

**SENATE  
STATE OF MINNESOTA  
NINETY-SECOND SESSION**

**S.F. No. 2546**

(SENATE AUTHORS: PAPPAS)

DATE  
05/14/2021

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OFFICIAL STATUS  
Introduction and first reading  
Referred to State Government Finance and Policy and Elections

1.1 A bill for an act  
1.2 relating to retirement; Minnesota State Retirement System, Public Employees  
1.3 Retirement Association, Teachers Retirement Association, and St. Paul Teachers  
1.4 Retirement Fund Association; authorizing advanced practice registered nurses  
1.5 (APRNs) to provide disability assessments; amending Minnesota Statutes 2020,  
1.6 sections 352.01, by adding a subdivision; 352.03, subdivisions 8, 9; 352.113,  
1.7 subdivision 4; 352.95, subdivision 4; 352B.011, by adding a subdivision; 352B.10,  
1.8 subdivision 4; 353.01, by adding a subdivision; 353.03, subdivision 3; 353.031,  
1.9 subdivisions 3, 8; 354.05, by adding a subdivision; 354.07, subdivision 2; 354.48,  
1.10 subdivisions 4, 6, 6a; 354A.011, by adding a subdivision; 354A.36, subdivisions  
1.11 4, 6.

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

1.13 Section 1. Minnesota Statutes 2020, section 352.01, is amended by adding a subdivision  
1.14 to read:

1.15 Subd. 27. **APRN.** "APRN" means advanced practice registered nurse as defined in  
1.16 section 148.171, subdivision 3.

1.17 Sec. 2. Minnesota Statutes 2020, section 352.03, subdivision 8, is amended to read:

1.18 Subd. 8. **Medical adviser.** The executive director may contract with an accredited  
1.19 independent organization specializing in disability determinations, licensed physicians or  
1.20 APRNs, or physicians or APRNs on the staff of the commissioner of health as designated  
1.21 by the commissioner, to be the medical adviser to the system.

1.22 Sec. 3. Minnesota Statutes 2020, section 352.03, subdivision 9, is amended to read:

1.23 Subd. 9. **Duties of the medical adviser.** The medical adviser shall designate licensed  
1.24 physicians or APRNs to examine applicants for disability benefits. The medical adviser

2.1 shall pass upon medical reports based upon examinations required to determine whether a  
2.2 state employee is totally and permanently disabled as defined in section 352.01, subdivision  
2.3 17, shall investigate health and medical statements and certificates by or on behalf of a state  
2.4 employee in connection with a disability benefit, and shall report in writing to the director  
2.5 conclusions and recommendations on matters referred for advice.

2.6 Sec. 4. Minnesota Statutes 2020, section 352.113, subdivision 4, is amended to read:

2.7 Subd. 4. **Medical or psychological examinations; authorization for payment of**  
2.8 **benefit.** (a) Any physician, psychologist, chiropractor, physician assistant, podiatrist, or  
2.9 ~~nurse practitioner~~ APRN providing any service specified in this section must be licensed.

2.10 (b) An applicant shall provide a detailed report signed by a physician, and at least one  
2.11 additional report signed by a physician, psychologist, chiropractor, physician assistant,  
2.12 podiatrist, or ~~nurse practitioner~~ APRN with evidence to support an application for total and  
2.13 permanent disability. The reports must include an expert opinion regarding whether the  
2.14 employee is permanently and totally disabled within the meaning of section 352.01,  
2.15 subdivision 17, and that the disability arose before the employee was placed on any paid or  
2.16 unpaid leave of absence or terminated public service.

2.17 (c) If there is medical evidence that supports the expectation that at some point the person  
2.18 applying for the disability benefit will no longer be disabled, the decision granting the  
2.19 disability benefit may provide for a termination date upon which the total and permanent  
2.20 disability can be expected to no longer exist. When a termination date is part of the decision  
2.21 granting benefits, prior to the benefit termination the executive director shall review any  
2.22 evidence provided by the disabled employee to show that the disabling condition for which  
2.23 benefits were initially granted continues. If the benefits cease, the disabled employee may  
2.24 follow the appeal procedures described in section 356.96 or may reapply for disability  
2.25 benefits using the process described in this subdivision.

