Minnesota Health-Related Licensing Boards Biennial Report

July 1, 2014

To

June 30, 2016

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This Biennial Report for the period July 1, 2014 through June 30, 2016 is submitted in accordance with M.S. §214.07, which states in part:

The administrative services unit serving the boards shall prepare a report by December 15 of each even-numbered year. One copy of the administrative services report must be delivered to each of the following: the governor, the commissioner of health, and the chairs of the house of representatives and senate policy and appropriations committees with jurisdiction over health-related licensing boards. The report must be delivered to the Legislative Reference Library as provided by section 3.195. The administrative services report must contain the following information:

(1) a summary of the information contained in the reports submitted by the health-related licensing boards pursuant to subdivision 1b;

(2) a description of the health-related licensing boards' cooperative activities during the two-year period ending the previous June 30;

(3) a description of emerging issues relating to health occupation regulation that affect more than one board or more than one occupation; and

(4) a copy of each health-related licensing board report submitted to the administrative services unit pursuant to subdivision 1b.

The statutory requirements for the Health-Related Licensing Boards, and the Non-Health-Related Licensing Boards follow.

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Total Cost of Report Preparation: $13,989

The biennial report requirements for the Minnesota Health-Related Licensing Boards are contained in M.S. §214.07, which provide:

Subdivision 1.**Non-health-related board reports.**

The non-health-related licensing boards shall prepare reports according to this subdivision by October 1 of each even-numbered year. Copies of the reports shall be delivered to the governor. The reports shall contain the following information relating to the two-year period ending the previous June 30:

(a) a general statement of board activities;

(b) the number of meetings and approximate total number of hours spent by all board members in meetings and on other board activities;

(c) the receipts and disbursements of board funds;

(d) the names of board members and their addresses, occupations, and dates of appointment and reappointment to the board;

(e) the names and job classifications of board employees;

(f) a brief summary of board rules proposed or adopted during the reporting period with appropriate citations to the State Register and published rules;

(g) the number of persons having each type of license and registration issued by the board as of June 30 in the year of the report;

(h) the locations and dates of the administration of examinations by the board;

(i) the number of persons examined by the board with the persons subdivided into groups showing age categories, sex, and states of residency;

(j) the number of persons licensed or registered by the board after taking the examinations referred to in clause (h) with the persons subdivided by age categories, sex, and states of residency;

(k) the number of persons not licensed or registered by the board after taking the examinations referred to in clause (h) with the persons subdivided by age categories, sex, and states of residency;

(l) the number of persons not taking the examinations referred to in clause (h) who were licensed or registered by the board or who were denied licensing or registration with the reasons for the licensing or registration or denial thereof and with the persons subdivided by age categories, sex, and states of residency;

(m) the number of persons previously licensed or registered by the board whose licenses or registrations were revoked, suspended, or otherwise altered in status with brief statements of the reasons for the revocation, suspension or alteration;
(n) the number of written and oral complaints and other communications received by the executive director or executive secretary of the board, a board member, or any other person performing services for the board (1) which allege or imply a violation of a statute or rule which the board is empowered to enforce and (2) which are forwarded to other agencies as required by section 214.10;
(o) a summary, by specific category, of the substance of the complaints and communications referred to in clause (n) and, f or each specific category, the responses or dispositions thereof pursuant to section 214.10 or 214.11;
(p) any other objective information which the board members believe will be useful in reviewing board activities.

Non-Health-Related Licensing Boards are not required to provide historical / trend data by statute (this differs from the Health-Related Licensing Boards). For the purposes of the biennial report, the Barber Board and Cosmetologist Board are considered Non-Health-Related Licensing Boards (MS § 214.01).

The biennial report requirements for the Minnesota Health-Related Licensing Boards are contained in M.S. §214.07.

Subdivision 1b. **Health-related board reports.**

Each health-related licensing board must prepare a report by October 15 of each even-numbered year. The report must be submitted to the administrative services unit serving the boards. The report must contain the following information for the two-year period ending the previous June 30: (1) the number and type of credentials issued or renewed; (2) the number of complaints received; (3) the number and age of complaints open at the end of the period; (4) receipts, disbursements, and major fees; and (5) such other information that the interests of health occupation regulation require. The report must also contain information showing historical trends. The repots must use a common format and consistent terminology and data.

Reports are included for the following Health-Related Licensing Boards:

- Minnesota Board of Behavioral Health and Therapy
- Minnesota Board of Chiropractic Examiners
- Minnesota Board of Dentistry
- Minnesota Board of Dietetics and Nutrition Practice
- Minnesota Board of Marriage and Family Therapy
- Minnesota Board of Medical Practice
- Minnesota Board of Nursing
- Minnesota Board of Examiners for Nursing Home Administrators
- Minnesota Board of Optometry
- Minnesota Board of Pharmacy
- Minnesota Board of Physical Therapy
- Minnesota Board of Podiatric Medicine
- Minnesota Board of Psychology
- Minnesota Board of Social Work
- Minnesota Board of Veterinary Medicine

Also included is the Office of Unlicensed Complementary and Alternative Health Care Practice.

Summary of Board Reports

Number and Type of Credentials Issued or Renewed

Board	Number of Credentials Issued or Renewed during biennium ending June 30, 2016	Total Number of persons licensed or registered as of June 30, 2016
Barber Board		2933
Behavioral Health and Therapy	4814	4814
Chiropractic Examiners	4870	9486
Cosmetologist Examiners		39,153
Dentistry	17,218	17,468
Dietetics / Nutrition	3577	1817
Marriage and Family Therapy	5000	2370
Medical Practice	55,183	30,365
Nursing	144,528	148,029
Examiners for Nursing Home Administrators	1024	894
Optometry	1180	1097
Pharmacy	28,427	23,275 (Persons) 4,142 (Facilities) 21,536 (PMP Users)
Physical Therapy	14,035	6843
Podiatric Medicine	441	263
Psychology	3797	3835
Social Work	14,025	14,429
Veterinary Medicine	3558	3330
TOTAL	301,677	336,079

Summary of Board reports

Number of Complaints Received in Biennium

Board	Number of Complaints Received (Opened) July 1, 2014 –June 30, 2016	Total complaints closed July 1, 2014—June 30, 2016	Number of Disciplinary Actions Taken July 1, 2014—June 30, 2016
Barber Board	32	N/A	Number of revocations, suspensions, or other alteration in status: 47 Disciplinary actions: 29
Behavioral Health and Therapy	255	215	27
Chiropractic Examiners	289	309	29
Cosmetologist Examiners	262	N/A	Number of revocations, suspensions, or other alteration in status: 141
Dentistry	515	382	101
Dietetics / Nutrition	9	8	0
Marriage and Family Therapy	156	81	28*
Medical Practice	1562	1872	148
Nursing	2146	2423	765
Examiners for Nursing Home Administrators	95	91	6
Optometry	28	18	6
Pharmacy	410	423	94
Physical Therapy	101	88	35
Podiatric Medicine	10	6	4
Psychology	444	308	29
Social Work	775	598	103
Veterinary Medicine	175	143	62
TOTAL	7264	6965	1654

*(includes Agreement for Corrective Action, which are public, but non-disciplinary)

Summary of Board reports

Number and age of complaints open at the end of the period

Board	Number of Complaints Open as of June 30, 2016	Number of complaints open as of June 30, 2016 (Listed by <one year or > one year)
Barber Board		
Behavioral Health and Therapy	101	< one year: 75 > one year: 26
Chiropractic Examiners	313	<one year: 232 > one year: 77
Cosmetologist Examiners		
Dentistry	103	< one year: 82 > one year: 21
Dietetics / Nutrition	1	< one year: 1
Marriage and Family Therapy	71	< one year: 66 > one year: 5
Medical Practice	389	< one year: 311 > one year: 78
Nursing	437	< one year: 417 > one year: 20
Examiners for Nursing Home Administrators	6	< one year: 4 > one year: 2
Optometry	4	< one year: 4
Pharmacy	131	< one year: 56 > one year: 75
Physical Therapy	21	< one year: 20 > one year: 1
Podiatric Medicine	4	< one year: 3 > one year: 1
Psychology	136	< one year: 271 > one year: 14
Social Work	182	< one year: 170 > one year: 12
Veterinary Medicine	22	< one year: 11 > one year: 11
TOTAL	1921	

Summary of Board Reports

Receipts, Disbursements and Major Fees (rounded to nearest dollar)

Board	Receipts Biennium ending June 30, 2016	Disbursements Biennium ending June 30, 2016
Barber Board	$545,763	$568,707
Behavioral Health and Therapy	$1,970,875	$1,261,094
Chiropractic Examiners	$1,600,291	$1,349,570
Cosmetologist Examiners	$1,857, 345	$1,435,251
Dentistry	$3,456,577	$3,188,209
Dietetics / Nutrition	$324,698	$246,936
Marriage and Family Therapy	$707,410	$661,302
Medical Practice	$11,445,514	$7,962,117
Nursing	$13,260,405	$10,358,110
Examiners for Nursing Home Administrators	$455,515	$298,868
Optometry	$289,146	$300,353
Pharmacy	$5,525,140	$5,476,855
Physical Therapy	$1,230,305	$973,881
Podiatric Medicine	$222,170	$186,535
Psychology	$2,333,818	$1,578,771
Social Work	$2,559,693	$2,593,148
Veterinary Medicine	$374,573	$169,494
TOTAL	48,159,238	38,609,201

Emerging issues relating to health occupation regulation that affect more than one board or more than one occupation

During the 2014-2016 biennium, the health-related licensing boards faced a number of common emerging issues, described below.

Staffing / funding issues. As a result of state requirements regarding budgets and expenditures, as well as increasing costs, such as legal fees, a number of the boards are facing salary constraints and possible budgetary shortfalls that affect staffing levels and service delivery, including the ability to investigate complaints and process contested cases for disciplinary issues.

The Boards continue to make technology / communication improvements, refinements, and to expand services through technology. The Boards are strongly committed to providing efficient and timely access to public data and to license renewal and verification. The Boards continue to make their web sites increasingly interactive.

Applicants and the general population are becoming increasingly diverse, including cultural and language diversity. The boards continue to examine matters pertaining to possible barriers in licensure, as well as issues surrounding clients and patients from diverse populations. The Boards are facing increased costs of disciplinary actions, due to increased legal costs, as well as increased complexity of complaints that require additional legal involvement, and a trend toward increased, and more substantial, and extended involvement by licensees' legal representatives.

The Boards are moving toward a standardized system of criminal background checks for licensees, and are working with state and federal agencies to ensure that such background checks are in compliance with all applicable statutes and regulations.

The possibility of additional newly established health regulatory boards exists, subject to legislative activity that would likely affect the current boards.

Cooperative Activities for the Biennium ending June 30, 2014

Council of Health Boards

The health-related licensing boards may establish a Council of Health Boards consisting of representatives of the health-related licensing boards and the Emergency Medical Services Regulatory Board. When reviewing legislation or legislative proposals relating to the regulation of health occupations, the council shall include the commissioner of health or a designee. M.S. § 214.025

The chair of a standing committee in either house of the legislature may request information from the Council of Health Boards on proposals relating to the regulation of health occupations. M.S.§ 214.001, Subd. 4.

Executive Directors Forum

The Executive directors of each independent board meet monthly to collaborate and to address issues of shared concern, including policy development, legislation and technological improvements. The Forum establishes committees to develop recommendations for consideration by the Forum. These committees include the Policy Committee, Management Committee and Information Technology Working Group. To assure fiscal efficiency, boards review general objective and promote cooperation among the boards through the Executive Director Forum in an effort to eliminate duplication.

Administrative Services Unit

The Administrative Services Unit (ASU) provides administrative and business services to the Minnesota Boards of Barber Examiners, Behavioral Health and Therapy, Chiropractic Examiners, Cosmetologist Examiners, Dentistry, Dietetics and Nutrition Practice, Marriage and Family Therapy, Medical Practice, Nursing, Nursing Home Administrators, Optometry, Pharmacy, Physical Therapy, Podiatric Medicine, Psychology, Social Work, and Veterinary Medicine, and an affiliated program, the Health Professionals Service Program.

ASU currently consists of five staff members, who provide shared business services for the approximately 180 employees of the boards in the areas of finance, budgeting, accounting, purchasing, human resources, professional and technical contracting, policy development and payroll. ASU also facilitates the Boards' cooperative policy and planning efforts, and coordinates the Voluntary Health Care Provider Program (which provides malpractice coverage for physicians, physicians assistants, dentists, dental hygienists and nurses serving in a voluntary capacity at a nonprofit organizations). ASU's annual budget is determined by the Executive Directors Forum, and the oversight of ASU is assigned on a rotating basis to one of the health-related boards. ASU is managed through the Executive Directors Forum's Management Committee.

ASU developed the Boards' information technology supervisory structure and previously supervised the Boards' IT staff, until its recent reorganization under MN.it. The Boards continue to coordinate IT projects through its IT workgroup.

Cooperative Activities for the Biennium ending June 30, 2014 (Continued)

Health Professionals Services Program (HPSP)

Each health-related licensing board, including the emergency medical services regulatory board under chapter 144E, shall conduct a health professionals service program under section 214.31 to 214.37 or contract for a diversion program under section 214.28

At present, all Health Licensing Boards, the Emergency Medical Services Regulatory Board, and additional professions regulated by the Department of Health, participate in HPSP.

Criminal Background Check Program (CBC)

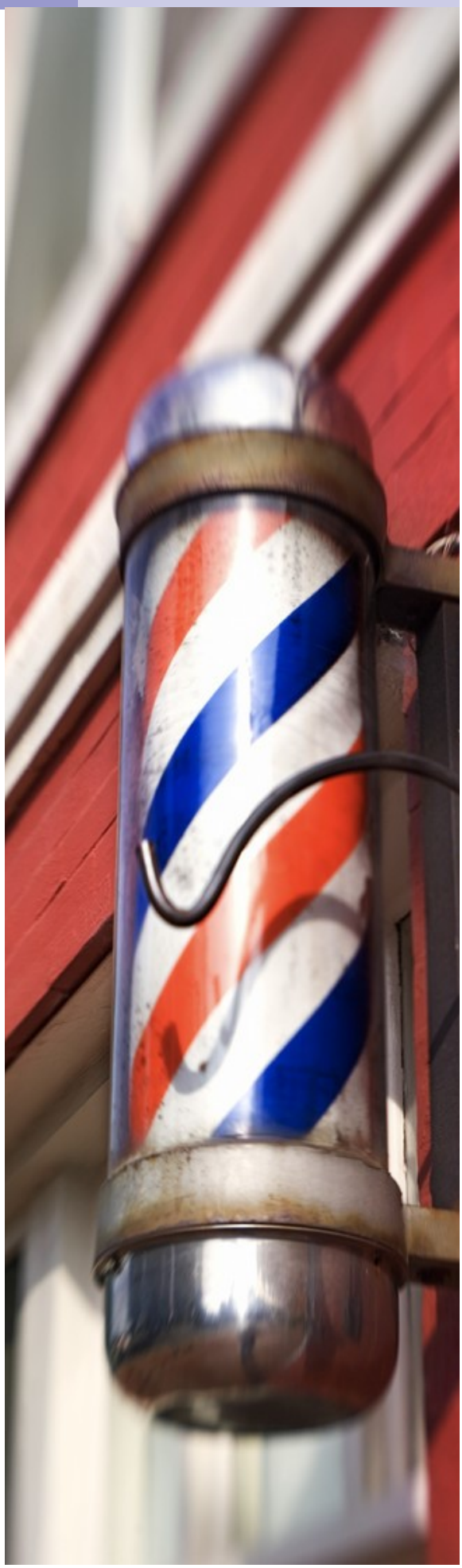
Pursuant to state statute (M.S. § 214.01), the health-related licensing boards are working collaboratively to build a program to check the criminal background of applicants for licensure, that complies with all state and federal requirements. A criminal background check requirement has already been successfully implemented for several of the boards, and planning and implementation are underway for the remaining boards. The Program is managed through a Committee comprised of Executive Directors.

Minnesota Board of Barber Examiners
Report of the Executive Director
July 1, 2014—June 30, 2016

It is the mission of the Minnesota Board of Barber Examiners to provide regulatory services that are responsive and reliable in assisting the State of Minnesota to meet its goal of keeping Minnesotans safe. A staff of three full time employees manage the business of the Board including the Executive Secretary, Inspector, and Customer Service Specialist. Procedures have been put in place to assure that credentialing and registration activities are completed without delay. Questions are answered and information provided to our registrants, the public and other interested parties in a courteous and timely manner, barber shops and barber schools throughout the state are inspected on a regular basis to assure infection control standards are being met.

The Board routinely meets six times per year. Additional meetings are announced and held when necessary. The Board conducts barber examinations four times per year for students completing school from the private schools and two times per year for the correctional schools. The Board's complaint committee meets six times per year for the management of complaints, investigations, and discipline with the support and assistance of the Attorney General's Office.

During the recent legislative session, the Board's proposal to update the requirements to become a barber in Minnesota and eliminated the 1500-hour apprentice requirement thereby reducing the requirements from a total of 3000 hours and two state examination to 1500 hours and one examination was successful. This brings the Minnesota requirements into alignment with the majority of other States which will enhance the mobility of barbers. The 1500-hour barber school curriculum provides training in the use of the chemicals, tools, and implements of barbering, as well as the sanitation, disinfection, and disease control procedures necessary to public protection. The Board's examination process assures that barber school graduates demonstrate the ability and knowledge needed to conduct barbering services while using appropriate infection control procedures. In the coming biennium the Board will continue this



process of updating procedures through a review of its rules with a continuing focus on health and safety, refinement of barber school development and curriculum, and the potential development of continuing education requirements for barbers.

During the report biennium the Board began offering online renewals for barbers and barber shops and work is underway to expand online services. Conversion to a licensing software and database system used by multiple licensing boards is in process and will result in expansion of online services being provided by the Board.

Thora G. Fisko, Ed.S.
Executive Secretary
Minnesota Board of Barber Examiners
651-201-2820
Bbe.board@state.mn.us

Board meetings, activities and approximate total hours spent

During the report period the Minnesota Board of Barber Examiners consisted of four Board members. The Board held 37 Board Meetings, Examinations, and Committee Meetings. Approximately 248.5 total combined hours were spent by all Board members in Board activities:

Number of meetings and activities 7/1/2014—6/30/2016	**Combined hours for all board members**
14 Board Meetings	31.5
10 Barber Examinations	165
13 Committee Meetings	52
37 Total Activities	248.5 Total Combined Hours

Receipts and Disbursements

As a General Fund Board all receipts received by the Board of Barber Examiners are deposited into the General Fund and the board receives an annual allocation for operating costs.

Biennium	**Total Receipts**	**Total Disbursements**
July 1, 2014 – June 30, 2016	$545,763	$568,707*

*In fiscal year 2015 the Board received a special allocation of $10,000 for the addition of temporary military permits the licensing system. The disbursements above include the expenditure of the $10,000 in special allocation and there were no receipts for this work.

Board Members

Name	**City**	**Occupation**	**Date of Appointment**	**Date of Reappointment**	**Current Term Expires**
Jon Stone	Detroit Lakes	Barber	1/4/2010	3/25/2014	1/1/2018
James Robinson	Saint Paul	Barber	2/27/2012	5/4/2016	1/6/2020
Kenneth Kirkpatrick	White Bear Lake	Barber	**	3/11/2013	1/2/2017
Robert “Clarence” Jones	Minneapolis	Public Health Educator	3/21/2011	3/17/2015	1/7/2019

**Kenneth Kirkpatrick served on the Board of Barber Examiners from 1981-2006. He was reappointed to the board on 3/11/2013.

Board staff

Thora Fisko, Ed.S, Executive Secretary
Donna Maki, Customer Service Specialist
Ronald W. Arnold, Law Compliance Officer I

Summary of Board rules proposed or adopted during the period 7/1/2014-6/30/2016
The Board of Barber Examiners did not propose or adopt any rules during the reporting period.

Number of persons having each type of license and registration issued by the board as of June 30, 2016

Registration Type	Total Number of persons registered as of June 30, 2016
Student Permit	115
Apprentice Barber	130
Registered Barber	1840
Barber School Instructor	22
Barber Shops	820
Barber Schools	6
Total Registrations	2933

Examinations administered by the Board between 7/1/2014 and 6/30/2016

Location of Examination	Date of Test	Number of persons taking test	Number of test takers by age	Number of test takers by sex
Moler Barber School, Minneapolis	8/4/2015	15	18-25: 5 26-35: 5 36-45: 4 46-60+: 1	Female: 1 Male: 14
* Written Retake Board Office	9/3/2014	3*		

Examinations administered by the Board between 7/1/2014 and 6/30/2016 (Continued)

Minneapolis Community Technical College Minneapolis	11/3/2014	29	18-25: 11 26-35: 14 36-45: 2 46-60+: 2	Female: 6 Male: 23
* Written Retake Board Office	12/1/2014	3*		
Minneapolis Community Technical College Minneapolis	2/2/2015	27	18-25: 7 26-35: 8 36-45: 10 46-60+: 2	Female: 2 Male: 25
* Written Retake Board Office	2/8/2015	1*		
Moose Lake Correctional Facility	4/27/2015	4	26-35: 1 36-45: 2 46-60+: 1	Female: 0 Male: 4
Moler Barber School, Minneapolis	5/4/2015	23	18-25: 4 26-35: 11 36-45: 7 46-60+: 1	Female: 2 Male: 21
* Written Retake Board Office	6/1/2015	1*		
Moler Barber School, Minneapolis	8/3/2015	24	18-25: 6 26-35: 12 36-45: 6 46-60+:	Female: 3 Male: 21
* Written Retake Board Office	9/14/2015	4*		
Moler Barber School, Minneapolis	11/2/2015	23	18-25: 6 26-35: 7 36-45: 7 46-60+: 3	Female: 3 Male: 20
* Written Retake Board Office	12/7/2015	5*		
Moler Barber School, Minneapolis	2/1/2016	19	18-25: 4 26-35: 7 36-45: 6 46-60+: 2	Female: 1 Male: 18
Moose Lake Correctional Facility	2/8/2016	5	18-25: 4 36-45: 1	Female: 0 Male: 5
Moler Barber School, Minneapolis	5/2/1016	25	18-25: 3 26-35: 8 36-45: 8 46-60+: 6	Female: 1 Male: 24

Examinations administered by the Board between 7/1/2014 and 6/30/2016 (Continued)

Total	16 Examinations Held	194 Individuals Examined *retakes not included	18-25: 55 26-35: 81 36-45: 56 46-60+: 19	Female: 19 Male: 175

*Written retake test takers are individuals who failed only the written portion of the exam and are retaking only that part of the examination.
Of the 194 individuals taking the examinations 164 passed their examinations and were registered and 30 failed and were not registered and were required to complete additional education or supervised hours to become eligible to retake the examination at a later date.

Persons registered by reciprocity and not required to take the examination during the reporting period July 1, 2014 – June 30, 2016

# of Persons	State/ Country of Original License	Age	Sex
1	Arkansas	57	Male
1	Arizona	29	Male
2	California	40 45	Female Male
2	Florida	46-60+: 2	Male
1	Georgia	73	Male
3	Iowa	26-35: 2 46-60+: 1	Female: 1 Male: 2
1	Illinois	40	Male
1	Indiana	33	Male
2	Kansas	53 37	Female Male
1	Louisiana	54	Male
1	Missouri	43	Male
1	North Carolina	21	Male
10	North Dakota	18-25: 3 26-35: 5 46-60+: 2	Female: 1 Male: 9
2	Puerto Ricco	18-25: 1 36-45: 1	Male: 2
1	South Carolina	49	Female
1	Tennessee	44	Male
1	Texas	24	Female
1	Vietnam	28	Male
1	Vermont	36	Male
3	Wisconsin	36-45: 3	Female: 1 Male: 2
Total: 37	20 Jurisdictions	18-25: 6 26-35: 11 36-45: 10 46-60+: 10	Female: 7 Male: 30

Persons applying for registration by reciprocity by jurisdiction either denied or required to meet additional requirements, with reason for denial or requirements, and outcome.

All applicants report current residency in Minnesota

State/ Country of Original License	Reason for Denial/Additional Action Required	Outcome
Bulgaria	Denied: Cosmetology education and registration presented	Referred to Cosmetology Board
Colorado	Denied: Cosmetology education and registration presented	Referred to Cosmetology Board
Ecuador	Approved for examination	Examination passed - registered
Ethiopia	Approved for examination	Failed all parts of examination
Ethiopia	Denied: Insufficient Documentation	Enrolled in barber school
Ethiopia	500 hours of barber school required	Enrolled in barber school
Ethiopia	Denied: Insufficient Documentation	
Ethiopia	Denied: Insufficient Documentation	
Guatemala	Approved for examination	Examination passed – registered
Iraq	Denied: Insufficient Documentation	
Kenya	Application Incomplete	
Kenya	Application Incomplete	
Kenya	Denied: Insufficient Documentation	
Mexico	Approved for examination	Examination Scheduled
Nigeria	Denied: Insufficient Documentation	
Pennsylvania	Denied never licensed- 500 hours of barber school required	
St James of Guayaquil	Approved for examination	Examination passed – registered
Tunisia	Approved for examination	Examination not taken
Wisconsin	Application withdrawn by applicant	

Persons previously licensed or registered by the board whose licenses or registrations were revoked, suspended, or otherwise altered in status during the reporting period July 1, 2017 to June 30, 2016

Number of Registrations	Reason for revocation, suspension or alteration
35	Delinquent Child Support per MN Statute § 518.66
3	Delinquent Tax per MN Statute § 270.72
6	Dishonored Payment per MN Statute § 604.113

Summary of Complaints received by the Board during the reporting period of July 1, 2014 and June 30 2016

Complaints Received by Category	Number	Disposition
Unlicensed Activity with or without sanitation concerns	7	Could not substantiate
	4	Compliance
	7	Not opened- Complainant declined release of information
	4	Stipulation and Orders on file-All Complied (3 civil penalties)
Sanitation Only	6	Could not substantiate
Non-Jurisdictional	4	2 referred to another state agency per 214.10
Total number of complaints	32	

The Board also has authority under MN Statute 154.162 to assess administrative penalties for being found unregistered upon inspections. During the reporting period 48 administrative penalties were assessed for registration violations.

Minnesota Board of Cosmetologist Examiners
Report of the Executive Director
July 1, 2014—June 30, 2016

The Minnesota Board of Cosmetologist Examiners (BCE) has undergone many changes in the recent biennium that positively affect Minnesota's cosmetologists, estheticians, nail technicians, and the people they serve. These changes have all supported our goal of protecting the health and safety of all Minnesotans, which includes cosmetology practitioners, students, and patrons. With the recent biennium's positive changes as a base, the BCE plans to continue our mission of constantly striving to serve and care for our licensees, applicants, and the public by being committed to public protection, superior service, excellence and continuous improvement.

Impactful Changes

In the recent biennium, the BCE was in the midst of many legislative and rule changes. Most influentially, our major rule overhaul (RD 4258) provided the BCE with the opportunity to work with hundreds of licensees, businesses, the public, and subject matter experts to enhance, clarify, and improve cosmetology rules that hadn't been updated in over 30 years. The old rules were vague, inconsistent, and outdated. The new rules reflect current industry best practices and provide a clear "how-to-guide" for licensees and salons regarding infection control. Additionally, these rules eliminated unnecessary barriers for re-entry into the cosmetology workforce, such as refresher course requirements for license reinstatement.

The BCE has also significantly increased outreach events and communication with licensees. From October 2014 to October 2016, the BCE has hosted and participated in at least 20 outreach events which have engaged nearly 1,000 licensees in total. This provides for increased communication, knowledge, and transparency of the Board and of the cosmetology community. From these, licensees have provided overwhelmingly positive feedback.

Meaningful Goals

The BCE is dedicated to public protection while encouraging industry development. In the next biennium, the BCE hopes to further promotion of licensee and public education.

Currently, most education of active licensees is done through required continuing education for license renewal. The current continuing education is related to health, safety, infection control, and laws and rules. In 2017, additional continuing education will be required to promote licensees' professional practice related to cosmetology skills and business-related knowledge.

Report of the Executive Director (Continued)

The salon and school inspection process is also a route for education, as our inspectors' primary mission is to teach licensees best practices related to infection control, to eliminate poor practices, and teach salons to bring themselves into compliance. Currently, inspections occur approximately every other year for salons and once per year for schools, with more frequent inspections for those salons and schools who pose a greater risk to the public. In the next biennium, several additional inspection staff will be hired, allowing inspections and in-salon education to occur more frequently.

Additionally, the BCE aims to increase outreach and communications with the non-licensee public. It's important to not only educate licensees, but to educate cosmetology clients and increase awareness. Many injuries and infections can be prevented by simple knowledge of key items and clients keeping awareness during services.

In summary, the BCE has evolved immensely in the last biennium through becoming more connected with our 39,000 licensees, eliminating barriers to re-entry into the workforce, and incorporating industry best practices related to infection control. In the next biennium, the BCE will continue this mission through goals of increased education and improved health and safety for all Minnesotans.

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Minnesota Board of Cosmetologist Examiners
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(651)201-2744
Gina.Fast@state.mn.us

Board meetings, activities and approximate total hours spent

Number of Board meetings 7/1/2014—6/30/2016	Approximate Number of Hours Spent by All Board Members in Meetings, including committee members and hours spent on other
10	994

Receipts and Disbursements

Biennium	Total Receipts	Total Disbursements
July 1, 2014 – June 30, 2016	$1,857, 345.40	$1,435,251.91

Board Members

Board Member Name	Board Member Residence	Occupation	Date of Appointment	Date of Reappointment
Rhonda Besel	Austin	Cosmetologist Instructor and School Manager	June 24, 2015	Term expires January 7, 2019
Nicki Dixson	Minneapolis	Cosmetologist Instructor	October 15, 2014	Term expires January 1, 2018
Kurt Deile	Anoka	Attorney, Public	December 2008	June 2011;
Mary Finnegan	Baxter	Cosmetologist Instructor	July 1, 2009	October 15, 2014 Term expires January 1, 2018
Jodi Friendshuh	Buffalo	Nail Technician	June 24, 2015	Term expires January 1, 2018
Chelsey Bell	St. Joseph	Esthetician	October 15, 2014	Term expires January 1, 2018
Stephen Adams	Minneapolis	Cosmetologist and Salon Owner	March 5, 2016	Term expires January 6, 2020
Laurie Boggess	Minnetonka	Cosmetologist	July 1, 2009	February 21, 2012 Final Term Ended January 1, 2016
Robert Salmonson		Cosmetologist	July 1, 2009	June 6, 2011 Final Term Ended January 1, 2015

Board Staff

Gina Fast, Executive Secretary
Diane DelaBarre, State Program Administrator Supervisor Senior
Catrina Mairose, State Program Administrator Supervisor Senior
Andrew Reding, State Program Administrator Supervisor
Jenna Bohl, State Program Administrator Supervisor
Lene Kiser, State Program Administrator Supervisor
Alex Herbert, Office and Administrative Specialist Intermediate
Carly Ogletree, Investigator
Frank Weiland, Law Compliance Representative 2
Kim Stitzel, Office and Administrative Specialist Intermediate
Myriah Myers, Office and Administrative Specialist Intermediate
Raeoun Jacobson, Law Compliance Representative 1
Rebecca Gaspard, State Program Administrator Intermediate
Sharon Johnson, Office and Administrative Specialist Intermediate
Tami Thein, Office and Administrative Specialist
Tim Hoeppner, Law Compliance Representative 1

Rules proposed or adopted during July 1, 2014 — June 30 2016

- Major Rules Overhaul Docket (RD 4258), related to infection control, licensing, and compliance of salons, individuals, and schools, was adopted.

