

Chris Biggs, Secretary of State

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The Kansas Register (USPS 0662-190) is an official publication of the State of Kansas, published by authority of K.S.A. 75-430. The Kansas Register is published weekly and a cumulative index is published annually by the Kansas Secretary of State. One-year subscriptions are \$80 (Kansas residents must include applicable state and local sales tax). Single copies, if available, may be purchased for \$2. **Periodicals postage paid at Topeka, Kansas. POSTMASTER:** Send change of address form to Kansas Register, Secretary of State, 1st Floor, Memorial Hall, 120 S.W. 10th Ave., Topeka, KS 66612-1594.

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Hard copy subscription information and current and back issues of the Kansas Register (PDF format) can be found at the following link: http://www.kssos.org/pubs/pubs_kansas_register.asp

Published by

Chris Biggs Secretary of State 1st Floor, Memorial Hall 120 S.W. 10th Ave. Topeka, KS 66612-1594 (785) 296-4564 www.kssos.org



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Department of Labor

Notice of Maximum and Minimum Weekly Unemployment Benefit Amounts

Each year, in accordance with K.S.A. 44-704 of the Kansas Employment Security Law, the maximum and minimum weekly benefit amounts payable to unemployment insurance claimants are recalculated. For SFY 2011, new claims filed on or after July 1, 2010 and before July 1, 2011, the maximum weekly benefit amount will be \$435 and the minimum weekly benefit amount will be \$108.

Jim Garner Secretary of Labor

Doc. No. 038449

State of Kansas

Legislative Administrative Services

Request for Proposals

The Division of Legislative Administrative Services announces the release of a request for proposals by the Legislative Coordinating Council to acquire desktop and laptop computers, setup, implementation and maintenance services via lease agreement.

Vendors interested in receiving a request for proposal should contact Dave Larson, Legislative Computer Services, Room 63-W, State Capitol, 300 S.W. 10th Ave., Topeka, 66612, (785) 296-5566, or dave.larson@las.ks.gov. Completed proposals must be received not later than 2 p.m. July 1.

Jeffrey M. Russell Director of Legislative Administrative Services

Doc. No. 038451

State of Kansas

Kansas Health Policy Authority

Public Notice

Effective for Medicaid inpatient services on and after July 1, 2010, the Indirect Medical Education (IME) multiplier will be reduced from 2.1 to 1.72. The multiplier reduction is necessary to ensure graduate medical education payments are paid at a level consistent with the previous fiscal year. As payments are expected to be similar to the previous fiscal year, a fiscal impact is not anticipated.

A copy of the proposed state plan change, which has additional information, may be obtained from any local SRS office. To send comments or to review comments received, or to obtain additional information, contact Rita Haverkamp, Kansas Health Policy Authority, Room 900N, Landon State Office Building, 900 S.W. Jackson, Topeka, 66612-1220, or e-mail Rita.Haverkamp@khpa.ks.gov.

Andy Allison, Ph.D. Executive Director

Doc. No. 038445

State of Kansas

Department of Transportation

Notice to Consulting Engineers

The Kansas Department of Transportation is seeking qualified consulting engineering firms or teams, prequalified in category 211 Highway Design - Major Facility, or category 222 - Standard Span Bridge Design, for the project listed below. Eight signed copies of the response can be mailed to David Nagy, P.E., Assistant to the Bureau Chief of Design/Contracts Engineer, KDOT, Eisenhower State Office Building, 700 S.W. Harrison, Topeka, 66603-3754. Interest responses shall be limited to four pages and must be received by noon July 1 for the consulting engineering firm or team to be considered.

The Consultant Shortlist Committee will select three to five of the most highly qualified firms expressing interest and schedule an individual interview. The consulting firms can more thoroughly discuss their experience related to the project at the interview and will be expected to discuss their approach to this project in detail and the personnel to be assigned to this project. Firms not selected to be short-listed will be notified. View categories at www.ksdot.org/divengdes/prequal.

The Consultant Selection Committee, appointed by the Secretary of Transportation, will conduct the discussions with the firms invited to the individual interview conferences. The committee will select one firm to perform the professional services required for completing the advertised project. After the selection, the firm(s) not selected will be notified of the outcome.

143-85 KA-0036-01 Saline County

The scope of the services is to prepare a set of plans for the construction and replacement of a bridge and road section on K-143, 0.5 mile north of the junction of US-40 and K-143 over Mulberry Creek drainage. The current estimate for construction is \$1.05 million.

It is KDOT's policy to use the following criteria as the basis for selection of the consulting engineering firms:

- 1. Size and professional qualifications.
- 2. Experience of staff.
- 3. Location of firm with respect to proposed project.
- 4. Work load of firm.
- 5. Firm's performance record.

The firm's accounting systems must have the following capabilities before the firm may be awarded a contract:

- Valid, reliable and current costs must be available within the system to support cost and pricing data.
- Capability to provide a means of measuring the reasonableness of incurred costs.
- Capability to identify and accumulate allowable costs by contract or project records that will reconcile with the general ledger.
- Ability to provide supporting documentation of actual expenditures for each billing, based on costs.

Deb Miller Secretary of Transportation

Department of Transportation

Notice to Consulting Engineers

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110-58 KA-0025-01 Marshall County

The scope of the services is to prepare a set of plans for the construction and replacement of a bridge on K-110, 0.6 mile north of the junction of US-36 and K-110 over the north fork of the Black Vermillion River drainage. The current estimate for construction is \$1.2 million.

It is KDOT's policy to use the following criteria as the basis for selection of the consulting engineering firms:

- 1. Size and professional qualifications.
- 2. Experience of staff.
- 3. Location of firm with respect to proposed project.
- 4. Work load of firm.
- 5. Firm's performance record.

The firm's accounting systems must have the following capabilities before the firm may be awarded a contract:

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Deb Miller Secretary of Transportation

Doc. No. 038434

State of Kansas

Department of Revenue Division of Motor Vehicles

Notice of Intent to Establish a New Line-Make for an Existing New Motor Vehicle Dealer

Notice has been received from Steven Chrysler Jeep Dodge, Inc. of intent to re-establish the franchises of Chrysler, Jeep and Dodge to its location at 11028 W. Kellogg, Wichita, Kansas.

Pursuant to K.S.A. 8-2430(a)(5), any existing new motor vehicle dealer may protest the proposed addition of the new franchises of Chrysler, Jeep and Dodge at Steven Chrysler Jeep Dodge, Inc., if that existing new motor vehicle dealer has a franchise agreement for the same linemake vehicles as that which are to be sold or offered for sale by Steven Chrysler Jeep Dodge, Inc., at 11028 W. Kellogg, Wichita, Kansas, and provided that the existing new motor vehicle dealer is physically located such that its relevant market area, as defined in K.S.A. 8-2430(e), includes the location where the new Chrysler Jeep Dodge dealership will be located.

Pursuant to K.S.A. 8-2430(a), any petition or complaint by any dealer with standing to protest must be filed with the Director of Vehicles within 30 days of this notice. Such petitions or complaints must be directed to the Kansas Department of Revenue, Director of Vehicles, 1st Floor, Docking State Office Building, 915 S.W. Harrison, Topeka, 66612.

> Michael J. McLin, Bureau Manager Titles & Registration/ Dealer Licensing Bureau

Doc. No. 038448

State of Kansas

Department of Transportation

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The Consultant Shortlist Committee will select three to five of the most highly qualified firms expressing interest and schedule an individual interview. The consulting firms can more thoroughly discuss their experience related to the project at the interview and will be expected to discuss their approach to this project in detail and the personnel to be assigned to this project. Firms not selected to be short-listed will be notified. View categories at www.ksdot.org/divengdes/prequal.

The Consultant Selection Committee, appointed by the Secretary of Transportation, will conduct the discussions with the firms invited to the individual interview conferences. The committee will select one firm to perform the professional services required for completing the advertised project. After the selection, the firm(s) not selected will be notified of the outcome.

28-45 KA-0022-01 Jewell County

The scope of the services is to prepare a set of plans for the construction and replacement of a bridge and road section on K-28, 2.5 miles west of the Jewell/Cloud county line over Buffalo Creek drainage. The current estimate for construction is \$1.2 million.

It is KDOT's policy to use the following criteria as the basis for selection of the consulting engineering firms:

- 1. Size and professional qualifications.
- 2. Experience of staff.
- 3. Location of firm with respect to proposed project.
- 4. Work load of firm.
- 5. Firm's performance record.

The firm's accounting systems must have the following capabilities before the firm may be awarded a contract:

- Valid, reliable and current costs must be available within the system to support cost and pricing data.
- Capability to provide a means of measuring the reasonableness of incurred costs.
- Capability to identify and accumulate allowable costs by contract or project records that will reconcile with the general ledger.
- Ability to provide supporting documentation of actual expenditures for each billing, based on costs.

For more information, contact David Nagy at DavidN@ksdot.org.

Deb Miller Secretary of Transportation

Doc. No. 038433

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 10-13 by adding the following projects:

Project X-0040-01, Railway/Highway Signals Flashing Light Straight Post Type with Gates at Union Pacific Railroad Crossing and Delaware Street in Manhattan, Riley County

Project X-0041-01, Railway/Highway Signals Flashing Light Straight Post Type with Gates at Union Pacific Railroad Crossing and Niles Road 1 mile east of New Cambria, Saline County

Project X-0042-01, Railway/Highway Signals Flashing Light Straight Post Type with Gates at Union Pacific Railroad Crossing and Kansas Avenue in Kanopolis, Ellsworth County

Project X-0043-01, Railway/Highway Signals Flashing Light Straight Post Type with Gates at Union Pacific Railroad Crossing and Yocemento Road west of Hays, Ellis County

Project X-0044-01, Railway/Highway Signals Flashing Light Straight Post Type with Gates at Union Pacific Railroad Crossing and 130th Avenue east of Ellis, Ellis County

Project X-0045-01, Railway/Highway Signals Flashing Light Straight Post Type with Gates at Union Pacific Railroad Crossing and County Road 450 east of Oakley, Logan County

Project X-0046-01, Railway/Highway Signals Flashing Light Straight Post Type with Gates at Union Pacific Railroad Crossing and A Street at Winona, Logan County

Project X-0047-01, Railway/Highway Signals Flashing Light Straight Post Type with Gates at Union Pacific Railroad Crossing and 6th Street in Lincolnville, Marion County

Project X-0048-01, Railway/Highway Signals Flashing Light Straight Post Type with Gates at Union Pacific Railroad Crossing and Sunrise Road north of Marion, Marion County

Project X-0054-01, Railway/Highway Signals Flashing Light Straight Post Type with Gates at Kansas and Oklahoma Railroad Crossing and Kansas Avenue in Haven, Reno County

Project X-0055-01, Railway/Highway Signals Flashing Light Cantilever Type with Gates at Kansas and Oklahoma Railroad Crossing and Maple Street in Hutchinson, Reno County

Project X-0056-01, Railway/Highway Signals Flashing Light Cantilever Type with Gates at Kansas and Oklahoma Railroad Crossing and K-23 (Main Street) in Dighton, Lane County

Project X-0061-01, Railway/Highway Signals Flashing Light Straight Post Type with Gates at Union Pacific Railroad Crossing and County Road 2 southwest of Liberal, Seward County

Project X-0062-01, Railway/Highway Signals Flashing Light Straight Post Type with Gates at Union Pacific Railroad Crossing and Northeast 120th Avenue northeast of Preston, Pratt County

Project X-0063-01, Railway/Highway Signals Flashing Light Straight Post Type with Gates at Union Pacific Railroad Crossing and Northeast 140th Avenue northeast of Preston, Pratt County

The amendment of the STIP requires a public comment period of 30 days. To receive more information on any of these projects or to make comments 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, 66603-3754, (785) 296-3526, fax (785) 368-6664. Additional information about these projects and other pending STIP amendments may be viewed online at www.ksdot.org/publications.asp.

This information is available in alternative accessible formats. To obtain an alternative format, contact the KDOT Bureau of Transportation Information, (785) 296-3585 (Voice/Hearing Impaired-711).

The comment period regarding the STIP amendment for these projects will conclude July 26.

Deb Miller Secretary of Transportation

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, 700 S.W. Harrison, Topeka, until 1 p.m. July 21 and then publicly opened:

District One—Northeast

District—106 KA-1907-01 — Milling at various locations in District One, milling. (State Funds)

Douglas—56-23 KA-1900-01 — U.S. 56 surface recycling in Douglas County, seal, 12 miles. (State Funds)

Lyon—99-56 KA-0858-01 — K-99 bridge at the Kansas Turnpike Authority north junction, bridge deck. (State Funds)

Osage—170-70 KA-1881-01 — K-170 from the Lyon-Osage county line east 13.7 miles, overlay. (State Funds)

Shawnee—89 U-0005-01 — Huntoon Street and Wanamaker Road in Topeka, traffic signals. (Federal Funds)

Wyandotte—105 C-4588-01 — U.S. 73 and the Polfer Road intersection, grading and surfacing, 0.2 mile. (Federal Funds)

Wyandotte—105 KA-1502-01 — Kansas Speedway camera and fiber upgrade, Intelligent Transportation System. (State Funds)

District Two — Northcentral

Dickinson—21 K-9656-01 — Curtis Creek tributary bridge at Milford State Park, grading, surfacing and bridge. (Federal Funds)

District—106 KA-1903-01 — Milling at various locations in District Two, milling. (State Funds)

Ellsworth—70-27 KA-0729-01 — I-70, 8.3 miles east of the Russell-Ellsworth county line east 7.9 miles, milling and overlay. (Federal Funds)

Lincoln—70-53 KA-0731-01 — I-70 from the Ellsworth-Lincoln county line east to the Lincoln-Saline county line, milling and overlay, 7.2 miles. (Federal Funds)

Marion—57 C-4263-01 — County road 3.5 miles west of Ramona, grading, bridge and surfacing, 0.1 mile. (Federal Funds)

District Three — Northwest

District—106 KA-1882-01 — Milling at various locations in District Three, milling. (State Funds)

District Four — Southeast

Cherokee—11 C-4216-01 — County road 1.5 miles west and 3.3 miles south of Hallowell, grading, bridge and surfacing, 0.2 mile. (Federal Funds)

District—106 KA-1902-01 — Milling at various locations in District Four, milling. (State Funds)

District Five — Southcentral

District—KA-1901-01 — Milling at various locations in District Five, milling. (State Funds)

Harvey—135-40 KA-1905-01 — I-135 in Harvey County, pavement patching, 7.4 miles. (State Funds)

District Six — Southwest

District—106 KA-1904-01 — Milling at various locations in District Six, milling. (State Funds)

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 office responsible for the work.

Deb Miller Secretary of Transportation

Doc. No. 038431

State of Kansas

Court of Tax Appeals

Notice of Hearing on Proposed Administrative Regulations

A public hearing will be conducted at 10 a.m. Monday, August 30, in Room 451, Hearing Room A, Docking State Office Building, 915 S.W. Harrison, Topeka, to consider adoption of proposed new regulations of the Kansas Court of Tax Appeals. The changes are proposed for adoption on a permanent basis.

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 regulations. All interested parties may submit written comments prior to the hearing to the Kansas Court of Tax Appeals, Room 451, Docking State Office Building, 915 S.W. Harrison, Topeka, 66612-1505, or by e-mail to Allen.Jody@cota. ks.gov.

All interested parties will be given a reasonable opportunity to present their views, either orally or in writing or both, concerning the adoption of the proposed regulations. 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 statement in an accessible format. Requests for accommodation should be made at least five working days in advance of the hearing by contacting Jody Allen at (785) 296-2388. Parking for individuals with disabilities is located on Harrison Street on the east side of the Docking State Office Building. The east entrance to the Docking State Office Building is accessible to individuals with disabilities.

Copies of the proposed regulations and the economic impact statement for the proposed regulations can be viewed at the following Web site: http://www.kansas.gov/cota.