2.26 (d) Any claim to disability must be supported by a report from the employer indicating  
2.27 that there is no available work that the employee can perform with the disabling condition  
2.28 and that all reasonable accommodations have been considered. Upon request of the executive  
2.29 director, an employer shall provide evidence of the steps the employer has taken to attempt  
2.30 to provide reasonable accommodations and continued employment to the claimant.

2.31 (e) The director shall also obtain written certification from the employer stating whether  
2.32 the employment has ceased or whether the employee is on sick leave of absence because  
2.33 of a disability that will prevent further service to the employer and that the employee is not  
2.34 entitled to compensation from the employer.

3.1 (f) The medical adviser shall consider the reports of the physician, psychologist,  
 3.2 chiropractor, physician assistant, podiatrist, or ~~nurse practitioner~~ APRN and any other  
 3.3 evidence supplied by the employee or other interested parties. If the medical adviser finds  
 3.4 the employee totally and permanently disabled, the adviser shall make appropriate  
 3.5 recommendation to the director in writing together with the date from which the employee  
 3.6 has been totally disabled. The director shall then determine if the disability occurred while  
 3.7 still in the employment of the state and constitutes a total and permanent disability as defined  
 3.8 in section 352.01, subdivision 17.

3.9 (g) A terminated employee may apply for a disability benefit within 18 months of  
 3.10 termination as long as the disability occurred while in the employment of the state. The fact  
 3.11 that an employee is placed on leave of absence without compensation because of disability  
 3.12 does not bar that employee from receiving a disability benefit.

3.13 (h) Upon appeal, the board of directors may extend the disability benefit application  
 3.14 deadline in paragraph (g) by an additional 18 months if the terminated employee is  
 3.15 determined by the board of directors to have a cognitive impairment that made it unlikely  
 3.16 that the terminated employee understood that there was an application deadline or that the  
 3.17 terminated employee was able to meet the application deadline.

3.18 (i) Unless the payment of a disability benefit has terminated because the employee is  
 3.19 no longer totally disabled, or because the employee has reached normal retirement age as  
 3.20 provided in this section, the disability benefit must cease with the last payment received by  
 3.21 the disabled employee or which had accrued during the lifetime of the employee unless  
 3.22 there is a spouse surviving. In that event, the surviving spouse is entitled to the disability  
 3.23 benefit for the calendar month in which the disabled employee died.

3.24 Sec. 5. Minnesota Statutes 2020, section 352.95, subdivision 4, is amended to read:

3.25 Subd. 4. **Medical or psychological evidence.** (a) An applicant shall provide medical,  
 3.26 chiropractic, or psychological evidence to support an application for disability benefits. The  
 3.27 director shall have the employee examined by at least one additional licensed physician,  
 3.28 APRN, chiropractor, or psychologist who is designated by the medical adviser. The  
 3.29 physicians, APRNs, chiropractors, or psychologists with respect to a mental impairment,  
 3.30 shall make written reports to the director concerning the question of the employee's disability,  
 3.31 including their expert opinions as to whether the employee has an occupational disability  
 3.32 within the meaning of section 352.01, subdivision 17a, and whether the employee has a  
 3.33 duty disability, physical or psychological, under section 352.01, subdivision 17b, or has a  
 3.34 regular disability, physical or psychological, under section 352.01, subdivision 17c. The

4.1 director shall also obtain written certification from the employer stating whether or not the  
 4.2 employee is on sick leave of absence because of a disability that will prevent further service  
 4.3 to the employer performing normal duties as defined in section 352.01, subdivision 17d, or  
 4.4 performing less frequent duties as defined in section 352.01, subdivision 17e, and as a  
 4.5 consequence, the employee is not entitled to compensation from the employer.

