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## MEDICAL EDUCATION ASSISTANCE PROGRAMS 4763.0125

Medical Care Health Professional Shortage Areas (HPSAs), Medically Underserved Areas (MUAs), or Medically Underserved Populations (MUPs) maintained and updated by the United States Department of Health and Human Services.

**Statutory Authority:** *MS s 15.039; 136A.04; 136A.16; 136A.234*

**History:** *15 SR 1925; 17 SR 1021; 18 SR 1472; L 1995 c 212 art 3 s 57; L 1997 c 183 art 2 s 20; 25 SR 142*

**4763.0120** [Repealed, 25 SR 142]

### **4763.0125 CRITERIA FOR SELECTION.**

Subpart 1. **Selection of applicants.** The commissioner of health shall separate urban physician applications from rural physician applications. The commissioner shall make urban applicant selections before rural applicant selections. If there are more applicants for either group than award availability, the commissioner shall determine selections according to subparts 4 to 7.

Subp. 2. **Urban selection.** The commissioner shall select up to four urban applicants using the following selection criteria to make awards for the urban physician loan forgiveness program under Minnesota Statutes, section 144.1494, subdivision 5:

A. If the number of qualified urban physician applicants is less than four or the number of available awards, the commissioner shall select all applicants eligible for participation. The remaining awards shall be allocated to the rural physician loan forgiveness program.

B. If the number of qualified urban physician applicants is equal to the number of available awards, the commissioner shall make awards to all applicants.

C. If the number of qualified urban physician applicants is greater than the number of available awards, the commissioner shall use the selection process in subparts 4 to 7 to make the awards.

Subp. 3. **Rural selection.** The commissioner shall select rural applicants using the following selection criteria to make awards for the rural physician loan forgiveness program under Minnesota Statutes, section 144.1494, subdivision 3. Up to four additional selections may be available if nonawarded urban selections are allocated to rural applicants under subpart 2:

A. If the number of qualified rural physician applicants is less than or equal to the number of available awards, the commissioner shall select all eligible applicants.

B. If the number of qualified rural physician applicants is greater than the number of available awards, the commissioner shall use the selection process in subparts 4 to 7 to make the awards.

Subp. 4. **Selection criteria.** The commissioner shall evaluate applicants according to the following criteria:

A. the year in medical residency training according to Minnesota Statutes, section 144.1494, subdivisions 3 and 5, giving priority to residents in descending order, third year residents, second year residents, first year residents;

B. the location of the medical school attended by the applicant;

C. the location of the medical residency training program attended by the applicant;

D. the extent to which an applicant's training or experience demonstrates the applicant's suitability to serve in a rural or underserved urban area; and

E. the applicant's personal history with rural or underserved urban areas.

Each applicant shall be evaluated against the criteria stated in this part. A score shall be given to an applicant's response to each criteria and each criteria shall be weighted using the point values in subpart 5. Each applicant shall be given a total score and shall be ranked from the highest score to the lowest score. In the event that two or more applicants have equal scores, preference shall be given to applicants who demonstrate the strongest suitability to practice in a rural or underserved urban area.

Subp. 5. **Point values.** The commissioner shall award points to each applicant as follows:

- A. third year residents receive 70 points;
- B. second year residents receive 50 points;
- C. first year residents receive 30 points;
- D. applicants who attended a Minnesota medical school receive up to a maximum of eight points;
- E. applicants who attended a Minnesota medical residency training program receive up to a maximum of eight points;
- F. applicants with rural or underserved urban training or experience receive up to a maximum of eight points; and
- G. applicants with rural or underserved urban personal history receive up to a maximum of eight points.

Subp. 6. **Specialty.** The commissioner shall sort scored applications according to the specialties of family practice, obstetrics and gynecology, pediatrics, internal medicine, or psychiatry. No priority is given to specialty type. The highest scoring applicant shall be selected from each specialty having at least one applicant as long as that applicant scored above 65. All remaining applicants shall be combined for the remaining selections.

