending Minnesota Statutes 1996, sections 268.38, subdivision 7; 462A.05, subdivisions 14d, 30, 39, and by adding a subdivision; 462A.201, subdivision 2; 462A.207, subdivisions 1, 2, 3, 4, and 6; 462A.21, subdivision 12a; repealing Minnesota Statutes 1996, sections 268.39; 462A.05, subdivision 20; and 462A.21, subdivisions 4k, 12, and 14.

Reports the same back with the recommendation that the bill be amended as follows:

Page 3, after line 32, insert:

"Sec. 5. Minnesota Statutes 1996, section 462A.205, subdivision 4a, is amended to read:

Subd. 4a. [ADDITIONAL AUTHORIZED EXPENSES.] In addition to the monthly rent assistance authorized under subdivision 4, rent assistance may include up to \$200 for a security deposit for housing located outside the metropolitan area, as defined in section 473.121, subdivision 2, and up to \$250 for a security deposit for housing located within the metropolitan area."

Renumber the sections in sequence

Amend the title as follows:

Page 1, line 12, after the semicolon, insert "462A.205, subdivision 4a;"

And when so amended the bill do pass. Amendments adopted. Report adopted.

Ms. Flynn from the Committee on Transportation, to which was referred

S.F. No. 166: A bill for an act relating to motor vehicles; allowing sale 15 days after notice of vehicles impounded in Minneapolis or St. Paul; amending Minnesota Statutes 1996, sections 168B.051; and 168B.06, subdivision 3.

Reports the same back with the recommendation that the bill be amended as follows:

Delete everything after the enacting clause and insert:

"Section 1. Minnesota Statutes 1996, section 168B.051, is amended by adding a subdivision to read:

Subd. 1a. [SALE 25 DAYS AFTER NOTICE BY CERTIFIED MAIL.] An unauthorized vehicle impounded by the city of Minneapolis, by the city of St. Paul, or in the city of Bloomington is eligible for disposal or sale under section 168B.08, 25 days after notice is sent by certified mail, return receipt requested, to the registered owner, if any, of the unauthorized vehicle and to all readily identifiable lienholders of record. If, before the expiration of the 25-day period following notice of taking, the registered owner or lienholder of record delivers to the impound lot operator a written statement of intent to reclaim the vehicle, the vehicle is not eligible for disposal or sale until 45 days after the notice of taking, if the owner or lienholder has not reclaimed under section 168B.07. Notwithstanding section 168B.06, subdivision 3, a second notice shall not be required.

Sec. 2. Minnesota Statutes 1996, section 168B.051, subdivision 2, is amended to read:

Subd. 2. [SALE AFTER 45 DAYS.] An impounded vehicle is eligible for disposal or sale under section 168B.08, 45 days after notice to the owner, if the vehicle is determined to be an unauthorized vehicle that was not impounded by the city of Minneapolis, the city of St. Paul, or in the city of Bloomington.

Sec. 3. Minnesota Statutes 1996, section 168B.06, subdivision 1, is amended to read:

Subdivision 1. [CONTENTS; NOTICE GIVEN WITHIN TEN DAYS.] When an impounded vehicle is taken into custody, the unit of government or impound lot operator taking it into custody shall give notice of the taking within ten days. The notice shall (a) set forth the date and place of the taking, the year, make, model and serial number of the impounded motor vehicle if such information can be reasonably obtained and the place where the vehicle is being held, (b) inform the owner and any lienholders of their right to reclaim the vehicle under section 168B.07, and (c) state that failure of the owner or lienholders to exercise their right to reclaim the vehicle and contents within the appropriate time allowed under section 168B.051, subdivision 1, 1a, or 2, shall be deemed a waiver by them of all right, title, and interest in the vehicle and contents and a consent to the transfer of title to and disposal or sale of the vehicle and contents pursuant to section 168B.08.

Sec. 4. Minnesota Statutes 1996, section 168B.07, subdivision 1, is amended to read:

Subdivision 1. [PAYMENT OF CHARGES.] The owner or any lienholder of an impounded vehicle shall have a right to reclaim such vehicle from the unit of government or impound lot operator taking it into custody upon payment of all towing and storage charges resulting from taking the vehicle into custody within $\frac{15}{25}$ or 45 days, as applicable under section 168B.051, subdivision 1, 1a, or 2, after the date of the notice required by section 168B.06.

Sec. 5. Minnesota Statutes 1996, section 168B.087, subdivision 1, is amended to read:

Subdivision 1. [DEFICIENCY CLAIM.] (a) The nonpublic impound lot operator has a deficiency claim against the registered owner of the vehicle for the reasonable costs of services provided in the towing, storage, and inspection of the vehicle minus the proceeds of the sale or auction.

(b) The claim for storage costs may not exceed the costs of:

(1) 25 days storage, for a vehicle described in section 168B.051, subdivision 1; and

(2) 35 days storage, for a vehicle described in section 168B.051, subdivision 1a; and

(3) 55 days storage, for a vehicle described in section 168B.051, subdivision 2.

Sec. 6. [LOCAL APPROVAL.]

This act is effective the day after compliance with Minnesota Statutes, section 645.021, subdivision 3, by the cities of Minneapolis, St. Paul, and Bloomington."

Delete the title and insert:

"A bill for an act relating to motor vehicles; allowing sale 25 days after notice of vehicles impounded by Minneapolis, St. Paul, or Bloomington; amending Minnesota Statutes 1996, sections 168B.051, subdivision 2, and by adding a subdivision; 168B.06, subdivision 1; 168B.07, subdivision 1; and 168B.087, subdivision 1."

And when so amended the bill do pass. Amendments adopted. Report adopted.

Ms. Ranum from the Committee on Judiciary, to which was referred

S.F. No. 211: A bill for an act relating to marriage dissolution; requiring certain notices

regarding real property and debt transfers; proposing coding for new law in Minnesota Statutes, chapter 518.

Reports the same back with the recommendation that the bill be amended as follows:

Delete everything after the enacting clause and insert:

"Section 1. [518.584] [REQUIRED NOTICE REGARDING REAL PROPERTY AND DEBT TRANSFERS.]

Subdivision 1. [REAL PROPERTY.] A judgment or decree of dissolution or legal separation that involves transfer of real property must include the following notice to the parties:

"REAL PROPERTY TRANSFERS.

A party required by this document to transfer an interest in real property to another party must promptly execute all documents necessary to effect the transfer of that interest and must deliver those documents to the party awarded the interest, unless the judgment or decree provides that it will operate to pass title even if a deed is not given."

Subd. 2. [CREDIT CARD OR OTHER DEBT.] <u>A judgment or decree of dissolution or legal</u> separation that involves the assumption by one party of credit card or other debt previously shared by the parties must include the following notice to the parties:

"TRANSFER OF CREDIT CARD OR OTHER DEBT.

A party required by this document to assume credit card or other debt previously shared by the parties must promptly notify the creditor of that assumption of the debt and execute all documents and take all actions necessary to protect the other party from liability under the debt and from liability for any future debt incurred under an account."

Sec. 2. Minnesota Statutes 1996, section 519.05, is amended to read:

519.05 [LIABILITY OF HUSBAND AND WIFE.]

(a) A spouse is not liable to a creditor for any debts of the other spouse, except for necessaries furnished to the other after marriage, where the spouse would be liable at common law. Where husband and wife are living together, they shall be jointly and severally liable for all necessary household articles and supplies furnished to and used by the family. utilities supplied to a residence when the spouses are living together. Notwithstanding this paragraph, in a proceeding under chapter 518, the court may apportion the debt between the spouses.

(b) A spouse is not liable for debt incurred by the other spouse in a joint account after the creditor has received notice from the spouse that the spouse disclaims further liability on that account."

Delete the title and insert:

"A bill for an act relating to marriage dissolution; requiring certain notices regarding real property and debt transfers; providing that a spouse is not liable for debt incurred on a joint account after disclaiming liability to the creditor; amending Minnesota Statutes 1996, section 519.05; proposing coding for new law in Minnesota Statutes, chapter 518."

And when so amended the bill do pass. Amendments adopted. Report adopted.

Ms. Ranum from the Committee on Judiciary, to which was referred

S.F. No. 135: A bill for an act relating to civil actions; authorizing civil actions against student organizations for damages relating to hazing; proposing coding for new law in Minnesota Statutes, chapter 127.

Reports the same back with the recommendation that the bill be amended as follows:

Delete everything after the enacting clause and insert:

"Section 1. [127.465] [HAZING POLICY.]

Subdivision 1. [DEFINITIONS.] (a) "Hazing" means doing an act against a pupil, or coercing a pupil into doing an act, in order for the pupil to be initiated into or affiliated with a pupil organization, if the act creates a substantial risk of harm to any person.

(b) "Student organization" means a group, club, or organization that has pupils as its primary members or participants.

<u>Subd. 2.</u> [MODEL POLICY.] <u>The commissioner of children, families, and learning shall</u> maintain and make available to school boards a model policy on hazing by pupils that addresses the requirements of subdivision 3. Each school board shall submit a copy of its hazing policy to the commissioner.

<u>Subd. 3.</u> [SCHOOL BOARD POLICY.] Each school board shall adopt a written policy governing hazing by students. The policy must apply to behavior that occurs on or off school property and during and after school hours. The policy must include reporting procedures and disciplinary actions against pupils that will be taken for a violation of the policy. Disciplinary actions must be of sufficient severity to deter violations and provide sanctions for the behavior. Disciplinary actions must conform with sections 127.27 to 127.39. The policy must be included in each school's student handbook on school policies and must be conspicuously posted in each school building.

Sec. 2. Minnesota Statutes 1996, section 128C.02, subdivision 2, is amended to read:

Subd. 2. [SEXUAL HARASSMENT AND VIOLENCE; HAZING.] The board of the league shall adopt a policy, rules, penalties, and recommendations addressing sexual harassment and sexual violence and hazing toward and by participants in league activities.

Sec. 3. [135A.155] [HAZING POLICY.]

The board of trustees of the Minnesota state colleges and universities shall, and the University of Minnesota is requested to, adopt a clear, understandable written policy on hazing by students. The policy must include behavior that occurs on and off property owned by the institution. The policy must include procedures for reporting incidents of inappropriate hazing and for disciplinary actions against individual violators and organizations. The disciplinary actions must be of sufficient severity to deter violations and provide sanctions for the behavior. The policy must be provided to students when they register and must be posted at appropriate locations on campus. A private post-secondary institution that is an eligible institution as defined in section 136A.101, subdivision 4, must adopt a policy that meets the requirements of this section.

Sec. 4. [CONSULTATION.]

The commissioner of children, families, and learning shall consult with the Minnesota school board association in preparing the model hazing policy under section 1.

Sec. 5. [EFFECTIVE DATE.]

Section 1 is effective January 1, 1998."

Delete the title and insert:

"A bill for an act relating to hazing; requiring secondary and post-secondary institutions to adopt policies on hazing by students; amending Minnesota Statutes 1996, section 128C.02, subdivision 2; proposing coding for new law in Minnesota Statutes, chapters 127; and 135A."

And when so amended the bill do pass and be re-referred to the Committee on Children, Families and Learning. Amendments adopted. Report adopted.

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Mr. Hottinger from the Committee on Health and Family Security, to which was referred

S.F. No. 641: A bill for an act relating to utilization review organizations; requiring a peer of the treating mental health or substance abuse provider to review a utilization review organization's determination not to certify a mental health or substance abuse service; amending Minnesota Statutes 1996, section 62M.09, subdivision 3, and by adding a subdivision.

Reports the same back with the recommendation that the bill be amended as follows:

Page 1, line 23, after "provider" insert "or a physician"

Page 1, line 24, after "review" insert ":

(1)"

Page 1, line 27, after "appropriate" insert a semicolon and delete "an appeal has" and insert:

"(2) all appeals of determinations not to certify made pursuant to clause (1)."

Page 2, delete line 1

And when so amended the bill do pass. Amendments adopted. Report adopted.

Mr. Hottinger from the Committee on Health and Family Security, to which was referred

S.F. No. 510: A bill for an act relating to health; establishing licensing requirements for the provision of ambulance service; relocating provisions related to emergency medical services; appropriating money; providing penalties; proposing coding for new law as Minnesota Statutes, chapter 144E; repealing Minnesota Statutes 1996, sections 144.801; 144.802; 144.803; 144.804; and 144.806.

Reports the same back with the recommendation that the bill be amended as follows:

Page 2, line 7, delete "certified" and insert "registered"

Page 2, line 9, delete the colon

Page 2, line 10, delete everything before the first "a"

Page 2, line 13, delete from "; or" through page 2, line 15, to "team"

Page 6, line 16, delete from "<u>The</u>" through page 6, line 20, to "<u>board</u>." and insert "<u>The board</u> shall approve the application and grant a license to the applicant within 30 days after final submission of requested information to the board, and upon a determination by the board that the applicant is in compliance with the rules adopted by the board and with the inspection requirements of section 144E.18."

Page 8, line 34, delete from "Within" through page 9, line 5, to "6." and insert "After receiving the administrative law judge's report, the board shall approve or deny the application and grant the license within 60 days if the application is approved, and upon determination by the board, that the applicant is in compliance with the rules adopted by the board and with the inspection requirements of section 144E.18. In approving or denying an application, the board shall consider the administrative law judge's report, the evidence contained in the application, and any hearing record and other applicable evidence. The board's decision shall be based on a consideration of the factors contained in subdivision 6."

Page 14, after line 7, insert:

"Subd. 7. [FIRST RESPONDER REGISTRATION.] The board shall adopt rules to establish a registration program for first responders and first responder squads."

Page 17, after line 11, insert:

"Sec. 13. [FIRST RESPONDER REGISTRATION.]

Subdivision 1. [TRAINING PROGRAMS.] Until rules are adopted by the board, curriculum for initial and refresher training programs must meet the current standards of the United States Department of Transportation First Responder curriculum or its equivalent as determined by the board.

Subd. 2. [REGISTRATION.] Until rules are adopted by the board, the board shall register the following persons as first responders:

(1) a person who successfully completes a board-approved initial or refresher first responder training program. Registration under this clause is valid for two years and expires at the end of the month in which the registration was issued; or

(2) a person who is credentialed as a first responder by the National Registry of Emergency Medical Technicians. Registration under this clause expires the same day as the National Registry credential.

Subd. 3. [RENEWAL.] (a) Until rules are adopted by the board, the board may renew the registration of a first responder who:

(1) successfully completes a board-approved refresher course; and

(2) submits a completed renewal application to the board before the registration expiration date.

(b) Until rules are adopted by the board, the board may renew the lapsed registration of a first responder who:

(1) successfully completes a board-approved refresher course; and

(2) submits a completed renewal application to the board within 12 months after the registration expiration date.

Subd. 4. [EXPIRATION.] <u>A first responder registration issued by the board or the commissioner of health before August 1, 1997, expires in 1999 at the end of the month in which it was issued."</u>

Renumber the sections in sequence

And when so amended the bill do pass and be re-referred to the Committee on Judiciary. Amendments adopted. Report adopted.

Mr. Hottinger from the Committee on Health and Family Security, to which was referred

S.F. No. 597: A bill for an act relating to human services; establishing an alternative grant application process for categorical social service programs in Pine county.

Reports the same back with the recommendation that the bill be amended as follows:

Delete everything after the enacting clause and insert:

"Section 1. [AUTHORIZATION FOR PROGRAM.]

Pine county and up to four additional counties with a population of less than 30,000 may use a letter of intent in lieu of completing an application for social service and employment service grants, including family services collaboratives grants. For competitive grants, the departments of human services, children, families, and learning, and economic security shall develop an alternate grantee selection process that is based primarily on documented need.

If the county's request for funding is accepted by the commissioners of the departments of human services, children, families, and learning, and economic security, the appropriate commissioner shall distribute the amount of funds requested by the county up to the amount of the county's allocation or an amount consistent with the grant and proportionate to that county.

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The county board shall approve the letter of intent. The letter of intent shall include: an agreement to use the funds for the purpose intended by the grant, a brief description of the services to be provided, the outcomes the services are intended to provide, and assurances that the county will follow all applicable laws and rules associated with the use of the grant funds.

Sec. 2. [FUTURE FUNDING.]

The commissioners of the departments of human services, children, families, and learning, and economic security may withhold future funding if a determination is made that the county has not met the requirements of the program funded by the alternative funding process. The commissioners shall first provide the county with an appeal process and a 60-day notice of intent to reduce or end funding received under section 1.

Sec. 3. [REPORT.]

The state planning agency shall provide to the legislature a report by January 15, 1999, on the feasibility of using the alternative funding process for counties with less than 30,000 population.

Sec. 4. [SERVICE DELIVERY PLAN.]

Pine county and the other counties using this alternative application process for grants may annually update their service delivery plan to reflect changes in the approved budget or services delivered in lieu of submitting a biennial community social services plan, a local service unit plan, a family services collaborative plan, or a grant application, and other plan document requirements of the departments of human services, children, families, and learning, and economic security. The service delivery plan must be an ongoing planning document that incorporates the major requirements of the plans it replaces.

Sec. 5. [EFFECTIVE DATE.]

Sections 1 to 4 are effective July 1, 1997.

Sec. 6. [SUNSET.]

Sections 1 to 4 sunset on June 30, 2001."

And when so amended the bill do pass and be re-referred to the Committee on Children, Families and Learning. Amendments adopted. Report adopted.

Mr. Hottinger from the Committee on Health and Family Security, to which was referred

S.F. No. 639: A bill for an act relating to health occupations; establishing a physician assistant advisory council; proposing coding for new law in Minnesota Statutes, chapter 147A.

Reports the same back with the recommendation that the bill do pass and be re-referred to the Committee on Governmental Operations and Veterans. Report adopted.

Mr. Hottinger from the Committee on Health and Family Security, to which was referred

S.F. No. 352: A bill for an act relating to health occupations; permitting physician assistants to render emergency care without physician supervision; granting immunity to physician assistants who render emergency care; amending Minnesota Statutes 1996, section 147A.15, by adding a subdivision; proposing coding for new law in Minnesota Statutes, chapter 147A.

Reports the same back with the recommendation that the bill be amended as follows:

Page 1, line 12, delete "AN EMERGENCY" and insert "A DISASTER"

Page 2, line 8, delete "EMERGENCY" and insert "DISASTER"

Page 2, lines 11 and 12, delete "an emergency or"

Page 2, line 14, delete everything before "a"

Page 2, line 16, after the period, insert "Physician supervision, as required under section 147A.09, must be provided under the direction of the emergency medical director in accordance with rules adopted by the emergency medical services board under section 144.804."

Page 2, line 17, delete "A" and insert "The" and delete "may provide" and insert "who provides"

Page 2, line 19, after "section" insert "may do so"

And when so amended the bill do pass and be re-referred to the Committee on Judiciary. Amendments adopted. Report adopted.

Mr. Solon from the Committee on Commerce, to which was referred

S.F. No. 501: A bill for an act relating to commerce; providing powers and duties to the commissioner; regulating securities; modifying the real estate licensing exemption for closing agents; regulating real property appraisers; regulating residential building contractors and remodelers; modifying licensing requirements for collection agencies; regulating notaries public; making technical changes; amending Minnesota Statutes 1996, sections 45.011, subdivision 1; 45.028, subdivision 1; 80A.04, subdivisions 3, 4, and by adding a subdivision; 80A.05, subdivisions 4, 5, and by adding a subdivision; 80A.06, subdivisions 1, 2, and 3; 80A.08; 80A.12, by adding a subdivision; 80A.14, subdivision 3, and by adding subdivisions; 80A.15, subdivisions 1 and 2; 80A.28, subdivisions 1 and 2; 82.20, subdivision 15; 82B.13, subdivisions 1, 4, and 5; 82B.14; 326.83, subdivision 11; 326.84, subdivision 3; 326.921; 332.33, subdivision 1, and by adding a subdivision; 332.34; 359.061; and 359.071; proposing coding for new law in Minnesota Statutes, chapters 45; 60K; and 80A; repealing Minnesota Statutes 1996, section 60K.07, subdivision 1.

Reports the same back with the recommendation that the bill be amended as follows:

Page 3, line 35, after "section" insert "12(b) or"

Page 4, line 26, after "by" insert "the"

Page 8, line 33, delete "<u>a broker dealer who effects</u>" and insert "<u>an individual who represents a</u> broker-dealer in effecting"

Page 9, after line 3, insert:

"Sec. 20. Minnesota Statutes 1996, section 80A.14, subdivision 4, is amended to read:

Subd. 4. [BROKER-DEALER.] "Broker-dealer" means any person engaged in the business of effecting transactions in securities for the account of others or for that person's own account. "Broker-dealer" does not include:

(1) an agent;

(2) an issuer;

- (3) a trust company; or
- (4) a bank, savings institution, savings association, credit union:

(i) acting for the account of others, provided that such activities are conducted in compliance with such rules as may be adopted by the commissioner;

(ii) acting for its own account; or

(iii) acting in a fiduciary capacity pursuant to the powers and privileges described by sections 48.36 to 48.49 or United States Code, title 12, section 92(a);

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(5) a person who has no place of business in this state if that person effects transactions in this state exclusively with or through (i) the issuers of the securities involved in the transactions, (ii) other broker-dealers, or (iii) banks, savings institutions, trust companies, insurance companies, investment companies as defined in the Investment Company Act of 1940, pension or profit sharing trusts, or other financial institutions or institutional buyers, or to broker-dealers, whether the purchaser is acting for itself or in some fiduciary capacity; or

(6) other persons not within the intent of this subsection whom the commissioner by rule or order designates."

Page 22, after line 9, insert:

"Sec. 26. Minnesota Statutes 1996, section 80A.16, is amended to read:

80A.16 [FILING OF SALES AND ADVERTISING LITERATURE.]

The commissioner may by rule or order require the filing of any prospectus, pamphlet, circular, form letter, advertisement, or other sales literature or advertising communication addressed or intended for distribution to prospective investors, including clients or prospective clients of an investment adviser or broker-dealer unless: (1) the security or transaction is exempted by section 80A.15; or (2) the security is a federal covered security."

Page 22, line 13, after "registration" insert "or notice filing"

Page 22, line 15, strike "registered"

Page 23, line 14, delete "80A.04, subdivision 5" and insert "80A.05, subdivision 1a"

Page 23, after line 14, insert:

"Sec. 29. Minnesota Statutes 1996, section 80C.01, subdivision 4, is amended to read:

Subd. 4. "Franchise" means (a) a contract or agreement, either express or implied, whether oral or written, for a definite or indefinite period, between two or more persons:

(1) by which a franchise is granted the right to engage in the business of offering or distributing goods or services using the franchisor's trade name, trademark, service mark, logotype, advertising, or other commercial symbol or related characteristics;

(2) in which the franchisor and franchisee have a community of interest in the marketing of goods or services at wholesale, retail, by lease, agreement, or otherwise; and

(3) for which the franchisee pays, directly or indirectly, a franchise fee; or

(b) a contract, lease, or other agreement, either express or implied, whether oral or written, for a definite or indefinite period, between two or more persons, whereby the franchisee is granted the right to market motor vehicle fuel; or

(c) the sale or lease of any products, equipment, chattels, supplies, or services to the purchaser, other than the sale of sales demonstration equipment, materials or samples for a total price of \$500 or less to any one person, for the purpose of enabling the purchaser to start a business and in which the seller:

(1) represents that the seller, lessor, or an affiliate thereof will provide locations or assist the purchaser in finding locations for the use or operation of vending machines, racks, display cases, or similar devices, or currency operated amusement machines or devices, on premises neither owned or leased by the purchaser or seller; or

(2) represents that the seller will purchase any or all products made, produced, fabricated, grown, bred, or modified by the purchaser using, in whole or in part, the supplies, services, or chattels sold to the purchaser; or

(3) guarantees that the purchaser will derive income from the business which exceeds the price paid to the seller; or

(d) an oral or written contract or agreement, either expressed or implied, for a definite or indefinite period, between two or more persons, under which a manufacturer, selling security systems through dealers or distributors in this state, requires regular payments from the distributor or dealer as royalties or residuals for products purchased and paid for by the dealer or distributor.

(e) "Franchise" does not include any business which is operated under a lease or license on the premises of the lessor or licensor as long as such business is incidental to the business conducted by the lessor or licensor on such premises, including, without limitation, leased departments, licensed departments, and concessions.

(f) "Franchise" does not include any contract, lease or other agreement whereby the franchisee is required to pay less than \$100 on an annual basis, except those franchises identified in paragraph (b).

(g) "Franchise" does not include a contract, lease or other agreement between a new motor vehicle manufacturer, distributor, or factory branch and a franchisee whereby the franchisee is granted the right to market automobiles, motorcycles, trucks, truck tractors, or self-propelled motor homes or campers if the foregoing are designed primarily for the transportation of persons or property on public highways.

(h) "Franchise" does not include a contract, lease, or other agreement or arrangement between two or more air carriers, or between one or more air carriers and one or more foreign air carriers. The terms "air carrier" and "foreign air carrier" shall have the meanings assigned to them by the Federal Aviation Act, United States Code Appendix, title 49, sections 1301(3) and 1301(22), respectively.

Sec. 30. Minnesota Statutes 1996, section 82.19, is amended by adding a subdivision to read:

Subd. 9. [EXCLUSIVE AGENCY AGREEMENTS.] (a) Except as provided in paragraph (b), a licensee shall not negotiate the sale, exchange, lease, or listing of any real property directly with the owner or lessor knowing that the owner or lessor has executed a written exclusive listing contract or exclusive contract for nonagency services in connection with the property with another real estate broker, buyer, or lessee nor shall a licensee negotiate the purchase, lease, or exchange of real property knowing that the buyer or lessee has executed a written exclusive buyer representation contract or exclusive contract for nonagency services for the purchase, lease, or exchange of the real property with another real estate broker.