4.6 (b) If, on considering the reports by the physicians, APRNs, chiropractors, or  
 4.7 psychologists and any other evidence supplied by the employee or others, the medical  
 4.8 adviser finds that the employee has an occupational disability within the meaning of section  
 4.9 352.01, subdivision 17a, the ~~adviser~~ adviser shall make the appropriate recommendation  
 4.10 to the director, in writing, together with the date from which the employee has been disabled.  
 4.11 The director shall then determine the propriety of authorizing payment of a duty disability  
 4.12 benefit or a regular disability benefit as provided in this section.

4.13 (c) Unless the payment of a disability benefit has terminated because the employee no  
 4.14 longer has an occupational disability, or because the employee has reached either age 55  
 4.15 or the five-year anniversary of the effective date of the disability benefit, whichever is later,  
 4.16 the disability benefit must cease with the last payment which was received by the disabled  
 4.17 employee or which had accrued during the employee's lifetime. While disability benefits  
 4.18 are paid, the director has the right, at reasonable times, to require the disabled employee to  
 4.19 submit proof of the continuance of an occupational disability. If any examination indicates  
 4.20 to the medical adviser that the employee no longer has an occupational disability, the  
 4.21 disability payment must be discontinued upon the person's reinstatement to state service or  
 4.22 within 60 days of the finding, whichever is sooner.

4.23 Sec. 6. Minnesota Statutes 2020, section 352B.011, is amended by adding a subdivision  
 4.24 to read:

4.25 Subd. 3a. **APRN.** "APRN" means advanced practice registered nurse as defined in section  
 4.26 148.171, subdivision 3.

4.27 Sec. 7. Minnesota Statutes 2020, section 352B.10, subdivision 4, is amended to read:

4.28 Subd. 4. **Proof of disability.** (a) No disability benefits may be paid unless the member  
 4.29 provides adequate proof ~~is furnished~~ to the executive director of the existence of the  
 4.30 disability.

4.31 (b) Adequate proof of a disability must include a written expert report by a licensed  
 4.32 physician, ~~by a~~ APRN, or licensed chiropractor, or with respect to a mental impairment, by  
 4.33 a licensed psychologist.

5.1 (c) Following the commencement of benefit payments, the executive director has the  
5.2 right, at reasonable times, to require the ~~disabiltant~~ disability benefit recipient to submit  
5.3 proof of the continuance of the disability claimed.

5.4 Sec. 8. Minnesota Statutes 2020, section 353.01, is amended by adding a subdivision to  
5.5 read:

5.6 Subd. 50. **APRN.** "APRN" means advanced practice registered nurse as defined in  
5.7 section 148.171, subdivision 3.

5.8 Sec. 9. Minnesota Statutes 2020, section 353.03, subdivision 3, is amended to read:

5.9 Subd. 3. **Duties and powers.** (a) The board shall:

5.10 (1) elect a president and vice-president;

5.11 (2) approve the staffing complement, as recommended by the executive director,  
5.12 necessary to administer the fund;

5.13 (3) adopt bylaws for its own government and for the management of the fund consistent  
5.14 with the laws of the state and may modify them at pleasure;

5.15 (4) adopt, alter, and enforce reasonable rules consistent with the laws of the state and  
5.16 the terms of the applicable benefit plans for the administration and management of the fund,  
5.17 for the payment and collection of payments from members and for the payment of  
5.18 withdrawals and benefits, and that are necessary in order to comply with the applicable  
5.19 federal Internal Revenue Service and Department of Labor requirements;

5.20 (5) pass upon and allow or disallow all applications for membership in the fund and  
5.21 allow or disallow claims for withdrawals, pensions, or benefits payable from the fund;

5.22 (6) adopt an appropriate mortality table based on experience of the fund as recommended  
5.23 by the association actuary and approved under section 356.215, subdivision 18, with interest  
5.24 set at the rate specified in section 356.215, subdivision 8;

