

(1) if the officer or firefighter was receiving dependent coverage at the time of the officer's or firefighter's death under the employer's group health plan; or

(2) if the officer's or firefighter's spouse was not covered as a dependent at the time of the officer's or firefighter's death, but at that time was eligible, or afterward becomes eligible, to be a dependent on the employer's group health plan.

(c) The employer is responsible for the employer's contribution for the coverage of the officer's or firefighter's dependents. Coverage must continue for a dependent of the officer or firefighter for the period of time that the person is a dependent up to the age of 65.

Sec. 2. EFFECTIVE DATE.

Section 1 is effective the day following final enactment and applies to health coverage on or after that date with respect to dependents of peace officers and firefighters killed on or after November 1, 1997.

Presented to the governor March 12, 1999

Signed by the governor March 16, 1999, 2:15 p.m.

CHAPTER 13—H.F.No. 302

An act relating to municipal contracting; authorizing ambulance services to participate in shared service purchasing; amending Minnesota Statutes 1998, section 471.345, subdivision 10.

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

Section 1. Minnesota Statutes 1998, section 471.345, subdivision 10, is amended to read:

Subd. 10. **HOSPITAL AND AMBULANCE SERVICE SHARED SERVICE PURCHASING.** Supplies, materials, or equipment to be used in the operation of a hospital licensed under sections 144.50 to 144.56 or an ambulance service licensed under chapter 144E that are purchased or leased under a shared service purchasing arrangement whereby more than one hospital or ambulance service purchases supplies, materials, or equipment with one or more other hospitals or ambulance services either through one of the hospitals or ambulance services or through another entity, may be purchased without regard to the competitive bidding requirements of this section, if the following conditions are met:

(1) the hospital's or ambulance service's governing authority authorizes the arrangement;

(2) the shared services purchasing program purchases items available from more than one source on the basis of competitive bids or competitive quotations of prices; and

(3) the arrangement authorizes the hospital's or ambulance service's governing authority or its representatives to review the purchasing procedures to determine compliance with these requirements.

New language is indicated by underline, deletions by ~~strikeout~~.

Presented to the governor March 12, 1999

Signed by the governor March 16, 1999, 2:20 p.m.

CHAPTER 14—S.F.No. 301

An act relating to health; modifying the suggested health care directive form, amending Minnesota Statutes 1998, section 145C.16.

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

Section 1. Minnesota Statutes 1998, section 145C.16, is amended to read:

145C.16 SUGGESTED FORM.

The following is a suggested form of a health care directive and is not a required form.

HEALTH CARE DIRECTIVE

I,, understand this document allows me to do ONE OR BOTH of the following:

PART I: Name another person (called the health care agent) to make health care decisions for me if I am unable to decide or speak for myself. My health care agent must make health care decisions for me based on the instructions I provide in this document (Part II), if any, the wishes I have made known to him or her, or must act in my best interest if I have not made my health care wishes known.

AND/OR

PART II: Give health care instructions to guide others making health care decisions for me. If I have named a health care agent, these instructions are to be used by the agent. These instructions may also be used by my health care providers, others assisting with my health care and my family, in the event I cannot make decisions for myself.

PART I: APPOINTMENT OF HEALTH CARE AGENT

THIS IS WHO I WANT TO MAKE HEALTH CARE DECISIONS FOR ME IF I AM UNABLE TO DECIDE OR SPEAK FOR MYSELF

(I know I can change my agent or alternate agent at any time and I know I do not have to appoint an agent or an alternate agent)

NOTE: If you appoint an agent, you should discuss this health care directive with your agent and give your agent a copy. If you do not wish to appoint an agent, you may leave Part I blank and go to Part II.

When I am unable to decide or speak for myself, I trust and appoint to make health care decisions for me. This person is called my health care agent.

New language is indicated by underline, deletions by ~~strikeout~~.