(b) A licensee may discuss the terms upon which a listing or buyer representation contract or a contract for nonagency services may be entered into after expiration of any existing exclusive contract when the inquiry or discussion is initiated by the owner, lessor, buyer, or lessee, and may enter into a contract with the owner, lessor, buyer, or lessee to begin after the expiration date of the existing exclusive contract. The licensee must inquire of the owner, lessor, buyer, or lessee whether such an exclusive contract exists."

Page 24, after line 15, insert:

"Sec. 32. Minnesota Statutes 1996, section 82.22, subdivision 13, is amended to read:

Subd. 13. [CONTINUING EDUCATION.] (a) After their first renewal date, all real estate salespersons and all real estate brokers shall be required to successfully complete 30 hours of real estate continuing education, either as a student or a lecturer, in courses of study approved by the commissioner, during each 24-month license period. At least 15 of the 30 credit hours must be completed during the first 12 months of the 24-month licensing period. Salespersons and brokers whose initial license period extends more than 12 months are required to complete 15 hours of real estate continuing education during the initial license period. Those licensees who will receive a 12-month license on July 1, 1995, because of the staggered implementation schedule must complete 15 hours of real estate continuing education as a requirement for renewal on July 1, 1996. Licensees may not claim credit for continuing education not actually completed as of the date their report of continuing education compliance is filed.

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(b) The commissioner shall adopt rules defining the standards for course and instructor approval, and may adopt rules for the proper administration of this subdivision. The commissioner may not approve a course which can be completed by the student at home or outside the classroom without the supervision of an instructor approved by the department of commerce. The commissioner has discretion to establish a pilot program to explore delivery of accredited courses using new delivery technology, including interactive technology. This pilot program expires on August 1, 2000.

(c) Any program approved by Minnesota continuing legal education shall be approved by the commissioner of commerce for continuing education for real estate brokers and salespeople if the program or any part thereof relates to real estate.

(d) As part of the continuing education requirements of this section, the commissioner shall require that all real estate brokers and salespersons receive:

(1) at least two hours of training during each license period in courses in laws or regulations on agency representation and disclosure; and

(2) at least two hours of training during each license period in courses in state and federal fair housing laws, regulations, and rules, or other antidiscrimination laws.

Clause (1) does not apply to real estate salespersons and real estate brokers engaged solely in the commercial real estate business who file with the commissioner a verification of this status along with the continuing education report required under paragraph (a).

(e) The commissioner is authorized to establish a procedure for renewal of course accreditation.

Sec. 33. Minnesota Statutes 1996, section 82.24, subdivision 5, is amended to read:

Subd. 5. [TRUST ACCOUNT RECORDS ACCOUNTS.] (a) Each broker or closing agent shall maintain and retain records of all trust funds and trust accounts. The commissioner may prescribe information to be included in the records by appropriate rules.

(b) A check received from a potential buyer shall be deposited into the listing broker's trust account not later than the third business day after delivery of the check to the broker except that the check may be held by the listing broker until acceptance or rejection of the offer if:

(1) the check by its terms is not negotiable by the broker or if the potential buyer has given written instructions that the check shall not be deposited nor cashed until acceptance or shall be immediately returned if the offer is rejected; and

(2) the potential seller is informed that the check is being so held before or at the time the offer is presented to that person for acceptance.

If the offer is accepted, the check shall be deposited in a neutral escrow depository or the trust fund account of the listing broker not later than the third business day following acceptance of the offer unless said broker has received written authorization from all parties to the transaction to continue to hold the check. If the offer is rejected, the check shall be returned to the potential buyer not later than the next business day after rejection.

Page 25, line 20, delete "registered real property"

Page 25, line 21, delete "appraiser or"

Page 26, after line 6, insert:

"Sec. 38. Minnesota Statutes 1996, section 82B.19, subdivision 1, is amended to read:

Subdivision 1. [LICENSE RENEWALS.] A licensed real estate appraiser shall present evidence satisfactory to the commissioner of having met the continuing education requirements of this chapter before the commissioner renews a license.

The basic continuing education requirement for renewal of a license is the completion by the applicant either as a student or as an instructor, during the immediately preceding term of licensing, of at least 30 classroom hours of instruction in courses or seminars that have received the approval of the commissioner. As part of the continuing education requirements of this section, the commissioner shall require that all real estate appraisers receive at least four hours of training each license period in courses in laws or regulations on standards of professional practice. If the applicant's immediately preceding term of licensing consisted of 12 or more months, but fewer than 24 months, the applicant must provide evidence of completion of 15 hours of instruction during the license period. If the immediately preceding term of licensing consisted of fewer than 12 months, no continuing education need be reported."

Page 26, after line 18, insert:

"Sec. 40. Minnesota Statutes 1996, section 326.83, subdivision 19, is amended to read:

Subd. 19. [SPECIAL SKILL.] "Special skill" means one of the following eight categories:

(a) [EXCAVATION.] Excavation includes work in any of the following areas:

- (1) excavation;
- (2) trenching;
- (3) grading; and
- (4) site grading.

(b) [MASONRY AND CONCRETE.] Masonry and concrete includes work in any of the following areas:

- (1) drain systems;
- (2) poured walls;
- (3) slabs and poured-in-place footings;
- (4) masonry walls;
- (5) masonry fireplaces;
- (6) masonry veneer; and
- (7) water resistance and waterproofing.
- (c) [CARPENTRY.] Carpentry includes work in any of the following areas:
- (1) rough framing;
- (2) finish carpentry;
- (3) siding;
- (4) doors, windows, and skylights;
- (5) exterior covering;
- (6) (4) porches and decks, excluding footings;
- (7) (5) wood foundations; and
- (8) insulation and vapor barrier;
- (9) (6) drywall installation, excluding taping and finishing;

- (10) cabinet and counter top installation;
- (11) wood floors;
- (12) installation of roofing materials, excluding roofing; and
- (13) soffit, fascia, and trim.
- (d) [INTERIOR FINISHING.] Interior finishing includes work in any of the following areas:
- (1) floor covering;
- (2) wood floors;
- (3) cabinet and counter top installation;
- (4) insulation and vapor barriers;
- (5) interior or exterior painting;
- (6) ceramic, marble, and quarry tile;
- (7) ornamental guardrail and installation of prefabricated stairs; and
- (8) wallpapering.
- (e) [EXTERIOR FINISHING.] Exterior finishing includes work in any of the following areas:
- (1) siding;
- (2) doors, skylights, and windows;
- (3) soffit, fascia, and trim;
- (4) (3) exterior plaster and stucco;
- (5) (4) painting; and
- (6) (5) rain carrying systems, including gutters and down spouts.

(f) [DRYWALL AND PLASTER.] Drywall and plaster includes work in any of the following areas:

- (1) installation;
- (2) taping;
- (3) finishing;
- (4) interior plaster;
- (5) painting; and
- (6) wallpapering.
- (g) [ROOFING.] Roofing includes work in any of the following areas:
- (1) roof coverings;
- (2) roof sheathing;
- (3) roof weatherproofing and insulation; and
- (4) repair of roof support system, but not construction of new roof support system.

(h) [GENERAL INSTALLATION SPECIALTIES.] Installation includes work in any of the following areas:

(1) garage doors and openers;

- (2) pools, spas, and hot tubs;
- (3) fireplaces and wood stoves;
- (4) asphalt paving and seal coating;
- (5) exterior plaster and stucco; and
- (6) ornamental guardrail and prefabricated stairs."

Page 27, after line 36, insert:

"Sec. 42. Minnesota Statutes 1996, section 326.85, is amended by adding a subdivision to read:

Subd. 4. [NONEXPIRATION.] The council is not subject to the expiration provisions of section 15.059, subdivision 5."

Page 29, after line 30, insert:

"Sec. 50. [EFFECTIVE DATE.]

Section 29 is effective the day following final enactment and shall apply to all agreements or arrangements regardless of the date they were entered into or renewed.

Sections 40 and 42 are effective the day following final enactment."

Renumber the sections in sequence

Amend the title as follows:

Page 1, lines 14 and 15, delete "subdivision 3" and insert "subdivisions 3, 4"

Page 1, line 16, after the first semicolon, insert "80A.16;" and before "82.20" insert "80C.01, subdivision 4; 82.19, by adding a subdivision;"

Page 1, line 17, after the first semicolon, insert "82.22, subdivision 13; 82.24, subdivision 5;"

Page 1, line 18, after the first semicolon, insert "82B.19, subdivision 1;" and delete "subdivision 11" and insert "subdivisions 11 and 19"

Page 1, line 19, before "326.921" insert "326.85, by adding a subdivision;"

And when so amended the bill do pass. Amendments adopted. Report adopted.

Ms. Ranum from the Committee on Judiciary, to which was referred

S.F. No. 53: A bill for an act relating to civil commitment; allowing the designated agency to consent to voluntary treatment for certain incompetent persons; creating a new standard for court-ordered early intervention to provide less intrusive treatment; modifying standards and procedures for the administration of neuroleptic medications; providing for access to records; amending the provisional discharge procedures; amending Minnesota Statutes 1996, sections 13.42, subdivision 3; 253B.02, subdivision 15, and by adding a subdivision; 253B.04; 253B.07, subdivisions 1, 2, and 7; and 253B.15, subdivisions 1, 1a, 2, 3, 5, and by adding subdivisions; proposing coding for new law in Minnesota Statutes, chapter 253B; repealing Minnesota Statutes 1996, sections 253B.03, subdivision 6c; and 253B.15, subdivisions 4 and 6.

Reports the same back with the recommendation that the bill be amended as follows:

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Delete everything after the enacting clause and insert:

"Section 1. Minnesota Statutes 1996, section 13.42, subdivision 2, is amended to read:

Subd. 2. [PUBLIC HOSPITALS; DIRECTORY INFORMATION.] (a) During the time that a person is a patient in a hospital operated by a state agency or political subdivision pursuant to <u>under legal commitment</u>, directory information is public data. After the person is released by termination of the person's legal commitment, the directory information is private data on individuals.

(b) If a person is a patient other than pursuant to commitment in a hospital controlled by a state agency or political subdivision, directory information is public data unless the patient requests otherwise, in which case it is private data on individuals.

(c) Directory information about an emergency patient who is unable to communicate which is public under this subdivision shall not be released until a reasonable effort is made to notify the next of kin. Although an individual has requested that directory information be private, the hospital may release directory information to a law enforcement agency pursuant to a lawful investigation pertaining to that individual.

Sec. 2. Minnesota Statutes 1996, section 13.42, subdivision 3, is amended to read:

Subd. 3. [CLASSIFICATION OF MEDICAL DATA.] Unless the data is summary data or a statute specifically provides a different classification, medical data are private but are available only to the subject of the data as provided in section 144.335, and shall not be disclosed to others except:

- (a) Pursuant to section 13.05;
- (b) Pursuant to section 253B.03, subdivision 6c 253B.0921;
- (c) Pursuant to a valid court order;
- (d) To administer federal funds or programs;

(e) To the surviving spouse, parents, children, and siblings of a deceased patient or client or, if there are no surviving spouse, parents, children, or siblings, to the surviving heirs of the nearest degree of kindred;

(f) To communicate a patient's or client's condition to a family member or other appropriate person in accordance with acceptable medical practice, unless the patient or client directs otherwise; or

(g) As otherwise required by law.

Sec. 3. Minnesota Statutes 1996, section 246B.01, subdivision 3, is amended to read:

Subd. 3. [SEXUAL PSYCHOPATHIC PERSONALITY.] "Sexual psychopathic personality" has the meaning given in section 253B.02, subdivision 18a 18b.

Sec. 4. Minnesota Statutes 1996, section 246B.01, subdivision 4, is amended to read:

Subd. 4. [SEXUALLY DANGEROUS PERSON.] "Sexually dangerous person" has the meaning given in section 253B.02, subdivision 18b 18c.

Sec. 5. Minnesota Statutes 1996, section 253B.01, is amended to read:

253B.01 [CITATION.]

This chapter may be cited as the "Minnesota commitment and treatment act of 1982."

Sec. 6. Minnesota Statutes 1996, section 253B.02, subdivision 2, is amended to read:

Subd. 2. [CHEMICALLY DEPENDENT PERSON.] "Chemically dependent person" means any person (a) determined as being incapable of self-management or management of personal affairs by reason of the habitual and excessive use of alcohol $\Theta r_{,}$ drugs, or other mind-altering <u>substances</u>; and (b) whose recent conduct as a result of habitual and excessive use of alcohol $\Theta r_{,}$ drugs, or other mind-altering substances poses a substantial likelihood of physical harm to self or others as demonstrated by (i) a recent attempt or threat to physically harm self or others, (ii) evidence of recent serious physical problems, or (iii) a failure to obtain necessary food, clothing, shelter, or medical care. "Chemically dependent person" also means a pregnant woman who has engaged during the pregnancy in habitual or excessive use, for a nonmedical purpose, of any of the following controlled substances or their derivatives: cocaine, heroin, phencyclidine, methamphetamine, or amphetamine.

Sec. 7. Minnesota Statutes 1996, section 253B.02, subdivision 4, is amended to read:

Subd. 4. [COMMITTING COURT.] "Committing court" means court or, the district court where a petition for commitment was decided. In a case where commitment proceedings are commenced in response to following an acquittal of a crime or offense under section 611.026, "committing court" means the district court in which the acquittal took place.

Sec. 8. Minnesota Statutes 1996, section 253B.02, subdivision 4a, is amended to read:

Subd. 4a. [CRIME AGAINST THE PERSON.] "Crime against the person" means a violation of or attempt to violate any of the following provisions: sections 609.185 (murder in the first degree); 609.19 (murder in the second degree); 609.195 (murder in the third degree); 609.20 (manslaughter in the first degree); 609.205 (manslaughter in the second degree); 609.21 (criminal vehicular homicide and injury); 609.215 (suicide); 609.221 (assault in the first degree); 609.222 (assault in the second degree); 609.223 (assault in the third degree); 609.224 (assault in the fifth degree); 609.2242 (domestic assault); 609.23 (mistreatment of persons confined); 609.231 (mistreatment of residents or patients); 609.2325 (criminal abuse); 609.233 (criminal neglect); 609.2335 (financial exploitation of a vulnerable adult); 609.235 (use of drugs to injure or facilitate crime); 609.244 (simple robbery); 609.245 (aggravated robbery); 609.255 (kidnapping); 609.255 (false imprisonment); 609.265 (abduction); 609.27, subdivision 1, clause (1) or (2) (coercion); 609.322, subdivision 1, clause (2) (solicitation); 609.342 (criminal sexual conduct in the first degree); 609.343 (criminal sexual conduct in the second degree); 609.344 (criminal sexual conduct in the first degree); 609.343 (criminal sexual conduct in the second degree); 609.344 (criminal sexual conduct in the second degree); 609.345 (arson in the second degree); 609.502 (arson in the second degree); 609.355 (minal sexual conduct in the first degree); 609.345 (criminal sexual conduct in the fourth degree); 609.365 (manser); 609.505 (assuul conduct in the first degree); 609.502 (arson in the second degree); 609.505 (assuul conduct by a caregiver).

Sec. 9. Minnesota Statutes 1996, section 253B.02, subdivision 7, is amended to read:

Subd. 7. [EXAMINER.] "Examiner" means a person who is knowledgeable, trained, and practicing in the diagnosis and treatment of the alleged impairment and who is:

(1) a licensed physician; or

(2) a licensed psychologist who has a doctoral degree in psychology or who became licensed as a licensed consulting psychologist before July 2, 1975.

Sec. 10. Minnesota Statutes 1996, section 253B.02, subdivision 9, is amended to read:

Subd. 9. [HEALTH OFFICER.] "Health officer" means a licensed physician, licensed psychologist, psychiatric licensed social worker, or psychiatric or public health nurse as defined in section 145A.02, subdivision 18, and formally designated members of a prepetition screening unit established by section 253B.07.

Sec. 11. Minnesota Statutes 1996, section 253B.02, is amended by adding a subdivision to read:

Subd. 12a. [MENTAL ILLNESS.] <u>"Mental illness" has the meaning given in section 245.462,</u> subdivision 20.

Sec. 12. Minnesota Statutes 1996, section 253B.02, subdivision 13, is amended to read:

Subd. 13. [MENTALLY ILL PERSON.] (a) "Mentally ill person" means any person who has an organic disorder of the brain or a substantial psychiatric disorder of thought, mood, perception, orientation, or memory which grossly impairs judgment, behavior, capacity to recognize reality, or to reason or understand, which (a) is manifested by instances of grossly disturbed behavior or faulty perceptions; and (b) poses a substantial likelihood of physical harm to self or others as demonstrated by:

(i) (1) a failure to obtain necessary food, clothing, shelter, or medical care as a result of the impairment; or

(ii) (2) a recent attempt or threat to physically harm self or others.

This impairment excludes (b) A person is not mentally ill under this section if the impairment is solely due to:

(a) (1) epilepsy;

(b) (2) mental retardation;

(c) (3) brief periods of intoxication caused by alcohol $\Theta r_{\underline{1}}$ drugs, <u>or other mind-altering</u> substances; or

(d) (4) dependence upon or addiction to any alcohol Θr , drugs, or other mind-altering substances.

Sec. 13. Minnesota Statutes 1996, section 253B.02, subdivision 14, is amended to read:

Subd. 14. [MENTALLY RETARDED PERSON.] "Mentally retarded person" means any person (a) who: (a) has been diagnosed as having significantly subaverage intellectual functioning existing concurrently with demonstrated deficits in adaptive behavior and who manifests these conditions prior to the person's 22nd birthday; and (b) whose recent conduct is a result of mental retardation and poses a substantial likelihood of physical harm to self or others in that there has been (i) a recent attempt or threat to physically harm self or others, or (ii) a failure and inability to obtain necessary food, clothing, shelter, safety, or medical care.

Sec. 14. Minnesota Statutes 1996, section 253B.02, subdivision 15, is amended to read:

Subd. 15. [PATIENT.] "Patient" means any person who is institutionalized receiving treatment or committed under this chapter.

Sec. 15. Minnesota Statutes 1996, section 253B.02, subdivision 18, is amended to read:

Subd. 18. [REGIONAL <u>TREATMENT</u> CENTER.] "Regional <u>treatment</u> center" means any state operated facility for mentally ill, mentally retarded or chemically dependent persons which is under the direct administrative authority of the commissioner.

Sec. 16. Minnesota Statutes 1996, section 253B.02, is amended by adding a subdivision to read:

Subd. 18a. [SECURE TREATMENT FACILITY.] "Secure treatment facility" means the Minnesota security hospital or the Minnesota sexual psychopathic personality treatment center.

Sec. 17. Minnesota Statutes 1996, section 253B.02, subdivision 18a, is amended to read:

Subd. 18a. 18b. [SEXUAL PSYCHOPATHIC PERSONALITY.] "Sexual psychopathic personality" means the existence in any person of such conditions of emotional instability, or impulsiveness of behavior, or lack of customary standards of good judgment, or failure to appreciate the consequences of personal acts, or a combination of any of these conditions, which render the person irresponsible for personal conduct with respect to sexual matters, if the person has evidenced, by a habitual course of misconduct in sexual matters, an utter lack of power to control the person's sexual impulses and, as a result, is dangerous to other persons.

Sec. 18. Minnesota Statutes 1996, section 253B.02, subdivision 18b, is amended to read:

Subd. 18b. 18c. [SEXUALLY DANGEROUS PERSON.] (a) A "sexually dangerous person" means a person who:

(1) has engaged in a course of harmful sexual conduct as defined in subdivision 7a;

(2) has manifested a sexual, personality, or other mental disorder or dysfunction; and

(3) as a result, is likely to engage in acts of harmful sexual conduct as defined in subdivision 7a.

(b) For purposes of this provision, it is not necessary to prove that the person has an inability to control the person's sexual impulses.

Sec. 19. Minnesota Statutes 1996, section 253B.03, subdivision 1, is amended to read:

Subdivision 1. [RESTRAINTS.] (a) A patient has the right to be free from restraints. Restraints shall not be applied to a patient unless the head of the treatment facility or a member of the medical staff determines that they are necessary for the safety of the patient or others.

(b) Restraints shall not be applied to patients with mental retardation except as permitted under section 245.825 and rules of the commissioner of human services. Consent must be obtained from the person or person's guardian except for emergency procedures as permitted under rules of the commissioner adopted under section 245.825.

(c) Each use of a restraint and reason for it shall be made part of the clinical record of the patient under the signature of the head of the treatment facility.

Sec. 20. Minnesota Statutes 1996, section 253B.03, subdivision 2, is amended to read:

Subd. 2. [CORRESPONDENCE.] A patient has the right to correspond freely without censorship. The head of the treatment facility may restrict correspondence on determining that the if the patient's medical welfare of the patient requires it this restriction. For patients in regional facilities treatment centers, that determination may be reviewed by the commissioner. Any limitation imposed on the exercise of a patient's correspondence rights and the reason for it shall be made a part of the clinical record of the patient. Any communication which is not delivered to a patient shall be immediately returned to the sender.

Sec. 21. Minnesota Statutes 1996, section 253B.03, subdivision 3, is amended to read:

Subd. 3. [VISITORS AND PHONE CALLS.] Subject to the general rules of the treatment facility, a patient has the right to receive visitors and make phone calls. The head of the treatment facility may restrict visits and phone calls on determining that the medical welfare of the patient requires it. Any limitation imposed on the exercise of the patient's visitation and phone call rights and the reason for it shall be made a part of the clinical record of the patient. Upon admission to a facility where federal law prohibits unauthorized disclosure of patient or resident identifying information to callers and visitors, the patient or resident, or the legal guardian or conservator of the patient or resident, shall be given the opportunity to authorize disclosure of the patient's or resident's presence in the facility to callers and visitors who may seek to communicate with the patient or resident. To the extent possible, the legal guardian or conservator of a patient or resident shall consider the opinions of the patient or resident regarding the disclosure of the patient's or resident's presence in the facility.

Sec. 22. Minnesota Statutes 1996, section 253B.03, subdivision 4, is amended to read:

Subd. 4. [SPECIAL VISITATION; RELIGION.] A patient has the right to meet with or call a personal physician, spiritual advisor, and counsel at all reasonable times. Upon admission to a facility where federal law prohibits unauthorized disclosure of patient or resident identifying information to callers and visitors, the patient or resident, or the legal guardian or conservator of the patient or resident, shall be given the opportunity to authorize disclosure of the patient's or resident's presence in the facility to callers and visitors who may seek to communicate with the

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patient or resident. To the extent possible, the legal guardian or conservator of a patient or resident shall consider the opinions of the patient or resident regarding the disclosure of the patient's or resident's presence in the facility. The patient has the right to continue the practice of religion.

Sec. 23. Minnesota Statutes 1996, section 253B.03, is amended by adding a subdivision to read:

Subd. 4a. [DISCLOSURE OF PATIENT'S ADMISSION.] Upon admission to a facility where federal law prohibits unauthorized disclosure of patient or resident identifying information to callers and visitors, the patient or resident, or the legal guardian or conservator of the patient or resident, shall be given the opportunity to authorize disclosure of the patient's or resident's presence in the facility to callers and visitors who may seek to communicate with the patient or resident. To the extent possible, the legal guardian or conservator of a patient or resident shall consider the opinions of the patient or resident regarding the disclosure of the patient's or resident's or resident's presence in the facility.

Sec. 24. Minnesota Statutes 1996, section 253B.03, subdivision 5, is amended to read:

Subd. 5. [PERIODIC ASSESSMENT.] A patient has the right to periodic medical assessment. The head of a treatment facility shall have assess the physical and mental condition of every patient assessed as frequently as necessary, but not less often than annually. If the patient refuses to be examined, the facility shall document in the patient's chart its attempts to examine the patient. If a person is committed as mentally retarded for an indeterminate period of time, the three-year judicial review must include the annual reviews for each year as outlined in Minnesota Rules, part 9525.0075, subpart 6.

Sec. 25. Minnesota Statutes 1996, section 253B.03, subdivision 6, is amended to read:

Subd. 6. [CONSENT FOR MEDICAL PROCEDURE.] A patient has the right to prior consent to any medical or surgical treatment, other than treatment for chemical dependency or nonintrusive treatment for mental illness.

The following procedures shall be used to obtain consent for any treatment necessary to preserve the life or health of any committed patient:

(a) The written, informed consent of a competent adult patient for the treatment is sufficient.

(b) If the patient is subject to guardianship or conservatorship which includes the provision of medical care, the written, informed consent of the guardian or conservator for the treatment is sufficient.

(c) If the head of the treatment facility determines that the patient is not competent to consent to the treatment and the patient has not been adjudicated incompetent, written, informed consent for the surgery or medical treatment shall be obtained from the nearest proper relative. For this purpose, the following persons are proper relatives, in the order listed: the patient's spouse, parent, adult child, or adult sibling. If the nearest proper relatives cannot be located Θ_r , refuse to consent to the procedure, or are unable to consent, the head of the treatment facility or an interested person may petition the committing court for approval for the treatment or may petition a court of competent jurisdiction for the appointment of a guardian or conservator. The determination that the patient is not competent, and the reasons for the determination, shall be documented in the patient's clinical record.

(d) Consent to treatment of any minor patient shall be secured in accordance with sections 144.341 to 144.346, except that. A minor 16 years of age or older may give valid consent for to hospitalization, routine diagnostic evaluation, and emergency or short-term acute care.

(e) In the case of an emergency when the persons ordinarily qualified to give consent cannot be located, the head of the treatment facility may give consent.

No person who consents to treatment pursuant to the provisions of this subdivision shall be civilly or criminally liable for the performance or the manner of performing the treatment. No person shall be liable for performing treatment without consent if written, informed consent was given pursuant to this subdivision. This provision shall not affect any other liability which may result from the manner in which the treatment is performed.

