

# Kansas Register

Ron Thornburgh, Secretary of State

Vol. 25, No. 26 June 29, 2006 Pages 879-910

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#### State of Kansas

#### Legislature

#### **Interim Committee Schedule**

The following committee meetings have been scheduled during the period of June 26-July 14. Requests for accommodation to participate in committee meetings should be made at least two working days in advance of the meeting by contacting Legislative Administrative Services at (785) 296-2391 or TTY (785) 296-8430. When available, agendas can be found at http://kslegislature.org/klrd.

Date	Room	Time	Committee	Agenda
June 28	313-S	10:00 a.m.	Investigative Committee on Legislative and Judicial Communications (House)	Agenda not available.
June 30	241-N	9:00 a.m.	Kansas Criminal Justice Recodification, Rehabilitation and Restoration Committee	Report on legislative action and financial report; update on assistance from CSG and JEHT Foundation; offender re- entry and release planning; and subcommittee reports.
July 3 July 4		INDEPENDEN	ICE DAY —STATE HOLIDAY	
July 5 July 6	313-S 313-S	10:00 a.m. 9:00 a.m.	Investigative Committee on Legislative and Judicial Communications (House)	Agenda not available.
July 11 July 12	519-S 519-S	10:00 a.m. 9:00 a.m.	Joint Committee on Claims Against the State	Hearings on claims filed.
July 12 July 13	313-S 313-S	10:00 a.m. 9:00 a.m.	Investigative Committee on Legislative and Judicial Communications (House)	Agenda not available.

Jeffrey M. Russell Director of Legislative Administrative Services

Doc. No. 033312

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#### State of Kansas

#### Department of Health and Environment

### Public Notice Concerning Kansas/Federal Water Pollution Control Permits and Applications

In accordance with Kansas Administrative Regulations 28-16-57 through 63, 28-18-1 through 15, 28-18a-1 through 32, 28-16-150 through 154, 28-46-7, and the authority vested with the State by the administrator of the U.S. Environmental Protection Agency, various draft water pollution control documents (permits, notices to revoke and reissue, notices to terminate) have been prepared and/or permit applications have been received for discharges to waters of the United States and the state of Kansas for the class of discharges described below.

The proposed actions concerning the draft documents are based on staff review, applying the appropriate standards, regulations and effluent limitations of the state of Kansas and the Environmental Protection Agency. The final action will result in a Federal National Pollutant Discharge Elimination System Authorization and/or a Kansas Water Pollution Control permit being issued, subject to certain conditions, revocation and reissuance of the designated permit or termination of the designated permit.

#### Public Notice No. KS-AG-06-195/205 Pending Permits for Confined Feeding Facilities

- 011411110	-01 0011111104 1 0041	
Name and Address of Applicant	Legal Description	Receiving Water
Fabrizius Fats	NE/4 of Section 33,	Smoky Hill River
Paul M. Fabrizius	T12S, R23W, Trego	Basin
RR 2, Box 14E	County	
WaKeenev, KS 67672	Š	

Kansas Permit No.: A-SHTR-S004

This is a renewal permit for an existing facility for 428 head (171.2 animal units) of swine weighing greater than 55 pounds each. Schedule of compliance requires a staff gauge to be installed.

Name and Address	Legal	Receiving
of Applicant	Description	Water
Wheat Ranch Feedlot	SW/4 of Section 12,	Marais des
Pete Wheat	T16S, R11E, Lyon	Cygnes River
P.O. Box 38	County	Basin
Allen KS 66833	•	

Kansas Permit No.: A-MCLY-C002 Federal Permit No.: KS0115606

This is a new permit for an existing, expanding facility from 950 head (475 animal units) of beef cattle weighing 700 pounds or less that is expanding to 2,500 head (1,250 animal units) of beef cattle weighing 700 pounds or less. Two existing wastewater retention structures are to be converted to sedimentation basins and a third new sedimentation basin will drain to a new earthen wastewater retention structure.

ture.		
Name and Address of Applicant	Legal Description	Receiving Water
Seaboard Foods LP- Light Nurseries Farms #101-105 & 107 9000 West 67th Street Suite 200 Shawnee Mission, KS 66202	SW/4 of NW/4 of Section 11, SE/4 of SW/4 of Section 11, NE/4 of NW/4 of Section 11, NE/4 of NW/4 of Section 14, SE/4 of SW/4 of Section 14, NE/4 of SE/4 of Section 14, NE/4 of SE/4 of Section 15, All in T32S, R40W, Morton County	Cimarron River Basin

Kansas Permit No.: A-CIMT-H006 Federal Permit No.: KS0096300

This is a renewal permit for an existing facility for 72,000 head (7,200 animal units) of swine weighing 55 pounds or less.

Name and Address	Legal	Receiving
of Applicant	Description	Water
Seaboard Foods LP	SW/4 of Section 21,	Cimarron River
Shore Nursery, Farm #108	T30S, R40W,	Basin
9000 West 67th Street Suite 200	Stanton County	
Cl 16: 10: 10: 10: 10: 10: 10: 10: 10: 10: 10		

Shawnee Mission, KS 66202 Kansas Permit No.: A-CIST-S001

This is a renewal permit for an existing facility for 8,880 head (880 animal units) of swine weighing 55 pounds or less.

Name and Address of Applicant	Legal Description	Receiving Water
Seaboard Foods LP Walker Isolation Farm #8 9000 West 67th Street Suite 200	SW/4 of SW/4 of Section 07, T28S, R42W, Stanton County	Cimarron River Basin
Shawnee Mission, KS 66202		

Kansas Permit No.: A-CIST-S002

This is a renewal permit for an existing facility for 120 head (48 animal units) of swine weighing more than 55 pounds.

Name and Address of Applicant	Legal Description	Receiving Water
Zerr Farms Mick Zerr	NE/4 of Section 23, T10S, R27W,	Saline River Basin
RR 1, Box 21	Sheridan County	
Park, KS 67751		

Kansas Permit No.: A-SASD-B013

This is a renewal permit with a modified permit number for an existing facility for 950 head (475 animal units) of beef cattle weighing less than 700 pounds. This is an expansion from the previous permit for 400 head (400 animal units) of beef cattle weighing greater than 700 pounds. The permit number has been modified to be consistent with current permit number assigning procedures.

Name and Address of Applicant	Legal Description	Receiving Water
Mann Cattle Company, Inc. David Mann 2334 Road 70 Quinter, KS 67752	SW/4 & SE/4 of Section 07, T12S, R26W, Gove County	Smoky Hill River Basin

This is a renewal permit for an existing facility for 980 head (980 animal units) of cattle weighing greater than 700 pounds each.

Name and Address of Applicant	Legal Description	Receiving Water
Tanking Dairy Randy Tanking	NW/4 of Section 32, T05S, R15E, Jackson	
29202 O Road	County	Dasin
Wetmore KS 66550		

Kansas Permit No.: A-KSJA-B003

Kansas Permit No.: A-SHGO-B016

This is a renewal permit with modification for an existing facility. The operation is changing and downsizing from a 60 head (84 animal unit) dairy to a maximum of 40 head (40 animal units) of beef cattle weighing more than 700 pounds.

Name and Address of Applicant	Legal Description	Receiving Water
Clydene Owen	SW/4 of Section 05,	Marais des
34055 Indianapolis Road	T18S, R22E, Miami	Cygnes River
Osawatomie, KS 66064	County	Basin

Kansas Permit No.: A-MCMI-S013

This is a renewal permit for an existing facility for 275 head (110 animal units) of swine weighing more than 55 pounds and 250 head (25 animal units) of swine weighing 55 pounds or less for a total of 135 animal units.

Name and Address Legal Receiving of Applicant Description Water Cimarron Dairy, LLC SE/4 of Section 30 & Upper Arkansas Tim Dewey E/2 of Section 31 & River Basin 6306 20 Road NW/4 of Section 32. Cimarron, KS 67835 T24S, R27W, Gray County

Kansas Permit No.: A-UAGY-D002 Federal Permit No.: KS0091120 This is a modified permit for an existing and expanding facility for 16,650 head (17,720 animal units) of dairy cattle. Cimarron Feeders (A-UAGY-C008) permit is being combined with Cimarron Dairy,

Name and Address<br/>of ApplicantLegal<br/>DescriptionReceiving<br/>WaterPawnee Valley Feeders, Inc.S/2 of Section 29<br/>T215, R21W,Upper Arkansas<br/>River BasinP.O. Box 116<br/>Hanston, KS 67849Hodgeman County

Kansas Permit No.: A-UAHG-C001 Federal Permit No.: KS0041670 This is a renewal for an existing facility for 22,000 head (22,000 animal units) of beef cattle greater than 700 pounds.

Persons wishing to comment on the draft documents and/or permit applications must submit their comments in writing to the Kansas Department of Health and Environment if they wish to have the comments considered in the decision making process. Comments should be submitted to the attention of the Livestock Waste Management Section for agricultural related draft documents or applications, or to the Technical Services Section for all other permits, at the Kansas Department of Health and Environment, Division of Environment, Bureau of Water, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367.

All comments regarding the draft documents or application notices received on or before July 29, 2006, will be considered in the formulation of the final determinations regarding this public notice. Please refer to the appropriate Kansas document number (KS-AG-06-195/205) and name of the applicant/permittee when preparing comments.

After review of any comments received during the public notice period, the Secretary of Health and Environment will issue a determination regarding final agency action on each draft document/application. If response to any draft document/application indicates significant public interest, a public hearing may be held in conformance with K.A.R. 28-16-61 (28-46-21 for UIC).

All draft documents/applications and the supporting information including any comments received are on file and may be inspected at the offices of the Kansas Department of Health and Environment, Bureau of Water, 1000 SW Jackson St., Suite 420, Topeka, Kansas. These documents are available upon request at the copying cost assessed by KDHE. Application information and components of plans and specifications for all new and expanding swine facilities are available on the Internet at http://www.kdhe.state.ks.us/feedlots. Division of Environment offices are open from 8 a.m. to 5 p.m., Monday through Friday, excluding holidays.

Roderick L. Bremby Secretary Health and Environment State of Kansas

### Department of Health and Environment

#### **Request for Comments**

The Kansas Department of Health and Environment has reviewed an application from Mizell Farms, Inc. to operate a livestock composting facility located in the Northwest Quarter of Section 6, Township 22 South, Range 7 West in Reno County. The facility is located 1 mile north and 3 miles west of Nickerson at 10306 N. Salem Road, Sterling. KDHE has reviewed the application and found it to be in conformance with state solid waste statutes and regulations.

KDHE is providing public notice of its intent to issue a permit to Mizell Farms, Inc. for the proposed livestock composting facility described herein. A copy of the administrative record, including the permit application, drawings, draft permit and other information regarding this permit action, will be available for public review through July 31 during normal business hours at the following locations:

Kansas Department of Health and Environment Bureau of Waste Management 1000 S.W. Jackson, Suite 320 Topeka, 66612-1366 Contact: Ken Powell (785) 296-1121

Nickerson City Clerk's Office 15 N. Nickerson St. Nickerson, 67561 Contact: Jeanine Brannan (620) 422-5981

Additionally, the application form is available for public viewing via the Internet at www.kdhe.state.ks. us/waste. Anyone wishing to comment on the facility application should submit written statements postmarked not later than July 31 to Ken Powell of KDHE (at the address listed above). Comments also will be accepted via facsimile to (78) 296-1592 or e-mail to kpowell@kdhe.state.ks.us, provided the comments are received by 5 p.m. July 31. Comments postmarked by July 31 and received within one week thereafter also will be considered. KDHE will subsequently respond to all formal comments in writing.

After consideration of all formal comments received during the public notice period, KDHE will make a final decision on whether to issue the new permit. Notice of the decision will be given to the applicant, to anyone who submitted written comments during the comment period, and to those who requested notice of the final permit decision.

Roderick L. Bremby Secretary of Health and Environment

Doc. No. 033302

Doc. No. 033311

#### State of Kansas

#### Department of Health and Environment

#### Notice of Hearing on Proposed Administrative Regulations

The Kansas Department of Health and Environment will conduct a public hearing on September 25, 2006, at 9:30 a.m. in Room 3A (Flint Hills Room), Curtis State Office Building, 1000 S.W. Jackson Street, Topeka, Kansas to consider the Home Health Agency Licensure - Home Health Aide regulations, KAR 28-51-100 (Amended), and 28-51-112 through 28-51-116 (Amended).

KAR 28-51-100. Updates statutory references; clarifies language; removes one definition and amends one definition.

KAR 28-51-112. Updates statutory references; clarifies language.

KAR 28-51-113. Updates statutory references; clarifies language; eliminates provision for and references to 90-hour home health aide course; clarifies eligibility requirements for employment as a home health aide trainee.

KAR 28-51-114. Updates statutory references; clarifies language; adopts revised curriculum for 20-hour home health aide course; eliminates references to 90-hour home health aide course.

KAR 28-51-115. Updates statutory references; clarifies language.

KAR 28-51-116. Updates statutory references; clarifies language; removes references to 90-hour home health aide course and test; amends passing score for home health aide test.

The amendments to these regulations will have no economic impact to the agency, other government agency or unit or to persons who will be affected by the changes.

The time between the publication of this notice and the scheduled hearings constitutes a 60-day public comment period for the purposes of receiving written public comments on the proposed regulation revision. All interested parties may submit written comments prior to the hearing to Marla Rhoden, Director of Health Occupations Credentialing, Curtis State Office Building, 1000 S.W. Jackson, Suite 200, Topeka, Kansas 66612-1365. All interested parties will be given a reasonable opportunity to present their views orally on the proposed regulations during the hearing. To give all parties an opportunity to present their views, it may be necessary to require each participant to limit any oral presentation to five minutes.

Complete copies of the regulation and the economic impact statement may be obtained from the Kansas Department of Health and Environment, Health Occupations Credentialing, Curtis State Office Building, Suite 200, Topeka, Kansas 66612-1365. The regulation is also available at the Health Occupations Credentialing web page, www.kdhe.state.ks.us/hoc. The public can submit comments on the regulation by e-mail to mrhoden@kdhe.state.ks.us. Questions pertaining to the proposed regulation should be directed to Marla Rhoden at (785) 296-1281 or by e-mail to mrhoden@kdhe.state.ks.us.

Any individual with a disability may request accommodation in order to participate in the public hearing and may request the proposed regulation and economic im-

pact statement in an accessible format. Requests for accommodation should remade at least five working days in advance of the hearing by contacting Marla Rhoden.

Roderick L. Bremby Secretary of Health and Environment

Doc. No. 033305

#### State of Kansas

#### **Pooled Money Investment Board**

#### **Notice of Investment Rates**

The following rates are published in accordance with K.S.A. 75-4210. These rates and their uses are defined in K.S.A. 12-1675(b)(c)(d), 75-4201(l) and 75-4209(a)(1)(B).

#### Effective 6-26-06 through 7-2-06

Rate
4.96%
4.87%
5.25%
5.33%
5.28%
5.25%

Derl S. Treff Director of Investments

Doc. No. 033300

#### State of Kansas

#### Board of Indigents' Defense Services

#### **Notice of Hearing**

A public hearing will be conducted at 3 p.m., July 26, at the Ford County Courthouse, 101 W. Spruce, Dodge City, KS, 67801, to consider the opening of a public defender office in Dodge City.

This 30-day notice of the public hearing shall constitute a public comment period for the purpose of receiving written public comments on the proposed office. All interested parties may submit written comments prior to the hearing to the BIDS Executive Director, 714 S.W. Jackson, Room 200, Topeka, KS 66603.

All interested parties will be given a reasonable opportunity to present their views on the proposed office opening during the hearing. In order to give all parties an opportunity to present their views, it may be necessary to request that each participant limit oral presentation to five minutes.

Any individual with a disability may request accommodation in order to participate in the public hearing and may request the proposed regulations and economic impact statements in an accessible format. Requests for accommodation to participate in the hearing should be made at least five working days in advance of the hearing by contacting Beth Child, at 296-8416.

Disabled parking is located in front of the building.

Pat Scalia Director

Doc. No. 033313

#### State of Kansas

#### **Kansas Water Authority**

#### **Notice of Hearing**

The Kansas Water Authority will conduct a public hearing at 1 p.m. Thursday, July 6, in the Kansas Water Office's conference room, 901 S. Kansas Ave., Topeka. The hearing topic will be the proposed revisions to the State Water Plan's Water Quality Policy Section and Kansas Lower Republican Basin section.

A copy of the revised version is available on the Kansas Water Office Web site, www.kwo.org, or by calling the Kansas Water Office toll free at (888) KAN-WATER or (888) 526-9283. The record will remain open for comment until 5 p.m. Monday, July 17.

Steve Irsik Chairman

Doc. No. 033284

(Published in the Kansas Register June 29, 2006.)