A list of the proposed regulations, a brief summary and the economic impact follows:

Revocation of Administrative Regulations: 94-2-1 through 94-2-21

Proposed New Administrative Regulations: 94-5-1 through 94-5-25

Brief Summary of Regulations:

- **K.A.R.** 94-2-1 through K.A.R. 94-2-21 Revocations. All issues addressed in these administrative regulations are clarified in more detail within the new administrative regulations.
- **K.A.R. 94-5-1. Court regulations and procedures.** This new regulation clarifies the general scope of the court's regulations, procedural directives and other authorities governing actions before the court. No economic impact is anticipated.
- **K.A.R. 94-5-2. Definitions.** This new regulation defines key terms used throughout the court's regulations. No economic impact is anticipated.
- **K.A.R. 94-5-3. Service.** This new regulation sets out the process by which pleadings and other court papers are to be served. No economic impact is anticipated.
- **K.A.R. 94-5-4. Commencement of action; pleadings.** This new regulation sets out how actions before the court are to be initiated and prescribes minimum requirements governing format and content for pleadings in certain types of cases. No economic impact is anticipated.
- **K.A.R. 94-5-5. Signatures of parties or counsel.** This new regulation sets out the certifications deemed to be made by parties and attorneys when they sign court pleadings. No economic impact is anticipated.
- **K.A.R.** 94-5-6. Authorized representation. This new regulation defines what constitutes authorized representation in proceedings before the court. No economic impact is anticipated.
- K.A.R. 94-5-7. Information and assistance to self-represented litigants. This new regulation advises litigants that court staff will provide information regarding rules of practice and procedure and will assist self-represented litigants concerning general matters of procedure and access to the court. No economic impact is anticipated.
- **K.A.R. 94-5-8. Filing fees.** This new regulation revises the filing fee schedule for court filings. The increased fees set forth in this regulation are necessary because of recent shifts in the court's funding balance away from state general funding and to user-fee funding. There should be little appreciable economic impact on other state or local government agencies. However, private individuals and businesses will be affected by increased filing fees.
- **K.A.R. 94-5-9. Filing procedures; time limitations.** This new regulation defines rules applicable to the court regarding filing procedures and time limitations. No economic impact is anticipated.
- **K.A.R.** 94-5-10. Electronic mail filings. This new regulation sets out rules governing acceptable electronic mail filings with the court. No economic impact is anticipated.
- **K.A.R. 94-5-11. Facsimile filing.** This new regulation sets out rules governing acceptable facsimile filings with the court. No economic impact is anticipated.

- **K.A.R. 94-5-12. Confidentiality.** This new regulation sets out rules governing confidentiality and the means available for protecting confidential evidence in court proceedings. No economic impact is anticipated.
- **K.A.R. 94-5-13. Intervention; joinder.** This new regulation addresses how parties may intervene or be joined in a court action. No economic impact is anticipated.
- **K.A.R. 94-5-14. Consolidation.** This new regulation sets out the rules governing consolidation of cases pending before the court. No economic impact is anticipated.
- **K.A.R. 94-5-15. Motion practice.** This new regulation details how motions and responsive briefs are to be filed in court actions. No economic impact is anticipated.
- **K.A.R. 94-5-16. Discovery.** This new regulation sets out the court's procedures and expectations for discovery by parties in matters before the court. No economic impact is anticipated.
- **K.A.R. 94-5-17. Subpoenas.** This new regulation sets out the rules governing subpoenas and clarifies how subpoenas are to be prepared and served by the parties in court proceedings. No economic impact is anticipated.
- **K.A.R. 94-5-18. Stipulations.** This new regulation addresses the court's substantive rules and procedures for filing stipulations. No economic impact is anticipated.
- **K.A.R. 94-5-19. Prehearing conferences.** This new regulation authorizes the use of a prehearing conference in accordance with the Kansas Administrative Procedures Act. No economic impact is anticipated.
- **K.A.R. 94-5-20. Continuances.** This new regulation clarifies the court's continuance policy. No economic impact is anticipated.
- **K.A.R.** 94-5-21. Exchange of evidence and witness lists. This new regulation sets forth the rules and timetables for parties' exchange of evidence and witness lists. No economic impact is anticipated.
- **K.A.R.** 94-5-22. Hearings. This new regulation provides that court hearings shall be open to the public and prescribes procedures and rules for making the official record of court proceedings. No economic impact is anticipated.
- **K.A.R. 94-5-23. Evidence.** This new regulation identifies the applicable rules governing evidentiary matters before the court. No economic impact is anticipated.
- **K.A.R. 94-5-24. Failure to appear.** This new regulation clarifies the potential consequences of a party's failure to appear. No economic impact is anticipated.
- **K.A.R. 94-5-25. Petitions for reconsideration.** This new regulation prescribes the rules governing petitions for reconsideration of final orders issued by the court. No economic impact is anticipated.

Rebecca W. Crotty Chief Judge

Criminal Justice Coordinating Council

Notice of Grant Award Meeting

The Kansas Criminal Justice Coordinating Council will meet to determine final grant awards for the federal Edward Byrne Memorial Justice Assistance Grant (JAG) Program for SFY 2011. The meeting is scheduled to begin at 9 a.m. Monday, July 12, at the Juvenile Justice Authority, training room, 714 S.W. Jackson, Topeka.

Juliene Maska, Administrator Governor's Grants Program

Doc. No. 038447

State of Kansas

Department of Agriculture

Notice of Hearing on Proposed Permanent Quarantine

Pursuant to the provisions of K.S.A. 2-2117, as amended, a hearing will be conducted at 1:30 p.m. Thursday, July 15, in the training room, Kansas Department of Agriculture, 109 S.W. 9th, Topeka, in the matter of the issuance of a permanent quarantine regarding Thousand Cankers Disease of Walnuts. The proposed quarantine would affect the entire state of Kansas.

The proposed quarantine order is as follows:

BEFORE THE SECRETARY OF AGRICULTURE, TOPEKA, KANSAS

THOUSAND CANKERS DISEASE OF WALNUTS QUARANTINE

The Secretary of the Kansas Department of Agriculture (Secretary) is authorized to enforce the plant pest and agriculture commodity certification act and rules and regulations promulgated thereunder. K.S.A. 2009 Supp. 2-2112 *et seq.*

- 1. WHEREAS The Secretary is authorized to quarantine the state of Kansas, or any portion thereof, when the secretary determines that such action is necessary to prevent or retard the spread of a plant pest, and to quarantine any other state or portion thereof whenever the secretary determines that a plant pest exists therein and that such action is necessary to prevent or retard its spread into the state of Kansas. K.S.A. 2009 Supp. 2-2112 *et seq*.
- 2. WHEREAS Thousand Cankers Disease of Walnut is a plant pest disease complex involving infestation of walnut trees and plants (*Juglans* sp) by the Walnut Twig Beetle (*Pityophthorus juglandis*) and an unnamed species of Geosmithia fungus (*Geosmithia* sp.), which eventually kills the walnut tree (*Juglans* sp).
- WHEREAS Thousand Cankers Disease of Walnut poses a serious threat to walnut trees in Kansas, and places at risk the ability of Kansas producers to produce, sell, and distribute walnut plants (*Juglans* sp) and products intrastate, interstate, and internationally.
- 4. WHEREAS it is necessary to protect Kansas walnut timber and nut production, walnuts as a landscape species, and the native ecosystem from Thousand Cankers Disease of Walnut and the Walnut Twig Beetle.
- WHEREAS Thousand Cankers Disease of Walnut and the Walnut Twig Beetle are currently present in many states of the western United States.
- WHEREAS unregulated articles are transported into many states with the potential of introducing or spreading Thou-

- sand Cankers Disease of Walnut and the Walnut Twig Beetle.
- 7. WHEREAS quarantine action is necessary to prevent the introduction and spread of Thousand Cankers Disease of Walnut and the Walnut Twig Beetle into and within the State of Kansas.

IT IS THEREFORE ORDERED BY THE SECRETARY THAT:

- 1. In order to prevent, retard, suppress, and control the spread of the plant pest Thousand Cankers Disease of Walnut, and the Walnut Twig Beetle, the movement of regulated articles into or through the State of Kansas, from any other state, territory, or foreign country, by any person, is prohibited except as set forth in paragraph 5 of this Order, below.
- 2. In the event that either the Thousand Cankers Disease of Walnut or the Walnut Twig Beetle are discovered within the State of Kansas, this quarantine order will prohibit the movement of regulated articles that are infected with Thousand Cankers Disease of Walnut or infested by the Walnut Twig Beetle, both within the State of Kansas, and from the State of Kansas to any other state, territory, or foreign country, by any person.
- 3. Except as exempted in paragraph 6 of this Order, below, the following shall be considered "regulated articles" under this quarantine order: all plants, plant parts, and products of the genera *Juglans*; articles of *Juglans*, including, but not limited to: logs, lumber, firewood, bark, mulch, burls, stumps, and packing materials; all life stages of the walnut twig beetle (*Pityophthorus juglandis*); all life stages of the Geosmithia fungus (*Geosmithia* sp.).
- 4. The Secretary may register those persons or facilities handling regulated articles within the State of Kansas.
- 5. All regulated articles under this Order are prohibited entry into the State of Kansas unless specifically exempted by this Order or meet the following requirements of certification for pest free status, including all necessary documentation:
 - a. All persons intending to import regulated articles into the State of Kansas must register with the Secretary and enter into a compliance agreement that includes handling and documentation guidelines required by the Secretary. Such agreements for the purpose of this quarantine are subject to change or revocation by the Secretary without notice. All persons importing regulated articles into the State of Kansas will be subject to inspection fees as set forth in K.S.A. 2009 Supp. 2-2112 et seq. and K.A.R. 4-5-8.
 - b. A regulated article may be imported into the state by one of the following options:
 - i. From the states of Arizona, California, Colorado, Idaho, New Mexico, Oregon, Utah, Washington, and other states, territories, and foreign countries where the disease has been found to exist: A phytosanitary certificate from the state or country of origin declaring, "The article was officially inspected after harvest and found free of the fungus Geosmithia, the Walnut Twig Beetle, free of bark, and stored in such a manner to retain freedom from the Walnut Twig Beetle in storage and transit."
 - ii. From all other states and territories of the United States and foreign countries that do not conduct an official survey on an annual basis: A phytosanitary certificate from the state or country of origin declaring, "The article was officially inspected after harvest and found to be free of Thousand Cankers Disease of Walnut and the Walnut Twig Beetle. The article was harvested on (date), and stored and shipped in a manner to retain freedom from the Walnut Twig Beetle in storage and transit."

- iii. From states and territories of the United States and foreign countries that conduct an official survey on an annual basis, and the state or territory of the United States or foreign country has been found free of Thousand Cankers Disease of Walnut and the Walnut Twig Beetle, no phytosanitary certificate is required.
- c. A state where Thousand Cankers Disease of Walnut or the Walnut Twig Beetle have not been reported can appeal to the Secretary for a one-year waiver from the official survey, and be considered a pest free area for that time period. After the one-year time period for the waiver expires, such state must complete an official survey for the disease and insect for continued importation of a regulated article into the State of Kansas without a phytosanitary certificate.
- d. A state phytosanitary certificate for importation into the state of Kansas is valid for thirty (30) days from the time of inspection. The regulated article cannot be physically altered in any way after issuance of the certificate and before entry into the state of Kansas.
- 6. The following regulated articles are exempt from the requirements of this quarantine order:
 - a. All nuts, nut meat and hulls of the genera Juglans.
 - b. Finished wood products, without bark (95% bark free), including walnut furniture, musical instruments, and gun stocks.
 - c. Processed lumber, without bark (95% bark free), with square edges, that has received a heat treatment with a minimum wood core temperature of 133 degrees Fahrenheit (56 degrees Celsius) maintained for at least 30 minutes, which is received from states, territories, or foreign countries where Thousand Cankers Disease of Walnut and the Walnut Twig Beetle have not been detected.
 - d. Nonviable, preserved specimens of the Walnut Twig Beetle (*Pityophthorus juglandis*) and the fungus *Geosmithia* defined below.
- 7. Terms set forth herein are defined as follows:
 - a. WALNUT: A genus of trees and their hybrids of the genus Juglans.
 - b. FUNGUS: GEOSMITHIA: An unnamed species of the genus Geosmithia, a genus of dry-spored anamorphic fungi that predominate in galleries built by phloem feeding bark beetles and other subcortical insects. Unofficially referred to as the species morbida.
 - c. BARK: (1) The thickened cork layer outside of the cork cambium of the wood composed mostly of dead lignified cells and produced by the formation of multiple layers of periderm, cortical, and phloem tissue; and, (2) the outer layer of a tree stem outside the vascular cambium composed of outer bark (corky tissue) and inner bark (phloem).
 - d. ÖFFICIAL INSPECTION: An inspection by a state or federal regulatory official trained in the identification of Thousand Cankers Disease of Walnut and Walnut Twig Beetle.
 - e. OFFICIAL SURVEY: A survey conducted by a state regulatory agency or designated agents of wood handling facilities, harvest sites, related articles, and plantings or native stands of walnuts to determine whether Thousand Cankers Disease of Walnut and Walnut Twig Beetle are present in the article's county of harvest or origin.
 - f. DESIGNATED AGENT: A public official with knowledge and training regarding a pest, facility, or operation whose information is deemed reliable by the Secretary.
- 8. Pursuant to K.S.A. 2009 Supp. 2-2112 *et seq.*, and 2-2125, any person who knowingly sells, barters, offers for sale, moves,

- transports, delivers, ships, or offers for shipments, into or within this state, a regulated article in violation of this quarantine order may be subject to criminal prosecution or civil penalties. In addition, such person may be subject to any and all expenses associated with the destruction or treatment of the regulated articles, or the removal of the regulated articles from the state.
- 9. Any person or their agent who harvests, removes, disposes, or diagnoses the health of walnut trees, that either suspects or confirms a tree to have Thousand Cankers Disease of Walnut or the Walnut Twig Beetle, must inform the Secretary of the location and disposition of the tree, or the name of the owner of the tree, within fourteen (14) days of such harvest, removal, disposition, or diagnosis. Any movement of such walnut tree is prohibited until the Secretary, or Secretary's authorized representative, has inspected the tree for plant pests, and verified that the tree is free of Geosmithia sp. and the Walnut Twig beetle.
- 10. The Secretary may conduct annual inspections and surveys of walnut harvest sites; timber mills and related facilities handling raw wood products or articles; and, planted and native stands of walnut trees within the state of Kansas for Thousand Cankers Disease of Walnut and the Walnut Twig Beetle.
- 11. The Secretary may, without further hearing, take further action not specified in this quarantine order if deemed necessary by the Secretary to protect walnut trees within the State of Kansas. Such action may include eradication and suppression activities, and the destruction of trees and articles.
- 12. This quarantine order shall become effective on the date it is signed by the Secretary and shall remain in effect until rescinded or modified by order of the Secretary.

IT IS SO ORDERED THIS _____ DAY OF ____ 2010 IN TOPEKA, SHAWNEE COUNTY, KANSAS.

> Joshua Svaty, Secretary Kansas Department of Agriculture

All interested persons may attend the hearing and will be given the opportunity to express comments either orally or in writing, or both. Interested parties may appear in person or by counsel.

Written comments and requests for information concerning the proposed quarantine should be directed to Jeff Vogel, Plant Protection & Weed Control Program Manager, Kansas Department of Agriculture, Forbes Field, Building 282, P.O. Box 19282, Topeka, 66619, jeff.vogel@kda.ks.gov, at or before the time of hearing. For persons intending to present oral testimony at the hearing, prior notice to the department would be helpful in arranging the agenda. In order to give all parties an opportunity to present their views, it may be necessary to request each participant to 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 quarantine in an accessible format. Requests for accommodation should be made at least five working days in advance of the hearing by contacting Leslie Garner at (785) 296-4623 or fax (785) 368-6668. Handicapped parking is located at the southwest corner of 9th and Kansas Ave., and the north entrance to the building is accessible to individuals with disabilities.