Sec. 26. Minnesota Statutes 1996, section 253B.03, subdivision 6b, is amended to read:

Subd. 6b. [CONSENT FOR MENTAL HEALTH TREATMENT.] A competent person admitted without commitment voluntarily to a treatment facility may be subjected to intrusive mental health treatment only with the person's written informed consent. For purposes of this section, "intrusive mental health treatment" means electroshock therapy and neuroleptic medication and does not include treatment for mental retardation. An incompetent person who has prepared a directive under subdivision 6d regarding treatment with intrusive therapies must be treated in accordance with this section, except in cases of emergencies.

Sec. 27. Minnesota Statutes 1996, section 253B.03, subdivision 7, is amended to read:

Subd. 7. [PROGRAM PLAN.] A person receiving services under this chapter has the right to receive proper care and treatment, best adapted, according to contemporary professional standards, to rendering further eustody, institutionalization, or other services court supervision unnecessary. The treatment facility shall devise a written program plan for each person which describes in behavioral terms the case problems, the precise goals, including the expected period of time for treatment, and the specific measures to be employed. Each plan shall be reviewed at least quarterly to determine progress toward the goals, and to modify the program plan as necessary. The program plan shall be devised and reviewed with the designated agency and with the patient. The clinical record shall reflect the program plan review. If the designated agency or the patient does not participate in the planning and review, the clinical record shall include reasons for nonparticipation and the plans for future involvement. The commissioner shall monitor the program plan and review process for regional centers to insure compliance with the provisions of this subdivision.

Sec. 28. Minnesota Statutes 1996, section 253B.03, subdivision 8, is amended to read:

Subd. 8. [MEDICAL RECORDS.] A patient has the right to access to personal medical records. Notwithstanding the provisions of section 144.335, subdivision 2, every person subject to a proceeding or receiving services pursuant to this chapter and the patient's attorney shall have complete access to all medical records relevant to the person's commitment. <u>A provider may</u> require an attorney to provide evidence of representation of the patient.

Sec. 29. Minnesota Statutes 1996, section 253B.04, is amended to read:

253B.04 [INFORMAL VOLUNTARY TREATMENT AND ADMISSION PROCEDURES.]

Subdivision 1. [VOLUNTARY ADMISSION <u>AND TREATMENT.</u>] Informal <u>Voluntary</u> admission by consent is preferred over involuntary commitment <u>and treatment</u>. Any person 16 years of age or older may request to be admitted to a treatment facility as <u>an informal a voluntary</u> patient for observation, evaluation, diagnosis, care and treatment without making formal written application. Any person under the age of 16 years may be admitted as <u>an informal a voluntary</u> patient with the consent of a parent or legal guardian if it is determined by independent examination that there is reasonable evidence that (a) the proposed patient is mentally ill, mentally retarded, or chemically dependent; and (b) the proposed patient is suitable for treatment. The head of the treatment facility shall not arbitrarily refuse any person seeking admission as <u>an informal a</u> voluntary <u>a</u> voluntary patient.

Subd. 1a. [VOLUNTARY TREATMENT OR ADMISSION FOR PERSONS WITH MENTAL ILLNESS.] (a) A person with a mental illness may seek or voluntarily agree to accept treatment or admission to a facility. If the mental health provider determines that the person lacks the capacity to give informed consent for the treatment or admission, and in the absence of a durable power of attorney for health care that authorizes consent, the designated agency or its designee may give informed consent for mental health treatment or admission to a treatment facility on behalf of the person.

(b) The designated agency shall apply the following criteria in determining the person's ability to give informed consent:

(1) whether the person demonstrates an awareness of the person's illness, and the reasons for treatment, its risks, benefits and alternatives, and the possible consequences of refusing treatment; and

(2) whether the person communicates verbally or nonverbally a clear choice concerning treatment that is a reasoned one, not based on delusion, even though it may not be in the person's best interests.

(c) The basis for the designated agency's decision that the person lacks the capacity to give informed consent for treatment or admission, and that the patient has voluntarily accepted treatment or admission, must be documented in writing.

(d) A mental health provider that provides treatment in reliance on the written consent given by the designated agency under this subdivision is not civilly or criminally liable for performing treatment without consent. This paragraph does not affect any other liability that may result from the manner in which the treatment is performed.

(e) A person who receives treatment or is admitted to a facility under this subdivision has the right to refuse treatment at any time or to be released from a facility as provided under subdivision 2. The person or any interested person acting on the person's behalf may seek court review within five days for a determination of whether the person's agreement to accept treatment or admission is voluntary. At the time a person agrees to treatment or admission to a facility under this subdivision, the designated agency or its designee shall inform the person in writing of the person's rights under this paragraph.

(f) This subdivision does not authorize the administration of neuroleptic medications. Neuroleptic medications may be administered only as provided in section 253B.092.

Subd. 2. [RELEASE.] Every patient admitted for mental illness or mental retardation under this section shall be informed in writing at the time of admission that the patient has a right to leave the facility within 12 hours of making a request, unless held under another provision of this chapter. Every patient admitted for chemical dependency under this section shall be informed in writing at the time of admission that the patient has a right to leave the facility within 72 hours, exclusive of Saturdays, Sundays and holidays, of making a request, unless held under another provision of this chapter. The request shall be submitted in writing to the head of the treatment facility or the person's designee. On deeming it to be in the best interest of the person, the person's family, or the public, the head of the treatment facility shall petition for the commitment of the person pursuant to section 253B.07.

Sec. 30. Minnesota Statutes 1996, section 253B.05, subdivision 1, is amended to read:

Subdivision 1. [EMERGENCY HOLD.] (a) Any person may be admitted or held for emergency care and treatment in a treatment facility with the consent of the head of the treatment facility upon a written statement by an examiner that: (1) the examiner has examined the person not more than 15 days prior to admission, (2) the examiner is of the opinion, for stated reasons, that the person is mentally ill, mentally retarded or chemically dependent, and is in imminent danger of causing injury to self or others if not immediately restrained, and (3) an order of the court cannot be obtained in time to prevent the anticipated injury.

(b) The <u>examiner's</u> statement shall be: (1) sufficient authority for a peace or health officer to transport a patient to a treatment facility, (2) stated in behavioral terms and not in conclusory language, and (3) of sufficient specificity to provide an adequate record for review. If imminent danger to specific individuals is a basis for the emergency hold, the statement must include identifying information on identify those individuals, to the extent practicable. A copy of the examiner's statement shall be personally served on the person immediately upon admission. A copy of the statement and a copy shall be maintained by the treatment facility.

Sec. 31. Minnesota Statutes 1996, section 253B.05, subdivision 2, is amended to read:

Subd. 2. [PEACE OR HEALTH OFFICER HOLD <u>AUTHORITY</u>.] (a) A peace or health officer may take a person into custody and transport the person to a licensed physician or

treatment facility if the officer has reason to believe, either through direct observation of the person's behavior, or upon reliable information of the person's recent behavior and knowledge of the person's past behavior or psychiatric treatment, that the person is mentally ill or mentally retarded and in imminent danger of injuring self or others if not immediately restrained. A peace or health officer or a person working under such officer's supervision, may take a person who is believed to be chemically dependent or is intoxicated in public into custody and transport the person to a treatment facility. If the person is intoxicated in public or is believed to be chemically dependent and is not in danger of causing self-harm or harm to any person or property, the peace or health officer may transport the person home. The peace or health officer shall make written application for admission of the person to a the treatment facility shall be made by the peace or health officer. The application shall contain a the peace or health officer's statement given by the peace or health officer specifying the reasons for and circumstances under which the person was taken into custody. If imminent danger to specific individuals is a basis for the emergency hold, the statement must include identifying information on those individuals, to the extent practicable. A copy of the statement shall be made available to the person taken into custody.

(b) As far as is practicable, a peace officer who provides transportation for a person placed in a facility under this subdivision may not be in uniform and may not use a vehicle visibly marked as a law enforcement vehicle.

(c) A person may be admitted to a treatment facility for emergency care and treatment under this subdivision with the consent of the head of the facility under the following circumstances: (1) a written statement is made by the medical officer on duty at the facility that after preliminary examination the person has symptoms of mental illness or mental retardation and appears to be in imminent danger of harming self or others; $or_{\overline{y}}$ (2) a written statement is made by the institution program director or the director's designee on duty at the facility that after preliminary examination that the person has symptoms of chemical dependency and appears to be in imminent danger of harming self or others or is intoxicated in public.

Sec. 32. Minnesota Statutes 1996, section 253B.05, is amended by adding a subdivision to read:

Subd. 2b. [NOTICE.] Every person held pursuant to this section must be informed in writing at the time of admission of the right to leave after 72 hours, to a medical examination within 48 hours, and to request a change to voluntary status. The treatment facility shall, upon request, assist the person in exercising the rights granted in this subdivision.

Sec. 33. Minnesota Statutes 1996, section 253B.05, subdivision 3, is amended to read:

Subd. 3. [DURATION OF HOLD.] (a) Any person held pursuant to this section may be held <u>under a physician's order</u> up to 72 hours, exclusive of Saturdays, Sundays, and legal holidays, after admission <u>unless.</u> If a petition for the commitment of the person has been is filed in the <u>district</u> court of in the county of the person's residence or of the county in which the treatment facility is located and, the court issues an <u>may issue a judicial hold</u> order pursuant to section 253B.07, subdivision 6. If the head of the treatment facility believes that commitment is required and no petition has been filed, the head of the treatment facility shall file a petition for the commitment of the person. The hospitalized person may move to have the venue of the petition changed to the court of the county of the person's residence, if the person is a resident of <u>Minnesota</u>.

(b) During the 72-hour hold period, a court may not release a person held under this section unless the court has received a written petition for release and held a summary hearing regarding the release. The petition must include the name of the person being held, the basis for and location of the hold, and a statement as to why the hold is improper. The petition also must include copies of any written documentation under subdivision 1 or 2 in support of the hold, unless the person holding the petitioner refuses to supply the documentation. The hearing must be held as soon as practicable and may be conducted by means of a telephone conference call or similar method by which the participants are able to simultaneously hear each other. If the court decides to release the person, the court shall direct the release and shall issue written findings supporting the decision, but may not delay. The release may not be delayed pending the written order. Before deciding to release releasing the person, the court shall make every reasonable effort to provide

notice of the proposed release to: (1) any specific individuals identified in a statement under subdivision 1 or 2 or individuals identified in the record as individuals who might be endangered if the person was not held; and (2) the examiner whose written statement was a basis for a hold under subdivision 1 or; and (3) the peace or health officer who applied for a hold under subdivision 2.

(c) If a treatment facility releases a person during the 72-hour hold period, the head of the treatment facility shall immediately notify the agency which employs the peace or health officer who transported the person to the treatment facility under this section.

Sec. 34. Minnesota Statutes 1996, section 253B.05, subdivision 4, is amended to read:

Subd. 4. [CHANGE OF STATUS.] Any person admitted pursuant to this section shall be changed to the informal voluntary status provided by section 253B.04 upon the person's request in writing and with the consent of the head of the treatment facility.

Sec. 35. Minnesota Statutes 1996, section 253B.06, is amended to read:

253B.06 [MEDICAL EXAMINATION INITIAL ASSESSMENT.]

Subdivision 1. [MENTALLY ILL AND MENTALLY RETARDED PERSONS.] The head of a treatment facility shall arrange to have Every patient hospitalized as mentally ill or mentally retarded pursuant to section 253B.04 or 253B.05 <u>must be</u> examined by a physician as soon as possible but no more than 48 hours following the time of admission. The physician shall be knowledgeable and trained in the diagnosis of the alleged disability related to the need for admission as a mentally ill or mentally retarded person.

Subd. 2. [CHEMICALLY DEPENDENT PERSONS.] Patients hospitalized as chemically dependent pursuant to section 253B.04 or 253B.05 shall also be examined within 48 hours of admission. At a minimum, the examination shall consist of a physical evaluation by facility staff according to procedures established by a physician and an evaluation by staff knowledgeable and trained in the diagnosis of the alleged disability related to the need for admission as a chemically dependent person.

Subd. 2a. [PATIENT REFUSAL.] If a patient refuses to be examined, the determination of the patient's need for treatment may be based on other available information and documented in the patient's medical record.

Subd. 3. [DISCHARGE.] At the end of a 48-hour period, any patient admitted pursuant to section 253B.05 shall be discharged if an examination has not been held or if the examiner or evaluation staff person fails to notify the head of the treatment facility in writing that in the examiner's or staff person's opinion the patient is apparently in need of care, treatment, and evaluation as a mentally ill, mentally retarded, or chemically dependent person.

Sec. 36. [253B.064] [COURT-ORDERED EARLY INTERVENTION; PRELIMINARY PROCEDURES.]

Subdivision 1. [GENERAL.] (a) An interested person may apply to the designated agency for early intervention of a proposed patient in the county of the patient's residence or presence. If the designated agency determines that early intervention may be appropriate, a prepetition screening report must be prepared pursuant to section 253B.07, subdivision 1. The county attorney may file a petition for early intervention following the procedures of section 253B.07, subdivision 2.

(b) The proposed patient is entitled to representation by counsel, pursuant to section 253B.03, subdivision 9. The proposed patient shall be examined by an examiner, and has the right to a second independent examiner, pursuant to section 253B.07, subdivisions 3 and 5.

Subd. 2. [PREHEARING EXAMINATION; FAILURE TO APPEAR.] If a proposed patient fails to appear for the examination, the court may:

(1) reschedule the examination; or

(2) deem the failure to appear as a waiver of the proposed patient's right to an examination and consider the failure to appear when deciding the merits of the petition for early intervention.

Subd. 3. [COUNTY OPTION.] Nothing in sections 253B.064 to 253B.066 requires a county to use early intervention procedures.

Sec. 37. [253B.065] [COURT-ORDERED EARLY INTERVENTION; HEARING PROCEDURES.]

<u>Subdivision 1.</u> [TIME FOR EARLY INTERVENTION HEARING.] <u>The hearing on the</u> petition for early intervention shall be held within 14 days from the date of the filing of the petition. For good cause shown, the court may extend the time of hearing up to an additional 30 days. When any proposed patient has not had a hearing on a petition filed for early intervention within the allowed time, the proceedings shall be dismissed.

Subd. 2. [NOTICE OF HEARING.] The proposed patient, the patient's counsel, the petitioner, the county attorney, and any other persons as the court directs shall be given at least five days' notice that a hearing will be held and at least two days' notice of the time and date of the hearing, except that any person may waive notice. Notice to the proposed patient may be waived by patient's counsel.

Subd. 3. [FAILURE TO APPEAR.] If a proposed patient fails to appear at the hearing, the court may reschedule the hearing within five days and direct a health officer, peace officer, or other person to take the proposed patient to an appropriate treatment facility designated by the court and transport the person to the hearing.

Subd. 4. [PROCEDURES.] The hearing must be conducted pursuant to section 253B.08, subdivisions 3 to 8.

<u>Subd. 5.</u> [EARLY INTERVENTION CRITERIA.] (a) A court shall order early intervention treatment of a proposed patient who meets the criteria under paragraph (b). The early intervention treatment must be less intrusive than long-term inpatient commitment and must be the least restrictive treatment program available that can meet the patient's treatment needs.

(b) The court shall order early intervention treatment if the court finds all of the elements of the following factors by clear and convincing evidence:

(1) the proposed patient is mentally ill;

(2) the proposed patient refuses to accept appropriate mental health treatment; and

(3) the proposed patient's mental illness is manifested by instances of grossly disturbed behavior or faulty perceptions and either:

(i) the grossly disturbed behavior or faulty perceptions significantly interfere with the proposed patient's ability to care for self and the proposed patient, when competent, would have chosen substantially similar treatment under the same circumstances; or

(ii) due to the mental illness, the proposed patient received court-ordered inpatient treatment under section 253B.09 at least two times in the previous three years; the patient is exhibiting symptoms or behavior substantially similar to those that precipitated one or more of the court-ordered treatments; and the patient is reasonably expected to physically or mentally deteriorate to the point of meeting the criteria for commitment under section 253B.09 unless treated.

Sec. 38. [253B.066] [COURT-ORDERED EARLY INTERVENTION; DECISION; TREATMENT ALTERNATIVES; DURATION.]

Subdivision 1. [TREATMENT ALTERNATIVES.] If the court orders early intervention under section 253B.065, subdivision 5, the court may include in its order a variety of treatment alternatives including, but not limited to, day treatment, medication compliance monitoring, and short-term hospitalization not to exceed ten days.

If the court orders short-term hospitalization and the proposed patient will not go voluntarily, the court may direct a health officer, peace officer, or other person to take the person into custody and transport the person to the hospital.

Subd. 2. [FINDINGS.] The court shall find the facts specifically and separately state its conclusions of law in its order. Where early intervention is ordered, the findings of fact and conclusions of law shall specifically state the proposed patient's conduct which is a basis for determining that each of the requisites for early intervention is met.

The court shall also determine the nature and extent of the property of the patient and of the persons who are liable for the patient's care.

Subd. 3. [DURATION.] The order for early intervention shall not exceed 90 days.

Sec. 39. Minnesota Statutes 1996, section 253B.07, subdivision 1, is amended to read:

Subdivision 1. [PREPETITION SCREENING.] (a) Prior to filing a petition for commitment of <u>or early intervention for</u> a proposed patient, an interested person shall apply to the designated agency in the county of the proposed patient's residence or presence for conduct of a preliminary investigation, except when the proposed patient has been acquitted of a crime under section 611.026 and the county attorney is required to file a petition for commitment pursuant to subdivision 2. In any case coming within this exception, the county attorney shall apply to the designated county agency in the county in which the acquittal took place for a preliminary investigation unless substantially the same information relevant to the proposed patient's current mental condition as could be obtained by a preliminary investigation is part of the court record in the criminal proceeding or is contained in the report of a mental examination conducted in connection with the criminal proceeding. The designated agency shall appoint a screening team to conduct an investigation which shall include:

(i) a personal interview with the proposed patient and other individuals who appear to have knowledge of the condition of the proposed patient. If the proposed patient is not interviewed, reasons must be documented;

(ii) identification and investigation of specific alleged conduct which is the basis for application; and

(iii) identification, exploration, and listing of the reasons for rejecting or recommending alternatives to involuntary placement; and

(iv) in the case of a commitment based on mental illness, the following information, if it is known or available: information that may be relevant to the administration of neuroleptic medications, if necessary, including the existence of a declaration under section 253B.03, subdivision 6d, or a durable power of attorney for health care under chapter 145C or a guardian, conservator, proxy, or attorney-in-fact with authority to make health care decisions for the proposed patient; information regarding the capacity of the proposed patient to make decisions regarding administration of neuroleptic medication; and whether the proposed patient is likely to consent or refuse consent to administration of the medication.

(b) In conducting the investigation required by this subdivision, the screening team shall have access to all relevant medical records of proposed patients currently in treatment facilities. Data collected pursuant to this clause shall be considered private data on individuals. The prepetition screening report is not admissible in any court proceedings unrelated to the commitment proceedings.

(c) When the prepetition screening team recommends commitment, a written report shall be sent to the county attorney for the county in which the petition is to be filed.

(d) The prepetition screening team shall refuse to support a petition if the investigation does not disclose evidence sufficient to support commitment. Notice of the prepetition screening team's decision shall be provided to the prospective petitioner.

(e) If the interested person wishes to proceed with a petition contrary to the recommendation of the prepetition screening team, application may be made directly to the county attorney, who may determine whether or not to proceed with the petition. Notice of the county attorney's determination shall be provided to the interested party.

(f) If the proposed patient has been acquitted of a crime under section 611.026, the county attorney shall apply to the designated county agency in the county in which the acquittal took place for a preliminary investigation unless substantially the same information relevant to the proposed patient's current mental condition, as could be obtained by a preliminary investigation, is part of the court record in the criminal proceeding or is contained in the report of a mental examination conducted in connection with the criminal proceeding. If a court petitions for commitment pursuant to the rules of criminal or juvenile procedure or a county attorney petitions pursuant to acquittal of a criminal charge under section 611.026, the prepetition investigation, if required by this section, shall be completed within seven days after the filing of the petition.

Sec. 40. Minnesota Statutes 1996, section 253B.07, subdivision 2, is amended to read:

Subd. 2. [THE PETITION.] (a) Any interested person, except a member of the prepetition screening team, may file a petition for commitment in the district court of the county of the proposed patient's residence or presence. Following an acquittal of a person of a criminal charge under section 611.026, the petition shall be filed by the county attorney of the county in which the acquittal took place and the petition shall be filed with the court in which the acquittal took place, and that court shall be the committing court for purposes of this chapter. If the head of the treatment facility believes that commitment is required and no petition has been filed, the head of the treatment facility shall petition for the commitment of the person.

(b) The petition shall set forth the name and address of the proposed patient, the name and address of the patient's nearest relatives, and the reasons for the petition. The petition must contain factual descriptions of the proposed patient's recent behavior, including a description of the behavior, where it occurred, and over what the time period of time over which it occurred. Each factual allegation must be supported by observations of witnesses named in the petition. Petitions shall be stated in behavioral terms and shall not contain judgmental or conclusory statements.

(c) The petition shall be accompanied by a written statement by an examiner stating that the examiner has examined the proposed patient within the 15 days preceding the filing of the petition and is of the opinion that the proposed patient is suffering a designated disability and should be committed to a treatment facility. The statement shall include the reasons for the opinion. In the case of a commitment based on mental illness, the petition and the examiner's statement may include, to the extent this information is available, a statement and opinion regarding the proposed patient's need for treatment with neuroleptic medication and the patient's capacity to make decisions regarding the administration of neuroleptic medications, and the reasons for the opinion. If a petitioner has been unable to secure a statement from an examiner, the petition shall include documentation that a reasonable effort has been made to secure the supporting statement.

Sec. 41. Minnesota Statutes 1996, section 253B.07, subdivision 2a, is amended to read:

Subd. 2a. [PETITION FOLLOWING ACQUITTAL; REFERRAL.] Following an acquittal of a person of a criminal charge under section 611.026, the petition shall be filed by the county attorney of the county in which the acquittal took place and the petition shall be filed with the court in which the acquittal took place, and that court shall be the committing court for purposes of this chapter. When a petition is filed pursuant to subdivision 2 with the court in which acquittal took place to hear the commitment proceedings unless that judge is unavailable.

Sec. 42. Minnesota Statutes 1996, section 253B.07, is amended by adding a subdivision to read:

Subd. 2b. [APPREHEND AND HOLD ORDERS.] The court may order the treatment facility to hold the person in a treatment facility or direct a health officer, peace officer, or other person to take the proposed patient into custody and transport the proposed patient to a treatment facility for observation, evaluation, diagnosis, care, treatment, and, if necessary, confinement, when: (1) there

has been a particularized showing by the petitioner that serious imminent physical harm to the proposed patient or others is likely unless the proposed patient is apprehended; (2) the proposed patient has not voluntarily appeared for the examination or the commitment hearing pursuant to the summons; or (3) a person is held pursuant to section 253B.05 and a request for a petition for commitment has been filed. The order of the court may be executed on any day and at any time by the use of all necessary means including the imposition of necessary restraint upon the proposed patient. Where possible, a peace officer taking the proposed patient into custody pursuant to this subdivision shall not be in uniform and shall not use a motor vehicle visibly marked as a police vehicle.

Sec. 43. Minnesota Statutes 1996, section 253B.07, is amended by adding a subdivision to read:

Subd. 2c. [RIGHT TO COUNSEL.] A patient has the right to be represented by counsel at any proceeding under this chapter. The court shall appoint a qualified attorney to represent the proposed patient if neither the proposed patient nor others provide counsel. The attorney shall be appointed at the time a petition for commitment is filed. In all proceedings under this chapter, the attorney shall:

(1) consult with the person prior to any hearing;

(2) be given adequate time and access to records to prepare for all hearings;

(3) continue to represent the person throughout any proceedings under this chapter unless released as counsel by the court; and

(4) be a vigorous advocate on behalf of the person.

Sec. 44. Minnesota Statutes 1996, section 253B.07, is amended by adding a subdivision to read:

Subd. 2d. [CHANGE OF VENUE.] Either party may move to have the venue of the petition changed to the district court of the county of the person's residence, if the person is a resident of Minnesota. If the petition has been filed pursuant to the rules of criminal or juvenile procedure, venue may not be changed without the approval of the court in which the juvenile or criminal proceedings are pending.

Sec. 45. Minnesota Statutes 1996, section 253B.07, subdivision 3, is amended to read:

Subd. 3. [EXAMINERS.] After a petition has been filed, the court in which the petition was filed shall appoint an examiner. Prior to the hearing, the court shall inform the proposed patient of the right to an independent second examination. At the proposed patient's request, the court shall appoint a second examiner of the patient's choosing to be paid for by the county at a rate of compensation fixed by the court.

Sec. 46. Minnesota Statutes 1996, section 253B.07, subdivision 4, is amended to read:

Subd. 4. [PREHEARING EXAMINATION; NOTICE AND SUMMONS PROCEDURE.] (a) A summons to appear for a prehearing examination and the commitment hearing shall be served upon the proposed patient. A plain language notice of the proceedings and notice of the filing of the petition, a copy of without the petition, a copy of the examiner's supporting statement, and the order for examination and a copy of the prepetition screening report shall be given to the proposed patient, patient's counsel, the petitioner, any interested person, and any other persons as the court directs.

(b) The prepetition screening report and the examiner's supporting statement shall be distributed to the petitioner, the proposed patient, the patient's counsel, the county attorney, any person authorized by the patient, and any other person as the court directs.

(c) All papers shall be served personally on the proposed patient. Unless otherwise ordered by the court, the notice shall be served on the proposed patient by a nonuniformed person.

Sec. 47. Minnesota Statutes 1996, section 253B.07, subdivision 5, is amended to read:

Subd. 5. [PREHEARING EXAMINATION; REPORT.] The examination shall be held at a treatment facility or other suitable place the court determines is not likely to have a harmful effect on harm the health of the proposed patient. The county attorney and the patient's attorney may be present during the examination. Either party may waive this right. Unless otherwise agreed by the counsel for the proposed patient parties, a court appointed examiner shall file three copies of the report with the court not less than 48 hours prior to the commitment hearing. Copies of the examiner's report shall be sent to the county attorney, the proposed patient, and the patient's counsel.

