

SF 2546 (Pappas): Statewide Pension Systems and St. Paul Teachers Retirement Fund Association; Adds Advance Practice Registered Nurse (APRN) to the list of professionals permitted to recommend a disability determination.

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Introduction

- Affected Plan:** Pension plans administered by the Minnesota State Retirement System (MSRS), Public Employees Retirement Association (PERA), Teachers Retirement Association (TRA), and St. Paul Teachers Retirement Fund Association (SPTRFA)
- Brief Description:** The bill inserts definitions of “APRN” and inserts “APRN” into the lists of professionals permitted to perform various functions in the disability determination and review process and makes technical or administrative changes.
- Attachment:** [Amendment S2546-1A](#)
[Draft engrossment](#) of SF 2546 with Amendment S2546-1A

Background

Use of Medical Professionals in the Disability Process.

MSRS, PERA, TRA, and SPTRFA (collectively referred to here as the “Pension Systems”) use medical professionals at different points in their disability determination process. Each plan has a slightly different disability process but generally the process used by the Pension Systems is the following:

1. A plan member applies for a disability benefit. The application must include medical reports signed by a physician or another medical professional.
2. The executive director or the contracted medical advisor for the plan may refer the applicant for an independent medical exam where a medical professional will evaluate the applicant and make a recommendation regarding the disability determination.
3. Once a disability is granted, the executive director may periodically require the disabled member to provide medical evidence of the member’s continuing disability.

In several places, the law specifies the type of medical professional that is permitted or required to be involved at the different points in the process. Over the years, the Legislature has expanded the lists of types of medical professionals used by the Pension Systems to include physicians, chiropractors, and psychologists; for some plans the list includes podiatrists, physician assistants, and nurse practitioners. Nurse practitioners are the newest addition and were added to the chapter governing MSRS in the 2018 Omnibus Pension bill.¹

Advanced Practice Registered Nurse (APRN)

APRN is a term used for a medical professional in one of four advanced roles: Certified Nurse Practitioner, Certified Nurse Midwife, Clinical Nurse Specialist, and Certified Registered Nurse Anesthetist. APRNs are licensed to practice by the Minnesota Nursing Board and certified by a national nurse certification organization. Minnesota Statutes further provide:

The "practice of advanced practice registered nursing" means the performance of an expanded scope of nursing in at least one of the recognized advanced practice registered nurse roles for at least one population focus. The scope and practice standards of an advanced practice registered nurse are defined by the national professional nursing organizations specific to the practice as a clinical nurse specialist, nurse-midwife, nurse practitioner, or registered nurse anesthetist in the population focus. The scope of advanced practice registered nursing includes, but is not limited to, performing acts of advanced assessment, diagnosing, prescribing, and ordering. The practice includes functioning as a primary care provider, direct care provider, case manager, consultant, educator, and researcher.²

Amendment S2546- 1A

Amendment S2546-1A is the result of discussion between representatives from the APRN Coalition and the Pension Systems to get the bill into a form agreeable to both parties. The amendment makes three types of changes:

1. The amendment removes APRN from provisions authorizing the pension plan to use a medical advisor or describing the duties or role of a medical advisor;
2. The amendment inserts new language into each definition of APRN to specify that APRNs are licensed by the Board of Nursing and must practice within the scope of their licensure.
3. The amendment inserts four new sections making technical changes to provisions governing the disability process for SPTRFA and adding the authority to use a medical advisor.

¹ Laws of Minnesota 2018, chapter 211, article 9, section 7.

² Minnesota Statutes, section 148.171, subdivision 13.

Section by Section Summary of SF 2546 as Amended by S2546- 1A

- Section 1** amends the definition section for MSRS by inserting “APRN” as a new defined term.
- Section 2** adds “APRN” to various lists of types of medical professionals authorized to perform an examination to determine eligibility for a disability benefit for the MSRS General State Employees Retirement Plan.
- Section 3** Section 3 adds “APRN” to various lists of types of medical professionals authorized to perform an examination to determine eligibility for a disability benefit for the MSRS Correctional State Employees Retirement Plan.
- Section 4** amends the definition section for the State Patrol Retirement Plan by inserting a new defined term, “APRN.”
- Section 5** adds “APRN” to a list of types of medical professionals authorized to perform an examination to determine eligibility for a disability benefit for the State Patrol Retirement Plan and makes technical changes.
- Section 6** amends the definition section for the chapter governing PERA by inserting “APRN” as a new defined term.
- Section 7** adds “APRN” to a list of types of medical professions authorized to sign a report submitted to PERA by a disability applicant.
- Section 8** adds “APRN” to a list of types of medical professions authorized to provide evidence to PERA showing “adequate proof” of a disability.
- Section 9** amends the definition section for the chapter governing TRA by inserting “APRN” as a new defined term.
- Section 10** adds “APRN” to a list of types of medical professions authorized to make reports to TRA showing evidence of a disability.
- Section 11** adds “APRN” to a list of types of medical professions authorized to make reports to TRA showing evidence of a disability and makes technical changes.
- Section 12** strikes “licensed chiropractors” and “licensed psychologists” from a list of types of medical professionals that the TRA medical advisor can designate to examine a disability benefit applicant, leaving only “licensed physicians.” This change reflects what is in the laws governing the other pension plans.
- Section 13** amends the definition section for the chapter governing SPTRFA by inserting “APRN” as a new defined term.

Section 14 amends the definition section for the chapter governing SPTRFA by inserting “Medical expert” as a new defined term. Medical expert means a licensed physician, licensed chiropractor, APRN, or licensed psychologist.

Section 15 replaces lists of types of medical professionals authorized to make reports showing evidence of a disability for SPTRFA with the new defined term “medical expert.” The section makes various technical and conforming changes.

Section 16 establishes a new subdivision in the section governing disability for SPTRFA. The new subdivision authorizes SPTRFA to contract with a medical advisor, which is consistent with the authority granted to the other pension plans.

Section 17 replaces lists of types of medical professionals authorized to make reports showing evidence of a disability for SPTRFA with the new defined term “medical expert.” The section also removes a requirement that a periodic medical examination be made at the disability benefit recipient’s residence and makes various technical and conforming changes.

Sections 1 to 17 are effective the day following final enactment.

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