- Mobile Salon Rule Docket (RD 4343), related to the licensing, physical requirements, inspections, and compliance of mobile salons, was proposed and is in process.

- Advanced Practice Esthetics Rule Docket (RD 4342), related to licensure and practice requirements for the Advanced Practice Esthetician license, was proposed and is in process.

- Threading Rule Amendment Docket (RD 4263) addressing 2014 legislative changes exempting threading from the practice of cosmetology, was adopted.

Number of persons having each type of license and registration issued by the board as of June 30, 2016

License Type	**Total Number** of persons licensed or registered as of **June 30, 2016** by license / registration type
Cosmetologist Operator	11,704
Esthetician Operator	1,677
Nail Technician Operator	3,098
Cosmetologist Salon Manager	14,302
Esthetician Salon Manager	492
Nail Technician Salon Manager	1,454
Cosmetologist Instructor	346
Esthetician Instructor	19
Nail Technician Instructor	2
Cosmetology School Manager	112
Cosmetology Salon	4,334
Esthiology Salon	334
Nail Salon	593
Cosmetology School	40
Homebound Service Permit	495
Special Event Permit	71
Hair Braiding Registration	80
Total of All Licenses, Permits, and Registrations	39,153

Examination Activity

Examinations administered by the Board between 7/1/2014 and 6/30/2016

Location of Examination	Date of Examination
Edina, MN	Several days every week
Duluth, MN	Several days every week
Lake Elmo, MN	Several days every week
Mankato, MN	Several days every week
Moorhead, MN	Several days every week
Rochester, MN	Several days every week
St. Cloud, MN	Several days every week
Thief River Falls, MN	Several days every week
Woodbury, MN	Several days every week

The Board did not license or deny any person who did not take the required examination. Individuals who did not take a required exam were asked to take the exam and could not become licensed without taking the exam.

Complaint Activity

Number of licenses or registrations revoked, suspended or otherwise altered July 1, 2014 – June 30, 2016	Reason for revocation, suspension or alteration
104	Revocation by MN Department of Revenue
37	License hold due to insufficient payment

Number of written and oral complaints received July 1, 2014 through June 30, 2016 alleging violation of statute or rule which board is empowered to enforce AND which were forwarded to other agencies	262 complaints received; none were required to be enforced by the Board AND were forwarded to other agencies

Category of Complaints	Number of complaints	Disposition
Licensing	105	Civil penalty for substantiated violations
Infection Control	46	Civil penalty and infection control course for substantiated violations
Licensing/Infection Control	63	Civil penalty and infection control course for substantiated violations
Licensing/Infection Control/ Other	24	Civil penalty and infection control course for substantiated violations
Technical/Other	24	Civil penalty and infection control course for substantiated violations

Office of Complementary and Alternative Health Care

Minnesota Department of Health

The mission of the Minnesota Department of Health (MDH) is to protect, maintain, and improve the health of all Minnesotans. The Office of Unlicensed Complementary and Alternative Health Care Practices (OCAP) advances MDH's mission by protecting consumers and prospective consumers of complementary and alternative health care practices (CAP). It accomplishes this by investigating complaints and taking disciplinary actions against practitioners of complementary and alternative health, by providing information to the public and clients about CAP, and providing information to practitioners about their obligations under the law.

Program Structure

The Office of Unlicensed Complementary and Alternative Health Care Practices exists within the Minnesota Department of Health. The Office does not have board membership or an executive director. Instead, it is administered by the Health Occupations Program (HOP) within the Health Regulation Division (HRD). HOP investigators, administrative staff, and management share OCAP responsibilities and balance them with the other occupational programs HOP administers.

Contact Information

Minnesota Department of Health
85 East Seventh Street
Suite 220
P.O. Box 64882
St. Paul, Minnesota 55164-0882
Telephone: 651 201-3731
Email: Health.HOP@state.mn.us
Website: http://www.health.state.mn.us/divs/hpsc/hop/ocap/index.html

Anne Kukowski, JD, MS, Manager

Catherine Lloyd, Supervisor

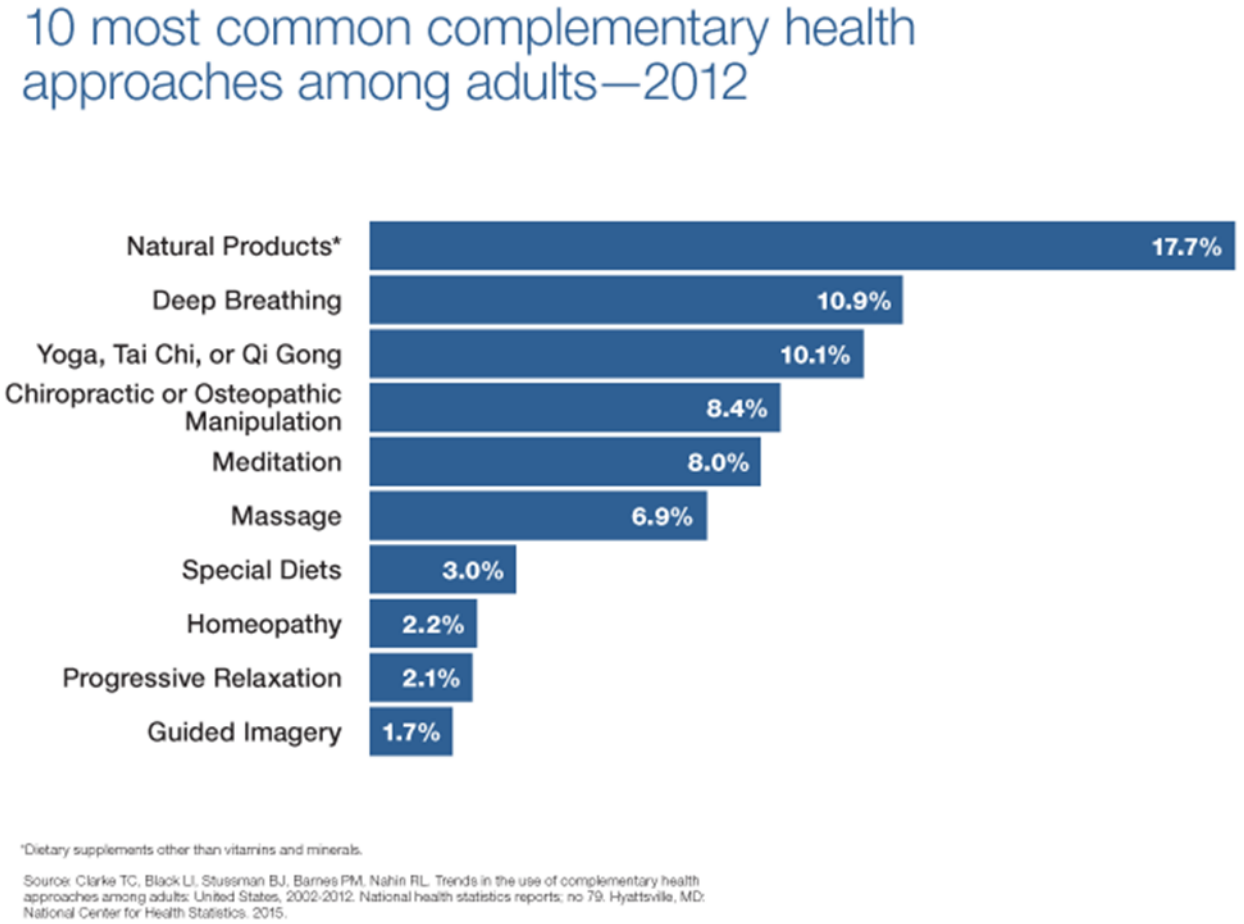
Scope

Complementary and alternative health practices (CAP) encompass a broad domain of healing and methods and treatments. Massage is the practice about which Minnesota's Office of Unlicensed Complementary and Alternative Health Practices (OCAP) receives the most calls. However, CAP also include practices that are less common but fairly well known, such as aroma and homeopathy, as-well- as little known practices such as nondiagnostic iridology. CAP also encompasses folk practices and practices associated with specific cultures, such as ayurveda and traditional oriental practices. Minnesota Statutes, Section 146A.01, subd. 4(a) is a nonexclusive list of healing methods and treatments included within CAP.

The terms "complementary" and "alternative" relate to how the practice is used, rather than to separate types of health practices. As originally construed, "complementary and alternative health practices" referred to practices considered "non-mainstream." As will be later discussed, this is not necessarily accurate any more. "Non-mainstream" practices used together with conventional medicine are "complementary;" those used in place of conventional medicine are "alternative."

Adoption

According to the National Center for Complementary and Integrative Health within the National Institutes of Health (NIH) website, more than 30 percent of adults and 12 percent of children use CAP practices. However, these numbers are the same as those reported in 2007, so it is likely that this information has not been updated. The website also lists, as copied below, the ten most common complementary health approaches among adults.



Application of NIH data to Minnesota is complicated by lack of clarity within the OCAP statute and historical exclusion of certain CAP practices from those that OCAP regulates. Natural products fall within OCAP if used to promote healing, but not if they are simply sold, with or without education about their use. Deep breathing, progressive relaxation, and guided imagery have not historically been considered within OCAP, likely because they are not specifically tied to healing or treatment of a particular malady. Meditation, though listed in the statute, might similarly fail to fall within OCAP's purview. Special diets are not considered complementary or alternative. Finally, in Minnesota, chiropractic and osteopathy are licensed practices. Thus, of the complementary practices listed by NIH as most common in 2012, only three are clearly within OCAP's authority regardless of the delivery. Most often this is tied to inclusion of the terms "healing" and "treatments" the statutory definition of CAP practices:
"'Complementary and alternative health practices' means the broad domain of complementary and alternative healing methods and treatments… "

2014 to 2016 Biennium

Budget

CAP practitioners are not licensed. Funds to operate OCAP are supplied by the General Fund. State Special Revenue Funds available to the Health Protection Bureau of the Minnesota Department of Health may supplement general fund dollars some years. OCAP was unallotted in FY10. Since FY11, its general fund appropriation has been $74,000. Until FY16, these funds supported approximately .75 FTE. Beginning in FY16, increases in certain nonpayroll expenses reduced the funds available to support FTE. In FY16, information technology costs were assessed to programs in the Health Regulation Division. Previously, costs were paid by programs with funds available at the close of the fiscal year. Other changes in nonpayroll expenses are attributable to contested case hearings. Requests for contested case hearings are referred to the attorney general, thus accruing costs for AG services as well as the costs of an administrative hearing. Increases in these nonpayroll expenses in SYF16 reduced the amount available to pay for MDH staff services. The table below shows expenditures for the biennium.

EXPENDITURES:	**SFY15**	**SFY16**
Salaries/Fringe MDH staff - Full Time	73,499.51	60,000.00
Salaries/Fringe staff - Part Time	34.30	114.34
SUBTOTAL PAYROLL:	73,533.81	61,114.34
IT State Agency-Prof/Tech Services	1,190.50	6,841.73
Prof-Tech Services - Outside Vendor (admin hearings)	224.20	3,863.68
Attorney General Cost	1,264.20	0
Other Non-Payroll	1,916.50	2,207.80
SUBTOTAL NONPAYROLL:	4,595.40	12,906.67
TOTAL EXPENDITURES:	78,129.21	73,021.01

2014 to 2016 Biennium

Activities

OCAP's activities include operating as a clearinghouse to provide information to the public and practitioners and investigating and taking action on complaints against CAP practitioners.

Clearinghouse

Inquiries are documented contacts other than complaints. As stated above, massage is the single practice giving rise to the largest number of inquiries. Since CAP practitioners are unlicensed, we don't know the number of practitioners of any particular complementary or alternative modality. However, based on inquiry, complaint, and general knowledge and web research, it seems likely that massage is the most common CAP practice in Minnesota. The US Department of Labor, Bureau of Labor Statistics reported approximately 2,460 massage therapists employed in Minnesota as of 2015, with 2,080 of these in the Minneapolis-St. Paul-Bloomington areas. Based on OCAP's experience, this is likely an underestimate. There are two large professional associations for massage therapists, American Massage Therapy Association (AMTA) and the Associated Bodywork and Massage Professionals (ABMP). AMTA reports 903 members in its Minnesota Chapter, and ABMP reports 2186 members in Minnesota. While AMBP includes bodywork modalities in addition to massage, these numbers bear out that the number of massage therapists in Minnesota considerably exceeds the Bureau of Labor's statistics.

The most recent information available to our office is that Minnesota is one of just six states that does not require licensure or certification. California has voluntary certification. Other than Minnesota, the states with no licensure or certification are Kansas, Oklahoma, Vermont, and Wyoming. The massage therapy community in Minnesota is split as to whether the practice should be regulated beyond the constraints of OCAP. Proponents of greater regulation have presented bills to the legislature numerous times over more than 20 years, the last effort being in 2016. Those who oppose greater regulation maintain that Chapter 146A, which establishes OCAP and to which they refer to as "the Freedom Act," provides adequate oversight.

Most calls received by OCAP about massage are inquiries about what the state requires in order to practice massage. Of these calls, most seem to be practitioners who are legitimately concerned about what they need to do to comply with the law. For these, we review the requirements under OCAP, including with respect to the client bill of rights and prohibited acts; clarify OCAP's authority to impose fines, restrict practice, require training in an area that has been a source of problem, or revoke the right to practice; and advise callers to check with the jurisdiction in which they intend to practice to determine whether there are local requirements. However, several times a year, we receive calls from individuals who appear to be shopping for a venue that does not have training or licensure. From a public health standpoint, these calls raise concerns about whether Minnesota's lack of more rigorous oversight is attracting people with a lack of training or people who have encountered disciplinary problems in other jurisdictions.

OCAP tends to receive a number of calls a year about certain modalities that have been practiced for many years, such as homeopathy and naturopathy. The types of calls received are also influenced by which CAP is "trending." For example, in 2016, we received calls about cryotherapy after an employee at a cryotherapy facility in Colorado died inside a liquid nitrogen chamber which she had apparently entered for a self-administered after-hours treatment. Cryotherapy is the use of extremely low temperatures for health purposes, such as to reduce the pain of sore muscles, or cosmetic purposes. There are a number of nonmedical facilities in Minnesota that offer cryotherapy. Since, Section 146A.01, subd. 4(a) defines CAP as "healing methods and treatment," a cryotherapy facility offering services only for cosmetic purposes would technically be outside OCAP's jurisdiction. Another modality about which inquiries have been received in recent years is ichthyotherapy. In ichthyotherapy, a certain type of fish is used to eat dead skin, usually found on people's feet. Generally, this is considered cosmetic only, and therefore does not fall within OCAP.

The increase in popularity of procedures such as cryotherapy and ichthyotherapy, and facilities such as medical spas that offer these and similar procedures, has created a regulatory gap. OCAP does not regulate procedures undertaken solely for cosmetic reasons. Neither does the Board of Cosmetology regulate many of these procedures.

2014 to 2016 Biennium

Complaints, Investigations, Enforcement

Unlike other Health Licensing Boards, OCAP conducts its own investigations and metes out discipline to practitioners. An OCAP disciplinary action is only referred to the Attorney General's Office (AGO) if a practitioner that OCAP proposes to discipline requests a contested case hearing. The initial question for any investigation is whether OCAP has jurisdiction. This answer to this question is often less obvious for CAP practitioners than for other practitioners. There are several reasons for this. Licensed practitioners often incorporate CAP into their practice. Some situations such as these are more easily resolved since enactment of subdivision 6 of Minnesota Statutes, Section 146A.01 in 2014; others are still subject to spirited discussion between OCAP and other HLBs. Subdivision 6 defines "unlicensed complementary and alternative health practitioner," and specifically addresses whether licensed practitioners can be considered unlicensed CAP practitioners. This legislation notwithstanding, there are still distinctions to be drawn. Did the licensed person who was using CAP use a title or advertise in such a way as to hold themselves out as a licensed practitioner? Who has jurisdiction over a person whose license has been revoked, but is now practicing as an unlicensed complementary and alternative practitioner? Other questions seem more easily resolved, but leave a gap if OCAP cannot assume jurisdiction. For example, does any agency have jurisdiction over unlicensed practice on animals? These jurisdictional issues can take considerable time to resolve.

Practices that span disciplines and/or regulatory agencies also pose difficulties. OCAP is encountering an increasing number of inquiries and complaints about activities taking place in med spas. For each of these, OCAP must determine whether the practice is purely cosmetic or whether it is also undertaken to improve health. Many of these cases involve the use of medical devices. This is a complex area of law governed by the Food and Drug Administration. If it is determined that a procedure is undertaken for reasons of health, OCAP must research, analyze, and apply federal regulations relating to medical devices.

The following table summarizes inquiries, complaints, investigations, and enforcement actions from FY02 onward. Because of issues in converting early data to the current system and changes in the methods used in tracking intakes, data on inquiries from earlier years are neither necessarily reliable nor comparable to current data, and are not included. Note that the number of allegations may exceed the number of investigations, since a single complaint may include more than one allegation.

2014 to 2016 Biennium

	SFY02	SFY03	SFY04	SFY05	SFY06	SFY07	SFY08	SFY09	SFY10	SFY11	SFY12	SFY13	SFY14	SFY15	SFY16
Intakes *(total)*	**NA**	**NA**	**NA**	**NA**	**NA**	**NA**	**NA**	**NA**	**80**	**193**	**158**	**99**	**64**	**64**	**66**
Allegations	16	22	18	14	14	22	15	37	4	18	10	20	17	13	19
Inquiries	NA	NA	NA	NA	NA	NA	NA	NA	76	175	148	79	47	51	47
Investigations Opened *(total)*			**9**	**8**	**9**	**10**	**8**	**25**	**3**	**16**	**7**	**8**	**6**	**13**	**10**
Bill of Rights violation					1					1			1		1
Breach of Confidentiality						1									
Chemical abuse														1	
Client harm, injury, unable to practice safely			4	2	3	1	1	8		4	2				1
Conduct likely to deceive, defraud, or harm the			1		2	2	1			4	1	1			1
Criminal violation				1										1	2
Illegal practice				1								1	2	2	3
Incompetence												1			1
Misrepresentation, fraud, false advertising			1		2	1	1	1		1			3	4	
Punctured skin			1		1	0		2						2	
Request for reinstatement of right to practice										1				1	
Sexual conduct			3	2	1	4	4	9	1	5	3	4	1	4	4
Using Restricted Medical Device						4		1				1			
Boundaries/Impaired Objectivity						1									
Title Violation			1	2	1			1	2		1				
Failure To Comply With Order - Civil Money							1	2							
Performing Spinal Adjustment								1							
Investigations Closed *(total)*			**6**	**18**	**14**	**9**	**13**	**8**	**1**	**32**	**29**	**0**	**2**	**9**	**10**
Closed, in abeyance					1										1
Closed, insufficient evidence to show violation			3	2		1	2	4	1	17	18				1
Closed, no jurisdiction				3	1		1			5	2				2
Combined for enforcement										0				2	
Dismissed with advisements				2		1	5			5	6		1	3	1
Placed in abeyance										0					
Referred for enforcement				1	2	5	2			4	1			2	5
Referred to another agency					3	1	2	2		1	1		1	2	
Letter of Advisement			2	2	3	1									
Unknown			1		2										
Revocation of Right to Practice, Civil Penalty				5	2										
Closed, with Stipulation and Consent Order				2											
Closed, unable to locate other				1			1	2		32	1				
Enforcements Opened ***(total)***			**0**	**1**	**3**	**3**	**2**	**0**	**0**	**4**	**1**	**0**	**0**	**2**	**5**
Prohibited Act:															
Conduct likely to deceive, defraud, or harm the						1	1								
Illegal Practice					1										1
Misrepresentation, fraud, false advertising															2
Puncture of skin														1	
Impaired objectivity						1									
Failure to cooperate with an investigation							1				1				
Sexual conduct/boundaries				1	2	1				4				1	2
Enforcements Closed ***(total)***			**2**	**7**	**10**	**4**	**2**	**1**	**0**	**3**	**2**	**0**	**0**	**1**	**1**
Right to practice revoked														1	1
Civil penalty				3	3	2		1							
Revocation of credential/right to practice				5	4	2	2	1		3					
Unknown			2		4										
Restriction of credential / right to practice				1											
Suspension of credential / right to practice				1							2				
Education/training requirement						2									
Pending investigations *(total)*	**3**	**10**	**18**	**24**	**31**	**33**	**27**	**46**	**46**	**31**	**8**	**16**	**20**	**24**	**26**

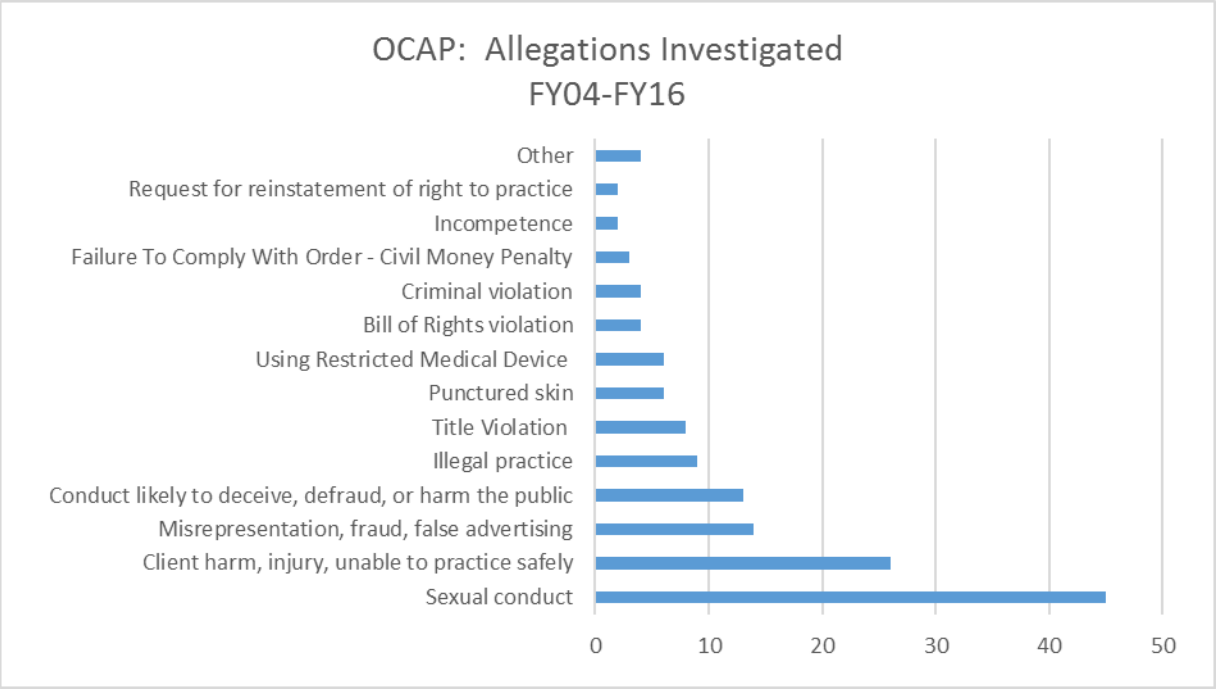
2014 to 2016 Biennium

Complaints, Investigations, Enforcement (Continued)

Of the 132 cases investigated by OCAP since FY04, the most common complaint was sexual conduct, which accounted for 34% (45) of all investigations. This was followed by complaints of harm or injury, accounting for 20% (26) of all investigations. Thus, these two types of complaints accounted for over 50% of all investigations. Nearly all OCAP complaints about sexual conduct arise in the area of massage therapy. While CAP practitioners are not required to register and MDH does not have data on the number of CAP practitioners, based on information available to us, we believe that massage therapists constitute the largest single group of CAP practitioners. Thus, we might expect more complaints to arise out of massage than other practices. However, comparisons to other practices regulated by the Health Occupations Program (HOP) indicate that the rate of complaints about sexual activity are higher for massage therapists than for the other practices we regulate. For example, HOP regulates over 4,800 occupational therapy practitioners. Of the 61 investigations undertaken since the start of FY13, only one related to sexual conduct, and the actual conduct occurred in another state. Even this case was an exception. A brief review of posted disciplinary actions since 2003, revealed no other discipline of an occupational therapy practitioner related to sexual conduct, nor can HOP investigators recall another such case.

Massage also accounts for a number of the complaints about client injury. Generally, injury complaints in the area of massage relate to deep tissue massage. Again comparing massage therapists to occupational therapy practitioners, the other occupation of similar size regulated by HOP, during the period FY13 through FY16, none of HOP's investigations arose from complaints that an occupational therapy practitioner had caused client harm or injury.

The following table shows the allegations involved in the 132 complaints investigated by OCAP since FY04.



Complaints, Investigations, Enforcement (Continued)

Of massage therapists disciplined by HOP, at least thirteen were also charged with a crime or entered a plea. Charges include but are not limited to sexual conduct; indecent exposure; third, fourth and fifth degree criminal sexual conduct; failure to keep a massage client covered; disorderly conduct; felony identity theft; and felony financial transaction card fraud. In addition, HOP learned that some practitioners it was investigating had already been disciplined by other Health Licensing Boards. Reasons for discipline ranged widely, including, for example, providing misleading information and engaging in sexual conduct or violating boundaries. HOP only becomes aware of a criminal record if the practitioner is the subject of a complaint and, even then, the criminal record may not be uncovered in the course of the investigation, especially if that record is from another state. This leads to concerns that there are more individuals practicing massage in Minnesota who have a criminal record.

Minnesota Statutes, Chapter 364 prohibits disqualifying an individual from public employment or licensure because of a prior conviction for an offense not directly related to the occupation or employment in question. However, currently there is no check to determine whether any CAP in Minnesota has a conviction for a crime related to his or her chosen practice.

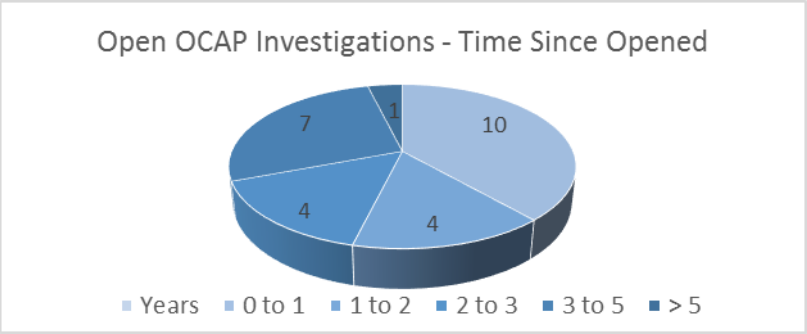
In 2013, the Minnesota legislature required that the Department implement a system for conducting criminal background checks (CBCs) for individuals entering a number of regulated health occupations in Minnesota. Implementation is to begin in 2018. MDH and the HLBs must also, by January 2017, propose a plan to extend CBCs to practitioners licensed prior to the CBC startup. This legislation will afford patients of regulated practitioners a level of protection higher than patients of CAP practitioners. CAP include a variety of healing methods, such as ayurveda, from India, traditional Oriental practices, culturally traditional healing practices and folk practices generally, as well as herbology, likely to attract clientele from diverse cultures. As a result, CAP clientele may include a higher proportion of persons vulnerable as a result of isolation by language or by lack of knowledge about protections and remedies available to them as patients. While regulation of all CAP is not realistic, properly crafted and appropriately circumscribed regulation could serve as a deterrent and mitigate some risk assumed by patients seeking CAP services.

2014 to 2016 Biennium

Open Investigations

Currently, OCAP has 26 open investigations. The average time a case has been open is 2 years; the median is 1.5 years. The two oldest cases are outliers. If these are excluded, the average falls to 1.7 years. The following chart shows the time since investigations were opened.

OCAP has more open investigations than other practice areas overseen by the Health Occupations Program, and cases have been open longer. Several factors contribute to this. When the dedicated OCAP investigator retired in early 2012, HOP investigators assumed responsibility for OCAP complaints and investigations. The OCAP appropriation, which has remained $74,000 for a number of years, cannot support a full-time investigator, and its share of supervisory oversight and administrative support. The recent assessment for MN-IT costs and the increasing number of contested case hearings make further inroads into funds available to conduct investigations. Second, OCAP cases often involve jurisdictional issues that must be settled prior to undertaking the investigation. OCAP cases are often complex, involving federal and even constitutional law. Finally, OCAP practitioners can be difficult to locate. Because they are not required to register, we do not have address or contact information. Many OCAP practitioners are self-employed, making it easier for them to relocate so that even if we do locate them, they may simply change their site of operations. Finally, OCAP practitioners include a sizeable number of persons with ties to other countries. They travel back and forth between the United States and their country of origin so that they are often out-of-the country and unavailable. All these factors pose challenges to our investigative staff and extend the length of time required to close cases.



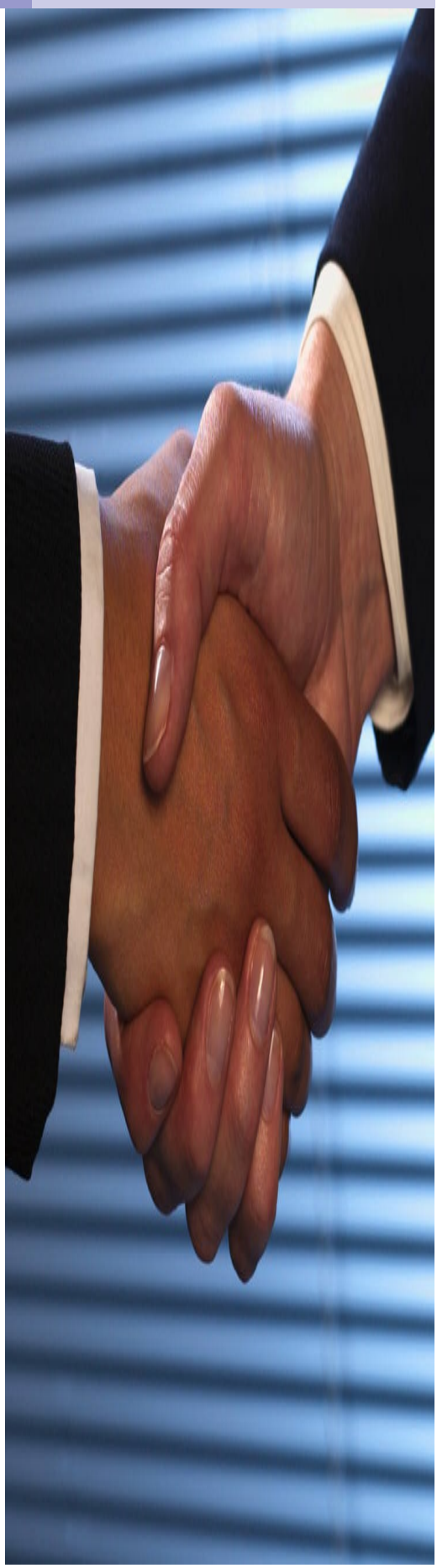
References

National Center for Complementary and Integrative Health, National Institutes of Health, U.S. Department of Health and Human Services. https://nccih.nih.gov/health/integrative-health#term. Viewed September 19, 2016.
Occupational Employment Statistics Program. Bureau of Labor Statistics, U.S. Department of Labor. http://www.bls.gov/oes/current/oes319011.htm#st. Viewed September 19, 2016
Associated Bodywork and Massage Professionals. Massage State Regulation Guide. https://www.abmp.com/practitioners/state-requirements.