Summary Notice of Bond Sale City of Wichita, Kansas \$11,495,000 Aggregate Principal Amount General Obligation Bonds Series 786 and SERIES 786A

(General obligation bonds payable from unlimited ad valorem taxes)

#### **Bids**

Subject to the official notice of sale dated June 20, 2006 (the notice of sale), bids will be received by the Director of Finance on behalf of the City of Wichita, Kansas (the city), at the office of the Department of Finance, 12th Floor, City Hall, 455 N. Main, Wichita, Kansas 67202-1697, via facsimile, as set forth herein, or, in the case of electronic bids, through the PARITY Electronic Bid Submission System, until 10:30 a.m., Tuesday, July 11, 2006, for the purchase of all of the City's \$10,575,000 principal amount of General Obligation Bonds, Series 786 (the Series 786 Bonds), and all of the City's \$920,000 principal amount of General Obligation Bonds, Series 786A (the Series 786A Bonds). The Series 786 Bonds and the Series 786A Bonds are herein collectively referred to as the "bonds." All bids shall be publicly read and tabulated on said date and at said time and place. The bids will be considered and each series of bonds will be awarded by the city council in the council chamber at City Hall at its earliest convenience following the bid opening.

No oral or auction bid for the bonds shall be considered and no bid of less than the entire principal amount of each series of bonds, plus accrued interest to the date of delivery, will be considered. Bidders may telefax a bid to the City to the following number: (316) 219-6269. The city assumes no responsibility or liability for inaccurate bids submitted through the telefax, including garbled transmissions, or the inability of a bidder to access the telefax number prior to the indicated sale time.

Bids may also be electronically submitted through PARITY. Each bidder shall be solely responsible for mak-

ing the necessary arrangements to access PARITY for the purpose of submitting its electronic bid in a timely manner and in compliance with the Notice of Sale. To the extent any instructions or directions set forth in PARITY conflict with the Notice of Sale, the terms of the Notice of Sale shall control. The city shall not be responsible for any failure, misdirection or error in the transmission of a bid through PARITY. For further information about the electronic bidding services of PARITY, potential bidders may contact i-Deal, LLC, 1359 Broadway, 2nd Floor, New York, NY 10010, (212) 849-5021. Bidders may be required to be qualified in a manner established by the city before submitting a bid.

#### **Bond Details**

The bonds will be in book entry form only. The bonds will be issued in the denomination of \$5,000 or any integral multiple thereof. The bonds will be dated August 1, 2006, and will become due on September 1 in the years as follows:

Maturity Schedule -	Series 786 Bonds
Maturing	Principal
September 1	Amount
2007	\$510,000
2008	535,000
2009	555,000
2010	580,000
2011	610,000
2012	635,000
2013	665,000
2014	690,000
2015	725,000
2016	755,000
2017	790,000
2018	825,000
2019	860,000
2020	900,000

#### Maturity Schedule - Series 786A Bonds

940,000

2021

- Series /86A bona
Principal Amount
\$30,000
30,000
30,000
35,000
35,000
35,000
40,000
40,000
40,000
45,000
45,000
50,000
50,000
50,000
55,000
55,000
60,000
60,000
65,000
70,000

The bonds will bear interest from the dated date at rates to be determined when the bonds are sold as provided in the notice of sale. Interest on the Series 786 Bonds will be payable semiannually on March 1 and September 1 in each year, beginning on September 1, 2007. Interest on the Series 786A Bonds will be payable semiannually on March 1 and September 1, commencing March 1, 2007.

#### Paying Agent and Bond Registrar

Kansas State Treasurer, Topeka, Kansas.

#### **Good Faith Deposit**

Each bid for each series of bonds shall be accompanied by a cashier's or certified check drawn on a bank located in the United States of America or a financial surety bond in a form that complies with the requirements set forth in the Notice of Sale in an amount equal to 2 percent of the principal amount of the series of bonds for which the bid is submitted.

#### Delivery

The city will pay for preparation of the bonds and will deliver the same properly prepared, executed and registered without cost to the successful bidder on or about August 10, 2006, at the offices of The Depository Trust Company, NewYork, NewYork.

#### **Assessed Valuation and Indebtedness**

The equalized assessed tangible valuation for computation of bonded debt limitations is \$3,037,717,928. The total general obligation indebtedness of the city as of the date of the bonds, including the bonds being sold and including temporary notes being sold by the city on the same date, is \$573,258,760. The City's General Obligation Renewal and Improvement Temporary Notes, Series 215, outstanding in the principal amount of \$56,370,000 will be retired on August 10, 2006, from a portion of the proceeds of the bonds, a portion of the proceeds of the notes and other available funds of the city.

#### Approval of Bonds

The bonds will be sold subject to the legal opinion of Kutak Rock LLP, Kansas City, Missouri, bond counsel, whose approving legal opinion as to the validity of each series of bonds will be furnished and paid for by the city and delivered to the successful bidder as and when the bonds are delivered.

#### **Additional Information**

Additional information regarding the bonds may be obtained from the Department of Finance, City Hall, 12th Floor, 455 N. Main, Wichita, Kansas 67202-1679, Catherine Gilley, Debt Coordinator, (316) 268-4143, or from Kutak Rock LLP, Bond Counsel, 1010 Grand Blvd., Suite 500, Kansas City, MO 64106-2220, (816) 960-0090, Attention: Dorothea Riley.

Dated June 29, 2006.

Doc. No. 033310

City of Wichita, Kansas By: Karen Sublett, City Clerk City Hall, 13th Floor 455 N. Main Wichita, Kansas 67202-1679 (316) 268-4529 State of Kansas

#### **State Conservation Commission**

#### **Notice of Meeting**

The State Conservation Commission will have a joint meeting with the Kansas Association of Conservation Districts at 8:30 a.m. Saturday, July 15, at the Comfort Inn, 2225 S. Range Ave., Colby. The regular business meeting of the commission will begin at approximately 10 a.m. Persons requiring special accommodations should contact the commission at (785) 296-3600 at least three days prior to the meeting.

Greg A. Foley Executive Director

Doc. No. 033299

(Published in the Kansas Register June 29, 2006.)

Summary Notice of Bond Sale \$1,390,000 City of McPherson, Kansas General Obligation Bonds, Series 131 of 2006 (General obligation bonds payable from

unlimited ad valorem taxes)

#### **Bids**

Subject to the notice of bond sale dated June 12, 2006, written and electronic bids will be received on behalf of the clerk of the city of McPherson, Kansas (the issuer) in the case of written bids, at the address set forth below, and in the case of electronic bids, through PARITY until 3 p.m., July 13, 2006 for the purchase of the above-referenced bonds (the bonds). No bid of less than 100 percent of the principal amount of the bonds and accrued interest thereon to the date of delivery will be considered.

#### **Bond Details**

The bonds will consist of fully registered bonds in the denomination of \$5,000 or any integral multiple thereof. The bonds will be dated July 15, 2006, and will become due on August1 in the years as follows:

	Principal
Year	Amount
2008	\$ 20,000
2009	80,000
2010	80,000
2011	80,000
2012	90,000
2013	95,000
2014	95,000
2015	100,000
2016	105,000
2017	110,000
2018	110,000
2019	105,000
2020	105,000
2021	110,000
2022	20,000
2023	15,000
2024	25,000
2025	25,000

2026 20,000

The bonds will bear interest from the date thereof at rates to be determined when the bonds are sold as hereinafter provided, which interest will be payable semiannually on February 1 and August 1 in each year, beginning on February 1, 2007.

#### **Book-Entry-Only System**

The bonds will be registered under a book-entry-only system administered through DTC.

#### Paying Agent and Bond Registrar

Kansas State Treasurer, Topeka, Kansas.

#### **Good Faith Deposit**

Each bid shall be accompanied by a good faith deposit in the form of a cashier's or certified check drawn on a bank located in the United States of America or a qualified financial surety bond in the amount of \$27,800 (2 percent of the principal amount of the bonds).

#### **Delivery**

The issuer will pay for printing the bonds and will deliver the same properly prepared, executed and registered without cost to the successful bidder on or about July 26, 2006, to DTC for the account of the successful bidder.

#### Assessed Valuation and Indebtedness

The equalized assessed tangible valuation for computation of bonded debt limitations for the year 2005, is \$112,136,922. The total general obligation indebtedness of the issuer as of the date of delivery of the bonds, including the bonds being sold, but excluding temporary notes to be retired in conjunction therewith, is \$20,185,000.

#### Approval of Bonds

The bonds will be sold subject to the legal opinion of Gilmore & Bell, P.C., Wichita, Kansas, bond counsel, whose approving legal opinion as to the validity of the bonds will be furnished and paid for by the issuer, printed on the bonds and delivered to the successful bidder as and when the bonds are delivered.

#### **Additional Information**

Additional information regarding the bonds may be obtained from the undersigned, or from the financial advisor, at the addresses set forth below:

### Written and Facsimile Bid and Good Faith Deposit Delivery Address:

Gary L. Meagher, Clerk City Hall - 400 E. Kansas Avenue Phone No. (620) 245-2535 Fax No. (620) 245-2549 Email: garym@mcpcity.com

#### **Financial Advisor:**

Stifel, Nicolaus and Company, Incorporated 301 N. Main, Suite 1800 Wichita, Kansas 67202 Attn: Pat Hinojos Phone No. (316) 337-8498 Fax No. (316) 337-8492 Email: hinojosp@stifel.com

Dated June 12, 2006.

City of McPherson, Kansas

Doc. No. 033316

(Published in the Kansas Register June 29, 2006.)

Summary Notice of Sale
City of Salina, Kansas
\$5,200,000\*
General Obligation Temporary Notes
Series 2006-2
\$900,000\*

General Obligation Internal Improvement Bonds Series 2006-B

(General Obligations payable from unlimited ad valorem taxes)

#### **Bids**

Subject to the Notice of Sale and Preliminary Official Statement, sealed, facsimile and electronic bids for the purchase of \$5,200,000\* of General Obligation Temporary Notes, Series 2006-2 (the notes) and \$900,000\* of General Obligation Internal Improvement Bonds, Series 2006-B (the bonds), of the city of Salina, Kansas (the city) will be received (1) in the case of sealed and facsimile bids by the city clerk at the address and fax number hereinafter set forth and (2) in the case of electronic bids through PAR-ITY electronic bid submission system until 1:30 p.m., local time for the notes and until 2 p.m., local time, for the bonds, on Monday, July 10, 2006 at which time such bids will be publicly read. No bid will be considered of (a) less than 99.25 percent of the principal amount of the notes and accrued interest to the date of delivery and (b) less than 100 percent of the principal amount of the bonds and accrued interest to the date of delivery.

#### **Note Details**

The notes will consist of fully registered notes in the denomination of \$5,000 or any integral multiple thereof. Notes shall initially be registered in the name of Cede & Co., as nominee of The Depository Trust Company, New York, New York, to which payments of principal of and interest on the notes will be made. Individual purchases of notes will be made in book-entry form only. Purchasers will not receive certificates representing their interest in notes purchased. The notes will be dated July 15, 2006 and will become due on August 1, 2007. The notes will bear interest from the dated date at a rate to be determined when the notes are sold. The interest on the notes will be payable at maturity. The Treasurer of the State of Kansas, Topeka, Kansas, will be the Note Paying Agent and Note Registrar for the notes.

#### **Bonds Details**

The bonds will consist of fully registered certificated bonds in the denomination of \$5,000 or any integral multiple thereof. Bonds shall initially be registered in the name of Cede & Co., as nominee of The Depository Trust Company, New York, New York, to which payments of principal of and interest on the bonds will be made. Individual purchases of bonds will be made in book-entry form only. Purchasers will not receive certificates representing their interest in bonds purchased. The bonds will be dated July 15, 2006, and will become due annually on October 1 in the years as follows:

Principal	Maturity
Amount*	October 1
\$85,000	2007

85,000	2008
80,000	2009
80,000	2010
80,000	2011
80,000	2012
80,000	2013
80,000	2014
75,000	2015
75,000	2016
20,000	2017
20,000	2018
20,000	2019
20,000	2020
20,000	2021

The bonds will bear interest from the date thereof at rates to be determined when the bonds are sold, and interest will be payable semiannually on April 1 and October 1 in each year, beginning on April 1, 2007. The Treasurer of the State of Kansas, Topeka, Kansas, will be the Bond Paying Agent and Bond Registrar for the Bonds.

#### **Redemption Prior to Maturity**

The bonds and notes will be subject to redemption prior to maturity as provided in the notice of sale and preliminary official statement.

#### **Good Faith Deposit**

A good faith deposit is not required for bids on the notes. Each bid for the bonds must be accompanied by a good faith deposit in the form of a certified or cashier's check or a financial surety bond in the amount of 2 percent of the principal amount of the bonds, payable to the order of the city.

#### Delivery

The city will pay for preparing the notes and the bonds. The city will deliver the notes and bonds in book-entry form only through the facilities of The Depository Trust Company, New York, New York on or about July 27, 2006.

#### **Assessed Valuation and Bonded Indebtedness**

The equalized assessed tangible valuation for computation of bonded debt limitations is \$402,191,655. The total general obligation indebtedness of the city as of the date of the notes and bonds, including the notes and bonds being sold is \$47,458,402.

#### Approval of Bonds

The notes and bonds will be sold subject to the legal opinion of Gilmore & Bell, P.C., Kansas City, Missouri, bond counsel, whose approving legal opinion as to the validity of the bonds/notes will be furnished and paid for by the city, will accompany the notes and bonds and be delivered to the successful bidder as and when the notes/bonds are delivered.

#### **Additional Information**

Additional information regarding the bonds and notes may be obtained from the city clerk or from the financial advisor at the addresses set forth below.

### Written and Facsimile Bid and Good Faith Deposit Delivery Address:

Lieu Ann Elsey City Clerk City/County Building, Room 206

300 West Ash

Salina, Kansas 67402-0736 Telephone: (785-309-5735)

Fax: (785-309-5738)

### Financial Advisor - Facsimile Bid and Good Faith Deposit Delivery Address:

George K. Baum & Company 4801 Main Street, Suite 500 Kansas City, MO 64112

Attn: David Arteberry, Senior Vice President

Telephone: (816) 474-1100)

Fax: (816-283-5326)

E-mail: arteberry@gkbaum.com

Dated: June 19, 2006

City of Salina, Kansas

Doc. No. 033314

#### State of Kansas

### Department of Administration Division of Purchases

#### **Notice to Bidders**

Sealed bids for items listed will be received by the Director of Purchases until 2 p.m. on the date indicated. For more information, call (785) 296-2376:

07/12/2006	09575	Plain Paper Copier
07/17/2006	09559	Pest Control Services
07/18/2006	09596	Pest Control Services
07/21/2006	09583	Pharmacy Services
07/24/2006	09604	Case Binders
07/28/2006	09595	Clothing, Uniform Rental
08/02/2006	09603	KAIR System Replacement

The above referenced bid documents can be downloaded at the following Web site:

#### http://da.state.ks.us/purch/rfq/

Additional files may be located at the following Web site (please monitor this Web site on a regular basis for any changes/addenda):

#### http://da.state.ks.us/purch/adds/default.htm

Contractors wishing to bid on the projects listed below must be prequalified. For more information about the prequalification process or to obtain the following bid documents, call (785) 296-8899:

07/18/2006	A-010021	Replace Chiller in Hospital
		Building — Larned, KŚ.
07/18/2006	A-010080 (A)	Interior Remodel —
		Telecommunication Package —
		Jung Building, Larned, KS.
07/27/2006	A-9609	Renovation of Hiawatha
		Armory, Hiawatha, KS.
07/27/2006	A-010202	Locking System for Cell Houses
		K, L, and M Buildings, Lansing,
		KS.

Chris Howe Director of Purchases

Doc. No. 033318

<sup>\*</sup> Preliminary, subject to change.

(Published in the Kansas Register June 29, 2006.)

#### Summary Notice of Bond Sale \$5,840,000\* City of Topeka, Kansas Full Faith and Credit Tax Increment Bonds Series 2006-A College Hill Redevelopment

#### **Bids**

Subject to the official notice of bond sale and preliminary official statement to be dated on or about June 30, 2006, sealed, facsimile and electronic bids will be received in the case of sealed and facsimile bids by the city clerk of the city of Topeka, Kansas, (the city, as issuer), on behalf of the governing body of the city at City Hall, 215 S.E. 7th, Topeka, KS 66603, and in the case of electronic bids, by the city's financial advisor on behalf of the governing body of the city on the Columbia Capital Auction Website, http://www.columbiacapitalauction.com until 10 a.m. on Tuesday, July 11, 2006, for the purchase of \$5,840,000\* principal amount of City of Topeka, Kansas, Full Faith and Credit Tax Increment Bonds, Series 2006-A (College Hill Redevelopment) (the bonds). No bid of less than 100 percent of the aggregate principal amount of the bonds, plus accrued interest thereon, if any, to the date of delivery will be considered, and no supplemental interest payments will be considered.