Sec. 48. Minnesota Statutes 1996, section 253B.07, subdivision 7, is amended to read:

Subd. 7. [PRELIMINARY HEARING.] (a) No proposed patient may be held in a treatment facility under a judicial hold pursuant to subdivision 6 for longer than 72 hours, exclusive of Saturdays, Sundays, and legal holidays, unless the court holds a preliminary hearing and determines that probable cause exists to continue the standard is met to hold the person.

(b) The proposed patient, patient's counsel, the petitioner, the county attorney, and any other persons as the court directs shall be given at least 24 hours written notice of the preliminary hearing. The notice shall include the alleged grounds for confinement. The proposed patient shall be represented at the preliminary hearing by counsel. If The court finds it to be reliable, it may admit reliable hearsay evidence, including written reports, for the purpose of the preliminary hearing.

(c) The court, on its motion or on <u>the</u> motion of any party, may exclude or excuse a respondent <u>proposed patient</u> who is seriously disruptive or who is totally incapable of comprehending and participating in the proceedings. In such instances, the court shall, with specificity on the record, state the behavior of respondent the proposed patient or other circumstances justifying which justify proceeding in the absence of the respondent proposed patient.

(d) The court may order the continued holding continue the court hold of the proposed patient if it finds, by a preponderance of the evidence, that serious imminent physical harm to the proposed patient or others is likely if the proposed patient is not confined. The fact that If a proposed patient was acquitted of a crime against the person under section 611.026 immediately preceding the filing of the petition constitutes evidence, the court may presume that serious imminent physical harm to the patient or others is likely if the proposed patient is not confined and shifts the burden of going forward in the presentation of evidence to the proposed patient; provided that the standard of proof remains as required by this chapter.

(e) Upon a showing that a person subject to a petition for commitment may need treatment with neuroleptic medications and that the person may lack capacity to make decisions regarding that treatment, the court may appoint a substitute decision-maker as provided in section 253B.092, subdivision 6. The substitute decision-maker shall meet with the proposed patient and provider and make a report to the court at the hearing under section 253B.08 regarding whether the administration of neuroleptic medications is appropriate under the criteria of section 253B.092, subdivision 7. If the substitute decision-maker consents to treatment with neuroleptic medications and the proposed patient does not refuse the medication, neuroleptic medication may be administered to the patient. If the substitute decision-maker does not consent or the patient refuses, neuroleptic medication may not be administered without a court order, or in an emergency as set forth in section 253B.092, subdivision 3.

Sec. 49. Minnesota Statutes 1996, section 253B.08, subdivision 1, is amended to read:

Subdivision 1. [TIME FOR COMMITMENT HEARING.] The hearing on the commitment petition shall be held within 14 days from the date of the filing of the petition. For good cause shown, the court may extend the time of hearing up to an additional 30 days. When any The proceeding shall be dismissed if the proposed patient has not had a hearing on a commitment petition filed for the person's commitment within the allowed time, the proceedings shall be dismissed. The proposed patient, or the head of the treatment facility in which the person is held, may demand in writing at any time that the hearing be held immediately. Unless the hearing is held within five days of the date of the demand, exclusive of Saturdays, Sundays and legal

holidays, the petition shall be automatically discharged if the patient is being held in a treatment facility pursuant to court order. For good cause shown, the court may extend the time of hearing on the demand for an additional ten days.

Sec. 50. Minnesota Statutes 1996, section 253B.08, subdivision 2, is amended to read:

Subd. 2. [NOTICE OF HEARING.] The proposed patient, patient's counsel, the petitioner, the county attorney, and any other persons as the court directs shall be given at least five days' notice that a hearing will be held and at least two days' notice of the time and date of the hearing, except that any person may waive notice. Notice to the proposed patient may be waived by patient's counsel. If the proposed patient has no residence in this state, the commissioner shall be notified of the proceedings by the court.

Sec. 51. Minnesota Statutes 1996, section 253B.08, is amended by adding a subdivision to read:

Subd. 2a. [PLACE OF HEARING.] The hearing shall be conducted in a manner consistent with orderly procedure. The hearing shall be held at a courtroom meeting standards prescribed by local court rule which may be at a treatment facility.

Sec. 52. Minnesota Statutes 1996, section 253B.08, subdivision 3, is amended to read:

Subd. 3. [RIGHT TO ATTEND AND TESTIFY.] All persons to whom notice has been given may attend the hearing and, except for the proposed patient's counsel, may testify. The court shall notify them of their right to attend the hearing and to testify. The court may exclude any person not necessary for the conduct of the proceedings from the hearings except any person requested to be present by the proposed patient. Nothing in this section shall prevent the court from ordering the sequestration of any witness or witnesses other than the petitioner or the proposed patient.

Sec. 53. Minnesota Statutes 1996, section 253B.08, subdivision 5, is amended to read:

Subd. 5. [ABSENCE PERMITTED.] (a) The court may permit the proposed patient to waive the right to attend the hearing if it determines that the waiver is freely given. All waivers shall be on the record. At the time of the hearing the patient shall not be so under the influence or suffering from the effects of drugs, medication, or other treatment so as to be hampered in participating in the proceedings. When in the opinion of the licensed physician or licensed psychologist attending the patient is of the opinion that the discontinuance of drugs, medication, or other treatment is not in the best interest of the patient, the court, at the time of the hearing, shall be presented a record of all drugs, medication or other treatment which the patient has received during the 48 hours immediately prior to the hearing.

(b) The court, on its own motion or on the motion of any party, may exclude or excuse a respondent proposed patient who is seriously disruptive or who is totally incapable of comprehending and participating in the proceedings. In such instances, the court shall, with specificity on the record, state the behavior of respondent the proposed patient or other circumstances justifying proceeding in the absence of the respondent proposed patient.

Sec. 54. Minnesota Statutes 1996, section 253B.08, is amended by adding a subdivision to read:

Subd. 5a. [WITNESSES.] The proposed patient or the patient's counsel and the county attorney may present and cross-examine witnesses, including examiners, at the hearing. The court may in its discretion receive the testimony of any other person. Opinions of court-appointed examiners may not be admitted into evidence unless the examiner is present to testify, except by agreement of the parties.

Sec. 55. Minnesota Statutes 1996, section 253B.09, subdivision 1, is amended to read:

Subdivision 1. [STANDARD OF PROOF.] If the court finds by clear and convincing evidence that the proposed patient is a mentally ill, mentally retarded, or chemically dependent person and, that after careful consideration of reasonable alternative dispositions, including but not limited to, dismissal of petition, voluntary outpatient care, informal voluntary admission to a treatment facility, appointment of a guardian or conservator, or release before commitment as provided for

in subdivision 4, it finds that there is no suitable alternative to judicial commitment, the court shall commit the patient to the least restrictive treatment program which can meet the patient's treatment needs consistent with section 253B.03, subdivision 7. In deciding on the least restrictive program, the court shall consider a range of treatment alternatives including, but not limited to, community-based nonresidential treatment, community residential treatment, partial hospitalization, acute care hospital, and regional treatment center services. The court shall also consider the proposed patient's treatment preferences and willingness to participate in the treatment ordered. The court may not commit a patient to a facility or program that is not capable of meeting the patient's needs.

Sec. 56. Minnesota Statutes 1996, section 253B.09, subdivision 2, is amended to read:

Subd. 2. [FINDINGS.] The court shall find the facts specifically, and separately state its conclusions of law, and direct the entry of an appropriate judgment. Where commitment is ordered, the findings of fact and conclusions of law shall specifically state the proposed patient's conduct which is a basis for determining that each of the requisites for commitment is met.

If commitment is ordered, the findings shall also include a listing of identify less restrictive alternatives considered and rejected by the court and the reasons for rejecting each alternative.

If the proceedings are dismissed, the court may direct that the person be transported back to a suitable location.

Sec. 57. Minnesota Statutes 1996, section 253B.09, subdivision 3, is amended to read:

Subd. 3. [FINANCIAL DETERMINATION.] The court shall determine the nature and extent of the property of the patient and of the persons who are liable for the patient's care. If the patient is committed to a regional facility, a copy shall be transmitted treatment center, the court shall send a copy of the commitment order to the commissioner.

Sec. 58. Minnesota Statutes 1996, section 253B.09, is amended by adding a subdivision to read:

Subd. 3a. [REPORTING JUDICIAL COMMITMENTS INVOLVING PRIVATE TREATMENT PROGRAMS OR FACILITIES.] Notwithstanding section 253B.23, subdivision 9, when a court commits a patient to a treatment program or facility other than a state-operated program or facility, the court shall report the commitment to the commissioner through the supreme court information system for purposes of providing commitment information for firearm background checks under section 245.041.

Sec. 59. Minnesota Statutes 1996, section 253B.09, subdivision 5, is amended to read:

Subd. 5. [INITIAL COMMITMENT PERIOD.] The initial commitment begins on the date that the court issues its order or warrant under section 253B.10, subdivision 1. For persons committed as mentally ill, mentally retarded, or chemically dependent the initial commitment shall not exceed six months. At least 60 days, but not more than 90 days, after the commencement of the initial commitment of a person as mentally ill, mentally retarded, or chemically dependent, the head of the facility shall file a written report with the committing court with a copy to the patient and patient's counsel. This first report shall set forth the same information as is required in section 253B.12, subdivision 1, but no hearing shall be required at this time. If no written report is filed within the required time, or if it describes the patient as not in need of further institutional care and treatment, the proceedings shall be terminated by the committing court, and the patient shall be discharged from the treatment facility. If the person is discharged prior to the expiration of 60 days, the report required by this subdivision shall be filed at the time of discharge.

Sec. 60. [253B.092] [STANDARDS AND CRITERIA FOR ADMINISTRATION OF NEUROLEPTIC MEDICATION; PROCEDURES.]

Subdivision 1. [GENERAL.] Neuroleptic medications may be administered to patients subject to early intervention or civil commitment as mentally ill or mentally ill and dangerous only as provided in this section. For purposes of this section, "patient" includes a proposed patient who is the subject of a petition for early intervention or commitment.
Subd. 2. [ADMINISTRATION WITHOUT JUDICIAL REVIEW.] <u>Neuroleptic medications</u> may be administered without judicial review in the following circumstances:

(1) the patient has the capacity to make an informed decision under subdivision 4;

(2) the patient does not have the present capacity to consent to the administration of neuroleptic medication, but prepared a durable power of attorney for health care under chapter 145C or a declaration under section 253B.03, subdivision 6d, requesting treatment or authorizing an agent or proxy to request treatment, and the agent or proxy has requested the treatment;

(3) a substitute decision-maker appointed by the court consents to the administration of the neuroleptic medication and the patient does not refuse administration of the medication; or

(4) the substitute decision-maker does not consent or the patient is refusing medication, and the patient is in an emergency situation.

Subd. 3. [EMERGENCY ADMINISTRATION.] A treating physician may administer neuroleptic medication to a patient who does not have capacity to make a decision regarding administration of the medication if the patient is in an emergency situation. Medication may be administered for so long as the emergency continues to exist, up to 14 days, if the treating physician determines that the medication is necessary to prevent serious, immediate physical harm to the patient or to others. If a request for authorization to administer medication is made to the court within the 14 days, the treating physician may continue the medication through the date of the first court hearing, if the emergency continues to exist. If the request for authorization to administer medication is made to the court in conjunction with a petition for commitment or early intervention and the court makes a determination at the preliminary hearing under section 253B.07, subdivision 7, that there is sufficient cause to continue the medication until that hearing under section 253B.08, the treating physician may continue the medication until that hearing, if the emergency continues to exist. The treatment facility shall document the emergency in the patient's medical record in specific behavioral terms.

<u>Subd. 4.</u> [PATIENTS WITH CAPACITY TO MAKE INFORMED DECISION.] <u>A patient</u> who has the capacity to make an informed decision regarding the administration of neuroleptic medication may consent or refuse consent to administration of the medication. The informed consent of a patient must be in writing.

Subd. 5. [DETERMINATION OF CAPACITY.] (a) A patient is presumed to have capacity to make decisions regarding administration of neuroleptic medication.

(b) In determining a person's capacity to make decisions regarding the administration of neuroleptic medication, the court shall consider:

(1) whether the person demonstrates an awareness of the nature of the person's situation, including the reasons for hospitalization, and the possible consequences of refusing treatment with neuroleptic medications;

(2) whether the person demonstrates an understanding of treatment with neuroleptic medications and the risks, benefits, and alternatives; and

(3) whether the person communicates verbally or nonverbally a clear choice regarding treatment with neuroleptic medications that is a reasoned one not based on delusion, even though it may not be in the person's best interests.

Disagreement with the physician's recommendation is not evidence of an unreasonable decision.

<u>Subd.</u> 6. [PATIENTS WITHOUT CAPACITY TO MAKE INFORMED DECISION; SUBSTITUTE DECISION-MAKER.] (a) Upon request of any person, and upon a showing that administration of neuroleptic medications may be recommended and that the person may lack capacity to make decisions regarding the administration of neuroleptic medication, the court shall appoint a substitute decision-maker with authority to consent to the administration of neuroleptic medication as provided in this section. The substitute decision-maker must be an individual or a community or institutional multidisciplinary panel designated by the local mental health authority. In appointing a substitute decision-maker, the court shall give preference to a guardian or conservator, proxy, or attorney-in-fact with authority to make health care decisions for the patient. The court may provide for the payment of a reasonable fee to the substitute decision-maker for services under this section or may appoint a volunteer.

(b) If the person's treating physician recommends treatment with neuroleptic medication, the substitute decision-maker may give or withhold consent to the administration of the medication, based on the standards under subdivision 7. If the substitute decision-maker gives informed consent to the treatment and the person does not refuse, the substitute decision-maker shall provide written consent to the treating physician and the medication may be administered. The substitute decision-maker shall also notify the court that consent has been given. If the substitute decision-maker refuses or withdraws consent or the person refuses the medication, neuroleptic medication may not be administered to the person without a court order or in an emergency.

(c) A substitute decision-maker appointed under this section has access to the pertinent sections of the patient's health records on the past or present administration of medication. The designated agency or a person involved in the patient's physical or mental health care may disclose information to the substitute decision-maker for the sole purpose of performing the responsibilities under this section.

(d) At a hearing under section 253B.08, the petitioner has the burden of proving incapacity by a preponderance of the evidence. If a substitute decision-maker has been appointed by the court, the court shall make findings regarding the patient's capacity to make decisions regarding the administration of neuroleptic medications and affirm or reverse its appointment of a substitute decision-maker. If the court affirms the appointment of the substitute decision-maker, and if the substitute decision-maker has consented to the administration of the medication and the patient has not refused, the court shall make findings that the substitute decision-maker has consented and the treatment is authorized. If a substitute decision-maker has not yet been appointed, upon request the court shall make findings regarding the patient's capacity and appoint a substitute decision-maker if appropriate.

(e) If an order for civil commitment or early intervention did not provide for the appointment of a substitute decision-maker or for the administration of neuroleptic medication, the treatment facility may later request the appointment of a substitute decision-maker upon a showing that administration of neuroleptic medications is recommended and that the person lacks capacity to make decisions regarding the administration of neuroleptic medications. A hearing is not required in order to administer the neuroleptic medication unless requested under subdivision 10 or if the substitute decision-maker withholds or refuses consent or the person refuses the medication.

(f) The substitute decision-maker's authority to consent to treatment lasts for the duration of the court's order of appointment or until modified by the court.

If the substitute decision-maker withdraws consent or the patient refuses consent, neuroleptic medication may not be administered without a court order.

(g) If there is no hearing after the preliminary hearing, then the court shall, upon the request of any interested party, review the reasonableness of the substitute decision-maker's decision based on the standards under subdivision 7. The court shall enter an order upholding or reversing the decision within seven days.

Subd. 7. [STANDARDS FOR MAKING DECISION REGARDING ADMINISTRATION OF NEUROLEPTIC MEDICATION.] (a) When a person lacks capacity to make decisions regarding the administration of neuroleptic medication, the substitute decision-maker or the court shall use the standards in this subdivision in making a decision regarding administration of the medication.

(b) If the person clearly stated what the person would choose to do in this situation when the person had the capacity to make a reasoned decision, the person's wishes must be followed. Evidence of the person's wishes may include written instruments, including a durable power of

attorney for health care under chapter 145C or a declaration under section 253B.03, subdivision 6d.

(c) If evidence of the person's wishes regarding the administration of neuroleptic medications is conflicting or lacking, the decision must be based on what a reasonable person would do, taking into consideration:

(1) the person's family, community, moral, religious, and social values;

(2) the medical risks, benefits, and alternatives to the proposed treatment;

(3) past efficacy and any extenuating circumstances of past use of neuroleptic medications; and

(4) any other relevant factors.

<u>Subd. 8.</u> [PROCEDURE WHEN PATIENT REFUSES MEDICATION.] (a) If the substitute decision-maker or the patient refuses to consent to treatment with neuroleptic medications, and absent an emergency as set forth in subdivision 3, neuroleptic medications may not be administered without a court order. Upon receiving a written request for a hearing, the court shall schedule the hearing within 14 days of the request. The matter may be heard as part of any other district court proceeding under this chapter. By agreement of the parties or for good cause shown, the court may extend the time of hearing an additional 30 days.

(b) The patient must be examined by a court examiner prior to the hearing. If the patient refuses to participate in an examination, the examiner may rely on the patient's medical records to reach an opinion as to the appropriateness of neuroleptic medication. The patient is entitled to counsel and a second examiner, if requested by the patient or patient's counsel.

(c) The court may base its decision on relevant and admissible evidence, including the testimony of a treating physician or other qualified physician, a member of the patient's treatment team, a court appointed examiner, witness testimony, or the patient's medical records.

(d) If the court finds that the patient has the capacity to decide whether to take neuroleptic medication or that the patient lacks capacity to decide and the standards for making a decision to administer the medications under subdivision 7 are not met, the treating facility may not administer medication without the patient's informed written consent or without the declaration of an emergency, or until further review by the court.

(e) If the court finds that the patient lacks capacity to decide whether to take neuroleptic medication and has applied the standards set forth in subdivision 7, the court may authorize the treating facility and any other community or treatment facility to which the patient may be transferred or provisionally discharged, to involuntarily administer the medication to the patient.

(f) A finding of lack of capacity under this section must not be construed to determine the patient's competence for any other purpose.

(g) The court may authorize the administration of neuroleptic medication until the termination of a determinate commitment. If the patient is committed for an indeterminate period, the court may authorize treatment of neuroleptic medication for not more than two years, subject to the patient's right to petition the court for review of the order. The treatment facility must submit annual reports to the court, which shall provide copies to the patient and the respective attorneys.

(h) The court may limit the maximum dosage of neuroleptic medication that may be administered.

(i) If physical force is required to administer the neuroleptic medication, force may only take place in a treatment facility or therapeutic setting where the person's condition can be reassessed and appropriate medical staff are available.

Subd. 9. [IMMUNITY.] A substitute decision-maker who consents to treatment is not civilly or criminally liable for the performance of or the manner of performing the treatment. A person is not

liable for performing treatment without consent if the substitute decision-maker has given written consent. This provision does not affect any other liability that may result from the manner in which the treatment is performed.

Subd. 10. [REVIEW.] A patient or other person may petition the court under section 253B.17 for review of any determination under this section or for a decision regarding the administration of neuroleptic medications, appointment of a substitute decision-maker, or the patient's capacity to make decisions regarding administration of neuroleptic medications.

Sec. 61. [253B.0921] [ACCESS TO MEDICAL RECORDS.]

<u>A treating physician who makes medical decisions regarding the prescription and</u> administration of medication for treatment of a mental illness has access to the pertinent sections of a patient's health records on past administration of medication at any treatment facility, if the patient lacks the capacity to authorize the release of records. Upon request of a treating physician under this section, a treatment facility shall supply complete information relating to the past records on administration of medication of a patient subject to this chapter. A patient who has the capacity to authorize the release of data retains the right to make decisions regarding access to medical records as provided by section 144.335.

Sec. 62. Minnesota Statutes 1996, section 253B.095, is amended to read:

253B.095 [RELEASE BEFORE COMMITMENT.]

Subdivision 1. [COURT RELEASE.] (a) After the hearing and before a commitment order has been issued, the court may release a proposed patient to the custody of an individual or agency upon conditions that guarantee the care and treatment of the patient.

(b) A person against whom a criminal proceeding is pending may not be released. Continuances may not extend beyond 14

(c) A continuance for dismissal, with or without findings, may be granted for up to 90 days.

 (\underline{d}) When the court stays an order for commitment for more than 14 days beyond the date of the initially scheduled hearing, the court shall issue an order that meets the requirements of this section.

Subd. 2. [STAY BEYOND 14 DAYS.] An order staying commitment for more than 14 days must include:

(1) a written plan for services to which the proposed patient has agreed;

(2) a finding that the proposed treatment is available and accessible to the patient and that public or private financial resources are available to pay for the proposed treatment; and

(3) conditions the patient must meet to avoid imposition revocation of the stayed commitment order and imposition of the commitment order.

(e) A person receiving treatment under this section has all rights under this chapter.

Subd. 3. 2. [CASE MANAGER.] When a court releases a patient with mental illness under this section, the court shall appoint a direct the case manager.

Subd. 4. [REPORTS.] The case manager shall to report to the court at least once every 90 days. The case manager and shall immediately report a substantial failure of a patient or provider to comply with the conditions of the release.

Subd. 5. 3. [DURATION.] The maximum duration of an a stayed order under this section is six months. The court may continue the order for a maximum of an additional 12 months if, after notice and hearing, under sections 253B.08 and 253B.09 the court finds that (1) the person continues to be mentally ill suffer from mental illness, chemical dependency, or mental retardation, and (2) an order is needed to protect the patient or others.

Subd. 6. 4. [MODIFICATION OF ORDER.] An order under this section may be modified upon agreement of the parties and approval of the court.

Subd. 7. 5. [REVOCATION OF ORDER.] The court, on its own motion or upon the petition motion of any person party that the patient has not complied with a material condition of release, and after notice and a hearing <u>unless otherwise ordered by the court</u>, may revoke any release and commit the proposed patient under this chapter.

Sec. 63. Minnesota Statutes 1996, section 253B.10, is amended to read:

253B.10 [PROCEDURES FOR UPON COMMITMENT.]

Subdivision 1. [ADMINISTRATIVE REQUIREMENTS.] When a person is committed, the court shall issue a warrant in duplicate, or an order committing the patient to the custody of the head of the treatment facility. The warrant or order shall state that the patient meets the statutory criteria for civil commitment. Upon the arrival of a patient at the designated treatment facility, the head of the facility shall retain the duplicate of the warrant and endorse receipt upon the original warrant, which shall or acknowledge receipt of the order. The endorsed receipt or acknowledgment must be filed in the court of commitment. After arrival, the patient shall be under the control and custody of the head of the treatment facility.

Copies of the petition for commitment, the court's findings of fact and conclusions of law, the court order committing the patient, the report of the examiners, and the prepetition report shall be provided promptly to the treatment facility at the time of admission.

Subd. 2. [TRANSPORTATION.] When a proposed patient is about to be placed in a treatment facility, the court may order the designated agency, the treatment facility, or any responsible adult to transport the patient to the treatment facility. Unless otherwise ordered by the court Whenever possible, a peace officer who provides the transportation shall not be in uniform and shall not use a vehicle visibly marked as a police vehicle. The proposed patient may be accompanied by one or more interested persons.

When a proposed patient who is at a regional treatment center requests a change of venue or when a hearing is to be held for adjudication of a patient's status pursuant to section 253B.17, the commissioner shall provide transportation.

Subd. 3. [NOTICE OF ADMISSION.] Whenever a committed person has been admitted to a treatment facility under the provisions of sections 253B.09 or 253B.18, the head of the treatment facility shall immediately notify the patient's spouse or parent and the county of the patient's legal residence if the county may be liable for a portion of the cost of institutionalization treatment. If the committed person was admitted upon the petition of a spouse or parent the head of the treatment facility shall notify an interested person other than the petitioner.

Subd. 4. [PRIVATE INSTITUTIONALIZATION TREATMENT.] Patients or other responsible persons are required to pay the necessary charges for patients committed or transferred to private treatment facilities. Private treatment facilities may refuse to accept a committed person.

<u>Subd. 5.</u> [TRANSFER TO VOLUNTARY STATUS.] <u>At any time prior to the expiration of the initial commitment period, a patient who has not been committed as mentally ill and dangerous to the public may be transferred to voluntary status upon the patient's application in writing with the consent of the head of the facility. Upon transfer, the head of the treatment facility shall immediately notify the court in writing and the court shall terminate the proceedings.</u>

Sec. 64. Minnesota Statutes 1996, section 253B.11, subdivision 2, is amended to read:

Subd. 2. [FACILITIES.] Each county or a group of counties shall maintain or provide by contract a facility for confinement of persons held temporarily for observation, evaluation, diagnosis, treatment, and care. When the temporary confinement is provided at a regional center, the commissioner shall charge the county of financial responsibility for the costs of confinement of persons hospitalized under section 253B.05, subdivisions 1 and 2, and section 253B.07, subdivision 6, except that the commissioner shall bill the responsible prepaid plan for medically

necessary hospitalizations for individuals enrolled in a prepaid plan under contract to provide medical assistance, general assistance medical care, or MinnesotaCare services. If the prepaid plan determines under the terms of the medical assistance, general assistance medical care, or MinnesotaCare contract that a hospitalization was not medically necessary, the county is responsible. "County of financial responsibility" means the county in which the person resides at the time of confinement or, if the person has no residence in this state, the county which initiated the confinement. The charge shall be based on the commissioner's determination of the cost of care pursuant to section 246.50, subdivision 5. The rate in effect during commitment continues to be the rate paid by the county while a patient is subject to recommitment proceedings. When there is a dispute as to which county is the county of financial responsibility, the county charged for the costs of confinement shall pay for them pending final determination of the dispute over financial responsibility. Disputes about the county of financial responsibility shall be submitted to the commissioner to be settled in the manner prescribed in section 256G.09.