Joshua Svaty Secretary of Agriculture

Legislature

Interim Committee Schedule

The following committee meetings have been scheduled during the period of June 29-30. 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. The 2010 interim committee memberships and committee agendas can be found at http://skyways.lib.ks.us/ksleg/KLRD/Committees.htm.

Date	Room	Time	Committee	Agenda
June 29	152-S	10:00 a.m.	Joint Committee on Administrative Rules and Regulations	Review of the rules and regulations proposed for adoption by: Animal Health Dept.; State Treasurer; Dept. of Labor; Dept. of Revenue; Dept. of Agriculture; EMS Bd.; Secretary of State; Pharmacy Bd.; Insurance Dept.; and KCC.
June 30	346-S	9:00 a.m.	Kansas DUI Commission	Presentation on a DUI screening tool; update on Specialty Courts; and subcommittee meeting and reports.
				Ieffrev M. Russell

Director of Legislative Administrative Services

Doc. No. 038456

State of Kansas

Board of Pharmacy

Notice of Hearing on Proposed Administrative Regulations

A public hearing will be conducted at 8:30 a.m. Tuesday, August 24, at the Board of Pharmacy Office, 800 S.W. Jackson, Suite 1414, Topeka, to consider the adoption of K.A.R. 68-23-1 through 68-23-6 of the Kansas Pharmacy Board.

This 60-day notice of the public hearing shall constitute a public comment period for the purpose of receiving written public comments on proposed K.A.R. 68-23-1, 68-23-2, 68-23-3, 68-23-4, 68-23-5 and 68-23-6. All parties may submit written comments prior to the hearing to Debra Billingsley, Executive Secretary, Kansas Pharmacy Board, Room 560, Landon State Office Building, 900 S.W. Jackson, Topeka, 66612-1231, or to pharmacy@pharmacy.ks.gov. All interested parties will be given a reasonable opportunity to present their views orally on the proposed regulations during the hearing. In order to give all parties an opportunity to present their views, it may be necessary to request each participant to limit any 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 regulations and economic impact statement in an accessible format. Requests for accommodation should be made at least five working days in advance of the hearing by contacting the Kansas Pharmacy Board, Room 560, Landon State Office Building, 900 S.W. Jackson, Topeka, 66612-1231, (785) 296-4056. Handicapped parking is available.

A summary of the regulations follows:

Article 23.—STATEWIDE ELECTRONIC LOGGING SYSTEM FOR THE SALE OF METHAMPHETAMINE PRECURSORS

68-23-1. Definitions.

68-23-2. Electronic reporting. Details electronic reporting obligations of pharmacy owners and dispensers upon the purchase or attempted purchase of a methamphetamine precursor.

68-23-3. Extension for electronic reporting. Details the process to obtain an extension to comply with reporting obligations under K.A.R. 68-23-2(a) by a pharmacy owner.

68-23-4. Exemption from electronic reporting. Details the process for obtaining an exemption from electronic reporting obligations under K.A.R. 68-23-2(a).

68-23-5. Denial of sale and overrides. Describes what the KEMPL system shall do if an individual attempts to purchase a methamphetamine precursor in violation of Kansas law.

68-23-6. Compliance date. Sets the date by which a pharmacy must comply with the electronic reporting requirements of K.A.R. 68-23-2(a).

The above regulations will have minimal economic impact.

Copies of the regulation and the economic impact statement may be obtained from the Kansas Pharmacy Board, Room 560, Landon State Office Building, 900 S.W. Jackson, Topeka, 66612-123, (785) 296-4056, or by accessing the board's Web site at http://www.accesskansas.org/pharmacy/leg.html.

Debra Billingsley Executive Secretary

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. 2009 Supp. 12-1675(b)(c)(d) and K.S.A. 2009 Supp. 12-1675a(g).

Effective 6-21-10 through 6-27-10

Term	Rate
1-89 days	0.18%
3 months	0.09%
6 months	0.17%
1 year	0.39%
18 months	0.56%
2 years	0.67%

Elizabeth B.A. Miller Director of Investments

Doc. No. 038443

State of Kansas

Office of the Governor

Executive Order 10-04

WHEREAS, young Kansans not graduating from school, ill-prepared for life, work and/or postsecondary education/training has dramatic repercussions for our state's workforce development and the health and safety of our communities; and

WHEREAS, over the past ten years, approximately 38,700 Kansas students have dropped out of school resulting in \$10 billion in lost earnings, taxes and productivity and \$479 million in Medicaid and uninsured health care costs; and

WHEREAS, 76.4% of Kansas state inmates do not have a high school diploma; and

WHEREAS, young people who drop out of school are more likely to face a future of unemployment, government assistance and even criminal involvement; and

WHEREAS, young people fail to graduate for a wide variety of reasons, including: lack of connection to the school environment, chronic absenteeism, lack of parental involvement, and personal reasons such as teen pregnancy and engagement in illegal activities; and

WHEREAS, research show that a fundamental contributor to a young person's success is the presence of caring role models and that mentoring is a proven effective strategy to address the underlying causes of our state's dropout problem; and

WHEREAS, the State of Kansas has recognized this by establishing the Kansas DropINs and Kansas Mentors programs, who are committed to ensuring all young Kansans achieve a bright future; and

WHEREAS, a comprehensive solution cannot be accomplished by any one entity, but rather requires collaboration from all sectors of Kansas, including: businesses, schools, community organizations, parents, state agencies and youth; and

WHEREAS, the establishment of a Commission on Graduation and Dropout Prevention and Recovery is an

important step in ensuring that dropping out is no longer an option and that every young Kansan will graduate prepared for life, work and/or postsecondary education/ training.

NOW, THEREFORE, pursuant to the authority vested in me as Governor of the State of Kansas, I hereby establish the Commission on Graduation and Dropout Prevention and Recovery ("Commission") with the following purposes and charges:

- 1. The Commission shall establish a vision statement, mission statement and guiding principles that reflect the needs of Kansas youth.
- The Commission shall examine and make recommendations on:
 - Setting a goal and timeline for reducing the statewide annual dropout rate;
 - b. Further developing early indicator systems to identify students who are at risk of dropping out, or who are not likely to graduate on time from high school without receiving additional support, and school policies that exacerbate dropping out;
 - c. Expanding the definition of "structured learning time" to include internships and work-study programs and exploring ways to encourage school districts to incorporate quality internships, work and learning programs into structured learning time to engage all students in relevant and rigorous curriculum;
 - d. Exploring state policies and practices relating to attendance, discipline, grading, retention, promotion, credit recovery, compulsory attendance age, the awarding of the General Equivalency Diploma ("GED") and the use of alternative schools;
 - e. Providing financial incentives for districts that are effective in graduating at-risk students and recovering high school dropouts;
 - f. Establishing a threshold annual dropout rate for each school district such that rates in excess of threshold levels would establish a mandatory requirement on districts to adopt and implement a district-wide action plan to reduce dropout rates and effectively track students;
 - g. Identifying additional areas for improvement and multi-sector collaboration.
- 3. The Commission shall explore funding sources (public, private and non-profit) and identify resources that may be available to sustain the work and recommendation of the Commission.
- 4. The Commission will meet monthly for six months.
- 5. The Commission shall report their findings and recommendations to the Governor by January 2011.
- 6. The Governor shall appoint a representative on the Commission from the following organizations:
 - a. Kansas Children's Cabinet and Trust Fund;
 - b. Kansas Association of School Boards; and
 - c. Kansas National Educators Association.
- 7. The Governor shall appoint to the Commission:
 - a. A representative of business or industry;
 - b. A representative of the faith community;
 - c. A representative of the armed forces;
 - d. A representative of a non-profit agency;

- e. A community representative;
- f. A high school principal;
- g. A youth representative;
- h. A representative of a parent organization;
- i. A superintendent;
- j. A foundation representative;
- A district judge recommended by the Chief Justice of the Supreme Court of the State of Kansas; and
- 1. Four members of the Kansas legislature.
- 8. The heads of the following state agencies and instrumentalities, or their designees shall participate on the Commission as ex-officio members:
 - a. Kansas Department of Commerce;
 - b. Kansas Department of Corrections;
 - c. Kansas Department of Health and Environment;
 - d. Kansas Department of Labor;
 - e. Kansas Department of Social and Rehabilitative Services;
 - f. Kansas Juvenile Justice Authority;
 - g. Kansas State Department of Education;
 - h. Kansas Board of Regents;
 - i. Kansas State Board of Education;
 - j. Kansas African American Affairs Commission;
 - k. Kansas Hispanic and Latino American Affairs Commission; and
 - 1. The Office of the Governor.
- 9. The directors of Kansas DropINs and Kansas Mentors, or their designees, shall participate on the Commission as ex-officio members.
- 10. The Governor may appoint additional relevant members concerned with graduation and dropout prevention and recovery, as the Governor may so designate.
- 11. The Commission shall be co-chaired by the Secretary of Health and Environment and the Commissioner of Education or their designees.
- 12. Members shall serve without compensation with the exception that expenses incurred in the furtherance of the organization's mission are allowed to be reimbursed with documentation and prior approval. Approved expenses include mileage reimbursement for travel to Commission meetings.
- 13. All agencies under the control of the Governor which are on the Commission are directed to render assistance and cooperation to the Commission.
- 14. The Kansas DropINs and Kansas Mentors programs shall be transferred to and housed within the Kansas State Department of Education and provide support to the Commission's efforts in an integrated dropout prevention strategy.

This document shall be filed with the Secretary of State as Executive Order 10-04, and shall become effective immediately.

Dated June 15, 2010.

Mark Parkinson Governor Attest: Chris Biggs Secretary of State

Doc. No. 038450

State of Kansas

Office of the Governor

Executive Order 10-05

WHEREAS, Kansas' leaders and families recognize the value of high quality early childhood experiences in preparing young children for success in school and life; and

WHEREAS, research has recognized that investment in comprehensive, high quality early childhood programs can yield enormous economic benefits for future generations and local communities; and

WHEREAS, research has documented that investment in comprehensive, high quality early childhood and education services can save money by preventing future expenditures on remedial education, corrections and other costs associated poor early childhood outcomes; and

WHEREAS, Kansas has made great strides in improving the early care and education system in the last decade through investments in programs such as Early Head Start, Smart Start, the Early Childhood Block Grant, Four-Year Old At Risk and PreK, Tiny K, Parents as Teachers and other evidence based, outcomes driven programs; and

WHEREAS, the Kansas Early Childhood Comprehensive Systems Plan and the Early Learning Coordinating Council has made progress in coordinating these services; and

WHEREAS, early childhood development requires a comprehensive, coordinated approach to a child's care and learning experiences; and

WHEREAS, the federal Improving Head Start Reauthorization Act of 2007 (P.L. 110-134) requires the establishment of a State Advisory Council on Early Childhood in order to receive Head Start collaboration grants from the federal government; and

WHEREAS, the State Advisory Council will build on the work of the Kansas Children's Cabinet, Kansas Early Childhood Comprehensive Systems Plan ("ECCS") and the Kansas Early Learning Coordinating Council ("ELCC").

NOW, THEREFORE, pursuant to the authority vested in me as Governor of the State of Kansas, I hereby establish the Kansas Early Childhood Advisory Council ("Council") with the following purposes and charges:

- The Council shall meet the criteria and carry out the duties and functions prescribed in Public Law 110-134, in addition to any responsibilities assigned to the Council by the Governor, including the following:
 - a. Conduct a periodic statewide needs assessment concerning the quality and availability of early childhood education and development programs and services for children from birth to school entry, including an assessment of the availability of high-quality pre-kindergarten services for low-income children in the State of Kansas;
 - Identify opportunities for, and barriers to, collaboration and coordination among federallyfunded and state-funded child development, child care and early childhood education programs and services, including collaboration and

- coordination among state agencies responsible for administering such programs;
- Develop recommendations for increasing the overall participation of children in existing federal, state and local child care and early childhood education programs, including outreach to underrepresented and special populations;
- d. Develop recommendations regarding the establishment of a unified data collection system for public early childhood education and development programs and services throughout the State of Kansas;
- e. Develop recommendations regarding statewide professional development and career advancement plans for early childhood educators in the State of Kansas;
- f. Assess the capacity and effectiveness of 2- and 4-year public and private institutions of higher education in the State of Kansas toward supporting the development of early childhood educators, including the extent to which such institutions have in place articulation agreements, professional development and career advancement plans; and
- g. Make recommendations for improvements in state early learning standards and undertake efforts to develop high-quality comprehensive early learning standards, as appropriate.
- 2. The Council shall hold public hearings and provide an opportunity for public comment on the activities described above and the Council shall submit a statewide strategic report addressing such activities to the State Director of Head Start Collaboration and the Governor.
- After the Council submits a statewide strategic report, the Council shall meet periodically to review
 any implementation of the recommendations in
 such report and any changes in state and local
 needs.
- 4. The Governor shall designate the Executive Director of the Children's Cabinet and Trust Fund to coordinate the activities of the Council.
- 5. The Governor shall appoint members in accordance with Public Law 110-134, and may include additional relevant members concerned with early childhood education and care, as the Governor may so designate. The Governor shall take steps to ensure that its membership includes, to the extent possible, representatives of the following:
 - A representative of the state agency responsible for child care;
 - b. A representative of the state educational agency;
 - c. A representative of local educational agencies;
 - d. A representative of institutions of higher education in the State of Kansas;
 - e. A representative of local providers of early childhood education and development services;
 - f. A representative from Head Start agencies located in the State of Kansas, including migrant and seasonal Head Start programs and Indian Head Start programs;
 - g. The State Director of Head Start Collaboration;

- h. A representative of the state agency responsible for programs under section 619 or part C of the Individuals with Disabilities Education Act (20 U.S.C. §§ 1419, 1431 et seq.);
- i. A representative of the state agency responsible for health or mental health care; and
- Representatives of other entities determined to be relevant by the Governor of the State of Kansas
- 6. Members of the Council shall serve without compensation with the exception that expenses incurred in the furtherance of the organization's mission are allowed to be reimbursed with documentation and prior approval. Approved expenses include mileage reimbursement for travel to Council meetings.

This document shall be filed with the Secretary of State as Executive Order 10-05, and shall become effective immediately.

Dated June 17, 2010.

Mark Parkinson Governor Attest: Chris Biggs Secretary of State

Doc. No. 038460

State of Kansas

Department on Aging Kansas Health Policy Authority

Public Notice

Pursuant to Senate Substitute for Senate Substitute for Substitute for House Bill 2320, as passed by the 2010 Kansas Legislature, the state of Kansas plans to collect approximately \$30 million through the quality care assessment to fund the quality care fund in state fiscal year 2011. The quality care fund will be used to finance initiatives to maintain or improve the quantity and quality of skilled nursing care in skilled nursing facilities in Kansas. This would include increases in payment rates for Medicaid services for nursing facility residents. Specific reimbursement methodologies will be established pursuant to the legislation. The purpose of the Quality Care Improvement Panel, created by the statute, will be administering and selecting reimbursements of moneys in the quality care assessment fund.

For any comments or additional information, contact Dave Halferty, Director of Nursing Facility and PACE Division, Kansas Department on Aging, New England Building, 2nd Floor, 503 S. Kansas Ave., Topeka, 66603-3404, fax (785) 296-0256.