Subp. 7. **Insufficient award availability.** The commissioner shall place all applicants not selected to participate initially on an alternate list. If a selected applicant declines to participate, the list shall be used to select additional applicants according to subparts 4 to 6.

**Statutory Authority:** *MS s 15.039*

**History:** *25 SR 142*

**4763.0130** [Repealed, 25 SR 142]

**4763.0135 APPLICATION AND CONTRACT PROCESS.**

Subpart 1. **Eligibility of applicants.** Applicants seeking to practice in a designated rural or underserved urban community must be in medical residency training for family practice, obstetrics and gynecology, pediatrics, internal medicine, or psychiatry.

Subp. 2. **Application form.** Prospective participants must complete and submit an application form, provided by the commissioner of health, by the designated deadline to become eligible for selection.

Subp. 3. **Agreement or contract.** A selected applicant must sign and return the grant agreement or contract provided by the commissioner of health by the designated deadline. Failure to complete and return the agreement or contract by the specified deadline date results in the automatic elimination of the selected applicant from participation.

**Statutory Authority:** *MS s 15.039*

**History:** *25 SR 142*

**4763.0140 LOAN PAYMENT.**

Subpart 1. **Designation of loans.** Each program participant must designate which qualified loans the annual loan repayment disbursements will be applied toward by the participant. Payments by the commissioner of health to the participant may not exceed \$10,000 for each year of service, unless the participant fulfills the requirements in subpart 6.

Subp. 2. [Repealed, 25 SR 142]

Subp. 3. **Terms of payments.** The commissioner of health shall make annual disbursements directly to the participant equivalent to \$10,000 per year of service, not to exceed \$40,000 or the balance of the designated loans, whichever is less. The total

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amount of all disbursements may not exceed the principal and accrued interest of the designated loans.

Subp. 3a. **Payment verification.** The participant must provide the commissioner of health with verification that the full amount of loan repayment disbursement received by the participant has been applied toward the designated loans. After each disbursement, verification must be received by the commissioner of health and approved before the next loan repayment disbursement is made.

Subp. 4. [Repealed, 25 SR 142]

Subp. 5. **Discontinuation of service.** The participant must reimburse the commissioner of health for payments made during any period when the participant is not serving as a physician in a designated rural area or underserved urban community.

Subp. 6. **Additional designation of loans.** If a program participant serves at least four weeks during a year of residency substituting for a rural physician to temporarily relieve the rural physician of rural practice commitments, the participant may designate up to an additional \$2,000 above the \$10,000 maximum specified in subpart 1, for each year of residency during which the resident substitutes in this capacity. In order to designate additional loans, the program participant must provide the commissioner of health with written verification from the rural physician documenting the period of time the program participant relieves the rural physician of rural practice commitments.

The program participant must be a licensed physician in Minnesota when performing the services specified in this subpart.

**Statutory Authority:** *MS s 15.039; 136A.04; 136A.16; 136A.234*

**History:** *15 SR 1925; 17 SR 1021; 18 SR 1472; L 1995 c 212 art 3 s 57; 25 SR 142*

### 4763.0150 PENALTY FOR NONFULFILLMENT.

Subpart 1. **Payment amount.** If a participant fails to fulfill the service requirement of this program, the amount paid on designated loans by the commissioner of health must be repaid with interest at a rate established according to Minnesota Statutes, section 270.75, subdivision 5. Interest accrues from the date the participant ceases to practice as a physician in a designated rural area or underserved urban community.

Subp. 2. **Payment plan.** The commissioner of health shall set up a payment plan after consulting with the participant. The participant must repay the money within five years.

Subp. 3. **Waiver.** A participant may request a waiver from the repayment obligation from the commissioner of health. The request must be in writing and must provide written documentation on the emergency circumstances that support the need for the waiver. The commissioner of health shall review the documentation and shall grant a full or partial waiver if the commissioner of health finds that the emergency circumstances justify the waiver.

Subp. 4. **Release of information.** The following information about the participant may be released to a consumer credit reporting agency until the participant has repaid in full all money owed the office:

- A. the name and address of participant;
- B. the date the repayment started;
- C. the outstanding balance;
- D. the amount past due;
- E. the number of payments past due;
- F. the number of late payments in the previous 12 months; and
- G. the status or remarks code.

