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4658.0700 MEDICAL DIRECTOR.

Subpart 1. **Designation.** A nursing home must designate a physician to serve as medical director.

Subp. 2. **Duties.** The medical director, in conjunction with the administrator and the director of nursing services, must be responsible for:

A. the development of resident care policies and procedures that are to be approved by the licensee;

B. implementation of resident care policies;

C. the development of standards of practice for medical care to provide guidance to attending physicians;

D. the medical direction and coordination of medical care in the nursing home, including serving as liaison with attending physicians, and periodic evaluation of the adequacy and appropriateness of health professional and supportive staff and services to meet the medical needs of residents;

E. surveillance of the health status of the nursing home's employees as it relates to the performance of their assigned duties;

F. periodic advisement to the director of nursing services to ensure a quality level of delegated medical care provided to residents; and

G. participation, or designation of another physician for participation, on the quality assessment and assurance committee as required by part [4658.0070](#).

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4658.0705 MEDICAL CARE AND TREATMENT.

Subpart 1. **Physician supervision.** A nursing home must ensure that each resident has a physician designated to authorize and supervise the medical care and treatment of the

resident during the resident's stay in the nursing home, and must ensure that another physician is available to supervise the resident's medical care when the attending physician is unavailable.

Subp. 2. Availability of physicians for emergency and advisory care.

A. A nursing home must provide or arrange for the provision of physician services 24 hours a day, in case of an emergency, and to act in an advisory capacity.

B. The name and telephone number of the emergency physician must be readily available at all times.

C. A nursing home must develop and maintain policies and procedures regarding obtaining medical intervention when the resident's attending physician or the emergency physician does not respond to a request for medical care or is not available in a timely manner.

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4658.0710 ADMISSION ORDERS AND PHYSICIAN EVALUATIONS.

Subpart 1. **Physical examination.** A resident must have a current admission medical history and complete physical examination performed and recorded by a physician, physician assistant, or nurse practitioner within five days before or within seven days after admission.

Subp. 2. **Admission orders.** A nursing home must have physician orders for a resident's admission and immediate care at the time of admission.

Subp. 3. **Frequency of physician evaluations.**

A. A resident must be evaluated by a physician at least once every 30 days for the first 90 days after admission, and then whenever medically necessary. A physician visit is considered timely if it occurs within ten days after the date the visit was required.

B. Except as provided in this item, all required physician visits must be made by the physician personally. At the option of the physician, required visits after the initial visit may alternate between personal visits by the physician and

visits by a physician assistant or nurse practitioner according to parts [5600.2600](#) to [5600.2670](#), chapters 6330 and 6340, and Minnesota Statutes, sections [147.34](#) and [148.235](#).

Subp. 4. **Physician visits.** At each visit, a physician or physician's designee must:

A. review the resident's comprehensive plan of care, including medications and treatments, and progress notes;

B. write, sign, and date physician progress notes;
and

C. sign and date all orders.

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4658.0715 MEDICAL INFORMATION FOR CLINICAL RECORD.

A physician or physician designee must provide the

following information for the clinical record:

A. the report of the admission history and physical examination;

B. the admitting diagnosis;

C. a description of the general medical condition, including disabilities and limitations;

D. a report of subsequent physical examinations;

E. instructions relative to the resident's total program of care;

F. written orders for all medications with stop dates, treatments, rehabilitations, and any medically prescribed special diets;

G. progress notes;

H. any advanced directives; and

I. condition on discharge or transfer, or cause of death.

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4658.0720 PROVIDING DAILY ORAL CARE.

Subpart 1. **Daily oral care plan.** A nursing home must establish a daily oral care plan for each resident consistent with the results of the comprehensive resident assessment.

A. A resident's daily oral care plan must indicate whether or not the resident has natural teeth or wears removable dentures or partials. It must also indicate whether the resident is able to maintain oral hygiene independently, needs supervision, or is dependent on others.

B. A nursing home must provide a resident with the supplies and assistance necessary to carry out the resident's daily oral care plan. The supplies must include at a minimum: toothbrushes, fluoride toothpaste, mouth rinses, dental floss, denture cups, denture brushes, denture cleaning products, and denture adhesive products.

C. A nursing home must make the daily oral care plan available to the attending dentist before each checkup, and must modify the plan according to the dentist's, dental hygienist's, or other dental practitioner's directions.