Minnesota Board of Behavioral Health and Therapy
Report of the Executive Director
July 1, 2014 – June 30, 2016

The Board of Behavioral Health and Therapy exists to regulate the practices of alcohol and drug counseling and professional counseling/professional clinical counseling in the State of Minnesota. Regulation of these professions is necessary to protect the health, safety and welfare of the public when they receive mental health and substance use disorders counseling services. The Board has 13 members appointed by the Governor: 5 LADCs, 5 LPC/LPCCs, and 3 public members. The full Board convenes 4 times per year and conducts special board meetings when required. The Board's Complaint Resolution Committee meets monthly and other Board Committees, including the Legislative Committee, Policy and Rules Committee, Personnel Committee, and Application and Licensure Committee, meet as needed. Board regulatory and outreach activities include the following:

- Setting educational, supervision, and examination requirements for initial licensure for licensed professional counselors (LPCs), licensed professional clinical counselors (LPCCs) and licensed alcohol and drug counselors (LADCs)
- Issuing LADC licenses and permits, LPC licenses, and LPCC licenses to qualified individuals
- Setting requirements for license or permit renewals and administering the renewal process
- Setting standards of ethical practice in Board statutes and rules
- Responding to inquiries, complaints and reports regarding applicants and licensees
- Investigating complaints of alleged violations of statutes and rules, holding educational and disciplinary conferences with licensees and applicants, taking disciplinary or corrective action when appropriate against practitioners who fail to meet minimum standards of practice, and reporting public actions to national databanks
- Maintaining a website that provides information to the public about complaints and discipline, including a list of disciplinary and corrective actions taken by the Board
- Offering online services from the Board's website, including license verification and links to the full text of public disciplinary orders the Board has adopted against licensed professionals
- Reviewing and approving continuing education activities



Minnesota Board of Behavioral Health and Therapy (Continued)

- Providing information about licensure requirements and standards of practice to applicants, licensees, and other interested parties. Board members and staff members gave 36 licensure presentations to both undergraduate and graduate students and professional associations in the biennium ending June 30, 2016.
- Legislative Activities: created expedited and temporary licensing for former and current members of the military in 2015 session (Minnesota Statutes section 148F.025 (LADCs) and 148B.53 (LPCs/ LPCCs)); submitted "Study of Tiered Licensure for Minnesota Licensed Alcohol and Drug Counselors" to the Legislature on December 15, 2015. Upcoming Issues: implement Criminal Background Check requirements in Minnesota Statutes section 214.075 for all new license applicants by January 1, 2018; explore expanding reciprocity licensure for LADCs, LPCs and LPCCs from other states who have been licensed for more than 5 years and want to be licensed in Minnesota; maintain communication with proponents of licensure for Behavior Analysts.

The Board is staffed with 5 full time equivalent employees: Executive Director, 2 licensing coordinators, one of which also serves as office manager and complaint and compliance coordinator, and 2 administrative support staff members. Because of the small staff, the Board relies heavily on the online services and detailed information on its website to assist applicants, licensees, and the public.

The staffing level is still the same as it was in 2008, but the number of regulated individuals has increased from 2604 (as of June 30, 2008) to 4814 (as of June 30, 2016). Similarly the number of complaints received and disciplinary actions taken have increased: 178 complaints received and 4 disciplinary actions taken at the biennium ending June 30, 2008; 255 complaints received and 27 disciplinary actions taken at the biennium ending June 30, 2016. It is critical for the Board to receive a base budget increase in spending authority in the next biennium (FY 18 and ongoing) to allow the Board to have an adequate number of staff members to regulate the LADC and LPC/LPCC professions and to serve those licensees who pay the fees to fund the Board.

Kari Rechtzigel
Executive Director
Board of Behavioral Health and Therapy
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Board Members Serving During the Period 7/1/2014—6/30/2016

Name	Location	Appointment Status	Appt Date	Reappointment	Term Expires
Barbara Carlson, MA, LADC, LPCC	New Ulm, MN	LADC Professional Member	6/28/2006	6/29/2014	1/1/2018
Marlae Cox-Kolek, MS, LADC, LPCC	Mankato, MN	LADC Professional Member	3/16/2009	6/24/2015	1/7/2019
Freddie Davis -English	Plymouth, MN	Public Member	12/10/2003	6/22/2013	1/2/2017
Douglas Frisk	New Brighton, MN	Public Member	11/21/2003	5/14/2012	6/29/2016
Judi Gordon, LADC	St Paul, MN	LADC Professional Member	6/14/2004	6/22/2013	1/2/2017
Yvonne Hundshamer	St Paul, MN	Public Member	6/22/2010	6/29/2014	1/1/2018
Sherman Lightfoot, LADC	St Paul, MN	LADC Professional Member	6/29/2016 (replacing Duane Reynolds)		1/6/2020
Carrie Lindberg	Minneapolis, MN	Public Member	6/29/2016 (replacing Douglas Frisk)		1/6/2020
Rebecca Lund, MA, LPCC	Maplewood, MN	LPCC Professional Member	10/4/2014	6/24/2015	1/7/2019
Kristen Piper, MHR, LPCC	St Louis Park, MN	LPCC Professional Member	11/21/2003	6/29/2014	1/1/2018
Duane Reynolds, LADC	New Hope, MN	LADC Professional Member	11/21/2003	5/14/2012	Deceased 5/3/2015
Walter Roberts, Jr., EdD, LPCC	North Mankato, MN	LPCC Professional Member	11/21/2003	6/29/2016	1/6/2020
Amy Robinson, MS, LPCC	Crystal, MN	LPCC Professional Member	6/24/2015 (replacing Nona Wilson)		1/2/2017
Robert Schmillen, LADC	Granite Falls, MN	LADC Professional Member	3/16/2009	6/24/2015	1/7/2019
Narjorie (DeDe) Van Slyke, PsyD, LPCC	St Paul, MN	LPCC Professional Member	6/30/2011 11	6/24/2015	1/7/2019
Nona Wilson, PhD, LPCC	St Cloud, MN	LPCC Professional Member	1/31/2006	6/22/2013	Resigned 2014

The mission of the Board of Behavioral Health and Therapy is to protect the public through effective licensure and enforcement of the statutes and rules governing its licensees to ensure a standard of competent and ethical practice.

Board staff

Kari Rechtzigel, Executive Director (Unclassified/Manager's Plan)
Samantha Strehlo, LADC Licensing Coordinator/Office Manager
(State Program Administrator)
Patricia LaBrocca, LPC/LPCC Licensing Coordinator (State Program
Administrator Intermediate)
Julie Newkirk, LADC Communications Coordinator
(Office and Administrative Specialist)
Gail Schiff, LPC/LPCC Communications Coordinator
(Office and Administrative Specialist)

Minnesota Board of Behavioral Health and Therapy
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Website: http://mn.gov/boards/behavioral-health/

Licensure Activity

Total Number of persons licensed or registered as of June 30, 2016: 4,814

Number and Type of credentials issued or renewed

License Type	**Total Number** of persons licensed or registered as of **June 30, 2016** by license type	**Total Number** of persons licensed or registered as of **June 30, 2014** by license type	**Total Number** of persons licensed or registered as of **June 30, 2012** by license type	**Total Number** of persons licensed or registered as of **June 30, 2010** by license type	**Total Number** of persons licensed or registered as of **June 30, 2008** by license type
Licensed Alcohol and Drug Counselor (LADC)	2990	2647	2335	2142	1757
Temporary Permit (ADC Temp)	184	185	130	173	296
Licensed Professional Counselor (LPC)	463	480	437	557	539
Licensed Professional Clinical Counselor (LPCC)	1177	755	481	170	12
TOTAL OF ALL LICENSE TYPES	**4814**	**4067**	**3383**	**3042**	**2604**

Type of License / Credential	Number of Licenses Issued or **Renewed July 1, 2014** through ending June **30, 2016** by license type		Number of Credentials Renewed Online (# and per cent) during biennium ending **June 30, 2016***
	New MN License	Renewed License	*Not Available. Database online renewal report not functioning at the time this biennial report was prepared.
Licensed Alcohol and Drug Counselor (LADC)	644	2460	
Temporary Permit (ADC Temp)	198	213	
Licensed Professional Counselor (LPC)	349	768	
Licensed Professional Clinical Counselor (LPCC)	458	1766	
TOTAL	1649	**5207**	***%** Data not available.

Licensure Activity (Continued)

Number and Type of credentials issued or renewed

Type of License / Credential (list all)	Number of Licenses Issued or **Renewed July 1, 2012** through ending **June 30, 2014** by license type		Number of Credentials Renewed Online (# and per cent) during biennium ending **June 30, 2014***
	New MN License	Renewed License	*See explanation above.
Licensed Alcohol and Drug Counselor (LADC)	533	2171	
Temporary Permit (ADC Temp)	261	177	
Licensed Professional Counselor (LPC)	304	770	
Licensed Professional Clinical Counselor (LPCC)	302	1074	
TOTAL	**1400**	**4192**	*See explanation above.

Type of License / Credential	Number of Licenses Issued or Renewed **July 1, 2010** through ending **June 30, 2012** by license type		Number of Credentials Renewed Online (# and per cent) during biennium ending **June 30, 2012***
	New MN License	Renewed License	*See explanation above.
Licensed Alcohol and Drug Counselor (LADC)	489	2588	
Temporary Permit (ADC Temp)	214	149	
Licensed Professional Counselor (LPC)	286	850	
Licensed Professional Clinical Counselor (LPCC)	322	527	
TOTAL	**1311**	**4114**	*See explanation above.

Licensure Activity (Continued)

Number and Type of credentials issued or renewed (Continued)

Type of License / Credential (list all)	Number of Licenses Issued or **Renewed July 1, 2008** through **ending June 30, 2010** by license type		Number of Credentials Renewed Online (# and per cent) during biennium ending June **30, 2010***
	New MN License	Renewed License	*See explanation above.
Licensed Alcohol and Drug Counselor (LADC)	504	2500	
Temporary Permit (ADC Temp)	257	532	
Licensed Professional Counselor (LPC)	229	970	
Licensed Professional Clinical Counselor (LPCC)	57	63	
TOTAL	**1047**	**4065**	*See explanation above.

Complaint Activity

Number of complaints received

Total Number of Complaints Received July 1, 2014 through June 30, 2016	Total Number of Complaints Closed July 1, 2014 through June 30, 2016
255	215

Total Number of Complaints Received July 1, 2012 through June 30, 2014	Total Number of Complaints Closed July 1, 2012 through June 30, 2014
210	248

Total Number of Complaints Received July 1, 2010 through June 30, 2012	Total Number of Complaints Closed July 1, 2010 through June 30, 2012
191	212

Total Number of Complaints Received July 1, 2008 through June 30, 2010	Total Number of Complaints Closed July 1, 2008 through June 30, 2010
165	207

Complaint Activity (Continued)

Number of and age of complaints open at the end of the period

Number of Complaints Open as of June 30, 2016	Age of Complaints Open as of June 30, 2016
101	< one year: 75
	> One year: 26

Complaints may be open for more than one year for a number of reasons, including the complexity of the issues to resolve, the necessity for extensive investigation by the Attorney General's Office, and contested case proceedings at the Office of Administrative Hearings.

Types of Complaints received

Type of complaints received from July 1, 2014 – June 30, 2016	Number of complaints alleging this basis from July 1, 2014 – June 30, 2016*
Misrepresentation of Credential	7
Practice without a License	5
Practice After License Expired	5
Mental/Physical Illness	7
Chemical Dependency	41
Discipline in Other Jurisdiction	7
Violated Board Order	1
Non-compliance with Board Order	2
Recordkeeping	15
Fraudulent Billing	2
Sexual Conduct	24
Boundaries Issues	27
Criminal Conviction	11
Failure to Report Charges/Convictions	1
Unprofessional Conduct	112
Breach of Confidentiality	24
Conduct Likely to Deceive, Defraud, or Harm	1
Disregard for Health, Welfare, and Safety	17
Competence	11
Aiding/Abetting Unlicensed Practice	4

*Some complaints allege more than one basis

Receipts and Disbursements

Biennium	Total Receipts	Total Disbursements
July 1, 2014 – June 30, 2016	***$1,600,291.48****	***$1,349,570.89***
July 1, 2012 – June 30, 2014	***$1,760,987.96****	***$1,312,419.76***
July 1, 2010 – June 30, 2012	***$1,518,595.17****	***$1,188,689.72***
July 1, 2008 – June 30, 2010	***$1,417,646.62****	***$1,267,301.40***
July 1, 2006 – June 30, 2008	***$1,368,450.47****	***$1,229,180.97***

**Does not include 10% e-licensing surcharge collected from licensees but paid to MN.IT or fees for credit card trans actions collected in part from licensees, but paid to US Bank..*

Fees by Type

Type of fee	Fee
LADC Fees	
LADC Application for Licensure Fee	$295
LADC Biennial Renewal Fee (Active)	$295
LADC Biennial Renewal Fee (Inactive)	$150
LADC Biennial Renewal Active Late Fee	$74
LADC Biennial Renewal Inactive Late Fee	$37
Temporary Permit Application Fee	$100
Temporary Permit Annual Renewal Fee	$150
Temporary Permit Annual Renewal Late Fee	$37
License Verification Fee	$25
CE Sponsor Application Fee	$60
Board Order Copy Fee	$10
Duplicate Certificate/License Fee	$25
Supervisor Application Fee	$30
LPC/LPCC Fees	
LPC and LPCC Application for Licensure Fee	$150
LPC and LPCC Initial License Fee	$250
Temporary License for Members of the Military	$250
LPC and LPCC Annual Renewal Fee (Active)	$250
LPC and LPCC Annual Renewal Fee (Inactive)	$125
LPC/LPCC Renewal Late Fee	$100 per month or portion thereof
Board Order Copy Fee	$10
License Verification Fee	$25
Duplicate Certificate/License Fee	$25
CE Sponsor Application Fee	$60
Supervisor Application Fee	$30
Professional Firm Renewal Fee	$25
Initial Registration Fee	$50
Annual Registration Renewal Fee	$25

Minnesota Board of Chiropractic Examiners
Report of the Executive Director
July 1, 2014 – June 30, 2016

The Minnesota Board of Chiropractic Examiners (MBCE) was established by legislative act on 3-13-1919. Minnesota Statutes 148.01-148.108 and Minnesota Rules 2500 give the board authority to regulate, license by examination and renewal, and investigate complaints. The mission of the MBCE is to protect the public through effective licensure and enforcement of the statutes and rules governing the practice of chiropractic; to ensure a standard of competent and ethical practice in the profession.

Licensing/Credentialing Services: The purpose of regulation through licensing is to set and enforce standards of competence and ethical practice, and to ensure that persons licensed as doctors of chiropractic meet educational, examination, and continuing education standards. Staff process applications, verify compliance with statutory requirements, provide assistance and information to a variety of customers, and work in collaboration with other agencies at the state, federal, and national levels.

To meet these functions, the MBCE operates under five key service strategies:

- maintain an integrated database of licensee information, registrations, discipline, and complaints
- publish information on the web, including licensure information, disciplinary orders, and rulemaking efforts
- conduct regular board meetings where citizens have input into the review of operations and rulemaking efforts
- respond to public requests for information on chiropractors, continuing education sponsors, and licensee's status
- manage funds soundly

The Board accomplishes its core public safety and regulatory mission of doctors of chiropractic by:

- Administering minimum educational and examination requirements for initial licensure as a doctor of chiropractic and administering requirements and processes for renewal of licensure
- Enforcing standards of ethical practice; responding to inquiries, complaints and or reports regarding applicants, or licensees
- Investigating complaints of alleged violations of statutes, holding educational and disciplinary conferences, and taking legal action when appropriate against licensees who fail to meet minimum standards of practice or who may otherwise constitute a harm to the public as a result of improper/unethical practice

Report of the Executive Director (Continued)

- Approving continuing education providers
- Providing information about licensure and standards of practice, through professional education outreach efforts, the Board's website, online license verification services, and telephone, mail or email inquiries

The Board provides core public safety services through the regulatory oversight of doctors of chiropractic, as noted in the strategies listed above, to ensure both high standards of chiropractic practice and excellent customer service. Services are provided to the general public, consumers of chiropractic services, applicants and licensees, students and faculty in chiropractic academic programs, other state and local agencies, state and national professional chiropractic associations and finally the national testing organization as well as the Federation of Chiropractic Licensing Boards.

Discipline/Complaint Resolution Services: Staff, Board Members, and the Office of the Attorney General work collaboratively to review, investigate, and take action, as appropriate, in alleged complaint cases against licensed doctors of chiropractic. When a licensee is determined to have engaged in conduct which is a violation of the statutes or rules the Board is empowered to enforce, an appearance before Board Members may occur. Licensee's may enter into an agreement for corrective action with the Board's complaint panel, or may become subject to disciplinary action, with such final action determined by the full Board. Either of these two remedies is public once completed. In addition, staff provide informational services to a variety of customers regarding the Board's statutory requirements and standards of practice, including how to file a complaint and the complaint resolution process. The Board also works with the Health Professionals Services Program (HPSP), the state's diversion program for regulated professionals who are impaired, as an additional method to ensure public protection.

Online Services: The board maintains a very robust web site which includes: Information on Board structure, meetings, and policies; licensing information, applications and renewal forms for nearly all licenses/registrations; information on continuing education programs and sponsors; access to specific statutes and rules directly impacting the profession; information on current emerging issues impacting the profession; information on access to the Health Professional Services Program, and links to many other related sites, and online license application and renewal. The Chiropractic Board was the first among the Health Related Licensing Boards to provide online license renewal capability. The board renewed well in excess of 4000 licenses and registrations last fiscal year, and generally appreciates approximately a 90%+ online application renewal rate.

Key Activity Goals & Measures

The MBCE works to meet the MN Milestone of access to government information 24x7x365 through its self-service website. The MBCE works to protect the public from access to impaired practitioners by prompt investigation of complaints and resolution of disciplinary matters through educational conferences, corrective action agreements, board orders and/or contested case proceedings as deemed required based on the severity of the infractions reported. The MBCE collaborates with other licensing boards and state agencies to create an efficient state government.

Larry A. Spicer, DC
Executive Director
Board of Chiropractic Examiners
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larry.spicer@state.mn.us

Board Members Serving During the Period 7/1/2014—6/30/2016

Name	Location	Appointment Status	Appt Date	Reappointment	Term Expires
Robert Daschner, DC	Waseca, MN	Professional Member and president	4/22/2008	6/30/2012 and 6/27/2016	1/6/2020
Teresa Marshall, DC	Mankato, MN	Professional Member and Administrative Officer (has also served as President and Vice President)	1/11/2002	3/31/2006 and 1/19/2010 and 4/20/2014	1/1/2018
LeRoy Otto, DC	Lake City, MN	Professional Member and Vice President (has also served as President and Administrative Officer)	Appointment 1: 1/15/1995 Appointment 2: 4/2/2013	Appointment 1: 7/5/1999 and 7/8/2003	Appointment 1: 5/21/2007 Appointment 2: 1/2/2017
Ridge Pidde, DC	Bloomington, MN	Professional Member	9/13/2015	6/27/2016	1/6/2020
Nestor Riano	Roseville, MN	Public Member	6/20/2015		1/7/2019
Scott Salita, DC	Minnetonka, MN	Professional Member	6/20/2015		1/7/2019
Greg Steele	Becker, MN	Public Member	4/2/2013		1/2/2017

Also served during this time period

Name	Location	Appointment Status	Appt Date	Reappointment	Term Expired
Matthew Anderson, DC	Bloomington, MN	Professional Member (also served as Administrative Officer and Vice president)	5/21/2007	2/14/2011	6/22/2015
Howard Fidler, DC	Minnetonka, MN	Professional Member	4/28/200	4/22/2008	2/23/2015
Ralph Stouffer, Ed.D.	St Paul, MN	Public Member (also served as President, Vice President and Administrative Officer)	3/31/2006	5/21/2007 2/16/2011	6/22/2015

The mission of the Minnesota Board of Chiropractic Examiners (MBCE) is to protect the public through effective licensure and enforcement of the statutes and rules governing the practice of chiropractic to ensure a standard of competent and ethical practice in the profession.

Board staff

Larry Spicer, DC, Executive Director
Micki King, Health Program Representative
Lori Blanski, Office Administrative Specialist
Anne Braam, Office Administrative Specialist
John Burbey, Office Administrative Specialist
Suzanne Stiff, Office Specialist (temporary)
Mary Roguski, Office Specialist (temporary)

Minnesota Board of Chiropractic Examiners
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Website: http://mn.gov/boards/chiropractic-examiners/

Licensure Activity

Total Number of persons licensed or registered as of June 30, 2016: 4,870

Number and Type of credentials issued or renewed

License Type	Total Number of persons licensed or registered as of June 30, 2016 by license type	Total Number of persons licensed or registered as of June 30, 2014 by license type	Total Number of persons licensed or registered as of June 30, 2012 by license type	Total Number of persons licensed or registered as of June 30, 2010 by license type	Total Number of persons licensed or registered as of June 30, 2008 by license type
Doctor of Chiropractic License	3182	3069	2956	2816	2719
Acupuncture Registration	649	668	666	631	608
Animal Chiropractic Registration	39	33	27	20	0
Independent Examiner Registration	48	51	58	51	53
Professional Firm Registration	936	901	731	665	577
Graduate Preceptor Registration	16	15	12	34	36
TOTAL OF ALL LICENSE TYPES	4,870	4,737	4,450	4,217	3,993

Licensure Activity (Continued)

Number and Type of Credentials Issued or Renewed July 1, 2014 – June 30, 2016

Type of License / Credential	Number of Licenses Issued or **Renewed July 1, 2014** through ending June **30, 2016** by license type		Number of Credentials Renewed Online (# and per cent) during biennium ending **June 30, 2016***	
	New MN License	Renewed License		
Doctor of Chiropractic License	6193	287	5818	94%
Acupuncture Registration	1315	38	1243	95%
Animal Chiropractic Registration	72	8	70	97%
Independent Examiner Registration	92	11	88	96%
Professional Firm Registration	1814	143	1712	94%
Graduate Preceptor Registration	N/A	41	N/A	
TOTAL OF ALL LICENSE TYPES	9486	528	8931	94%

Number and Type of Credentials Issued or Renewed July 1, 2012 – June 30, 2014

Type of License / Credential	Number of Licenses Issued or Renewed July 1, 2012 through ending June 30, 2014 by license type		Number of Credentials Renewed Online (# and per cent) during biennium ending June 30, 2014	
	New MN License	Renewed License		
Doctor of Chiropractic License	259	5887	5254	89%
Acupuncture Registration	33	1316	1194	91%
Animal Chiropractic Registration	10	52	N/A	
Independent Examiner Registration	9	103	90	87%
Professional Firm Registration	237	1512	1387	92%
Graduate Preceptor Registration	26	N/A	N/A	
TOTAL OF ALL LICENSE TYPES	574	8870	7925	89%

Licensure Activity (Continued)

Number and Type of Credentials Issued or Renewed July 1, 2010 – June 30, 2012

Type of License / Credential	Number of Licenses Issued or Renewed **July 1, 2010** through ending **June 30, 2012** by license type		Number of Credentials Renewed Online (# and per cent) during biennium ending **June 30, 2012***	
	New MN License	Renewed License		
Doctor of Chiropractic License	280	5942	5143	87%
Acupuncture Registration	48	1310	1195	91%
Animal Chiropractic Registration	4	48	N/A	
Independent Examiner Registration	13	109	96	88%
Professional Firm Registration	130	1343	1243	93%
Graduate Preceptor Registration	24	N/A	N/A	
TOTAL OF ALL LICENSE TYPES	499	8752	7677	88%

Number and Type of Credentials Issued or Renewed July 1, 2008 – June 30, 2010

Type of License / Credential (list all)	Number of Licenses Issued or Renewed July 1, 2008 through ending June 30, 2010 by license type		Number of Credentials Renewed Online (# and per cent) during biennium ending June 30, 2010*	
	New MN License	Renewed License		
Doctor of Chiropractic License	*273*	*5380*	*4749*	*88%*
Acupuncture Registration	*45*	*1244*	*1073*	*86%*
Animal Chiropractic Registration	*0*	*32*	*N/A*	
Independent Examiner Registration	*10*	*97*	*80*	*82%*
Professional Firm Registration	*136*	*1203*	*1067*	*89%*
Graduate Preceptor Registration	*34*	*N/A*	*N/A*	
TOTAL OF ALL LICENSE TYPES	*498*	*7956*	*6969*	*88%*

Complaint Activity

Number of complaints received

Total Number of Complaints Received July 1, 2014 through June 30, 2016	Total Number of Complaints Closed July 1, 2014 through June 30, 2016
289	**309**

Total Number of Complaints Received July 1, 2012 through June 30, 2014	Total Number of Complaints Closed July 1, 2012 through June 30, 2014
402	**362**

Total Number of Complaints Received July 1, 2010 through June 30, 2012	Total Number of Complaints Closed July 1, 2010 through June 30, 2012
310	**310**

Total Number of Complaints Received July 1, 2008 through June 30, 2010	Total Number of Complaints Closed July 1, 2008 through June 30, 2010
418	**421**

Complaint Activity (Continued)

Number of and age of complaints open at the end of the period

Number of Complaints Open as of June 30, 2016	Age of Complaints Open as of June 30, 2016
313	149 < 90 days 55 = 90-180 days 28 = 181-365 days 77 > 365 days
	> One year: 26

In regard to complaints more than one year old:

In one case, multiple insurance agencies filed suit against 46 chiropractors. The Board was advised by the Attorney General's Office to hold its determination for the court ruling. After the lawsuit failed, the Board began to actively look at each of the 46 cases, reviewing all the documents and patient records to deter mine if a violation of the Chiropractic Practice Act occurred. Approximately eight were found to be in violation, most were dismissed with insufficient evidence to prove a violation, while there are still three pending.

The Board of Chiropractic had several cases going to contested case hearing, some of which are still peni ing at this time.

In several cases, the allegations and number of patients involved required an extensive review of multiple patient files. 254 patient files in one case and 157 patient files in another as example. These two are both open currently and one is in contested case proceedings. The other is likely to be contested also.

The Board has had several cases referred to the Attorney Generals' Office for investigation which, due to the complexity of the allegations and multiple complainants took many months to complete and many are still under investigation.

Complaints may be open for more than one year for a number of reasons, including the complexity of the issues to resolve, the necessity for extensive investigation by the Attorney General's Office, and contested case proceedings at the Office of Administrative Hearings

Complaint Activity (Continued)

Types of Complaints received

Type of complaints received from July 1, 2014 – June 30, 2016	Number of complaints alleging this basis from July 1, 2014 – June 30, 2016*
Actions by another jurisdiction, including state, court, and federal	24
Acupuncture violations	5
Advertising	42
Chemical dependency	6
Animal chiro	7
Application violation/disclosure	86
Billing	30
Violation of a Board Order	14
Criminal conviction (i.e. DUI)	54
Exploiting patient for financial gain	21
Fee splitting	17
Independent Examiner registration	2
Impairment, mental/physical/chemical	30
Malpractice	13
Miscellaneous	54
Petition, reinstate/terminate action	14
Unlicensed practice	13
Professional firm violation; 319B	12
Recordkeeping, false, inadequate	34
Unprofessional conduct (UC)	(71) breakout below
UC unethical, deceptive	18
UC gross ignorance/incompetence	15
UC sexual misconduct	9
UC unnecessary services	5
UC unconscionable fees	11
UC dishonest fee collection	5
UC fraud	8

*Some complaints allege more than one basis

Receipts, Disbursements, and Major Fees

Biennium	Total Receipts	Total Disbursements
July 1, 2014 – June 30, 2016	***$1,600,291.48****	***$1,349,570.89***
July 1, 2012 – June 30, 2014	***$1,760,987.96****	***$1,312,419.76***
July 1, 2010 – June 30, 2012	***$1,518,595.17****	***$1,188,689.72***
July 1, 2008 – June 30, 2010	***$1,417,646.62****	***$1,267,301.40***
July 1, 2006 – June 30, 2008	***$1,368,450.47****	***$1,229,180.97***

**Does not include 10% e-licensing surcharge collected from licensees but paid to MN.IT or fees for credit card transactions collected in part from licensees, but paid to US Bank.*

Fees by Type

Type of fee	Fee
Acupuncture Initial Application	$100.00
Acupuncture Inactive Renewal	$25.00
Acupuncture Reinstatement	$100.00
Acupuncture Renewal	$50.00
Animal Chiropractic Initial Application	$125.00
Animal Chiropractic Active Renewal	$75.00
Animal Chiropractic Inactive Renewal	$25.00
Board Orders (copies of)	$0.25 per page
Continuing Education Audit Penalty	$100 first offense, $200 second offense, $900 third and more offenses
Continuing Education Seminar Fee	$100.00
Continuing Education Annual Sponsorship	$500.00
Copies of Statutes and Rules "law books"	$10.00
Doctor of Chiropractic Initial Application	$250.00
Doctor of Chiropractic Active Renewal	$200.00
Doctor of Chiropractic Inactive Renewal	$150.00
Disciplinary Fee (Civil Penalty)	Up to $10,000.00
Duplicate License	$10.00
Exam Regrade	$30.00
Graduate Preceptor Initial Application	$100.00
Independent Examiner Initial Application	$150.00
Independent Examiner Renewal	$100.00
Labels (partial or complete)	$15 or $150
License Reinstatement	$100
Lists (partial or complete)	$10 or $100
NSF Service Charge	$25
Prior Year Late Fee – DC	$150 / month
Prior Year Late Fee – Professional Firm	$5 / month
Professional Firm Initial Application	$100
Professional Firm Renewal	$25
Renewal Penalty – DC	$150 / month
Renewal Penalty – Professional Firm	$5 / month

Minnesota Board of Dentistry
Report of the Executive Director
July 1, 2014 – June 30, 2016

The Board of Dentistry is focused on aligning our activities and use of fiscal resources to our mission; Ensuring that Minnesota citizens receive quality dental health care from competent dental health care professionals.

Throughout the last biennium, the Minnesota Board of Dentistry has successfully implemented the criminal background check program for new licensees, licensure by credentials and reinstatement applicants. We also have a disclosure statement on all renewal applications that seeks information on felony, gross misdemeanor and misdemeanor convictions.