5.25 (7) provide for the payment out of the fund of the cost of administering this chapter, of  
5.26 all necessary expenses for the administration of the fund and of all claims for withdrawals,  
5.27 pensions, or benefits allowed;

5.28 (8) approve or disapprove all recommendations and actions of the executive director  
5.29 made subject to its approval or disapproval by subdivision 3a; and

5.30 (9) approve early retirement and optional annuity factors, subject to review by the actuary  
5.31 retained by the Legislative Commission on Pensions and Retirement; establish the schedule

6.1 for implementation of the approved factors; and notify the Legislative Commission on  
6.2 Pensions and Retirement of the implementation schedule.

6.3 (b) In passing upon all applications and claims, the board may summon, swear, hear,  
6.4 and examine witnesses and, in the case of claims for disability benefits, may require the  
6.5 claimant to submit to a medical examination by a physician or APRN of the board's choice,  
6.6 at the expense of the fund, as a condition precedent to the passing on the claim, and, in the  
6.7 case of all applications and claims, may conduct investigations necessary to determine their  
6.8 validity and merit.

6.9 (c) The board may continue to authorize the sale of life insurance to members under the  
6.10 insurance program in effect on January 1, 1985, but must not change that program without  
6.11 the approval of the commissioner of management and budget. The association shall not  
6.12 receive any financial benefit from the life insurance program beyond the amount necessary  
6.13 to reimburse the association for costs incurred in administering the program. The association  
6.14 shall not engage directly or indirectly in any other activity involving the sale or promotion  
6.15 of goods or services, or both, whether to members or nonmembers.

6.16 (d) The board shall establish procedures governing reimbursement of expenses to board  
6.17 members. These procedures must define the types of activities and expenses that qualify  
6.18 for reimbursement, must provide that all out-of-state travel be authorized by the board, and  
6.19 must provide for the independent verification of claims for expense reimbursement. The  
6.20 procedures must comply with the applicable rules and policies of the Department of  
6.21 Management and Budget and the Department of Administration.

6.22 (e) The board may purchase fiduciary liability insurance and official bonds for the  
6.23 officers and members of the board of trustees and employees of the association and may  
6.24 purchase property insurance or may establish a self-insurance risk reserve including, but  
6.25 not limited to, data processing insurance and "extra-expense" coverage.

6.26 Sec. 10. Minnesota Statutes 2020, section 353.031, subdivision 3, is amended to read:

6.27 Subd. 3. **Procedure to determine eligibility; generally.** (a) Every claim for a disability  
6.28 benefit must be initiated in writing on an application form and in the manner prescribed by  
6.29 the executive director and filed with the executive director. An application for disability  
6.30 benefits must be made within 18 months following termination of public service as defined  
6.31 under section 353.01, subdivision 11a.

7.1 (b) All medical reports must support a finding that the disability arose before the employee  
7.2 was placed on any paid or unpaid leave of absence or terminated public service, as defined  
7.3 under section 353.01, subdivision 11a.

7.4 (c) An applicant for disability shall provide a detailed report signed by a licensed medical  
7.5 doctor and at least one additional report signed by a medical doctor, psychologist, APRN,  
7.6 or chiropractor. The applicant shall authorize the release of all medical and health care  
7.7 evidence, including all medical records and relevant information from any source, to support  
7.8 the application for initial, or the continuing payment of, disability benefits.

7.9 (d) All reports must contain an opinion regarding the claimant's prognosis, the duration  
7.10 of the disability, and the expectations for improvement. Any report that does not contain  
7.11 and support a finding that the disability will last for at least one year may not be relied upon  
7.12 to support eligibility for benefits.