**Statutory Authority:** *MS s 136A.04; 136A.16; 136A.234*

**History:** *15 SR 1925; 18 SR 1472; L 1995 c 212 art 3 s 57,59*

**4763.0160 PARTICIPANT RESPONSIBILITIES.**

Subpart 1. **Service status verification.** Before receiving loan repayment disbursements and as requested, the participant must complete and return to the commissioner of health, by the specified deadline, the affidavit of practice form provided by the commissioner of health.

Subp. 2. **Status change.** The participant must inform the commissioner of health in writing within 30 days of a change of address or service location.

Subp. 3. **Service obligation.** The participant must begin the service obligation in a designated rural area or underserved urban community by March 31 of the first year following completion of a residency program. The participant must notify the commissioner of health in writing immediately after starting service as a physician in a designated rural area or underserved urban community. To remain eligible, a participant must provide service in a designated area for at least 30 hours per week for 45 weeks per year and must abide by the terms of the signed agreement or contract.

**Statutory Authority:** *MS s 15.039; 136A.04; 136A.16; 136A.234*

**History:** *15 SR 1925; L 1995 c 212 art 3 s 57; 25 SR 142*

**4763.0170 INFORMATION; FORMS; TERMS.**

Subpart 1. **Additional information.** The commissioner of health or the commissioner of health's agent may require additional information from the participant that is not inconsistent with law that is helpful in the commissioner of health's judgment to efficiently administer the program.

Subp. 2. **Forms.** The commissioner of health may provide to participants and require the use of uniform forms in the administration of the program.

**Statutory Authority:** *MS s 136A.04; 136A.16; 136A.234*

**History:** *15 SR 1925; L 1995 c 212 art 3 s 57*

**MIDLEVEL PRACTITIONER EDUCATION ACCOUNT****4763.0180 SCOPE.**

Parts 4763.0180 to 4763.0250 apply to the midlevel practitioner education account program.

**Statutory Authority:** *MS s 136A.04; 136A.16*

**History:** *17 SR 1021; L 1995 c 212 art 3 s 57*

**4763.0190 DEFINITIONS.**

Subpart 1. **Scope.** The terms defined in Minnesota Statutes, section 144.1495, are applicable to parts 4763.0180 to 4763.0250.

Subp. 1a. **Applicant.** "Applicant" means a midlevel practitioner student who has a signed application form on file with the commissioner of health for participation in the midlevel practitioner loan forgiveness program.

Subp. 2. **Designated rural area.** "Designated rural area" means:

A. an area in Minnesota outside the counties of Anoka, Carver, Dakota, Hennepin, Ramsey, Scott, and Washington, excluding the cities of Duluth, Mankato, Moorhead, Rochester, and St. Cloud; or

B. a municipal corporation, as defined under Minnesota Statutes, section 471.634, that is physically located, in whole or in part, in an area defined as a designated rural area under item A.

Subp. 3. [Repealed, 25 SR 142]

Subp. 4. **Emergency circumstances.** "Emergency circumstances" means those conditions that make it impossible for the participant to fulfill the service commitment. The conditions include death, total and permanent disability, or temporary disability lasting more than two years.

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Subp. 4a. **Participant.** "Participant" means a selected applicant who has a signed grant agreement or contract on file with the commissioner of health for participation in the midlevel practitioner loan forgiveness program.

Subp. 5. **Qualified loans.** "Qualified loans" means government, commercial, and foundation loans for actual costs paid for tuition, reasonable education expenses, and reasonable living expenses related to the graduate or undergraduate education of a health care professional.

Subp. 6. **Selected applicant.** "Selected applicant" means an applicant who has been selected by the commissioner of health for participation in the midlevel practitioner loan forgiveness program.