Sec. 65. Minnesota Statutes 1996, section 253B.12, subdivision 1, is amended to read:

Subdivision 1. [REPORT <u>REPORTS</u>.] Prior to the termination of the initial commitment order or final discharge of the patient, the head of the facility shall file a written report with the committing court with a copy to the patient and patient's counsel, setting (a) If a patient who was committed as mentally ill, mentally retarded, or chemically dependent is discharged from treatment within the first 60 days after the date of the commitment order, the head of the treatment facility shall file a written report with the committing court describing the patient's need for further treatment. A copy of the report must be provided to the county attorney, the patient, and the patient's counsel.

(b) If a patient who was committed as mentally ill, mentally retarded, or chemically dependent remains in treatment more than 60 days after the date of the commitment, then at least 60 days, but not more than 90 days, after the date of the order, the head of the facility that has custody of the patient shall file a written report with the committing court and provide a copy to the county attorney, the patient, and the patient's counsel. The report must set forth in detailed narrative form at least the following:

(1) the diagnosis of the patient with the supporting data;

(2) the anticipated discharge date;

(3) an individualized treatment plan;

(4) a detailed description of the discharge planning process with suggested after care plan;

(5) whether the patient is in need of further care and treatment with, the treatment facility which is needed, and evidence to support the response;

(6) whether any further care and treatment must be provided in a treatment facility with evidence to support the response;

(7) whether in the opinion of the head of the facility the patient must continue to be committed to a treatment facility;

(8) whether in the opinion of the head of the facility the patient satisfies the statutory requirement for continued commitment to a treatment facility, with documentation to support the opinion; and

(9) (7) whether the administration of neuroleptic medication is clinically indicated, whether the patient is able to give informed consent to that medication, and the basis for these opinions.

(c) Prior to the termination of the initial commitment order or final discharge of the patient, the head of the treatment facility that has custody or care of the patient shall file a written report with the committing court with a copy to the patient and the patient's counsel that sets forth the information required in paragraph (b).

(d) If the patient has been provisionally discharged from a treatment facility, the report shall be prepared by the case manager.

(e) If no written report is filed within the required time, or if a report describes the patient as not in need of further institutional care and treatment, the proceedings must be terminated by the committing court and the patient discharged from the treatment facility.

Sec. 66. Minnesota Statutes 1996, section 253B.12, is amended by adding a subdivision to read:

Subd. 2a. [TIME FOR HEARING.] <u>A review hearing must be held within 14 days after receipt</u> by the committing court of the report required under subdivision 1, paragraph (b), and before the time the commitment expires. For good cause shown, the court may continue the hearing for up to an additional 14 days and extend any orders until the review hearing is held.

The patient, the patient's counsel, the petitioner, and other persons as the court directs must be given at least five days' notice of the time and place of the hearing.

Sec. 67. Minnesota Statutes 1996, section 253B.12, subdivision 3, is amended to read:

Subd. 3. [EXAMINATION.] Prior to the <u>review</u> hearing, the court shall inform the patient of the right to an independent examination by an examiner chosen by the patient and appointed in accordance with provisions of section 253B.07, subdivision 3. The report of the examiner may be submitted at the hearing.

Sec. 68. Minnesota Statutes 1996, section 253B.12, subdivision 4, is amended to read:

Subd. 4. [HEARING; STANDARD OF PROOF.] The committing court shall not make a final determination of the need to continue commitment unless a hearing is held and the court finds by clear and convincing evidence that (1) the person continues to be mentally ill, mentally retarded, or chemically dependent; (2) involuntary commitment is necessary for the protection of the patient or others; and (3) there is no alternative to involuntary commitment.

In determining whether a person continues to be mentally ill, chemically dependent, or mentally retarded, the court need not find that there has been a recent attempt or threat to physically harm self or others, or a recent failure to provide necessary personal food, clothing, shelter, or medical care. Instead, the court must find that the patient is likely to attempt to physically harm self or others, or to fail to provide necessary personal food, clothing, shelter, or medical care unless involuntary commitment is continued.

Sec. 69. Minnesota Statutes 1996, section 253B.13, subdivision 1, is amended to read:

Subdivision 1. [MENTALLY ILL <u>OR CHEMICALLY DEPENDENT</u> PERSONS.] If at the conclusion of a review hearing held pursuant to section 253B.12, it is found that the criteria for continued commitment have been satisfied, the court finds that the person continues to be mentally ill or chemically dependent and in need of treatment or supervision, the court shall determine the probable length of continued commitment necessary. No period of commitment shall exceed this length of time or 12 months, whichever is less.

At the conclusion of the prescribed period, commitment may not be continued unless a new petition is filed pursuant to section 253B.07 and hearing and determination made on it. Notwithstanding the provisions of section 253B.09, subdivision 5, the initial commitment period under the new petition shall be the probable length of commitment necessary or 12 months, whichever is less. The standard of proof at the hearing on the new petition shall be the standard specified in section 253B.12, subdivision 4.

Sec. 70. Minnesota Statutes 1996, section 253B.13, subdivision 2, is amended to read:

Subd. 2. [MENTALLY RETARDED PERSONS.] If, at the conclusion of a <u>review</u> hearing held pursuant to section 253B.12, it is found the court finds that the person continues to be mentally retarded, the court shall order commitment of the person for an indeterminate period of time, subject to the reviews required by section 253B.03, subdivisions 5 and 7, and subject to the right of the patient to seek judicial review of continued commitment.

Sec. 71. Minnesota Statutes 1996, section 253B.14, is amended to read:

253B.14 [TRANSFER OF COMMITTED PERSONS.]

The commissioner may transfer any committed person, other than a person committed as mentally ill and dangerous to the public, from one regional <u>treatment</u> center to any other institution treatment facility under the commissioner's jurisdiction which is capable of providing proper care and treatment. When a committed person is transferred from one treatment facility to another, written notice shall be given to the committing court, the county attorney, the patient's counsel, and to the person's parent or spouse or, if none is known, to an interested person, and the designated agency.

Sec. 72. [253B.141] [AUTHORITY TO DETAIN AND TRANSPORT A MISSING PATIENT.]

Subdivision 1. [REPORT OF ABSENCE.] (a) If a patient committed under this chapter or detained under a court-ordered hold is absent without authorization, and either: (1) does not return voluntarily within 72 hours of the time the unauthorized absence began; or (2) is considered by the head of the treatment facility to be a danger to self or others, then the head of the treatment facility shall report the absence to the local law enforcement agency. The head of the treatment facility shall also notify the committing court that the patient is absent and that the absence has been reported to the local law enforcement agency. The committing court may issue an order directing the law enforcement agency to transport the patient to an appropriate facility.

(b) Upon receiving a report that a patient subject to this section is absent without authorization, the local law enforcement agency shall enter information on the patient through the criminal justice information system into the missing persons file of the National Crime Information Center computer according to the missing persons practices.

<u>Subd. 2.</u> [APPREHENSION; RETURN TO FACILITY.] (a) Upon receiving the report of absence from the head of the treatment facility or the committing court, a patient may be apprehended and held by a peace officer in any jurisdiction pending return to the facility from which the patient is absent without authorization. A patient may also be returned to any facility operated by the commissioner. A mentally ill and dangerous person, a sexual psychopathic personality patient, or a sexually dangerous person committed under section 253B.18 and detained under this subdivision may be held in a jail or lockup only if:

(1) there is no other feasible place of detention for the patient;

(2) the detention is for less than 24 hours; and

(3) there are protections in place, including segregation of the patient, to ensure the safety of the patient.

(b) If a patient is detained under this subdivision, the head of the treatment facility from which the patient is absent shall arrange to pick up the patient within 24 hours of the time detention was begun and shall be responsible for securing transportation for the patient to the facility. The expense of detaining and transporting a patient shall be the responsibility of the treatment facility from which the patient is absent. The expense of detaining and transporting a patient to a treatment facility operated by the department of human services shall be paid by the commissioner unless paid by the patient or persons on behalf of the patient.

Subd. 3. [NOTICE OF APPREHENSION.] Immediately after an absent patient is located, the head of the treatment facility from which the patient is absent, or the law enforcement agency that located or returned the absent patient, shall notify the law enforcement agency that first received the absent patient report under this section and that agency shall cancel the missing persons entry from the National Crime Information Center computer.

Sec. 73. Minnesota Statutes 1996, section 253B.15, subdivision 1, is amended to read: Subdivision 1. [PROVISIONAL DISCHARGE.] The head of the treatment facility may

provisionally discharge any patient without discharging the commitment, unless the patient was found by the committing court to be mentally ill and dangerous to the public.

Each patient released on provisional discharge shall have an <u>a written</u> aftercare plan developed which specifies the services and treatment to be provided as part of the aftercare plan, the financial resources available to pay for the services specified, the expected period of provisional discharge, the precise goals for the granting of a final discharge, and conditions or restrictions on the patient during the period of the provisional discharge. <u>The aftercare plan shall be provided to the patient</u>, the patient's attorney, and the designated agency.

The aftercare plan shall be reviewed on a quarterly basis by the patient, designated agency and other appropriate persons. The aftercare plan shall contain the grounds upon which a provisional discharge may be revoked. The provisional discharge shall terminate on the date specified in the plan unless specific action is taken to revoke or extend it.

Sec. 74. Minnesota Statutes 1996, section 253B.15, subdivision 1a, is amended to read:

Subd. 1a. [CASE MANAGER REPRESENTATIVE OF DESIGNATED AGENCY.] Before a provisional discharge is granted, a representative of the designated agency must be identified as the case manager. The case manager shall to ensure continuity of care by being involved with the treatment facility and the patient prior to the provisional discharge. The case manager representative of the designated agency shall coordinate plans for and monitor the patient's aftercare program. When the patient is on a provisional discharge, the representative of the designated agency shall provide the treatment report to the court required under section 253B.12, subdivision 1.

Sec. 75. Minnesota Statutes 1996, section 253B.15, subdivision 2, is amended to read:

Subd. 2. [REVOCATION OF PROVISIONAL DISCHARGE.] The head of the treatment facility designated agency may revoke a provisional discharge if:

(i) The patient has violated material conditions of the provisional discharge, and the violation creates the need to return the patient to the facility a more restrictive setting; or,

(ii) There exists a serious likelihood that the safety of the patient or others will be jeopardized, in that either the patient's need for food, clothing, shelter, or medical care are not being met, or will not be met in the near future, or the patient has attempted or threatened to seriously physically harm self or others; and

(iii) revocation is the least restrictive alternative available.

Any interested person, including the designated agency, may request that the head of the treatment facility designated agency revoke the patient's provisional discharge. Any person making a request shall provide the head of the treatment facility designated agency with a written report setting forth the specific facts, including witnesses, dates and locations, supporting a revocation, demonstrating that every effort has been made to avoid revocation and that revocation is the least restrictive alternative available.

Sec. 76. Minnesota Statutes 1996, section 253B.15, subdivision 3, is amended to read:

Subd. 3. [PROCEDURE; NOTICE.] When the possibility of revocation becomes apparent, the designated agency shall notify the patient, the patient's attorney, and all participants in the plan, and every effort shall be made to prevent revocation.

Revocation shall be commenced by a the designated agency's written notice of intent to revoke provisional discharge, which shall be served upon given to the patient, the patient's attorney, and the designated agency treatment facility. The notice shall set forth the grounds upon which the intention to revoke is based, and shall inform the patient of the rights of a patient under this chapter.

Sec. 77. Minnesota Statutes 1996, section 253B.15, is amended by adding a subdivision to read:

Subd. 3a. [REPORT TO THE COURT.] Within 48 hours of giving notice to the patient, the designated agency shall file with the court a copy of the notice and a report setting forth the specific facts, including witnesses, dates and locations, which (1) support revocation, (2) demonstrate that revocation is the least restrictive alternative available, and (3) show that specific efforts were made to avoid revocation. The designated agency shall provide copies of the report to the patient, the patient's attorney, the county attorney, and the treatment facility within 48 hours of giving notice to the patient under subdivision 3.

Sec. 78. Minnesota Statutes 1996, section 253B.15, is amended by adding a subdivision to read:

Subd. 3b. [REVIEW.] The patient may request judicial review of the intended revocation by filing a petition for review and an affidavit with the committing court. The affidavit shall state specific grounds for opposing the revocation. If the patient does not file a petition for review within five days of receiving the notice under subdivision 3, revocation of the provisional discharge is final and the court, without hearing, may order the patient into a treatment facility. If the patient files a petition for review, the court shall review the petition and determine whether a genuine issue exists as to the propriety of the revocation. The burden of proof is on the designated agency to show that no genuine issue exists as to the propriety of the revocation, the revocation of the provisional discharge is final.

Sec. 79. Minnesota Statutes 1996, section 253B.15, is amended by adding a subdivision to read:

Subd. 3c. [HEARING.] If the court finds under subdivision 3b that a genuine issue exists as to the propriety of the revocation, the court shall hold a hearing on the petition within three days after the patient files the petition. The court may continue the review hearing for an additional five days upon any party's showing of good cause. At the hearing, the burden of proof is on the designated agency to show a factual basis for the revocation. At the conclusion of the hearing, the court shall make specific findings of fact. The court shall affirm the revocation if it finds:

(1) a factual basis for revocation due to:

(i) a violation of the material conditions of the provisional discharge that creates a need for the patient to return to a more restrictive setting; or

(ii) a probable danger of harm to the patient or others if the provisional discharge is not revoked; and

(2) that revocation is the least restrictive alternative available.

If the court does not affirm the revocation, the court shall order the patient returned to provisional discharge status.

Sec. 80. Minnesota Statutes 1996, section 253B.15, subdivision 5, is amended to read:

Subd. 5. [RETURN TO FACILITY.] The case manager may When the designated agency serves notice of the intent to revoke a patient's provisional discharge, it may also apply to the committing court for an order directing that the patient be returned to the a facility. The court may order the patient returned to the a facility prior to a review hearing only upon finding that immediate return to the a facility is necessary to avoid serious, imminent harm to the patient or others because there is a serious likelihood that the safety of the patient or others will be jeopardized, in that (1) the patient's need for food, clothing, shelter, or medical care is not being met, or will not be met in the near future, or (2) the patient has attempted or threatened to seriously harm self or others. If a voluntary return is not arranged, the head of the treatment facility may request a health officer, a welfare officer, or a peace officer to return the patient to the treatment facility from which the patient was released or to any other treatment facility which consents to receive the patient. If necessary, the head of the treatment facility may request the committing court to direct a health or peace officer in the county where the patient is located to return the patient to the treatment facility or to another treatment facility which consents to receive the patient. The expense of returning the patient to a regional treatment facility center shall be paid by the commissioner unless paid by the patient or the patient's relatives. If the court orders the patient

to return to the treatment facility and the patient wants judicial review of the revocation, the patient must file the petition for review and affidavit required under subdivision 3b within 48 hours of receipt of the notice of the intent to revoke.

Sec. 81. Minnesota Statutes 1996, section 253B.15, subdivision 10, is amended to read:

Subd. 10. [VOLUNTARY RETURN.] With the consent of the head of the treatment facility, a patient may voluntarily return to inpatient status at the treatment facility as follows:

(a) As an informal a voluntary patient, in which case the patient's commitment is discharged;

(b) As a committed patient, in which case the patient's provisional discharge is voluntarily revoked; or

(c) On temporary return from provisional discharge, in which case both the commitment and the provisional discharge remain in effect.

Prior to readmission, the patient shall be informed of status upon readmission.

Sec. 82. Minnesota Statutes 1996, section 253B.16, subdivision 1, is amended to read:

Subdivision 1. [DATE.] The head of a treatment facility shall discharge any patient admitted as mentally ill or, chemically dependent, or a person with mental retardation admitted under Minnesota Rules of Criminal Procedure, rules 20.01 and 20.02, to the secure bed component of the Minnesota extended treatment options when certified by the head of the facility to be certifies that the person is no longer in need of institutional care and treatment or at the conclusion of any period of time specified in the commitment order, whichever occurs first. The head of a treatment facility shall discharge any person admitted as mentally retarded, except those admitted under Minnesota Rules of Criminal Procedure, rules 20.01 and 20.02, to the secure bed component of the Minnesota Rules of Criminal Procedure, rules 20.01 and 20.02, to the secure bed component of the Minnesota Rules of Criminal Procedure, rules 20.01 and 20.02, to the secure bed component of the Minnesota Rules of Criminal Procedure, rules 20.01 and 20.02, to the secure bed component of the Minnesota extended treatment options, when that person's screening team has determined, under section 256B.092, subdivision 8, that the person's needs can be met by services provided in the community and a plan has been developed in consultation with the interdisciplinary team to place the person in the available community services.

Sec. 83. Minnesota Statutes 1996, section 253B.17, subdivision 1, is amended to read:

Subdivision 1. [PETITION.] Any patient, except one committed as mentally ill and dangerous to the public, or any interested person may petition the committing court or the court to which venue has been transferred for an order that the patient is not in need of continued institutionalization care and treatment or for an order that an individual is no longer mentally ill, mentally retarded, or chemically dependent, or for any other relief as the court deems just and equitable. A patient committed as mentally ill or mentally ill and dangerous may petition the committing court or the court to which venue has been transferred for a hearing concerning the administration of neuroleptic medication.

Sec. 84. Minnesota Statutes 1996, section 253B.17, subdivision 3, is amended to read:

Subd. 3. [EXAMINERS.] The court shall appoint an examiner and, at the patient's request, shall appoint a second examiner of the patient's choosing to be paid for by the county at a rate of compensation to be fixed by the court. <u>Unless otherwise agreed by the parties, the examiners shall</u> file a report with the court not less than 48 hours prior to the hearing under this section.

Sec. 85. Minnesota Statutes 1996, section 253B.18, subdivision 1, is amended to read:

Subdivision 1. [PROCEDURE.] Upon the filing of a petition alleging that a proposed patient is mentally ill and dangerous to the public, the court shall hear the petition as provided in sections 253B.07 and 253B.08. If the court finds by clear and convincing evidence that the proposed patient is mentally ill and dangerous to the public, it shall commit the person to the Minnesota Security Hospital, a regional center designated by the commissioner or to a secure treatment facility or to a treatment facility willing to accept the patient under commitment. In any case where the petition was filed immediately following the acquittal of the proposed patient for a crime

against the person pursuant to a verdict of not guilty by reason of mental illness, the verdict constitutes evidence that the proposed patient is mentally ill and dangerous within the meaning of this section and shifts. The proposed patient has the burden of going forward in the presentation of evidence to the proposed patient; provided that. The standard of proof remains as required by this chapter. Upon commitment, admission procedures shall be carried out pursuant to section 253B.10.

Sec. 86. Minnesota Statutes 1996, section 253B.18, subdivision 2, is amended to read:

Subd. 2. [REVIEW; HEARING.] A written treatment report shall be filed by the treatment facility with the committing court within 60 days after commitment. If the person is in the custody of the commissioner of corrections when the initial commitment is ordered under subdivision 1, the written treatment report must be filed within 60 days after the person is admitted to the Minnesota security hospital or a private hospital receiving the person a secure treatment facility. The court, prior to making shall hold a hearing to make a final determination with regard to a as to whether the person initially should remain committed as mentally ill and dangerous to the public, shall hold a hearing. The hearing shall be held within 40 days of the court's receipt of the written treatment report, if one is filed, or within 90 days of the date of initial commitment or admission, unless otherwise agreed by the parties. If the court finds that the patient qualifies for commitment should be committed as mentally ill person and the person shall be deemed not to have been found to be dangerous to the public for the purposes of subdivisions 4 to 15. Failure of the treatment facility to provide the required report at the end of the 60-day period shall not result in automatic discharge of the patient.

Sec. 87. Minnesota Statutes 1996, section 253B.18, subdivision 3, is amended to read:

Subd. 3. [INDETERMINATE COMMITMENT.] If the court finds at the <u>final determination</u> hearing held pursuant to subdivision 2 that the patient continues to be mentally ill and dangerous, then the court shall order commitment of the proposed patient for an indeterminate period of time. Subsequent to <u>After</u> a final determination that a patient is mentally ill and dangerous to the public, the patient shall be transferred, provisionally discharged or discharged, only as provided in this section.

Sec. 88. Minnesota Statutes 1996, section 253B.18, subdivision 4, is amended to read:

Subd. 4. [SPECIAL REVIEW BOARD.] The commissioner shall establish a special review board for persons committed as mentally ill and dangerous to the public. The board shall consist of three members experienced in the field of mental illness. One member of the special review board shall be a physician psychiatrist and one member shall be an attorney. No member shall be affiliated with the department of human services. The special review board shall meet at least every six months and at the call of the commissioner. It shall hear and consider all petitions for transfer out of the Minnesota Security Hospital a secure treatment facility, all petitions relative to for discharge, provisional discharge and revocation of provisional discharge, and make recommendations to the commissioner concerning them. Patients may be transferred by the commissioner between secure treatment facilities without a special review board hearing.

Members of the special review board shall receive compensation and reimbursement for expenses as established by the commissioner.

Sec. 89. Minnesota Statutes 1996, section 253B.18, subdivision 4a, is amended to read:

Subd. 4a. [RELEASE ON PASS; NOTIFICATION.] A patient who has been committed as mentally ill and dangerous and who is confined at the Minnesota security hospital <u>a secure</u> treatment facility shall not be released on a pass unless the pass is part of a pass plan that has been approved by the medical director of the Minnesota security hospital secure treatment facility. At least ten days prior to a determination on the plan, the medical director shall notify the designated agency, the committing court, the county attorney of the county of commitment, an interested person, the petitioner, and the petitioner's counsel of the plan, the nature of the passes proposed, and their right to object to the plan. If any notified person objects prior to the proposed date of

implementation, the person shall have an opportunity to appear, personally or in writing, before the medical director, within ten days of the objection, to present grounds for opposing the plan. The pass plan shall not be implemented until the objecting person has been furnished that opportunity. Nothing in this subdivision shall be construed to give a patient an affirmative right to a pass plan.

Sec. 90. Minnesota Statutes 1996, section 253B.18, subdivision 4b, is amended to read:

Subd. 4b. [PASS-ELIGIBLE STATUS; NOTIFICATION.] The following patients committed to the Minnesota security hospital a secure treatment facility shall not be placed on pass-eligible status unless that status has been approved by the medical director of the Minnesota security hospital secure treatment facility:

(a) a patient who has been committed as mentally ill and dangerous and who

(1) was found incompetent to proceed to trial for a felony or was found not guilty by reason of mental illness of a felony immediately prior to the filing of the commitment petition;

(2) was convicted of a felony immediately prior to or during commitment as mentally ill and dangerous; or

(3) is subject to a commitment to the commissioner of corrections; and

(b) a patient who has been committed as a psychopathic personality, as defined in section 526.09 a sexually psychopathic personality, or a sexually dangerous person.

At least ten days prior to a determination on the status, the medical director shall notify the committing court, the county attorney of the county of commitment, the designated agency, an interested person, the petitioner, and the petitioner's counsel of the proposed status, and their right to request review by the special review board. If within ten days of receiving notice any notified person requests review by filing a notice of objection with the commissioner and the head of the treatment facility, a hearing shall be held before the special review board. The proposed status shall not be implemented unless it receives a favorable recommendation by a majority of the board and approval by the commissioner. The order of the commissioner is appealable as provided in section 253B.19.

Nothing in this subdivision shall be construed to give a patient an affirmative right to seek pass-eligible status from the special review board.

Sec. 91. Minnesota Statutes 1996, section 253B.18, is amended by adding a subdivision to read:

Subd. 4c. [SPECIAL REVIEW BOARD.] (a) The commissioner shall establish one or more panels of a special review board for persons committed as mentally ill and dangerous to the public. The board shall consist of three members experienced in the field of mental illness. One member of each special review board panel shall be a psychiatrist and one member shall be an attorney. No member shall be affiliated with the department of human services. The special review board shall meet at least every six months and at the call of the commissioner. It shall hear and consider all petitions for transfer from a secure treatment facility; all petitions relative to discharge, provisional discharge, and revocation of provisional discharge; and make recommendations to the commissioner concerning them.

(b) Members of the special review board shall receive compensation and reimbursement for expenses as established by the commissioner.

Sec. 92. Minnesota Statutes 1996, section 253B.18, subdivision 5, is amended to read:

Subd. 5. [PETITION; NOTICE OF HEARING; ATTENDANCE; ORDER.] (a) A petition for an order of transfer, discharge, provisional discharge, or revocation of provisional discharge shall be filed with the commissioner and may be filed by the patient or by the head of the treatment facility. The special review board shall hold a hearing on each petition prior to making any recommendation. Within 45 days of the filing of the petition, A patient may not petition the special review board for six months following commitment under subdivision 3 or following the final disposition of any previous petition and subsequent appeal by the patient. The medical director may petition at any time.

(b) Fourteen days prior to the hearing, the committing court, the county attorney of the county of commitment, the designated agency, an interested person, the petitioner, and the petitioner's counsel shall be given written notice by the commissioner of the time and place of the hearing before the special review board. Only those entitled to statutory notice of the hearing or those administratively required to attend may be present at the hearing. The board shall provide the commissioner with written findings of fact and recommendations within 21 days of the hearing. The commissioner shall issue an order no later than 14 days after receiving the recommendation of the special review board. A copy of the order shall be sent by certified mail to every person entitled to statutory notice of the hearing within five days after it is issued signed. No order by the commissioner shall be effective sooner than 15 30 days after it is issued the order is signed, unless the county attorney, the patient, and the commissioner agree that it may become effective sooner.