7.13 (e) Where the medical evidence supports the expectation that at some point in time the  
7.14 claimant will no longer be disabled, any decision granting disability may provide for a  
7.15 termination date upon which disability can be expected to no longer exist. In the event a  
7.16 termination date is made part of the decision granting benefits, prior to the actual termination  
7.17 of benefits, the claimant shall have the opportunity to show that the disabling condition for  
7.18 which benefits were initially granted continues. In the event the benefits terminate in  
7.19 accordance with the original decision, the claimant may petition for a review by the board  
7.20 of trustees under section 353.03, subdivision 3, or may reapply for disability in accordance  
7.21 with these procedures and section 353.33, 353.656, or 353E.06, as applicable.

7.22 (f) Any claim to disability must be supported by a report from the employer indicating  
7.23 that there is no available work that the employee can perform in the employee's disabled  
7.24 condition and that all reasonable accommodations have been considered. Upon request of  
7.25 the executive director, an employer shall provide evidence of the steps the employer has  
7.26 taken to attempt to provide reasonable accommodations and continued employment to the  
7.27 claimant. The employer shall also provide a certification of the member's past public service;  
7.28 the dates of any paid sick leave, vacation, or any other employer-paid salary continuation  
7.29 plan beyond the last working day; and whether or not any sick or annual leave has been  
7.30 allowed.

7.31 (g) An employee who is placed on leave of absence without compensation because of  
7.32 a disability is not barred from receiving a disability benefit.

7.33 (h) An applicant for disability benefits may file a retirement annuity application under  
7.34 section 353.29, subdivision 4, simultaneously with an application for disability benefits. If

8.1 the application for disability benefits is approved, the retirement annuity application is  
8.2 canceled. If disability benefits are denied, the retirement annuity application must be  
8.3 processed upon the request of the applicant. No member of the public employees general  
8.4 plan, the public employees police and fire plan, or the local government correctional service  
8.5 retirement plan may receive a disability benefit and a retirement annuity simultaneously  
8.6 from the same plan.

8.7 Sec. 11. Minnesota Statutes 2020, section 353.031, subdivision 8, is amended to read:

8.8 Subd. 8. **Proof of continuing disability.** (a) A disability benefit payment must not be  
8.9 made except upon adequate proof furnished to the executive director of the association that  
8.10 the person remains disabled.

8.11 (b) During the time when disability benefits are being paid, the executive director of the  
8.12 association has the right, at reasonable times, to require the disabled member to submit  
8.13 proof of the continuance of the disability claimed.

8.14 (c) Adequate proof of a disability must include a written expert report by a licensed  
8.15 physician, a APRN, or licensed chiropractor, or, with respect to a mental impairment, a  
8.16 licensed psychologist.

8.17 Sec. 12. Minnesota Statutes 2020, section 354.05, is amended by adding a subdivision to  
8.18 read:

8.19 Subd. 43. **APRN.** "APRN" means advanced practice registered nurse as defined in  
8.20 section 148.171, subdivision 3.

8.21 Sec. 13. Minnesota Statutes 2020, section 354.07, subdivision 2, is amended to read:

8.22 Subd. 2. **Investigatory powers.** In passing upon all applications and claims, the board  
8.23 may summon, swear, hear, and examine witnesses and, in the case of claims for disability  
8.24 benefits, may require the claimant to submit to a medical examination by a physician or  
8.25 APRN of the board's choice, at the expense of the claimant, as a condition precedent to the  
8.26 passing on the claim, and, in the case of all applications and claims, may conduct  
8.27 investigations necessary to determine the validity and merit of the same.

8.28 Sec. 14. Minnesota Statutes 2020, section 354.48, subdivision 4, is amended to read:

8.29 Subd. 4. **Determination by executive director.** (a) The executive director shall have  
8.30 the member examined by at least two licensed physicians, licensed chiropractors, or licensed  
8.31 psychologists.



9.1 (b) These physicians, chiropractors, APRNs, or psychologists with respect to a mental  
9.2 impairment, shall make written reports to the executive director concerning the member's  
9.3 disability, including expert opinions as to whether or not the member is permanently and  
9.4 totally disabled within the meaning of section 354.05, subdivision 14.