Martin Kennedy Secretary of Aging Dr. Andrew Allison KHPA Executive Director

Kansas Health Policy Authority Social and Rehabilitation Services Department on Aging

Notice of Final Nursing Facility Medicaid Rates for State Fiscal Year 2011;

Methodology for Calculating Final Rates, and Rate Justifications; Response to Written Comments; Notice of Intent to Amend the Medicaid State Plan

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 Kansas Health Policy Authority (KHPA), 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 the Kansas Department on Aging (KDOA) and the Secretary of the Kansas Department of Social and Rehabilitation Services (SRS) are publishing the final Medicaid per diem rates for Medicaid-certified nursing facilities for State Fiscal Year 2011, the methodology underlying the establishment of the final nursing facility rates, and the justifications for those final rates. SRS and KDOA are also providing notice of the state's intent to submit 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, 2010.

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 portions of the Kansas Medicaid State Plan are maintained by KHPA:
 - 1. Attachment 4.19D, Part I, Subpart C, Exhibit C-1, inclusive;
 - 2. Attachment 4.19D, Part I, Subpart J; and
 - 3. Attachment 4.19D, Part I, Subpart K; and
 - 4. Attachment 4.19D, Part I, Subpart U.

The text of the portions 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 which the state currently intends to submit to CMS on or before September 30, 2010. The final 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 twelve 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, and Retroactive Rate Adjustments.

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.) 129-10-17. 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 non-reimbursable/non-resident 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. 129-10-17.

When a non-arms length or related party 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 on-going 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. 129-10-17.

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 cost data submitted by the provider. The current base cost data is the combined calendar year cost data from each available report submitted by the current provider during 2007, 2008, and 2009.

If the current provider has not submitted a calendar year report between 2007 and 2009, the cost data submitted by the previous provider for that same period will be used as the base cost data. Once the provider completes their first 24 months in the program, their first calendar year cost report will become the provider's base cost data.

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. 129-10-18.

The allowable historic per diem cost is determined by dividing the allowable resident related expenses in each cost center by resident days. Before determining the per diem cost, each year's cost data is adjusted from the midpoint of that year to 12/31/10. 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 payment 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 is also 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 should be considered in determining 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, the real and personal property fee, and per diem pass-throughs to cover costs not included in the cost report data. The incentive

factor and real and personal property fee are explained in separate sections of this exhibit. Pass-throughs are explained in separate subparts of Attachment 4.19D of the State Plan. The add-ons plus the allowable per diem rate equal the total per diem rate.

Rates for New Construction and New Facilities (New Enrollment Status)

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. 129-10-17.

The cost information from the projected cost report and the first historic cost report covering the projected cost report period shall be adjusted to 12/31/10. This adjustment will be based on the IHS Global Insight, National Skilled Nursing Facility Market Basket Without Capital Index (IHS Index). The IHS 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 12/31/10. The provider shall remain in new enrollment status until the base data is reestablished. During this time, the adjusted cost data shall be used to determine all rates for the provider. Any additional 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 (Change of Provider Status)

The payment rate for the first 24 months of operation shall be based on the base cost data of the previous owner or provider. This base cost data shall include data from each calendar year cost report that was filed by the previous provider from 2007 to 2009. If base cost 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 first calendar year submitted by the new provider.

All data used to set rates for facilities recognized as a change-of-provider shall be adjusted to 12/31/10. This adjustment will be based on the I.H.S. Global Insight, National Skilled Nursing Facility Market Basket Without Capital Index (IHS Index). The IHS 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 12/31/10. The provider shall remain in change-of-provider status until the base data is reestablished. During this time, the adjusted cost data shall be used to determine all rates for the provider. Any additional factor for inflation that is applied to cost data for established providers shall be applied to the adjusted cost data for each provider in change of provider status.

Rates for Facilities Re-entering the Program (Reenrollment Status)

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 reentering the program shall be determined from the base cost data filed with the agency or the most recent cost report filed preceding calendar year 2007.

All cost data used to set rates for facilities reentering the program shall be adjusted to 12/31/10. This adjustment will be based on the I.H.S. Global Insight, National Skilled Nursing Facility Market Basket Without Capital Index (IHS Index). The IHS 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 12/31/10. The provider shall remain in reenrollment status until the base data is reestablished. During this time, the adjusted cost data shall be used to determine all rates for the provider. Any additional factor for inflation that is applied to cost data for established providers shall be applied to the adjusted cost data for each provider in reenrollment 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, including those receiving hospice services, 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 1	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

Facilities with 60 beds or less:

For facilities with 60 beds or less, the allowable historic per diem costs for all cost centers are determined by dividing the allowable resident related expenses by the actual resident days during the cost report period(s) used to establish the base cost data.

Facilities with more than 60 beds:

For facilities with more than 60 beds, 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(s) used to establish the base cost data. 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. For these providers, the greater of the actual resident days for the cost report period(s) used to establish the base cost data or the 85% minimum occupancy based on the number of licensed bed days during the cost report period(s) used to establish the base cost data 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 for facilities with more than 60 beds. 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 is also 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

Inflation will be applied to the allowable reported costs from the calendar year cost report(s) used to determine the base cost data from the midpoint of each cost report period to 12/31/10. The inflation will be based on the IHS Global Insight, National Skilled Nursing Facility Market Basket Without Capital Index (IHS Index).

The IHS 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 I.H.S. Global Insight, National Skilled Nursing Facility Total Market Basket Index (IHS Index).

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 non-working 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 which 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 expense line for owner/related party compensation. There is also a cost report schedule titled, "Statement of Owners and Related Parties." This schedule requires information concerning the percent of ownership (if over five percent), 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 non-owner administrator and co-administrator salaries. The schedule includes the calendar year 2009 historic cost reports in the database from all active nursing facility providers. The salary information in the array 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 with more than 60 beds. 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 non-owner 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 non-owner 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. The per diem limit for a 15-bed or less facility is inflated based on the State of Kansas annual cost of living allowance for classified employees for the rate period. 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 non-owner 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 property fees in effect April 1, 2010.

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 a per diem determined from the base cost data from all active nursing facility providers. Projected cost reports are excluded when calculating the limit.

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 for facilities over 60 beds. 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 is adjusted from the midpoint of the cost report period to 12/31/10. This will bring the costs reported by the providers to a common point in time for comparisons. The inflation will be based on the IHS Index.

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 130% 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 decimal places, of the facility cost report period case mix indices for all Medicaid facilities.

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 inflated Direct Health Care costs to the statewide average CMI. This is done by dividing the facility's cost report period CMI by the statewide average CMI for the cost report year, then multiplying this answer by the facility's inflated costs. This step is repeated for each cost report year for which data is included in the base cost data.

The second step is to determine per diem costs and array them to determine the median. The per diem cost is determined by dividing the total of each provider's base direct health care costs by the total days provided during the base cost data period. 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 \$60 and the upper payment limit is based on 130% of the median, then the upper payment limit for the statewide average CMI would be \$78 (D=130% \times \$60).

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 Allowable Direct Health Care Per Diem Cost. This is the lesser of the facility's per diem cost from the base cost data period or the Direct Health Care upper payment limit. Because the direct health care costs were previously adjusted for the statewide average CMI, the Allowable Direct Health Care Per Diem Cost corresponds to the statewide average CMI.

The next step is to determine the Medicaid acuity adjusted allowable Direct Health Care cost. The Medicaid CMI is divided by the statewide average CMI for the cost data period. This answer, is then multiplied by the Allowable Direct Health Care per diem cost. The result is referred to as the Medicaid Acuity Adjustment.

The Medicaid Acuity Adjustment is calculated quarterly to account for changes in the Medicaid CMI. To illustrate this calculation take the following situation: The facility's direct health care per diem cost is \$60.00, the Direct Health Care per diem limit is \$78.00, and these are both tied to a statewide average CMI of 1.000, and the facility's current Medicaid CMI is 0.9000. Since the per diem costs are less than the limit the Allowable Direct Heath Care Cost is \$60.00, and this is matched with the statewide average CMI of 1.0000. To calculate the Medicaid Acuity Adjustment, first divide the Medicaid CMI by the statewide average CMI, then multiply the answer by the Allowable Direct Health Care Cost. In this case that would result in \$54.00 (0.9000/1.0000 x \$60.00). Because the facility's current Medicaid CMI is less than the statewide average CMI the Medicaid Acuity Adjustment moves the direct health care per diem down proportionally. In contrast, if the Medicaid CMI for the next quarter rose to 1.1000, the Medicaid Acuity Adjustment would be \$66.00 (1.1000/1.0000 x \$60.00). Again the Medicaid Acuity Adjustment changes the Allowable Direct Health Care Per Diem Cost to match the current Medicaid CMI.

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 prop-

erty 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, 2008 were inflated with 12 months of inflation effective July 1, 2008. The inflation factor was from the IHS Global Insight-WEFA, National Skilled Nursing Facility Total Market Basket Index (IHS Index). The providers receive 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 adjusted to 12/31/08 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 (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 (K.A.R. 129-10-25). 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 outcome measures criteria. The criteria for NF and NF-MH providers will be determined separately based on arrays of outcome measures for each provider group.

Nursing Facility Quality and Efficiency Incentive Factor:

The Nursing Facility Incentive Factor is a per diem amount determined by six per diem add-ons providers can earn for various outcomes measures. Providers that maintain a case mix adjusted staffing ratio at or above the 75th percentile will earn a \$2.50 per diem add-on. Providers that fall below the 75th percentile staffing ratio but improve their staffing ratio by 10% or more will earn a \$0.25 per diem add-on. Providers that achieve a turnover rate at or below the 75th percentile will earn a \$2.50 per diem add-on. Providers that have a turnover rate greater than the 75th percentile but that reduce their turnover rate by 10% or more will receive a per diem add-on of \$0.25. Providers that have completed the full Kansas Cul-

ture Change Instrument Survey will receive a \$0.38 per diem add-on. Finally, providers that have a Medicaid occupancy percentage of 60% or more will receive a \$1.13 per diem add-on. The total of all the per diem add-ons a provider qualifies for will be their incentive factor.

The table below summarizes the incentive factor outcomes and per diem add-ons:

Incentive Outcome:	Incentive Points:
1) CMI adjusted staffing ratio ≥ 75th percentile (4.80) or CMI adjusted staffing < 75th percentile but improved ≥ 10%	\$ 2.50 0.25
2) Staff turnover rate ≤ 75th percentile (29%) or Staff turnover rate > 75th percentile but reduced ≥ 10%	2.50 0.25
3) Completion of the full Kansas Culture Change Instrument Survey	0.38
4) Medicaid occupancy ≥ 60%	1.13
Total Incentive Per Diem Add-on Available	\$ 6.51

Nursing Facility for Mental Health Quality and Efficiency Incentive Factor:

The Quality and Efficiency 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 Quality and Efficiency Incentive Factor is a per diem add-on ranging from zero to three dollars. It is designed to encourage quality care, efficiency and cooperation with discharge planning. The incentive factor is determined by five outcome measures: case-mix adjusted nurse staffing ratio; operating expense; staff turnover rate; staff retention rate; and occupancy rate. 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 3.50, which is 120% of the statewide NFMH median of 2.92. They will receive one point if the ratio is less than 120% of the NFMH median but greater than or equal to 3.21, 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 may earn one point for low occupancy outcomes measures. If they have total occupancy less than 90% they will earn a point.

NFMH providers may earn one point for low operating expense outcomes measures. They will earn a point if their per diem operating expenses are below \$19.49, or 90% of the statewide median of \$21.66

NFMH providers may earn up to two points for their turnover rate outcome measure. Providers with direct health care staff turnover equal to or below 29%, the 75th percentile statewide, will earn two points as long as contracted labor costs do not exceed 10% of the provider's

total direct health care labor costs. Providers with direct health care staff turnover greater than 29% but equal to or below 33%, the 50th percentile statewide, 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, NFMH providers may earn up to two points for their retention rate outcome measure. Providers with staff retention rates at or above 84%, the 75th percentile statewide will earn two points. Providers with staff retention rates at or above 77%, the 50th percentile statewide will earn one point.

The table below summarizes the incentive factor outcomes and points:

Quality/Efficiency Outcome:	Incentive Points:
1) CMI adjusted staffing ratio ≥ 120% (3.50) of state median (2.92), or	2, or
CMI adjusted staffing ratio between 110% (3.21) and 120%	1
2) Total occupancy < 90%	1
3) Operating expenses < \$19.49, 90% of NFMH median (\$21.66)	1
4) Staff turnover rate at or better than the 75th percentile, 29% Staff turnover rate > 29% but at or better than the 50th percentile, 33% Contracted labor < 10% of total direct health care labor costs	2, or 1
5) Staff retention ≥ 75th percentile, 84% Staff retention ≥ 50th percentile, 77%	2, or 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.

Incentive Factor Per Diems
\$7.50
\$5.00
\$2.50
\$0.00

The survey and certification performance of each NF and NF-MH provider will be reviewed prior to any incentive factor payment. In order to qualify for the incentive factor a home must not have received any health care survey deficiency of scope and severity level "H" or higher during the survey review period. Homes that receive "G" level deficiencies, but no "H" level or higher deficiencies, and that correct the "G" level deficiencies within 30 days of the survey, will receive 50% of the calculated incentive factor. Homes that receive no deficiencies higher than scope and severity level "F" will receive 100% of the calculated incentive factor. The survey and certification review period will be the 15-month period ending one quarter prior to the rate effective date. The following table lists the rate effective dates and corresponding review period end dates.

Rate Effective Date:	Review Period End Date:
July 1	March 31st
October 1	June 30th
January 1	September 30th
April Í	December 31st

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 is also 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.

A.2 Attachment 4.19D, Part I, Subpart J

To compensate providers for increased expenses incurred to raise employees' wages to the new minimum wage effective July 1, 2009 (\$7.25), a per diem pass-through will be determined and added on to each qualifying provider's per diem rate. The pass-through per diem will not be subject to cost center limits, and the 85% occupancy rule will not be applied to the calculation of the minimum wage pass-through.

1) Qualifying Providers

In order to qualify for the minimum wage pass-through, a provider must submit a pass-through application on the forms provided by the Kansas Department on Aging. The application will document the hourly wages of all affected employees prior to the implementation of the new minimum wage. Wage increases made prior to June 1, 2009 will not be eligible for the minimum wage pass-through. Providers will also estimate and report the number of hours each affected employee is expected to work during state fiscal year 2010 (the twelve months beginning July 1, 2009 and ending June 30, 2010). Completed applications must be returned to the Kansas Department prior to September 30, 2009.

2) Per Diem Pass-Through Calculation

The per diem pass-through will be determined by first estimating the total impact of increasing wages to the new minimum wage, and then dividing by resident days to get a per diem add-on. The total impact of increasing wages to the new minimum wage will be determined for each provider through three steps. First the incremental wage increase to the new minimum wage will be calculated for each affected employee. Second the individual impact for each affected employee will be determined by multiplying the incremental wage increase by the estimated hours each affected employee is expected to work during fiscal year 2010. Finally the total impact of the minimum wage increase for each provider will be the sum of the individual impacts determined for each employee. A per diem pass-through add-on will then be calculated by dividing each provider's estimated total impact by the provider's most recent cost report resident day total.

As an example, consider an employer that has ten employees receiving a wage of \$6.75 prior to July 1, 2009. If the employer raises their wages effective July 1, 2009, the incremental wage increase due to the new minimum wage will be \$0.50. If each employee is expected to work 2,000 hours during fiscal year 2010, the total impact per employee will be \$1,000 (\$0.50 x 2,000 hrs). The total estimated impact for the provider will be \$10,000 (\$1,000 x 10). If the employer provided 10,000 resident days during the most recent cost report, the pass-through per diem will be \$10,000/10,000 days, or \$1.00.

3) Per Diem Limits

No per diem add-on will be implemented that is not equal to or greater than \$0.10.

4) Effective Dates

Pass-through applications received prior to June 30, 2009 will be effective July 1, 2009. After that date, each provider's per diem pass-through will be effective on the first day of the month following the receipt of a completed application. No pass-through per diems will be implemented after October 1, 2009.