Through use of technology and electronic communications, we have also increased the number of online license renewals for several of our license types.
We have increased communications with the public, to include more frequent newsletters and social media presence. The website has also been updated and enhanced to include more information for public.

We have consistently promoted education on opioid prescribing for dental professionals, use of the Minnesota Prescription Monitoring Program and promoting safe prescribing to patients.

We have initiated rulemaking to incorporate mandatory infection control education for licensees each biennial professional development cycle.
The FY14-16 Biennium has brought numerous staff changes to the Board of Dentistry, including the hire of a new executive director. The Board of Dentistry did not have a current strategic plan in place. The development of a strategic plan, both focusing on internal operations and overall Board operations, including revisions to internal operational policies and procedures is currently in the works, set for consideration by the Board in January 2017.

Goals for Next Biennium
Our current strategic plan is in development for the coming biennium and includes less paper management, better use of technology; including within our GL Suite licensing system and the use of a cloud system for Board member meetings, complaint case management and management of documents.

We continue to identify technology improvements that will help us to better manage initial license applications and further our capability of online applications and renewals. We are also looking into primary source documentation for initial applicants so we can further streamline the process. We recently completed a pre-application online process that will allow for individuals to begin their background checks sooner and work to prevent bottlenecking for licensure and background checks during peak gradation times.

We will be assigning a designated staff position to work with dental therapy and advanced dental therapy programs and examinations, as well as managing components of the MN dental assisting state licensure examination.

We have initiated a technology project in coordination with the Minnesota Prescription Monitoring Program, which will allow sign up for their program to be streamlined through the Board of Dentistry dentist license renewal process. This will apply to all dentists that hold DEA licensure and do not yet have a PMP account, which will be required by law starting July 2017.

In the next biennium, we will be looking to add statutory language to include an Emeritus licensure option for licensees that are regulated by the Board of Dentistry.

Bridgett Anderson LDA, MBA
Executive Director
Minnesota Board of Dentistry
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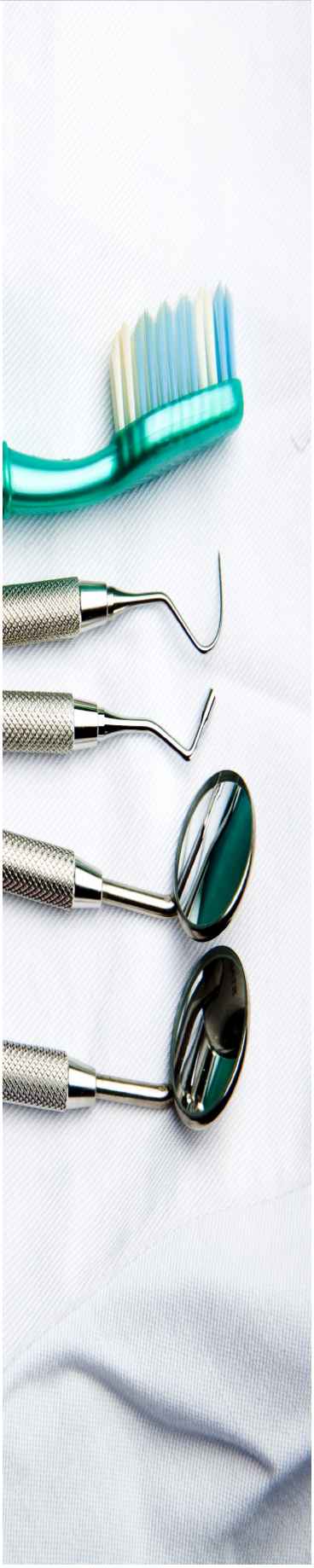

Board Members Serving During the Period 7/1/2014—6/30/2016

Name	Location	Appointment Status	Appt Date	Reappointment	Term Expires
Neal Benjamin, DDS	Lino Lakes, MN	Dentist	2009	2013	2017
David Gesko, DDS	Bloomington, MN	Dentist	2012		2016
Nancy Kearn, DH	Wyoming, MN	Dental Hygienist	2009	2013	2017
John "Jake" Manahan, JD	Bloomington, MN	Public Member	2011	2013	2019
Allen Rasmussen	International Falls, MN	Public Member	2009	2013	2016
Douglas Wolff, DDS	St Paul, MN	Dentist	2015		2019
Steven Sperling, DDS	Rochester, MN	Dentist	2014		2018
Paul Walker, DDS	Shoreview, MN	Dentist	2011	2015	2018
Teri Youngdahl, DA	Elk River, MN	Licensed Dental Assistant	2010	2014	2018

The mission of the Minnesota Board of Dentistry is to ensure that Minnesota citizens receive quality dental health care from competent dental health care professionals.

Board staff

Bridgett Anderson, Executive Director
Diane Anderson, Complaint Analyst
Judith Bonnell, Complaint Analyst- Retired
Deborah Endly, Compliance Officer
Sheryl Herrick, Office Manager
Amy Johnson, Licensing & Professional Development Analyst
Kathy T Johnson, Legal Analyst
Paul Kukla, Dental Consultant
Mary Liesch, Senior Investigator
Joyce Nelson, Director of Licensing
Michelle Schroeder, Administrative Assistant- Moved to different state agency 2016
Marshall Shragg, Executive Director- Moved to different state agency 2015
Carolyn Tanner, Administrative Assistant
Vicki Vang, Administrative Assistant

Minnesota Board of Dentistry
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Email: dental.board@state.mn.us
Website: http://mn.gov/health-licensing-boards/dentistry/

Licensure Activity

Total Number of persons licensed or registered as of June 30, 2016: 17,468

Number and Type of credentials issued or renewed

License Type	**Total Number** of persons licensed or registered as of **June 30, 2016** by license type	**Total Number** of persons licensed or registered as of **June 30, 2014** by license type	**Total Number** of persons licensed or registered as of **June 30, 2012** by license type	**Total Number** of persons licensed or registered as of **June 30, 2010** by license type	**Total Number** of persons licensed or registered as of **June 30, 2008** by license type
Dentists	4038	4033	4040	3900	4006
Hygienists	5668	5542	5357	5039	4989
Dental Assistants	7331	7176	7254	7108	7089
Specialty Dentists	79	46	30	26	26
Dental Therapists	63	39	6	NA	NA
Guest Dentists	26	50	43	51	37
Guest Dental Assistants	2	4	5	9	8
Guest Dental Hygienists	3	5	2	NA	3
Resident Dentists	73	100	103	121	124
Resident Provider Dental Therapist	0	NA	NA	NA	NA
Full Faculty Dentists	24	22	21	25	22
Limited Faculty Dentists	6	22	13	13	19
Limited Assistants	4	4	4	4	NA
Limited General Dentist	2	5	10	2	0
Dental Lab (Registrations)	149	NA	NA	NA	NA
TOTAL OF ALL LICENSE TYPES	**17,468**	**17,048**	**16,888**	**16,298**	**16,323**

Licensure Activity (Continued)

Number and Type of credentials issued or renewed (Continued)

Type of License / Credential (list all)	Number of Licenses Issued or **Renewed July 1, 2014** through ending June **30, 2016** by license type		Number of Credentials Renewed Online (# and per cent) during biennium ending **June 30, 2016**
	New MN License	Renewed License	
Dentists	270	3703	3,258, 88%
Hygienists	409	5188	4,664, 89.9%
Dental Assistants	548	6750	5,825, 86.3%
Specialty Dentists	28	48	NA
Dental Therapists	23	37	34, 92.1%
Guest Dentists	9	45	NA
Guest Dental Assistants	3	3	NA
Guest Dental Hygienists	1	5	NA
Resident Dentists	59	43	NA
Resident Provider Dental Therapist	NA	NA	NA
Full Faculty Dentists	7	18	NA
Limited Faculty Dentists	3	11	NA
Limited Assistants	0	4	NA
Limited General Dentist	2	1	NA
Dental Lab (Registrations)	NA	NA	NA
TOTAL	1,362	15,856	**14,128 89.1%**

Licensure Activity (Continued)

Number and Type of credentials issued or renewed (Continued)

Type of License / Credential (list all)	Number of Licenses Issued or Renewed **July 1, 2012** through ending **June 30, 2014** by license type		Number of Credentials Renewed Online (# and per cent) during biennium ending **June 30, 2014**
	New MN License	Renewed License	
Dentists	298	3735	3147, 84.3%
Hygienists	453	5089	4506, 88.5%
Dental Assistants	555	6621	5523, 83.4%
Specialty Dentists	7	39	NA
Dental Therapists	25	14	0
Guest Dentists	8	42	NA
Guest Dental Assistants	3	1	NA
Guest Dental Hygienists	2	3	NA
Resident Dentists	66	34	NA
Resident Provider Dental Therapist	NA	NA	NA
Full Faculty Dentists	6	16	NA
Limited Faculty Dentists	9	13	NA
Limited Assistants	0	4	NA
Limited General Dentist	2	3	NA
Dental Lab (Registrations)	NA	NA	NA
TOTAL	1434	15614	13,176-84.4%

Licensure Activity (Continued)

Number and Type of credentials issued or renewed (Continued)

Type of License / Credential (list all)	Number of Licenses Issued or Renewed **July 1, 2010** through ending **June 30, 2012** by license type		Number of Credentials Renewed Online (# and per cent) during biennium ending **June 30, 2012**
	New MN License	Renewed License	
Dentists	291	3,749	3,020, 80.6%
Hygienists	476	4,881	4,093, 83.9%
Dental Assistants	591	6,663	5,162, 77.5%
Specialty Dentists	4	26	NA
Dental Therapists	6	0	0
Guest Dentists	3	40	NA
Guest Dental Assistants	2	3	NA
Guest Dental Hygienists	0	2	NA
Resident Dentists	58	45	NA
Resident Provider Dental Therapist	NA	NA	NA
Full Faculty Dentists	3	18	NA
Limited Faculty Dentists	7	6	NA
Limited Assistants	0	4	NA
Limited General Dentist			NA
Dental Lab (Registrations)			NA
TOTAL	1,441	**15,447**	**12,275, 79.5%**

Licensure Activity (Continued)

Number and Type of credentials issued or renewed (Continued)

Type of License / Credential (list all)	Number of Licenses Issued or **Renewed July 1, 2008** through **ending June 30, 2010** by license type		Number of Credentials Renewed Online (# and per cent) during biennium ending June **30, 2010**
	New MN License	Renewed License	
Dentists	*172*	*3,728*	2,908, 78%
Hygienists	*351*	*4,688*	3,704, 79%
Dental Assistants	*628*	*6,480*	4,536, 70%
Specialty Dentists	*5*	*21*	NA
Dental Therapists	*NA*	*NA*	NA
Guest Dentists	*11*	*40*	NA
Guest Dental Assistants	*2*	*7*	NA
Guest Dental Hygienists	*NA*	*NA*	NA
Resident Dentists	*40*	*81*	NA
Resident Provider Dental Therapist	*NA*	*NA*	NA
Full Faculty Dentists	*4*	*21*	NA
Limited Faculty Dentists	*1*	*12*	NA
Limited Assistants	*0*	*4*	NA
Limited General Dentist	*2*	*0*	NA
Dental Lab (Registrations)	NA	NA	NA
TOTAL	1,216	15,082	***11,148, 73.9%***

Complaint Activity

Number of complaints received

Total Number of Complaints Received July 1, 2014 through June 30, 2016	Total Number of Complaints Closed July 1, 2014 through June 30, 2016
515	***382***

Total Number of Complaints Received July 1, 2012 through June 30, 2014	Total Number of Complaints Closed July 1, 2012 through June 30, 2014
517	***524***

Total Number of Complaints Received July 1, 2010 through June 30, 2012	Total Number of Complaints Closed July 1, 2010 through June 30, 2012
494	***452***

Total Number of Complaints Received July 1, 2008 through June 30, 2010	Total Number of Complaints Closed July 1, 2008 through June 30, 2010
501	***611***

Complaint Activity (Continued)

Number of complaints open at the end of the period

Number of Complaints Open as of June 30, 2016	Age of Complaints Open as of June 30, 2016
103	
82	< one year:
21	> One year:

Of the 21 complaints that remained opened on June 30, 2016, 16 of them (relating to 8 dentists) had been referred to the Attorney General's Office for investigation. Of the 16 complaints, 7 involved the review of an extensive number of patient records (to assess care and/or fraudulent billing allegations). Some of the cases required detailed investigative follow up by AGO staff and/or Board contracted clinical experts. For 2 complaints that were not referred to AGO, Board staff conducted internal investigations by gathering patient records, and then proceeded with having them reviewed by Board members and/or contracted clinical experts.

Four (4) of the 21 open complaints had been placed "on hold" after new complaints were filed against the four Licensees, so the follow-up complaints could be investigated. Disciplinary conferences have occurred, or are scheduled for Fall 2016, for 19 of the 21 complaints. Notices of Hearing have been authorized by the Complaint Committees for 5 of the complaints, involving 3 separate licensees. There are proposed corrective actions in progress for 2 of the complaints.

Types of Complaints received

Type of complaints received from July 1, 2014 – June 30, 2016	Number of complaints alleging this basis from July 1, 2014 – June 30, 2016*
Actions by another jurisdic-tion	
Incompetency / unethical conduct	196
Unprofessional conduct	129
Illness	8
Non-jurisdictional	
Medical Records	
Becoming Addicted	42
Prescribing	
Sexual Misconduct	0
Miscellaneous/Other	140
TOTAL	515

Receipts and Disbursements

Biennium	Total Receipts	Total Disbursements
July 1, 2014 – June 30, 2016	$3,456,577.09	$3,188,209.82
July 1, 2012 – June 30, 2014	$3,112,539.00	$3,144,060.00
July 1, 2010 – June 30, 2012	*$2,963,130.40	$2,800,270.65
July 1, 2008 – June 30, 2010	$2,715,823.36	$2,867,168.27
July 1, 2006 – June 30, 2008	$2,476,091.34	$2,067,314.10

**Including 10% license / application fees for Minnesota Office of Enterprise Technology e-licensing surcharge*

Fees by Type

Application Fees - Initial	**Current Fee**	**Criminal Background Check fee**	**Initial License Fee**	**Total**
Dentist	$140	$32.00	$168.00	**$340.00**
Dental Therapist	$100	$32.00	$120.00	**$252.00**
Dental Hygienist	$55	$32.00	$60.00	**$147.00**
Licensed Dental Assistant	$55	$32.00	$36.00	**$123.00**
Limited Dental Assistant	$15	$32.00	$12.00	**$59.00**
Full Faculty	$140	$32.00	$168.00	**$340.00**
Limited Faculty	$140	$32.00		**$172.00**
Resident Dentist	$55	$32.00		**$87.00**
Limited General Dentist	$140	$32.00	$155.00	**$327.00**
Resident Provider Dental Therapist	$55	$32.00		**$87.00**
Resident Provider Dental Hygienist	$55	$32.00		**$87.00**
Guest Dentist/Hygienist/Assistant	$50	$32.00		**$82.00**
Licensure by Credential Fees	**Current Fee**	**Criminal Background Check Fee**	**Initial License Fee**	**Total**
Dentist	$725	$32.00	$168.00	**$925.00**
Specialist	$725	$32.00	$168.00	**$925.00**
Hygienist	$175	$32.00	$60.00	**$267.00**

Reinstatement Fees	**Current Fee**	**Criminal Background Check Fee**	**Biennial Renewal Fee**	**Total**
Dentist	$140	$32.00	$425	**$597.00**
Dental Therapist	$85	$32.00	$200	**$317.00**
Dental Hygienist	$55	$32.00	$150	**$237.00**
Licensed Dental Assistant	$35	$32.00	$110	**$177.00**

Fees by Type (Continued)

Renewal Fees-biennial	**Current Fee**	**Late fee = % of renewal Annual = 50% Biennial = 25%**		**Total**
Dentist	$425	$106.25		**$531.25**
Dental Therapist	$200	$50.00		**$250.00**
Hygienist	$150	$37.50		**$187.50**
Dental Assistant	$110	$27.50		**$137.50**
Limited Dental Assistant	$24	$6.00		**$30.00**
Full Faculty	$425	$106.25		**$531.25**
Renewal Fees- annual				
Limited Faculty	$168	$84.00		**$252.00**
Resident Dentist	$75	$37.50		**$112.50**
Limited General Dentist	$155	$77.50		**$232.50**
Resident Provider Dental Therapist	$75	$37.50		**$112.50**
Resident Provider Dental Hygienist	$75	$37.50		**$112.50**
Guest Dentist/Hygienist/ Assistant	$50	$25.00		**$75.00**
Certification Fees	**Current Fee**	Late fee = % of renewal Annual = 50%		**Total**
Sedation- Initial Application				
General anesthesia (GA)	$325			**$325**
Conscious sedation (CS)	$325			**$325**
Contracted sedation (CSS)	$325			**$325**
Advanced Dental Therapy	$100			**$100**
Sedation- Biennial Renewal Fees				
General anesthesia (GA)	$325	$162.50		**$487.50**
Conscious sedation (CS)	$325	$162.50		**$487.50**
Contracted sedation (CSS)	$325	$162.50		**$487.50**
Corporation Fees	**Current Fee**	**Late Fee**		**Total**
Initial	$100			**$100**
Renewal (Annual)	$25	$15		**$40**

Fees by Type (Continued)

Dental Lab Fees	**Current Fee**			**Total**
Initial	$50			**$50**
Renewal (Biennial)	$50			**$50**
Miscellaneous	**Current Fee**			**Total**
Duplicate License	$35			
Duplicate Certificate	$10			
Mini License – wallet size for volunteerism	$15			
Affidavit of License (has seal – for **State Boards**)	$10			
License Verification (Fee for paper verification – No fee for On-line verification) **– NOT for State Board Verifications – see Affidavits**	$5			
NSF Fee	$20			
Advanced Dental Therapy Exam	$250			

Minnesota Board of Dietetics and Nutrition Practice
Report of the Executive Director
July 1, 2014 – June 30, 2016

It has been another busy biennium!

There are currently over 1,800 licensed dietitians and nutritionists in Minnesota, an increase of 16% in just the past two years. We expect this trend to continue with the increased growth for services. Although the number of licensees has increased significantly, complaints have not seen the same trend, pointing to an effective Complaint Review Process and educational component to licensure. Staffing remained constant even with the increased workload.

We are committed to the advancement of offering more and better online services to licensees and the public. A collaborative effort by the Health Licensing Boards resulted in implementation of a new database this biennium. Our Board was the first to use it for online renewals and it was a success, with the most questions being that I forgot my user name and password! In FY 16, 78% of our new license applications and renewals were completed online. Technological improvements continue to allow us to accommodate the increased workload without staffing increases.

The Board members continue to support policies that result in high quality, customer focused, efficient and cost effective services. They are to be commended for their exceptional dedication and time commitment required to serve on a State Board. They are strongly committed to providing efficient and timely access to public data, license renewals and verifications. The Board continues to make its' website increasingly interactive.

The Boards are moving toward a standardized system of criminal background checks for licensees, and are working with state and federal agencies to ensure that such background checks are in compliance with all applicable statutes and regulations. Background checks will be implemented in the next biennium, once again contributing to continued public safety.

Ruth Grendahl
Executive Director
Board of Dietetics and Nutrition Practice
651-201-2764
ruth.grendahl@state.mn.us

Board Members Serving During the Period 7/1/2014—6/30/2016

Name	Location	Appointment Status	Appt Date	Reappointment	Term Expires
Debra Sheats	St Paul, MN	Professional Member	2011		2019
Kristen Halonen	Cokato, MN	Public Member	2011		2016
Rebecca Werner	New Ulm, MN	Professional Member	2013		2016
Lea Wetzell	Minneapolis, MN	Professional Member	2013		2017
Susan Parks	Mendota Heights, MN	Professional Member	2010		2018
Margaret Schreiner	Eagan, MN	Public Member	2013		2017
Stacey Millett	St Paul, MN	Public Member	2010		2015
Cheryl Asplund	Champlin, MN	Public Member	2016		2018

The mission of the Minnesota Board of Dietetics and Nutrition Practice is to:

- Promote public interest in receiving quality dietetic and nutrition services from competent licensed dietitians and nutritionist
- Protecting the public by ensuring that all licensed dietitians and nutritionists meet the educational and practical requirements specified in law.
- Protecting the public by setting standards for quality dietetic and nutrition service

Board staff

Ruth Grendahl - Executive Director
Anna Hartsel – Office & Administrative Specialist Senior

Minnesota Board of Dietetics and Nutrition Practice
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Email: board.dietetics-nutrition@state.mn.us
Website: : http://mn.gov/health-licensing-boards/dietetics-and-nutrition

Licensure Activity

Total Number of persons licensed or registered as of June 30, 2016: 1,817

Number and Type of credentials issued or renewed

License Type	Total # of persons licensed as of 6/30/16 by license type	Total # of persons licensed as of 6/30/14 by license type	Total # of persons licensed as of 6/30/12 by license type	Total # of persons licensed as of 6/30/10 by license type
Dietitians	1752	1,493	1,353	1,267
Nutritionists	65	71	63	59
TOTAL OF ALL LICENSE TYPES	1,817	1,564	1,416	1,326

Type of License	# of Licenses Issued or Renewed 7/1/14 through 6/30/16 by license type		# of Credentials Renewed Online during biennium ending 6/30/16
	New MN Licenses Issued	# of Renewed Licenses	
Dietitians/Nutritionists	331	3,246	2,792
TOTAL			78 %

Type of License	# of Licenses Issued or Renewed 7/1/12 through 6/30/14 by license type		# of Credentials Renewed Online during biennium ending 6/30/14
	New MN License	Renewed License	
Dietitian/Nutritionist	281	2,985	2,116
TOTAL			71%

Licensure Activity (Continued)

Number and Type of credentials issued or renewed (Continued)

Type of License	# of Licenses Issued or Renewed 7/1/10 through 6/30/12 by license type		# of Credentials Renewed Online during biennium ending 6/30/12
	New MN License	Renewed License	
Dietitian/Nutritionist	214	2,756	1,420
TOTAL			52%

Type of License	# of Licenses Issued or Renewed 7/1/08 through ending 6/ 30/10 by license type		# of Credentials Renewed Online during biennium ending 6/30/10
	New MN License	Renewed License	
Dietitian/Nutritionist	170	2591	969
TOTAL			37%

Complaint Activity

Number of complaints received

Total # of Complaints Received 7/1/14 through 6/30/1616	Total # of Complaints Closed 7/1/14 through 6/30/16
9	8

Total # of Complaints Received July 1, 2012 through June 30, 2014	Total # of Complaints Closed 7/1/12 through 6/30/14
6	6

Total # of Complaints Received 7/1/10 through 6/30/12	Total # of Complaints Closed 7/1/10 through 6/30/12
12	11

Total # of Complaints Received 7/1/08 through 6/30/10	Total # of Complaints Closed 7/1/08 through 6/3010
4	7

Number and age of complaints open at the end of the period

# of Complaints Open as of 6/30/16	Age of Complaints Open as of 6/30/16
1	1 < one year:
	0 > One year:

Receipts, Disbursements, and Major Fees

Biennium	Total Receipts (Do not break down by each year; include combined receipts for the entire biennium)	Total Disbursements (Do not break down by each year; include combined disbursements for the entire biennium)
July 1, 2014 – June 30, 2016	$324,698	246,936
July 1, 2012 – June 30, 2014	$210,872	$209,218
July 1, 2010 – June 30, 2012	$180,238	$188,862
July 1, 2008 – June 30, 2010	$242,700	$188,018

*Including 10% license/application fees for MN Office of Enterprise Technology e-licensing surcharge

Fees by Type

Type of fee	Fee
Application for Nutritionist	$175
Application for Dietitian with RD	$100
Licensing Fee	$150
Reinstatement	$92.50
Renewal Fee	$75
Miscellaneous	$50

Minnesota Board of Marriage and Family Therapy
Report of the Executive Director
July 1, 2014—June 30, 2016

The Board of Marriage and Family Therapy's mission is to protect the public through effective licensure and enforcement of the statutes and rules governing the practice of marriage and family therapists to ensure a standard of competent and ethical practice. The Board fulfills its mission through provision of the following services:

- Issuance of initial license and license renewal for qualified professionals.
- Response to public and agency inquiries, complaints, and reports regarding licensure and conduct of applicants and licensees.
- Taking disciplinary or corrective action against an applicant or licensee for misconduct.
- Set standards of practice and professional conduct for licensees.
- Setting educational standards for initial licensure and continuing education requirements for maintaining licensure.
- Reviewing applicant education and training to determine compliance with licensure requirements.
- Providing information about licensure requirements and standards of practice to citizens and other interested persons or agencies.

Licensure growth in Minnesota continues on an upward trajectory with the Board licensing over 350 LMFTs in the past biennium. In the past biennium, the Board continued to handle the growing number of licensure applications and reviews and processes over 350 licensure applications per year. With this growth, come additional service requirements in the areas of complaint review and investigation, continuing education course approval, and post-graduate supervision oversight.

Focus for the future must be on increasing utilization of technology and the Board continues to work to maximize its use of technology in providing essential services. The Board adopted a new database service early in the biennium which, ultimately, will allow the Board to incorporate a wider array of online services available to licensees. The Board is part of a collaborative of seven small health licensing boards in developing and maintaining its licensing system, database, and web applications. This collaboration allows the Board to maximize its technology output in a cost-effective manner.

Board members continue to show great dedication to maintaining the high level of training and professionalism denoted by Minnesota MFTs. Board staff continue to provide customer-focused and cost-effective services.

Jennifer L. Mohlenhoff, Executive Director
Minnesota Board of Marriage and Family Therapy
Telephone Number: (612) 617-2220
Email address: jennifer.mohlenhoff@state.mn.us

Board Members Serving During the Period 7/1/2014 — 6/30/2016

Name	Location	Appointment Status	Appt Date	Reappointment	Term Expires
Shonda Craft, Ph.D., LMFT	St Paul, MN	Higher Education Representative	5/6/12	5/21/2016	1/6/2020
Mark Flatens, MS, LMFT	Golden Valley, MN	Professional Member	6/30/08	5/16/2012	1/4/2016
Herb Grant, Ph.D., LMLFT	Minneapolis, MN	Professional Member	6/29/06	1/4/10; 4/20/14	1/1/2018
Kathryn Graves	Minneapolis, MN	Public Member	6/6/14		1/1/2018
Andrea Hendel, LMFT	Anoka, MN	Professional Member	5/21/2016		1/6/2020
Denny Morrow, Ph.D.	St Paul, MN	Public Member	10/28/2010	6/30/11; 3/30/15	1/5/2019
Bruce O'Leary, LMFT	Maple Grove, MN	Professional Member	5/26/11	3/20/15	1/7/2019
John Seymour, Ph.D., LMFT	Mankato, MN	Professional Member	6/29/06	1/4/10; 4/20/14	1/1/2018

The mission of the Minnesota Board of Marriage and Family Therapy is to protect the public through effective licensure and enforcement of the statutes and rules governing the practice of marriage and family therapists to ensure a standard of competent and ethical practice.

Board staff

Jennifer Mohlenhoff, Executive Secretary
Nancy O'Brien, Office & Admin Specialist Principle
Sara Casebolt, Office & Admin Specialist

Minnesota Board of Marriage and Family Therapy
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Licensure Activity

Total Number of persons licensed or registered as of June 30, 2016: 2,370

Number and Type of credentials issued or renewed

License Type	**Total Number** of persons licensed or registered as of **June 30, 2016** by license type	**Total Number** of persons licensed or registered as of **June 30, 2014** by license type	**Total Number** of persons licensed or registered as of **June 30, 2012** by license type	**Total Number** of persons licensed or registered as of **June 30, 2010** by license type	**Total Number** of persons licensed or registered as of **June 30, 2008** by license type
LMFT	2054	1801	1525	1418	1068
LAMFT	316	306	276	257	233
TOTAL OF ALL LICENSE TYPES	**2370**	**2107**	**1801**	**1675**	**1301**

Type of License / Credential (list all)	Number of Licenses Issued or **Renewed July 1, 2014** through ending June **30, 2016** by license type		Number of Credentials Renewed Online (# and per cent) during biennium ending **June 30, 2016***
	New MN License	Renewed License	
LMFT	**350**	3,798	3454 (92%)
LAMFT	**324**	528	512 (97%)
TOTAL	**674**	**4326**	**3966 (92%)**

Licensure Activity (Continued)

Number and Type of credentials issued or renewed (Continued)

Type of License / Credential	Number of Licenses Issued or **Renewed July 1, 2012** through ending **June 30, 2014** by license type		Number of Credentials Renewed Online (# and per cent) during biennium ending **June 30, 2014**
	New MN License	Renewed License	
LMFT	342	3284	2857 (87%)
LAMFT	333	504	453 (90%)
TOTAL	**675**	**3788**	**4,463 (89%)**

Type of License / Credential (list all)	Number of Licenses Issued or Renewed **July 1, 2010** through ending **June 30, 2012** by license type		Number of Credentials Renewed Online (# and per cent) during biennium ending **June 30, 2012**
	New MN License	Renewed License	
LMFT	320	2750	2151 (78%)
LAMFT	315	427	168 (73%)
TOTAL	635	3177	**3177 (76%)**

Type of License / Credential	Number of Licenses Issued or **Renewed July 1, 2008** through **ending June 30, 2010** by license type		Number of Credentials Renewed Online (# and per cent) during biennium ending June **30, 2010**
	New MN License	Renewed License	
LMFT	*252*	*2,274*	1689 (74%)
LAMFT	*186*	*388*	0
TOTAL	***438***	***2,662***	***1689 (74%)***

Complaint Information

Number of Complaints Received

Total Number of Complaints Received July 1, 2014 through June 30, 2016	Total Number of Complaints Closed July 1, 2014 through June 30, 2016
156	*81*

Total Number of Complaints Received July 1, 2012 through June 30, 2014	Total Number of Complaints Closed July 1, 2012 through June 30, 2014
130	*89*

Total Number of Complaints Received July 1, 2010 through June 30, 2012	Total Number of Complaints Closed July 1, 2010 through June 30, 2012
63	*61*

Total Number of Complaints Received July 1, 2008 through June 30, 2010	Total Number of Complaints Closed July 1, 2008 through June 30, 2010
68	*50*

Number and age of complaints open at the end of the period

Number of Complaints Open as of June 30, 2016	Age of Complaints Open as of June 30, 2016
71	< one year: 66
	> One year: 5

Types of Complaints received from June 30, 2014 through June 30, 2016

The general categories of complaints most commonly received include (1) lack of professional competence/ unprofessional conduct; (2) violation of client confidentiality; (3) multiple relationship; (4) inappropriate sexual contact; (5) unlicensed practice; and (6) other violation of administrative rule (e.g. impairment, improper supervision, etc.). Many complaints contain more than one allegation of illegal, unprofessional or unethical conduct.