#### **Bond Details**

The bonds will consist of fully registered bonds in the denomination of \$5,000 or any integral multiple thereof. The bonds will initially be registered in the name of Cede & Co., as nominee of The Depository Trust Company, New York, New York, to which payments of principal of and interest on the bonds will be made. Individual purchases of bonds will be made in book-entry form only. Purchasers will not receive certificates representing their interest in bonds purchased. The bonds will be dated July 27, 2006, and will become due on August 15, in the years as follows:

Year	Principal Amount*
2009	\$200,000
2010	215,000
2011	225,000
2012	240,000
2013	255,000
2014	275,000
2015	290,000
2016	310,000
2017	330,000
2018	350,000
2019	375,000
2020	395,000
2021	420,000
2022	445,000
2023	475,000
2024	505,000
2025	535,000

The city reserves the right to modify the total amount of the bonds and the amount of any maturity in order to properly structure certain funds and accounts and substantially obtain annual debt service parameters determined by the city, based upon the interest rates and reoffering yields submitted by the successful bidder. The amount of the modification generally will not exceed the amount of net original issue premium bid on the bonds. Upon notification of preliminary award, the successful bidder must transmit to the city within 20 minutes, by fax or email, its reoffering yields and prices on the bonds. The successful bidder will be notified by means of telephone or facsimile transmission of any modification to such principal amount not later than 2 p.m. on the sale date. If the principal amount is modified, the city will seek to modify the maturity schedule, or make other mutually agreeable changes, in a way that will neither increase nor reduce the successful bidder's spread as a percentage of the principal amount of the bonds issued after taking into account such adjustments. The successful bidder may not withdraw its bid or change the interest rates bid as a result of any changes made to the principal amount of the bonds or principal of any maturity as described herein.

The bonds will be subject to optional and mandatory redemption prior to maturity as provided in the official notice of bond sale and in the preliminary official statement.

The bonds will bear interest from the date thereof at rates to be determined when the bonds are sold as hereinafter provided, which interest will be payable semiannually on February 15 and August 15 in each year, beginning on February 15, 2007.

#### **Pre-Bid Revisions**

The city reserves the right to issue a supplemental notice of sale not later than 48 hours prior to the sale date via the electronic bidding website (http://www.columbia capitalauction.com) (supplemental notice). If issued, the supplemental notice may modify (i) the maturity amounts of the bonds and/or (ii) such other terms of this notice as the city determines. Any such modifications will supersede the maturities and such other terms as set forth herein.

#### Paying Agent and Bond Registrar

U.S. Bank National Association, St. Louis, Missouri, is designated as the co-paying agent and bond registrar for the Bonds with U.S. Bank National Association, Topeka, Kansas.

#### **Good Faith Deposit**

Each bid shall be accompanied by a cashier's or certified check drawn on a bank located in the United States of America or by a qualified financial surety bond in the amount of \$116,800 (representing 2 percent of the principal amount of the bonds).

#### **Delivery**

The city will pay for printing the bonds and will deliver the same properly prepared, executed and registered to the facilities of The Depository Trust Company, New York, New York, without cost to the successful bidder within 45 days after the date of the sale.

#### **Assessed Valuation and Indebtedness**

The total assessed valuation of taxable tangible property in the city for the year 2005 is \$1,156,215,662. The

total outstanding general obligation bonded indebtedness of the city at June 22, 2006, including the bonds, is \$176,915,000.

Approval of Bonds

The bonds will be sold subject to the legal opinion of Nichols and Wolfe Chartered, Topeka, Kansas, bond counsel, whose approving legal opinion as to the validity of the bonds, will be furnished and paid for by the city and delivered to the successful bidder as and when the bonds are delivered.

#### **Additional Information**

Additional information regarding the bonds may be obtained from Linda Wood, City Controller, (785-368-3970) - FAX (785-368-3975), or from the city's financial advisor, Columbia Capital Management, LLC, 6950 Squibb Road, Suite 400, Mission, KS 66202 (913-248-8500) — FAX (913-248-8900).

Dated June 22, 2006.

City of Topeka, Kansas Iris E. Walker, City Clerk City Hall 215 SE 7th Street Topeka, Kansas 66603 (785) 368-3940

\* Subject to change. Doc. No. 033319

State of Kansas

#### **Department on Aging**

#### **Notice of Meeting**

The Kansas Department on Aging invites public comments regarding the development of its FY 2008 budget for the programs and services it administers. KDOA Acting Secretary Kathy Greenlee will attend each of the three meetings. Three sites will be available for participants to either appear in person or via conference call. Comments will be taken:

- \* July 11 in Topeka on from 9:30 to 11 a.m. at the Kansas Department on Aging, 503 Kansas Ave., Room 3 West;
- \* July 12 in Wichita from 1:30 to 3 p.m. at the Division of Human Services Conference Room, 635 N. Main (please enter through the north entrance);
- \* July 13 in Dodge City from 9 to 10:30 a.m. at the Dodge City Public Library, 1001 2nd Ave.

Participants wishing to participate by telephone at any of the three sites should call 785-296-0443.

Participants are asked to submit their comments in writing at the meeting or they can submit them electronically to Barbara Conant, KDOA director of public affairs at barbaraconant@aging.state.ks.us.

The Kansas Department on Aging is committed to making these meetings accessible to all participants. Requests for accommodation should be made at least five (5) working days in advance of the meeting by contacting Barbara Conant by email or at 785-296-6154 or by calling 1-800-432-3535 or TDD at (785) 291-3167.

Kathy Greenlee Acting Secretary on Aging State of Kansas

#### **State Corporation Commission**

### Notice of Hearing on Proposed Administrative Regulation

A public hearing on adoption of a new permanent administrative regulation to implement the requirements placed on the Commission by 2006 SB 449, the video competition act, will be held at 10:00 a.m., Thursday September 7, 2006, in the Third Floor Hearing Room at the offices of the Kansas Corporation Commission at 1500 S.W. Arrowhead, Topeka.

The video competition act requires the Commission to promulgate regulations to govern the application process for state issued video service authorization certificates. K.A.R. 82-15-1 establishes the process that entities seeking authority to provide cable or video service in Kansas after July 1, 2006, must follow. It requires applicants to complete the application form which will be available on the Commission's web site. The form requires an applicant to provide the information specified in Section 3(a)(1) through (5) of the bill and allows for the filing of initial, amended, transfer and terminating applications. The regulation establishes a time line for the application process to ensure compliance with the bill's requirement to issue the video service authorization certificate within 30 days from the date of the application. It establishes a schedule of fees for applications. The Commission will incur cost to administer the application process. The video competition act, Section 6, requires the Commission to recover its costs to issue video service authorization certificates through fees and assessments.

K.A.R. 82-15-1 is a proposed new regulation. The Commission has requested approval of the regulation as a temporary regulation which is necessary to ensure that the application process is in place by July 1, 2006, as required by the act. This notice requests comments on the permanent regulation that will take the place of the temporary regulation.

This 60-day notice of the public hearing constitutes a public comment period for the purpose of receiving written public comments on the proposed permanent regulation. All interested parties may submit written comments prior to the hearing to Eva Powers, Assistant General Counsel, Kansas Corporation Commission, 1500 SW Arrowhead, Topeka, Kansas 66604. Interested parties will also be given a reasonable opportunity to present their views orally on the adoption of the proposed regulations during the hearing.

Copies of the regulations and the economic impact statement may be obtained by contacting Eva Powers at (785) 271-3173.

Any person requiring accommodations under the Americans with Disabilities Act should give notice to the Commission at least ten days before the hearing date by contacting the Kansas Corporation Commission at 785-271-3140 or 1-800-662-0027.

Susan K Duffy Executive Director

Doc. No. 033304

Doc. No. 033320

#### State of Kansas

#### **Department of Labor**

#### Maximum and Minimum Weekly Benefit Amounts

The maximum weekly benefit amount and minimum weekly benefit amount payable with respect to new claims filed on or after July 1, 2006 and before July 1, 2007 are respectively \$386 and \$96. I hereby certify these maximum and minimum weekly benefit amounts have been computed in accordance with K.S.A. 44-704 of the Kansas Employment Security Law, pursuant to which this announcement is published.

Jim Garner Secretary of Labor

Doc. No. 033306

#### State of Kansas

#### **Board of Healing Arts**

**Permanent Administrative Regulations** 

#### **Article 29.—PHYSICAL THERAPY**

**100-29-2.** Approval of physical therapy programs.

- (a) An educational program for licensure as a physical therapist shall be recognized by the board if the program meets the "evaluative criteria for accreditation of education programs for the preparation of physical therapists," revised April 2005 by the commission on accreditation in physical therapy education and hereby adopted by reference.
- (b) An educational program for certification as a physical therapist assistant shall be recognized by the board if the program meets the "evaluative criteria for accreditation of education programs for the preparation of physical therapy assistants," adopted November 1, 2000 by the commission on accreditation in physical therapy education and hereby adopted by reference. (Authorized by K.S.A. 2005 Supp. 65-2911; implementing K.S.A. 2005 Supp. 65-2906; effective March 21, 1997; amended July 14, 2006.)
- **100-29-4. Examination.** (a) The examination required and approved by the board for licensure as a physical therapist shall be the physical therapist examination developed by the federation of state boards of physical therapy.
- (b) The examination required and approved by the board for certification as a physical therapist assistant shall be the physical therapist assistant examination developed by the federation of state boards of physical therapy.
- (c) To pass the examination for licensure or certification, each physical therapist and physical therapist assistant shall attain a criterion-referenced scaled score of at least 600 on a scale ranging from 200 to 800.
- (d) Each applicant who fails to pass the examination after three attempts shall submit evidence of completion of additional education approved by the board before being allowed to take the examination an additional time. (Authorized by K.S.A. 2005 Supp. 65-2911; implementing K.S.A. 2005 Supp. 65-2906; effective March 21, 1997; amended July 14, 2006.)

- **100-29-14.** (Authorized by K.S.A. 65-2911; implementing K.S.A. 1996 Supp. 65-2906; effective March 21, 1997; revoked July 14, 2006.)
- **100-29-16.** Supervision of physical therapist assistants and support personnel. (a) Each physical therapist shall be responsible for the following:
- (1) The physical therapy services provided to a patient or client by any physical therapist working under the direction of the physical therapist; and
- (2) the tasks relating to the physical therapy services provided to a patient or client by any support personnel working under the personal supervision of the physical therapist or by the physical therapist assistant acting under the direction of the physical therapist.
- (b) Each physical therapist and each physical therapist assistant acting under the direction of a physical therapist shall provide personal supervision of the support personnel during any session in which support personnel are utilized to carry out a task.
- (1) "Personal supervision" shall mean oversight by a physical therapist or by a physical therapist assistant acting under the direction of the physical therapist who is on-site and immediately available to the support personnel.
- (2) "Support personnel" shall mean any person other than a physical therapist or physical therapist assistant. Support personnel may be designated as or describe themselves as physical therapy aides, physical therapy technicians, physical therapy paraprofessionals, rehabilitation aides, or rehabilitation technicians.
- (3) "Task" shall mean an activity that does not require the formal education or training of a physical therapist or a physical therapist assistant.
- (c) The determination by the physical therapist to utilize a physical therapist assistant for selected components of physical therapy interventions shall require the education, expertise, and professional judgment of the physical therapist. Before delegating an intervention by a physical therapist to a physical therapist assistant and before delegating a designated task to support personnel, the physical therapist shall consider the following:
- (1) The education, training, experience, and skill level of the physical therapist assistant;
- (2) the complexity and acuteness of the patient's or client's condition or health status;
  - (3) the predictability of the consequences;
- (4) the setting in which the care is being delivered to the patient or client; and
- (5) the frequency of reexamination of the patient or client.
- (d) Only a physical therapist may perform any of the following:
  - (1) Interpretation of a referral;
- (2) performance and documentation of an initial examination, testing, evaluation, diagnosis, and prognosis;
- (3) development or modification of a plan of care that is based on a reexamination of the patient or client that includes the physical therapy goals for intervention;
- (4) determination of the qualifications of support personnel performing an assigned task;
- (5) delegation of and instruction about the service to be rendered by the physical therapist assistant;

- (6) timely review of documentation, reexamination of the patient or client, and revision of the plan of care when indicated;
- (7) establishment and documentation of the discharge plan and discharge summary; and
- (8) oversight of all documentation for services, including documents for billing, rendered to each patient or client under the care of the physical therapist.
- (e) In all practice settings, the performance of selected interventions by the physical therapist assistant and the delegation of designated tasks to support personnel shall be consistent with the safe and legal practice of physical therapy and shall be based on the following factors:
- (1) The complexity and acuteness of the patient's or client's condition or health status;
- (2) the physical therapist's proximity and accessibility to the patient or client;
- (3) the supervision available for all emergencies or critical events;
- (4) the type of setting in which the physical therapy intervention is provided;
- (5) the ability of the physical therapist assistant to perform the selected interventions or the support personnel to perform designated tasks; and
- (6) an assessment by the physical therapist of the ability of the support personnel to perform designated tasks.
- (f) A physical therapist shall not have more than four physical therapist assistants working concurrently under the direction of that physical therapist.
- (g) Failure to meet the provisions of this regulation shall constitute unprofessional conduct. (Authorized by K.S.A. 2005 Supp. 65-2911; implementing K.S.A. 2005 Supp. 65-2912; effective July 14, 2006.)

Lawrence T. Buening, Jr. Executive Director

Doc. No. 033309

#### State of Kansas

#### Kansas Insurance Department

### Notice of Hearing on Proposed Administrative Regulations

A public hearing will be conducted at 10:30 a.m. Thursday, September 7, in the third floor conference room, Kansas Insurance Department, 420 S.W. 9th, Topeka, to consider the adoption of proposed changes in existing rules and regulations.

This 60-day notice of the public hearing shall constitute a public comment period for the purpose of receiving written public comments on the proposed rules and regulations. All interested parties may submit written comments prior to the hearing to Deletria Nash, Kansas Insurance Department, 420 S.W. 9th, Topeka 66612-1678, via facsimile at (785) 291-3673, or via e-mail at dnash@ksinsurance.org. All interested parties will be given a reasonable opportunity to present their views orally on the adoption of the proposed regulations during the hearing.

Any individual with a disability may request accommodation in order to participate in the public hearing and may request the proposed regulations and economic im-

pact statements in an accessible format. Requests for accommodation should be made at least five working days in advance of the hearing by contacting Deletria Nash.

Any individual desiring a copy of these regulations and/or the policy and procedure that is being adopted by reference, if applicable, may obtain a copy from the department's Web site, www.ksinsurance.org (under the Legal Issues link) or by contacting Deletria Nash. The charge for copies is 50 cents per page. A summary of the regulations and their economic impact follows:

K.A.R. 40-4-41b. Utilization review organizations; requirements for collecting information. The purpose of the proposed amendments is to reflect changes made by the American Accreditation Health Commission, a/k/a URAC. This is one of the major entities that accredit utilization review organizations nationally. These amendments also were made after consulting with the Utilization Review Advisory Committee. The amendments to this regulation set out the standards and guidelines that utilization review organizations are to follow in collecting information to perform their utilization review functions. This regulation also sets out what information the utilization review organization shall use in making its utilization review decisions.

This regulation sets out requirements as to what information shall be collected in making utilization review decisions. This could result in additional costs to the utilization review organizations in training their personnel in what information is to be collected and used in their decisions. Training personnel in organizing and obtaining the information could be needed so that it meets the requirements of the regulation. However, with the increase of managed care as a mechanism to deliver health care to consumers, these requirements are needed to safeguard consumers and insure that they get the care that they need.

Most of the changes to this regulation are technical only. The only substantive change is the requirement that utilization review organizations must accept information from reasonably reliable sources that will assist in the certification process.

The economic impact on those entities that perform utilization review functions is justified in the protection of Kansas consumers. These regulations were not mandated by federal law. The entities most impacted are utilization review organizations and health insurance carriers who perform utilization review activities and consumers of health insurance.

K.A.R. 40-4-41f. Utilization review organizations; review requirements. The purpose of the proposed amendments is to reflect changes made by the American Accreditation Health Commission, a/k/a URAC. This is one of the major entities that accredit utilization review organizations nationally. These amendments also were made after consulting with the Utilization Review Advisory Committee. The amendments to this particular regulation add a requirement that utilization review organizations shall have a quality management program and what should be included in that quality management program.

This regulation adds the requirement that utilization review organizations have a quality management program. This could result in additional costs to the utilization review organizations in implementing the quality management program. However, with the increase of managed care as a mechanism to deliver health care to consumers, these requirements are needed to safeguard consumers and insure that they obtain the care that they need.

Most of the changes to this regulation are technical only. The only substantive change is the requirement that utilization review organizations must ensure that the management process is not influenced by conflicts of interest.

The economic impact on those entities that perform utilization review functions is justified in the protection of Kansas consumers. These regulations were not mandated by federal law. The entities most impacted are utilization review organizations and health insurance carriers who perform utilization review activities and consumers of health insurance.

K.A.R. 40-4-41i. Utilization review organizations; program qualifications. The purpose of this proposed regulation is to reflect changes made by the American Accreditation Health Commission, a/k/a URAC. This is one of the major entities that accredit utilization review organizations nationally. This regulation was proposed after consulting with the Utilization Review Advisory Committee.

This regulation sets out the criteria that the scripted clinical screening or explicit clinical review criteria shall meet if used by utilization review organizations. This could result in some additional cost to utilization review organizations in ensuring that if they use explicit clinical review criteria or scripted clinical screening that it meets these criteria. However, with the increase of managed care as a mechanism to deliver health care to consumers, these requirements are needed to safeguard consumers and insure that they obtain the care that they need.

There are two substantive changes proposed in this regulation. The first change adds the requirement that the medical director or clinical director of each utilization review organization must approve explicit clinical review criteria or scripts for scripted clinical screening. The second change adds the requirement that periodic performance evaluations must include a review of case files of each member of the utilization review organization staff. The remaining changes are technical.