5) Phasing Out the Pass-Through

The per diem pass-through will be phased out as the effects of the minimum wage increase are reflected in the

The pass-through per diems will also be adjusted on a facility-specific basis to reflect the ratio of cost data that includes the new minimum wage costs. Since the base cost period for fiscal year 2011 is the cost report data from 2007-2009, minimum wage increases for July 1, 2008 and July 1, 2009 may not be reflected in the base cost data. Minimum wage pass-through per diems calculated during fiscal year 2009 and fiscal year 2010 will be reduced to reflect the ratio of the cost data that includes the new minimum wage costs.

During the phasing out of the minimum wage passthrough, if the per diem add-on falls below \$0.10, it will be removed from the rate calculation.

6) Auditing and Adjustments

Each qualifying providers' application and supporting documentation for the minimum wage pass-through will be subject to desk review and field audit and may by revised based on those findings. Corrections that result in a \$0.10 or greater per diem change to the pass-through will be implemented. Retroactive rate adjustments will be made when necessary.

A.3 Attachment 4.19D, Part I, Subpart K

To compensate providers for increased expenses incurred due to the transfer of responsibility for all durable medical equipment to the nursing home program, a per diem pass-through will be determined and added on to each provider's per diem rate. The pass-through per diem will not be subject to cost center limits, and the 85% occupancy rule will not be applied to the calculation of the DME pass-through.

1) Qualifying Providers

All providers with costs reported on line 507 of the Medicaid cost report will be eligible to receive the DME pass-through.

2) Per Diem Pass-Through Calculation

The per diem pass-through will be determined by dividing the inflated unadjusted costs reported on line 507 for the base cost data period effective July 1, 2008, by the non-Medicaid days reported for the same period. Non-Medicaid resident days will be determined by subtracting Medicaid resident days from total resident days.

As an example, consider a provider that reported \$1,000 on line 507 for each year in the base cost data period from 2005 through 2007. The cost will first be inflated for each year based on the IHS factors applied to cost data used to determine the base reimbursement rates. For 2005 the inflated cost would be \$1,134, for 2006 the inflated costs would be \$1,089, and for 2007 the inflated costs would be \$1,055. The total inflated costs would be \$3,278. If the provider reported 30,000 resident days during the base cost data period and 20,000 Medicaid days, the non-Medicaid resident day total would be 10,000 (30,000 — 20,000). The DME pass-through per diem would then be \$0.33 (\$3,278 / 10,000 rounded to the nearest hundredth).

3) Per Diem Limits

No per diem add-on will be implemented that is not equal to or greater than \$0.10.

4) Effective Dates

The durable medical equipment pass-through will be effective July 1, 2008.

5) Phasing Out the Pass-Through

The per diem pass-through will be phased out as the effects of transferring responsibility for all DME to the nursing home program are reflected in the cost reports.

The pass-through per diems will be adjusted on a facility-specific basis to reflect the ratio of cost data that includes the new DME expenses.

During the phasing out of the DME pass-through, if the per diem add-on falls below \$0.10, it will be removed from the rate calculation. Since the base cost period for fiscal year 2011 is the cost report data from 2007-2009, DME expenses for July 1, 2008 may not be reflected in the base cost data. DME per diems calculated during fiscal year 2009 will be reduced to reflect the ratio of the cost data that reflects the new DME expenses.

6) Auditing and Adjustments

Each qualifying providers' cost report and supporting documentation used to determine the DME pass-through will be subject to desk review and field audit and may by revised based on those findings. Corrections that result in a \$0.10 or greater per diem change to the pass-through will be implemented. Retroactive rate adjustments will be made when necessary.

A.4 Attachment 4.19D, Part I, Subpart U

To compensate providers for increased expenses incurred due to the quality care assessment, a lump sum pass-through will be determined and paid to each Medicaid provider. The quality care assessment pass-through will not be subject to cost center limits or the 85% occupancy rule.

1) Qualifying Providers

All providers currently enrolled in the Medicaid program that also provided Medicaid nursing facility serv-

Daily Medicaid

ices during the most recent cost report period will be eligible for the quality care assessment.

2) Lump Sum Pass-Through Calculation

The quality care assessment pass-through will be determined by multiplying the quality care assessment paid by each qualifying provider by the ratio of Medicaid resident days to total resident days for the most recent cost report period.

II. Final Medicaid Per Diem Rates for Kansas Nursing Facilities

A. Cost Center Limitations: The state establishes the following cost center limitations which are used in setting rates effective July 1, 2010.

		Per Day
Cost Center	Limit Formula	Limit
Operating	110% of the Median Cost	\$30.60
Indirect Health Care	115% of the Median Cost	\$44.29
Direct Health Care	130% of the Median Cost	\$94.86
Real and Personal Property Fee	105% of the Median Fee	\$9.05

These amounts were determined according to the "Reimbursement Limitations" section. The Direct Healthcare Limit is calculated based on a CMI of 0.9996, which is the statewide average.

B. Case Mix Index. These final rates are based upon each nursing facility's Medicaid average CMI calculated with a cutoff date of April 1, 2010, using the July 1, 2010 Kansas Medicaid/Medikan CMI Table. In Section II.C below, each nursing facility's Medicaid average CMI is listed beside its final per diem rate.

C. Final 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.

		Daily	Medicaid
Facility Name	City	Rate	CMI
Village Manor	Abilene	147.50	0.9094
Alma Manor	Alma	165.90	1.0211
Life Care Center of Andover	Andover	141.52	1.0587
Anthony Community Care Center	Anthony	151.46	1.1912
Medicalodges Health Care Center	Arkansas City	156.21	0.9078
Arkansas City Presbyterian Manor	Arkansas City	155.25	0.9483
Deseret Nursing & Rehab at Arma, Inc	Arma	134.42	1.0325
Ashland Health Center - LTCU	Ashland	190.83	1.1575
Medicalodges Atchison	Atchison	160.98	1.1000
Atchison Senior Village	Atchison	148.51	0.8990
Dooley Center	Atchison	155.57	0.7520
Attica Long Term Care	Attica	156.56	0.9793
Good Samaritan Society-Atwood	Atwood	164.12	1.0520
Lake Point Nursing Center	Augusta	128.80	0.9856
Baldwin Care Center	Baldwin City	134.72	1.0745
Quaker Hill Manor	Baxter Springs	120.28	1.1203
Catholic Care Center Inc.	Bel Aire	166.66	1.0375
Great Plains of Republic County, Inc.	Belleville	173.68	0.9721
Belleville Health Care Center	Belleville	116.68	0.9274
Mitchell County Hosptial LTCU	Beloit	167.81	0.9020
Hilltop Lodge Nursing Home	Beloit	144.72	0.9903
Bonner Springs Nursing and Rehab.	Bonner Springs	135.00	0.9723
Hill Top House	Bucklin	149.90	0.9994
Buhler Sunshine Home, Inc.	Buhler	171.96	1.0846
Life Care Center of Burlington	Burlington	127.01	0.9631
Caney Nursing Center	Caney	102.78	1.0453
Eastridge Nursing Home	Centralia	163.83	0.9433
Heritage Health Care Center	Chanute	132.37	1.1313
Chanute Health Care Center	Chanute	146.03	1.0983
Applewood Rehabilitation	Chanute	82.78	0.8358
Chapman Valley Manor	Chapman	127.04	0.9106
Cheney Golden Age Home Inc.	Cheney	147.77	1.0439
Cherryvale Care Center	Cherryvale	132.27	1.0658
Chetopa Manor	Chetopa	117.03	0.9405

Escility Name	City	Daily Rate	Medicaid
Facility Name The Shepherd's Center	City Cimarron	143.15	CMI 0.9859
The Shepherd's Center Medicalodges Clay Center	Clay Center	161.97	1.0040
Clay Center Presbyterian Manor	Clay Center	179.97	1.0300
Clearwater Ret. Community	Clearwater	144.80	0.9145
Community Care, Inc. Park Villa Nursing Home	Clifton Clyde	108.49 130.06	0.9122 1.0029
Coffeyville Regional Medical Center	Coffeyville	87.06	0.0000
Windsor Place	Coffeyville	150.41	1.1204
Medicalodges Coffeyville	Coffeyville	147.78	0.9371
Windsor Place at Iola, LLC Deseret Nursing & Rehab at Colby	Coffeyville Colby	142.49 160.39	1.0062 1.0873
Prairie Senior Living Complex	Colby	171.08	1.0296
Pioneer Lodge	Coldwater	133.82	0.8383
Medicalodges Columbus Mt Joseph Sepier Village, LLC	Columbus Concordia	166.68 130.48	1.0592 1.0065
Mt Joseph Senior Village, LLC Sunset Home, Inc.	Concordia	132.40	0.8688
Spring View Manor	Conway Springs	108.50	0.8481
Golden Living Center-Chase Co.	Cottonwood Falls	135.81	1.0483
Council Grove Healthcare Center Hilltop Manor	Council Grove Cunningham	134.05 111.06	1.0288 0.8728
Westview of Derby	Derby	141.43	1.0129
Derby Health and Rehabilitation	Derby	178.80	0.0000
Hillside Village	DeSoto Dexter	132.35 123.25	0.9759
Dexter Care Center Lane County Hospital - LTCU	Dighton	153.13	0.8828 0.9467
Trinity Manor	Dodge City	144.54	0.9760
Good Samaritan Society-Dodge City	Dodge City	133.03	0.8906
Manor of the Plains Medicalodges Douglass	Dodge City Douglass	158.16 158.97	1.0176 0.9881
Golden Living Center-Downs	Downs	140.38	1.1647
Country Care Home	Easton	132.64	0.8652
Golden Living Center-Parkway	Edwardsville	147.86	1.1125
Golden Living Center-Kaw River Golden Living Center-Edwardsville	Edwardsville Edwardsville	155.71 128.56	1.1397 0.8601
Lakepoint Nursing Center-El Dorado	El Dorado	131.57	1.0634
Golden Living Center-El Dorado	El Dorado	125.99	1.0203
Morton County Hospital	Elkhart	135.82	0.9276
Woodhaven Care Center Good Samaritan Society-Ellis	Ellinwood Ellis	132.82 151.39	0.9886 0.9264
Good Sam Society-Ellsworth Village	Ellsworth	141.85	0.8932
Emporia Presbyterian Manor	Emporia	181.03	1.0531
Holiday Resort Flint Hills Care Center, Inc.	Emporia Emporia	135.82 109.77	1.1093 0.9404
Enterprise Estates Nursing Center	Enterprise	123.75	1.0545
Golden Living Center-Eskridge	Eskridge	105.72	0.8221
Medicalodges of Eudora	Eudora	129.46	0.8403 0.9622
Eureka Nursing Center Kansas Soldiers' Home	Eureka Fort Dodge	127.33 169.75	0.9622
Medicalodges Fort Scott	Fort Scott	157.82	0.9828
Fort Scott Manor	Fort Scott	119.50	0.9143
Fowler Residential Care Frankfort Community Care Home, Inc.	Fowler Frankfort	148.72 134.32	0.8011 0.9256
Golden Living Center-Fredonia	Fredonia	136.69	1.1560
Sunset Manor, Inc	Frontenac	119.57	0.9757
Emerald Pointe Health & Rehab Centre	Galena	119.71	0.7863
Galena Nursing & Rehab Center Garden Valley Retirement Village	Galena Garden City	127.41 145.66	1.0046 1.0103
Homestead Health & Rehab	Garden City	151.63	0.9138
Meadowbrook Rehab Hosp., LTCU	Gardner	193.60	1.1659
Medicalodges Gardner Anderson County Hospital	Gardner Garnett	151.20 165.71	0.9864 0.9329
Golden Heights Living Center	Garnett	142.50	0.9495
The Heritage	Girard	120.03	1.1104
The Nicol Home, Inc.	Glasco Goddard	117.35 159.71	0.7825
Medicalodges Goddard Bethesda Home	Goessel	181.46	0.9230 1.0405
Good Samaritan Society-Sherman Co.	Goodland	149.17	1.0093
Cherry Village Benevolence	Great Bend	132.73	0.9305
Great Bend Health & Rehab Center Halstead Health and Rehab Center	Great Bend Halstead	138.73 134.96	0.9938 0.9503
Lakewood Senior Living of Haviland	Haviland	90.75	0.6455
St. John's of Hays	Hays	138.61	0.9267
St. Johns Victoria	Hays	137.64	0.9283
Good Samaritan Society-Hays Haysville Healthcare Center	Hays Haysville	132.04 153.17	0.9723 1.0510
Medicalodges Herington	Herington	133.50	0.9696
Schowalter Villa	Hesston	181.83	0.9748
Maple Heights of Hiawatha	Hiawatha Highland	126.93	0.9889
Highland Care Center Dawson Place, Inc.	Highland Hill City	128.54 157.35	0.8750 1.0559
Salem Home	Hillsboro	141.32	0.7395
Parkside Homes, Inc.	Hillsboro	151.75	1.0279
Medicalodges Jackson County	Holton	137.70	0.8963