Subp. 2. **Labeling dentures.** A nursing home must label full and partial dentures with the resident's name or other identifiers within seven days of admission.

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4658.0725 PROVIDING ROUTINE AND EMERGENCY ORAL HEALTH SERVICES.

Subpart 1. **Routine dental services.** A nursing home must provide, or obtain from an outside resource, routine dental services to meet the needs of each resident. Routine dental services include dental examinations and cleanings, fillings and crowns, root canals, periodontal care, oral surgery, bridges and removable dentures, orthodontic procedures, and adjunctive

services that are provided for similar dental patients in the community at large, as limited by third party reimbursement policies.

Subp. 2. **Annual dental visit.**

A. Within 90 days after admission, a resident must be referred for an initial dental examination unless the resident has received a dental examination within the six months before admission.

B. After the initial dental examination, a nursing home must ask the resident if the resident wants to see a dentist and then provide any necessary help to make the appointment, on at least an annual basis. This opportunity for an annual dental checkup must be provided within one year from the date of the initial dental examination or within one year from the date of the examination done within the six months before admission.

Subp. 3. **Emergency dental services.**

A. A nursing home must provide, or obtain from an outside resource, emergency dental services to meet the needs of each resident. Emergency dental services include services needed to treat: an episode of acute pain in teeth, gums, or

palate; broken or otherwise damaged teeth; or any other problem of the oral cavity, appropriately treated by a dentist, that requires immediate attention.

B. When emergency dental problems arise, a nursing home must contact a dentist within 24 hours, describe the dental problem, and document and implement the dentist's plans and orders.

Subp. 4. **Dental records.** For each dental visit, the clinical record must include the name of the dentist or dental hygienist, date of the service, specific dental services provided, medications administered, medical or dental consultations, and follow-up orders.

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4658.0730 NURSING HOME REQUIREMENTS.

Subpart 1. **Training.** Nursing home staff providing daily

oral care must be trained and competent to provide daily oral care for residents.

Subp. 2. **Written agreement.** A nursing home must maintain a written dental provider agreement with at least one dentist, licensed by the Board of Dentistry, who agrees to provide:

A. routine and emergency dental care for the nursing home's residents;

B. consultation on the nursing home's oral health policies and procedures; and

C. oral health training for nursing home staff.

Subp. 3. **Making appointments.** A nursing home must assist residents in making dental appointments and arranging for transportation to and from the dentist's office.

Subp. 4. **On-site services.** A nursing home must arrange for on-site dental services for residents who cannot travel, if those services are available in the community.

Subp. 5. **List of dentists.** A nursing home must maintain a list of dentists in the service area willing and able to provide routine or emergency dental services for the nursing home's

residents. Copies of the list must be readily accessible to nursing personnel.

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4658.0750 PENALTIES FOR PHYSICIAN AND DENTAL SERVICES RULE VIOLATIONS.

Penalty assessment will be assessed on a daily basis for violations of parts [4658.0700](#) to [4658.0730](#) and are as follows:

- A. part [4658.0700](#), subpart 1, \$100;
- B. part [4658.0700](#), subpart 2, items A to F, \$300;
- C. part [4658.0700](#), subpart 2, item G, \$100;
- D. part [4658.0705](#), subpart 1, \$300;
- E. part [4658.0705](#), subpart 2, item A, \$300;

- F. part [4658.0705](#), subpart 2, item B, \$100;
- G. part [4658.0705](#), subpart 2, item C, \$300;
- H. part [4658.0710](#), subpart 1, \$350;
- I. part [4658.0710](#), subpart 2, \$300;
- J. part [4658.0710](#), subpart 3, item A, \$350;
- K. part [4658.0710](#), subpart 3, item B, \$300;
- L. part [4658.0710](#), subpart 4, \$100;
- M. part [4658.0715](#), \$350;
- N. part [4658.0720](#), subpart 1, \$300;
- O. part [4658.0720](#), subpart 2, \$100;
- P. part [4658.0725](#), subpart 1, \$350;
- Q. part [4658.0725](#), subparts 2 and 3, \$300;
- R. part [4658.0725](#), subpart 4, \$100;

S. part [4658.0730](#), subparts 1 to 4, \$300; and

T. part [4658.0730](#), subpart 5, \$100.

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