The economic impact on those entities that perform utilization review functions is justified in the protection of Kansas consumers. These regulations were not mandated by federal law. The entities most impacted are utilization review organizations and health insurance carriers that perform utilization review activities and consumers of health insurance.

K.A.R. 40-4-41j. Utilization review organizations; written procedures to maintain confidentiality. The purpose of this proposed regulation is to reflect changes made by the American Accreditation Health Commission, a/k/a URAC. This is one of the major entities that accredit utilization review organizations nationally. This regulation was proposed after consulting with the Utili-

zation Review Advisory Committee. This regulation requires that utilization review organizations have written polices and procedures to maintain confidentiality of patient-specific information and what criteria those written policies and procedures should contain.

This regulation requires utilization review organizations have written policies and procedures to maintain confidentiality of patient-specific information. This could result in some additional cost to utilization review organizations in establishing and maintaining these procedures. However, with the increase of managed care as a mechanism to deliver health care to consumers, these requirements are needed to safeguard consumers and insure that they obtain the care that they need.

The proposed regulation adds requirements that utilization review organizations must have in their written policies and procures as they relate to patient-specific information. The remaining changes are technical.

The economic impact on those entities that perform utilization review functions is justified in the protection of Kansas consumers. These regulations were not mandated by federal law. The entities most impacted are utilization review organizations and health insurance carriers that perform utilization review activities and consumers of health insurance.

Sandy Praeger Kansas Insurance Commissioner

Doc. No. 033301

#### State of Kansas

#### **Department of Transportation**

#### **Request for Comments**

The Kansas Department of Transportation requests comments on the amendment of the Statewide Transportation Improvement Program (STIP) FY 2006-2008 by adding the following projects.

**Project X-2589-01,** Flashing Light Signal Straight Post Type with Gates, South Kansas and Oklahoma Railroad Crossing and Olive Street North of Cherryvale, in Montgomery County.

**Project X-2590-01,** Flashing Light Signal Straight Post Type with Gates, South Kansas and Oklahoma Railroad Crossing and Olive Street East Edge of Cherryvale, in Montgomery County.

**Project X-2591-01,** Flashing Light Signal Straight Post Type with Gates, South Kansas and Oklahoma Railroad Crossing and Carson Road Northeast Edge of Cherryvale, in Montgomery County.

**Project X-2592-01,** Flashing Light Signal Straight Post Type with Gates, South Kansas and Oklahoma Railroad Crossing and 8th Street in Independence, in Montgomery County.

**Project X-2593-01,** Upgrade Older Signal Systems with Led Lens, 59 Locations on the South Kansas and Oklahoma Railroad Crossing, Statewide.

The amendment of the STIP requires a 30-day public comment period. To receive more information on any of these projects or to make comment on the STIP amendment, contact the Kansas Department of Transportation, Bureau of Program and Project Management, 2nd Floor

Tower, Eisenhower State Office Building, 700 S.W. Harrison, Topeka, Kansas 66603-3754; (785) 296-3526; FAX (785) 368-6664.

This information is available in alternative accessible formats. To obtain an alternative format, contact the KDOT Bureau of Transportation Information, (785) 296-3585 (Voice/TTY).

The comment period regarding the STIP amendment will conclude July 31.

Deb Miller Secretary of Transportation

Doc. No. 033308

#### State of Kansas

#### **Department of Transportation**

#### **Notice to Contractors**

Sealed proposals for the construction of road and bridge work in the following Kansas counties will be received at the Bureau of Construction and Maintenance, KDOT, Topeka, or at the Eisenhower State Office Building, fourth floor west wing, until 2 p.m., July 19, 2006, and then publicly opened:

#### District One — Northeast

**Atchison**—59-3 U-2038-01 — U.S. 59 & U.S. 73/K-7 in Atchison, traffic signals. (Federal Funds)

**Atchison**—59-3 Ū-2039-01 — U.S. 59 & 14th Street and George Street in Atchison, intersection improvement. (Federal Funds)

**Douglas**—56-23 KA-0303-01 — U.S. 56 from the junction of U.S. 59 east to the Douglas-Johnson county line, 11.8 miles, Seal. (State Funds)

**Johnson**—69-46 KA-0624-01 — U.S. 69/56th Terrace/56th Street, 0.1 mile, curb & gutter. (State Funds)

**Leavenworth**—52 U-1897-01 — Eisenhower Road from U.S. 73 & K-7 to K-5 in Lansing: 0.5 mile, grading & surfacing. (Federal Funds)

Riley—81 C-4193-01 — County road 0.3 mile north & 1.3 miles west of Randolph, 0.4 mile, bridge superstructure. (Federal Funds)

**Shawnee**—70-89 KA-0522-01 — I-70 bridges over Southeast Third and Southeast Fourth Street in Topeka, bridge overlay. (State Funds)

Shawnee—24-89 KA-0628-01 — U.S. 24, from the west city limits of Silver Lake east to Rochester Road, 10.7 miles, seal. (State Funds)

**Wyandotte**—105 C-3865-01 — Loring Lane over Wolf Creek in Bonner Springs, 0.1 mile, grading, bridge & surfacing. (Federal Funds)

**Wyandotte**—70-105 KA-0523-01 — Westbound I-70 bridge over southbound I-435, bridge repair. (State Funds)

#### District Two — Northcentral

**Geary**—70-31 KA-0533-01 — Four I-70 bridges in the Junction City area, bridge repair. (State Funds)

McPherson—59 C-4191-01 — County road, 4 miles north of Moundridge, 0.1 mile, grading, bridge & surfacing. (Federal Funds)

**Washington**—22-101 KA-0178-01 — K-22, Mill Creek bridge, 2.9 miles north of the junction of U.S. 36, bridge painting. (State Funds)

#### **District Three** — Northwest

**Logan**—25-55 KA-0185-01 — K-25, Smoky Hill River, bridge repair. (State Funds)

Osborne—24-71 KA-0507-01 — U.S. 24 from the north junction of U.S. 281 east 6.9 miles, seal. (State Funds)

Rooks—82 C-4289-01 — County road 582 from K-18 to U.S. 24, 4.6 miles, surfacing. (Federal Funds)

**Russell**—281 84 — KA-0508-01 — U.S. 281, 0.5 mile south of the north city limits of Russell north to the west junction of K-18, 15 miles, Seal. (State Funds)

#### District Four — Southeast

Anderson—169-2 KA-0147-01 — Intersection of U.S. 169 and Main Street and U.S. 59 & 7th Street in Garnett, 0.6 mile, grading & surfacing. (State Funds)

**Anderson**—59-2 KA-0147-02 — Intersection of U.S. 59 and 7th Street in Garnett, grading & surfacing. (State Funds)

**Bourbon**—69-6 KA-0632-01 — U.S. 69, from the Bourbon-Crawford county line north 6 miles, pavement patching. (State Funds)

Chautauqua—166-10 KA-0540-01 — U.S. 166, Little Caney River bridge, 11.4 miles east of the east junction of K-99, bridge repair. (State Funds)

Linn—69-54 K-5759-02 — U.S. 69, new safety rest area at the north junction of K-52, safety rest area construction. (State Funds)

Linn—69-54 K-7891-01 — U.S. 69, 0.3 mile south of the Green Valley Road interchange, then north 6.4 miles, grading, bridge & surfacing. (Federal Funds)

Linn—69-54 KA-0212-02 — U.S. 69, Linn County Nature Trail at rest area at the north junction of K-52, pedestrian & bicycle paths. (Federal Funds)

Montgomery—166-63 KA-0541-01 — U.S. 166 bridge two miles east of the Chautauqua-Montgomery county line, bridge overlay. (State Funds)

Montgomery—166-63 KA-0542-01 — U.S. 166 Pumpkin Creek bridge, four miles east of U.S. 169, bridge repair. (State Funds)

#### District Five — Southcentral

**Harper**—39 C-4110-01 — County road 1 mile north of Harper then east 2 miles, surfacing. (Federal Funds)

Harper-Sumner—44-106 KA-0627-01 — K-44 from the east city limits of Anthony east to the Harper-Sumner county line; K-44 from the Harper-Sumner county line east to the end of K-44, 24.9 miles, seal. (State Funds)

**Kiowa**—183-49 KA-0545-01 — U.S. 183 bridges 3.5 miles and 5.5 miles north of the junction of U.S. 54, bridge repair. (State Funds)

**Kingman**—42-48 KA-0546-01 — K-42, 2 miles west of Spivey, bridge repair. (State Funds)

**Sedgwick**—81-87 KA-0548-01 — 47th Street bridge over I-135 in Wichita, bridge overlay. (State Funds)

#### District Six — Southwest

**Haskell**—160-41 KA-0587-01 — U.S 160, from the Grant-Haskell county line east to the north junction of U.S. 83, 12.1 miles, seal. (State Funds)

**Stevens**—56-95 KA-0595-01 — U.S. 56, from the east junction of K-25 east 5 miles, overlay. (State Funds)

Proposals will be issued upon request to all prospective bidders who have been prequalified by the Kansas Department of Transportation on the basis of financial condition, available construction equipment and experience. Also, a statement of unearned contracts (Form No. 284) must be filed. There will be no discrimination against anyone because of race, age, religion, color, sex, handicap or national origin in the award of contracts.

Each bidder shall file a sworn statement executed by or on behalf of the person, firm, association or corporation submitting the bid, certifying that such person, firm, association or corporation has not, either directly or indirectly, entered into any agreement, participated in any collusion, or otherwise taken any action in restraint of free competitive bidding in connection with the submitted bid.

This sworn statement shall be in the form of an affidavit executed and sworn to by the bidder before a person who is authorized by the laws of the state to administer oaths. The required form of affidavit will be provided by the state to each prospective bidder. Failure to submit the sworn statement as part of the bid approval package will make the bid nonresponsive and not eligible for award consideration.

Plans and specifications for the projects may be examined at the office of the respective county clerk or at the KDOT district offices responsible for the work.

Deb Miller Secretary of Transportation

Doc. No. 033315

#### State of Kansas

### Kansas Development Finance Authority Notice of Hearing

A public hearing will be conducted at 9 a.m. Thursday, July 13, in the offices of the Kansas Development Finance Authority, 555 S. Kansas Ave., Suite 202, Topeka, on the proposal for the KDFA to issue its Agricultural Development Revenue Bond for the project numbered below in the respective maximum principal amount. The bond will be issued to assist the borrower named below (who will be the owner and operator of the project) to finance the cost in the amount of the bond, which is then typically purchased by a lender bank who then, through the KDFA, loans the bond proceeds to the borrower for the purposes of acquiring the project. The project shall be located as shown:

**Project** No. 000673—Maximum Principal Amount: \$59,160. Owner/Operator: Jeremy L. Conley. Description: Acquisition of 80 acres of agricultural land and related improvements and equipment to be used by the owner/operator for farming purposes. The project is being financed by the lender for Jeremy L. Conley and is located at Section 15, Township 7, Range 12, Pottawatomie County, Kansas, approximately 3.5 miles south of Havensville and east on Pleasant Ridge Road.

The bond, when issued, will be a limited obligation of the KDFA and will not constitute a general obligation or indebtedness of the state of Kansas or any political subdivision thereof, including the KDFA, nor will it be an indebtedness for which the faith and credit and taxing powers of the state of Kansas are pledged. The bond will be payable solely from amounts received from the respective borrower, the obligation of which will be sufficient to pay the principal of, interest and redemption premium, if any, on the bond when it becomes due.

All individuals who appear at the hearing will be given an opportunity to express their views, and all written comments previously filed with the KDFA at its offices at 555 S. Kansas Ave., Suite 202, Topeka, 66603, will be considered. Additional information regarding the project may be obtained by contacting the KDFA.

Stephen R. Weatherford President

Doc. No. 033303

#### State of Kansas

#### **State Records Board**

#### **Notice of Meeting**

The Kansas State Records Board will meet at 8:30 a.m. Thursday, July 13, at the Kansas History Center, 6425 S.W. 6th Ave., Topeka. The board will consider requests from state agencies submitting proposals for retention and disposition of noncurrent government records. In addition, general administrative matters and other business will be discussed.

Matthew B. Veatch State Archivist and Secretary, State Records

Doc. No. 033307

#### State of Kansas

## Social and Rehabilitation Services Department on Aging Division of Health Policy and Finance

Notice of Final Nursing Facility Medicaid Rates for State Fiscal Year 2007; Methodology for Calculating Proposed Rates, and Rate Justifications; Notice of Intent to Amend the Medicaid State Plan; Request for Written Comments; and Notice of Intent to Publish Final Rates

Under the Medicaid program, 42 U.S.C. 1396 et seq., the state of Kansas pays nursing facilities, nursing facilities for mental health and hospital long-term care units (hereafter collectively referred to as nursing facilities) a daily rate for care provided to residents who are eligible for Medicaid benefits. The Secretary of Aging administers the nursing facility program, which includes hospital long-term care units, and the Secretary of Social and Rehabilitation Services administers the nursing facility for mental health program. Both secretaries act on behalf of the Division of Health Policy and Finance (DHPF), the single state Medicaid agency. As required by 42 U.S.C. 1396a(a)(13), as amended by Section 4711 of the Balanced Budget Act of 1997, P.L. No. 105-33, 101 Stat. 251, 507-08

(August 5, 1997), the Secretary of Aging and the Secretary of Social and Rehabilitation Services are publishing the proposed Medicaid per diem rates for Medicaid-certified nursing facilities for state fiscal year 2007, the methodology underlying the establishment of the proposed nursing facility rates, and the justifications for those proposed rates. SRS and KDOA also are providing notice of the state's intent to submit proposed amendments to the Medicaid State Plan to the U.S. Department of Health and Human Services' Centers for Medicare and Medicaid Services (CMS) on or before September 30, 2006.

### I. Methodology Used to Calculate Medicaid Per Diem Rates for Nursing Facilities

In general, the state uses a prospective, cost-based, facility-specific rate-setting methodology to calculate nursing facility Medicaid per diem rates, including the rates listed in this notice. The state's rate-setting methodology is contained primarily in the following described documents and authorities and in the exhibits, attachments, regulations or other authorities referenced in them:

A. The following portion of the Kansas Medicaid State Plan are maintained by DHPF:

Attachment 4.19D, Part I, Subpart C, Exhibit C-1, inclusive.

The text of this portion of the Medicaid State Plan identified above in Section IA.1, but not the documents, authorities and the materials incorporated therein by reference, is reprinted in this notice. The Medicaid State Plan provision set out in this notice appears in the version that the state currently intends to submit to CMS on or before September 30, 2006. The proposed Medicaid State Plan amendment that the state ultimately submits to CMS may differ from the version contained in this notice.

Copies of the documents and authorities containing the state's rate-setting methodology are available upon written request. A request for copies will be treated as a request for public records under the Kansas Open Records Act, K.S.A. 45-215 et seq. The state will charge a fee for copies. Written requests for copies should be sent to:

Secretary of Aging New England Building, 2nd Floor 503 S. Kansas Ave. Topeka, KS 66603-3404 Fax (785) 296-0767

#### A.1 Attachment 4.19D, Part I, Subpart C, Exhibit C-1: Methods and Standards for Establishing Payment Rates for Nursing Facilities

Under the Medicaid program the state of Kansas pays nursing facilities (NF), nursing facilities for mental health (NFMH), and hospital long-term care units (hereafter collectively referred to as nursing facilities) a daily rate for care provided to residents who are eligible for Medicaid benefits. The narrative explanation of the nursing facility reimbursement formula is divided into 12 sections. The sections are: Cost Reports, Rate Determination, Quarterly Case Mix Index Calculation, Resident Days, Inflation Factors, Upper Payment Limits, Quarterly Case Mix Rate Adjustment, Real and Personal Property Fee, Incentive Factors, Rate Effective Date, Retroactive Rate Adjustments, and Comparable Private Pay Rates.

#### 1) Cost Reports

The Nursing Facility Financial and Statistical Report (MS2004) is the uniform cost report. It is included in Kansas Administrative Regulation (K.A.R.) 30-10-17. It organizes the commonly incurred business expenses of providers into three reimbursable cost centers (operating, indirect health care and direct health care). Ownership costs (i.e., mortgage interest, depreciation, lease and amortization of leasehold improvements) are reported but reimbursed through the real and personal property fee. There is a nonreimbursable/nonresident-related cost center so that total operating expenses can be reconciled to the providers' accounting records.

All cost reports are desk reviewed by agency auditors. Adjustments are made, when necessary, to the reported costs in arriving at the allowable historic costs for the rate computations.

#### Calendar Year End Cost Reports:

All providers that have operated a facility for 12 or more months on December 31 shall file a calendar year cost report. The requirements for filing the calendar year cost report are found in K.A.R. 30-10-17.

When a non-arms length change of provider takes place or an owner of the real estate assumes the operations from a lessee, the facility will be treated as an ongoing operation. In this situation, the related provider or owner shall be required to file the calendar year end cost report. The new operator or owner is responsible for obtaining the cost report information from the prior operator for the months during the calendar year in which the new operator was not involved in running the facility. The cost report information from the old and new operators shall be combined to prepare a 12-month calendar year end cost report.