F 111. M	C'4		Medicaid			-	Medicaid
Facility Name	City	Rate	CMI	Facility Name	City	Rate	CMI
Tri County Manor Living Center, Inc.	Horton	114.94	0.9389	Aberdeen Village, Inc.	Olathe	183.78	0.9930
Howard Twilight Manor	Howard Hoxie	142.70 151.55	1.0074 0.9080	Deseret Nursing & Rehab at Onaga Peterson Health Care, Inc.	Onaga Osago City	140.54 121.79	1.1160 0.9331
Sheridan County Hospital Pioneer Manor	Hugoton	176.77	0.9452	Osage Nursing & Rehab Center	Osage City Osage City	148.07	1.1897
Pinecrest Nursing Home	Humboldt	136.43	0.9494	Life Care Center of Osawatomie	Osawatomie	142.20	1.0684
Golden Plains	Hutchinson	132.30	0.9827	Parkview Care Center	Osborne	131.28	1.0123
Good Sam Society-Hutchinson Village	Hutchinson	156.07	0.9441	Hickory Pointe Care & Rehab Center	Oskaloosa	139.39	0.9663
Hutchinson Care Center	Hutchinson	133.36	1.0373	Deseret Nursing & Rehab at Oswego	Oswego	122.26	1.1492
Wesley Towers	Hutchinson	186.72	1.0552	Ottawa Retirement Village	Ottawa	135.51	1.0806
Ray E. Dillon Living Center	Hutchinson	169.56	0.9376	Brookside Manor	Overbrook	126.39	0.8982
Regal Estate	Independence	126.40	1.0800	Garden Terrace at Overland Park	Overland Park	152.69	1.0681
Windsor Place at Independence	Independence Inman	147.23	1.1185	Indian Meadows Healthcare Center	Overland Park	186.15	1.3507
Pleasant View Home Iola Nursing Center	Iola	152.48 142.20	0.8916 0.9604	Manorcare Hlth Services of Overland Park Villa Saint Joseph	Overland Park Overland Park	177.32 181.09	1.1521 1.0355
Hodgeman Co Health Center-LTCU	Jetmore	193.98	1.2260	Delmar Gardens of Overland Park	Overland Park	160.78	0.9591
Stanton County Hospital - LTCU	Johnson	168.83	0.9131	Overland Park Nursing & Rehab	Overland Park	160.44	0.9707
Valley View Senior Life	Junction City	156.51	1.0481	Indian Creek Healthcare Center	Overland Park	166.56	1.0505
Medicalodges Post Acute Care Center	Kansas City	166.79	1.1166	Village Shalom, Inc.	Overland Park	181.97	0.9741
Kansas City Presbyterian Manor	Kansas City	173.21	0.9265	Riverview Manor, Inc.	Oxford	123.46	0.9454
Medicalodges Kansas City	Kansas City	151.09	0.8867	Medicalodges Paola	Paola	116.82	0.7739
Lifecare Center of Kansas City	Kansas City	147.04	1.0378	North Point Skilled Nursing Center	Paola	129.21	0.9069
Deseret Nursing & Rehab at Kensington		129.78	1.0395	Elmhaven East	Parsons	125.02	1.0900
The Wheatlands	Kingman	130.06	0.8894	Elmhaven West	Parsons	124.04	0.9670
Medicalodges Kinsley	Kinsley	173.75	0.9679	Parsons Presbyterian Manor	Parsons	163.49	1.0263
Kiowa Hospital District Manor	Kiowa La Crosse	146.84 161.79	0.7950 0.9756	Good Samaritan Society-Parsons	Parsons	138.51	0.9535
Rush Co. Memorial Hospital Rush County Nursing Home	La Crosse	149.21	1.0735	Legacy Park	Peabody	146.38	1.0110
High Plains Retirement Village	Lakin	185.49	1.0419	Westview Manor of Peabody	Peabody	77.66	0.6373
Golden Living Center-Lansing	Lansing	141.73	1.1452	Phillips County Retirement Center Medicalodges Pittsburg South	Phillipsburg Pittsburg	125.68 151.67	0.9400 1.0090
Larned Healthcare Center	Larned	139.12	0.9633	Mt. Carmel Regional Medical Ctr. SNF	Pittsburg	284.20	2.1000
Lawrence Presbyterian Manor	Lawrence	178.56	1.0679	Golden Living Center-Pittsburg	Pittsburg	121.27	1.0249
Brandon Woods at Alvamar	Lawrence	167.91	0.9814	Cornerstone Village, Inc.	Pittsburg	141.41	1.0000
Pioneer Ridge Retirement Community	Lawrence	155.25	1.0305	Rooks County Senior Services, Inc.	Plainville	145.80	0.8329
Medicalodges Leavenworth	Leavenworth	154.76	0.9523	Pratt Regional Medical Center	Pratt	161.49	0.9660
Delmar Gardens of Lenexa	Lenexa	143.75	1.0402	Lakewood Senior Living of Pratt, LLC	Pratt	119.73	0.8750
Lakeview Village	Lenexa	189.35	1.1375	Prescott Country View Nursing Center	Prescott	118.26	1.0031
Leonardville Nursing Home	Leonardville	120.53	0.9826	Prairie Sunset Manor	Pretty Prairie	147.38	0.8869
Wichita County Health Center	Leoti	160.00	0.8300	Protection Valley Manor	Protection	127.31	0.8677
Good Samaritan Society-Liberal	Liberal	152.53 149.77	1.0239 0.9378	Gove County Medical Center	Quinter	162.89	0.8423
Wheatridge Park Care Center Lincoln Park Manor, Inc.	Liberal Lincoln	149.77	1.0423	Grisell Memorial Hosp Dist #1-LTCU	Ransom	166.31	0.9094
Bethany Home Association	Lindsborg	166.87	0.9055	Richmond Healthcare and Rehabilitation		146.33	1.0900
Linn Community Nursing Home	Linn	122.04	1.0330	Lakepoint Nursing Ctr-Rose Hill	Rose Hill	137.56	1.0200
Sandstone Heights	Little River	163.11	1.0442	Rossville Healthcare & Rehab Center	Rossville	133.43	1.0208
Logan Manor Community Health Service		161.54	0.9500	Wheatland Nursing & Rehab Center	Russell	133.95 182.32	1.0553 0.9840
Louisburg Care Center	Louisburg	150.46	1.2622	Russell Regional Hospital Sabetha Nursing Center	Russell Sabetha	151.33	1.1363
Good Samaritan Society-Lyons	Lyons	156.83	1.0506	Apostolic Christian Home	Sabetha	131.33	0.9783
Meadowlark Hills Retirement Community		176.46	0.9546	Smokey Hill Rehabilitation Center	Salina	127.66	0.9843
Stoneybrook Retirement Community	Manhattan	159.48	1.0497	Kenwood View Nursing Center	Salina	133.35	1.0900
St. Joseph Village, Inc.	Manhattan	152.55	1.0179	Windsor Estates	Salina	125.25	0.9177
Jewell County Hospital	Mankato	166.52	0.9636	Pinnacle Park Nursing and Rehabilitation	Salina	118.60	1.0050
St. Luke Living Center	Marion Marguette	146.84 144.70	0.9894 0.8694	Salina Presbyterian Manor	Salina	175.70	0.9917
Riverview Estates, Inc. Cambridge Place	Marysville	131.65	0.9947	Holiday Resort of Salina	Salina	140.38	0.9615
McPherson Care Center	McPherson	156.56	1.1086	Satanta Dist. Hosp. LTCU	Satanta	174.46	0.9987
The Cedars, Inc.	McPherson	164.16	0.9224	Park Lane Nursing Home	Scott City	153.24	0.8641
Meade District Hospital, LTCU	Meade	165.44	0.8233	Pleasant Valley Manor	Sedan	113.84	1.0233
Trinity Nursing & Rehab Center	Merriam	160.21	1.0545	Sedgwick Healthcare Center	Sedgwick	158.78	0.9874
Great Plains of Ottawa County, Inc.	Minneapolis	125.70	0.9280	Crestview Manor Life Care Center of Seneca	Seneca Seneca	109.87 125.47	1.0050 0.9463
Good Samaritan Society-Minneapolis	Minneapolis	138.39	0.9766	Good Samaritan Society	Sharon Springs	127.45	0.9463
Minneola District Hospital	Minneola	183.39	1.0447	Shawnee Gardens Nursing Center	Shawnee	145.92	1.1944
Bethel Home, Inc.	Montezuma	141.27	0.8715	Sharon Lane Health Services	Shawnee	137.71	0.9942
Moran Manor	Moran	125.04	1.2464	Smith County Memorial Hospital LTCU	Smith Center	152.40	0.8575
Memorial Home for the Aged	Moundridge Moundridge	170.39	1.0289	Deseret Nursing & Rehab at Smith Center	Smith Center	130.51	1.1042
Moundridge Manor, Inc. Mt. Hope Nursing Center	Moundridge Mt. Hope	146.98 131.08	0.8722 0.9492	Mennonite Friendship Manor, Inc.	South Hutchinson		0.9918
Villa Maria, Inc.	Mulvane	135.75	1.0529	Golden Living Center-Spring Hill	Spring Hill	151.07	1.0881
Golden Living Center-Neodesha	Neodesha	134.56	1.1652	Good Sam Society-St. Francis Village	St. Francis	155.35	0.9746
Ness County Hospital Dist.#2	Ness City	154.95	0.9500	Leisure Homestead at St. John	St. John	144.25	1.0093
Asbury Park	Newton	170.65	0.9749	Community Hospital of Onaga, LTCU	St. Marys	170.59	0.9285
Kansas Christian Home	Newton	161.80	1.0831	Prairie Mission Retirement Village	St. Paul	122.98	0.7883
Newton Presbyterian Manor	Newton	175.81	0.9567	Leisure Homestead at Stafford	Stafford	120.21	0.9067
Bethel Care Center	North Newton	163.63	1.0688	Sterling Presbyterian Manor	Sterling	164.68	0.9058
Andbe Home, Inc.	Norton	148.91	0.9908	Solomon Valley Manor	Stockton	156.83	1.0394
Village Villa	Nortonville	146.80	1.1211	Seasons of Life Living Center	Syracuse	166.51	0.9007
Logan County Manor	Oakley	168.37	0.8759	Tonganoxie Nursing Center	Tonganoxie	140.30 171.58	0.9682 0.8986
Decatur County Hospital	Oberlin	153.81	0.8867	Brewster Place Topeka Presbyterian Manor Inc.	Topeka Topeka	175.42	0.8986
Good Samaritan Society-Decatur Co.	Oberlin Olatho	137.25	0.8136	Eventide Convalescent Center, Inc.	Торека Торека	118.31	0.9644
Villa St. Francis Pinnacle Ridge Nursing and Rehab.	Olathe Olathe	170.53 138.53	1.0759 1.0598	Topeka Community Healthcare Center	Topeka	135.51	0.9330
Royal Terrace Nrsg. & Rehab. Center	Olathe	143.06	1.0237	McCrite Plaza Health Center	Topeka	143.18	0.9050
Good Samaritan Society-Olathe	Olathe	163.10	0.9432	Rolling Hills Health Center	Topeka	171.16	1.0252
Evergreen Community of Johnson County		202.22	1.2314		*		(continued)
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Facility Name	City	Daily Rate	Medicaid CMI
Manorcare Health Services of Topeka	Topeka	153.24	1.0286
Westwood Manor	Topeka	133.38	1.0197
IHS of Brighton Place	Topeka	100.27	0.7476
Countryside Health Center	Topeka	113.16	0.6940
Providence Living Center	Topeka	91.66	0.7097
Brighton Place North	Topeka	92.50	0.7047
Aldersgate Village	Topeka	179.75	1.0208
Plaza West Care Center, Inc.	Topeka	162.66	1.0016
Lexington Park Nursing and Post Acute	Topeka	158.95	0.9523
Greeley County Hospital, LTCU	Tribune	164.91	0.9036
The Legacy at Park View	Ulysses	174.99	1.1028
Valley Health Care Center	Valley Falls	118.07	0.6514
Trego Co. Lemke Memorial LTCU	WaKeeney	176.77	0.9569
Trego Manor	WaKeeney	127.25	0.8463
Golden Living Center-Wakefield	Wakefield	138.13	1.0156
Good Samaritan Society-Valley Vista	Wamego	153.48	0.9435
The Centennial Homestead, Inc.	Washington	113.14	0.9220
Wathena Nursing & Rehab Center	Wathena	144.56	1.0696
Coffey County Hospital	Waverly	160.79	0.8600
Golden Living Center-Wellington	Wellington	123.66	0.9739
Deseret Nursing & Rehab at Wellington	Wellington	125.99	1.0743
Wellsville Manor	Wellsville	117.92	0.9269
Westy Community Care Home	Westmoreland	133.58	1.0453
Wheat State Manor	Whitewater	152.62	0.9561
Medicalodges Wichita	Wichita	156.09	0.9904
Meridian Nursing & Rehab Center	Wichita	130.37	1.0340
Kansas Masonic Home	Wichita	168.05	1.0325
Homestead Health Center, Inc.	Wichita	162.51	0.9642
Deseret Nursing & Rehab at Wichita	Wichita	137.04	1.1885
Wichita Presbyterian Manor	Wichita	183.45	1.0579
Sandpiper Healthcare and Rehab Center	Wichita	137.87	1.0521
Lakepoint Nursing and Rehabilitation	Wichita	146.29	1.0320
Manorcare Health Services of Wichita	Wichita	160.24	1.1395
College Hill Nursing and Rehab Center	Wichita	139.92	0.9624
Lakewood Senior Living of Seville	Wichita	130.60	1.0077
Golden Living Center-Wichita	Wichita	137.15	0.9296
Wichita Nursing Center	Wichita	104.61	0.7930
The Health Care Center@Larksfield Pl.	Wichita	160.46	0.9725
Life Care Center of Wichita	Wichita	149.53	1.1203
Via Christi Hope	Wichita	130.70	0.9978
Family Health & Rehabilitation Center	Wichita	182.30	0.0000
Golden Living Center-Wilson	Wilson	139.58	1.1895
Jefferson Co. Memorial Hospital-LTCU	Winchester	158.72	1.0117
Good Samaritan Society-Winfield	Winfield	153.14	1.0345
Cumbernauld Village, Inc.	Winfield	168.84	0.9219
Winfield Rest Haven II LLC	Winfield	144.19	0.8739
Deseret Nursing & Rehab at Yates Center	Yates Center	138.73	1.1267

III. Justifications for the Final Rates

- 1. The final rates are calculated according to the rate-setting methodology in the Kansas Medicaid State Plan and pending amendments thereto.
- 2. The final rates are calculated according to a methodology which satisfies the requirements of K.S.A. 39-708c(x) and the KHPA regulations in K.A.R. Article 30-10 implementing that statute and applicable federal law.
- 3. The State's analyses project that the final 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 \$178.80; with the total average allowable cost being \$161.20.
 - c. Estimated average rate July 1, 2010 \$145.44 Average payment rate July 1, 2009 \$135.21 Amount of change \$10.23 Percent of change 7.57%
- 4. Estimated annual aggregate expenditures in the Medicaid nursing facility services payment program will increase approximately \$24 million.
- 5. The state estimates that the final 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:

- Service providers operating a total of 291 nursing facilities (representing 96% of all the licensed nursing facilities in Kansas) participate in the Medicaid program, while an additional 37 hospital-based long-term care units are also certified to participate in the Medicaid program;
- b. 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 105 of the 105 counties in Kansas;
- c. The statewide average occupancy rate for nursing facilities participating in Medicaid is 83%;
- d. The statewide average Medicaid occupancy rate for participating facilities is 55%; and
- e. The final rates would cover 96% 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 no comments to the Notice of Proposed Nursing Facility Medicaid Rates for State Fiscal Year 2011, 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 22, 2010 Kansas Register.

V. Notice of Intent to Amend the Medicaid State Plan

The state intends to submit Medicaid State Plan amendments to CMS in conjunction with its analysis and documentation of the quality care assessment, as created by Senate Substitute for Senate Substitute for Substitute for House Bill No. 2320, on or before September 30, 2010. If the quality care assessment is disallowed the state will withdraw the state plan amendments.

Martin Kennedy Secretary of Aging Don Jordan Secretary Social and Rehabilitation Services Dr. Andrew Allison

KHPA Executive Director

Kansas Guardianship Program

Notice of Meeting

The Kansas Guardianship Program will conduct its governing board meeting from 1:30 to 3:30 p.m. Wednesday, June 30, at the Kansas Bankers Association, 610 S.W. Corporate View, Topeka. For more information, call (785) 587-8555.

Jean Krahn Executive Director

Doc. No. 038444

(Published in the Kansas Register June 24, 2010.)

City of Odgen, Kansas

Notice of Intent to Seek Private Placement General Obligation Bonds, Series 2010

Notice is hereby given that the city of Ogden, Kansas (the issuer), proposes to seek a private placement of the above-referenced bonds. The maximum aggregate principal amount of the bonds shall not exceed \$210,000. The proposed sale of the bonds is in all respects subject to approval of a bond purchase agreement between the issuer and the purchaser of the bonds and the passage of an ordinance and adoption of a resolution by the governing body of the issuer authorizing the issuance of the bonds and the execution of various documents necessary to deliver the bonds.

Dated June 17, 2010.

Vincent L. Kramer II City Clerk

Doc. No. 038454

State of Kansas

University of Kansas

Notice to Bidders

The University of Kansas encourages interested vendors to visit the University of Kansas Purchasing Services Web site at http://www.purchasing.ku.edu/ for a complete listing of all transactions for which KU Purchasing Services, or one of the consortia commonly utilized by KU, is issuing requests for proposals, solicitations, bids or information. This includes requests for proposals, solicitations and bids for University of Kansas construction projects, including requests relating to consulting and design services. Paper postings of KU Purchasing Services bid transactions may be viewed at the Purchasing Services office located at 1246 W. Campus Road, Room 5, Lawrence, 66045, or persons may contact Purchasing Services at (785) 864-3790, by fax at (785) 864-3454, or by e-mail at purchasing@ku.edu to request a copy of a current bid.

> Barry K. Swanson Director of Purchasing and Strategic Sourcing

Doc. No. 037757

(Published in the Kansas Register June 24, 2010.)

City of Schoenchen, Kansas

Notice of Intent to Seek Private Placement General Obligation Bonds, Series 2010-A

Notice is hereby given that the city of Schoenchen, Kansas (the issuer), proposes to seek a private placement of the above-referenced bonds. The maximum aggregate principal amount of the bonds shall not exceed \$250,000. The proposed sale of the bonds is in all respects subject to approval of a bond purchase agreement between the issuer and the purchaser of the bonds and the passage of an ordinance and adoption of a resolution by the governing body of the issuer authorizing the issuance of the bonds and the execution of various documents necessary to deliver the bonds.