Receipts and Disbursements

Biennium	Total Receipts (Do not break down by each year; include combined receipts for the entire biennium)	Total Disbursements (Do not break down by each year; include combined disbursements for the entire biennium)
July 1, 2014 – June 30, 2016	$707,410	$661,302
July 1, 2012 – June 30, 2014	$652,141	$335,906
July 1, 2010 – June 30, 2012	$577,610	$303,732
July 1, 2008 – June 30, 2010	$515,954	$278,433
July 1, 2006 – June 30, 2008	$458,510	$249,149

Fees by Type

Type of fee	Fee
Professional Firm Initial	$100.00
Professional Firm Annual R	$25.00
App For Written Examination (National Exam)	$110.00
App For LMFT Licensure	$110.00
App For Licensure by Reciprocity	$220.00
Annual LMFT Renewal	$125.00
Late Fee – LMFT Renewal	$50.00
Prorated Initial LMFT License Fee	Varies by month
Continue Education – Program Sponsor App.	$60.00
Mailing List purchase	$60.00
Duplicate License Certificate	$25.00
Duplicate Renewal Card	$10.00
Application for LMFT License Reinstatement	$150.00
LMFT Emeritus License Status	$125.00
Application for LAMFT Licensure	$75.00
Annual LAMFT Renewal	$75.00
Written License Verification	$10.00
Late Fee – LAMFT Renewal	$25.00

Minnesota Board of Medical Practice
Report of the Executive Director
July 1, 2014 – June 30, 2016

Board of Medical Practice Functions

- Setting and administering educational and examination standards for initial and continuing licensure or registration for each health profession regulated by the Board
- Pursuing educational or disciplinary action with licensees as deemed necessary based upon results of investigations conducted in response to complaints/reports
- Providing information and education about licensure requirements and procedures and standards of practice to the public, the health care community, and other interested clientele
- Responding to inquiries, complaints and reports from the public and other health care regulators regarding licensure and conduct of applicants, permit holders, licensees and unlicensed practitioners
- Pursuing educational or disciplinary action with licensees as deemed necessary based upon results of investigations conducted in response to complaints/reports

BMP Major Activities during the Biennium

Interstate Medical Licensure Compact

In May 2014, Alabama and Minnesota joined Idaho, Montana, South Dakota, Utah, West Virginia, and Wyoming as states that formally enacted the Interstate Medical Licensure Compact (IMLC). The IMLC creates a streamlined process for medical licensure for physicians interested in practicing medicine in multiple states. In October 2015, the Interstate Commission, comprised of two appointed representatives from each of the member states, began the work of implementing the IMLC. Governor Dayton appointed Board Member Jon V. Thomas, MD, and Board Executive Director Ruth M. Martinez, MA, to serve as Minnesota's commissioners. The IMLC has grown to 17 member states, with pending legislation in additional states. The Interstate Commission met six times between October 2015 and October 2016 to establish policies, develop technological infrastructure, and approve rules for licensing processes. The Interstate Commission hopes to begin issuing licenses through the IMLC in January 2017. For more information about the Interstate Medical Licensure Compact, visit: http://licenseportability.org/

Legislation

Several additional pieces of legislation passed during the biennium that impacted the Board including:

- Medical Practice Act modifications relating to osteopathic physicians
- Physician Assistant Practice Act modifications
- Traditional Midwifery Practice Act modifications
- MN Prescription Monitoring Program Changes
  Modification of procedures related to temporary suspension of credentials
- Implementation of Medical Faculty License
- Implementation of Genetic Counselor License

Educational Outreach

The Board was invited to present to several organizations including professional associations and societies, the MN Department of Corrections, and malpractice insurers. Board members and staff attended educational conferences and seminars on the topics of patient safety, opioid prescribing and abuse, mental health and other topics of interest. Engagement with credentialing committees and hospital personnel were instrumental in the Board's evaluation of how it could improve and streamline processes and procedures to better serve clientele. In efforts to further engage with stakeholders, the Board held off-site Board meetings at the University of Minnesota campus in Minneapolis, Hamline University campus in St. Paul, and

Report of the Executive Director (Continued)

Mayo Clinic in Rochester. The Board also exhibited at the 2016 Minnesota Medical Association annual meeting. The Board also participated on a number of initiatives, including but not limited to:

- State Opioid Oversight Project
- National Governors' Association policy academy
- Interstate Collaboration in Healthcare
- Immigrant International Medical Graduate stakeholder advisory group
- One Health MN Antibiotic Stewardship work group
- Community Dialogue on Diagnostic Error
- MN Alliance for Patient Safety
- MN Controlled Substance Diversion coalition
- MN Prescription Monitoring Program advisory task force
- Health Professionals Services Program strategic planning groups

Collaborative Initiatives

Members and staff of the Minnesota Boards of Medical Practice, Nursing and Pharmacy attended the national Tri-Regulatory Symposium in Washington, DC in October 2015 and, subsequently, hosted the inaugural Minnesota Tri-Regulatory Symposium in Minneapolis on June 1, 2016. The Minnesota Tri-Regulatory Symposium was a great success, with participation by the CEOs of the three national regulatory organizations, and nationally recognized speakers on the topics of medical cannabis and interprofessional practice. The tri-regulatory boards developed and endorsed joint guidance statements, contributed joint articles to publications, and were invited to present on Minnesota's collaborative initiatives at the 2016 Federation of State Medical Boards annual meeting in San Diego, California. The executive directors of Minnesota's tri-regulatory boards continue to meet regularly to consider issues of common interest related to regulation, legislation and patient safety, and to collaborate on activities.

National Leadership

The Minnesota Board of Medical Practice continues to provide leadership at the national level. Board member Mark Eggen, MD, served on the FSMB Board of Directors, and also served on the FSMB Awards Committee, Minimal Data Set Advisory Group, Ethics & Professionalism Committee, Workgroup on Board Education Service & Training, and Workgroup on Telemedicine Consultations. Board Member and FSMB immediate past-chair Jon Thomas, MD, MBA, served as the FSMB representative to the American Board of Medical Specialties and National Board of Medical Examiners, and also served on the FSMB Awards Committee, Compensation Committee, Nominating Committee, Minimal Data Set Advisory Group, Ethics & Professionalism Committee, Interstate Compact Taskforce, Executive Committee, Investment Committee, Maintenance of Licensure Committee, Special Committee on Strategic Positioning, Workgroup on International Collaboration and USMLE Composite Committee. Board Member Kelli Johnson, PhD, served on the FSMB Nomination Committee. Board Member Rebecca Hafner-Fogarty, MD, MBA, served on the FSMB Editorial Committee. Board Member Gerald Kaplan, MA, LP, served on the FSMB Ethics & Professionalism Committee. Board Member Sarah Evenson, JD, MBA, served on the FSMB Finance Committee. Former Board member Gregory Snyder, MD, DABR, is the 2016 chair-elect of the Federation of State Medical Boards (FSMB) and served on the Audit Committee, Workgroup on Telemedicine Consultations, Governance Committee, Workgroup on Marijuana & Medical Regulation, Workgroup on International Collaboration and Advisory Panel to the USMLE.

Goals for 2017-2018

As the Board goes experiences staffing and legislative changes, it recognizes opportunities for growth. To better serve its clientele, the Board plans to update its database, streamline processes, improve the quality of reporting, enhance technological features, expand on-line services and update practice acts under the Board's jurisdiction.

Ruth M. Martinez, MA
Executive Director
Minnesota Board of Medical Practice
(612) 548-2150
Ruth.martinez@state.mn.us

Current Board Members

Name	Location	Appointment Status	Appt Date	Reappointment	Term Expires
Mark Eggen, MD	Shoreview, MN	Professional Member	04/09	06/13	1/1/2017
V. John Ella, JD	Robbinsdale, MN	Public Member	03/10	06/14	1/1/2018
Subbarao Inampudi, MBBS, FACR	Minnetonka, MN	Professional Member	04/09	06/13	1/1/2017
Irshad H Jafri, MBBS, FACT	Minneapolis, MN	Professional Member	10/12	05/15	1/1/2019
Kelli Johnson, PhD	St Paul, MN	Public Member	3/10	6/14	1/1/2018
Gerald T Kaplan, MA, LP	Minneapolis, MN	Public Member	03/11	06/15	1/1/2019
Patricia J Lindholm, MMD, FAAFP	Fergus Falls, MN	Professional Member	10/13	06/16	1/1/2020
Charles F Moldow, MD	Minneapolis, MN	Professional Member	06/12		1/1/2016
Allen G. Rasmussen, MA	International Falls,l MN	Public Member	9/14		1/1/2018
Kimberly W Spaulding, MD, MPH	Kimball, MN	Professional Member	6/16		1/1/2020
Maria K Statton, MD, PhD	Bemidji, MN	Professional Member	06/13		1/1/2017
Jon V Thomas, MD, MBA	Vadnais Heights, MN	Professional Member	3/10	6/14	1/1/2018
Patrick R Townley, MD, JD	Minneapolis, MN	Professional Member	6/16		1/1/2020
Joseph R Willett, DO, FACOI	Marshall, MN	Professional Member	3/11	6/15	1/1/2019

Board Members Serving During the Period 7/1/2014—6/30/2016

Name	Location	Appointment Status	Appt Date	Reappointment	Term Expires
Keith H. Berge, MD	Rochester, MN	Professional Member	09/08	6/12	1/1/2016
Mark Eggen, MD	Shoreview, MN	Professional Member	04/09	06/13	1/1/2017
V. John Ella, JD	Robbinsdale, MN	Public Member	03/10	06/14	1/1/2018
Sarah Evenson, JD, MBA	Maple Grove, MN	Public Member	054/09	7/12	1/1/2016
Dr Eduardo T Fernandes	Minneapolis, MN	Professional Member	06/14	1/1/2018	1/1/2018
Rebecca J Hafner-Fogarty, MD,MBA	Avon, MN	Professional Member	06/12		1/1/2016
Subbarao Inampudi, MBBS, FACR	Minnetonka, MN	Professional Member	04/09	06/13	1/1/2017
Irshad H Jafri, MBBS, FACT	Minneapolis, MN	Professional Member	10/12	05/15	1/1/2019
Kelli Johnson, PhD	St Paul, MN	Public Member	3/10	6/14	1/1/2018
Gerald T Kaplan, MA, LP	Minneapolis, MN	Public Member	03/11	06/15	1/1/2019
Patricia J Lindholm, MMD, FAAFP	Fergus Falls, MN	Professional Member	10/13	06/16	1/1/2020
Charles F Moldow, MD	Minneapolis, MN	Professional Member	06/12		1/1/2016
Allen G. Rasmussen, MA	International Falls,IMN	Public Member	9/14		1/1/2018
Kimberly W Spaulding, MD, MPH	Kimball, MN	Professional Member	6/16		1/1/2020
Maria K Statton, MD, PhD	Bemidji, MN	Professional Member	06/13		1/1/2017
Jon V Thomas, MD, MBA	Vadnais Heights, MN	Professional Member	3/10	6/14	1/1/2018
Patrick R Townley, MD, JD	Minneapolis, MN	Professional Member	6/16		1/1/2020
Joseph R Willett, DO, FACOI	Marshall, MN	Professional Member	3/11	6/15	1/1/2019

The mission of the Minnesota Board of Medical Practice is to protect the public's health and safety by assuring that the people who practice medicine or as an allied health professional are competent, ethical practitioners with the necessary knowledge and skills appropriate to their title and role.

Board staff

Staff Members Serving During the Period 7/1/2014 – 6/30/2016

Hanan Ahmad, Licensure Specialist, Office & Administrative Specialist Int.
Wendy Boswell, Licensure Specialist, Office & Administrative Specialist Int.
Vicki Chelgren, Licensure Specialist, Office & Administrative Specialist
Mary Delahunt, Licensure Specialist, Office & Administrative Specialist Int.
Barb Dressel, Receptionist, Office & Administrative Specialist
Mary Erickson, Senior Medical Regulations Analyst, Investigator Sr.
Pat Hayes, Licensure Coordinator, Office & Administrative Specialist Principal
Matthew Heffron, Senior Medical Regulations Analyst, Investigator Sr.
Polly Hoye, Legal Analyst
Elizabeth Huntley, Licensure Unit Supervisor, Management Analyst Supervisor; Complaint Review Unit Supervisor, Investigator Supervisor
Cheryl Johnston, ED Admin. Assistant, Office & Administrative Specialist Principal
Lois Kauppila, Office Manager, Office Services Supervisor
Roselynn Kowalczyk, Complaint Review Unit Assistant, Office & Administrative Specialist
Elizabeth Larson, Licensure Specialist, Office & Administrative Specialist Int.
Robert Leach, Executive Director
Maura LeClair, Medical Regulations Analyst, Investigator
Paul Luecke, Licensure Specialist, Office & Administrative Specialist; Licensure Coordinator, Office & Administrative Specialist Principal
Ruth Martinez, Complaint Review Unit Supervisor, Investigator Supervisor; Executive Director
Debbie Milla, Accounting Officer
Helen Patrikus, Medical Regulations Analyst, Investigator
Rachel Prokop, Licensure Specialist, Office & Administrative Specialist Int.
Molly Schwanz, Licensure Unit Supervisor, Management Analyst Supervisor
Karen Stuart, Complaint Review Unit Assistant, Office & Administrative Specialist
Tama Trinka, Senior Medical Regulations Analyst, Investigator Sr.
Anthony Wijesinha, Medical Regulations Analyst, Investigator

Board staff (Continued)

Current Staff Members

Wendy Boswell, Licensure Specialist, Office & Administrative Specialist Int.
Mary Delahunt, Licensure Specialist, Office & Administrative Specialist Int.
Barb Dressel, Receptionist, Office & Administrative Specialist
Mary Erickson, Senior Medical Regulations Analyst, Investigator Sr.
Elizabeth Huntley, Complaint Review Unit Supervisor, Investigator Supervisor
Cheryl Johnston, ED Admin. Assistant, Office & Administrative Specialist Principal
Lois Kauppila, Office Manager, Office Services Supervisor
Roselynn Kowalczyk, Complaint Review Unit Assistant, Office & Administrative Specialist
Elizabeth Larson, Licensure Specialist, Office & Administrative Specialist Int.
Maura LeClair, Medical Regulations Analyst, Investigator
Paul Luecke, Licensure Coordinator, Office & Administrative Specialist Principal
Ruth Martinez, Executive Director
Helen Patrikus, Medical Regulations Analyst, Investigator
Molly Schwanz, Licensure Unit Supervisor, Management Analyst Supervisor
Tama Trinka, Senior Medical Regulations Analyst, Investigator Sr.
Anthony Wijesinha, Medical Regulations Analyst, Investigator

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Licensure Activity

Total Number of persons licensed or registered as of June 30, 2016: 30,365

Number and Type of credentials issued or renewed

License Type	Total Number of persons licensed or registered as of June 30, 2016 by license type	Total Number of persons licensed or registered as of June 30, 2014 by license type	Total Number of persons licensed or registered as of June 30, 2012 by license type	Total Number of persons licensed or registered as of June 30, 2010 by license type	Total Number of persons licensed or registered as of June 30, 2008 by license type
Acupuncturist	595	490	470	415	349
Athletic Trainer	992	884	738	652	611
Traditional Midwife	32	28	17	13	14
Naturopathic Doctor	58	50	33	21	NA
Physician Assistant	2522	2230	1941	1814	1746
Physician	22,593	21,993	20,405	19,661	18,797
Respiratory Therapist	1976	1941	1814	1746	1669
Telemedicine	653	639	448	317	223
Resident Permit	944	661	833	781	857
TOTAL OF ALL LICENSE TYPES	30,365	28,916	26,699	25420	24,266

Type of License / Credential	Number of Licenses Issued or **Renewed July 1, 2014** through ending June **30, 2016** by license type		Number of Credentials Renewed Online (# and per cent) during biennium ending **June 30, 2016**
	New MN License	Renewed License	Online Renewal License
Acupuncturist	95	1058	1020 (96.41%)
Athletic Trainer	245	1706	1670 (97.89%)
Traditional Midwife	13	42	42 (100%)
Naturopathic Doctor	13	102	101 (99.02%)
Physician Assistant	566	4444	4411 (99.26%)
Physician	2787	42,410	41,428 (97.68%)
Respiratory Therapist	1429	3640	3568 (98.02%)
Telemedicine	221	1083	1078 (99.54%)
Resident Permit	1429	NA	NA
TOTAL	**6,798**	**54,485**	**53,318 (97.86%)**

Licensure Activity (Continued)

Type of License / Credential	Number of Licenses Issued or **Renewed July 1, 2012** through ending **June 30, 2014** by license type		Number of Credentials Renewed Online (# and per cent) during biennium ending **June 30, 2014**
	New MN License	Renewed License	Online Renewed License
Acupuncturist	102	1075	896 (83.35%)
Athletic Trainer	216	1730	1400 (80.92%)
Traditional Midwife	11	55	35 (63.64%)
Naturopathic Doctor	19	92	39 (42.39%)
Physician Assistant	465	4293	3755 (87.48%)
Physician	2849	43336	40481 (93.41%)
Respiratory Therapist	258	3816	3430 (89.88%)
Telemedicine	274	1184	855 (72.21%)
Resident Permit	1533	NA	NA
TOTAL	**5,727**	**55,581**	**50,891(91.56%)**

Type of License / Credential	Number of Licenses Issued or Renewed **July 1, 2010** through ending **June 30, 2012** by license type		Number of Credentials Renewed Online (# and per cent) during biennium ending **June 30, 2012**
	New MN License	Renewed License	Online Renewed License
Acupuncturist	88	993	623 (62.74%)
Athletic Trainer	175	1509	993 (65.81%)
Traditional Midwife	5	33	NA
Naturopathic Doctor	16	62	NA
Physician Assistant	387	3609	2553 (70.74%)
Physician	2346	41134	34559 (84.02%)
Respiratory Therapist	198	3628	2768 (76.30%)
Telemedicine	197	869	201 (23.13%)
Resident Permit	1717	NA	NA
TOTAL	**5,129**	**51,837**	**41,697 (80.44%)**

Licensure Activity (Continued)

Type of License / Credential	Number of Licenses Issued or **Renewed July 1, 2008** through **ending June 30, 2010** by license type		Number of Credentials Renewed Online (# and per cent) during biennium ending June **30, 2010**
	New MN License	Renewed License	Online Renewed License
Acupuncturist	95	823	640 (77.76%)
Athletic Trainer	134	1299	1045 (80.45%)
Traditional Midwife	3	26	NA
Naturopathic Doctor	21	21	NA
Physician Assistant	321	3026	2598 (85.86%)
Physician	2233	39,560	32,436 (81.99%)
Respiratory Therapist	202	3547	3167 (89.29%)
Telemedicine	165	575	201 (34.96%)
Resident Permit	1650	NA	NA
TOTAL	**4,824**	**48,816**	**40,087 (82.12%)**

Complaint Activity

Number of Complaints Received

Total Number of Complaints Received July 1, 2014 through June 30, 2016	Total Number of Complaints Closed July 1, 2014 through June 30, 2016
1,562	1,872

Total Number of Complaints Received July 1, 2012 through June 30, 2014	Total Number of Complaints Closed July 1, 2012 through June 30, 2014
1,514	1,718

Total Number of Complaints Received July 1, 2010 through June 30, 2012	Total Number of Complaints Closed July 1, 2010 through June 30, 2012
1,614	1,603

Total Number of Complaints Received July 1, 2008 through June 30, 2010	Total Number of Complaints Closed July 1, 2008 through June 30, 2010
1,707	1,936

Number and age of complaints open at the end of the period

Number of Complaints Open as of June 30, 2016	Age of Complaints Open as of June 30, 2016
389	< one year: 311
	> One year: 78

Complaint Activity (Continued)

Types of Complaints Received

Type of complaints received from July 1, 2014 – June 30, 2016	Number of complaints alleging this basis from July 1, 2014 – June 30, 2016
Actions by another jurisdiction	60
Incompetency / unethical conduct	1200
Unprofessional conduct	1187
Illness	95
Non-jurisdictional	58
Medical records management	122
Becoming addicted or habituated	63
Prescribing	469
Sexual misconduct	40
Other	140

Receipts and Disbursements

Biennium	Total Receipts	Total Disbursements
July 1, 2014 – June 30, 2016	$11,445,514	$7,962,117
July 1, 2012 – June 30, 2014	$10,847,180	$7,796,647
July 1, 2010 – June 30, 2012	$10,181,278*	$7,449.684
July 1, 2008 – June 30, 2010	$9,335,076	$7,770,120
July 1, 2006 – June 30, 2008	$9,084,669	$7,310,960

*Including 10% license / application fees for Minnesota Office of Enterprise Technology e-licensing surcharge

Fees by Type

Type of fee	Fee
Acupuncture Annual License	$150.00
Acupuncture applications	150.00
Acupuncture Certification Fees	25.00
Acupuncture Late Fees	50.00
Acupuncture Temporary Permit	60.00
Acupuncture Inactive Status Fee	50.00
Athletic Trainer Annual Registration	$100.00
Athletic Trainer Application	50.00
Athletic Trainer Temp Permit	50.00
Athletic Trainer Certification	25.00
Athletic Trainer Late Fee	15.00
Athletic Trainer Temp Registration	100.00
Midwifery Certification Fee	$25.00
Midwifery Late Fee	75.00
Midwifery Temporary Permit Fee	75.00
Midwifery Licensure & Renewal Fee	100.00
Midwifery Inactive Status Fee	50.00
Midwifery Application Fee	100.00

Fees by Type (Continued)

Type of fee	Fee
Physician Annual License	$192.00
Physician Application Fee	200.00
Physician Temporary License	60.00
MD Endorsement Fees	40.00
MD Certification Fees	25.00
MD Late Fees	60.00
Residency Permit	20.00 / 15.00
Emeritus Registration	50.00
Naturopathic Certification Fee	$25.00
Naturopathic Application Fee	200.00
Naturopathic Registration Renewal Fee	150.00
Naturopathic Late Fee	75.00
Naturopathic Inactive Status	50.00
Naturopathic Temporary Permit	25.00
Naturopathic Emeritus	50.00
Physicians Assistant (PA) Annual License with Prescribing	$135.00
PA Application Fees	120.00
PA Certification Fee	25.00
PA Lase Fees	50.00
PA Annual License Without Pres.	115.00
PA Temporary License	60.00
Respiratory Therapists (RTS) License	$90.00
RTS Application Fee	100.00
RTS Certification Fee	25.00
RTS Temporary Permit	60.00
Respiratory Therapists Late Fee	50.00
RTS Inactive Status	50.00

Fes by Type (Continued)

Type of fee	Fee
Telemedicine Application Fee	$100.00
Telemedicine Registration Fee	75.00
Telemedicine Certification Fee	25.00
Civil Penalties	Various
Miscellaneous Service Charges, Copies	Various
Duplicate Extension Ltr / License Requests	$20.00
Education / Training Program Approval	1000.00
Competitive Athletic Event Registration	50.00
Medical Corp Annual Reg	25.00
Corporation Application	100.00
Report Generation (per hour)	60.00
Primary Source Verification	25.00

Minnesota Board of Nursing
Report of the Executive Director
July 1, 2014 – June 30, 2016

Nurses care for people across the lifespan during some of their most vulnerable moments and in settings as varied as homes, schools, hospitals, prisons, clinics and nursing homes. Individuals and families expect nurses are both competent and ethical. The Minnesota Legislature established the Board of Nursing in 1907 to protect the public's health and welfare by overseeing and ensuring the safe practice of nursing in Minnesota. The Board is committed to this significant responsibility.

The Board is comprised of sixteen members appointed by the Governor. There are eight registered nurses, four practical nurses and four public members. The members serve a four-year term with an opportunity to be appointed to a second term.

Nurses are consistently nationally rated as the most honest and ethical professionals. The Board of Nursing holds nurses accountable for conduct based on legal, ethical and professional standards. The Board achieves its mandate of public protection by outlining these standards and issuing licenses to practice nursing. Once a license is issued, the board's responsibility continues by monitoring licensees' compliance with state laws and taking action against the licenses of those nurses who have exhibited unsafe nursing practice and present a risk of harm to the public. While the vast majority of nurses are safe, ethical, caring practitioners, there are instances in which a nurse does not meet the expected standard of care or violates the law.

The Board of Nursing regulates nursing practice through the following service areas:

- Credentialing - license registered nurses, licensed practical nurses, advanced practice registered nurses, and public health nurses
- Education – assure schools meet the needs of the nursing workforce by preparing graduates to practice nursing safely and competently
- Discipline/complaint resolution- investigate complaints and take action against nurses, including removal of nurses from practice who are a risk to patient safety

- Nursing practice standards - interpret the laws and rules related to nursing practice and establish nursing performance guidelines so employers and consumers can make informed decisions regarding the performance of nursing services
- Data –provide licensure and disciplinary data for purposes of emergency preparedness, a pending nurse shortage, workforce planning, and assurance of the authority of a nurse to practice

The Board values alliances with internal and external stakeholders to enable development and implementation of public policy that is well grounded, evidence based, reasonable and attainable. The Board engages with other state agencies to assure congruence on issues involving health care delivery, patient safety organizations to address patient safety issues, and coalitions of health care providers and enforcement agencies to identify best practices for addressing violations of the law such as drug diversion and patient abuse. Collaboration with these groups ensures that the work of the Board reflects relevant professional issues and practice standards.

The Board of Nursing formed a Tri-Regulatory Collaborative with the Boards of Medical Practice and Pharmacy. This partnership is founded on the principles of creating effective inter-professional collaboration among nurses, physicians, and pharmacists to enhance and promote public safety. The Boards' mutual values, common purpose, and statutory obligation to the public foster many opportunities to address issues of mutual concern. Together, the Boards held an inaugural Minnesota Tri-Regulatory Symposium with national speakers addressing regulation of healthcare professionals, inter-professional education and practice, and medical cannabis. The Boards have also developed joint position statements addressing responsible prescribing practices related to pain management and acknowledging the opioid public health crisis.

The Board of Nursing recognizes the need to implement regulatory solutions with increased relevance and responsiveness to the changes in health care, the transformation of nursing education, and emergent trends in workforce and population health. Greater mobility, response to emergencies, and communication with patients across state borders call for a new licensure model that supports interstate practice. Nursing regulation must be innovative and pragmatic.

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Minnesota Board of Nursing
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Board Members Serving During the Period 7/1/2014 — 6/30/2016

Name	Location	Appointment Status	Appt Date	Reappointment	Term Expires
Carly DeJarlais, LPLN	Pine City, MN	Licensed Practical Nurse	7/20/2010	3/30/2013	1/2/2017
Jeanine Gangeness, PhD, RN	Rochester, MN	Registered Nurse	3/30/2013		1/2/2017
Becky Gladis, LPN	Chatfield, MN	Licensed Practical Nurse	6/30/2015		1/7/2019
Deborah Haagenson, RN	Park Rapids, MN	Registered Nurse	8/31/2009	3/20/2013	1/2/2017
Michelle Harker	Rosemount, MN	Public Member	6/24/2014	6/30/2015	1/7/2019
Bradley Haugen, RN	Rochester, MN	Registered Nurse	6/30/2015		1/7/2019
June McLachlan, DNP, APRN, CNP	Hermantown, MN	Registered Nurse	6/24/2014		1/1/2018
Deborah Meyer, LPN	Virginia, MN	Licensed Practical Nurse	8/31/2009	6/30/2012	1/4/2016
Robert Muster, PhD, RN	Minnetonka, MN	Registered Nurse	6/30/2015		1/7/2019
Christine Norton	Cottage Grove, MN	Public Member	6/30/2011	6/30/2015	1/7/2019
Monica Parks, RN	Hastings, MN	Registered Nurse	6/30/2011		1/5/2015
Jan Rainey	Minneapolis, MN	Public Member	6/24/2014		1/1/2018
Christine Renne	Faribault, MN	Public Member	6/30/2012	3/30/2013	1/2/2017
Julie Riportella, LPN	Minneapolis, MN	Licensed Practical Nurse	6/30/2011		1/5/2015
Sheila Robley, LPN	Faribault, MN	Licensed Practical Nurse	6/24/2014		1/1/2018
Diane Scott, MSN, RN	Bemidji, MN	Registered Nurse	6/30/2011		1/5/2015
Sue Sendelbach, RN	St Paul, MN	Registered Nurse	6/30/2012		1/4/2016
Steven Strand, RN	Duluth, MN	Registered Nurse	6/30/2012	6/29/2016	1/6/2020
Natya Stroud, DNP, APRN, CNP	Fridley, MN	Registered Nurse	6/30/2012		1/4/2016

The mission of the Minnesota Board of Nursing is to protect the public's health and safety through regulation of nursing education, licensure and practice.

Current Board staff

Board staff

The Board of Nursing has 34 employees and conducts business through five major service areas: credentialing, education, discipline/complaint resolution, nursing practice and data

Administration

1 Executive Director
1 Administration Program Assistant

Licensure

1 Director of Operations
1 Operations Program Assistant
5 Customer Service Specialists
1 APRN Program Assistant

Education

1 Director of Education
1 Nursing Education Specialist
1 Education Program Assistant

Discipline/Complaint Resolution

1 Discipline Coordinator
5 Nursing Practice Specialists
2 Legal Analysts
1 Investigator
1 Paralegal
1 Nursing Practice Program Assistant
6 Administrative Assistants
1 Student Worker

Nursing Practice

1 Director of Practice & Policy
1 Advanced Practice Nursing Consultant
1 Nursing Practice Specialists

Minnesota Board of Nursing
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Website: http://mn.gov/boards/nursing/

Licensure Activity

Total Number of persons licensed or registered as of June 30, 2016: 148,029

Number and Type of credentials issued or renewed

License Type	**Total Number** of persons licensed or registered as of **June 30, 2016** by license type	**Total Number** of persons licensed or registered as of **June 30, 2014** by license type	**Total Number** of persons licensed or registered as of **June 30, 2012** by license type	**Total Number** of persons licensed or registered as of **June 30, 2010** by license type	**Total Number** of persons licensed or registered as of **June 30, 2008** by license type
RN	101,531	93,872	88,625	83,728	77,950
LPN	22,694	23,603	24,028	24,008	23,642
PHN Certificates	16,467	15,028	13,530	12,025	10,930
APRN, CNP	4,478	3,864	3,067	2,542	2,312
APRN, CRNA	1,887	1,794	1,696	1,576	1,547
APRN, CNS	493	548	526	511	499
APRN, CNM	297	282	258	217	214
Border State Registrants	182	191	235	227	238
TOTAL OF ALL LICENSE TYPES	**148,029**	**139,182**	**131,965**	**124,834**	**117,332**

Type of License / Credential (list all)	Number of Licenses Issued or **Renewed July 1, 2014** through ending June **30, 2016** by license type		Number of Credentials Renewed Online (# and per cent) during biennium ending **June 30, 2016**	
	New MN License	Renewed License	#	%
RN	15,849	87,633	83,260	95.0
LPN	3,173	19,693	18,247	92.7
RN Permit	4,820			
LPN Permit	394			
PHN Certificate	2,184			
APRN, CNP	4,478	2,258		
APRN, CRNA	1,887	960		
APRN, CNS	493	259		
APRN, CNM	297	150		
TOTAL	33,575	110,953	**101,507**	**94%**

Licensure Activity (Continued)

Type of License / Credential	Number of Licenses Issued or **Renewed July 1, 2012** through ending **June 30, 2014** by license type		Number of Credentials Renewed Online (# and per cent) during biennium ending **June 30, 2014**	
	New MN License	Renewed License	#	%
RN	12,694	82,884	78,079	94.2%
LPN	3,759	20,248	18,202	89.9%
RN Permit	3,918			
LPN Permit	392			
PHN Certificates	2,038			
APRN, CNP	3,864			
APRN, CRNA	1,794			
APRN, CNS	548			
APRN, CNM	282			
TOTAL: 132,421	25,905	103,132	**96,281**	**93.4%**

Type of License / Credential (list all)	Number of Licenses Issued or Renewed **July 1, 2010** through ending **June 30, 2012** by license type		Number of Credentials Renewed Online (# and per cent) during biennium ending **June 30, 2012**	
	New MN License	Renewed License	#	%
RN	12,026	77,472	71,802	92.7%
LPN	3,839	20,383	17,715	86.9%
RN Permit	3,770			
LPN Permit	457			
PHN Certificates	1,578			
APRN, CNP	3,067			
APRN, CRNA	1,696			
APRN, CNS	526			
APRN, CNM	369			
TOTAL: 125,072	27,217	97,855	**89,517**	**91.5%**

Licensure Activity (Continued)

Type of License / Credential	Number of Licenses Issued or **Renewed July 1, 2008** through **ending June 30, 2010** by license type		Number of Credentials Renewed Online (# and per cent) during biennium ending June **30, 2010***	
	New MN License	Renewed License	#	%
RN	11,166	74,177	67,241	90.6%
LPN	3,541	21,011	17,422	82.9%
RN Permit	5,877			
LPN Permit	376			
PHN Certificates	1,302			
APRN, CNP	2,542			
APRN, CRNA	1,576			
APRN, CNS	511			
APRN, CNM	217			
TOTAL	27,108	95,188		

Complaint Activity

Number of Complaints Received

Total Number of Complaints Received July 1, 2014 through June 30, 2016	Total Number of Complaints Closed July 1, 2014 through June 30, 2016
2146	2423

Total Number of Complaints Received July 1, 2012 through June 30, 2014	Total Number of Complaints Closed July 1, 2012 through June 30, 2014
3291	3709

Total Number of Complaints Received July 1, 2010 through June 30, 2012	Total Number of Complaints Closed July 1, 2010 through June 30, 2012
1745	1805

Total Number of Complaints Received July 1, 2008 through June 30, 2010	Total Number of Complaints Closed July 1, 2008 through June 30, 2010
1450	1368

Number and age of complaints open at the end of the period

Number of Complaints Open as of June 30, 2016	Age of Complaints Open as of June 30, 2016
437	< one year: 417
	> One year 20

The age of open complaints has continued to decline over the biennium. As of the end of FY2016, there were 417 open complaints and 95% of them were less than 12 months old. The average number of days to resolve a complaint has been reduced to 87 days as of June 30, 2016.