**Statutory Authority:** *MS s 15.039; 136A.04; 136A.16*

**History:** *17 SR 1021; L 1995 c 212 art 3 s 57; 25 SR 142*

**4763.0200** [Repealed, 25 SR 142]

### **4763.0205 CRITERIA FOR SELECTION.**

Subpart 1. **Selection of applicants.** If the number of qualified midlevel applicants is less than or equal to the number of available awards, the commissioner of health shall select all eligible applicants. If the number of qualified midlevel applicants is greater than the number of available awards, the commissioner shall determine selections according to subparts 2 to 5.

Subp. 2. **Selection criteria.** The commissioner shall evaluate applicants according to the following criteria:

- A. the year in midlevel practitioner training, with priority given to final year students;
- B. the location of the applicant's midlevel practitioner training program;
- C. the extent to which an applicant's training or experience demonstrates the applicant's suitability to serve in a rural area; and
- D. the applicant's personal history with a rural area.

Each applicant shall be evaluated against the criteria stated in this part. A score shall be given to an applicant's response to each criteria and each criteria shall be weighted using the point values in subpart 3. Each applicant shall be given a total score and shall be ranked from the highest score to the lowest score. In the event that two or more applicants have equal scores, preference shall be given to applicants who demonstrate the strongest suitability to practice in a rural area.

Subp. 3. **Point values.** The commissioner shall award points to each applicant as follows:

- A. final year students receive 70 points;
- B. nonfinal year students receive 50 points;
- C. applicants who attended a Minnesota midlevel practitioner training program receive up to a maximum of ten points;
- D. applicants with rural training or experience receive up to a maximum of ten points; and
- E. applicants with rural personal history receive up to a maximum of ten points.

Subp. 4. **Specialty.** The commissioner shall sort scored applications according to the specialties of nurse practitioner, nurse-midwife, nurse anesthetist, advanced clinical nurse specialist, or physician assistant. No priority is given to specialty type. The highest scoring applicant shall be selected from each specialty having at least one applicant as long as that applicant scored above 65. All remaining applicants shall be combined for the remaining selections.

Subp. 5. **Insufficient award availability.** The commissioner shall place all applicants not selected to participate initially on an alternate list. If a selected applicant

declines to participate, the list shall be used to select additional applicants according to subparts 2 to 4.

**Statutory Authority:** *MS s 15.039*

**History:** *25 SR 142*

**4763.0210** [Repealed, 25 SR 142]

**4763.0215 APPLICATION AND CONTRACT PROCESS.**

Subpart 1. **Eligibility of applicants.** Applicants seeking to practice in a designated rural area must be enrolled in midlevel practitioner training for a nurse practitioner, nurse-midwife, nurse anesthetist, advanced clinical nurse specialist, or physician assistant according to Minnesota Statutes, section 144.1495, subdivision 1.

Subp. 2. **Application form.** Prospective participants must complete and submit an application provided by the commissioner of health by the designated deadline to become eligible for selection.

Subp. 3. **Agreement or contract.** A selected applicant must sign and return the grant agreement or contract provided by the commissioner of health by the designated deadline. Failure to complete and return the agreement or contract by the specified deadline date results in the automatic elimination of the selected applicant from participation.

**Statutory Authority:** *MS s 15.039*

**History:** *25 SR 142*

**4763.0220 LOAN PAYMENT.**

Subpart 1. **Designation of loans.** Each program participant must designate which qualified loans the annual loan repayment disbursements will be applied toward by the participant. Payments by the commissioner of health to the participant may not exceed \$3,500 for each year of service.

Subp. 2. [Repealed, 25 SR 142]

Subp. 3. **Terms of payments.** The commissioner of health shall make annual disbursements directly to the participant equivalent to \$3,500 per year of service, not to exceed \$14,000 or the balance of the designated loans, whichever is less. The total amount of all disbursements may not exceed the principal and accrued interest of the designated loans.

Subp. 3a. **Payment verification.** The participant must provide the commissioner of health with verification that the full amount of loan repayment disbursement received by the participant has been applied toward the designated loans. After each disbursement, verification must be received by the commissioner of health and approved before the next loan repayment disbursement is made.

Subp. 4. **Discontinuation of service.** The participant must reimburse the commissioner of health for payments made during any period when the participant is not serving as a midlevel practitioner in a designated rural area.