Dated June 14, 2010.

Loren Zimmerman City Clerk

Doc. No. 038453

State of Kansas

Wichita State University

Notice to Bidders

Wichita State University encourages interested vendors to visit the Wichita State University Office of Purchasing Web site at wichita.edu/purchasing for a complete listing of all transactions for which Wichita State University, or one of the consortia commonly utilized by WSU, is seeking competitive bids. Paper postings of WSU Office of Purchasing bid transactions may be viewed at the Office of Purchasing, 1845 Fairmount, Room 021 Morrison Hall, Wichita, or persons may contact the Office of Purchasing at (316) 978-3080, by fax at (316) 978-3528, or by e-mail at steven.white@wichita.edu to request a copy of a current bid.

Steve White Director of Purchasing

Doc. No. 037745

State of Kansas

Kansas State University

Notice to Bidders

Kansas State University encourages interested vendors to visit the Kansas State University Controller's Office/Purchasing Web site at http://www.ksu.edu/purchasing/rfq for a complete listing of all transactions for which Kansas State University Purchasing, or one of the consortia commonly utilized by K-State, is seeking competitive bids. Paper postings of Kansas State University Purchasing's bid transactions may be viewed at the Purchasing Office, 21 Anderson Hall, Manhattan, or persons may contact Purchasing at (785) 532-6214, by fax at (785) 532-5577, or by e-mail at cbishop@ksu.edu to request a copy of a current bid.

Carla Bishop Director of Purchasing

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:

06/29/2010 10713 Master IT Services Contract

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

http://www.da.ks.gov/purch/

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. Information regarding prequalification, projects and bid documents can be obtained by calling (785) 296-8899 or by visiting www.da.ks.gov/fp/.

07/6/2010 A-011207 Re-roof Center Section of "A" Building, Rainbow Mental Health Facility, Kansas City, Kansas 07/15/2010 A-011401 Replace ATS (Automatic Transfer Switch), Larned Correctional Mental

Health Facility, Larned

Chris Howe Director of Purchases

Doc. No. 038461

State of Kansas

Department of Health and Environment

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-10-067 Application(s) for New or Expansion of **Existing Swine Facilities**

Owner of Property Where Facility Name and Address of Applicant Will Be Located Steven J. Eichman Rock Creek Finishing Farms, LLC

13075 Brush Creek Road 13075 Brush Creek Road Westmoreland, KS 66549 Westmoreland, KS 66549

Legal Description Receiving Water SE/4 of Section 28, Kansas River Basin T08S, R09E,

Pottawatomie County

Kansas Permit No. A-KSPT-H001 Federal Permit No. KS0091260

This is an application for a permit for modification and reissuance. There will be no change in permitted animal unit or head capacity which remains at 4,980 head (1,992 animal units) of swine weighing more than 55 pounds. The permittee is proposing to construct an enclosed mortality composting barn. A new or modified permit will not be issued without additional public notice.

Public Notice No. KS-AG-10-068/075 **Pending Permits for Confined Feeding Facilities**

Receiving Name and Address Legal of Applicant Description Water Rooks County Feeders LLC W/2 of Section 10, Solomon River 2070 22nd Road T09S, R17W, Rooks Basin

Plainville, KS 67663 County

Kansas Permit No. A-SORO-C001 Federal Permit No. KS0080888

This is a permit modification and reissuance. The capacity of the facility will be unchanged and remain at 8,000 head (8,000 animal units) of beef cattle weighing more than 700 pounds and 12 head (24 animal units) of horses, for a total of 8,012 head (8,024 animal units). The permittee will be closing some pens and runoff storage basins, and constructing replacement pens and larger runoff storage basins. Closure of those areas slated for closure and construction and testing of the replacement facilities shall be completed in accordance with the schedule contained in the permit.

Name and Address Receiving of Applicant Description Water Draper Cattle Company NE/4 of Section 13. Smoky Hill River Chad Draper T11S, R33W, Logan Basin 2815 County Road 400 County Oakley, KS 67748

Kansas Permit No. A-SHLG-B003

This permit is being reissued for an existing facility for 999 head (999 animal units) of cattle weighing more than 700 pounds. Proposed modifications include the construction of a retention structure to replace the current structure.

Receiving Name and Address Legal of Applicant Description Water Knight Feedlot, Inc. E/2 of Section 23, Lower Arkansas Mark Knight T19S, R08W, Rice River Basin 1768 Ave. J County Lyons, KS 67554

Kansas Permit No. A-ARRC-C002 Federal Permit No. KS0116157

This is an expansion permit for an existing facility for 20,000 head (20,000 animal units) of beef cattle weighing more than 700 pounds. The permit contains modifications consisting of a control basin to collect runoff from the feed storage area and an additional 8.2 acres of pens with two new settling basins. The facility is proposing to increase to 22,000 head (22,000 animal units) of beef cattle.

Name and Address Legal Receiving of Applicant Description Water Cheyenne Feeders LLC E/2 of Section 31, Upper Republican T04S, R39W, Joe Fortin River Basin 785 Road 18 Cheyenne County

St. Francis, KS 67756 Kansas Permit No. A-URCN-C001 Federal Permit No. KS0079677

This is a renewal permit for an existing facility for 12,000 head (12,000 animal units) of cattle weighing more than 700 pounds. Approximately 14 acres of open lot pens exist that were not accounted for in the previous permit facility description.

Name and Address
of ApplicantLegal
DescriptionReceiving
WaterSeiler DairyNE/4 of Section 35,
T25S, R02W,
Sedgwick CountyLower Arkansas
River Basin

Valley Center, KS 67147

Kansas Permit No. A-ARSG-M044

This permit is being reissued for an existing facility for 150 head (210 animal units) of mature dairy cows, 45 head (45 animal units) of cattle weighing more than 700 pounds and 80 head (40 animal units) of cattle weighing less than 700 pounds. This represents an increase in the permitted animal units from the previous permit.

Name and Address of Applicant

Vic & Jan McClung
3440 202nd Road
Winfield, KS 67156

Legal
Receiving
Water

Vater

SE/4 of Section 09,
T33S, R03E, Cowley
County

River Basin

Kansas Permit No. A-ARCL-S001

This permit is being reissued for an existing swine facility for a maximum capacity of 1,000 head (400 animal units) of swine weighing more than 55 pounds. This represents a decrease in the permitted animal units from the previous permit.

Name and Address
of ApplicantLegal
DescriptionReceiving
WaterJost FarmNE/4 of Section 12,
T17S, R05E, MorrisNeosho River
Basin2646 AA Ave.County

Burdick, KS 66838

Kansas Permit No. A-NEMR-B007

This permit is being reissued for an existing facility with a maximum capacity of 480 head (480 animal units) of beef cattle more than 700 pounds. There is no change in the permitted animal units from the previous permit.

Name and Address
of Applicant
Description
Dean Mitchell
3617 CR 4500
Liberty, KS 67351
Montgomery
County
Receiving
Water
Variety
Water
Variety
Receiving
Water
Water
Water
Basin

Kansas Permit No. A-VEMG-S021

This permit is being reissued for an inactive facility consisting of 1,800 head (720 animal units) of swine weighing more than 55 pounds. There is no change in the permitted animal units.

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 S.W. Jackson, Suite 420, Topeka, 66612-1367.

All comments regarding the draft documents or application notices received on or before July 24 will be considered in the formulation of the final determinations regarding this public notice. Please refer to the appropriate Kansas document number (KS-AG-10-067/075) 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. 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.kdheks.gov/feedlots. Division of Environment offices are open from 8 a.m. to 5 p.m. Monday through Friday, excluding holidays.

Roderick L. Bremby Secretary of Health and Environment

Doc. No. 038459

State of Kansas

Department of Agriculture

Permanent Administrative Regulations

Article 7.—MILK AND DAIRY PRODUCTS

4-7-213. Adoption by reference. The United States department of agriculture's recommended requirements titled "milk for manufacturing purposes and its production and processing," effective September 1, 2005, are hereby adopted by reference, except for the following: (a) Subpart A;

- (b) subpart B, section B2, paragraphs (a), (b), (c), (d), (e), (f), (h), (i), (k), (m), (r), (s), (t), and (u);
 - (c) subpart D, section D9; and
 - (d) subpart F.

Copies of the pertinent portions of these requirements may be obtained from the Kansas department of agriculture. (Authorized by K.S.A. 2009 Supp. 65-772 and K.S.A. 65-775; implementing K.S.A. 65-773 and 65-775; effective, E-81-24, Aug. 27, 1981; effective May 1, 1981; amended May 1, 1986; amended, T-87-21, Aug. 21, 1986; amended May 1, 1987; amended Jan. 14, 1991; amended Feb. 27, 1998; amended Feb. 11, 2000; amended Dec. 20, 2002; amended Sept. 1, 2006; amended July 9, 2010.)

4-7-716. Adoption by reference. (a) The following documents are hereby adopted by reference:

- (1) Except for sections 1 (JJ), 2, 9, 15, 16, 17, and 18, the "grade 'A' pasteurized milk ordinance," 2009 revision, including appendices, as published by the U.S. department of health and human services, public health service, and food and drug administration;
- (2) the "methods of making sanitation ratings of milk shippers," including appendices, published by the U.S. department of health and human services, public health service, and food and drug administration, 2009 revision;
- (3) the 2009 revision of the "procedures governing the cooperative state-public health service/food and drug ad-

- ministration program of the national conference on interstate milk shipments," including pages 49 through 68;
- (4) the 17th edition of the "standard methods for the examination of dairy products," dated 2004 and published by the American public health association;
- (5) the 17th edition of the "official methods of analysis of AOAC international," volumes I and II, revision 1, including appendices, dated 2002 and published by the association of official analytical chemists; and
- (6) the 2007 revision of the "evaluation of milk laboratories," published by the U.S. department of health and human services, public health service, and food and drug administration.
- (b) Copies of the pertinent portions of the material adopted by reference shall be available from the Kansas department of agriculture. (Authorized by K.S.A. 2009 Supp. 65-772 and K.S.A. 65-775; implementing K.S.A. 65-775; effective May 1, 1980; amended May 1, 1983; amended May 1, 1986; amended Dec. 26, 1988; amended Jan. 14, 1991; amended Oct. 21, 1991; amended July 1, 1992; amended Aug. 22, 1994; amended Dec. 20, 2002; amended Sept. 1, 2006; amended July 9, 2010.)

Joshua Svaty Secretary of Agriculture

Doc. No. 038452

State of Kansas

Department of Health and Environment

Permanent Administrative Regulations

Article 4.—MATERNAL AND CHILD HEALTH

- **28-4-370.** (Authorized by K.S.A. 65-508; implementing K.S.A. 65-501, 65-502, 65-504, 65-508; effective May 1, 1981; revoked July 9, 2010.)
- **28-4-371.** (Authorized by K.S.A. 65-508; implementing K.S.A. 65-501, 65-503, 65-508, K.S.A. 1982 Supp. 65-504, 65-505; effective May 1, 1981; amended, T-83-24, Aug. 25, 1982; amended May 1, 1983; revoked July 9, 2010.)
- **28-4-372.** (Authorized by K.S.A. 65-508; implementing K.S.A. 65-502, 65-504, 65-509, 65-510, 65-511; effective May 1, 1981; revoked July 9, 2010.)
- **28-4-373.** (Authorized by K.S.A. 65-508; implementing K.S.A. 65-501, 65-502, 65-504, 65-507, 65-508; effective May 1, 1981; revoked July 9, 2010.)
- **28-4-374.** (Authorized by K.S.A. 65-508; implementing K.S.A. 65-507, 65-508; effective May 1, 1981; amended May 1, 1985; revoked July 9, 2010.)
- **28-4-375.** (Authorized by K.S.A. 65-508; implementing K.S.A. 65-507, 65-508; effective May 1, 1981; amended May 1, 1985; revoked July 9, 2010.)
- **28-4-376.** (Authorized by K.S.A. 65-508; implementing K.S.A. 65-507, 65-508, 65-510; effective May 1, 1981; amended May 1, 1985; revoked July 9, 2010.)

- **28-4-377.** (Authorized by and implementing K.S.A. 65-508; effective May 1, 1981; amended, T-87-34, Nov. 19, 1986; amended May 1, 1987; revoked July 9, 2010.)
- **28-4-378 and 28-4-379.** (Authorized by and implementing K.S.A. 65-508; effective May 1, 1981; revoked July 9, 2010.)
- **28-4-1300. Definitions.** For the purposes of K.A.R. 28-4-1300 through K.A.R. 28-4-1318, the following terms shall have the meanings specified in this regulation:
- (a) "Apgar scores" means a measure of a newborn's physical condition at one, five, and 10 minutes after birth.
- (b) "Applicant" means a person who has applied for a license but who has not yet been granted a license to operate a birth center. This term shall include an applicant who has been granted a temporary permit to operate a birth center.
- (c) "Birthing room" means a room designed, equipped, and arranged to provide for the care of a patient, a newborn, and the patient's support person or persons during and following childbirth.
- (d) "Certified midwife" means an individual who is educated in the discipline of midwifery and who is currently certified by the American college of nurse-midwives or the American midwifery certification board, inc.
- (e) "Certified nurse-midwife" means an individual who meets the following requirements:
- (1) Is educated in the two disciplines of nursing and midwifery;
- (2) is currently certified by the American college of nurse-midwives or the American midwifery certification board, inc; and
 - (3) has a current nursing license in Kansas.
- (f) "Certified professional midwife" means an individual who is educated in the discipline of midwifery and who is currently certified by the North American registry of midwives.
- (g) "Clinical director" means an individual who is appointed by the licensee and is responsible for the direction and oversight of clinical services at a birth center as specified in K.A.R. 28-4-1305.
- (h) "Clinical staff member" means an individual employed by or serving as a consultant to the birth center who is one of the following:
 - (1) The clinical director or acting clinical director;
 - (2) a licensed physician;
 - (3) a certified nurse-midwife;
 - (4) a certified professional midwife;
 - (5) a certified midwife; or
 - (6) a registered professional nurse.
- (i) "Department" means Kansas department of health and environment.
- (j) "Exception" means a waiver of an applicant's or a licensee's compliance with a specific birth center regulation or any portion of a specific birth center regulation, granted by the secretary to the applicant or licensee.
- (k) "License capacity" means the maximum number of patients that can be cared for in a birth center during labor, delivery, and recovery.
- (l) "Licensee" means a person who has been granted a license to operate a birth center.

- (m) "Maternity center" has the meaning specified in K.S.A. 65-502, and amendments thereto, and may also be referred to as a "birth center."
- (n) "Normal, uncomplicated delivery" means a delivery that results in a vaginal birth and that does not require the use of general, spinal, or epidural anesthesia.
- (o) "Normal, uncomplicated pregnancy" means a pregnancy that is initially determined to be at a low risk for a poor pregnancy outcome and that remains at a low risk throughout the pregnancy.
- (p) "Patient" means a woman who has been accepted for services at a birth center during pregnancy, labor, delivery, and recovery.
- (q) "Poor pregnancy outcome" means any outcome other than a live, healthy patient and newborn.
- (r) "Premises" means the location, including each
- building and any adjoining grounds, of a birth center. (s) "Secretary" means secretary of the Kansas department of health and environment. (Authorized by K.S.A. 65-508 and 65-510; implementing K.S.A. 65-502 and 65-508; effective July 9, 2010.)

28-4-1301. Applicant and licensee requirements. (a) Each applicant, if an individual, shall be at least 21 years of age at the time of application.