#### **Projected Cost Reports:**

The filing of projected cost reports are limited to: 1) newly constructed facilities; 2) existing facilities new to the Medicaid program; or 3) a provider re-entering the Medicaid program that has not actively participated or billed services for 24 months or more. The requirements are found in K.A.R. 30-10-17.

#### 2) Rate Determination

#### Rates for Existing Nursing Facilities

Medicaid rates for Kansas NFs are determined using a prospective, facility-specific rate-setting system. The rate is determined from the base year cost data submitted by the provider. The current base year is 2001.

The allowable expenses are divided into three cost centers. The cost centers are Operating, Indirect Health Care and Direct Health Care. They are defined in K.A.R. 30-10-18.

The allowable historic per diem cost is determined by dividing the allowable resident-related expenses in each cost center by resident days. The allowable historic per diem cost may be adjusted by an inflation factor. The resident days and inflation factors used in the rate determination will be explained in greater detail in the following sections.

The inflated allowable historic per diem cost for each cost center is then compared to the cost center upper pay
(continued)

ment limit. The allowable per diem rate is the lesser of the inflated allowable historic per diem cost in each cost center or the cost center upper payment limit. Each cost center has a separate upper payment limit. If each cost center upper payment limit is exceeded, the allowable per diem rate is the sum of the three cost center upper payment limits. There also is a separate upper payment limit for owner, related party, administrator and co-administrator compensation. The upper payment limits will be explained in more detail in a separate section.

The case mix of the residents adjusts the Direct Health Care cost center. The reasoning behind a case-mix payment system is that the characteristics of the residents in a facility rather than the characteristics of the facility should determine the payment rate. The idea is that certain resident characteristics can be used to predict future costs to care for residents with those same characteristics. For these reasons, it is desirable to use the case mix classification for each facility in adjusting provider rates.

There are add-ons to the allowable per diem rate. The add-ons consist of the incentive factor and the real and personal property fee. The incentive factor and real and personal property fee are explained in separate sections of this exhibit. The add-ons plus the allowable per diem rate equal the total per diem rate.

#### Rates for New Construction and New Facilities

The per diem rate for newly constructed nursing facilities, or new facilities to the Kansas Medical Assistance program, shall be based on a projected cost report submitted in accordance with K.A.R. 30-10-17.

The cost information from the projected cost report and the first historic cost report covering the projected cost report period shall be adjusted to the base-year period. This adjustment will be based on the Data Resources, Inc., National Skilled Nursing Facility Market Basket Without Capital Index (DRI Index). The DRI indices listed in the latest available quarterly publication will be used to adjust the reported cost data from the midpoint of the cost report period to the midpoint of the base-year period. The provider shall remain in new enrollment status until the base year is reestablished. During this time, the adjusted cost data shall be used to determine all rates for the provider. Any factor for inflation that is applied to cost data for established providers shall be applied to the adjusted cost data for each provider in new enrollment status.

#### Rates for Facilities Recognized as a Change of Provider

The payment rate for the first 24 months of operation shall be based on the base year historical cost data of the previous owner or provider. If base year data is not available the most recent calendar year data for the previous provider shall be used. Beginning with the first day of the 25th month of operation, the payment rate shall be based on the historical cost data for the most recent calendar year submitted by the new provider.

All nonbase-year cost data used to set rates for facilities recognized as a change-of-provider shall be adjusted to the base-year period. This adjustment will be based on the Data Resources, Inc., National Skilled Nursing Facility Market Basket Without Capital Index (DRI Index). The DRI indices listed in the latest available quarterly publication will be used to adjust the reported cost data from

the midpoint of the cost report period to the midpoint of the base-year period. The provider shall remain in change-of-provider status until the base year is re-established. During this time, the adjusted cost data shall be used to determine all rates for the provider. Any factor for inflation that is applied to cost data for established providers shall be applied to the adjusted cost data for each provider in new enrollment status.

#### Rates for Facilities Re-entering the Program

The per diem rate for each provider reentering the Medicaid program shall be determined from a projected cost report if the provider has not actively participated in the program by the submission of any current resident service billings to the program for 24 months or more. The per diem rate for all other providers re-entering the program shall be determined from the base-year cost report filed with the agency or the most recent cost report filed preceding the base year.

All nonbase-year cost data used to set rates for facilities re-entering the program shall be adjusted to the base-year period. This adjustment will be based on the Data Resources, Inc., National Skilled Nursing Facility Market Basket Without Capital Index (DRI Index). The DRI indices listed in the latest available quarterly publication will be used to adjust the reported cost data from the midpoint of the cost report period to the midpoint of the base-year period. The provider shall remain in re-enrollment status until the base year is re-established. During this time, the adjusted cost data shall be used to determine all rates for the provider. Any factor for inflation that is applied to cost data for established providers shall be applied to the adjusted cost data for each provider in new enrollment status.

#### 3) Quarterly Case Mix Index Calculation

Providers are required to submit to the agency the uniform assessment instrument, which is the Minimum Data Set (MDS), for each resident in the facility. The MDS assessments are maintained in a computer database.

The Resource Utilization Groups-III (RUG-III) Version 5.12b, 34 group, index maximizer model is used as the resident classification system to determine all case-mix indices, using data from the MDS submitted by each facility. Standard Version 5.12b case mix indices developed by the Health Care Financing Administration (now the Centers for Medicare and Medicaid Services) shall be the basis for calculating facility average case mix indices to be used to adjust the Direct Health Care costs in the determination of upper payment limits and rate calculation. Resident assessments that cannot be classified will be assigned the lowest CMI for the state.

Each resident in the facility on the first day of each calendar quarter with a completed and submitted assessment shall be assigned a RUG-III 34 group calculated on the resident's most current assessment available on the first day of each calendar quarter. This RUG-III group shall be translated to the appropriate CMI. From the individual resident case mix indices, three average case mix indices for each Medicaid nursing facility shall be determined four times per year based on the assessment information available on the first day of each calendar quarter.

The facility-wide average CMI is the simple average, carried to four decimal places, of all resident case mix indices. The Medicaid-average CMI is the simple average, carried to four decimal places, of all indices for residents where Medicaid is known to be a per diem payer source on the first day of the calendar quarter or at any time during the preceding quarter. The private-pay/other average CMI is the simple average, carried to four decimal places, of all indices for residents where neither Medicaid nor Medicare were known to be the per diem payer source on the first day of the calendar quarter or at any time during the preceding quarter. Case mix indices for ventilator-dependent residents for whom additional reimbursement has been determined shall be excluded from the average CMI calculations.

The resident listing cutoff for calculating the average CMIs will be the first day of the quarter before the rate is effective. The following are the dates for the resident listings and the quarter in which the average Medicaid CMIs will be used in the quarterly rate-setting process.

Rate Effective Date:	Cutoff Date:
July 1	April 1
October 1	July 1
January 1	October 1
April Í	January 1

The resident listings will be mailed to providers prior to the dates the quarterly case-mix adjusted rates are determined. This will allow the providers time to review the resident listings and make corrections before they are notified of new rates. The cutoff schedule may need to be modified in the event accurate resident listings and Medicaid CMI scores cannot be obtained from the MDS database.

#### 4) Resident Days

The allowable historic per diem costs for the Direct Health Care cost center and for food and utilities in the Indirect Health Care cost center are determined by dividing the allowable resident-related expenses by the actual resident days during the cost report period used to establish the base year rate. The allowable historic per diem cost for the Operating and Indirect Health Care Cost Centers less food and utilities is subject to an 85% minimum occupancy rule. The greater of the actual resident days for the cost report period used to establish the base year rate or the 85% minimum occupancy based on the number of licensed bed days during the cost report period used to establish the base year rate is used as the total resident days in the rate calculation for the Operating cost center and the Indirect Health Care cost center less food and utilities. All licensed beds are required to be certified to participate in the Medicaid program.

There are two exceptions to the 85% minimum occupancy rule. The first is that it does not apply to a provider who is allowed to file a projected cost report for an interim rate. Both the rates determined from the projected cost report and the historic cost report covering the projected cost report period are based on the actual resident days for the period.

The second exception is for the first cost report filed by a new provider who assumes the rate of the previous provider. If the 85% minimum occupancy rule was applied to the previous provider's rate, it also is applied when the rate is assigned to the new provider. However, when the new provider files a historic cost report for any part of the first 12 months of operation, the rate determined from the cost report will be based on actual days and not be subject to the 85% minimum occupancy rule for the months in the first year of operation. The 85% minimum occupancy rule is then reapplied to the rate when the new provider reports resident days and costs for the 13th month of operation and after.

#### 5) Inflation Factors

An additional 12 months of inflation will be applied to the allowable reported costs from the calendar year end 2001 cost reports. The inflation will be based on the Data Resources, Inc., National Skilled Nursing Facility Market Basket Without Capital Index (DRI Index).

The DRI Indices listed in the latest available quarterly publication will be used to determine the inflation tables for the payment schedules processed during the payment rate period. This may require the use of forecasted factors in the inflation table. The inflation tables will not be revised until the next payment rate period.

The inflation factor will not be applied to the following costs:

- 1) Owner/Related Party Compensation
- 2) Interest Expense
- 3) Real and Personal Property Taxes

The inflation factor for the real and personal property fees will be based on the Data Resources, Inc., National Skilled Nursing Facility Total Market Basket Index (DRI Index). An additional 12 months of inflation will be applied to the real and personal property fees in effect June 1, 2006.

#### 6) Upper Payment Limits

There are three types of upper payment limits that will be described. One is the owner/related party/administrator/co-administrator limit. The second is the real and personal property fee limit. The last type of limit is an upper payment limit for each cost center. The upper payment limits are in effect during the payment rate period unless otherwise specified by a State Plan amendment.

### Owner/Related Party/Administrator/Co-Administrator Limits:

Since salaries and other compensation of owners are not subject to the usual market constraints, specific limits are placed on the amounts reported. First, amounts paid to nonworking owners and directors are not an allowable cost. Second, owners and related parties who perform resident-related services are limited to a salary chart based on the Kansas Civil Service classifications and wages for comparable positions. Owners and related parties who provide resident-related services on less than a full-time basis have their compensation limited by the percent of their total work time to a standard work week. A standard work week is defined as 40 hours. The owners and related parties must be professionally qualified to perform services that require licensure or certification.

The compensation paid to owners and related parties shall be allocated to the appropriate cost center for the type of service performed. Each cost center has an ex-

pense line for owner/related party compensation. There also is a cost report schedule titled "Statement of Owners and Related Parties." This schedule requires information concerning the percent of ownership (if over 5%), the time spent in the function, the compensation, and a description of the work performed for each owner and/or related party. Any salaries reported in excess of the Kansas Civil Service-based salary chart are transferred to the Operating cost center where the excess is subject to the Owner/ Related Party/Administrator/Co-Administrator per diem compensation limit.

The Schedule C is an array of nonowner administrator and co-administrator salaries. The schedule includes the base year historic cost reports in the database from all active nursing facility providers. The salary information is not adjusted for inflation. The per diem data is calculated using an 85% minimum occupancy level for those providers in operation for more than 12 months. The Schedule C for the owner/related party/administrator/co-administrator per diem compensation limit is the first schedule run during the rate setting.

The Schedule C is used to set the per diem limitation for all nonowner administrator and co-administrator salaries and owner/related party compensation in excess of the civil service based salary limitation schedule. The per diem limit for a 50-bed or larger home is set at the 90th percentile on all salaries reported for nonowner administrators and co-administrators. A limitation table is then established for facilities with less than 50 beds. This table begins with a reasonable salary per diem for an administrator of a 15-bed or less facility. A linear relationship is then established between the compensation of the administrator of the 15-bed facility and the compensation of the administrator of a 50-bed facility. The linear relationship determines the per diem limit for the facilities between 15 and 50 beds.

The per diem limits apply to the nonowner administrators and co-administrators and the compensation paid to owners and related parties who perform an administrative function or consultant type of service. The per diem limit also applies to the salaries in excess of the civil service-based salary chart in other cost centers that are transferred to the operating cost center.

#### Real and Personal Property Fee Limit

The property component of the reimbursement methodology consists of the real and personal property fee that is explained in more detail in a later section. The upper payment limit will be 105% of the median determined from a total resident day-weighted array of the inflated property fees.

#### Cost Center Upper Payment Limits

The Schedule B computer run is an array of all per diem costs for each of the three cost centers-Operating, Indirect Health Care and Direct Health Care. The schedule includes the base year cost data from all active nursing facility providers. Projected cost reports are excluded from the database.

The per diem expenses for the Operating cost center and the Indirect Health Care cost center less food and utilities are subject to the 85% minimum occupancy. All previous desk review and field audit adjustments are

considered in the per diem expense calculations. The costs are adjusted by the owner/related party/administrator/co-administrator limit.

Prior to the Schedule B arrays, the cost data on certain expense lines will be adjusted for historical and forecasted inflation, where appropriate. This will bring the costs reported by the providers to a common point in time for comparisons. The historic inflation will be based on the DRI Index for the cost center limits effective July 1, 2006. This historic inflation factor will adjust costs from the midpoint of each providers cost report period to December 31, 2005, for the Schedule B processing.

Certain costs are exempt from the inflation application when setting the upper payment limits. They include owner/related party compensation, interest expense, and real and personal property taxes.

The final results of the Schedule B run are the median compilations. These compilations are needed for setting the upper payment limit for each cost center. The median for each cost center is weighted based on total resident days. The upper payment limits will be set using the following:

Operating 110% of the median Indirect Health Care 115% of the median 120% of the median 120% of the median

#### Direct Health Care Cost Center Limit:

The Kansas reimbursement methodology has a component for a case mix payment adjustment. The Direct Health Care cost center rate component and upper payment limit are adjusted by the facility average CMI.

For the purpose of setting the upper payment limit in the Direct Health Care cost center, the facility cost report period CMI and the statewide average CMI will be calculated. The facility cost report period CMI is the resident day-weighted average of the quarterly facility-wide average case mix indices, carried to four decimal places. The quarters used in this average will be the quarters that most closely coincide with the financial and statistical reporting period. For example, a 01/01/20XX-12/31/20XX financial and statistical reporting period would use the facility-wide average case mix indices for quarters beginning 04/01/XX, 07/01/XX, 10/01/XX and 01/01/XY. The statewide average CMI is the resident day-weighted average, carried to four decimals, of the facility cost report period case mix indices for all Medicaid facilities calculated effective each payment rate period.

The statewide average CMI and facility cost report period CMI are used to set the upper payment limit for the Direct Health Care cost center. The limit is based on all facilities with a historic cost report in the database. There are three steps in establishing the base upper payment limit.

The first step is to normalize each facility's Direct Health Care inflated per diem cost to the statewide average CMI. The following will describe the normalization process. A facility has an average inflated per diem cost of \$60 (A) and a facility cost report period CMI of 1.4000 (B). The statewide average CMI is .9500 (C). First, divide the statewide average CMI (C) by the facility cost report period CMI (B) (.9500/1.4000=.68). Second, the quotient is then multiplied by the average inflated per diem cost

(A) to determine the normalized inflated cost at the statewide average CMI ( $$60 \times .68 = $40.80$ ). Normalizing each facility's cost to the statewide average CMI ensures a level comparison of direct health care costs can be made when setting the upper payment limit.

The second step is to array the normalized inflated costs, based on the statewide average CMI, to determine the median. The median is located using a day-weighted methodology. That is, the median cost is the per diem cost for the facility in the array at which point the cumulative total of all resident days first equals or exceeds half the number of the total resident days for all providers. The facility with the median resident day in the array sets the median inflated direct health care cost. For example, if there are 8 million resident days, the facility in the array with the 4 millionth day would set the median.

The final step in calculating the base Direct Health Care upper payment limit is to apply the percentage factor to the median cost. For example, if the median cost is \$45 and the upper payment limit is based on 120% of the median, then the upper payment limit for the statewide average CMI would be \$54 (D=120%  $\times$  \$45).

Once the base limit for the Direct Health Care cost center is established at the statewide average CMI, the base limit is adjusted by each facility's cost report period CMI to determine a facility-specific Direct Health Care cost center upper payment limit. The following will describe the facility-specific upper payment limit process. A facility has an average facility cost report period CMI of 1.4000(A). The statewide average CMI is .9500 (B). First, divide the facility cost report period average CMI (A) by the statewide average CMI (B) (1.4000/.9500=1.47). Second, the statewide average CMI limit D (\$54) is multiplied by the quotient to determine the upper payment limit for the facility ( $$54 \times 1.47 = $79.38$ ). In the example above, the facility inflated Direct Health Care cost was \$60, which is less than the upper payment limit of \$79.38 for a facility average CMI of 1.4000.

#### 7) Quarterly Case Mix Rate Adjustment

The allowance for the Direct Health Care cost component will be based on the average Medicaid CMI in the facility. The first step in calculating the allowance is to determine the lower of the inflated Direct Health Care cost or the facility's specific Direct Health Care upper payment limit. Using the example in the Upper Payment Limit section, the Direct Health Care cost of \$60 was less than the upper payment limit of \$79.38 for an average CMI of 1.4000.