**Statutory Authority:** *MS s 15.039; 136A.04; 136A.16*

**History:** *17 SR 1021; L 1995 c 212 art 3 s 57; 25 SR 142*

**4763.0230 PENALTY FOR NONFULFILLMENT.**

Subpart 1. **Payment amount.** If a participant fails to fulfill the service requirement of this program, the amount paid on designated loans by the commissioner of health must be repaid with interest at a rate established according to Minnesota Statutes, section 270.75, subdivision 5. Interest accrues from the date the participant ceases to practice as a midlevel practitioner in a designated rural area.

Subp. 2. **Payment plan.** The commissioner of health shall set up a payment plan after consulting with the participant. The participant must repay the money within four years.

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Subp. 3. **Waiver.** A participant may request a waiver from the repayment obligation from the commissioner of health. The request must be in writing and must provide written documentation on the emergency circumstances that support the need for the waiver. The commissioner of health shall review the documentation and shall grant a full or partial waiver if the commissioner of health finds that the emergency circumstances justify the waiver.

Subp. 4. **Release of information.** The following information about the participant may be released to a consumer credit reporting agency until the participant has repaid in full all money owed the office:

- A. the name and address of the participant;
- B. the date the repayment started;
- C. the outstanding balance;
- D. the amount past due;
- E. the number of payments past due;
- F. the number of late payments in the previous 12 months; and
- G. the status or remarks code.

**Statutory Authority:** *MS s 136A.04; 136A.16*

**History:** *17 SR 1021; L 1995 c 212 art 3 s 57,59*

### 4763.0240 PARTICIPANT RESPONSIBILITIES.

Subpart 1. **Service status verification.** Before receiving loan repayment disbursements and as requested, the participant must complete and return to the commissioner of health, by the specified deadline, the affidavit of practice form provided by the commissioner of health.

Subp. 2. **Status change.** The participant must inform the commissioner of health in writing within 30 days of a change of address or service location.

Subp. 3. **Service obligation.** The participant must begin the service obligation in a designated rural area by March 31 of the first year following completion of a midlevel practitioner training program. The participant must notify the commissioner of health in writing immediately after starting service as a midlevel practitioner in a designated rural area. To remain eligible, a participant must provide service in a designated rural area for at least 30 hours per week for 45 weeks per year and must abide by the terms of the signed agreement or contract.

**Statutory Authority:** *MS s 15.039; 136A.04; 136A.16*

**History:** *17 SR 1021; L 1995 c 212 art 3 s 57; 25 SR 142*

### 4763.0250 INFORMATION; FORMS; TERMS.

Subpart 1. **Additional information.** The commissioner of health may require additional information from the participant that is not inconsistent with law that is helpful in the commissioner of health's judgment to efficiently administer the program.

Subp. 2. **Forms.** The commissioner of health may provide to participants and require the use of uniform forms in the administration of the program.

**Statutory Authority:** *MS s 136A.04; 136A.16*

**History:** *17 SR 1021; L 1995 c 212 art 3 s 57*

## NURSING HOME OR INTERMEDIATE CARE FACILITY NURSES EDUCATION ACCOUNT

### 4763.0260 SCOPE.

Parts 4763.0260 to 4763.0330 apply to the nursing home or intermediate care facility nurses education account.

**Statutory Authority:** *MS s 136A.04; 136A.16*

**History:** *17 SR 1021; 18 SR 1141; L 1995 c 212 art 3 s 57*

**4763.0270 DEFINITIONS.**

Subpart 1. **Scope.** For purposes of parts 4763.0270 to 4763.0330, the terms used have the meanings given them in this part.

Subp. 1a. **Applicant.** "Applicant" means a person enrolled in a program of study designed to prepare the person to become a licensed practical nurse or registered nurse who has a signed application form on file with the commissioner of health.

Subp. 2. [Repealed, 25 SR 142]

Subp. 3. **Emergency circumstances.** "Emergency circumstances" means those conditions that make it impossible for the participant to fulfill the service commitment. The conditions include death, total and permanent disability, or temporary disability lasting more than two years.