(c) The special review board shall hold a hearing on each petition prior to making its recommendation to the commissioner. The special review board proceedings are not contested cases as defined in chapter 14. Any person or agency receiving notice that submits documentary evidence to the special review board prior to the hearing shall also provide copies to the patient, the patient's counsel, the county attorney of the county of commitment, the case manager, and the commissioner.

(d) The special review board shall hold a hearing on each petition prior to making any recommendation. The special review board shall make written findings and a recommendation to the commissioner. The board shall make a recommendation to the commissioner no later than 21 days after the hearing.

(e) Prior to the final decision by the commissioner, the special review board may be reconvened to consider events or circumstances that occurred subsequent to the hearing.

Sec. 93. Minnesota Statutes 1996, section 253B.18, subdivision 6, is amended to read:

Subd. 6. [TRANSFER.] (a) Persons who have been found by the committing court to be Mentally ill and dangerous to the public <u>patients</u> shall not be transferred out of the Minnesota Security Hospital <u>a secure treatment facility</u> unless it appears to the satisfaction of the commissioner, after a hearing and favorable recommendation by a majority of the special review board, that the transfer is appropriate. Transfer may be to other regional centers under the commissioner's control. In those instances where a commitment also exists to the department of corrections, transfer may be to a facility designated by the commissioner of corrections.

The following factors are to <u>must</u> be considered in determining whether a transfer is appropriate:

- (i) the person's clinical progress and present treatment needs;
- (ii) the need for security to accomplish continuing treatment;
- (iii) the need for continued institutionalization;
- (iv) which facility can best meet the person's needs; and
- (v) whether transfer can be accomplished with a reasonable degree of safety for the public.

Sec. 94. Minnesota Statutes 1996, section 253B.18, subdivision 7, is amended to read:

Subd. 7. [PROVISIONAL DISCHARGE.] Patients who have been found by the committing court to be Mentally ill and dangerous to the public patients shall not be provisionally discharged unless it appears to the satisfaction of the commissioner, after a hearing and a favorable recommendation by a majority of the special review board, that the patient is capable of making an acceptable adjustment to open society.

The following factors are to be considered in determining whether a provisional discharge shall be recommended: (a) whether the patient's course of hospitalization and present mental status indicate there is no longer a need for inpatient treatment and supervision in the patient's current treatment setting; and (b) whether the conditions of the provisional discharge plan will provide a reasonable degree of protection to the public and will enable the patient to adjust successfully to the community.

Sec. 95. Minnesota Statutes 1996, section 253B.18, subdivision 9, is amended to read:

Subd. 9. [PROVISIONAL DISCHARGE; REVIEW.] A provisional discharge pursuant to this section shall not automatically terminate. A full discharge shall occur only as provided in subdivision 15. The commissioner shall annually review the facts relating to the activity of a patient on provisional discharge and notify the patient that the terms of the a provisional discharge shall continue unless the patient requests and is granted a change in the conditions of provisional discharge and the special review board for a full discharge and the discharge is granted.

Sec. 96. Minnesota Statutes 1996, section 253B.18, subdivision 12, is amended to read:

Subd. 12. [RETURN OF PATIENT.] After revocation of a provisional discharge or if the patient is absent without authorization, the head of the treatment facility may request the patient to return to the treatment facility voluntarily. The head of the facility may request a health officer, a welfare officer, or a peace officer to return the patient to the treatment facility. If a voluntary return is not arranged, the head of the treatment facility shall inform the committing court of the revocation or absence and the court shall direct a health or peace officer in the county where the patient is located to return the patient to the treatment facility or to another treatment facility. The expense of returning the patient to a regional treatment facility center shall be paid by the commissioner unless paid by the patient or the patient's relatives other persons on the patient's behalf.

Sec. 97. Minnesota Statutes 1996, section 253B.18, subdivision 14, is amended to read:

Subd. 14. [VOLUNTARY READMISSION.] (a) With the consent of the head of the treatment facility, a patient may voluntarily return from provisional discharge for a period of up to 30 days and be released from the treatment facility without, or up to 60 days with the consent of the designated agency. If the patient is not returned to provisional discharge status within 60 days, the provisional discharge is revoked. Within 15 days of receiving notice of the change in status, the patient may request a review of the matter before the special review board. The board may recommend a return to a provisional discharge status.

(b) The treatment facility is not required to petition for a further review by the special review board unless the patient's return to the community results in substantive change to the existing provisional discharge plan. All the terms and conditions of the provisional discharge order shall remain unchanged if the patient is released again.

Sec. 98. Minnesota Statutes 1996, section 253B.18, subdivision 15, is amended to read:

Subd. 15. [DISCHARGE.] A person who has been found by the committing court to be mentally ill and dangerous to the public patient shall not be discharged unless it appears to the satisfaction of the commissioner, after a hearing and a favorable recommendation by a majority of the special review board, that the patient is capable of making an acceptable adjustment to open society, is no longer dangerous to the public, and is no longer in need of inpatient treatment and supervision.

In determining whether a discharge shall be recommended, the special review board and commissioner shall consider whether specific conditions exist to provide a reasonable degree of protection to the public and to assist the patient in adjusting to the community. If the desired conditions do not exist, the discharge shall not be granted.

Sec. 99. Minnesota Statutes 1996, section 253B.185, subdivision 4, is amended to read:

Subd. 4. [STATEWIDE JUDICIAL PANEL; SEXUAL PSYCHOPATHIC PERSONALITY AND SEXUALLY DANGEROUS PERSONS COMMITMENTS.] (a) The supreme court may establish a panel of district judges with statewide authority to preside over commitment proceedings brought under subdivision 1 of sexual psychopathic personalities and sexually dangerous persons. Only one judge of the panel is required to preside over a particular commitment proceeding. Panel members shall serve for one-year terms. One of the judges shall be designated as the chief judge of the panel, and is vested with the power to designate the presiding judge in a particular case, to set the proper venue for the proceedings, and to otherwise supervise and direct the operation of the panel. The chief judge shall designate one of the other judges to act as chief judge whenever the chief judge is unable to act.

(b) If the supreme court creates the judicial panel authorized by this section, all petitions for civil commitment brought under subdivision 1 shall be filed with the supreme court instead of with the district court in the county where the proposed patient is present, notwithstanding any provision of subdivision 1 to the contrary. Otherwise, all of the other applicable procedures contained in this chapter apply to commitment proceedings conducted by a judge on the panel.

Sec. 100. Minnesota Statutes 1996, section 253B.19, subdivision 1, is amended to read:

Subdivision 1. [CREATION.] The supreme court shall establish an appeal panel composed of three judges and four alternate judges appointed from among the acting judges of the state. Panel members shall serve for terms of one year each. Only three judges need hear any case. One of the regular three appointed judges shall be designated as the chief judge of the appeal panel. The chief judge is vested with power to fix the time and place of all hearings before the panel, issue all notices, subpoena witnesses, appoint counsel for the patient, if necessary, and supervise and direct the operation of the appeal panel. The chief judge shall designate one of the other judges or an alternate judge to act as chief judge in any case where the chief judge is unable to act. No member of the appeal panel shall take part in the consideration of any case in which that judge committed the patient. The chief judges of the supreme court shall determine the compensation of the judges serving on the appeal panel. The compensation shall be in addition to their regular compensation as judges. All compensation and expenses of the appeal panel and all allowable fees and costs of the patient's counsel shall be established and paid by the department of human services.

Sec. 101. Minnesota Statutes 1996, section 253B.19, subdivision 2, is amended to read:

Subd. 2. [PETITION; HEARING.] The committed person or the county attorney of the county from which a patient was committed as mentally ill and dangerous to the public was committed, or as a sexual psychopathic personality or as a sexually dangerous person may petition the appeal panel for a rehearing and reconsideration of a decision by the commissioner. The petition shall be filed with the supreme court within 30 days after the decision of the commissioner is signed. The supreme court shall refer the petition to the chief judge of the appeal panel. The chief judge shall notify the patient, the county attorney of the county of commitment, the designated agency, the commissioner, the head of the treatment facility, any interested person, and other persons the chief judge designates, of the time and place of the hearing on the petition. The notice shall be given at least 14 days prior to the date of the hearing. The hearing shall be within 45 days of the filing of the petition unless an extension is granted for good cause. Any person may oppose the petition. The appeal panel may appoint examiners and may adjourn the hearing from time to time. It shall hear and receive all relevant testimony and evidence and make a record of all proceedings. The patient, patient's counsel, and the county attorney of the committing county may be present and present and cross-examine all witnesses. The petitioning party bears the burden of going forward with the evidence. The party opposing discharge bears the burden of proof by clear and convincing evidence that the respondent is in need of commitment.

Sec. 102. Minnesota Statutes 1996, section 253B.19, subdivision 3, is amended to read:

Subd. 3. [DECISION.] A majority of the appeal panel shall rule upon the petition. The order of the appeal panel shall supersede the order of the commissioner in the cases. No order of the appeal panel granting a transfer, discharge or provisional discharge shall be made effective sooner than 15 days after it is issued. The panel shall not modify conditions of a transfer or provisional discharge from those approved by the commissioner without the commissioner's consent. The

panel may not consider petitions for relief other than those considered by the commissioner from which the appeal is taken. The panel may not grant a transfer or provisional discharge on terms or conditions that were not presented to the commissioner or the special review board.

Sec. 103. Minnesota Statutes 1996, section 253B.19, subdivision 5, is amended to read:

Subd. 5. [APPEAL.] A party aggrieved by an order of the appeal panel may appeal from the decision of the appeal panel to the court of appeals as in other civil cases. A party may seek review of a decision by the appeals panel within 60 days after a copy is sent to the parties by the clerk of appellate courts. The filing of an appeal shall immediately suspend the operation of any order granting transfer, discharge or provisional discharge, pending the determination of the appeal.

Sec. 104. Minnesota Statutes 1996, section 253B.20, subdivision 1, is amended to read:

Subdivision 1. [NOTICE TO COURT.] When a committed person is discharged, provisionally discharged, transferred to another treatment facility, or partially hospitalized, or when the person dies, is absent without authorization, or is returned, the treatment facility having custody of the patient shall notify the committing court, the county attorney, and the patient's attorney.

Sec. 105. Minnesota Statutes 1996, section 253B.20, subdivision 3, is amended to read:

Subd. 3. [NOTICE TO DESIGNATED AGENCY.] The head of the treatment facility, upon the provisional discharge or partial institutionalization of any committed person, shall notify the designated agency before the patient leaves the treatment facility. Whenever possible the notice shall be given at least one week before the patient is to leave the facility.

Sec. 106. Minnesota Statutes 1996, section 253B.20, subdivision 4, is amended to read:

Subd. 4. [AFTERCARE SERVICES.] Prior to the date of discharge, or provisional discharge or partial institutionalization of any committed person, the designated agency of the county of the patient's residence, in cooperation with the head of the treatment facility, and the patient's physician, if notified pursuant to subdivision 6, shall establish a continuing plan of aftercare services for the patient including a plan for medical and psychiatric treatment, nursing care, vocational assistance, and other assistance the patient needs. The designated agency shall provide case management services, supervise and assist the patient in finding employment, suitable shelter, and adequate medical and psychiatric treatment, and aid in the patient's readjustment to the community.

Sec. 107. Minnesota Statutes 1996, section 253B.20, subdivision 6, is amended to read:

Subd. 6. [NOTICE TO PHYSICIAN.] The head of the treatment facility shall notify the physician of any committed person at the time of the patient's discharge, <u>or</u> provisional discharge or partial institutionalization, unless the patient objects to the notice.

Sec. 108. Minnesota Statutes 1996, section 253B.20, subdivision 7, is amended to read:

Subd. 7. [SERVICES.] A committed person may at any time after discharge, provisional discharge or partial institutionalization treatment, apply to the head of the treatment facility within whose district the committed person resides for treatment. The head of the treatment facility, on determining that the applicant requires service, may provide needed services related to mental illness, mental retardation, or chemical dependency to the applicant. The services shall be provided in regional centers under terms and conditions established by the commissioner.

Sec. 109. Minnesota Statutes 1996, section 253B.21, subdivision 4, is amended to read:

Subd. 4. [FOREIGN JUDGMENTS.] The judgment or order of commitment by a court of competent jurisdiction of another state committing a person to a federal agency for care or treatment in this state, shall have the same force and effect as to the committed person while in this state as in the jurisdiction in which is situated the court entering the judgment or making the order. Consent is given to the application of the law of The committing state in respect consents to the authority of the chief officer of any treatment facility of a federal agency in this state, to retain custody of, transfer, parole, or discharge the committed person.

Sec. 110. Minnesota Statutes 1996, section 253B.22, subdivision 1, is amended to read:

Subdivision 1. [ESTABLISHMENT.] The commissioner shall establish a review board of three or more persons for each regional center to review the admission and retention of its patients institutionalized receiving services under this chapter. One member shall be qualified in the diagnosis of mental illness, mental retardation, or chemical dependency, and one member shall be an attorney. The commissioner may, upon written request from the appropriate federal authority, establish a review panel for any federal treatment facility within the state to review the admission and retention of patients hospitalized under this chapter. For any review board established for a federal treatment facility, one of the persons appointed by the commissioner shall be the commissioner of veterans affairs or the commissioner's designee.

Sec. 111. Minnesota Statutes 1996, section 253B.23, subdivision 1, is amended to read:

Subdivision 1. [COSTS OF HEARINGS.] (a) In each proceeding under this chapter the court shall allow and order paid to each witness subpoenaed the fees and mileage prescribed by law; to each examiner a reasonable sum for services and for travel; to persons conveying the patient to the place of detention, disbursements for the travel, board, and lodging of the patient and of themselves and their authorized assistants; and to the patient's counsel, when appointed by the court, a reasonable sum for travel and for the time spent in court or in preparing for the hearing. Upon the court's order, the county auditor shall issue a warrant on the county treasurer for payment of the amounts allowed.

(b) Whenever venue of a proceeding has been transferred under this chapter, the costs of the proceedings shall be reimbursed to the county where the proceedings were conducted by the county of the patient's residence by the state.

Sec. 112. Minnesota Statutes 1996, section 253B.23, subdivision 4, is amended to read:

Subd. 4. [IMMUNITY.] All persons acting in good faith, upon either actual knowledge or information thought by them to be reliable, who act pursuant to any provision of this chapter or who procedurally or physically assist in the commitment of any individual, pursuant to this chapter, are not subject to any civil or criminal liability under this chapter. Any privilege otherwise existing between patient and physician, <u>patient and psychologist</u>, patient and examiner, or patient and social worker, is waived as to any physician, <u>psychologist</u>, examiner, or social worker who provides information with respect to a patient pursuant to any provision of this chapter.

Sec. 113. Minnesota Statutes 1996, section 253B.23, subdivision 6, is amended to read:

Subd. 6. [COURT COMMISSIONER.] The <u>Ramsey county</u> court commissioner may act for the judge upon a petition for the commitment of a patient when the judge is unable to act <u>hear</u> petitions for commitment.

Sec. 114. Minnesota Statutes 1996, section 253B.23, subdivision 7, is amended to read:

Subd. 7. [APPEAL.] The commissioner or any other aggrieved party may appeal to the court of appeals from any order entered under this chapter as in other civil cases. Any <u>district court</u> order or judgment under this chapter or related case law may be appealed within 60 days after the date <u>of filing of</u> the order or entry of judgment. A judgment under section 253B.18, subdivision 1, may be appealed within 60 days after the date of the order entered under section 253B.18, subdivision 2.

Upon perfection of the appeal, the return shall be filed forthwith. The court of appeals shall hear the appeal within $60 \ 90$ days after service of the notice of appeal. This appeal shall not suspend the operation of the order appealed from until the appeal is determined, unless otherwise ordered by the court of appeals.

Sec. 115. Minnesota Statutes 1996, section 253B.23, subdivision 9, is amended to read:

Subd. 9. [SEALING OF RECORDS.] Upon a motion by a person who has been the subject of a judicial commitment proceeding, the court for the county in which the person resides may seal all

judicial records of the commitment proceedings if it finds that access to the records creates undue hardship for the person. The county attorney shall be notified of the motion and may participate in the hearings. All hearings on the motion shall be in camera. The files and records of the court in proceedings on the motion shall be sealed except to the moving party, the person's attorney, the county attorney, or other persons by court order.

Sec. 116. [INSTRUCTION TO REVISOR.]

The revisor of statutes shall renumber Minnesota Statutes, section 253B.093, to section 253B.097, and Minnesota Statutes, section 253B.11, to section 253B.045, in 1996 and subsequent editions of Minnesota Statutes.

Sec. 117. [REPEALER.]

Minnesota Statutes 1996, sections 253B.03, subdivisions 6c and 9; 253B.05, subdivisions 2a and 5; 253B.07, subdivision 6; 253B.08, subdivisions 4 and 6; 253B.091; 253B.12, subdivisions 5 and 8; 253B.13, subdivision 3; 253B.15, subdivisions 4 and 6; 253B.18, subdivision 4; 253B.21, subdivision 5; and 253B.23, subdivision 1a, are repealed."

Delete the title and insert:

"A bill for an act relating to civil commitment; clarifying and reorganizing portions of the commitment act; allowing the designated agency to consent to voluntary treatment for certain incompetent persons; creating a new standard for court-ordered early intervention to provide less intrusive treatment; modifying standards and procedures for the administration of neuroleptic medications; providing for access to records; amending the provisional discharge procedures; requiring medical documentation of a patient's refusal to be examined and allowing determination of need for treatment based on other information; prohibiting prepetition screeners from filing commitment petitions; limiting use of prepetition screening reports in unrelated proceedings; requiring distribution to specified parties; increasing time for return after provisional discharge; modifying provisions governing special review boards; increasing time for hearing appeals; amending Minnesota Statutes 1996, sections 13.42, subdivisions 2 and 3; 246B.01, subdivisions 3 and 4; 253B.01; 253B.02, subdivisions 2, 4, 4a, 7, 9, 13, 14, 15, 18, 18a, 18b, and by adding subdivisions; 253B.03, subdivisions 1, 2, 3, 4, 5, 6, 6b, 7, 8, and by adding a subdivision; 253B.04; 253B.05, subdivisions 1, 2, 3, 4, and by adding a subdivision; 253B.06; 253B.07, subdivisions 1, 2, 2a, 3, 4, 5, 7, and by adding subdivisions; 253B.08, subdivisions 1, 2, 3, 5, and by adding subdivisions; 253B.09, subdivisions 1, 2, 3, 5, and by adding a subdivision; 253B.095; 253B.10; 253B.11, subdivision 2; 253B.12, subdivisions 1, 3, 4, and by adding a subdivision; 253B.13, subdivisions 1 and 2; 253B.14; 253B.15, subdivisions 1, 1a, 2, 3, 5, 10, and by adding subdivisions; 253B.16, subdivision 1; 253B.17, subdivisions 1 and 3; 253B.18, subdivisions 1, 2, 3, 4, 4a, 4b, 5, 6, 7, 9, 12, 14, 15, and by adding a subdivision; 253B.185, subdivision 4; 253B.19, subdivisions 1, 2, 3, and 5; 253B.20, subdivisions 1, 3, 4, 6, and 7; 253B.21, subdivision 4; 253B.22, subdivision 1; 253B.23, subdivisions 1, 4, 6, 7, and 9; proposing coding for new law in Minnesota Statutes, chapter 253B; repealing Minnesota Statutes 1996, sections 253B.03, subdivisions 6c and 9; 253B.05, subdivisions 2a and 5; 253B.07, subdivision 6; 253B.08, subdivisions 4 and 6; 253B.091; 253B.12, subdivisions 5 and 8; 253B.13, subdivision 3; 253B.15, subdivisions 4 and 6; 253B.18, subdivision 4; 253B.21, subdivision 5; and 253B.23, subdivision 1a."

And when so amended the bill do pass and be re-referred to the Committee on Health and Family Security. Amendments adopted. Report adopted.

Mr. Moe, R.D. from the Committee on Rules and Administration, to which was referred

H.F. No. 447 for comparison with companion Senate File, reports the following House File was found identical and recommends the House File be given its second reading and substituted for its companion Senate File as follows:

GENERAL ORDERSCONSENT CALENDARCALENDARH.F. No.S.F. No.H.F. No.S.F. No.447398

and that the above Senate File be indefinitely postponed.

Pursuant to Rule 49, this report was prepared and submitted by the Secretary of the Senate on behalf of the Committee on Rules and Administration. Report adopted.

Mr. Lessard from the Committee on Environment and Natural Resources, to which was referred the following appointment as reported in the Journal for January 27, 1997:

MINNESOTA POLLUTION CONTROL AGENCY COMMISSIONER

Peder A. Larson

Reports the same back with the recommendation that the appointment be confirmed.

Mr. Moe, R.D. moved that the foregoing committee report be laid on the table. The motion prevailed.

SECOND READING OF SENATE BILLS

S.F. Nos. 463, 96, 504, 388, 700, 124, 118, 495, 114, 120, 166, 211, 641 and 501 were read the second time.

SECOND READING OF HOUSE BILLS

H.F. No. 447 was read the second time.

MOTIONS AND RESOLUTIONS

Mr. Murphy moved that the names of Mr. Novak, Ms. Runbeck and Mr. Limmer be added as co-authors to S.F. No. 120. The motion prevailed.

Mr. Solon moved that the name of Mrs. Lourey be added as a co-author to S.F. No. 282. The motion prevailed.

Mr. Oliver moved that his name be stricken as a co-author to S.F. No. 316. The motion prevailed.

Ms. Berglin moved that the name of Ms. Piper be added as a co-author to S.F. No. 333. The motion prevailed.

Ms. Berglin moved that the name of Ms. Piper be added as a co-author to S.F. No. 334. The motion prevailed.

Ms. Johnson, J.B. moved that the name of Ms. Krentz be added as a co-author to S.F. No. 374. The motion prevailed.

Ms. Anderson moved that the name of Mr. Wiger be added as a co-author to S.F. No. 463. The motion prevailed.

Ms. Berglin moved that the name of Mrs. Lourey be added as a co-author to S.F. No. 473. The motion prevailed.

Ms. Krentz moved that the name of Mr. Pogemiller be added as a co-author to S.F. No. 730. The motion prevailed.

Mr. Price moved that the name of Mr. Marty be added as a co-author to S.F. No. 842. The motion prevailed.

Mr. Dille moved that the names of Messrs. Beckman and Novak be added as co-authors to S.F. No. 932. The motion prevailed.

Mr. Moe, R.D. moved that S.F. No. 888 be withdrawn from the Committee on Children, Families and Learning and re-referred to the Committee on Health and Family Security. The motion prevailed.

Mr. Moe, R.D., for Ms. Wiener, moved that S.F. No. 320 be withdrawn from the Committee on Health and Family Security and re-referred to the Committee on Commerce. The motion prevailed.

Ms. Berglin moved that S.F. No. 289 be withdrawn from the Committee on Health and Family Security and re-referred to the Committee on Education Finance. The motion prevailed.

Mr. Johnson, D.J. moved that S.F. No. 16 be withdrawn from the Committee on Environment and Natural Resources and re-referred to the Committee on Local and Metropolitan Government. The motion prevailed.

Messrs. Moe, R.D. and Johnson, D.E. introduced--

Senate Concurrent Resolution No. 6: A Senate concurrent resolution relating to the adjournment of the House.

BE IT RESOLVED, by the Senate of the State of Minnesota:

1. Upon the House of Representatives adjournment on Wednesday, March 5, 1997, the House of Representatives may adjourn for more than three days.

2. Pursuant to the Minnesota Constitution, Article IV, Section 12, the Senate consents to the adjournment of the House of Representatives for more than three days.

Mr. Moe, R.D. moved the adoption of the foregoing resolution. The motion prevailed. So the resolution was adopted.

Without objection, remaining on the Order of Business of Motions and Resolutions, the Senate proceeded to the Orders of Business of the Calendar and Consent Calendar.

CALENDAR

S.F. No. 94: A bill for an act relating to state land; modifying provisions for the establishment of boundary lines; modifying provisions relating to the sale of trust lands; authorizing the commissioner of natural resources to pay certain outstanding real estate taxes and assessments; authorizing the commissioner of natural resources to transfer improvements on state-owned land; authorizing the commissioner of natural resources to sell certain land; authorizing the private sale of certain land; authorizing the sale of certain surplus land for recreational purposes; providing for disposition of certain lakeshore leased lands; amending Minnesota Statutes 1996, sections 84.0273; 92.06, subdivisions 1 and 4; 92.16, subdivision 1; and 94.10, subdivision 2; proposing coding for new law in Minnesota Statutes, chapters 92; and 94.

Was read the third time and placed on its final passage.

The question was taken on the passage of the bill.

The roll was called, and there were yeas 60 and nays 0, as follows:

Anderson	Frederickson	Kleis	Murphy	Runbeck
Beckman	Hanson	Knutson	Oliver	Sams
Belanger	Higgins	Krentz	Olson	Samuelson
Berg	Hottinger	Laidig	Ourada	Scheevel
Berglin	Janezich	Langseth	Pappas	Scheid
Betzold	Johnson, D.E.	Larson	Pariseau	Solon
Cohen	Johnson, D.H.	Limmer	Piper	Stevens
Day	Johnson, D.J.	Lourey	Pogemiller	Stumpf
Dille	Johnson, J.B.	Marty	Price	Ten Eyck
Fischbach	Junge	Metzen	Ranum	Terwilliger
Flynn	Kelley, S.P.	Moe, R.D.	Robertson	Vickerman
Foley	Kiscaden	Morse	Robling	Wiger

Those who voted in the affirmative were:

So the bill passed and its title was agreed to.

S.F. No. 458: A bill for an act relating to insurance; clarifying the right to escrow for certain losses in certain cases; amending Minnesota Statutes 1996, section 65A.50, subdivisions 2, 3, 4, 8, 16, and 17.

Was read the third time and placed on its final passage.

The question was taken on the passage of the bill.