The next step is to determine the Medicaid acuity adjusted allowable Direct Health Care cost. The Medicaid CMI is divided by the facility cost report period CMI. Using the example above, if the Medicaid average CMI is 1.6000, it is divided by 1.4000 to arrive at a quotient of 1.1400 (1.6000/1.4000). The lower of the inflated per diem cost or the facility-specific Direct Health Care upper payment limit is multiplied by the quotient to determine the Medicaid acuity adjusted allowable Direct Health Care cost. In the example, the allowable Medicaid acuity adjusted Direct Health Care cost will be \$68.40 (\$60  $\times$  1.1400).

For illustrative purposes, if the facility-specific upper payment limit had been \$55 for an average CMI of 1.4000, the Medicaid rate would have been calculated using the upper payment limit since it was lower than the cost of \$60. In this situation, the allowable Medicaid acuity adjusted cost would be \$62.70 (1.1400  $\times$  \$55).

The Direct Health Care component of the Medicaid rate is adjusted quarterly for changes in the Medicaid CMI. Using the first example above, if the average Medicaid CMI increases from 1.6000 to 1.7000 the following quarter, the allowance for the Direct Health Care cost would increase from \$68.40 to \$72.60. The first step is to divide the new average Medicaid CMI by the facility cost report period CMI established for the rate year (July 1 through June 30) to determine the new quotient (1.7000/1.4000=1.2100). The lower of the facility-specific Direct Health Care upper payment limit or the inflated Direct Health Care per diem cost is multiplied by the new quotient to determine the Medicaid allowance. (1.21 × \$60=\$72.60).

Conversely, if the average Medicaid CMI decreases from 1.6000 to 1.5000 the following quarter, the allowance for the Direct Health Care cost would decrease from \$68.40 to \$64.20. Again, the first step is to divide the new average Medicaid CMI by the facility cost report period CMI established for the rate year (July 1 through June 30) to determine the new quotient (1.5000/1.4000=1.0700). The lower of the facility-specific Direct Health Care upper payment limit or the inflated Direct Health Care per diem cost is multiplied by the new quotient to determine the Medicaid allowance (1.0700  $\times$  \$60=\$64.20).

#### 8) Real And Personal Property Fee

The property component of the reimbursement methodology consists of the real and personal property fee (property fee). The property fee is paid in lieu of an allowable cost of mortgage interest, depreciation, lease expense and/or amortization of leasehold improvements. The fee is facility specific and does not change as a result of a change of ownership, change in lease, or with reenrollment in the Medicaid program. The original property fee was comprised of two components, a property allowance and a property value factor. The differentiation of fee into these components was eliminated effective July 1, 2002. At that time each facility's fee was re-established based on the sum of the property allowance and value factor.

The property fees in effect on June 1, 2006, were inflated with 12 months of inflation effective July 1, 2006. The inflation factor was from the Data Resources, Inc.-WEFA, National Skilled Nursing Facility Total Market Basket Index (DRI Index). The providers received the lower of the inflated property fee or the upper payment limit.

For providers re-enrolling in the Kansas Medical Assistance program or providers enrolling for the first time but operating in a facility that was previously enrolled in the program, the property fee shall be the sum of the last effective property allowance and the last effective value factor for that facility. The property fee will be inflated and then compared to the upper payment limit. The property fee will be the lower of the facility-specific inflated property fee or the upper payment limit.

Providers entering the Kansas Medical Assistance program for the first time, who are operating in a building

for which a fee has not previously been established, shall have a property fee calculated from the ownership costs reported on the cost report. This fee shall include appropriate components for rent or lease expense, interest expense on real estate mortgage, amortization of leasehold improvements, and depreciation on buildings and equipment. The process for calculating the property fee for providers entering the Kansas Medical Assistance program for the first time is explained in greater detail in Exhibit A-14 (K.A.R. 30-10-25).

There is a provision for changing the property fee. This is for a rebasing when capital expenditure thresholds are met (\$25,000 for homes under 51 beds and \$50,000 for homes over 50 beds). The original property fee remains constant but the additional factor for the rebasing is added. The property fee rebasing is explained in greater detail in Exhibit A-14 (K.A.R. 30-10-25). The rebased property fee is subject to the upper payment limit.

#### 9) Incentive Factors

An incentive factor will be awarded to both NF and NF-MH providers that meet certain outcomes measures criteria. The criteria for NF and NF-MH providers will be determined separately based on arrays of outcomes measures for each provider group.

#### Nursing Facility Quality and Efficiency Incentive Factor:

The Nursing Facility Quality and Efficiency Outcomes Incentive Factor is a per diem add-on ranging from \$0.00 to \$3.00. It is designed to encourage quality care and efficiency. The incentive factor is determined by six outcome measures: case-mix adjusted nurse staffing ratio, operating expense, staff turnover rate, staff retention rate, occupancy rate, and survey performance. The most recent cost report data for each provider will be used to determine the outcome measures except for the staff turnover and retention rates, which will be determined from 2004 cost report data. Each provider is awarded points based on their outcome measures, and the total points for each provider determine the per diem incentive factor included in the provider's rate calculation.

Providers may earn up to two incentive points for their case-mix adjusted nurse staffing ratio. They will receive two points if their case-mix adjusted staffing ratio equals or exceeds 4.28, which is 120% of the statewide NF median of 3.57. They will receive one point if the ratio is less than 120% of the NF median but greater than or equal to 3.93, which is 110% of the statewide NF median. Providers with staffing ratios below 110% of the NF median will receive no points for this incentive measure.

Providers also may earn up to two points for their occupancy outcome measures. If they have total occupancy greater than or equal to 90% they will earn one point. If they have Medicaid occupancy greater than or equal to 60% they also will earn one point. Providers that meet both of these criteria will receive a total of two incentive points for occupancy outcomes, and providers that fail to meet either criterion will receive zero points for occupancy.

The incentive points awarded for survey performance also will range from zero to two points. Two points will be awarded to providers that have no health survey deficiencies on all surveys included in the review. Providers that have no more than eight health survey deficiencies, nor any one health survey deficiency rated higher than an "E" on the CMS scope and severity chart, on each survey included in the review will earn one incentive point. All other providers will receive zero incentive points for survey results. The surveys included in the review will be the most recent annual survey conducted for each provider prior to December 31, 2005, and any complaint survey conducted between January 1, 2005 and December 31, 2005.

Providers also may earn one point for each of the following outcomes measures: low operating expenses, low staff turnover, and high staff retention. Providers with per diem operating expenses below 90% of the statewide median per diem operating expense, \$19.60, will earn one point. Providers with direct health care staff turnover below 74%, the statewide median staff turnover rate, will earn one point as long as contracted labor costs do not exceed 10% of the provider's total direct health care labor costs. Finally, providers with staff retention rates above the statewide median staff retention rate of 64% will earn one point.

The table below summarizes the incentive factor outcomes and points:

Quality/Efficiency Outcome:

Incentive Points:

Quality/Elliciency outcome:	ive i onito.
1) CMI adjusted staffing ratio $\geq$ 120% (4.28) of state median, or CMI adjusted staffing ratio between 110% (3.93) and 120%	2, or 1
2) Total occupancy ≥ 90% Medicaid occupancy ≥ 60%	1 1
3) No health survey deficiencies during review period, or No deficiency > "E" or more than 8 deficiencies/survey	2, or 1
4) Operating expenses < 90% of state median, \$19.60	1
5) Staff turnover rate < state median, 74% Contracted labor < 10% of total direct health care labor costs	1
6) Staff retention > state median, 64%	1
Total Incentive Points Available	9

The Schedule E is an array containing the incentive points awarded to each provider for each quality and efficiency incentive outcome. The total of these points will be used to determine each provider's incentive factor based on the following table:

<b>Total Incentive Points:</b>	Incentive Factor Per Diem:
Tier 1: 7-9 points	\$3.00
Tier 2: 5-6 points	\$2.00
Tier 3: 4 points	\$1.00
Tier 4: 0-3 points	\$0.00

### Nursing Facility for Mental Health Quality and Efficiency Incentive Factor:

The Quality and Efficiency Outcomes Incentive plan for Nursing Facilities for Mental Health (NFMH) will be established separately from NF. NFMH serve people who often do not need the NF level of care on a long-term basis. There is a desire to provide incentive for NFMH to work cooperatively and in coordination with Community Mental Health Centers to facilitate the return of persons to the community. The outcome measures for FY06 for NFMH will be the same as regular NF with the exception of occupancy rate.

The Quality and Efficiency Outcomes Incentive Factor is a per diem add-on ranging from \$0.00 to \$3.00. It is

designed to encourage quality care, efficiency and cooperation with discharge planning. The incentive factor is determined by six outcome measures: case-mix adjusted nurse staffing ratio, operating expense, staff turnover rate, staff retention rate, occupancy rate, and survey performance. Each provider is awarded points based on their outcome measures, and the total points for each provider determine the per diem incentive factor included in the provider's rate calculation.

Providers may earn up to two incentive points for their case-mix adjusted nurse staffing ratio. They will receive two points if their case-mix adjusted staffing ratio equals or exceeds 3.32, which is 120% of the statewide NFMH median of 2.77. They will receive one point if the ratio is less than 120% of the NFMH median but greater than or equal to 3.05, which is 110% of the statewide NFMH median. Providers with staffing ratios below 110% of the NFMH median will receive no points for this incentive measure.

NFMH providers also may earn one point for their occupancy outcomes measure. If they have total occupancy less than or equal to 93.7%, the statewide median for NFMH, they will earn one point.

The incentive points awarded for NFMH survey performance also will range from zero to two points. Two points will be awarded to providers that have no health survey deficiencies on all surveys included in the review. Providers that have no more than eight health survey deficiencies, nor any one health survey deficiency rated higher than an "E" on the CMS scope and severity chart, on each survey included in the review will earn one incentive point. All other providers will receive zero incentive points for survey results. The surveys included in the review will be the most recent annual survey conducted for each provider prior to December 31, 2005, and any complaint survey conducted between January 1, 2005 and December 31, 2005.

NFMH providers also may earn one point for each of the following outcomes measures: low operating expenses, low staff turnover, and high staff retention. Providers with per diem operating expenses below \$15.87, 90% of the statewide median per diem operating expense for NFMH, will earn one point. Providers with direct health care staff turnover below 46%, the statewide median staff turnover rate for NFMH, will earn one point, as long as contracted labor costs do not exceed 10% of the provider's total direct health care labor costs. Finally providers with staff retention rates above 68%, the statewide median staff retention rate for NFMH, will earn one point.

The table below summarizes the incentive factor outcomes and points:

Quality/Efficiency Outcome: Incent	ive Points
1) CMI adjusted staffing ratio ≥ 120% (3.32) of state median, or CMI adjusted staffing ratio between 110% (3.05) and 120%	2, or 1
2) Total occupancy ≤93.7% (NFMH median)	1
3) No health survey deficiencies during review period, or No deficiency > "E" or more than 8 deficiencies/survey	2, or 1
4) Operating expenses < 90% of NFMH median, \$15.87	1
5) Staff turnover rate < NFMH median, 46%	1
6) Staff retention > NFMH median, 68%	1
Total Incentive Points Available	8

The Schedule E is an array containing the incentive points awarded to each NFMH provider for each quality and efficiency incentive outcome. The total of these points will be used to determine each provider's incentive factor based on the following table:

Total Incentive Points:	<b>Incentive Factor Per Diem:</b>
Tier 1: 7-8 points	\$3.00
Tier 2: 5-6 points	\$2.00
Tier 3: 4 points	\$1.00
Tier 4: 0-3 points	\$0.00

#### 10) Rate Effective Date

Rate effective dates are determined in accordance with K.A.R. 30-10-19. The rate may be revised for an add-on reimbursement factor (i.e., rebased property fee), desk review adjustment or field audit adjustment.

#### 11) Retroactive Rate Adjustments

Retroactive adjustments, as in a retrospective system, are made for the following three conditions:

A retroactive rate adjustment and direct cash settlement is made if the agency determines that the base year cost report data used to determine the prospective payment rate was in error. The prospective payment rate period is adjusted for the corrections.

If a projected cost report is approved to determine an interim rate, a settlement also is made after a historic cost report is filed for the same period.

All settlements are subject to upper payment limits. A provider is considered to be in projection status if they are operating on a projected rate and they are subject to the retroactive rate adjustment.

#### 12) Comparable Private Pay Rates

The last factor considered in determining a provider's Medicaid per diem payment rate is their private pay rate. Providers are reimbursed the lower of the calculated Medicaid rate or their private pay rate. The agency maintains a registry of private pay rates. It is the responsibility of the providers to send in private pay rate updates so that the registry is updated. When new Medicaid rates are determined, if the private pay rate reflected in the registry is lower, then the provider is held to that private pay rate until the provider sends notification that it has a higher private pay rate.

#### Case Mix Adjustments to Private Pay Rates:

Private pay rates submitted to the agency are adjusted up if a provider's average private pay/other CMI is lower than its Medicaid average CMI. This is accomplished by multiplying the provider's average private pay rate in the private pay registry by the ratio of their Medicaid average CMI to their average private pay/other CMI. This ensures that providers' Medicaid rates are not limited to a lower private pay rate that may be attributed to the lower acuity of the private pay residents. There is no adjustment to private pay rates if the facility's Medicaid average CMI is less than its average private pay/other CMI. There also is no adjustment to private pay rates if the facility's total Medicaid rate is less than its average private pay rate.

Proposed

#### II. Proposed Medicaid Per Diem Rates for Kansas Nursing Facilities

**A.** Cost Center Limitations: The state proposes the following cost center limitations that are used in setting rates effective July 1, 2006.

	]	Per Day
Cost Center	Limit Formula	Limit
Operating	110% of the Median Cost	\$22.81
Indirect Health Care	115% of the Median Cost	\$37.54
Direct Health Care	120% of the Median Cost	\$69.66
Real and Personal	105% of the Median Fee	\$7.41
Property Fee		

These amounts were determined according to the "Reimbursement Limitations" section. The Direct Healthcare Limit is calculated based on a CMI of 0.9197, which is the statewide average.

**B.** Case Mix Index. These proposed rates are based upon each nursing facility's Medicaid average CMI calculated with a cutoff date of April 1, 2006, using the July 1, 2006, Kansas Medicaid/Medikan CMI Table. In Section II.C below, each nursing facility's Medicaid average CMI is listed beside its proposed per diem rate.

C. Proposed Nursing Facility Per Diem Rates and CMI. The following list includes the calculated Medicaid rate for each nursing facility provider currently enrolled in the Medicaid program and the Medicaid case mix index used to determine each rate.

Proposed

		Proposed	
		Daily	Medicaid
Facility Name	City	Rate	CMI
Village Manor	Abilene	120.17	0.8948
Alma Manor	Alma	134.88	0.9350
Life Care Center of Andover	Andover	108.72	0.9957
Anthony Community Care Center	Anthony	125.97	1.0285
Medicalodge East Healthcare Center	Arkansas City	122.58	0.8267
Medicalodge North of Arkansas City	Arkansas City	131.45	0.9656
Arkansas Čity Presbyterian Manor	Arkansas City	124.09	0.9855
Arma Care Center	Arma	117.08	0.9615
Ashland Health Center - LTCU	Ashland	126.89	0.9100
Medicalodge of Atchison	Atchison	124.54	0.9567
Atchison Senior Village	Atchison	113.80	0.9323
Dooley Center	Atchison	128.83	0.7666
Attica Long Term Care	Attica	115.38	0.9743
Atwood Good Samaritan Center	Atwood	116.73	0.9033
Lake Point Nursing Center	Augusta	106.40	0.9329
Baldwin Care Center	Baldwin City	110.60	0.9289
Quaker Hill Manor	Baxter Springs	95.99	1.1364
Catholic Care Center Inc.	Belaire	128.84	0.9107
Great Plains of Republic County, Inc.	Belleville	140.86	1.0318
Belleville Health Care Center	Belleville	102.12	0.9321
Great Plains of Mitchell County, Inc.	Beloit	141.25	1.0700
Hilltop Lodge Nursing Home	Beloit	116.50	0.9316
Centers for LTC of Bonner Springs	Bonner Springs	122.45	0.9545
Hill Top House	Bucklin	117.95	0.9621
Buhler Sunshine Home, Inc.	Buhler	121.81	0.9613
Life Care Center of Burlington	Burlington	127.16	0.9984
Caney Nursing Center	Caney	92.40	0.8631
Shiloh Manor of Canton, Inc.	Canton	112.17	0.8960
Eastridge Nursing Home	Centralia	118.10	0.9400
Heritage Health Care Center	Chanute	105.83	1.0687
Chanute Health Care Center	Chanute	127.87	1.0476
Applewood Rehabilitation	Chanute	74.22	0.7729
Chapman Valley Manor	Chapman	98.34	0.8850
Cheney Golden Age Home Inc.	Cheney	114.47	0.9769
Cherryvale Care Center	Cherryvale	116.07	0.9733
Chetopa Manor	Chetopa	95.41	1.1722
The Shepherd's Center	Cimarron	99.58	0.9389
Medicalodge of Clay Center	Clay Center	117.07	0.8891
Clay Center Presbyterian Manor	Clay Center	140.93	1.0575
Clearwater Ret. Community, Inc.	Clearwater	116.42	0.9285
Community Care Inc.	Clifton	80.74	0.9255
	C1 1	0.00	0.000