9.5 (c) The executive director shall also obtain written certification from the last employer  
9.6 stating whether or not the member was separated from service because of a disability which  
9.7 would reasonably prevent further service to the employer and as a consequence the member  
9.8 is not entitled to compensation from the employer.

9.9 (d) If, upon the consideration of the reports of the physicians, chiropractors, APRNs, or  
9.10 psychologists and any other evidence presented by the member or by others interested  
9.11 therein, the executive director finds that the member is totally and permanently disabled,  
9.12 the executive director shall grant the member a disability benefit.

9.13 (e) An employee who is placed on leave of absence without compensation because of  
9.14 disability is not barred from receiving a disability benefit.

9.15 Sec. 15. Minnesota Statutes 2020, section 354.48, subdivision 6, is amended to read:

9.16 Subd. 6. **Regular physical examinations.** At least once each year during the first five  
9.17 years following the allowance of a disability benefit to any member, and at least once in  
9.18 every three-year period thereafter, the executive director may require the disability benefit  
9.19 recipient to undergo an expert examination by a physician or physicians, by a chiropractor  
9.20 or chiropractors, by an APRN or APRNs, or by one or more psychologists with respect to  
9.21 a mental impairment, engaged by the executive director. If an examination indicates that  
9.22 the member is no longer permanently and totally disabled or that the member is engaged  
9.23 or is able to engage in a substantial gainful occupation, payments of the disability benefit  
9.24 by the association must be discontinued. The payments must be discontinued as soon as the  
9.25 member is reinstated to the payroll following sick leave, but payment may not be made for  
9.26 more than 60 days after the physicians, ~~the~~ chiropractors, APRNs, or ~~the~~ psychologists  
9.27 engaged by the executive director find that the person is no longer permanently and totally  
9.28 disabled.

9.29 Sec. 16. Minnesota Statutes 2020, section 354.48, subdivision 6a, is amended to read:

9.30 Subd. 6a. **Medical adviser; duties.** The executive director may contract with an  
9.31 accredited independent organization specializing in disability determinations, licensed  
9.32 physicians, or physicians on the staff of the commissioner of health as designated by the  
9.33 commissioner, to be the medical adviser to the executive director. The medical adviser shall

10.1 designate licensed physicians, licensed chiropractors, APRNs, or licensed psychologists  
10.2 with respect to a mental impairment, who shall examine applicants for disability benefits.  
10.3 The medical adviser shall pass upon all expert reports based on any examinations performed  
10.4 in order to determine whether a teacher is totally and permanently disabled as defined in  
10.5 section 354.05, subdivision 14. The medical adviser shall also investigate all health and  
10.6 medical statements and certificates by or on behalf of a teacher in connection with a disability  
10.7 benefit, and shall report in writing to the director setting forth any conclusions and  
10.8 recommendations on all matters referred to the medical adviser.

10.9 Sec. 17. Minnesota Statutes 2020, section 354A.011, is amended by adding a subdivision  
10.10 to read:

10.11 Subd. 6a. APRN. "APRN" means advanced practice registered nurse as defined in section  
10.12 148.171, subdivision 3.