Subp. 3a. **Participant.** "Participant" means a selected applicant who has a signed grant agreement or contract on file with the commissioner of health for participation in the nurses in nursing home loan forgiveness program.

Subp. 4. **Qualified loans.** "Qualified loans" means government, commercial, and foundation loans for actual costs paid for tuition, reasonable education expenses, and reasonable living expenses related to the graduate or undergraduate education of a health care professional.

Subp. 5. **Selected applicant.** "Selected applicant" means an applicant who has been selected by the commissioner of health for participation in the nurses in nursing home loan forgiveness program.

**Statutory Authority:** *MS s 15.039; 136A.04; 136A.16*

**History:** *17 SR 1021; 18 SR 1141; L 1995 c 212 art 3 s 57; 25 SR 142*

**4763.0280** [Repealed, 25 SR 142]

**4763.0285 CRITERIA FOR SELECTION.**

Subpart 1. **Selection of applicants.** If the number of qualified nursing applicants is less than or equal to the number of available awards, the commissioner of health shall select all eligible applicants. If the number of qualified nursing applicants is greater than the number of available awards, the commissioner shall determine selections according to subparts 2 to 5.

Subp. 2. **Selection criteria.** The commissioner shall evaluate applicants according to the following criteria:

- A. the year in a nursing program, with priority given to final year students;
- B. the location of the applicant's nursing training program;
- C. any nursing home or ICF/MR experience of the applicant; and
- D. the extent to which the applicant's training or experience demonstrates the applicant's suitability to serve the elderly or disabled populations.

Each applicant shall be evaluated against the criteria stated in this part. A score shall be given to an applicant's response to each criteria and each criteria shall be weighted using the point values in subpart 3. Each applicant shall be given a total score and shall be ranked from the highest score to the lowest score. In the event that two or more applicants have equal scores, preference shall be given to applicants who demonstrate the strongest suitability to practice in a nursing home or ICF/MR.

Subp. 3. **Point values.** The commissioner shall award points to each applicant as follows:

- A. final year students receive 70 points;
- B. nonfinal year students receive 50 points;
- C. applicants who attended a Minnesota nursing training program receive up to a maximum of ten points;
- D. applicants with nursing home or ICF/MR training or experience receive up to a maximum of ten points; and

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E. applicants with training or experience with the elderly or disabled populations receive up to a maximum of ten points.

Subp. 4. **Specialty.** The commissioner shall sort scored applications according to the specialties of licensed practical nurse or registered nurse. No priority is given to specialty type. The highest scoring applicant shall be selected from each specialty having at least one applicant as long as that applicant scored above 65. All remaining applicants shall be combined for the remaining selections.

Subp. 5. **Insufficient award availability.** The commissioner shall place all applicants not selected to participate initially on an alternate list. If a selected applicant declines to participate, the list shall be used to select additional applicants according to subparts 2 to 4.

**Statutory Authority:** *MS s 15.039*

**History:** *25 SR 142*

**4763.0290** [Repealed, 25 SR 142]

### **4763.0295 APPLICATION AND CONTRACT PROCESS.**

Subpart 1. **Eligibility of applicants.** Applicants seeking to practice in a licensed nursing home or intermediate care facility for persons with mental retardation or related conditions must be studying to become a licensed practical nurse or a registered nurse.

Subp. 2. **Application form.** A prospective registered nurse or licensed practical nurse must complete and return the application form provided by the commissioner of health by the designated deadline to become eligible for selection.

Subp. 3. **Agreement or contract.** A selected applicant must sign and return the grant agreement or contract provided by the commissioner of health by the designated deadline. Failure to complete and return the agreement or contract by the specified deadline date results in the automatic elimination of the selected applicant from participation.

**Statutory Authority:** *MS s 15.039*

**History:** *25 SR 142*

### **4763.0300 LOAN PAYMENT.**

Subpart 1. **Designation of loans.** Each program participant must designate which qualified loans the annual or semiannual loan repayment disbursements will be applied toward by the participant. Payments by the commissioner of health to the participant may not exceed \$3,000 for each year of service.