Clyde

97.26

0.9388

		Proposed	Madiasid
Facility Namo	City	Daily Rate	Medicaid CMI
Facility Name	Coffeerwille		
Coffeyville Regional Medical Center Windsor Place	Coffeyville	196.07 109.93	1.6900 0.9998
Medicalodge East of Coffeyville	Coffeyville Coffeyville	115.60	1.0650
Infinia at Colby	Colby	99.90	0.9311
Citizens Medical Center	Colby	138.58	1.0508
Pioneer Lodge	Coldwater	105.06	0.9056
Medicalodge of Columbus	Columbus	129.34	1.0979
Mt Joseph Senior Village, LLC	Concordia	114.11	1.0060
Sunset Home	Concordia	113.02	0.9500
Spring View Manor	Conway Springs	93.76	0.8946
Chase County Health & Rehab Center	Cottonwood Falls	106.26	0.9921
Council Grove Healthcare Center	Council Grove	103.14	0.9440
Hilltop Manor	Cunningham	94.77	0.9463
Westview Manor, Inc.	Derby De Soto	109.30 132.37	0.9765 0.8747
Hillside Village Dexter Care Center	Dexter	96.59	0.8643
Lane County Hospital - LTCU	Dighton	130.67	0.8750
Trinity Manor	Dodge City	124.64	0.9797
Dodge City Good Samaritan Center	Dodge City	121.72	0.9808
Manor of the Plains	Dodge City	126.84	0.9095
Medicalodge of Douglass	Douglass	140.11	0.9884
Downs Nursing Center	Downs	99.36	0.9788
Country Care Home	Easton	109.06	1.0032
Parkway Care Home	Edwardsville	109.03	0.9518
Edwardsville Convalescent Center	Edwardsville	130.22	0.9209
Edwardsville Manor	Edwardsville	90.53	0.8042
Lakepoint Nursing Center-El Dorado	El Dorado	109.33	1.0374
Beverly Health & Rehab-El Dorado	El Dorado	102.68	0.9692
Morton County Hospital	Elkhart	112.14	0.9412
Woodhaven Care Center	Ellinwood	108.02	0.9517
Ellis Good Samaritan Center	Ellarranth	114.73	0.9025
Ellsworth Good Samaritan Ret. Village	Ellsworth	132.15 134.10	1.1179 0.9411
Emporia Presbyterian Manor Holiday Resort	Emporia Emporia	117.69	0.9517
Vintage Manor	Emporia	107.62	0.8681
Emporia Rehabilitation Center	Emporia	91.93	0.9656
Enterprise Estates Nursing Center, Inc.	Enterprise	95.64	1.0091
Heritage Village-Eskridge	Eskridge	88.28	0.7517
Eudora Nursing Center	Eudora	99.06	0.8396
Medicalodge of Eureka	Eureka	130.08	0.9065
Medicalodge of Ft. Scott	Fort Scott	137.14	0.9732
Fort Scott/Marmaton Valley	Fort Scott	106.72	1.0253
Fowler Nursing Home	Fowler	116.42	0.9127
Frankfort Community Care Home, Inc.		109.01	1.0175
Beverly Health & Rehab-Fredonia	Fredonia	99.51	1.0370
Sunset Manor, Inc Emerald Pointe Health & Rehab Centre	Frontenac Galena	100.38 135.54	1.0030 1.0105
Galena Nursing & Rehab Center	Galena	103.10	1.0361
Garden Valley Retirement Village	Garden City	131.90	1.0008
Terrace Garden Care Center	Garden City	132.08	0.9322
Meadowbrook Rehab Hosp., LTCU	Gardner	148.18	1.0562
Medicalodge of Gardner	Gardner	134.41	0.9099
Anderson County Hospital	Garnett	134.78	0.9374
Golden Heights Living Center	Garnett	110.47	0.9405
The Heritage	Girard	93.78	1.0796
The Nicol Home, Inc.	Glasco	107.39	0.8822
Medicalodge of Goddard	Goddard	137.01	0.9490
Bethesda Home	Goessel	139.52	0.9554
Sherman Co. Good Samaritan Center	Goodland Great Bend	118.72	0.9339 0.9390
Cherry Village Benevolence Great Bend Health & Rehab Center	Great Bend	108.64 115.98	0.9376
Halstead Health and Rehab Center	Halstead	139.82	0.9383
Friendship Manor Rehab Ctr of Haviland		74.72	0.6284
St. John's of Hays	Hays	110.86	1.0425
St. Johns Victoria	Hays	109.60	0.9460
Hays Good Samaritan Center	Hays	126.64	1.0013
Haysville Healthcare Center	Haysville	117.54	0.9788
Lutheran Home, Inc.	Herington	97.03	0.9059
Schowalter Villa	Hesston	139.93	0.9265
Oak Ridge Acres	Hiawatha	88.23	0.9238
Maple Heights of Hiawatha	Hiawatha	121.06	1.0452
Highland Care Center	Highland	111.50	0.9560
Dawson Place, Inc.	Hill City	96.80 126.53	0.8945
Hillsboro Community Medical Center	Hillsboro	126.53	0.9130
Parkside Homes, Inc. Cheyenne Meadows Living Center	Hillsboro Hoisington	128.91 97.38	1.0130 0.8640
Jackson Co. Nursing Home, Inc.	Holton	98.23	0.9356
Holton Manor	Holton	107.26	0.9028
Tri County Manor Living Center, Inc.	Horton	98.50	0.9279
Howard Twilight Manor	Howard	108.74	0.9470
Sheridan County Hospital	Hoxie	111.96	0.8278
Pioneer Manor	Hugoton	136.59	0.9400

Park Villa Nursing Home

		Proposed				Proposed	
Facility Name	City	Daily Rate	Medicaid CMI	Facility Name	City	Daily Rate	Medicaid CMI
Pinecrest Nursing Home	Humboldt	104.70	0.9560	Norwich Health Care Center	Norwich	93.13	0.8039
Golden Plains	Hutchinson	128.80	0.9882	Logan County Manor	Oakley	140.57	0.9481
Hutchinson Good Samaritan Village	Hutchinson	118.02	0.8758	Decatur County Hospital	Oberlin	121.25	1.0083
Infinia at Hutchinson	Hutchinson	117.97	0.9886	Decatur Co. Good Samaritan Center	Oberlin	110.15	0.8344
Wesley Towers	Hutchinson Hutchinson	146.38 139.46	1.0115 1.0372	Villa St. Francis Centers for Long Term Care of Olathe	Olathe Olathe	137.94 127.21	0.9997 1.0142
Ray E. Dillon Living Center The Regal Estate of Glenwood	Independence	116.44	1.0623	Royal Terrace Nrsg. & Rehab. Center	Olathe	122.76	1.0079
Heatherwood Estates	Independence	97.69	1.1543	Olathe Good Samaritan Center	Olathe	134.39	0.9128
Pleasant View Home	Inman	126.18	0.9072	Johnson County Nursing Center	Olathe	146.96	1.0456
Windsor Place at Iola, LLC	Iola	113.62	0.9650	Aberdeen Village, Inc.	Olathe	141.28	0.9771
Cheyenne Lodge, Inc.	Jamestown Jetmore	89.88 143.97	0.9700 1.0700	Infinia at Onaga, Inc. Peterson Health Care, Inc.	Onaga Osaga City	95.62 94.93	0.9658 0.9925
Hodgeman Co Health Center-LTCU Stanton County Hospital- LTCU	Johnson	143.97	1.0700	Osage Nursing & Rehab Center	Osage City Osage City	94.93 117.56	1.0873
Valley View Professional Care Center	Junction City	96.84	0.9432	Life Care Center of Osawatomie	Osawatomie	145.16	1.0423
Junction City Good Samaritan Center	Junction City	116.63	1.0108	Parkview Care Center	Osborne	116.84	0.9751
Medicalodge Post Acute Center	Kansas City	129.62	0.9862	Hickory Pointe Care & Rehab Ctr	Oskaloosa	116.81	0.9684
Kansas City Presbyterian Manor	Kansas City	140.07	0.9449	Infinia at Oswego	Oswego	115.70	0.8080
Medicalodge East of Kansas City Lifecare Center of Kansas City	Kansas City Kansas City	146.06 117.49	1.0409 1.0796	Ottawa Retirement Village	Ottawa Overbrook	116.47	0.9791 0.9013
Infinia at Kensington	Kensington	104.65	0.8513	Brookside Manor Garden Terrace at Overland Park	Overland Park	114.58 130.38	0.9013
The Wheatlands	Kingman	111.48	0.9890	Specialty Hospital of Mid-America SNF	Overland Park	189.20	1.6034
Medicalodge of Kinsley	Kinsley	129.13	0.8652	Manorcare Hlth Services of			
Kiowa Hospital District Manor	Kiowa	105.64	0.8089	Overland Park	Overland Park	134.82	0.9729
Rush Co. Memorial Hospital	La Crosse	101.53	0.7900	Villa Saint Joseph	Overland Park	141.88	1.0559
Rush County Nursing Home High Plains Retirement Village	La Crosse Lakin	115.11 136.55	0.8919 0.8965	Delmar Gardens of Overland Park	Overland Park	133.52	0.9247
Colonial Manor of Lansing	Lansing	116.85	0.9565	Overland Park Nursing & Rehab	Overland Park Overland Park	132.91 136.77	0.9296 1.0826
Larned Healthcare Center	Larned	123.48	0.9064	Indian Creek Healthcare Center Village Shalom, Inc.	Overland Park	150.00	1.0828
St. Joseph Memorial Hospital	Larned	127.97	0.9841	Riverview Manor, Inc.	Oxford	100.58	0.9368
Lake View Manor, LLC	Lawrence	134.44	0.9600	Medicalodge of Paola	Paola	103.93	0.7487
Lawrence Presbyterian Manor	Lawrence	135.03	0.9426	North Point Skilled Nursing Center	Paola	135.54	1.1165
Brandon Woods Retirement Community Pioneer Ridge Retirement Community		129.37 125.94	1.0057 0.9089	Elmhaven East	Parsons	87.40	1.0083
Country Care on Broadway	Leavenworth	113.07	1.0167	Elmhaven West	Parsons	101.70	1.0509
Medicalodge of Leavenworth	Leavenworth	135.20	1.0023	Parsons Presbyterian Manor Parsons Good Samaritan Center	Parsons Parsons	122.70 112.75	0.8772 0.9588
Delmar Gardens of Lenexa	Lenexa	120.51	0.9717	Legacy Park	Peabody	126.02	0.9838
Lakeview Village	Lenexa	132.81	0.8588	Westview Manor of Peabody	Peabody	82.04	0.6510
Leonardville Nursing Home	Leonardville Leoti	91.61 131.11	1.0404 0.8922	Phillips County Hospital LTCU	Phillipsburg	132.23	0.9614
Wichita County Health Center Liberal Good Samaritan Center	Liberal	118.15	0.8922	Phillips County Retirement Center	Phillipsburg	96.05	0.8615
Wheatridge Park Care Center	Liberal	125.62	1.0262	Medicalodge South of Pittsburg	Pittsburg	126.36	1.0054
Mid-America Healthcare-Lincoln	Lincoln	107.64	1.0625	Medicalodge North of Pittsburg Mt. Carmel Regional Medical Ctr. SNF	Pittsburg Pittsburg	121.22 200.28	1.0433 1.7900
Bethany Home Association	Lindsborg	131.37	0.9269	Pittsburg Health & Rehab Center	Pittsburg	103.73	1.0293
Linn Community Nursing Home	Linn	86.61	0.8289	Cornerstone Village	Pittsburg	131.19	0.9630
Sandstone Heights Logan Manor Community Health	Little River	115.25	0.8700	Rooks County Home	Plainville	108.30	0.9264
Services	Logan	96.45	0.8533	Pratt Regional Medical Center	Pratt	123.16	0.9131
Louisburg Care Center	Louisburg	122.05	1.0378	Friendship Manor of Pratt Prescott Country View Nursing Center	Pract	106.26 87.19	0.9130 0.8832
Beverly Health & Rehab of Lucas	Lucas	108.66	1.1495	Prairie Sunset Manor	Pretty Prairie	131.08	0.8227
Lyons Good Samaritan Center	Lyons	119.34	1.0150	Protection Valley Manor	Protection	99.21	0.8004
Meadowlark Hills Retirement Community	Manhattan	136.11	0.9790	Gove County Medical Center	Quinter	109.80	0.8557
Stoneybrook Retirement Community	Manhattan	124.68	0.9867	Grisell Memorial Hosp Dist #1-LTCU	Ransom	124.79	0.8723
St. Joseph Village, Inc.	Manhattan	124.16	0.8602	Richmond Healthcare & Rehab Center		105.05	0.9552
Jewell County Hospital	Mankato	125.45	0.8531	Lakepoint Nursing Ctr-Rose Hill Rossville Healthcare & Rehab Center	Rose Hill Rossville	116.08 122.03	0.9811 1.0610
St. Luke Living Center	Marion	112.80	0.9738	Wheatland Nursing & Rehab Center	Russell	106.58	0.9930
Marion Manor Riverview Estates, Inc.	Marion Marquette	103.03 100.19	1.0167 0.9300	Russell Regional Hospital	Russell	163.56	1.2967
Cambridge Place	Marysville	115.44	1.0340	Sabetha Nursing Center	Sabetha	104.46	0.9820
Infinia at McPherson	McPherson	115.63	1.0018	Apostolic Christian Home	Sabetha	107.36	1.0277
The Cedars, Inc.	McPherson	129.97	0.9923	Smokey Hill Rehabilitation Center	Salina Salina	113.66	1.0600 1.0041
Meade District Hospital, LTCU	Meade	124.75	0.9805	Kenwood View Nursing Center Windsor Estates	Salina	106.18 116.91	0.9597
Trinity Lutheran Manor Great Plains of Ottawa County, Inc.	Merriam	134.92 87.01	0.9896 0.9614	Center for LTC of Salina	Salina	122.60	1.0124
Minneapolis Good Samaritan Center	Minneapolis Minneapolis	118.15	0.9913	Salina Presbyterian Manor	Salina	136.73	0.9708
Minneola District Hospital	Minneola	133.62	0.9967	Holiday Resort of Salina	Salina	111.45	0.9622
Elk Manor Nursing Home	Moline	112.81	0.9526	Satanta Dist. Hosp. LTCU	Satanta	138.08	0.9715
Bethel Home, Inc.	Montezuma	121.44	1.0148	Park Lane Nursing Home Pleasant Valley Manor	Scott City Sedan	127.30 90.63	0.9016 1.0567
Moran Manor	Moran	96.21	1.0187 0.9416	Sedgwick Healthcare Center	Sedgwick	133.03	0.8719
Memorial Home for the Aged Moundridge Manor, Inc.	Moundridge Moundridge	132.64 103.26	0.8943	Crestview Manor	Seneca	87.20	1.0577
Mt. Hope Nursing Center	Mt. Hope	125.46	1.0148	Life Care Center of Seneca	Seneca	89.83	0.9818
Villa Maria-Mulvane	Mulvane	121.69	0.9700	Prairie Manor Good Samaritan Center	Sharon Springs	101.54	0.9586
Golden Keys Nursing Home	Neodesha	101.75	0.8696	Shawnee Gardens Nursing Center	Shawnee	120.40	0.9054
Beverly Health & Rehab of Neodesha	Neodesha	106.37	0.9592	Sharonlane Health Services Smith County Memorial Hospital LTCU	Shawnee Smith Center	117.17 112.86	0.9123 0.9100
Ness County Hospital Dist. #2 Bethel Care Centre	Ness City Newton	121.61 133.75	0.9321 1.1779	Infinia at Smith Center	Smith Center	96.88	0.9100
Asbury Park	Newton	141.43	0.9538	Mennonite Friendship Manor, Inc.	South Hutchinson	138.63	1.0152
Kansas Christian Home	Newton	144.59	1.0508	Beverly Hlth & Rehab-Spring Hill	Spring Hill	125.66	1.0039
Newton Presbyterian Manor	Newton	138.96	0.9563	St. Francis Good Samaritan Ctr	St. Francis	122.80	0.9693
Andbe Home, Inc.	Norton	119.02	0.8573	Leisure Homestead at St. John	St. John	119.78	1.0238
Village Villa	Nortonville	115.75	0.8655				(continued)