10.13 Sec. 18. Minnesota Statutes 2020, section 354A.36, subdivision 4, is amended to read:

10.14 Subd. 4. **Determination of disability.** (a) The board of the teachers retirement fund  
10.15 association shall make the final determination of the existence of a permanent and total  
10.16 disability. The board shall have the coordinated member examined by at least two licensed  
10.17 physicians, licensed chiropractors, APRNs, or licensed psychologists who are selected by  
10.18 the board. After making any required examinations, each physician, chiropractor, APRN,  
10.19 or psychologist with respect to a mental impairment, shall make a written report to the board  
10.20 concerning the coordinated member, which shall include a statement of the expert opinion  
10.21 of the physician, chiropractor, APRN, or psychologist as to whether or not the member is  
10.22 permanently and totally disabled within the meaning of section 354A.011, subdivision 14.  
10.23 The board shall also obtain a written statement from the employer as to whether or not the  
10.24 coordinated member was terminated or separated from active employment due to a disability  
10.25 which is deemed by the employer to reasonably prevent further service by the member to  
10.26 the employer and which caused the coordinated member not to be entitled to further  
10.27 compensation from the employer for services rendered by the member. If, after consideration  
10.28 of the reports of the physicians, chiropractors, APRNs, or psychologists with respect to a  
10.29 mental impairment, and any evidence presented by the member or by any other interested  
10.30 parties, the board determines that the coordinated member is totally and permanently disabled  
10.31 within the meaning of section 354A.011, subdivision 14, it shall grant the coordinated  
10.32 member a disability benefit. A member who is placed on a leave of absence without  
10.33 compensation as a result of the disability is not barred from receiving a disability benefit  
10.34 under this section.

11.1 (b) The executive director shall reject an application for disability benefits under section  
11.2 354A.36 if the member is applying only because an employer-sponsored provider of private  
11.3 disability insurance benefits requires the application and the member would not have applied  
11.4 for disability benefits in the absence of the requirement. The member shall submit a copy  
11.5 of the disability insurance policy that requires an application for disability benefits from  
11.6 the plan if the member wishes to assert that the application is only being submitted because  
11.7 of the disability insurance policy requirement.

11.8 Sec. 19. Minnesota Statutes 2020, section 354A.36, subdivision 6, is amended to read:

11.9 Subd. 6. **Requirement for regular physical examinations.** At least once each year  
11.10 during the first five years following the granting of a disability benefit to a coordinated  
11.11 member by the board and at least once in every three-year period thereafter, the board may  
11.12 require the disability benefit recipient to undergo an expert examination as a condition for  
11.13 continued entitlement of the benefit recipient to receive a disability benefit. If the board  
11.14 requires an examination, the expert examination must be made at the place of residence of  
11.15 the disability benefit recipient or at any other place mutually agreeable to the disability  
11.16 benefit recipient and the board. The expert examination must be made by a physician or  
11.17 physicians, by a chiropractor or chiropractors, by an APRN or APRNs, or by one or more  
11.18 psychologists engaged by the board. The physician or physicians, the chiropractor or  
11.19 chiropractors, APRN or APRNs, or the psychologist or psychologists with respect to a  
11.20 mental impairment, conducting the expert examination shall make a written report to the  
11.21 board concerning the disability benefit recipient and the recipient's disability, including a  
11.22 statement of the expert opinion of the physician, chiropractor, APRN, or psychologist as to  
11.23 whether or not the member remains permanently and totally disabled within the meaning  
11.24 of section 354A.011, subdivision 14. If the board determines from consideration of the  
11.25 written expert examination report of the physician, ~~of the~~ chiropractor, APRN, or ~~of the~~  
11.26 psychologist, with respect to a mental impairment, that the disability benefit recipient is no  
11.27 longer permanently and totally disabled or if the board determines that the benefit recipient  
11.28 is engaged or is able to engage in a gainful occupation, unless the disability benefit recipient  
11.29 is partially employed under subdivision 7, then further disability benefit payments from the  
11.30 fund must be discontinued. The discontinuation of disability benefits must occur immediately  
11.31 if the disability recipient is reinstated to the district payroll following sick leave and within  
11.32 60 days of the determination by the board following the expert examination and report of  
11.33 the physician or physicians, chiropractor or chiropractors, APRN or APRNs, or psychologist  
11.34 or psychologists engaged by the board that the disability benefit recipient is no longer  
11.35 permanently and totally disabled within the meaning of section 354A.011, subdivision 14.

12.1 Sec. 20. **EFFECTIVE DATE.**

12.2 Sections 1 to 19 are effective the day following final enactment.