In certain cases, the Board requires investigation into complaints beyond the employment and medical records it receives through waivers or subpoenas. In these cases, it enlists the investigatory services of the AGO. These cases typically involve serious complaints of misconduct by a nurse that require some form of witness interview. The AGO completed 34 investigations for the Board in FY2015. Of the 34 investigations completed in FY2015, the average investigation took 128 days to complete. The shortest investigation took 60 days, while the longest took 236 days. Complaints referred to the AGO for investigation are often necessary, but can add significant time to resolving the case.

Complaint Activity (Continued)

Types of Complaints Received

Type of complaints received from July 1, 2014 – June 30, 2016	Number of complaints alleging this basis from July 1, 2014 – June 30, 2016*
Failure to practice with reasonable skill and safety	664
Actual or potential impairment due to the use of substances or mental or physical health condition	497
Action in another jurisdiction	305
Failure to demonstrate qualification for licensure or fraud/ deceit in obtaining a license	236
Unauthorized practice, including practicing without current registration, without informing the board of APRN certification and practicing without a license	133
Unprofessional conduct	124
Violation of a board order	114
Failure to practice Advanced Practice nursing with reasonable skill and safety	103
Failure to successfully complete the Health Professionals Services Program	89
Criminal conviction	79
Tax delinquency	55
Unethical conduct, including use of undue influence to the benefit of the nurse	54
Improper management of patient records or privacy violations	54
Sexual Misconduct	19
All others	97

*Some complaints allege more than one basis

Nursing Education Program Approval

The Board promotes excellence of nursing education standards and approved nursing education programs by monitoring program graduate success rates on the national nurse licensure examination; facilitating innovative approaches to address nursing workforce and nursing faulty shortages; providing evidenced based rule proposals to address limited clinical site availability through simulation, providing consultation to nursing education programs regarding national nurse licensure examination (NCLEX®) pass rates; developing and conducting research to promote a safe, competent and sufficient nursing workforce; and advising prospective students regarding educational tracks and scholarships. The Board established requirements for initial and continuing approval of licensure preparing nursing programs.

Table 1. Approved licensure-preparing programs as of 6/31/2016

Number of Nursing Programs	
Practical	26
Professional – Associate	28
Professional – Baccalaureate	19
Professional – Master's	3

Table 2. Report of graduates of licensure-programs

Number of Graduates	FY 2014	FY 2015
Practical	1761	1404
Professional – Associate	1981	2202
Professional – Baccalaureate	1084	1062
Professional – Master's	89	65

Tables 3 and 4 provides an overview of the number of nursing programs receiving initial or continued approval for the 2011-2012 biennium, 2013-2014 biennium and the 2015-2016 biennium.

Table 3. Initial program approval of licensure-preparing nursing programs

Approval of New Programs	FY 11 - FY 12	FY 13- FY 14	FY 15- FY 16
Practical Nursing	0	0	0
Professional Nursing – Associate	4	0	0
Professional Nursing – Baccalaureate	0	1	0
Professional Nursing – Master's	0	0	0
Total	4	1	0

The Board granted no new program approvals during the 2015-2016 biennium .

Nursing Education Program Approval (Continued)

Table 4. Continuing program approval of approved licensure-preparing nursing programs

Approval of Programs	FY 11 - FY 12	FY 13 – FY 14	FY 15 - FY 16
Practical Nursing	27*	24**	6***
Professional Nursing	46*	28**	12***
Total	73*	52	18

*Number includes 25 practical and 43 professional programs granted continued approval on 4/5/2012 in accordance to new program approval rules effective 6/28/11. In the transition to new rules, 2 practical and 3 professional programs were approved in both years.
**Number includes 20 practical and 11 professional programs granted continued approval on 4/3/2014 in accordance to new program approval rules effective 3/31/14. In this transition, 2 practical programs were each approved two times.
*** Number includes 1 practical program with established nursing programs on 5 campuses, now approved as 5 individual nursing programs and 1 professional program with established programs on 5 campuses, now approved as 5 individual programs.

On-site surveys, collection and review of annual reports, review of improvement plans submitted by programs, decisions of national nursing accreditation bodies, and analysis of the National Council Licensure Examination (NCLEX®) data were used to evaluate each nursing education programs' compliance with statutes and rules. Analysis of all available data provides a basis for the education reports submitted to the Board for decision-making.

The Board requires oversight of programs that have first-time licensure examination (NCLEX®) success rates at 75% or below for a calendar year. During calendar years 2014 and 2015, twenty one (unduplicated count) nursing programs were below the minimum standard for 1, 2 or 3 years. Table 5 presents a comparison of programs below minimum standard for calendar years 2012 through 2015.

Table 5. Programs below minimum standard NCLEX® (National Council Licensure Examination)

Year(s) below minimum standard	2012	2013	2014	2015
1 year	4 (3 ADN, 1 Baccalaureate)	11 (1 PN, 6 ADN, 4 Baccalaureate)	7 (3 PN, 0 ADN, 4 Baccalaureate)	8 (1 PN, 6 ADN, 1 Baccalaureate)
2 consecutive years	2 (2 PN)	4 (3 ADN, 1 Baccalaureate)	3 (1 PN, 2 ADN, 0 Baccalaureate)	1 (1 PN)
3 consecutive years	0	0	3 (0 PN, 2 ADN, 1 Baccalaureate)	2 (1 PN and 1 ADN)
Total	6	15	13	11

All programs with first-time NCLEX® candidate success rates of 75 percent or less within a calendar year submitted plans of corrective action aas required by this rule. For programs below minimum standard for two consecutive calendar years, the Board conducted an on-site survey to determine progress on the previously submitted plan. Following the survey, revised plans of corrective action were submitted as required by rule. An on-site survey for compliance with all applicable rules and for the implementation of the revised plan of corrective action was required for the program below minimum standard for three consecutive calendar years.

Summary of New Rules Related to Nursing Education and Credentialing

New program approval rules were promulgated in 2011. These rules require all programs to hold national accreditation by January 1, 2018. Other key elements, such as compliance with submission of a designated minimum data set and meeting identified NCLEX® first-time success rates, continue as elements of regulatory oversight.

Receipts and Disbursements

Biennium	Total Receipts	Total Disbursements
July 1, 2014 – June 30, 2016	$13,260.405	$10,358,110
July 1, 2012 – June 30, 2014	$11,552,309	$9,374,288
July 1, 2010 – June 30, 2012	$10,854,823	$8,483,257
July 1, 2008 – June 30, 2010	$10,913,694	$8,872,707
July 1, 2006 – June 30, 2008	$10,032,253	$7,310,384

Fees by Type

Type of fee	Fee
APRN Initial Licensure	$105
RN and LPN Licensure by examination	$105
RN and LPN Re-examination	$60
RN and LPN Licensure by endorsement	$105
RN, LPN and APRN Registration renewal	$85
RN, LPN and APRN Reregistration	$105
RN and LPN Border State Registry	$50
Public Health Nurse certification	$30
Replacement license certificate	$20
Verification of licensure status	$20
Verification of examination scores	$20
Copy of microfilmed licensure application materials	$20
Nursing business registration initial application	$100
Nursing business registration annual application	$25
Practicing without APRN, RN and LPN current registration	Two times the amount of current registration renewal fee ($85) for any part of the first calendar month, plus the current registration renewal fee ($85) for any part of any subsequent month up to 24 months.
Practicing without current APRN certification	$200 for the first month or any part of month and $100 for each subsequent month or part thereof.
Auto verification service subscription	Fee is set according to sliding scale based on number of records included in the subscription, from $100 for 1-100 records to $1,000 for a subscription consisting of over 5,000 records.
Data requests	One cent per record included in the file, plus a $5 file creation fee.

Minnesota Board of Examiners for Nursing Home Administrators
Report of the Executive Director
July 1, 2014 – June 30, 2016

The Board of Examiners for Nursing Home Administrators (BENHA) continued in to fulfill its mission by completing year three and four of their strategic planning. As the only federally required health occupation board in Minnesota, the legislative requirement mandates a majority of board members be comprised not of nursing home administrators. The Board continues to influence optimal leadership requirements to promote residential models of care for tomorrow's elder care continuum.

Highlights for the past two years include the investment and active participation with the National Board of Long Term Care Administrators (NAB). This important partnership continued with the Executive Director serving as the Immediate Past Chair of the National Association of Boards (NAB) and Vice Chair of the Health Services Executive Task Force. Members of the BENHA also served on various national committees including the preparation of the national examination. On a national level, the licensure of Nursing Home Administration is being modified to reflect the growing continuum of care across the services and supports of the long term system. The Minnesota Board will seek to modify his statutory authority.

The Board continues to invest in the state approved Long Term Care Centers of Academic Excellence. Currently, eight Minnesota colleges and two border colleges are recognized for their work in creating leaders for new models of elder care throughout the upper Midwest and nationally. The board engaged in multiple meetings with these key stakeholders to modify current entry level administrator requirements being revised through formal rulemaking in 2016.

The Board advocates in its role of assuring leaders responsible for Minnesota long term care centers are ethical and resident centered in their decision making practices. Continued investment to cultivate new leaders for tomorrow's service delivery remains critical, even more so as challenging economic environments requires a continued strong investment and commitment. Quality leadership creates efficient and effective communities that care for our state's aging population.

Randy Snyder
Executive Director
Minnesota Board of Examiners for Nursing Home Administrators
651-201-2730
benha@state.mn.us

Board Members Serving During the Period 7/1/2014 — 6/30/2016

Name	Location	Appointment Status	Appt Date	Reappointment	Term Expires
Jennifer Pfeffer, LNHA	Mankato, MN	Professional Member	6/30/2006	3/24/2014 (second term)	
Jane Pederson, MD	Woodbury, MN	Professional Member	7/15/1996	5/15/2013 (fifth term)	
Nancy Tuders, RN	Grand Rapids, MN	Professional Member	5/15/2007	6/28/2015 (third term)	
Marilyn Reierson	Savage, MN	Public Member	1/2/2013		1/2/2017
Nathan J. Johnson, LNHA	Forest Lake, MN	Professional Member	1/2/2013		1/2/2017
H. Michael Tripple	St Paul, MN	Public Member	6/28/2015		1/7/2019
Katie Davis, LNHA	Albert Lea, MN	Proprietary Member	6/28/2015		1/7/2019
Steven Chies, LNHA	Coon Rapids, MN	Proprietary Member	6/28/2016		1/7/2020
Vanessa Allman	Minneapolis, MN	Public Member	9/18/2016		1/6/2020

The following are appointed by the Commissioners of Health and of Human Services and serve as non-voting designees of those commissioners:

Michelle Ness, MN Department of Health

Robert Held, MN Department of Human Services

The mission of the Minnesota Board of Examiners for Nursing Home Administrators is to promote the public's interest in quality care and effective services for residents of nursing home facilities by ensuring that liccensed administrators are qualified to perform their administrative duties.

Board staff

Randy Snyder, Executive Director

Jessica Schultz, Office Manager

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Licensure Activity

Total Number of persons licensed or registered as of June 30, 2016: 894

Number and Type of credentials issued or renewed

License Type	**Total Number** of persons licensed or registered as of **June 30, 2016** by license type	**Total Number** of persons licensed or registered as of **June 30, 2014** by license type	**Total Number** of persons licensed or registered as of **June 30, 2012** by license type	**Total Number** of persons licensed or registered as of **June 30, 2010** by license type	**Total Number** of persons licensed or registered as of **June 30, 2008** by license type
LNHA	*894*	*852*	*856*	*851*	*846*
TOTAL OF ALL LICENSE TYPES	*894*	*852*	*856*	*851*	*846*

Type of License / Credential	Number of Licenses Issued or **Renewed July 1, 2014** through ending June **30, 2016** by license type		Number of Credentials Renewed Online (# and per cent) during biennium ending **June 30, 2016**
	New MN License	Renewed License	
TOTAL	894	130	***(91.7%)***

Type of License / Credential	Number of Licenses Issued or **Renewed July 1, 2012** through ending **June 30, 2014** by license type		Number of Credentials Renewed Online (# and per cent) during biennium ending **June 30, 2014**
	New MN License	Renewed License	
TOTAL	103	***1709***	***5030 (90%)***

Licensure Activity (Continued)

Type of License / Credential (list all)	Number of Licenses Issued or Renewed **July 1, 2010** through ending **June 30, 2012** by license type		Number of Credentials Renewed Online (# and per cent) during biennium ending **June 30, 2012**
	New MN License	Renewed License	
TOTAL	***88***	1704	***(91.4%)***

Type of License / Credential (list all)	Number of Licenses Issued or Renewed **July 1, 2008** through ending **June 30, 2010** by license type		Number of Credentials Renewed Online (# and per cent) during biennium ending **June 30, 2010**
	New MN License	Renewed License	
TOTAL	***90***	1697	***(89.90%)***

Complaint Activity

Number of Complaints Received

Total Number of Complaints Received July 1, 2014 through June 30, 2016	Total Number of Complaints Closed July 1, 2014 through June 30, 2016
95	*91*

Total Number of Complaints Received July 1, 2012 through June 30, 2014	Total Number of Complaints Closed July 1, 2012 through June 30, 2014
96	*89*

Total Number of Complaints Received July 1, 2010 through June 30, 2012	Total Number of Complaints Closed July 1, 2010 through June 30, 2012
129	118

Total Number of Complaints Received July 1, 2008 through June 30, 2010	Total Number of Complaints Closed July 1, 2008 through June 30, 2010
132	120

Number and age of complaints open at the end of the period

Number of Complaints Open as of June 30, 2016	Age of Complaints Open as of June 30, 2016
6	< one year: 4 > one year: 2

Types of Complaints Received

Type of complaints received from July 1, 2014 – June 30, 2016	Number of complaints alleging this basis from July 1, 2014 – June 30, 2016*
Neglect of Care	29
Financial	17
Physical Abuse	6
Administration	12
Verbal/Mental	1
Quality of Care (MDH Survey)	19
Resident Rights	1
HPSP	1
Practice without a License	1
Sexual Abuse	2

*Some complaints allege more than one basis

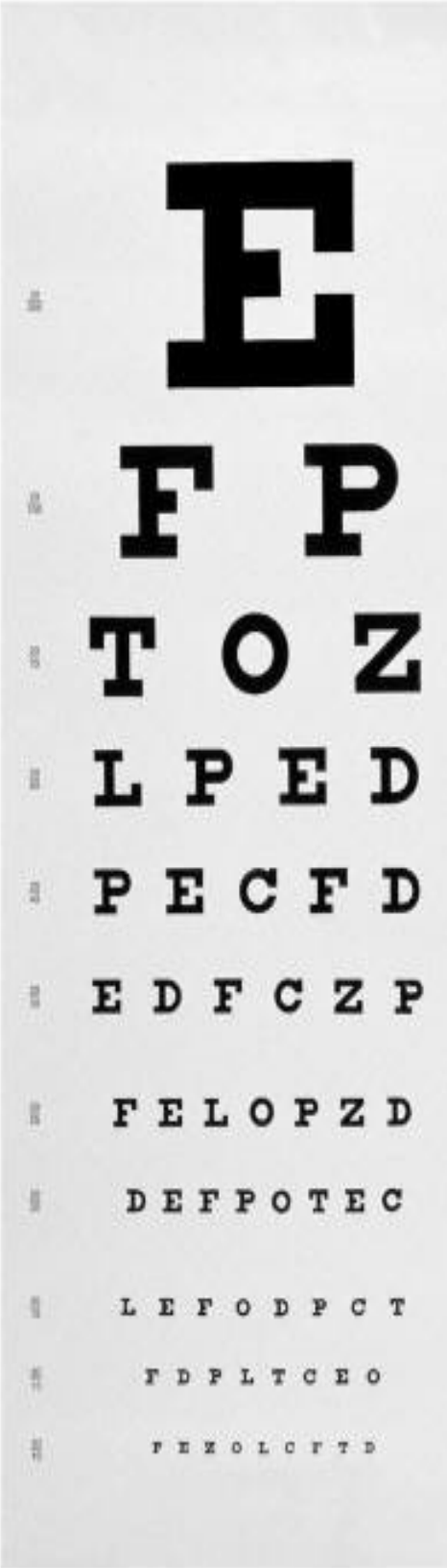
Receipts and Disbursements

Biennium	Total Receipts	Total Disbursements
July 1, 2014 to June 30, 2016	$445515	$298,868
July 1, 2012 to June 30, 2014	$423482	$304,405
July 1, 2010 to June 30, 2012	$422409	$259,359

Fees by Type

Type of Fee	**Fee**
Application	$150
Original License	$200
Annual Renewal	$200
Acting Administrator Permit	$250

Minnesota Board of Optometry
Report of the Executive Director
July 1, 2014 – June 30, 2016



The mission of the Board is public protection by striving to ensure Minnesota citizens receive quality optometric care from competent optometrists. Public protection through licensure and regulation underlies every activity and all functions of the Board.

The Board continues collaborative efforts for shared services between the group of seven small health licensing boards to leverage limited resources and uses the Administrative Services Unit (ASU) effectively for greater efficiency.

The Board website (www.optometryboard.state.mn.us) provides ready access to Online Annual License Renewals, Online address// phone change, Online reporting of continuing education, information about the status of individual Licensees, Complaint Forms, and Optometry Statutes and Rules.

The Board completed an extensive rewrite of all statutes in 2014-2015 with the Governor signing the statute revisions in May, 2015. From those statute revisions, the board is currently undergoing rulemaking and hopes to complete that work in 2017. The board is well represented at a national level with two Minnesota Optometrists representing two seats of the eight seat national board of directors of Optometry.

The Board staff consists of 0.875 FTE employees in the positions of Executive Director and Office Administrative Specialist.

The Board continues to provide high quality, customer focused, efficient, and cost effective services. Board members and staff are to be commended for exceptional dedication and hard work to meet the increasing demands and continue to provide service excellence.

Randy Snyder
Executive Director
Minnesota Board of Optometry
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Optometry.board@state.mn.us

Board Members Serving During the Period July 1, 2014 – June 30, 2016

Name	Location	Appointment Status	Appt Date	Reappointment	Term Expires
Roger Pabst, OD	Redwood Falls, MN	Professional Member	5/2005	3/2009,; 2/2013	1/2017
Patrick W. O'Neill, OD	Northfield, MN	Professional Member	11/2010	7/2011; 3/2015	1/2019
John Muellerleile, OD	Owatonna, MN	Professional Member	7/2011	3/2015	1/2019
Michelle Falk, OD	Woodbury, MN	Professional Member	11/2010	2/2014	1/2018
Don Sipola, OD	Virginia, MN	Professional Member	6/2012	2/2016	1/2020
Ron Czerepak	North St Paul, MN	Public Member	3/2015		1/2017
Kari Slotten	Apple Valley, MN	Public Member	2/2014	3/2015	1/2019

The mission of the Minnesota Board of Optometry is:
Promoting public interest in receiving quality optometric health care from competent licensed optometrists;
Protecting the public by ensuring that all licensed optometrists meet the educational and practical requirements specified in law; and
Protecting the public by setting standards for quality optometric health care.

Board Staff

Randy Snyder, Executive Director

Anna Hartsel, Office and Administrative Specialist, Senior

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Licensure Activity

Total Number of persons licensed or registered as of June 30, 2016: 1097

Number and Type of credentials issued or renewed

Type of License / Credential	Number of Licenses Issued or **Renewed July 1, 2014** through ending June **30, 2016** by license type		Number of Credentials Renewed Online (# and per cent) during biennium ending **June 30, 2016**
	New MN License	Renewed License	
Optometrist	*86*	*1094*	
TOTAL	***86***	1094	***(90%)***

Type of License / Credential	Number of Licenses Issued or **Renewed July 1, 2012** through ending **June 30, 2014** by license type		Number of Credentials Renewed Online (# and per cent) during biennium ending **June 30, 2014**
	New MN License	Renewed License	
Optometrist	*95*	*2063*	
TOTAL	95	***2063***	***(89%)***

Type of License / Credential	Number of Licenses Issued or Renewed **July 1, 2010** through ending **June 30, 2012** by license type		Number of Credentials Renewed Online (# and per cent) during biennium ending **June 30, 2012**
	New MN License	Renewed License	
Optometrist	*80*	*1999*	1081
TOTAL	***80***	***1999***	***1081 (54%)***

Licensure Activity (Continued)

Type of License / Credential	Number of Licenses Issued or **Renewed July 1, 2008** through **ending June 30, 2010** by license type		Number of Credentials Renewed Online (# and per cent) during biennium ending June **30, 2010**
	New MN License	Renewed License	
Optometrist	*61*	*2007*	970
TOTAL	***61***	***2007***	***970 (48%)***

Complaint Activity

Number of Complaints Received

Total Number of Complaints Received July 1, 2014 through June 30, 2016	Total Number of Complaints Closed July 1, 2014 through June 30, 2016
28	*18*

Number and age of complaints open at the end of the period

Number of Complaints Open as of June 30, 2016	Age of Complaints Open as of June 30, 2016
4	< one year: 4

Types of Complaints Received

Type of complaints received from July 1, 2014 – June 30, 2016	Number of complaints alleging this basis from July 1, 2014 – June 30, 2016*
Unprofessional conduct	15
Non-jurisdictional	3
Medical Records	3
Sexual Misconduct	3
Miscellaneous	4

*Some complaints allege more than one basis

Receipts and Disbursements

Biennium	Total Receipts	Total Disbursements
July 1, 2014 – June 30, 2016	$ 289,146	$ 300,353
July 1, 2012 – June 30, 2014	$ 253,311	$ 228,686
July 1, 2010 – June 30, 2012	$ 237,672	$ 230,977
July 1, 2008 – June 30, 2010	$ 237,598	$ 232,555

Fees by Type

Type of Fee	Fee
Professional Corporation	$100 initial report $25 annual report
Licensure Application	$160
Annual License Renewal	$130
Late Penalty Fee	$75
Duplicate/Replacement card	$10
CE Provider Application	$45
Emeritus Registration	$10
Endorsement Application	$160
Reinstatement Application	Varies
Replacement of Initial License Certificate	$12

Minnesota Board of Pharmacy
Report of the Executive Director
July 1, 2014 – June 30, 2016

Major Functions of the Board.

Setting educational and examination standards for initial and continuing licensure:

- Set licensure and internship requirements through the rules process.
- Review academic programs to determine if they meet requirements.
- Develop the state's jurisprudence examination to determine candidate knowledge of Minnesota statutes and rules governing pharmacy practice.
- Review continuing education programs submitted by sponsors and individuals to determine if they meet requirements.
- Review individual applicant and licensee documentation of completion of requirements for initial and continuing licensure.

Conducting inspections of all pharmacies, drug wholesalers, drug manufacturers and controlled substance researchers in the state.

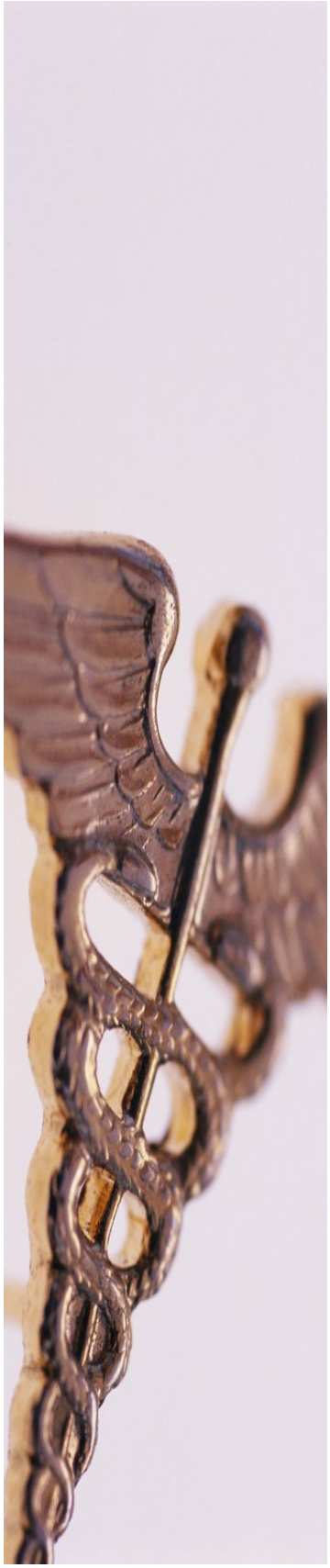
- Inspect all pharmacies located in the state of Minnesota to assure compliance with all statues and rules relating to prescription drug dispensing and the provision of pharmaceutical care.
- Inspect all wholesalers located in the state of Minnesota to assure compliance with all statues and rules relating to the storage and distribution of prescription and non-prescription drugs.
- Inspect all manufacturers located in the state of Minnesota to assure compliance with Current Good Manufacturing Practices.
- Inspect all controlled drug researchers located in the state of Minnesota to assure compliance with state and federal controlled substance statutes and regulations.

Responding to public and agency inquiries, complaints, and reports regarding licensure and conduct of applicants, registrants, and licensees.

- Accept complaints and inquiries from the public and health care providers and regulators.
- Decide whether a complaint or inquiry is jurisdictional and, if so, whether and what type of action to pursue to resolve the matter.
- Refer inquiries and complaints to other investigative, regulatory, or assisting agencies, as necessary.
- Respond to complainant and agency reports by informing the complainants/ agencies of action taken to resolve their complaints, while observing provisions of the data practices act regarding the legal status of data obtained during the course of an investigation and disciplinary proceeding.
-

Setting standards of practice and conduct for licensees and pursuing educational or disciplinary action with licensees, to ensure that standards are met.

- Set standards of conduct and a basis for disciplinary action through the rules process.
- Seek information directly from the licensee and obtain evidence and relevant information from other agencies in response to complaints or inquiries.
- Hold conferences with licensees to identify their role and responsibility in a matter under investigation.
- Provide applicant and licensee education to improve practice and prevent recurrence of problems.



Setting standards of practice and conduct for licensees and pursuing educational or disciplinary action with licensees, to ensure that standards are met. (Continued)

- Obtain voluntary agreement for disciplinary action or pursue disciplinary action through a due process, contested case hearing; defend disciplinary action in court if necessary.
- Referring cases, where appropriate, to the Health Professional Services Program.

Administering the State's Prescription Monitoring Program (PMP)

- Electronically collect data, on a daily basis, concerning controlled substance prescriptions from approximately 1,700 dispensers. (6 million prescriptions reported annually).
- Process applications from prescribers and pharmacists who want to access the PMP database through a secure Internet link.
- Cluster (i.e. link) profiles thought to be for a single individual who uses multiple names or addresses in an attempt to hide "doctor-shopping" behavior.
- Work with the Board's IT vendors to improve processes for the PMP.
- Make presentations to professional groups interested in learning about the PMP.

Provision of technical assistance to elected public officials, other state agencies, federal agencies and units of local government.

- Respond to requests from legislators for technical assistance concerning the practice of pharmacy, the distribution of pharmaceuticals, drug abuse and other related issues.
- Work with other state and federal agencies on issues concerning the practice of pharmacy, the distribution and disposal of pharmaceuticals, drug abuse, and other health care policy areas.
- Serve as consultants to licensees and registrants who have questions concerning practice standards, statutes and rules.
- Respond to requests from the public for information about the practice of pharmacy and related topics.

Emerging issues regarding the regulation of the practice of Pharmacy.

There are several emerging issues that the Board is tracking:

- Manufacturers and software developers continue to develop new devices and programs that automate pharmacy dispensing processes. These devices have been substantially changing how pharmacy is practiced and how drugs are dispensed to patients. The Board devotes a significant amount of resources to evaluating this new technology to ensure that it does not pose a threat to patients.

- Manufacturers continue to market automated drug distribution systems to pharmacies that serve residents of nursing homes and other long-term care facilities. Many of these systems were designed for use within pharmacies but are being adapted for placement within the long-term care facilities. In theory, these systems can reduce the wastage of drugs, reduce theft of controlled substances and improve efficiency in both pharmacies and long term care facilities. If designed and operated correctly, they might also reduce the number of drug-related errors that are made in long-term care facilities. However, if the design and operating procedures are not well thought out, the systems might cause an increase in the number of significant errors. Dozens of long-term care facilities in Minnesota now have these systems in place.