Facility Name	City	Proposed Daily Rate	Medicaid CMI
Community Hospital of Onaga, LTCU	St. Mary's	120.44	0.9605
Prairie Mission Retirement Village	St. Paul	118.24	1.0295
Leisure Homestead at Stafford	Stafford	88.69	0.9183
Sterling Presbyterian Manor	Sterling	123.13	0.8845
Solomon Valley Manor	Stockton	128.35	0.9529
Seasons of Life Living Center	Syracuse	131.01	0.9340
Tonganoxie Nursing Center	Tonganoxie	115.54	1.0065
Brewster Place	Topeka	137.94	0.9133
Topeka Presbyterian Manor Inc.	Topeka	143.21	0.9702
Eventide Convalescent Center, Inc.	Topeka	96.93	0.8556
Topeka Community Healthcare Center	Topeka	128.28	0.9610
McCrite Plaza Health Center	Topeka	116.61	0.9615
Rolling Hills Health Center	Topeka	125.01	1.0210
Manorcare Health Services of Topeka	Topeka	131.09	0.9861
Woodland Health Center	Topeka	95.78	0.8231
Westwood Manor	Topeka	112.84	1.0003
IHS of Brighton Place	Topeka	89.08	0.7382
Countryside Health Center	Topeka	90.56	0.7290
Providence Living Center	Topeka	79.26	0.7591
Brighton Place North	Topeka	74.11	0.6277
Aldersgate Village	Topeka	143.21	0.9697
Plaza West Care Center, Inc.	Topeka	142.25 152.92	1.0486 1.1111
Lexington Park Nursing and Post Acute	Topeka Tribune	122.47	0.7874
Greeley County Hospital, LTCU Western Prairie Care Home	Ulysses	142.30	1.0088
Valley Health Care Center	Valley Falls	91.86	0.7082
Trego Co. Lemke Memorial LTCU	WaKeeney	130.80	0.9625
The Lutheran Home - WaKeeney	WaKeeney	96.89	0.8925
Wakefield Rehab Center	Wakefield	104.64	1.0168
Valley Vista Good Samaritan Center	Wamego	129.52	0.9160
The Centennial Homestead, Inc.	Washington	82.95	0.9330
Wathena Healthcare and Rehab Center	Wathena	103.08	0.9511
Coffey County Hospital	Waverly	133.36	0.8952
Beverly Health & Rehab-Wellington	Wellington	102.34	0.9277
Slate Creek Good Samaritan Center	Wellington	114.92	0.8991
Wellsville Manor Care Center	Wellsville	102.80	0.9383
Westy Community Care Home	Westmoreland	102.74	0.9476
Wheat State Manor	Whitewater	119.70	0.8868
Medicalodge of Wichita	Wichita	146.64	1.0500
Meridian Nursing & Rehab Center	Wichita	120.68	0.9639
Kansas Masonic Home	Wichita	145.52	1.0892
Homestead Health Center, Inc.	Wichita	131.89	1.0029
Horizon Specialty Hospital	Wichita	132.96	1.0849
Infinia at Wichita Wichita Presbyterian Manor	Wichita Wichita	133.30 141.45	0.9270 0.9973
Sandpiper Bay Health & Retirement Ctr.	Wichita	121.87	1.0263
Lakepoint Nursing and Rehab-Wichita	Wichita	133.36	0.9927
Manorcare Health Services of Wichita	Wichita	127.90	0.9918
College Hill Nursing and Rehab Center	Wichita	126.01	0.8655
Lakewood Heights Nursing Center	Wichita	119.69	1.0123
Lincoln East Nursing Home	Wichita	110.52	0.9752
Abal Home	Wichita	111.27	0.8054
The Health Care Center@Larksfield Place		130.55	0.8323
Life Care Center of Wichita	Wichita	126.64	0.9810
Wilson Nursing Center	Wilson	98.06	0.9344
Jefferson Co. Memorial Hospital-LTCU		126.70	1.0380
Winfield Good Samaritan Center	Winfield	124.75	0.8700
Cumbernauld Village, Inc.	Winfield	125.56	0.8862
Winfield Rest Haven, Inc.	Winfield	109.26	0.9046
Infinia at Yates Center	Yates Center	106.48	0.9873

#### III. Justifications for the Proposed Rates

- 1. The proposed rates are calculated according to the rate-setting methodology in the Kansas Medicaid State Plan and pending amendments thereto.
- 2. The proposed rates are calculated according to a methodology that satisfies the requirements of K.S.A. 39-708c(x) and the DHPF regulations in K.A.R. Article 30-10 implementing that statute and applicable federal law.
- 3. The state's analyses project that the proposed rates:
  - a. Would result in payment, in the aggregate of 92% of the Medicaid day weighted average inflated allowable nursing facility costs statewide; and
  - b. Would result in a maximum allowable rate of \$140.42, with the total average allowable cost being \$133.02.

- c. Estimated average rate July 1, 2006 Average payment rate July 1, 2005 Amount of change Percent of change \$6.46 5.74%
- 4. Estimated annual aggregate expenditures in the Medicaid nursing facility services payment program will increase by approximately \$21 million.
- 5. The state estimates that the proposed rates will continue to make quality care and services available under the Medicaid State Plan at least to the extent that care and services are available to the general population in the geographic area. The state's analyses indicate:
  - a. Service providers operating a total of 301 nursing facilities (representing 97% of all the licensed nursing facilities in Kansas) participate in the Medicaid program, while an additional 41 hospital-based long-term care units also are certified to participate in the Medicaid program;
  - o. There is at least one Medicaid-certified nursing facility and/or nursing facility for mental health, or Medicaid-certified hospital-based long-term care unit in each of the 105 counties in Kansas;
  - c. The statewide average occupancy rate for nursing facilities participating in Medicaid is 85.2%;
  - d. The statewide average Medicaid occupancy rate for participating facilities is 56.1%; and
  - e. The final rates would cover 98.35% of the estimated Medicaid health care costs incurred by participating nursing facilities statewide.
- 6. Federal Medicaid regulations at 42 C.F.R. 447.272 impose an aggregate upper payment limit that states may pay for Medicaid nursing facility services. The state's analysis indicates that the final methodology will result in compliance with the federal regulation.

### IV. The State's Response to Written Comments on the Published Proposals

The state received two letters with comments to the Notice of Proposed Nursing Facility Medicaid Rates for State Fiscal Year 2007, Methodology for Calculating Proposed Rates, and Rate Justifications; Notice of Intent to Amend the Medicaid State Plan and Request for Comments published in the April 27, 2006 Kansas Register. The state thanks the commentators for their interest, efforts and suggestions. The state reviewed, discussed, and considered those comments before approving the final rate-setting methodology and the final per diem rates published in this notice.

#### V. Notice of Intent to Amend the Medicaid State Plan

The state intends to submit proposed Medicaid State Plan amendments to CMS on or before September 30, 2006.

Kathy Greenlee
Acting Secretary of Aging
Rick Shults
Director of Management Operations
Division of Health Care Policy
Social and Rehabilitation Services

Robert M. Day, Ph.D. Executive Director Division of Health Policy and Finance

Doc. No. 033317

#### INDEX TO ADMINISTRATIVE REGULATIONS

This index lists in numerical order the new, amended and revoked administrative regulations and the volume and page number of the Kansas Register issue in which more information can be found. Temporary regulations are designated with a (T) in the Action column. This cumulative index supplements the 2003 Volumes and 2005 Supplement of the Kansas Administrative Regulations.

#### **AGENCY 1: DEPARTMENT OF** ADMINISTRATION

Register

Action

Reg. No.

Keg. No.	Action	Kegister
1-1-1	Amended	V. 24, p. 848
1-2-9	Amended	
		V. 24, p. 849
1-2-25	Amended	V. 24, p. 849
1-2-25a	New	V. 24, p. 849
1-2-30	Revoked	V. 24, p. 849
1-2-31	Amended	V. 24, p. 849
1-2-43a	New	V. 24, p. 849
1-2-44	Amended	V. 24, p. 849
1-2-46	Amended	V. 24, p. 849
1-2-74	Amended	V. 24, p. 850
1-2-84a	Revoked	
		V. 24, p. 850
1-2-84b	Revoked	V. 24, p. 850
1-2-97	Amended	V. 24, p. 850
1-3-2	Revoked	V. 24, p. 850
1-4-2	Amended	V. 24, p. 850
1-4-3	Amended	V. 24, p. 850
1-4-5	Amended	V. 24, p. 850
1-4-7	Amended	V. 24, p. 850
1-4-8	Amended	V. 24, p. 851
1-5-8	Amended	V. 24, p. 851
1-5-9	Amended	V. 24, p. 852
1-5-14	Amended	V. 24, p. 852
1-5-15	Amended	V. 24, p. 852
1-5-19c	Amended	V. 24, p. 853
1-5-20	Amended	V. 24, p. 853
1-5-24	Amended	V. 24, p. 853
1-5-30	Amended	V. 24, p. 855
1-6-2	Amended	V. 24, p. 855
1-6-8	Amended	V. 24, p. 855
1-6-27	Amended	
		V. 24, p. 856
1-6-29	Amended	V. 24, p. 856
1-6-32	Amended	V. 24, p. 857
1-7-3	Amended	V. 24, p. 858
1-7-10	Amended	V. 24, p. 858
1-7-11	Amended	V. 24, p. 858
1-7-12	Amended	V. 24, p. 859
1-8-2	Amended	V. 24, p. 859
1-8-3	Amended	V. 24, p. 859
1-8-4		
	Amended	V. 24, p. 859
1-8-5	Revoked	V. 24, p. 860
1-8-6	Amended	V. 24, p. 860
1-9-1	Amended	V. 24, p. 860
1-9-2	Amended	V. 24, p. 860
1-9-13	Amended	V. 24, p. 861
1-9-14	Amended	V. 24, p. 861
1-9-19	Amended	V. 24, p. 861
1-9-19a	Amended	V. 24, p. 862
1-9-20	Amended	V. 24, p. 863
1-9-23	Amended	V. 24, p. 863
1-9-27	Revoked	V. 24, p. 865
1-10-6	Revoked	V. 24, p. 865
1-10-7	Revoked	V. 24, p. 865
1-10-10	Revoked	V. 24, p. 865
1-10-11	Revoked	V. 24, p. 865
1-11-1	Amended	V. 24, p. 865
1-11-3	Revoked	V. 24, p. 865
1-12-1	Amended	V. 24, p. 865
1-12-2	Amended	V. 24, p. 865
1-13-1a	Amended	V. 24, p. 866
1-13-1b	New	V. 24, p. 866
1-14-8	Amended	V. 24, p. 866
1-14-11	Amended	V. 24, p. 868

#### **AGENCY 4: DEPARTMENT OF** AGRICULTURE

Reg. No.	Action	Register
4-8-14a	Amended (T)	V. 25, p. 379
4-8-27	Amended (T)	V. 25, p. 380
4-8-33	Amended (T)	V. 25, p. 380
4-8-34	Amended (T)	V. 25, p. 380
4-8-42	Amended (T)	V. 25, p. 380
4-15-7	Amended	V. 24, p. 550
4-15-8	Amended	V. 24, p. 550
4-28-1		_
through		
4-28-7	New	V. 24, p. 145, 146

#### **AGENCY 5: DEPARTMENT OF** AGRICULTURE—DIVISION OF WATER RESOURCES

Reg. No.	Action	Register
5-16-1	Amended	V. 24, p. 1850
5-16-5	Amended	V. 24, p. 1850
AGE	NCY 7: SECRE	TARY OF STATE
Reg. No.	Action	Register

7-34-2 7-34-2 7-41-1	New (T) New Amended	V. 24, p. 42 V. 24, p. 332 V. 24, p. 1244
7-41-14 through 7-41-33 7-42-1	New	V. 24, p. 1245-1249
through 7-42-5 7-43-1 through	New	V. 24, p. 1469, 1470

#### **AGENCY 9: ANIMAL HEALTH** DEPARTMENT

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V. 24, p. 1829, 1830

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V. 24, p. 798

V. 24, p. 1176

28-35-181s

28-35-184a

New

Amended

7-43-6

Reg. No.

14-14-12

16-10-3

10-22-1

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9-2-32	Amended (T)	V. 24, p. 272
9-2-32	Amended	V. 24, p. 919
9-11-10	Amended (T)	V. 24, p. 272
9-11-10	Amended	V. 24, p. 919
9-18-1	Amended (T)	V. 24, p. 1144
9-18-1	Amended	V. 24, p. 1372
9-32-1		
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9-32-8	New (T)	V. 25, p. 46-48
9-32-1		
through		
9-32-8	New	V. 25, p. 375-378

#### AGENCY 10: KANSAS BUREAU OF INVESTIGATION

Action

Amended

Revoked

New (T)

AGENCY 11: STATE CONSERVATION COMMISSION			
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11-3-10	Amended	V. 25, p. 250, 251	
11-3-11	New	V. 25, p. 252	
11-3-12	New	V. 25, p. 252	
11-11-1			
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11-11-7	Revoked	V. 24, p. 1798	

#### AGENCY 14: DEPARTMENT OF REVENUE Reg. No. Action Register

<b>AGENCY 16: ATTORNEY GENERAL</b>							
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16-1-7	Amended	V. 24, p. 95					
16-4-2	New	V. 24, p. 95					
16-4-3	New	V. 24, p. 95					
16-4-4	New	V. 24, p. 96					
16-6-1	Amended	V. 24, p. 96					
16-10-1	New (T)	V. 24, p. 1176					
16-10-2	New (T)	V. 24, p. 1176					

16-10-1	New	V. 24, p. 1690
16-10-2	New	V. 24, p. 1690
16-10-3	New	V. 24, p. 1691

#### AGENCY 22: STATE FIRE MARSHAL

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22-8-2	Amended	V. 25, p. 274
22-8-3	Amended	V. 25, p. 275
22-8-5	Amended	V. 25, p. 275
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22-8-14	New	V. 25, p. 276, 277
22-8-17	New	V 25 p 277

#### **AGENCY 26: DEPARTMENT ON AGING**

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26-39-144	New	V. 24, p. 1629
26-39-243	New	V. 24, p. 1631
26-39-278	New	V. 24, p. 1632
26-39-427	New	V. 24, p. 1632
26-39-438		•
through		

26-39-427 26-39-438	New	V. 24, p. 1632
through 26-39-441	New	V. 24, p. 1243
	28: DEPARTMEN	
	AND ENVIRON	
Reg. No.	Action	Register
28-1-2	Amended	V. 25, p. 413
28-4-1400	New (T)	V. 24, p. 1142
28-4-1400	New	V. 24, p. 1531
28-16-28g	Amended	V. 24, p. 753
28-16-58	Amended	V. 24, p. 52
28-16-160		
through 28-16-174	New	V. 24, p. 754-764
28-17-1	Amended	V. 24, p. 754-764 V. 24, p. 178
28-17-6	Amended	V. 24, p. 178 V. 24, p. 179
28-17-20	Amended	V. 24, p. 179
28-17-22	New	V. 24, p. 179
28-19-22	Revoked	V. 24, p. 1437
28-19-350	Amended	V. 25, p. 845
28-19-517	Amended	V. 24, p. 1437
28-19-542	Amended	v. 24, p. 1438
28-19-546	Amended	V. 24, p. 1438
28-19-561	Amended	V. 24, p. 1438
28-19-562	Amended	v. 24, p. 1439
28-19-563	Amended	v. 24, p. 1440
28-19-575		
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28-19-578	Revoked	V. 24, p. 1440
28-30-200		
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28-30-207	New	V. 24, p. 1470-1474
28-35-135 28-35-135a	Revoked	V. 24, p. 1830
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28-35-135i	New	V. 24, p. 1830
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28-35-135y	New	V. 24, p. 1830
28-35-136	Revoked	V. 24, p. 1830
28-35-148	New	V. 24, p. 1830
28-35-154	Amended	V. 24, p. 1830
28-35-160	Amended	V. 24, p. 1830
28-35-162	Amended	V. 24, p. 1830
28-35-167	New	V. 24, p. 1830
28-35-168	New	V. 24, p. 1830
28-35-169	New	V. 24, p. 1830
28-35-175a	Amended	V. 24, p. 1830
28-35-176a	Amended	V. 24, p. 1830
28-35-177a 28-35-178a	Amended Amended	V. 24, p. 1830 V. 24, p. 1830
28-35-178b	Amended	V. 25, p. 256
28-35-178j	New	V. 24, p. 1830
28-35-180a	Amended	V. 24, p. 1830
28-35-180b	New	V. 24, p. 1830
28-35-181e	Amended	V. 24, p. 1830
28-35-181g	Amended	V. 24, p. 1830
28-35-181h	Amended	V. 24, p. 1830
28-35-1811	Amended	V. 24, p. 1830
28-35-181m	Amended	V. 24, p. 1830
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28-35-184b	Amended	V. 24, p. 1830	28-35-312	Revoked	V. 24, p. 1831	40-3-13	Amended	V. 24, p. 1371
28-35-185a	Amended	V. 24, p. 1830	28-35-314	Amended	V. 24, p. 1831	40-3-18	Amended	V. 24, p. 1371
28-35-193b	Revoked	V. 24, p. 1830	28-35-316	Amended	V. 25, p. 116	40-3-22	Amended	V. 25, p. 210
28-35-195a	Amended	V. 24, p. 1830	28-35-318	Amended	V. 24, p. 1831	40-3-24	Amended	V. 24, p. 1371
						40-3-40	Amended	V. 25, p. 212
28-35-199a	Revoked	V. 24, p. 1830	28-35-319	Amended	V. 24, p. 1831			
28-35-204	New	V. 24, p. 1830	28-35-333	Amended	V. 24, p. 1831	40-3-43	Amended	V. 25, p. 183
28-35-205	New	V. 24, p. 1830	28-35-342	Amended	V. 24, p. 1831	40-3-44	Amended	V. 25, p. 212
						40-3-46	Revoked	V. 25, p. 183
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28-35-205b	New	V. 24, p. 1830	28-35-345	Amended	V. 24, p. 1831	40-3-47	Amended	V. 25, p. 183
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