The roll was called, and there were yeas 58 and nays 0, as follows:

Those who voted in the affirmative were:

Anderson	Hanson	Knutson
Beckman	Higgins	Krentz
Belanger	Hottinger	Laidig
Berglin	Janezich	Larson
Betzold	Johnson, D.E.	Limmer
Cohen	Johnson, D.H.	Lourey
Day	Johnson, D.J.	Marty
Dille	Johnson, J.B.	Metzen
Fischbach	Junge	Moe, R.D.
Flynn	Kelley, S.P.	Morse
Foley	Kiscaden	Murphy
Frederickson	Kleis	Oliver

Olson Ourada Pappas Pariseau Piper Pogemiller Price Ranum Robertson Robling Runbeck Sams Samuelson Scheevel Scheid Solon Stevens Stumpf Ten Eyck Terwilliger Vickerman Wiger

So the bill passed and its title was agreed to.

CONSENT CALENDAR

H.F. No. 125: A bill for an act relating to taxation; authorizing the city of Kenyon to recertify its final levy for taxes levied in 1996.

Was read the third time and placed on its final passage.

The question was taken on the passage of the bill.

The roll was called, and there were yeas 59 and nays 0, as follows:

Those who voted in the affirmative were:

Anderson	Foley	Junge	Lourey	Pariseau
Beckman	Frederickson	Kelley, S.P.	Marty	Piper
Berg	Hanson	Kiscaden	Metzen	Pogemiller
Berglin	Higgins	Kleis	Moe, R.D.	Price
Betzold	Hottinger	Knutson	Morse	Ranum
Cohen	Janezich	Krentz	Murphy	Robertson
Day	Johnson, D.E.	Laidig	Oliver	Robling
Dille	Johnson, D.H.	Langseth	Olson	Runbeck
Fischbach	Johnson, D.J.	Larson	Ourada	Sams
Flynn	Johnson, J.B.	Limmer	Pappas	Samuelson

Scheevel	Solon	Stumpf	Terwilliger	Wiger
Scheid	Stevens	Ten Éyck	Vickerman	U

So the bill passed and its title was agreed to.

H.F. No. 35: A bill for an act relating to Minnesota Statutes; correcting erroneous, ambiguous, and omitted text and obsolete references; eliminating certain redundant, conflicting, and superseded provisions; making miscellaneous technical corrections to statutes and other laws; amending Minnesota Statutes 1996, sections 3.873, subdivisions 5 and 7; 9.041, subdivision 2; 10A.323; 13.99, subdivision 38b; 14.62, subdivision 3; 15.0591, subdivision 2; 15.441, subdivision 1; 15.471, subdivision 1; 16A.276; 16A.672, subdivisions 2 and 5; 17.138, subdivision 2; 17.451, subdivision 1; 18.023, subdivision 3; 18B.33, subdivision 1; 18C.121, subdivision 1; 18C.575, subdivision 1; 18E.03, subdivision 4; 19.51, subdivision 1; 25.31; 25.32; 25.33; 25.34; 25.36; 25.37; 25.39; 25.40; 25.41; 25.42; 25.43; 25.47, subdivision 2; 27.13; 27.14; 27.19; 27.20; 31.874; 32.078; 32.481, subdivision 1; 32.532; 32.71, subdivision 1; 41.53, subdivision 2; 41A.09, subdivision 4; 45.027, subdivision 1; 60A.15; 62N.05, subdivision 1; 62N.24; 65A.16; 65A.17; 65A.18; 65A.19; 65A.22; 65A.23; 65A.24; 84.027, subdivision 13; 92.46, subdivision 1; 103I.341, subdivision 1: 103I.535, subdivision 9: 115A.10; 115A.11, subdivision 1b; 115A.12; 115A.9651, subdivision 1; 115B.20, subdivisions 1 and 2; 115B.39, subdivision 2; 115B.412, subdivision 5; 115B.42, subdivision 2; 116.07, subdivisions 4b and 10; 116C.91, subdivision 1; 116J.75, subdivision 1; 119A.04, subdivision 5; 119A.13, subdivisions 3 and 4; 119A.26, subdivision 2; 119B.17, subdivision 3; 120.062, subdivision 12; 120.075, subdivision 5; 120.0751, subdivision 6; 120.0752, subdivision 4; 121.15, subdivision 1; 121.1601, subdivision 3; 121.912, subdivision 1; 124.155, subdivision 2; 124.248, subdivision 3; 124.2725, subdivision 11; 124.3201, subdivisions 1 and 2b; 124.321, subdivisions 1 and 2; 124.322, subdivisions 1a and 5; 124.323, subdivision 1; 124.574, subdivision 7; 124.91, subdivision 1; 124.918, subdivision 8; 124A.036, subdivision 5; 124A.225, subdivision 2; 124A.26, subdivision 1; 124A.711, subdivision 2; 124C.60, subdivisions 1 and 3; 126.22, subdivision 7; 126.51, subdivision 1; 126.72, subdivision 2; 136A.172; 136A.173; 136A.174; 136A.175; 136A.176; 136A.177; 136A.178; 136D.94; 144.056; 144.062; 144.092; 144A.073, subdivision 3; 144A.33, subdivision 5; 144A.53, subdivision 1; 144A.54, subdivisions 1 and 2; 145.894; 147A.13, subdivision 1; 148.235, subdivision 4; 148B.23, subdivision 3; 148C.11, subdivision 3; 152.02, subdivision 13; 152.21, subdivision 3; 153A.19, subdivision 2; 161.10; 161.1419, subdivision 7; 168.129, subdivision 1; 169.145; 176.081, subdivision 1; 176.108; 176.1351, subdivisions 5 and 6; 176.1812, subdivision 7; 176.83, subdivision 5; 179A.03, subdivisions 7 and 14; 179A.06, subdivision 2; 179A.09, subdivision 3; 181.14; 181.15; 181.16; 182.676; 183.57, subdivision 2; 192.551; 197.133; 197.447; 214.01, subdivision 2; 214.07, subdivision 1; 214.13, subdivision 5; 216C.35; 223.19; 237.70, subdivision 7; 237.711; 241.01, subdivision 3a; 242.56, subdivision 3; 244.09, subdivisions 7 and 13; 244.13, subdivision 3; 244.17, subdivision 2; 245.462, subdivision 16; 245.4881, subdivision 2; 245.4886, subdivision 2; 245.62, subdivisions 2 and 4; 245.69, subdivision 2; 245.697, subdivisions 2 and 3; 246.06; 246.64, subdivision 3; 252.035; 252.275, subdivision 6; 252.291, subdivisions 3 and 5; 252.40; 252.41, subdivision 1; 252.43; 252.46, subdivision 1; 252.50, subdivision 6; 254A.16, subdivision 2; 256.01, subdivision 2; 256.016; 256.736, subdivisions 3a and 7; 256.7365, subdivision 7; 256.82, subdivision 4; 256.9742, subdivision 1; 256B.04, subdivision 2; 256B.092, subdivision 6; 256B.49, subdivision 2; 256D.03, subdivision 7; 256D.04; 256E.04, subdivision 1; 256F.04, subdivision 3; 257.072, subdivision 5; 257.0755, subdivision 1; 257.0768, subdivision 1; 257.0769; 257.41; 259.71, subdivision 5; 260.152, subdivisions 2, 3, and 6; 260.161, subdivision 3; 260.181, subdivision 3a; 268.0122, subdivision 5; 268.0124; 268.03; 268.15, subdivision 3; 268.361, subdivision 1; 268.90, subdivision 3; 270A.09, subdivision 3; 272.12; 273.1398, subdivision 1; 279.01, subdivision 3; 280.05; 280.28, subdivision 2; 280.33; 280.35; 281.16; 281.32; 282.07; 284.04; 290.091, subdivision 6; 290.171; 297A.259; 299C.11; 299F.051, subdivision 3; 299F.46, subdivision 1; 299L.02, subdivision 1; 325F.84, subdivision 1; 326.2421, subdivision 2; 327A.08; 345.48, subdivision 1; 349.19, subdivision 2a; 353.64, subdivision 2; 353C.02; 354.66, subdivision 4; 360.013, subdivision 20; 360.015, subdivision 17; 363.05, subdivision 1; 383A.43, subdivision 6; 383B.78, subdivision 3; 383D.35; 390.35; 412.191, subdivision 1; 412.581; 412.631; 422A.01, subdivision 18; 427.02; 435.27; 458.40; 458A.08; 462A.03, subdivision 10; 462A.07, subdivision 7; 463.01; 465.15; 465.20; 466.03, subdivision 6d; 469.078, subdivision 1; 469.141, subdivision 3; 469.173, subdivision 7; 469.183, subdivision 4; 471.9981, subdivision 1; 473.1623, subdivisions 3, 4, and 5; 473.206; 473.208; 473.3994,

subdivision 9; 473.598, subdivision 3; 473.638, subdivision 2; 473.859, subdivision 2; 475.51, subdivision 9; 475.53, subdivision 1; 475.57; 475.61, subdivision 2; 480.242, subdivision 2; 500.24, subdivision 3; 508A.01, subdivision 3; 524.2-402; 525.152, subdivisions 1, 2, and 3; 609.101, subdivision 4; 611.216, subdivision 3; 611.25, subdivision 3; 611A.56, subdivision 1; 626.843; 626.845; 626.846; 626.847; 626.851; and 626.88; Laws 1995 chapter 220, section 7, subdivision 3; and Laws 1996, chapter 310, section 1; proposing coding for new law in Minnesota Statutes, chapter 35; repealing Minnesota Statutes 1996, sections 3.922, subdivision 9; 13.99, subdivisions 21d and 24a; 15.475; 16B.87, subdivision 4; 17.452, subdivision 3; 115A.03, subdivision 16; 116D.11, subdivision 4; 116J.975; 124.2442; 124.245; 124.3202; 126.78, subdivision 5; 144.95, subdivision 9; 145A.12, subdivision 6; 148.578; 174.23, subdivision 5; 196.22, subdivision 4; 216C.06, subdivisions 10 and 11; 246.57, subdivision 2; 254B.03, subdivision 8; 256B.04, subdivision 11; 256B.0629, subdivision 3; 256F.11, subdivision 3; 256F.12, subdivision 5; 260.152, subdivision 7; 325F.98; 388.24, subdivision 5; 466.01, subdivisions 4 and 5; 471A.02, subdivisions 2 and 15; 473.638, subdivision 1; 473.639; 494.05, subdivision 3; 611.27, subdivision 14; and 611A.75; Laws 1988, chapter 495, section 1; Laws 1989, chapters 209, article 2, section 42; and 282, article 3, section 28; Laws 1991, chapter 292, article 2, section 2; Laws 1993, chapter 286, section 1; Laws 1994, chapters 411, section 4; and 416, article 1, sections 47, 51, and 56; Laws 1995, chapters 171, sections 54 and 56; and 186, section 26; Laws 1995, First Special Session chapter 3, article 13, section 2; and Laws 1996, chapters 414, article 1, section 30; and 471, article 11, section 1.

Was read the third time and placed on its final passage.

The question was taken on the passage of the bill.

The roll was called, and there were yeas 60 and nays 0, as follows:

Kleis

Knutson

Langseth

Krentz

Laidig

Larson

Limmer

Lourey

Marty

Morse

Metzen

Moe, R.D.

Those who voted in the affirmative were:

Anderson	
Beckman	
Belanger	
Berg	
Berglin	
Betzold	
Cohen	
Day	
Dille	
Fischbach	
Flynn	
Folev	

Frederickson Hanson Higgins Hottinger Janezich Johnson, D.E. Johnson, D.H. Johnson, D.J. Johnson, J.B. Kelley, S.P. Kiscaden

Murphy Oliver Olson Ourada Pappas Pariseau Piper Pogemiller Price Ranum Robertson Robling

Runbeck Sams Samuelson Scheevel Scheid Solon Stevens Stumpf Ten Êyck Terwilliger Vickerman Wiger

So the bill passed and its title was agreed to.

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MOTIONS AND RESOLUTIONS - CONTINUED

Mr. Moe, R.D. moved that Senate Resolution No. 25 be taken from the table. The motion prevailed.

Senate Resolution No. 25: A Senate resolution adopting permanent rules of the Senate.

Ms. Kiscaden moved to amend Senate Resolution No. 25 as follows:

Page 27, line 1, strike "received during a"

Page 27, line 2, strike "legislative session"

The question was taken on the adoption of the amendment.

The roll was called, and there were yeas 29 and nays 32, as follows:

Those who voted in the affirmative were:

Belanger	Johnson, D.E.	Larson	Ourada	Scheeve
Berg	Kiscaden	Limmer	Pariseau	Scheid
Day	Kleis	Lourey	Price	Stevens
Dille	Knutson	Marty	Robertson	Terwill
Fischbach	Krentz	Oliver	Robling	Wiger
Frederickson	Laidig	Olson	Runbeck	e
Those who y	voted in the negative	wara		

Those who voted in the negative were:

Anderson	Hanson	Junge	Novak
Beckman	Higgins	Kelley, S.P.	Pappas
Berglin	Hottinger	Langseth	Piper
Betzold	Janezich	Metzen	Pogemiller
Cohen	Johnson, D.H.	Moe, R.D.	Ranum
Flynn	Johnson, D.J.	Morse	Sams
Foley	Johnson, J.B.	Murphy	Samuelson

The motion did not prevail. So the amendment was not adopted.

Mr. Moe, R.D. moved the adoption of Senate Resolution No. 25.

The question was taken on the adoption of the resolution.

The roll was called, and there were yeas 61 and nays 0, as follows:

Those who voted in the affirmative were:

Anderson	Hanson	Krentz	Olson	Sc
Beckman	Higgins	Laidig	Ourada	Sc
Belanger	Hottinger	Langseth	Pappas	So
Berg	Janezich	Larson	Pariseau	Ste
Berglin	Johnson, D.E.	Limmer	Piper	Sti
Betzold	Johnson, D.H.	Lourey	Pogemiller	Te
Cohen	Johnson, D.J.	Marty	Price	Те
Day	Johnson, J.B.	Metzen	Ranum	Vi
Dille	Junge	Moe, R.D.	Robertson	Wi
Fischbach	Kelley, S.P.	Morse	Robling	
Flynn	Kiscaden	Murphy	Runbeck	
Foley	Kleis	Novak	Sams	
Frederickson	Knutson	Oliver	Samuelson	

The motion prevailed. So the resolution was adopted.

MOTIONS AND RESOLUTIONS - CONTINUED

Mr. Moe, R.D. moved that H.F. No. 100 be taken from the table. The motion prevailed.

H.F. No. 100: A bill for an act relating to public safety; providing for emergency expenditures related to the continuing severe weather conditions and their aftermath; providing additional funding for state road operations and state trooper overtime in fiscal year 1997; making certain cross-reference corrections; appropriating money; amending Minnesota Statutes 1996, sections 84.912, subdivision 1; 86B.337, subdivision 1; 168.042, subdivision 1; 169.121, subdivision 4; 169.1217, subdivision 1; 171.043; 171.24, subdivision 5; 171.30, subdivision 3; and 171.305, subdivision 5.

SUSPENSION OF RULES

Mr. Moe, R.D. moved that an urgency be declared within the meaning of Article IV, Section 19, of the Constitution of Minnesota, with respect to H.F. No. 100 and that the rules of the Senate be so far suspended as to give H.F. No. 100 its second and third reading and place it on its final passage. The motion prevailed.

H.F. No. 100 was read the second time.

vel d ıs lliger

Solon Stumpf Ten Éyck Vickerman

cheevel cheid olon tevens tumpf en Eyck 'erwilliger 'ickerman liger

Mr. Vickerman moved to amend H.F. No. 100 as follows:

Delete everything after the enacting clause, and delete the title, of H.F. No. 100, and insert the language after the enacting clause, and the title, of S.F. No. 114, the third engrossment.

The motion prevailed. So the amendment was adopted.

H.F. No. 100 was read the third time, as amended, and placed on its final passage.

The question was taken on the passage of the bill, as amended.

The roll was called, and there were yeas 60 and nays 0, as follows:

Those who voted in the affirmative were:

Anderson	Hanson	Knutson	Novak	Runbeck
Beckman	Higgins	Krentz	Oliver	Sams
Belanger	Hottinger	Laidig	Olson	Samuelson
Berglin	Janezich	Langseth	Ourada	Scheevel
Betzold	Johnson, D.E.	Larson	Pappas	Scheid
Cohen	Johnson, D.H.	Limmer	Pariseau	Solon
Day	Johnson, D.J.	Lourey	Piper	Stevens
Dille	Johnson, J.B.	Marty	Pogemiller	Stumpf
Fischbach	Junge	Metzen	Price	Ten Eyck
Flynn	Kelley, S.P.	Moe, R.D.	Ranum	Terwilliger
Foley	Kiscaden	Morse	Robertson	Vickerman
Frederickson	Kleis	Murphy	Robling	Wiger

So the bill, as amended, was passed and its title was agreed to.

MOTIONS AND RESOLUTIONS - CONTINUED

Mr. Vickerman moved that S.F. No. 114, on General Orders, be stricken and laid on the table. The motion prevailed.

Remaining on the Order of Business of Motions and Resolutions, Mr. Moe, R.D. moved that the Senate take up the General Orders Calendar. The motion prevailed.

GENERAL ORDERS

The Senate resolved itself into a Committee of the Whole, with Ms. Junge in the chair.

After some time spent therein, the committee arose, and Ms. Junge reported that the committee had considered the following:

S.F. Nos. 145, 299 and 424, which the committee recommends to pass.

H.F. No. 473, which the committee reports progress, after the following motion:

Mr. Marty moved to amend H.F. No. 473, as amended pursuant to Rule 49, adopted by the Senate February 27, 1997, as follows:

(The text of the amended House File is identical to S.F. No. 197.)

Page 1, line 14, after the period, insert "The program must be approved by the commissioner of employee relations, and its cost per employee may not exceed the program established by the commissioner for state employees under section 15.46."

The question was taken on the adoption of the amendment.

The roll was called, and there were yeas 26 and nays 28, as follows:

Anderson Belanger Berg Berglin Betzold Cohen	Fischbach Foley Hottinger Kleis Knutson Limmer	Marty Moe, R.D. Morse Olson Ourada Piper	Price Robling Runbeck Samuelson Scheevel Scheid	Stevens Stumpf
Those who vote	d in the negative wer	re:		

Those who voted in the affirmative were:

Beckman	Higgins	Kiscaden	Novak	Ten Eyck
Day	Johnson, D.E.	Krentz	Oliver	Terwilliger
Dille	Johnson, D.H.	Laidig	Pappas	Vickerman
Flynn	Johnson, J.B.	Langseth	Pariseau	Wiger
Frederickson	Junge	Lourey	Pogemiller	
Hanson	Kelley, S.P.	Metzen	Robertson	

The motion did not prevail. So the amendment was not adopted.

S.F. No. 128, which the committee recommends to pass with the following amendment offered by Mr. Stevens:

Page 1, line 13, strike "who" and insert "if that person"

Page 1, line 14, strike "a wild animal"

The motion prevailed. So the amendment was adopted.

On motion of Mr. Moe, R.D., the report of the Committee of the Whole, as kept by the Secretary, was adopted.

INTRODUCTION AND FIRST READING OF SENATE BILLS

The following bills were read the first time and referred to the committees indicated.

Messrs. Hottinger, Spear, Ms. Piper and Mr. Cohen introduced--

S.F. No. 934: A bill for an act relating to crime prevention; authorizing local regulation of pistols and semiautomatic military-style assault weapons in certain situations; amending Minnesota Statutes 1996, sections 471.633; and 624.717; repealing Minnesota Statutes 1996, sections 624.7131, subdivision 12; and 624.7132, subdivision 16.

Referred to the Committee on Crime Prevention.

Ms. Junge and Mr. Cohen introduced--

S.F. No. 935: A bill for an act relating to education; changing the membership and duties of the University of Minnesota regent candidate advisory council; repealing requirements that one member of the board of regents be a student and that at least one regent be a resident of each congressional district; amending Minnesota Statutes 1996, section 137.0245; repealing Minnesota Statutes 1996, sections 137.023; and 137.024.

Referred to the Committee on Children, Families and Learning.

Mrs. Scheid, Messrs. Price; Kelley, S.P.; Ms. Robertson and Mr. Stumpf introduced--

S.F. No. 936: A bill for an act relating to retirement; modifying provisions exempting certain interim superintendents from certain earnings limitations and reductions in annuity payments; amending Minnesota Statutes 1996, section 354.44, subdivision 5a.

Referred to the Committee on Governmental Operations and Veterans.

Mr. Beckman, Mses. Anderson, Wiener, Messrs. Frederickson and Larson introduced--

S.F. No. 937: A bill for an act relating to occupations; authorizing certification of asbestos air monitoring professionals; amending Minnesota Statutes 1996, sections 326.71, by adding a subdivision; and 326.73, by adding a subdivision.

Referred to the Committee on Health and Family Security.

Messrs. Hottinger, Day and Ms. Higgins introduced--

S.F. No. 938: A bill for an act relating to local government; increasing the per diem reimbursement for members of the Minnesota municipal board; amending Minnesota Statutes 1996, section 414.01, subdivision 6a.

Referred to the Committee on Local and Metropolitan Government.

Ms. Kiscaden, Messrs. Scheevel, Knutson, Ms. Ranum and Mr. Beckman introduced--

S.F. No. 939: A bill for an act relating to community corrections; appropriating money for a productive day pilot project operated by the Dodge-Fillmore-Olmsted community corrections agency.

Referred to the Committee on Crime Prevention.

Mr. Stumpf and Ms. Junge introduced--

S.F. No. 940: A bill for an act relating to counties; modifying the requirement for certain counties that the county financial statement be published in two newspapers of general circulation; amending Minnesota Statutes 1996, section 375.17, subdivision 3.

Referred to the Committee on Local and Metropolitan Government.

Ms. Junge introduced--

S.F. No. 941: A bill for an act relating to gambling; authorizing the renewal of a license to an association comprised of merged fire relief associations; amending Minnesota Statutes 1996, section 349.16, by adding a subdivision.

Referred to the Committee on Local and Metropolitan Government.

Ms. Junge, Messrs. Johnson, D.H.; Laidig; Knutson and Ten Eyck introduced--

S.F. No. 942: A bill for an act relating to crimes; broadening the permissible use of preliminary breath test results obtained in DWI situations; broadening the scope of the DWI forfeiture law to include certain implied consent license revocations; authorizing an administrative forfeiture process; requiring that the alcohol concentration of a person who is driving while impaired be placed on the person's driving record; amending Minnesota Statutes 1996, sections 169.121, subdivision 6; 169.1217; and 171.12, by adding a subdivision.

Referred to the Committee on Crime Prevention.

Mr. Wiger, Ms. Anderson, Mr. Belanger, Ms. Flynn and Mr. Ten Eyck introduced--

S.F. No. 943: A bill for an act relating to commerce; requiring local units of government to license the retail sale of tobacco; providing for regular compliance checks for all licensed vendors; providing for mandatory penalties against license holders for sales to minors; amending Minnesota Statutes 1996, section 461.12; proposing coding for new law in Minnesota Statutes, chapter 461.

Referred to the Committee on Commerce.

Mses. Krentz, Junge, Messrs. Laidig, Knutson and Kelly, R.C. introduced--

S.F. No. 944: A bill for an act relating to education; providing for the reporting of tobacco use by students; amending Minnesota Statutes 1996, sections 126.036; and 126.037, subdivision 1.

Referred to the Committee on Crime Prevention.

Mr. Metzen introduced--

S.F. No. 945: A bill for an act relating to charter commissions; providing for removal of charter commission members in certain circumstances; amending Minnesota Statutes 1996, section 410.05, subdivision 2.

Referred to the Committee on Local and Metropolitan Government.

Mr. Larson introduced--

S.F. No. 946: A bill for an act relating to education; authorizing a fund transfer for independent school district No. 544, Fergus Falls.

Referred to the Committee on Children, Families and Learning.

Messrs. Neuville, Knutson, Limmer, Ms. Junge and Mr. Marty introduced--

S.F. No. 947: A bill for an act relating to crime prevention; doubling the driver's license revocation periods applicable to persons who violate DWI laws while having a blood alcohol content of 0.20 or greater; authorizing the imposition of a penalty assessment against those persons of up to \$1,000; amending Minnesota Statutes 1996, sections 169.121, subdivision 4, and by adding a subdivision; 169.123, subdivision 4; and 171.30, by adding a subdivision.

Referred to the Committee on Crime Prevention.

Mr. Wiger, Ms. Pappas and Mr. Cohen introduced--

S.F. No. 948: A bill for an act relating to human services; authorizing a jobs-plus welfare reform pilot project in Ramsey county; proposing coding for new law as Minnesota Statutes, chapter 256J.

Referred to the Committee on Jobs, Energy and Community Development.

Ms. Piper, Mrs. Lourey and Ms. Anderson introduced--

S.F. No. 949: A bill for an act relating to economic development; placing a moratorium on grants, loans, tax increment financing, tax waivers, and deductions; proposing coding for new law in Minnesota Statutes, chapter 116J.

Referred to the Committee on Jobs, Energy and Community Development.

Mr. Kelly, R.C. introduced--

S.F. No. 950: A bill for an act relating to education; adopting working group recommendations for conducting teacher background checks; amending Minnesota Statutes 1996, section 120.1045.

Referred to the Committee on Crime Prevention.

Mr. Stumpf, Ms. Junge and Mr. Berg introduced--

S.F. No. 951: A bill for an act relating to county officers; authorizing the county board to

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assign certain duties of the county auditor and treasurer; proposing coding for new law in Minnesota Statutes, chapter 375A.

Referred to the Committee on Local and Metropolitan Government.

Ms. Anderson introduced--

S.F. No. 952: A bill for an act relating to motor vehicles; authorizing commissioner of public safety to study motor vehicle safety standards and inspection programs and make recommendations to legislature; appropriating money.

Referred to the Committee on Transportation.