Report of the Executive Director (Continued)

Emerging Issues (Continued)

- Pharmacies continue to expand their offering of services such as immunizations and medication therapy management. This trend should result in improved public health by increasing the number of individuals who are immunized against various diseases and by helping to reduce adverse drug reactions and other medication-related problems. However, if these services are performed incorrectly, there can be a detrimental impact on patients.
- Legislation passed in 2016 allows pharmacies to place pharmaceutical waste collection receptacles within their stores and within long-term care facilities. Several dozen pharmacies are already collecting pharmaceutical waste. This should reduce the amount of drugs that end up contaminating ground water and reduce the amount of controlled substances that are available for abuse.
- Abuse of prescription drugs, particularly opioids, continues to be a significant problem. The Board continues to work with other state agencies to address this issue – as part of the State Opioid Oversight Project (SOOP). The SOOP was formed after several state agencies, including the Board, participated in a National Governor's Association Policy Academy on prescription drug abuse. As mentioned above, the Board implemented and administers the Prescription Monitoring Program, which is a tool that can be used to prevent "doctor-shopping" - which is one source of illegitimately used prescription drugs. In addition, the Board developed the legislation that allows pharmacies to collect unwanted pharmaceuticals – which is another source. The Board has also worked on legislation to increase access to naloxone, an opioid antagonist used to treat life-threatening opioid overdoses.
- The abuse of synthetic, "designer" drugs also continues to be a problem. These drugs can be extremely dangerous and their abuse has caused several deaths in Minnesota. Hundreds of other individuals have experienced significant adverse reactions after abusing these drugs, with many requiring treatment in emergency rooms. The Board has worked closely with legislators to make sure that these drugs are listed in Schedule I of the State's schedules of controlled substances. In addition, the Board is empowered to engage in the expedited rule-making process for the purpose of placing additional substances into Schedule I.
- The Board has been involved over the past two years with Minnesota Department of Health initiatives related to the issue of ensuring that the public has access to primary health care services, given a projected shortage of primary care health providers. The Board supports the concept that licensed health care professionals should be allowed to practice up to the level of their education and training.

Cody Wiberg, Pharm.D., M.S., R.Ph.
Executive Director
cody.wiberg@state.mn.us
(651)201-2825

Board Members Serving During the Period 7/1/2014 - 6/30/2016

Name	Location	Appointment Status	Appt Date	Reappointment	Term Expires
Stuart Williams	Minneapolis, MN	Public Member	7/11	6/15	1/19
Laura Schwartzwald	Brainerd, MN	Pharmacist Member	1/10	1/14	1/18
Karen Bergrud	Rochester, MN	Pharmacist Member	5/07	7/11	1/15
Kay Hanson	Brooklyn Park, MN	Pharmacist Member	7/04	3/08 and 1/12	1/16
Bob Goetz	Red Wing, MN	Pharmacist Member	12/11	1/12	1/16
Rabih Nahas	Orono, MN	Pharmacist Member	2/113		1/17
Kurt Henn	Wabasha, MN	Pharmacist Member	6/15		1/19
Joseph Stanek	Plymouth, MN	Pharmacist Member	8/15	1/16	1/20
Andrew Behm	Edina, MN	Pharmacist Member	1/16		1/17
James Bialke	Minneapolis, MN	Public Member	1/16		1/19
Samantha Jaworski	Andover, MN	Public Member	1/16		1/19
Mary Phipps	St Cloud, MN	Pharmacist Member	1/16		1/20

The Minnesota Board of Pharmacy exists to promote, preserve, and protect the public health, safety, and welfare by fostering the safe distribution of pharmaceuticals and the provision of quality pharmaceutical care to the citizens of Minnesota.

Board staff

Cody Wiberg, Executive Director

Beth Ferguson, Deputy Director

Candice Fleming, Surveyor

Leslie Kotek, Surveyor

Michele Mattila, Surveyor

Karen Schreiner, Surveyor

Steven Huff, Surveyor

Timothy Litsey, Surveyor

Ame Carlson, Surveyor

Brian Park, Legal Analyst

Patricia Eggers, State Program Administrator Supervisor*

LeeAnn Olson, Office and Administrative Specialist Senior*

Jennifer Fischer, Office and Administrative Specialist Senior

Colette Zelinsky, Office and Administrative Specialist Intermediate

Sharon Hollinrake, Office and Administrative Specialist

Judith Little, Office and Administrative Specialist

Mary Lorene Thompson, Office Specialist

Barbara Carter, State Program Administrator Coordinator

Melissa Winger, Office and Administrative Specialist Senior*

Katrina Howard, Pharmacist

Grace Park, Student Worker Clerical*

**No longer employed by Board. Replacements were hired after June 30, 2016.*

Minnesota Board of Pharmacy
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Website: www.pharmacy.mn.gov

Licensure Activity

Number and Type of credentials issued or renewed

Total Number of persons licensed or registered as of June 30, 2016: 48,953

Total Number of persons licensed or registered as of June 30, 2016
23,275 – Persons 4,142 – Facilities 21,536 – PMP Users

License Type	**Total Number** of persons licensed or registered as of **June 30, 2016** by license type	**Total Number** of persons licensed or registered as of **June 30, 2014** by license type	**Total Number** of persons licensed or registered as of **June 30, 2012** by license type	**Total Number** of persons licensed or registered as of **June 30, 2010** by license type	**Total Number** of persons licensed or registered as of **June 30, 2008** by license type
Active Pharmacists	8,620	8,057	7,727	7,356	6,724
Inactive Pharmacists	96	139	103	81	61
Emeritus Pharmacists	98	159	142	109	90
Pharmacy Technicians	10,760	9,887	9,041	8,552	8,114
Pharmacy	2,176	2,062	1,804	1,701	1,669
Wholesalers	1,234	1,274	1,146	1,067	974
Manufacturers	614	533	507	401	322
Medical Gas Distributors	119	100	86	68	47
Controlled Substance Researchers	17	15	339	498	387
Interns	1,680	1,792	1,476	498	1,166
Preceptors	2,003	1,824	1,604	1,456	NA
Prescription Monitoring Program Users	21,536	14,072	8,015	1,537	NA
TOTAL OF ALL LICENSE TYPES	**48,953**	**39,914**	**31,990**	**23,324**	**19,554**

Licensure Activity (Continued)

Type of License / Credential	Number of Licenses Issued or **Renewed July 1, 2014** through ending **June 30, 2016** by license type		Number of Credentials Renewed Online (# and per cent) during biennium ending **June 30, 2016**
	New MN License	Renewed License*	
Pharmacists	1044	8,581	7,987 – 93%
Pharmacy Technicians	5041	8,676	6,845 – 78%
Pharmacy	511	2,166	0
Wholesalers	269	1,171	0
Manufacturers	201	592	0
Medical Gas Distributors	42	109	0
Controlled Substance Researchers	9	15	0
Interns	NA	Not applicable	0
Prescription Monitoring Program Users	NA	Not applicable	0
TOTAL	**7117**	**21310**	**17,063 - 80%**

*Board of Pharmacy licenses and registrations are renewed annually. These numbers are for FY 2016.

Type of License / Credential	Number of Licenses Issued or **Renewed July 1, 2012** through ending **June 30, 2014** by license type		Number of Credentials Renewed Online (# and per cent) during biennium ending **June 30, 2014**
	New MN License	Renewed License*	
Pharmacists	869	8,544	7177 – 84%
Pharmacy Technicians	4395	10,531	7582 – 72%
Pharmacy	NA	2,331	0
Wholesalers	NA	1,436	0
Manufacturers	NA	649	0
Medical Gas Distributors	NA	107	0
Controlled Substance Researchers	NA	19	0
Interns	NA	Not applicable	0
Prescription Monitoring Program Users	NA	Not applicable	0
TOTAL	NA	**23617**	**14759 - 62.5%**

*Board of Pharmacy licenses and registrations are renewed annually. These numbers are for FY 2014.

Licensure Activity (Continued)

Type of License / Credential	Number of Licenses Issued or Renewed **July 1, 2010** through ending **June 30, 2012** by license type		Number of Credentials Renewed Online (# and per cent) during biennium ending **June 30, 2012**
	New MN License	Renewed License *	
Pharmacists	685	7,959	7322
Pharmacy Technicians	3957	10,378	7784
Pharmacy	NA	1,855	0
Wholesalers	NA	1,170	0
Manufacturers	NA	512	0
Medical Gas Distributors	NA	95	0
Controlled Substance Researchers	NA	31	0
Interns	NA	Not applicable	0
Prescription Monitoring Program Users	NA	Not applicable	0
TOTAL	**NA**	**22000**	**15106 – 68.7%**

*Board of Pharmacy licenses and registrations are renewed annually. These numbers are for FY 2012.

Type of License / Credential (list all)	Number of Licenses Issued or **Renewed July 1, 2008** through **ending June 30, 2010** by license type		Number of Credentials Renewed Online (# and per cent) during biennium ending June **30, 2010**
	New MN License	Renewed License*	
Pharmacists	738	7,564	6035 – 93%
Pharmacy Technicians	3328	8,618	6464 – 75%
Pharmacy	NA	1,706	0
Wholesalers	NA	1,075	0
Manufacturers	NA	408	0
Medical Gas Distributors	NA	71	0
Controlled Substance Researchers	NA	503	0
Interns	NA	Not applicable	0
Prescription Monitoring Program Users	NA	Not applicable	0
TOTAL	**NA**	**19945**	**12499 – 62.7%**

*Board of Pharmacy licenses and registrations are renewed annually. These numbers are for FY 2010.

Complaint Activity

Number of Complaints Received

Total Number of Complaints Received July 1, 2014 through June 30, 2016	Total Number of Complaints Closed July 1, 2014 through June 30, 2016
410	423

Total Number of Complaints Received July 1, 2012 through June 30, 2014	Total Number of Complaints Closed July 1, 2012 through June 30, 2014*
366	253

Total Number of Complaints Received July 1, 2010 through June 30, 2012	Total Number of Complaints Closed July 1, 2010 through June 30, 2012
220	248

Total Number of Complaints Received July 1, 2008 through June 30, 2010	Total Number of Complaints Closed July 1, 2008 through June 30, 2010
190	149

Number and age of complaints open at the end of the period

Number of Complaints Open as of June 30, 2016	Age of Complaints Open as of June 30, 2016
56	< one year
75	> One year

Complaint Activity (Continued)

Types of Complaints Received

Type of complaints received from July 1, 2014 – June 30, 2016	Number of complaints alleging this basis from July 1, 2014 – June 30, 2016*
Billing Issues/Fraudulent Billing	11
Child Support	1
Dispensing Error	55
Dispensing without Authorization	15
Chemical Dependency/Diversion	30
Failure to Counsel	6
Failure to Maintain Patient Confidentiality	2
Kickbacks	2
Other	76
Physical/Mental Impairment	4
Failure to renew registration on time	86
Unprofessional Conduct	121
Welfare Fraud	1

*Some complaints allege more than one basis

Receipts and Disbursements

Biennium	Total Receipts (Do not break down by each year; include combined receipts for the entire biennium)	Total Disbursements (Do not break down by each year; include combined disbursements for the entire biennium)
July 1, 2014 – June 30, 2016	5,525,140	5,476,855
July 1, 2012 – June 30, 2014	4,819,355	4,605,139
July 1, 2010 – June 30, 2012	3,876439	3,513,874
July 1, 2008 – June 30, 2010	3,150,817	3,105,018
July 1, 2006 – June 30, 2008	3,058,694	2,785,065

Fees by Type

Type of fee	Fee
Intern Affidavit	$20
New Technician	$37.50
Manufacturer Licensed Pharmacy	$150
Manufacturer Medical Gas	$185
Manufacturer Prescription	$235
Wholesaler Licensed Pharmacy	$150
Wholesaler Medical Gas	$185
Pharmacy Renewal	$145
Pharmacy Late Fee	$72.50
Pharmacist In Arrears	Varies
Pharmacist Eligibility Application	$145
Pharmacist Original Licensure	$145
Pharmacist Reciprocity	$240
Intern Registration	$37.50
Pharmacy Renewal	$225
Pharmacy Late	$112.50
Pharmacy In Arrears	Varies
Wholesaler Non-Prescription	$210
Wholesaler Late	Varies
Wholesaler In Arrears	Varies
Manufacturer Non-Prescription	$210
Manufacturer Late	Varies
Manufacturer In Arrears	Varies
Corporation Fee	$125 or $75
Drug Researcher	$75
Drug Researcher Late Fee	$37.50
Medical Gas Distributor License	$110
Medical Gas Distributor Late	$55
Duplicate License (Small)	$20
Duplicate Certificate (Large)	$30
Proceedings Costs	Varies
Service Charge	Varies
Technician Renewal	$37.50
Technician Late	$18.75
New Pharmacy License	$225
Wholesaler Prescription	$235
Credit Card Clearing	Varies
Private Grants	Varies
Federal Grants	Varies

Minnesota Board of Physical Therapy
Report of the Executive Director
July 1, 2014—June 30, 2016

The mission of the Board is to provide public protection by striving to ensure Minnesota citizens receive quality physical therapy services from competent physical therapists and physical therapist assistants. Public protection through licensure and regulation underlies every activity and all functions of the Board. The major functions of the Board are to ensure that applicants met the standards for licensure; ensure that licensees meet the standards for license renewal; to identify licensees who fail to maintain minimum standards for the provision of safe and quality care, and when warranted to provide appropriate disciplinary or corrective action; and to provide information and education to the public.

During this biennium, Executive Director, Stephanie Lunning, PT announced her retirement. The Board appointed a search committee to take on the process of selecting a candidate for the Executive Director position. In May 2015, the Board hired Marshall Shragg, MPH.

The Board and staff have successfully met remarkable challenges during this biennium. The number of licensees and complexity of complaint cases and investigations have continued to steadily increase. New graduate applicants are now testing on four fixed dates each year, changing the workflow for staff and board members. The Board implemented a new data base streamlining online processes for initial licensure, renewals and criminal background checks.

Continuing Competence remains an important focus for the Board. The Board is progressing through the rulemaking process for continuing competence activities in order to update the current continuing education rules.

The Board works cooperatively with other health regulatory boards to leverage development costs and resources to advance and maintain an integrated licensing and regulatory system, online services, and database. The boards have successfully worked together for over 15 years to provide an extremely functional, cost effective, and efficient electronic regulatory services for use by citizens, consumers, licensees, applicants, and Board staff.

The Board consistently provides high quality, customer focused, efficient, and cost effective services. Board members and staff are to be commended for their exceptional dedication and hard work to meet the increasing demands while continuing to provide public protection and service excellence.

Erin DeTomaso
Executive Director
Minnesota Board of Physical Therapy
612-627-5406
Physical.therapy@state.mn.us

Board Members Serving During the Period 7/1/2014 - 6/30/2016

Name	Location	Appointment Status	Appt Date	Reappointment	Term Expires
Christopher Adams, PTA	Plymouth, MN	Professional Member	06/20/2011	6/24/2015	01/7/2019
Kathy Fleischaker, PT	Eden Prairie, MN	Public Member	12/27/1999	1/7/2003; 9/4/2007; 6/20/2011	01/5/2015
Linda Gustafson, PT	Minnetonka, MN	Professional Member	03/05/2009	06/20/2011; 06/24/2015	01/07/2019
Bruce J Idelkope, MD	Minneapolis, MN	Professional Member	08/28/2000	01/01/2001; 01/03/2005; 03/05/2009; 04/07/2013	01/02/2017
Barbara Liebenstein	Dundas, MN	Public Member	07/7/2005	03/5/2009	01/7/2013
Julia McDonald, PTA	Otsego,MN	Public Member	03/26/2014		01/1/2018
Kimberly McGarry, PT	Rochester, MN	Public Member	04/7/2013		01/2/2017
Samantha Mohn-Johnsen, PT	Dultuh, MN	Professional Member	06/24/2015		01/7/2019
Debra Newel	St Paul, MN	Public Member	10/19/2009	06/20/2011	01/7/2019
Kathy Polhamus	North St Paul, MN	Public Member	09/4/2007	05/5/2010; 03/26/2014	01/1/2018
Steven Scherger, PT	Andover, MN	Professional Member	06/24/2015		01/7/2019
Debra Sellheim, PT	Minneapolis, MN	Professional Member	05/5/2010	03/26/2014	01/1/2018

The mission of the Board of Physical Therapy is to ensure that Minnesota citizens receive appropriate physical therapy services from competent physical therapists and physical therapist assistants.

Board Staff

Stephanie Lunning, Executive Director

Marshall Shragg, Executive Director

Erin DeTomaso, Assistant Executive Director

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Licensure Activity

Biennial Report for the Period July 1, 2014 – June 30, 2016

Total Number of persons licensed or registered as of June 30, 2016: 6,843

Number and Type of credentials issued or renewed

License Type	**Total Number** of persons licensed or registered as of **June 30, 2016** by license type	**Total Number** of persons licensed or registered as of **June 30, 2014** by license type	**Total Number** of persons licensed or registered as of **June 30, 2012** by license type	**Total Number** of persons licensed or registered as of **June 30, 2010** by license type	**Total Number** of persons licensed or registered as of **June 30, 2008** by license type
Physical Therapist	5,145	4,715	4,344	NA	NA
Physical Therapist Assistant	1,698	1,585	1,455	NA	NA
TOTAL OF ALL LICENSE TYPES	***6,843***	***6,300***	***5,799***	***5,422***	***4,670***

Number of Persons Licensed or Registered by license type

Type of License / Credential	Number of Licenses Issued or **Renewed July 1, 2014** through ending June **30, 2016** by license type		Number of Credentials Renewed Online during biennium ending **June 30, 2016**
	New MN License	Renewed License	
Physical Therapist	747	9,772	N/A
Physical Therapist Assistant	251	3265	N/A
TOTAL	**998**	**13,037**	**(94%)**]

Licensure Activity (Continued)

Type of License / Credential	Number of Licenses Issued or **Renewed July 1, 2012** through ending **June 30, 2014** by license type		Number of Credentials Renewed Online during biennium ending **June 30, 2014**
	New MN License	Renewed License	
Physical Therapist	655	N/A	N/A
Physical Therapist Assistant	242	N/A	N/A
TOTAL	**897**	**12,410**	**(93%)**

Type of License / Credential	Number of Licenses Issued or Renewed **July 1, 2010** through ending **June 30, 2012** by license type		Number of Credentials Renewed Online during biennium ending **June 30, 2012**
	New MN License	Renewed License	
Physical Therapist	488	N/A	N/A
Physical Therapist Assistant	173	N/A	N/A
TOTAL	**661**	**11,094**	**(92%)**

Type of License / Credential	Number of Licenses Issued or **Renewed July 1, 2008** through **ending June 30, 2010** by license type		Number of Credentials Renewed Online during biennium ending June **30, 2010**
	New MN License	Renewed License	
Physical Therapist	452	N/A	N/A
Physical Therapist Assistant	497	N/A	N/A
TOTAL	**1,301**	**10,385**	**(90%)**

Complaint Activity

Number of Complaints Received

Total Number of Complaints Received July 1, 2014 through June 30, 2016	Total Number of Complaints Closed July 1, 2014 through June 30, 2016
101	*88*

Total Number of Complaints Received July 1, 2012 through June 30, 2014	Total Number of Complaints Closed July 1, 2012 through June 30, 2014
80	*77*

Total Number of Complaints Received July 1, 2010 through June 30, 2012	Total Number of Complaints Closed July 1, 2010 through June 30, 2012
94	*64*

Total Number of Complaints Received July 1, 2008 through June 30, 2010	Total Number of Complaints Closed July 1, 2008 through June 30, 2010
104	*79*

Number and age of complaints open at the end of the period

Number of Complaints Open as of June 30, 2016	Age of Complaints Open as of June 30, 2016
21	< one year: 20
	> One year: 1

Complaint Activity (Continued)

Types of Complaints Received

Type of complaints received from July 1, 2014 – June 30, 2016	Number of complaints alleging this basis from July 1, 2014 – June 30, 2016*
Actions by another jurisdiction	2
Incompetency / unethical conduct	9
Unprofessional conduct	50
Impairment	11
Non-jurisdictional	
Failing to comply with CE requirement	1
Conviction of a felony, dishonesty/ fraud element	10
Practiced after Licensed expired	5
Sexual Misconduct/Boundaries	3
Miscellaneous	10

*Some complaints allege more than one basis

Receipts and Disbursements

Biennium	Total Receipts	Total Disbursements
July 1, 2014 – June 30, 2016	$1,230,305	$973,881
July 1, 2012 – June 30, 2014	$1,095,715	$880,670
July 1, 2010 – June 30, 2012	$977,302	$694,558
July 1, 2008 – June 30, 2010	$876,935	$747,775
July 1, 2006 – June 30, 2008	$828,155	$562,095

Fees by Type

Type of fee	Fee
PT and PTA Annual License Renewal	$60.00
PT and PTA Late Fee for Annual Renewal	$20.00
PT and PTA Initial Application	$100.00
PT and PTA Examination	$50.00
PT and PTA Temporary Permit Fee	$25.00
PT and PTA Duplicate License	$20.00
PT and PTA Certification of Licensure	$25.00
Continuing Education Course Review	$100.00

Board of Podiatric Medicine

Report of the Executive Director

July 1, 2014—June 30, 2016

It has been a very busy biennium!

There are currently 264 licensed Doctors of Podiatric Medicine (DPM) in Minnesota, including temporary permits. Just six years ago there were 222, or an 18% increase. Temporary permits are issued to DPM participating in one of the four Minnesota residency programs being offered. In the past several years, seven of the new licensees completing their residency program in Minnesota chose to practice here!

We only expect these trends to continue with an increased need for services and an aging population. Although the number of licensees has increased dramatically since 2009, complaints have not seen the same trend, pointing to an effective Complaint Review Process and educational component to licensure. Staffing remained constant even with the increased workload.

We are committed to the advancement of offering more and better online services to licensees and the public. Collaborative efforts for advancing and offering more online services have been a success in this biennium, with a newly created database system. In 2015 online renewals were implemented for the first time, with 38% of licensees utilizing the new system.

The Board is moving toward a standardized system of criminal background checks for licensees, and is working with state and federal agencies to ensure that such background checks are in compliance with all applicable statutes and regulations. Background checks will be implemented next year, once again contributing to continued public safety.

In 2014 the Board initiated legislative updates to strengthen our core mission of public protection. The following changes were enacted:

- increased the number of Continuing Medical Education (CME) hours required for license renewal from 30 CME to 40 CME every two years.
- required a re-entry program after being out of practice for greater than 2 years, as we were seeing more individuals taking a hiatus from practice and returning.
- required satisfactory completion of a clinical residency program. Statute stated completion of one year residency program and currently only three programs are approved by the Council of Podiatric Medicine Education. Without this update, a resident dismissed from their program after one year might have been able to be licensed here.

The Board members continue to provide high quality, customer focused, efficient, and cost effective services. They are to be commended for their exceptional dedication, time commitment and hard work that are required to serve on a State Board.

Ruth Grendahl
Executive Director
Board of Podiatric Medicine
612-548-2175
ruth.grendahl@state.mn.us

Board Members Serving During the Period 7/1/2014 - 6/30/2016

Name	Location	Appointment Status	Appt Date	Reappointment	Term Expires
Dr. Nicole Bauerly	Brooklyn Park, MN	Professional Member	2013		2017
Dr. Kimberly Bobbitt	St Paul, MN	Professional Member	2015		2019
Dr. Stephen Powless	Edina, MN	Professional Member	1995		2019
James Nack	Madison Lake, MN	Professional Member	2004		2020
Schelli McCabe	St Peter, MN	Professional Member	2014		2018
Margaret Schreiner	Eagan, MN	Public Member	2013		2017
Judith Swanholm	St Paul, MN	Public Member	2007		2018

The mission of the Board of Podiatric Medicine is to protect the public by: extending the privilege to practice to qualified applicants and investigating complaints relating to the competency or behavior of individual licensees or registrants.

Board Staff

Ruth Grendahl, Executive Director

Minnesota Board of Podiatric Medicine
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Phone: 612-548-2175
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Website: http://mn.gov/health-licensing-boards/podiatric-medicine

Licensure Activity

Biennial Report for the Period July 1, 2014 – June 30, 2016

Total Number of persons licensed or registered as of June 30, 2016: 263

Number and Type of credentials issued or renewed

License Type	**Total Number** of persons licensed or registered as of **June 30, 2016** by license type	**Total Number** of persons licensed or registered as of **June 30, 2014** by license type	**Total Number** of persons licensed or registered as of **June 30, 2012** by license type	**Total Number** of persons licensed or registered as of **June 30, 2010** by license type
DPM—Doctor of Podiatric Medicine	246	238	224	207
Temporary Permits	17	21	15	15
TOTAL OF ALL LICENSE TYPES	263	259	239	222

Number of Persons Licensed or Registered by license type

		# of Licenses Issued or Renewed 7/1/14 through 6/30/16 by license type		# of Credentials Renewed Online during FY16* and %
Type of License	New MN Licenses Issued	# of Renewed Licenses 7/1//14 through 6/30/16	# of Renewed Licenses 7/1/15 through 6/30/16*	
DPM	21	239	137	50
Temporary Permit	14	20	10	7
TOTAL	*35*	*259*	*147*	*57- 39%*

*FY16 - first year online renewals were available

	Type of License	# of Licenses Issued or Renewed 7/1/12 through 6/30/14 by license type		# of Credentials Renewed Online during biennium ending 6/30/14
		New MN License	Renewed License	
	DPM	29	231	
	Temporary Permits	16	20	
TOTAL		45	251	*0*

Licensure Activity (Continued)

	Type of License	# of Licenses Issued or Renewed 7/1/10 through 6/30/12 by license type		# of Credentials Renewed Online during biennium ending 6/30/12
		New MN License	Renewed License	
	DPM	25	205	
	Temporary Permits	10	20	
TOTAL		*35*	*225*	*0*

	Type of License	# of Licenses Issued or Renewed 7/1/08 through ending 6/ 30/10 by license type		# of Credentials Renewed Online during biennium ending 6/30/10
		New MN License	Renewed License	
	DPM	*16*	*194*	
	Temporary Permits	*10*	*20*	
TOTAL		*26*	214	*0*

Complaint Activity

Number of Complaints Received

Total Number of Complaints Received July 1, 2014 through June 30, 2016	Total Number of Complaints Closed July 1, 2014 through June 30, 2016
10	6

Total Number of Complaints Received July 1, 2014 through June 30, 2016	Total Number of Complaints Closed July 1, 2014 through June 30, 2016
13	30

Total Number of Complaints Received July 1, 2014 through June 30, 2016	Total Number of Complaints Closed July 1, 2014 through June 30, 2016
31	20

Total Number of Complaints Received July 1, 2014 through June 30, 2016	Total Number of Complaints Closed July 1, 2014 through June 30, 2016
19	28

Number and age of complaints open at the end of the period

# of Complaints Open as of 6/30/16	Age of Complaints Open as of 6/30/16
4	3 < one year
1 - Under Investigation	1 > One year

Receipts and Disbursements Data

Biennium	Total Receipts	Total Disbursements
July 1, 2014 – June 30, 2016	$222,170	$186,535
July 1, 2012 – June 30, 2014	$207,640	$181,393
July 1, 2010 – June 30, 2012	$202,988	$158,188
July 1, 2008 – June 30, 2010	$185,149	$158,326

Fees by Type

Type of fee	Fee
License Application	$600
License Renewal	$600
Temporary Permit - Annual	$250
Reinstatement	$650
License Verification	$30
Professional Firms – Annual	$25
Miscellaneous	$25

Minnesota Board of Psychology
Report of the Executive Director
July 1, 2014—June 30, 2016

This biennium, the Minnesota Board of Psychology (Board) focused on technology, simplification, increased educational offerings, and stakeholder engagement to Achieve its mission, which promotes access to safe, competent and ethical psychological services in Minnesota.

In early 2015, the Board focused on technology. The Board launched online services for all applications and agency processes. The Board's new database leverages Innovative use of technology to advance efficient processes. Users of the system Agree and the Board has had over 95% adoption rate within the first year. The Board also implemented a new website platform to simplify user access to relevant Board information.

The Board contributed to advances in public protection by providing leadership for the planning, development, launch, and continued oversight of the health-related licensing boards (HLBs) first Criminal Background Check (CBC) Program. Since July 2015, when the Board's first applicant went through the criminal history records check, the CBC Program has successfully conducted 130 criminal history record checks for first time applicants to this Board. The Board's advances in public protection also extend to the creation of a Public Advisory Committee (PAC) to facilitate collaboration between licensed psychologists, family law attorneys, alternative dispute resolution professionals, judges, and public members on challenges that arise when psychological services are rendered in the family law system.

The Board further developed its educational programming and offered approximately 16 free Continuing Education (CE) activities between 2015 and 2016. In 2015, the Board's annual conference highlighted the importance of license mobility and explored the proposed Inter-Jurisdictional Compact (PSYPACT). In 2016, the Board invited the Department of Health and HealthForce Minnesota to an all day summit on the State of Minnesota's Mental Health Workforce Plan. The board also made agency history when it participated in a legal case before the Minnesota Supreme Court as *Amicus Curiae,* or "friend of the court." As the Board advances public protection through licensure, regulation, and education for the benefit of the public, we invite you to join us by sharing feedback, attending a meeting, participating in our open public processes as we work to make access to safe, competent, and ethical psychological services a reality for all Minnesota citizens.

Angelina M. Barnes
Executive Director
Minnesota Board of Psychology
612-548-2100
Psychology.board@state.mn.us

Board Members Board Members Serving During the Period 7/1/2014 - 6/30/2016

Name	Location	Appointment Status	Appt Date	Reappointment	Term Expires
Scott A. Fischer, Ph.D., LP	Mahtomedi, MN	Doctoral Member	06/30/2012	08/28/2016	1/6/2020
Rajakumar David, Psy.D., LP	Eagan, MN	Licensed Psycholoist Member	06/28/2010	06/28/2016	10/28/2016
Jeffrey L. Leichter, Ph.D, LP	Detroit Lakes, MN	Doctoral Member	06/30/2011	05/27/2014	1/1/2018
Amelia Versland , Ph.D, LP	Hastings, MN	Doctoral Member	05/7/2014	06/28/2015	1/7/2019
Jack Rusinoff, MA, LP	St Paul, MN	Masters Member	06/28/2016		1/6/2020
Anne William-Wengerd, MA, LP	Minneapolis, MN	Masters Member	06/28/2015		1/7/2019
Jennifer Robbins, JD	Bloomington, MN	Public Member	06/28/2015		01/07/2019
Roger Boughton, EdD	Austin, MN	Public Member	11/10/2013		01/02/2017
Carole Stiles, LICSW	Rochester, MN	Public Member	05/07/2014		01/01/2018
Patricia Stankovitch, Psy.D, LP	Minneapolis, MN	Masters Training Program Member	08/10/2010		07/06/2016
Deborah Fisher, Psy.D., LP	Edina, MN	Doctoral Training Program	06/30/2012		01/26/2016
Patricia Orud, MA, LP	St Paul, MN	Masters Member	06/30/2012		09/05/2014
Stuart Williams, JD	St Louis Park, MN	Public Member	10/04/2014		01/05/2015

Current Board Members

Name	Location	Appointment Status	Appt Date	Reappointment	Term Expires
Scott A. Fischer, Ph.D., LP	Mahtomedi, MN	Doctoral Member	06/30/2012	8/28/2016	1/6/2020
Jeffrey L. Leichter, Ph.D, LP	Detroit Lakes, MN	Doctoral member	06/30/2011	5/27/2014	1/1/2018
Amelia Versland , Ph.D, LP	Hastings, MN	Doctoral member	05/7/2014	6/28/2015	1/7/2019
Jack Rusinoff, MA, LP	St Paul, MN	Masters Member	06/28/2016		1/6/2020
Anne William-Wengerd, MA, LP	Minneapolis, MN	Masters Member	06/28/2015		1/7/2019
Jennifer Robbins, JD	Bloomington, MN	Public Member	06/28/2015		01/07/2019
Roger Boughton, EdD	Austin, MN	Public Member	11/10/2013		01/02/2017
Carole Stiles, LICSW	Rochester, MN	Public Member	05/07/2014		01/01/2018

The mission of the Board of Psychology is to protect the public through licensure, regulation, and education to promote access to safe, competent, and ethical psychology service.