Subp. 2. [Repealed, 25 SR 142]

Subp. 3. **Terms of payments.** The commissioner of health shall make annual disbursements directly to the participant equivalent to \$3,000 per year of service, not to exceed \$6,000 or the balance of the designated loans, whichever is less. The total amount of all disbursements may not exceed the principal and accrued interest of the designated loans.

Subp. 3a. **Payment verification.** The participant must provide the commissioner of health with verification that the full amount of loan repayment disbursement received by the participant has been applied toward the designated loans. After each disbursement, verification must be received by the commissioner of health and approved before the next loan repayment disbursement is made.

Subp. 4. **Discontinuation of service.** The participant must reimburse the commissioner of health for payments made during any period when the participant is not serving as a nurse in a licensed nursing home or intermediate care facility for persons with mental retardation or related conditions.

**Statutory Authority:** *MS s 15.039; 136A.04; 136A.16*

**History:** *17 SR 1021; 18 SR 1141; L 1995 c 212 art 3 s 57; 25 SR 142*

**4763.0310 PENALTY FOR NONFULFILLMENT.**

Subpart 1. **Payment amount.** If a participant fails to fulfill the service requirement of this program, the amount paid on designated loans by the commissioner of health must be repaid with interest at a rate established according to Minnesota Statutes, section 270.75, subdivision 5. Interest accrues from the date the participant ceases to practice as a nurse in a licensed nursing home or intermediate care facility for persons with mental retardation or related conditions.

Subp. 2. **Payment plan.** The commissioner of health shall set up a payment plan after consulting with the participant. The participant must repay the money within two years.

Subp. 3. **Waiver.** A participant may request a waiver from the repayment obligation from the commissioner of health. The request must be in writing and must provide written documentation on the emergency circumstances that support the need for the waiver. The commissioner of health shall review the documentation and shall grant a full or partial waiver if the commissioner of health finds that the emergency circumstances justify the waiver.

Subp. 4. **Release of information.** The following information about the participant may be released to a consumer credit reporting agency until the participant has repaid in full all money owed the office:

- A. the name and address of the participant;
- B. the date the repayment started;
- C. the outstanding balance;
- D. the amount past due;
- E. the number of payments past due;
- F. the number of late payments in the previous 12 months; and
- G. the status or remarks code.

**Statutory Authority:** *MS s 136A.04; 136A.16*

**History:** *17 SR 1021; 18 SR 1141; L 1995 c 212 art 3 s 57,59*

**4763.0320 PARTICIPANT RESPONSIBILITIES.**

Subpart 1. **Service status verification.** Before receiving loan repayment disbursements, semiannually thereafter, and as requested, the participant must complete and return to the commissioner of health, by the specified deadline, the affidavit of practice form provided by the commissioner of health.

Subp. 2. **Status change.** The participant must inform the commissioner of health in writing within 30 days of a change of address or service location.

Subp. 3. **Service obligation.** The participant must begin the service obligation in a licensed nursing home or intermediate care facility for persons with mental retardation or related conditions (ICF/MR) by March 31 of the first year following completion of a nursing program. The participant must notify the commissioner of health in writing immediately after starting service as a licensed practical nurse or registered nurse in a nursing home or ICF/MR. To remain eligible, a participant must provide service in a nursing home or ICF/MR for at least 30 hours per week for 45 weeks per year and must abide by the terms of the signed agreement or contract.

**Statutory Authority:** *MS s 15.039; 136A.04; 136A.16*

**History:** *17 SR 1021; 18 SR 2482; L 1995 c 212 art 3 s 57; 25 SR 142*

**4763.0330 INFORMATION; FORMS; TERMS.**

Subpart 1. **Additional information.** The commissioner of health may require additional information from the participant that is not inconsistent with law that is helpful in the commissioner of health's judgment to efficiently administer the program.

Subp. 2. **Forms.** The commissioner of health may provide to participants and require the use of uniform forms in the administration of the program.

**Statutory Authority:** *MS s 136A.04; 136A.16*

**History:** *17 SR 1021; L 1995 c 212 art 3 s 57*