Mses. Robertson and Olson introduced--

S.F. No. 953: A bill for an act relating to education; authorizing state aid to pay for a fiscal year 1998 levy adjustment resulting from the repeal of the K-12 appropriations caps; appropriating money.

Referred to the Committee on Children, Families and Learning.

Messrs. Janezich, Metzen, Limmer and Ms. Johnson, J.B. introduced--

S.F. No. 954: A bill for an act relating to workers' compensation; requiring that all health care provider disciplines use current procedural terminology coding for workers' compensation reimbursement; amending Minnesota Statutes 1996, section 176.136, subdivision 1a.

Referred to the Committee on Jobs, Energy and Community Development.

Mses. Robertson, Wiener, Runbeck, Kiscaden and Mr. Hottinger introduced--

S.F. No. 955: A bill for an act relating to insurance; requiring health plan companies to disclose certain financial arrangements to enrollees; proposing coding for new law in Minnesota Statutes, chapter 62Q.

Referred to the Committee on Commerce.

Mr. Knutson, Mses. Junge, Anderson and Mr. Neuville introduced--

S.F. No. 956: A bill for an act relating to crimes; driving while impaired; enhancing criminal penalties for repeat violations involving commercial motor vehicles; clarifying the definition of commercial vehicle and including violations involving commercial motor vehicles into the definition of prior DWI offenses; making technical corrections; amending Minnesota Statutes 1996, sections 169.01, subdivision 75; 169.121, subdivision 3; and 169.1211, subdivision 1, and by adding subdivisions.

Referred to the Committee on Crime Prevention.

Mrs. Scheid and Mr. Metzen introduced--

S.F. No. 957: A bill for an act relating to mortgages; regulating certificates of releases by title insurance companies; amending Minnesota Statutes 1996, section 507.401, subdivisions 2 and 3.

Referred to the Committee on Judiciary.

Mr. Stevens, Mrs. Fischbach, Ms. Runbeck, Messrs. Terwilliger and Berg introduced--

S.F. No. 958: A bill for an act relating to state government; providing for the funding of state

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mandated programs and procedures; proposing coding for new law in Minnesota Statutes, chapter 3.

Referred to the Committee on Governmental Operations and Veterans.

Mr. Spear, Ms. Krentz, Messrs. Foley, Knutson and Marty introduced--

S.F. No. 959: A bill for an act relating to crimes; driving while impaired; increasing criminal penalties, minimum sentences, and administrative sanctions for driving motor vehicles and operating recreational vehicles with an alcohol concentration of 0.20 or more; providing more severe requirements concerning conditional release and electronic alcohol monitoring pending trial, alcohol use assessment and treatment, driver's license revocation, license plate impoundment, and vehicle forfeiture; making technical changes; amending Minnesota Statutes 1996, sections 84.91, subdivisions 1 and 5; 84.912, subdivision 1; 86B.331, subdivisions 1 and 5; 86B.337, subdivision 1; 168.042, subdivisions 1, 2, 4, 9, and 11; 169.121, subdivisions 1, 1c, 2, 3, 3a, 3b, and 4; 169.1211, subdivision 1, and by adding a subdivision; 169.1217, subdivision 1; and 169.126, subdivision 1.

Referred to the Committee on Crime Prevention.

Ms. Berglin, Messrs. Morse, Samuelson, Ms. Kiscaden and Mr. Solon introduced--

S.F. No. 960: A bill for an act relating to health care; creating a statewide health care consumer assistance program; prohibiting contracts that restrict communication between providers and their patients; requiring disclosure of health care provider financial incentives; requiring health plan companies to provide continuity of care and access to specialty care for certain enrollees; prohibiting certain exclusive arrangements; appropriating money; amending Minnesota Statutes 1996, sections 62Q.01, by adding subdivisions; 62Q.105; 62Q.106; 62Q.30; 181.932, subdivision 1; and 214.16, subdivisions 1 and 3; proposing coding for new law in Minnesota Statutes, chapters 62J; 62Q; and 144; repealing Minnesota Statutes 1996, section 62Q.11.

Referred to the Committee on Commerce.

Ms. Runbeck, Messrs. Stevens and Dille introduced--

S.F. No. 961: A bill for an act relating to state government; providing for periodic repeal of administrative rules; proposing coding for new law in Minnesota Statutes, chapter 14.

Referred to the Committee on Governmental Operations and Veterans.

Ms. Wiener, Mr. Knutson and Ms. Junge introduced--

S.F. No. 962: A bill for an act relating to crimes; driving while impaired; increasing penalties and decreasing the per se level of alcohol concentration for certain violations of the criminal vehicular homicide and operation law; expanding the scope of that crime; including DWI with a commercial vehicle into the definition of prior DWI offenses; making technical changes; amending Minnesota Statutes 1996, sections 169.121, subdivision 3; and 609.21.

Referred to the Committee on Crime Prevention.

Messrs. Beckman, Janezich, Scheevel and Novak introduced--

S.F. No. 963: A bill for an act relating to education; amending eligibility requirements for individuals participating in youth community service; appropriating money; amending Minnesota Statutes 1996, section 121.707, subdivisions 1, 3, and 5.

Referred to the Committee on Children, Families and Learning.

Messrs. Beckman; Johnson, D.H.; Ms. Krentz, Messrs. Scheevel and Ourada introduced--

S.F. No. 964: A bill for an act relating to education; directing the commissioner to consult with commission members before selecting a commission director; removing the repeal of the youth works program; appropriating money; amending Minnesota Statutes 1996, section 121.703, subdivision 3; repealing Laws 1993, chapter 146, article 5, section 20.

Referred to the Committee on Children, Families and Learning.

Ms. Junge, Messrs. Janezich, Stumpf, Belanger and Hottinger introduced--

S.F. No. 965: A bill for an act relating to financing higher education; providing that interest does not accrue on certain loans while the student is in school; providing an income tax credit for higher education tuition; providing subtractions from taxable income for certain expenditures for higher education; appropriating money; amending Minnesota Statutes 1996, sections 136A.1701, subdivision 6; 289A.12, by adding a subdivision; and 290.01, subdivision 19b; proposing coding for new law in Minnesota Statutes, chapter 290.

Referred to the Committee on Children, Families and Learning.

Mrs. Lourey introduced--

S.F. No. 966: A bill for an act relating to local government aid; changing the definition of city aid base; amending Minnesota Statutes 1996, section 477A.011, subdivision 36.

Referred to the Committee on Local and Metropolitan Government.

Mrs. Lourey, Messrs. Sams and Dille introduced--

S.F. No. 967: A bill for an act relating to traffic regulations; requiring drivers to reduce speed when approaching authorized emergency vehicles stopped on the roadway or shoulder; amending Minnesota Statutes 1996, section 169.14, subdivision 3.

Referred to the Committee on Transportation.

Messrs. Price, Frederickson and Laidig introduced--

S.F. No. 968: A bill for an act relating to natural resources; appropriating money for a grant to the University of Minnesota's raptor center.

Referred to the Committee on Environment and Natural Resources.

Mr. Kleis, Ms. Robertson, Messrs. Wiger; Johnson, D.J. and Ms. Olson introduced--

S.F. No. 969: A bill for an act relating to education; permitting guidance and counseling services to be provided at nonpublic schools; amending Minnesota Statutes 1996, section 123.935, subdivision 2.

Referred to the Committee on Children, Families and Learning.

Ms. Junge, Messrs. Betzold, Ten Eyck, Foley and Knutson introduced--

S.F. No. 970: A bill for an act relating to legal services; appropriating money to the supreme court for civil legal services.

Referred to the Committee on Judiciary.

Mrs. Lourey introduced--

MONDAY, MARCH 3, 1997

S.F. No. 971: A bill for an act relating to gambling; raising the legal age for gambling to 21; requiring the governor to request tribal governments to raise the legal age for gambling at casinos to 21; amending Minnesota Statutes 1996, sections 240.25, subdivision 8; 349.2127, subdivision 8; and 349A.12, subdivisions 1, 2, and 5.

Referred to the Committee on Local and Metropolitan Government.

Mrs. Robling, Mr. Foley, Mses. Lesewski, Piper and Mr. Marty introduced--

S.F. No. 972: A bill for an act relating to children; providing for community and school services; providing for children and family support; appropriating money; amending Minnesota Statutes 1996, sections 124.2711, subdivisions 1 and 2a; and 124.2716, subdivision 3; repealing Laws 1995, First Special Session chapter 3, article 4, section 31, paragraph (a).

Referred to the Committee on Children, Families and Learning.

Mrs. Lourey and Mr. Solon introduced--

S.F. No. 973: A bill for an act relating to education; appropriating money for physical fitness equipment contingent upon a private in-kind contribution.

Referred to the Committee on Children, Families and Learning.

Mr. Betzold, Mses. Junge and Anderson introduced--

S.F. No. 974: A bill for an act relating to civil actions; providing a cause of action for victims of domestic abuse; proposing coding for new law in Minnesota Statutes, chapter 611A.

Referred to the Committee on Judiciary.

Messrs. Cohen and Metzen introduced--

S.F. No. 975: A bill for an act relating to occupations; requiring sign contractors to be licensed by the state; authorizing the commissioner of commerce to adopt rules; providing penalties; appropriating money; amending Minnesota Statutes 1996, section 116J.70, subdivision 2a; proposing coding for new law as Minnesota Statutes, chapter 326A.

Referred to the Committee on Commerce.

Messrs. Metzen and Johnson, D.J. introduced--

S.F. No. 976: A bill for an act relating to property taxes; eliminating the one-year lag in determining fiscal disparities contribution net tax capacities and distribution levies; amending Minnesota Statutes 1996, sections 276A.04; 276A.05, subdivisions 1 and 5; 276A.06, subdivisions 2, 3, and 5; 473F.06; 473F.07, subdivisions 1 and 5; and 473F.08, subdivisions 2, 3, and 5; repealing Minnesota Statutes 1996, sections 276A.06, subdivision 9; and 473F.08, subdivision 8a.

Referred to the Committee on Local and Metropolitan Government.

Mr. Sams, Ms. Hanson, Messrs. Vickerman, Samuelson and Ten Eyck introduced--

S.F. No. 977: A bill for an act relating to game and fish; establishing shooting hours for migratory game birds; amending Minnesota Statutes 1996, section 97B.075.

Referred to the Committee on Environment and Natural Resources.

Ms. Olson, Messrs. Stumpf; Kelley, S.P. and Larson introduced--

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S.F. No. 978: A bill for an act relating to education; modifying Minnesota state college and university public employee exception; amending Minnesota Statutes 1996, section 179A.03, subdivision 14.

Referred to the Committee on Governmental Operations and Veterans.

Mrs. Lourey, Ms. Piper and Mr. Foley introduced--

S.F. No. 979: A bill for an act relating to human services; appropriating money to assist deaf-blind persons.

Referred to the Committee on Children, Families and Learning.

Messrs. Beckman and Hottinger introduced--

S.F. No. 980: A bill for an act relating to education; appropriating money to fund the south central Minnesota talented youth program.

Referred to the Committee on Children, Families and Learning.

Mrs. Lourey, Ms. Ranum and Mr. Janezich introduced--

S.F. No. 981: A bill for an act relating to child care; establishing child development education loans; providing funding for child care provider training initiatives; appropriating money; amending Minnesota Statutes 1996, section 119B.18, by adding a subdivision.

Referred to the Committee on Children, Families and Learning.

Ms. Ranum, Mr. Betzold, Ms. Johnson, J.B.; Messrs. Knutson and Neuville introduced--

S.F. No. 982: A bill for an act relating to government data practices; criminal justice and juvenile history records; modifying juvenile court records to be forwarded to the bureau of criminal apprehension; providing for peace officer records on children to be forwarded to the bureau of criminal apprehension; specifying retention periods for juvenile history records; providing for release of juvenile history records to law enforcement agencies in other states; appropriating money; amending Minnesota Statutes 1996, sections 260.161, subdivision 1a; 299C.095; 299C.10, subdivision 1; and 299C.13.

Referred to the Committee on Judiciary.

Messrs. Ten Eyck, Larson and Solon introduced--

S.F. No. 983: A bill for an act relating to health; modifying terms of physician loan forgiveness programs; amending Minnesota Statutes 1996, section 136A.1355.

Referred to the Committee on Children, Families and Learning.

Ms. Flynn introduced--

S.F. No. 984: A bill for an act relating to motor vehicles; establishing a system for notification, recording, and collecting of delinquent traffic offense fines; prohibiting license plate or license plate tab renewal if delinquent traffic fines are not paid; imposing a fee; motivating drivers to be validly licensed and insured by allowing first-time driving-after-suspension violators to avoid further suspension by promptly obtaining reinstatement, by allowing first-time no-insurance violators to avoid license revocation or suspension by promptly obtaining insurance, and by terminating nonpayment-of-fines license suspension when the person pays the fines and the reinstatement fee; appropriating money; amending Minnesota Statutes 1996, sections 169.792, subdivision 7, and by adding a subdivision; 169.797, subdivision 4a, and by adding a subdivision;

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169.95; 169.99, subdivision 1; 171.16, subdivision 3; and 171.24, by adding a subdivision; proposing coding for new law in Minnesota Statutes, chapters 168; and 169.

Referred to the Committee on Transportation.

Mr. Foley, Mses. Junge, Ranum and Mr. Laidig introduced--

S.F. No. 985: A bill for an act relating to crimes; striking the requirement that a second chemical test be available to a person accused of driving while impaired; making various changes to the implied consent hearing process involving what must be stated in the petition, available discovery, the burden of proof, and the scope of the hearing; requiring health professionals to report injuries resulting from motor vehicle accidents that involve alcohol or controlled substances; imposing criminal penalties; amending Minnesota Statutes 1996, sections 169.123, subdivisions 3, 5c, and 6; 626.52; 626.53, subdivision 1; and 634.15, subdivision 2.

Referred to the Committee on Crime Prevention.

Mr. Kelley, S.P. introduced--

S.F. No. 986: A bill for an act relating to retirement; public employees police and fire plan; authorizing a certain current retiree or the retiree's surviving spouse to elect a joint and survivor retirement annuity in lieu of a single life retirement annuity.

Referred to the Committee on Governmental Operations and Veterans.

Ms. Pappas, Messrs. Johnson, D.J.; Johnson, D.E. and Moe, R.D. introduced--

S.F. No. 987: A bill for an act relating to taxation; providing an income tax credit for contributions to neighborhood assistance programs; proposing coding for new law in Minnesota Statutes, chapter 290.

Referred to the Committee on Taxes.

Mr. Neuville introduced--

S.F. No. 988: A bill for an act relating to education; appropriating money for technology improvements at the Minnesota state academies.

Referred to the Committee on Children, Families and Learning.

Ms. Robertson, Mrs. Scheid, Mr. Betzold, Ms. Runbeck and Mr. Knutson introduced--

S.F. No. 989: A bill for an act relating to state government; clarifying immunity for the state with respect to certain tort claims; amending Minnesota Statutes 1996, section 3.736, subdivision 1.

Referred to the Committee on Judiciary.

Mr. Stumpf, Mses. Krentz, Olson and Robertson introduced--

S.F. No. 990: A bill for an act relating to education; providing funding for the Minnesota homework helpline; appropriating money; proposing coding for new law in Minnesota Statutes, chapter 124.

Referred to the Committee on Children, Families and Learning.

Mses. Piper, Robertson, Berglin, Messrs. Janezich and Spear introduced--

S.F. No. 991: A bill for an act relating to health; requiring the commissioner of health to conduct an education campaign to prevent prenatal transmission of HIV and to provide demonstration grants; clarifying that prenatal HIV testing and counseling is covered under medical assistance; requiring sellers of HIV home collection kits to provide purchasers with specified information; requiring the commissioner of health to study the HIV and HBV prevention program; requiring employers of peace officers and correctional guards to adopt a protocol for certain emergency medical services personnel; authorizing testing for HIV or hepatitis B under certain circumstances; permitting the sale of ten or fewer unused hypodermic needles or syringes without a prescription; appropriating money; amending Minnesota Statutes 1996, sections 144.761, subdivision 1; 151.40; 152.01, subdivision 18; 256B.0625, subdivision 14; 611A.19, subdivision 1, and by adding a subdivision; proposing coding for new law in Minnesota Statutes, chapters 145; 325F.

Referred to the Committee on Health and Family Security.

Mses. Piper, Robertson, Berglin, Messrs. Janezich and Spear introduced--

S.F. No. 992: A bill for an act relating to education; establishing a demonstration project to provide HIV/AIDS prevention grants to school districts; appropriating money.

Referred to the Committee on Children, Families and Learning.

Mses. Piper, Robertson, Berglin, Messrs. Janezich and Spear introduced--

S.F. No. 993: A bill for an act relating to crime victims; authorizing testing for HIV or hepatitis B under certain circumstances; permitting the sale of six or fewer unused hypodermic needles or syringes without a prescription; appropriating money; amending Minnesota Statutes 1996, sections 144.761, subdivisions 5 and 7; 144.762, subdivision 2, and by adding a subdivision; 144.765; 144.767, subdivision 1; 151.40; 152.01, subdivision 18; and 611A.19, subdivision 1, and by adding a subdivision.

Referred to the Committee on Crime Prevention.

Mr. Betzold introduced--

S.F. No. 994: A bill for an act relating to data practices; making certain welfare and housing agency data available to law enforcement agencies; amending Minnesota Statutes 1996, sections 13.46, subdivision 2; and 13.54, by adding a subdivision.

Referred to the Committee on Judiciary.

Messrs. Morse, Stumpf, Terwilliger and Hottinger introduced--

S.F. No. 995: A bill for an act relating to retirement; providing for full employer and employee contributions to the teachers retirement association for teachers on sabbatical leave; amending Minnesota Statutes 1996, section 354.092, subdivisions 1, 3, and 4; repealing Minnesota Statutes 1996, section 354.092, subdivision 2.

Referred to the Committee on Governmental Operations and Veterans.

Messrs. Morse, Stumpf, Terwilliger and Hottinger introduced--

S.F. No. 996: A bill for an act relating to retirement; making administrative changes to the higher education individual retirement account plan and the supplemental retirement plan; creating an advisory committee; amending Minnesota Statutes 1996, section 354B.25, subdivisions 2, 3, 5, and by adding a subdivision; 354C.12, subdivision 4; and 354C.14.

Referred to the Committee on Governmental Operations and Veterans.

Messrs. Morse, Stumpf, Terwilliger and Hottinger introduced--

S.F. No. 997: A bill for an act relating to retirement; permitting certain modifications of employer and employee contributions to the higher education supplemental retirement plan; amending Minnesota Statutes 1996, section 354C.12, subdivision 1; and by adding a subdivision.

Referred to the Committee on Governmental Operations and Veterans.

Messrs. Kelly, R.C.; Johnson, D.E.; Ms. Anderson, Messrs. Novak and Cohen introduced--

S.F. No. 998: A bill for an act relating to economic development; removing the prohibition on use of state money for the board of invention; appropriating money; repealing Minnesota Statutes 1996, section 116J.990, subdivision 7.

Referred to the Committee on Jobs, Energy and Community Development.

Mr. Kelley, S.P.; Ms. Piper, Messrs. Sams and Betzold introduced--

S.F. No. 999: A bill for an act relating to professions; providing for part-time practice and emeritus registration by licensees of the board of psychology; amending Minnesota Statutes 1996, sections 148.941, subdivision 2; and 148.96, subdivisions 1 and 3; proposing coding for new law in Minnesota Statutes, chapter 148.

Referred to the Committee on Health and Family Security.

Mr. Kelley, S.P.; Ms. Piper, Messrs. Sams and Betzold introduced--

S.F. No. 1000: A bill for an act relating to professions; modifying certain board of psychology requirements relating to education, supervision, and disclosure of patient confidences; amending Minnesota Statutes 1996, section 148.907, subdivisions 2 and 4; 148.908, subdivision 2; and 148.925, subdivision 7; repealing Minnesota Statutes 1996, section 148.976.

Referred to the Committee on Health and Family Security.

Mr. Kelley, S.P.; Ms. Piper, Messrs. Sams and Betzold introduced--

S.F. No. 1001: A bill for an act relating to professions; modifying enforcement provisions for the board of psychology; providing criminal penalties; amending Minnesota Statutes 1996, section 148.941, subdivision 6, and by adding a subdivision; proposing coding for new law in Minnesota Statutes, chapter 148.

Referred to the Committee on Judiciary.

Messrs. Sams, Solon, Samuelson, Ms. Piper and Mr. Stevens introduced--

S.F. No. 1002: A bill for an act relating to health; modifying capitation rates for nonmetropolitan counties under prepaid medical assistance and prepaid general assistance medical care; amending Minnesota Statutes 1996, section 256B.69, subdivision 5b.

Referred to the Committee on Health and Family Security.

Mr. Pogemiller introduced--

S.F. No. 1003: A bill for an act relating to education; appropriating money to fund the Minnesota International Center's international classroom connection.

Referred to the Committee on Children, Families and Learning.

Mr. Laidig introduced--

S.F. No. 1004: A bill for an act relating to education; discontinuing the referendum allowance reduction; amending Minnesota Statutes 1996, sections 124.2725, subdivision 16; 124A.22, subdivision 8; and 298.28, subdivision 4; repealing Minnesota Statutes 1996, section 124A.03, subdivision 3b.

Referred to the Committee on Children, Families and Learning.

Mr. Ourada introduced--

S.F. No. 1005: A bill for an act relating to elections; changing certain registration and postelection reporting procedures; amending Minnesota Statutes 1996, section 201.061, subdivisions 3, 4, and by adding a subdivision.

Referred to the Committee on Election Laws.

Ms. Junge introduced--

S.F. No. 1006: A bill for an act relating to firefighters; authorizing certain background investigations; requiring disclosures of certain employment information; providing civil and criminal penalties; providing employers immunity for certain disclosures; amending Minnesota Statutes 1996, section 604A.31, by adding a subdivision; proposing coding for new law in Minnesota Statutes, chapter 299F.

Referred to the Committee on Crime Prevention.

Messrs. Kleis, Frederickson and Ms. Johnson, J.B. introduced--

S.F. No. 1007: A bill for an act relating to reemployment insurance; excepting from the definition of "employment" services performed by certain taxi cab drivers; amending Minnesota Statutes 1996, section 268.04, subdivision 12.

Referred to the Committee on Jobs, Energy and Community Development.

Messrs. Marty, Samuelson, Metzen, Mrs. Lourey and Ms. Berglin introduced--

S.F. No. 1008: A bill for an act relating to health; requiring the attorney general to investigate unfair drug price discrimination; giving the commissioner of administration authority to negotiate contract prices for prescription drugs; requiring the commissioner of administration to establish and administer a nongovernmental pharmaceutical contracting alliance; modifying prescription dispensing requirements; requiring a pharmacy to post a sign on generic substitution; appropriating money; amending Minnesota Statutes 1996, sections 8.31, subdivision 1; and 151.21, subdivisions 2, 3, and by adding a subdivision; proposing coding for new law in Minnesota Statutes, chapter 16B.

Referred to the Committee on Health and Family Security.

Ms. Berglin introduced--

S.F. No. 1009: A bill for an act relating to human services; requiring the commissioner of human services to place individual names on graves at regional treatment center cemeteries; appropriating money.

Referred to the Committee on Health and Family Security.

Mr. Kelley, S.P.; Mrs. Scheid, Mr. Janezich, Ms. Robertson and Mr. Scheevel introduced--

S.F. No. 1010: A bill for an act relating to libraries; appropriating money for multicounty, multitype library systems.

Referred to the Committee on Children, Families and Learning.

Messrs. Betzold, Sams, Mrs. Lourey, Messrs. Metzen and Terwilliger introduced--

S.F. No. 1011: A bill for an act relating to health; licensing massage therapists and Oriental bodywork therapists; authorizing rulemaking; providing criminal penalties; amending Minnesota Statutes 1996, sections 116J.70, subdivision 2a; 144.335, subdivision 1; 148B.60, subdivision 3; 214.23, subdivision 1; and 604A.01, subdivision 2; proposing coding for new law as Minnesota Statutes, chapter 148D.

Referred to the Committee on Health and Family Security.

Ms. Pappas, Messrs. Sams, Belanger and Day introduced--

S.F. No. 1012: A bill for an act relating to transportation; expanding definition of bus to include special transportation service vehicles; amending Minnesota Statutes 1996, section 168.011, subdivision 9.

Referred to the Committee on Transportation.

Messrs. Langseth, Stumpf, Janezich, Scheevel and Ms. Pappas introduced--

S.F. No. 1013: A bill for an act relating to education; amending the distribution formula for library grants; appropriating money; amending Minnesota Statutes 1996, section 134.35.

Referred to the Committee on Children, Families and Learning.

Messrs. Hottinger, Samuelson and Ms. Robertson introduced--

S.F. No. 1014: A bill for an act relating to human services; establishing program integrity initiatives; providing access to child support enforcement central registry; amending Minnesota Statutes 1996, sections 13.46, subdivision 2; 13.82, subdivision 1; 13.99, by adding a subdivision; 256.01, subdivision 2; 256.019; 256.019; 256.045, subdivision 3; 256.046; 256.98, subdivisions 1, 3, 4, and 8; 256.983, subdivisions 1 and 4; 256.984, subdivision 1; 256.986; 256.9861, subdivisions 1, 2, 4, and 5; 256.998, by adding subdivisions; 256B.056, subdivision 1a; 256B.057, subdivision 2a; 256D.09, subdivision 6; 270A.03, subdivision 5; 388.23, subdivision 1; and 393.07, subdivision 10; proposing coding for new law in Minnesota Statutes, chapter 256.

Referred to the Committee on Judiciary.

ADJOURNMENT

Mr. Moe, R.D. moved that the Senate do now adjourn until 9:00 a.m., Thursday, March 6, 1997. The motion prevailed.

Patrick E. Flahaven, Secretary of the Senate

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