Board staff

Staff Members Serving During the Period 7/1/2014 – 06/30/2016

Angelina M. Barnes, Executive Director, Executive Secretary
Leo Campero, Assistant Executive Director, State Program Administrator Supervisor
Rachael Kolles, Office Manager, Management Analyst I
Scott W. Payne, Compliance Director, Investigator Senior
Joshua Bramley, Compliance Specialist, Customer Service Support Specialist Intermediate
Kelly Finn-Searles, Continuing Education and Renewals, State Program Administrator
Joe Abboud, Licensure Lead, Office & Administrative Specialist Principal
Jonathan Hillman, Front Desk Support, Office & Administrative Specialist
Stephanie Nevilles, Office Administrative Assistant, Office Specialist
Aaron Ackerman, Office Manager, Management Analyst I
Irene Franco, Office Administrative Assistant, Office Specialist
Josh Bostrom, Office Administrative Assistant, Office Specialist
Jessica Rundell, Office Manager, Management Analyst I
Jodi Payne, Office Administrative Assistant, Office Specialist
Paula Laudenbach, Licensure Specialist, Office & Administrative Specialist
Regina Lee, Office Administrative Assistant, Office Specialist
Rufus Gulick, Front Desk Support, Office & Administrative Specialist
Sara Bostrom, Office Administrative Assistant, Office Specialist
Sarah Holloway, Office Administrative Assistant, Office Specialist

Current Staff Members

Angelina M. Barnes, Executive Director, Executive Secretary
Leo Campero, Assistant Executive Director, State Program Administrator Supervisor
Rachael Kolles, Office Manager, Management Analyst I
Scott W. Payne, Compliance Director, Investigator Senior
Joshua Bramley, Compliance Specialist, Customer Service Support Specialist Intermediate
Kelly Finn-Searles, Continuing Education and Renewals, State Program Administrator
Joe Abboud, Licensure Lead, Office & Administrative Specialist Principal
Jonathan Hillman, Front Desk Support, Office & Administrative Specialist
Stephanie Nevilles, Office Administrative Assistant, Office Specialist

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Licensure Activity

Total number of persons licensed or registered as of June 30, 2016: 3,835

Number and type of credentials issued or renewed

License Type	**Total Number** of persons licensed or registered as of **June 30, 2016** by license type	**Total Number** of persons licensed or registered as of **June 30, 2014** by license type	**Total Number** of persons licensed or registered as of **June 30, 2012** by license type	**Total Number** of persons licensed or registered as of **June 30, 2010** by license type	**Total Number** of persons licensed or registered as of **June 30, 2008** by license type
Psychologist	*3,835*	*3,768*	*3,789*	*3,471*	*3,863*
TOTAL OF ALL LICENSE TYPES	***3,835***	***3,768***	***3,789***	***3,471***	***3,863***

Type of License / Credential	Number of Licenses Issued or Renewed **July 1, 2014** through ending June **30, 2016** by license type		Number of Credentials Renewed Online (# and per cent) during biennium ending **June 30, 2016**
	New MN License	Renewed License	
Psychologist	233	3,564	
TOTAL	***233***	***3,564***	***1,537 (67%) (online renewals did not start until July 1st, 2015.***

Type of License / Credential	Number of Licenses Issued or Renewed **July 1, 2012** through ending **June 30, 2014** by license type		Number of Credentials Renewed Online (# and per cent) during biennium ending **June 30, 2014**
	New MN License	Renewed License	
Psychologist	272	3,595	0 (online renewal not yet available)
TOTAL	***272***	***3,595***	***0 (0%)***

Licensure Activity (Continued)

Number and type of credentials issued or renewed

Type of License / Credential	Number of Licenses Issued or Renewed **July 1, 2010** through ending **June 30, 2012** by license type		Number of Credentials Renewed Online (# and per cent) during biennium ending **June 30, 2012***
	New MN License	Renewed License	
Psychologist	228	*3,527*	0 (online renewal not yet available)
TOTAL	***228***	***3,527***	***0 (0%)***

Type of License / Credential	Number of Licenses Issued **or Renewed July 1, 2008** through **ending June 30, 2010** by license type		Number of Credentials Renewed Online (# and per cent) during biennium ending **June 30, 2010**
	New MN License	Renewed License	
Psychologist	333	3,449	0 (online renewal not yet available)
TOTAL	***333***	***3,449***	***0 (0%)***

Complaint Activity

Number of Complaints Received

Total Number of Complaints Received July 1, 2014 through June 30, 2016	Total Number of Complaints Closed July 1, 2014 through June 30, 2016
444	*308*

Total Number of Complaints Received July 1, 2012 through June 30, 2014	Total Number of Complaints Closed July 1, 2012 through June 30, 2014
249	*208*

Total Number of Complaints Received July 1, 2010 through June 30, 2012	Total Number of Complaints Closed July 1, 2010 through June 30, 2012
272	*266*

Total Number of Complaints Received July 1, 2008 through June 30, 2010	Total Number of Complaints Closed July 1, 2008 through June 30, 2010
261	*261*

Number and age of complaints open at the end of the period

Number of Complaints Open as of June 30, 2016	Age of Complaints Open as of June 30, 2016
136	< one year: 271
	> One year: 14

Complaint Activity (Continued)

Types of Complaints Received

Type of complaints received from July 1, 2014 – June 30, 2016	Number of complaints alleging this basis from July 1, 2014 – June 30, 2016*
Engaged in unprofessional conduct	158
Failure to limit practice areas to areas of competence	74
Conclusions and reports violations including: failure to base assessments on procedures sufficient to substantiate conclusions, to include information required in a report, to properly administer and/or interpret psychological reports.	72
Violated a statute or rule, or order the board is empowered to enforce relating to the practice of psychology including: reporting the abuse of minors/vulnerable adults, professional firms, CE audit, discipline in another jurisdiction, licensure and renewal.	53
Exploited the professional relationship with a current client	40
Provided psychological services while in a multiple relationship.	40
Engaged in conduct likely to deceive or defraud the public or the board including public statements of a false or misleading nature or misrepresenting the nature of services.	33
Failure to safeguard private client information	30
Failure to properly maintain and provide access to client records including failure to provide the client bill of rights and failure to obtain informed consent.	51
Failure to provide qualifying supervision or failure to practice psychology under qualifying supervision.	49
Engaged in misconduct with a supervisee including exploitation or misuse of the professional relationship, sexual behavior, or failure to protect the welfare of a supervisee.	45
Provided psychological services with impaired objectivity or bias	42
Engaged in the practice of psychology without a license	25
Engaged in sexual behavior with a client or former client (reasonably interpreted or sexual contact)	19
Inability to offer psychological services with reasonable skill and safety due to a mental or physical impairment.	12
Other (failure to make clear the prescriber, failure to coordinate care, failure to resolve organizational conflicts, failure to terminate a client in a manner that minimizes harm)	10

*Some complaints allege more than one violation of the Psychology Practice Act

Receipts and Disbursements

Biennium	Total Receipts	Total Disbursements
July 1, 2014 – June 30, 2016	$2,333,818.35	$1,578,770.52
July 1, 2012 – June 30, 2014	$2,228,168.97	$1,589,308.64
July 1, 2010 – June 30, 2012	$2,158,323.61	$1,530,711.09
July 1, 2008 – June 30, 2010	$2,276,734.75	$1,385,297.76
July 1, 2006 – June 30, 2008	$2,306,517.00	$1,284,745.16

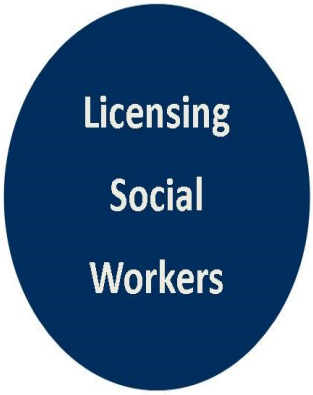
Fees by Type

Type of fee	Fee
Licensed Psychologist Renewal	$500.00
Licensed Psychologist Renewal Late Fee	$250.00
Professional Responsibility Examination	$150.00
Examination for the Professional Practice of Psychology	$150.00
Licensed Psychologist for Licensure	$500.00
Convert Master's to Doctoral LP Licensure	$150.00
Guest Licensure	$150.00
Verification of Licensure	$20.00
Professional Firm — Registration	$100.00
Professional Firm — Annual Report	$25.00
Continuing Education Sponsor	$80.00
EBC Fee—FBI	$17.00
CBC Fee—BCA	$15.00
Emeritus Registration	$150.00
Licensed Psychologist Relicensure	$500.00

Minnesota Board of Social Work
Report of the Executive Director
July 1, 2014—June 30, 2016

The mission of the Minnesota Board of Social Work (BOSW) is to ensure residents of Minnesota quality social work services by establishing and enforcing professional standards. Fifteen volunteer Board Members, including five public members, provide oversight to make certain we meet the needs of citizens and promote a diverse and qualified workforce.

The Board keeps Minnesotans safe by 1) licensing qualified social workers, 2) investigating and resolving complaints when services do not meet standards, and 3) providing outreach and education. We collaborate with state and federal agencies, utilize technology to streamline business processes, and offer online services. Regular strategic planning sets outcome-based priorities and promotes efficient and accountable services. The Board is funded entirely by fees collected, and receives no general fund dollars.
The demand for our services has grown in response to an increased number of licensees, applications and complaints requiring investigation and resolution. Despite a significant increase in the core public safety services provided, the Board has not increased fee creased fees by 30% since 2006. The Board currently regulates 14,498 licensees with a staff of 10.6 FTEs providing licensing, compliance, complaint resolution, and operations services to a variety of customers and stakeholders.



- From 2010 to 2016: the total number of licensees has increased by 19%; applications received by 50%; and licenses granted by 60%.
- From 2010 to 2016: the total number of complaints received has increased by 291%; complaints resolved by 240%; and board actions taken by 245%.

Highlights from the January 1, 2014 through December 31, 2016 biennium include:

- Held a first ever, in-person educational event for newly grandfathered licensees which expanded the number of licensed social workers in the workforce from diverse populations
- Collaborated with other Health Licensing Boards and MN.IT to develop and implement a common platform licensing data base system and online services for greater efficiencies, enhanced security, and improved customer service
- Charge a board committee to "review the complaint resolution process with regard to transparency, accountability, cost savings, and possible efficiencies"
- Passed 2015 legislation to create a new license late fee as a non-disciplinary remedy for unlicensed practice, and the Emeritus Active License, as an option for retired, "seasoned" professionals to continue to be engaged in the workforce, rather than retiring and discontinuing social work practice, and to respond to mental health workforce shortages.

Report of the Executive Director (Continued)
July 1, 2014—June 30, 2016

Strategic goals for the next biennium include:

- Implement the 2015-2018 Board Strategic Plan initiatives
- Gain legislative approval for the FY2018-FY2019 biennial budget including a critical fee increase, and additional funding for staffing, timely complaint resolution, technology, and education and outreach initiatives to ensure strategic continuation of services to meet the Board's public safety mission
- Create a "jurisprudence" examination to better educate applicants and licensees about their professional responsibilities and the Board's regulations
- Conduct continuous process improvement and streamline internal business processes

I wish to sincerely thank and commend both our volunteer Board Members, who contribute approximately 1,500 hours per year of combined service, expertise, leadership, and passion, and our competent Board Staff. The Board remains mission-driven and continues to provide high quality services to help ensure public safety for Minnesotans.

Kate Zacher-Pate, LSW
Executive Director
Minnesota Board of Social Work
612-617-2103
Social.work@state.mn.us

Board Members Serving During the Period 7/1/2014 - 6/30/2016

Name	Location	Appointment Status	Appt Date	Reappointment	Term Expires
Karen Arnold Truax, LISW	St Paul, MN	Professional Member	6/2013		Resignation Date: 8/2014
Michael Aguirre, LGSW	Plymouth, MN	Professional Member	6/2013		Resignation Date: 11/2014
Emily Bastian, LICSW	Minneapolis, MN	Professional Member	6/2016		1/2020
Christine Black-Hughes, LICSW	Eagle Lake, MN	Professional Member	4/2008	4/2012	1/2016
Larene Broome	St Paul, MN	Public Member	1/2015		7/2016
Jason Collins, LSW	Willmar, MN	Professional Member	6/2014		1/2018
Laurie Dahley, LISW	Vegas, MN	Professional Member	6/2015		1/2017
Donna Ennis, LSW	Superior, WI	Professional Member	6/2013		1/2017
Jill Grover, LGSW	Hudson, WI	Professional Member	6/2015	6/2016	1/2020
David Hallman, LSW	Moorhead, MN	Professional Member	2/2004	4/2008; 6/2015	1/2016
Angela Hirsch, LICSW	Minneapolis, MN	Professional Member	4/2008	6/2011;6/2013	1/2019
Rosemary Kassekert	St Paul, MN	Public Member	7/2005	3/2009; 6/2013	1/2017
Kathy Lombardi	St Paul, MN	Professional Member	6/2014		1/2018
Susan McGeehan	Minneapolis, MN	Professional Member	6/2014		1/2018
Kenneth Middlebrooks	Plymouth, MN	Public Member	7/2003	6/2011; 6/2015	1/2019
Carol Payne, LSW	Clear Lake, MN	Professional Member	6/2013		1/2017
Ruth Richardson	Eagan, MN	Public Member	3/2009		1/2017
Lori Thompson, LSW	Brainerd, MN	Professional Member	6/2016		1/2020
Mary Weaver	Underwood, MN	Public Member	10/2014		1/2017

The mission of the Minnesota Board of Social Work is to protect the public's health and safety by assuring that the people who practice medicine or as an allied health professional are competent, ethical practitioners with the necessary knowledge and skills appropriate to their title and role.

Board Staff

Staff Members Serving During the Period 7/1/201 — 6/30/2016

Shirley Akpelu, Office and Administrative Specialist
Louis Hoffman, Investigator Senior
Sheryl McNair, LICSW, State Program Administrator Supervisor Principal
Cheryl Pittelkow, Office and Administrative Specialist Intermediate
Roberta Schneider, Office and Administrative Specialist
Lauren Stevens, Office and Administrative Specialist Intermediate

Current Staff Members

Kate Zacher-Pate, LSW, Executive Director
Tralana Davis, Office and Administrative Specialist Intermediate
Megan Gallagher, Investigator Senior
Laura Kahle-Burbey, Office and Administrative Specialist
Michelle Kramer-Prevost, LISW, State Program Administrator Senior
Kate Manley, Office and Administrative Specialist
Connie Oberle, Office Services Supervisor 2
Colleen Vossen, Office and Administrative Specialist Intermediate
Jodi White, Office and Administrative Specialist Intermediate

Minnesota Board of Social Work
University Park Plaza Building
2829 University Avenue SE, Suite 340
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FAX: 612-617-2103
Email: social.work@state.mn.us
Website: http://mn.gov/health-licensing-boards/social-work/

Licensure Activity

Total Number of persons licensed or registered as of June 30, 2016: 14,429

Number and Type of credentials issued or renewed

License Type	**Total Number** of persons licensed or registered as of **June 30, 2016** by license type	**Total Number** of persons licensed or registered as of **June 30, 2014** by license type	**Total Number** of persons licensed or registered as of **June 30, 2012** by license type	**Total Number** of persons licensed or registered as of **June 30, 2010** by license type	**Total Number** of persons licensed or registered as of **June 30, 2008** by license type
Licensed Social Worker (LSW)	6110	*5814*	*5724*	*5785*	*5194*
Licensed Graduate Social Worker (LGSW)	2339	*2000*	*1658*	*1576*	*1291*
Licensed Independent Social Worker (LISW)	782	*787*	*768*	*793*	*697*
Licensed Independent Clinical Social Worker (LICSW)	5198	*4746*	*4450*	*4044*	*3357*
TOTAL OF ALL LICENSE TYPES	**14429**	***13347***	***12600***	***12198***	***10539***

Type of License / Credential	Number of Licenses Issued or **Renewed July 1, 2014** through ending June **30, 2016** by license type		Number of Credentials Renewed Online (# and per cent) during biennium ending **June 30, 2016**
	New MN License	Renewed License	
Licensed Social Worker (LSW)	1164	4643	
Licensed Graduate Social Worker (LGSW)	1143	1643	
Licensed Independent Social Worker (LISW)	85	591	
Licensed Independent Clinical Social Worker (LICSW)	693	4243	
TOTAL	3085	**11120**	**9674 (87%)**

Licensure Activity (Continued)

Number and Type of credentials issued or renewed

Type of License / Credential	Number of Licenses Issued or **Renewed July 1, 2012** through ending **June 30, 2014** by license type		Number of Credentials Renewed Online (# and per cent) during biennium ending **June 30, 2014**
	New MN License	Renewed License	
Licensed Social Worker (LSW)	920	4443	
Licensed Graduate Social Worker (LGSW)	971	1337	
Licensed Independent Social Worker (LISW)	89	577	
Licensed Independent Clinical Social Worker (LICSW)	529	3926	
TOTAL	2509	10283	**8124 (79%)**

Type of License / Credential	Number of Licenses Issued or Renewed **July 1, 2010** through ending **June 30, 2012** by license type		Number of Credentials Renewed Online (# and per cent) during biennium ending **June 30, 2012**
	New MN License	Renewed License	
Licensed Social Worker (LSW)	777	4804	
Licensed Graduate Social Worker (LGSW)	874	1130	
Licensed Independent Social Worker (LISW)	68	618	
Licensed Independent Clinical Social Worker (LICSW)	612	3571	
TOTAL	2331	10123	**7339 (72.5%)**

Licensure Activity (Continued)

Number and Type of credentials issued or renewed

Type of License / Credential	Number of Licenses Issued or **Renewed July 1, 2008** through **ending June 30, 2010** by license type		Number of Credentials Renewed Online (# and per cent) during biennium ending June **30, 2010**
	New MN License	Renewed License	
Licensed Social Worker (LSW)	698	4567	
Licensed Graduate Social Worker (LGSW)	639	1025	
Licensed Independent Social Worker (LISW)	53	654	
Licensed Independent Clinical Social Worker (LICSW)	519	3334	
TOTAL	1909	9580	**5030 (90%)**

Complaint Activity

Number of Complaints Received

Total Number of Complaints Received July 1, 2014 through June 30, 2016	Total Number of Complaints Closed July 1, 2014 through June 30, 2016
775	*598*

Total Number of Complaints Received July 1, 2012 through June 30, 2014	Total Number of Complaints Closed July 1, 2012 through June 30, 2014
298	*339*

Total Number of Complaints Received July 1, 2010 through June 30, 2012	Total Number of Complaints Closed July 1, 2010 through June 30, 2012
310	*282*

Total Number of Complaints Received July 1, 2008 through June 30, 2010	Total Number of Complaints Closed July 1, 2008 through June 30, 2010
229	*245*

Number and age of complaints open at the end of the period

Number of Complaints Open as of June 30, 2016	Age of Complaints Open as of June 30, 2016
182	< one year: 170
	> One year: 12

Complaint Activity (Continued)

Types of Complaints received from July 1, 2014 through June 30, 2016

Type of complaints received from July 1, 2014 – June 30, 2016	Number of complaints alleging this basis from July 1, 2014 – June 30, 2016*
Boundaries	44
Confidentiality	24
Failure to Report	5
Fee/Payment Issue	17
Human Services/Revenue Violation	7
Impairment	88
Licensure	79
Non-Jurisdictional	37
Other	14
Practice Issue	259
Sexual Conduct or Harassment	14
Unlicensed Practice/ Misrepresentation	181
Violation of Board Order	6

*Some complaints allege more than one basis

Receipts and Disbursements

Biennium	Total Receipts	Total Disbursements
July 1, 2014 – June 30, 2016	$2,559,693	$2,593,148
July 1, 2012 – June 30, 2014	$2,324,527	$2,363,353
July 1, 2010 – June 30, 2012	$2,107,134	$2,163,090
July 1, 2008 – June 30, 2010	$2,073,517	$2,095,367
July 1, 2006 – June 30, 2008	$2,069,236	$1,952,499

Fees by Type

Type of fee	Fee
Licensure by Endorsement Application	$85.00
LSW, LGSW, LISW, LICSW Application	$45.00
Temporary License	$50.00
LSW License, Renewal, and Temporary Leave	$81.00 (24 month fee)
LGSW License, Renewal, and Temporary Leave	$144.00 (24 month fee)
LISW License, Renewal, and Temporary Leave	$216.00 (24 month fee)
LICSW License, Renewal, and Temporary Leave	$238.50 (24 month fee)
Late Renewal Fee	¼ Renewal Fee
Emeritus Active License	½ Renewal Fee
Emeritus Inactive License	$43.20
Duplicate License Certificate	$30.00
Duplicate License Card	$10.00
License Verification	$15.00

Minnesota Board of Veterinary Medicine
Report of the Executive Director
July 1, 2014—June 30, 2016

The Board of Veterinary Medicine's public website continues to evolve with more online features to offer licensees. These include the ability to renew a veterinary license, request license verifications, review board actions as well as to update address and contact information. These features are linked to a new database system launched during the biennium. Continuing education approval forms, news and links to professionally related entities are provided. The website also allows citizens of Minnesota to check the license status of veterinarians and download complaint forms. The public can review disciplinary and corrective actions taken to remediate complaints against veterinarians. Cease and Desist Orders for the unlicensed practice of veterinary medicine are also on the website. Other frequently visited features include a list of answers for frequently asked questions and a description of the complaint investigation process.

The Board's newsletter continues to feature timely topics related to the regulation of veterinary medicine, including contributions from other regulatory agencies and organizations. The 3 newsletters per year are distributed electronically to all licensed veterinarians three times and accessible to both veterinarians and the public on the Board's website. The Board's executive director leads further educational efforts for veterinarians in collaboration with the Minnesota Veterinary Medical Association through presentations and articles in their newsletter. She provides instruction related to licensing at the College of Veterinary Medicine. She assisted in the development and delivery of education for veterinarians and other government personnel about veterinary support for law enforcement in the investigation of animal cruelty.

Ongoing review and approval of continuing education programs for veterinarians insures that licensees receive and are given credit for attendance at scientifically based, pertinent programs. This growth in knowledge improves their practice of veterinary medicine and standard of care. The Minnesota Board of Pharmacy has joined the Board of Veterinary Medicine to educate veterinarians on a number of regulatory issues pertaining to drug compounding and use of antibiotics in food animals. Meetings to clarify state and federal policies on this topic have been held

with licensees from diverse facets of practice, including veterinarians practicing under regulations of the Minnesota Racing Commission. As a result of these interactive meetings, a practical guideline for the use of compounded medications in urgent situations has been issued by the Board of Pharmacy, and is available on the Board of Veterinary Medicine's website.

The number of licensees, complaints and the complexity of the complaints increased significantly. Board staff in FY 2016 continued to operate at 2.0 FTE. Investigators from the Office of the Attorney General have been instrumental in bringing important, detailed information to the Board via interviews and on-site visits to veterinary clinics implicated in complaints. The Board also collaborates with the Board of Chiropractic Examiners in complaints related to chiropractic treatment of animals. Prompt response to inquiries and service to the citizens of Minnesota remain top priorities to enhance public protection through the regulation of veterinary medicine.

Public protection and public safety continues to be the mission and top priority of the Minnesota Board of Veterinary Medicine. The board has effectively and efficiently met this mission with the resources derived from licensing fees and spending authority appropriated by the legislature and the Governor. The Minnesota Board of Veterinary Medicine and the 14 other allied health licensing boards in Minnesota are sole profession, collaborative state agencies that continue to be recognized nationally as a model for organizational structure and regulation. Several Board of Veterinary Medicine members also serve on national committees and boards that influence the regulation of veterinary medicine throughout North America.

Julia Wilson, DVM
Diplomate, American College of Veterinary Internal Medicine
Executive Director,
Minnesota Board of Veterinary Medicine
651-201-2844
Vet.med@state.mn.us

Board Members Serving During the Period 7/1/2014 — 6/30/2016

Name	Location	Appointment Status	Appt Date	Reappointment	Term Expires
Barbara Fischley, DVM	North Branch, MN	Professional Member1/20/2010	3/2014	3/2014	1/2018
Jody Grote	Richfield, MN	Public Member	5/4/2016		1/2020
Amy Kizer, DVM	Savage, MN	Professional Member	6/24/2015		1/2019
John Lawrence, DVM	Lonsdale, MN	Professional Member	6/30/2011		1/5/2015
Mary Olson, DVM	Mora, MN	Professional Member	3/2/2014		1/2018
David Richter	Montgomery, MN	Public Member	4/2/2013		1/2017
Ronald Swiggum, DVM	St Charles, MN	Professional Member	6/30/2011	1/2016	1/2020
Sharon Todoroff	Columbus, MN	Public Member	3/19/2012		1/4/2016
Michelle Vaughn, DVM	Richfield, MN	Professional Member	6/30/2011	1/2015	1/2019

Current Board Members

Name	Location	Appointment Status	Appt Date	Reappointment	Term Expires
Barbara Fischley, DVM	North Branch, MN	Professional Member1/20/2010	3/2014	3/2014	1/2018
Jody Grote	Richfield, MN	Public Member	5/4/2016		1/2020
Amy Kizer, DVM	Savage, MN	Professional Member	6/24/2015		1/2019
Mary Olson, DVM	Mora, MN	Professional Member	3/2/2014		1/2018
David Richter	Montgomery, MN	Public Member	4/2/2013		1/2017
Ronald Swiggum, DVM	St Charles, MN	Professional Member	6/30/2011	1/2016	1/2020
Michelle Vaughn, DVM	Richfield, MN	Professional Member	6/30/2011	1/2015	1/2019

The mission of the Minnesota Board of Veterinary Medicine is to promote, preserve, and protect the health, safety, and welfare of the public and animals through the effective control and regulation of the practice of veterinary medicine.

Board staff

Dr. Julia Wilson, Executive Director

Mollie Brucher, State Program Administrator

Minnesota Board of Veterinary Medicine
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FAX: 651-201-2842
Email: vet.med@state.mn.us
Website: http://mn.gov/boards/veterinary-medicine/

Licensure Activity

Total Number of persons licensed or registered as of June 30, 2016: 3,330

Number and Type of credentials issued or renewed

License Type	**Total Number** of persons licensed or registered as of **June 30, 2016** by license type	**Total Number** of persons licensed or registered as of **June 30, 2014** by license type	**Total Number** of persons licensed or registered as of **June 30, 2012** by license type	**Total Number** of persons licensed or registered as of **June 30, 2010** by license type	**Total Number** of persons licensed or registered as of **June 30, 2008** by license type
Veterinarian	3,330	3,249	3,182	3,114	NA
TOTAL OF ALL LICENSE TYPES	***3,330***	***3,249***	***3,182***	***3,114***	***NA***

Type of License / Credential	Number of Licenses Issued or **Renewed July 1, 2014** through ending June **30, 2016** by license type		Number of Credentials Renewed Online (# and per cent) during biennium ending **June 30, 2016**
	New MN License	Renewed License	
Veterinarian	346	3,212	2,687
TOTAL	***346***	***3,212***	***2,687 (84%)***

Type of License / Credential (list all)	Number of Licenses Issued or **Renewed July 1, 2012** through ending **June 30, 2014** by license type		Number of Credentials Renewed Online (# and per cent) during biennium ending **June 30, 2014**
	New MN License	Renewed License	
Veterinarian	330	3,121	
TOTAL	***330***	***3,121***	***2,705 (87%)***

Licensure Activity (Continued)

Number and Type of credentials issued or renewed

Type of License / Credential	Number of Licenses Issued or Renewed **July 1, 2010** through ending **June 30, 2012** by license type		Number of Credentials Renewed Online (# and per cent) during biennium ending **June 30, 2012**
	New MN License	Renewed License	
Veterinarian	255	2,927	
TOTAL	***255***	***2,927***	***2,429 (83%)***

Type of License / Credential	Number of Licenses Issued or **Renewed July 1, 2008** through **ending June 30, 2010** by license type		Number of Credentials Renewed Online (# and per cent) during biennium ending June **30, 2010**
	New MN License	Renewed License	
Veterinarian	276	2,874	
TOTAL	***276***	***2,874***	***2,278 (80%)***

Complaint Activity

Number of Complaints Received

Total Number of Complaints Received July 1, 2014 through June 30, 2016	Total Number of Complaints Closed July 1, 2014 through June 30, 2016
175	*143*

Total Number of Complaints Received July 1, 2012 through June 30, 2014	Total Number of Complaints Closed July 1, 2012 through June 30, 2014
148	*114*

Total Number of Complaints Received July 1, 2010 through June 30, 2012	Total Number of Complaints Closed July 1, 2010 through June 30, 2012
145	*132*

Total Number of Complaints Received July 1, 2008 through June 30, 2010	Total Number of Complaints Closed July 1, 2008 through June 30, 2010
148	*111*

Number and age of complaints open at the end of the period

Number of Complaints Open as of June 30, 2016	Age of Complaints Open as of June 30, 2016
22	< one year: 11
	> One year: 11 The numbers from these two rows (1,100 + 300) should = Number of complaints open as of June 30, 2016 (1,400)

Complaint Activity (Continued)

Types of Complaints received from June 30, 2014 through June 30, 2016

Type of complaints received from July 1, 2014 – June 30, 2016	Number of complaints alleging this basis from July 1, 2014 – June 30, 2016*
Incompetence	58
Unprofessional Conduct	46
Criminal Conviction	15
Unlicensed Practice	23
Mental Health	2
Inadequate Continuing Education Hours	20

*Some complaints allege more than one basis

Receipts and Disbursements

Biennium	Total Receipts	Total Disbursements
July 1, 2014 – June 30, 2016	$374,573	$227,482
July 1, 2012 – June 30, 2014	$353,399	$199,451
July 1, 2010 – June 30, 2012	$341,215	$178,495
July 1, 2008 – June 30, 2010	$324,525	$169,494

Fees by Type

Type of fee	Fee
Jurisprudence Examination	$50
Application	$50
Initial License	$200
Criminal Background Check	$34.75
Biennial Active License Renewal	$200
Biennial Inactive License Renewal	$100
Temporary Permit	$50
Late fee (Inactive renewal)	$50
Late fee (Active renewal)	$100
Professional Firm Registration	$100
Professional Firm Annual Report	$25
Duplicate License	$10
Mailing List	$100
CE Sponsor Approval	$50
License Verification	$25