- (b) Each applicant and each licensee, if a corporation, shall be in good standing with the Kansas secretary of state. (Authorized by K.S.A. 65-508; implementing K.S.A. 65-504 and 65-508; effective July 9, 2010.)
- **28-4-1302.** Application procedures. (a) Each person, in order to obtain a license, shall submit a complete application on the form provided by the department. The application shall be submitted at least 90 calendar days before the planned opening date of the birth center and shall include all of the following:
- (1) A detailed description of the services to be provided;
- (2) a detailed floor plan and site plan for the premises to be licensed; and
- (3) the nonrefundable license fee specified in K.A.R. 28-
- (b) At the time of the initial inspection, each applicant shall have the following information on file:
- (1) Written verification from the applicable local authorities showing that the premises are in compliance with all local codes and ordinances, including all building, fire, and zoning requirements;
- (2) written verification from the state fire marshal showing that the premises are in compliance with all applicable fire codes and regulations;
- (3) written verification from local or state authorities showing that the private water supply and sewerage systems conform to all state and local laws; and
- (4) documentation of the specific arrangements that have been made for the removal of biomedical waste and human tissue from the premises.
- (c) The granting of a license to any applicant may be refused by the secretary if the applicant is not in compliance with the requirements of the following:
- (1) K.S.A. 65-504 through 65-508, and amendments thereto;
 - (2) K.S.A. 65-512 and 65-513, and amendments thereto;

- (3) K.S.A. 65-531, and amendments thereto; and
- (4) all regulations governing birth centers. (Authorized by K.S.A. 65-508; implementing K.S.A. 65-501, 65-504, 65-505, and 65-508; effective July 9, 2010.)
- 28-4-1303. Terms of a temporary permit or a li**cense.** (a) License capacity. The maximum number of patients authorized by a temporary permit or a license shall not be exceeded.
- (b) Posting temporary permit or license. The current temporary permit or the current license shall be posted conspicuously within the birth center.
- (c) Validity of temporary permit or a license. Each temporary permit or license shall be valid for the applicant or licensee and the address specified on the temporary permit or the license. When an initial or amended license becomes effective, all temporary permits or licenses previously granted to the applicant or licensee at the same address shall become invalid.
- (d) Advertising. The advertising for each birth center shall conform to the statement of services included with the application. A claim for specialized services, even if specified on the application for a birth center, shall not be made unless the birth center is staffed and equipped to offer those services. No general claim of being "stateapproved" shall be made until the applicant has been issued a temporary permit or a license by the secretary.
- (e) Withdrawal of application or request to close. Any applicant may withdraw the application for a license. Any licensee may, at any time, request to close a birth center. If an application is withdrawn or a birth center is closed, each temporary permit or license granted for that birth center shall become invalid. (Authorized by K.S.A. 65-508; implementing K.S.A. 65-504 and 65-508; effective July 9, 2010.)
- **28-4-1304.** Temporary permit or license; amended license; exceptions; notification; renewal. (a) Temporary permit or license required. Each person shall obtain a temporary permit or a license from the secretary to operate a birth center before providing any birth center services
- (b) New temporary permit or license required. Each applicant or licensee shall submit a new application, the required verifications and documentation, and license fee and shall obtain a temporary permit or a license from the secretary under any of the following circumstances:
- (1) Before a birth center that has been closed is reopened;
- (2) if there is a change in the location of the birth center;
 - (3) if there is a change of ownership of the birth center.
 - (c) Amended license.
- (1) Any licensee may submit a request for an amended license. Each licensee who intends to change the terms of the license, including the maximum number of patients to be served, shall submit a request for an amended license on a form provided by the department and a nonrefundable amendment fee of \$35. An amendment fee shall not be required if the request to change the terms of the license is made at the time of the renewal.

- (2) The licensee shall make no change to the terms of the license unless permission is granted, in writing, by the secretary. If granted, the licensee shall post the amended license, and the previous license shall no longer be in effect.
 - (d) Exceptions.
- (1) Any applicant or licensee may request an exception from the secretary. Any request for an exception may be granted if the secretary determines that the exception is in the best interest of one or more patients or newborns and the exception does not violate statutory requirements.
- (2) Written notice from the secretary stating the nature of the exception and the duration of the exception shall be kept on file at the birth center and shall be readily accessible to the department.
- (e) Notification. Each applicant and each licensee shall notify the secretary, in writing, before changing any of the following:
- (1) The clinical services or activities offered by the birth center;
- (2) the physical structure of the birth center due to new construction or substantial remodeling; or
- (3) the use of any part of the premises that affects the use of the space or affects the license capacity.
- (f) Renewal. No earlier than 90 days before but no later than the renewal date, each licensee wishing to renew the license shall submit the following:
- (1) The nonrefundable license fee specified in K.A.R. 28-4-92; and
- (2) an application to renew the license on the form provided by the department.
- (g) Late renewal. Failure to submit the renewal application and fee as required by subsection (f) shall result in an assessment of a late renewal fee specified in K.S.A. 65-505, and amendments thereto, and may result in closure of the birth center.
- (h) Copy of current regulations. A copy of the current Kansas administrative regulations governing birth centers shall be kept on the premises and shall be available to all employees. (Authorized by K.S.A. 65-508; implementing K.S.A. 65-504, 65-505, and 65-508; effective July 9, 2010.)
- **28-4-1305. Administration.** (a) Each licensee shall be responsible for the operation of the birth center, including the following:
- (1) Establishing and maintaining a written organizational plan, including an organizational chart designating the lines of authority;
- (2) providing employees, facilities, equipment, supplies, and services to patients, newborns, and families;
- (3) developing and implementing administrative policies and procedures for the operation of the birth center;
- (4) developing and implementing policies and procedures for quality assurance;
- (5) appointing an administrator to oversee the operation of the birth center;
 - (6) appointing a clinical director and hiring employees;
- (7) appointing an acting clinical director to provide direction and oversight of clinical services in the absence of the clinical director; and

- (8) documenting all of the information specified in this subsection.
- (b) Each licensee shall ensure that all birth center contracts, agreements, policies, and procedures are reviewed annually and updated as needed.
- (c) Each licensee shall ensure the development and implementation of written policies that set out the necessary qualifications for each position and govern employee selection. A job description for each position shall be available at the birth center.
- (d) Each licensee shall ensure that all employees are informed of and follow all written policies, procedures, and clinical protocols necessary to carry out their job duties.
- (e) Each administrator shall oversee the daily operation and maintenance of the birth center and implement the policies and procedures in compliance with licensing requirements for birth centers.
- (f) Each clinical director shall provide direction and oversight of clinical services, including the development and implementation of policies, procedures, and signed protocols regarding all matters related to the medical management of pregnancy, birth, postpartum care, newborn care, and gynecologic health care.
- (g) Each licensee shall develop and implement written policies and procedures regarding a patient's options for the disposition or taking of fetal remains if a fetal death occurs. (Authorized by K.S.A. 65-508; implementing K.S.A. 65-508 and K.S.A. 2009 Supp. 65-67a10; effective July 9, 2010.)
- **28-4-1306.** Clinical staff member qualifications; employee schedules; training. (a) Clinical staff member qualifications. Each licensee shall ensure that the following requirements for the clinical staff members are met:
- (1) The clinical director and the acting clinical director shall be one of the following:
- (A) A physician with a current license to practice in Kansas; or
 - (B) a certified nurse-midwife.
- (2) Each clinical staff member attending labor and delivery shall meet the following qualifications:
- (A) Practice within the scope of the clinical staff member's training and experience; and
- (B) hold, at a minimum, current certification in adult CPR equivalent to American heart association class C basic life support and current certification in neonatal CPR equivalent to that of the American academy of pediatrics or the American heart association.
 - (b) Employee schedules.
- (1) Each licensee shall ensure that there are sufficient qualified employees on duty and on call for the safe maintenance and operation of the birth center and for the provision of clinical services.
- (2) Each licensee shall ensure that a written work schedule is readily accessible to all employees.
 - (c) Training
- (1) Each licensee shall develop and provide an orientation for all new employees and ongoing in-service training for all employees that shall meet the following requirements:
- (A) Is based on individual job duties and responsibilities;

- (B) is designed to meet individual employee training needs; and
- (C) is designed to maintain the knowledge and skills necessary to ensure compliance with policies, procedures, and clinical protocols of the birth center.
- (2) Orientation and in-service training shall include the following:
 - (A) Emergency clinical procedures;
- (B) recognition of the signs and symptoms of infectious diseases, infection control, and universal precautions;
- (C) recognition of signs and symptoms of domestic violence; and
- (D) recognition of the signs and symptoms and the reporting of child abuse and neglect.
- (3) The documentation of the orientation and the inservice training shall be maintained in each employee's individual record. (Authorized by and implementing K.S.A. 65-508; effective July 9, 2010.)
- **28-4-1307.** Records. (a) Policies and procedures. Each licensee shall ensure that there is an organized recordkeeping system, with policies and procedures that provide for identification, security, confidentiality, control, retrieval, and preservation of all employee records, patient records, and birth center information. All records shall be available at the birth center for review by the secretary.
- (b) Employee records. Each licensee shall ensure that an individual record is maintained at the birth center for each employee that includes the following information:
- (1) A description of the terms of employment or the volunteer agreement and a copy of the job description;
- (2) a copy of the job application detailing the employee's qualifications and employment dates;
- (3) copies of current professional licenses, certifications, or registrations;
- (4) documentation of the results of any health assessments and tuberculin tests specified in K.A.R. 28-4-1312;
- (5) documentation of the orientation and the in-service training specified in K.A.R. 28-4-1306; and
- (6) documentation that each employee has access to the following:
- (A) The current regulations governing birth centers;
- (B) the birth center policies, procedures, and clinical protocols.
 - (c) Patient records.
- (1) Each licensee shall ensure that a current and complete clinical record for each patient accepted for care in the birth center includes the following:
- (A) Identifying information, including the patient's name, address, and telephone number;
- (B) documentation of the initial history and physical examination, including laboratory findings and dates;
 - (C) a signed and dated informed consent form;
- (D) all obstetrical risk assessments, including the dates of the assessments;
- (E) documentation of instruction and education related to the childbearing process;
 - (F) the date and time of the onset of labor;
- (G) the course of labor, including all pertinent examinations and findings;

- (H) the exact date and time of birth, the presenting part of the newborn's body, the sex of the newborn, the numerical order of birth in the event of more than one newborn, and the Apgar scores;
- (I) the time of expulsion and the condition of the placenta;
- (J) all treatments rendered to the patient and newborn, including prescribing medications and the time, type, and dose of eye prophylaxis;
- (K) documentation of metabolic and any other screening tests completed by a clinical staff member;
- (L) the condition of the patient and newborn, including any complications and action taken at the birth center;
- (M) all medical consultations concerning the patient and the newborn;
- (N) all referrals for medical care and transfers to medical care facilities, including the reasons for each referral
- (O) the results of all examinations of the newborn and of the postpartum patient; and
- (P) the written instructions given to the patient regarding postpartum care, family planning, care of the newborn, arrangements for metabolic testing, immunizations, and follow-up pediatric care.
- (2) Each entry in each patient's record shall be dated and signed by the attending clinical staff member.
- (3) The patient record shall be confidential and shall not be released without the written consent of the patient. Nothing in this regulation shall preclude the review of patient records by the secretary.
- (4) All patient records shall be retained for at least 25 years from the date of discharge.
- (d) Quality assurance documentation. Each licensee shall maintain on file for at least three calendar years all documentation required for the quality assurance findings specified in K.A.R. 28-4-1309.
- (e) Inventory. Each licensee shall maintain on file an inventory of the birth center furnishings, equipment, and
- (f) Drills. Each licensee shall maintain on file for at least one calendar year a record of all disaster and evacuation drills.
- (g) Changes. Each applicant and each licensee shall maintain on file at the birth center the documentation of any changes specified in K.A.R. 28-4-1304 and approved by the secretary. (Authorized by K.S.A. 65-508; implementing K.S.A. 65-507 and 65-508; effective July 9, 2010.)
- **28-4-1308.** Reporting requirements. (a) Each licensee shall ensure that the following incidents are reported to the department by the next working day, on a form provided by the department, and to any other authorities in accordance with state statute:
 - (1) A stillbirth or the death of a patient or a newborn;
 - (2) the death of an employee while on duty;
- (3) any intentional or unintentional injuries sustained by any patient, newborn, or employee while on duty;
- (4) any fire damage or other damage to the premises that affects the safety of any patient, newborn, or em-
- (5) any other incident that, in the judgment of the clinical director or the acting clinical director, compromises

the ability of the birth center to provide appropriate and safe care to patients and newborns.

- (b) If a licensee, employee, patient, or newborn contracts a reportable infectious or contagious disease specified in K.A.R. 28-1-2, the licensee shall ensure that the disease is reported to the county health department as specified in K.A.R. 28-1-2. (Authorized by and implementing K.S.A. 65-508; effective July 9, 2010.)
- **28-4-1309. Quality assurance.** (a) Each licensee shall develop and implement a quality assurance program to evaluate, at least annually, the quality of patient care and the appropriateness of clinical services.
- (b) The quality assurance program shall include a system for the assessment of patient and newborn outcomes, clinical protocols, recordkeeping, and infection control.
- (c) The quality assurance findings shall be documented and used for the ongoing assessment of clinical services, problem resolution, and plans for service improvement.
- (d) All quality assurance findings shall be available at the birth center for review by the secretary. Nothing in this regulation shall preclude the review of patient records by the secretary. (Authorized by K.S.A. 65-508; implementing K.S.A. 65-507, 65-508, and 65-512; effective July 9, 2010.)
- **28-4-1310.** Clinical services and patient care. (a) Each licensee shall ensure that the clinical services provided at the birth center are limited to those services associated with a normal, uncomplicated pregnancy and a normal, uncomplicated delivery.
- (b) Each licensee shall ensure that only the clinical services approved by the clinical director are performed at the birth center.
- (c) Each clinical staff member providing services shall work under the direction of and in consultation with the clinical director or the acting clinical director.
- (d) Each clinical staff member shall have access to patient diagnostic facilities and services, including a clinical laboratory, sonography, radiology, and electronic monitoring.
- (e) Each licensee shall make available to each patient, in writing, information concerning the following:
 - (1) The clinical services provided by the birth center;
- (2) the rights and responsibilities of the patient and the patient's family, including confidentiality, privacy, and consent:
- (3) information on the qualifications of the clinical staff members;
- (4) the risks and benefits of childbirth at the birth center;
- (5) the possibility of patient or newborn transfer if complications arise during pregnancy, labor, or delivery and the procedures for transfer; and
- (6) if a fetal death occurs, the patient's options for the taking or disposition of the fetal remains.
- (f) Each licensee shall limit patients to those women who are initially determined to be at low maternity risk by a clinical staff member and who are evaluated regularly throughout the pregnancy to ensure that each patient continues to be at low risk for a poor pregnancy outcome. Each clinical director shall establish a written

- maternity risk assessment, including screening criteria, which shall be a part of the approved policies.
- (g) When conducting the maternity risk assessment, each clinical staff member shall assess the health status and maternity risk factors of each patient after obtaining a detailed medical history, performing a physical examination, and taking into account family circumstances and psychological factors.
- (h) The screening criteria of the maternity risk assessment shall be used as a baseline on which the risk status of each potential patient or patient is determined. The screening criteria shall apply to each potential patient before acceptance for birth center services and throughout the pregnancy for continuation of services. The screening criteria shall include the specific qualifications of the clinical staff members and the availability of supplies and equipment needed to provide clinical services safely.
- (i) The factors to be considered in the development of the maternity risk assessment shall include the following:
- (1) Age of the patient as a possible factor in determining the potential additional risk of poor pregnancy outcome;
- (2) major medical problems including any of the following:
- (A) Chronic hypertension, heart disease, or pulmonary embolus;
- (B) any congenital heart defect assessed as pathological by a cardiologist that places the patient or fetus at risk;
 - (C) a renal disease;
- (D) a drug addiction or required use of anticonvulsant drugs;
 - (E) diabetes mellitus;
 - (F) thyroid disease; or
 - (G) a bleeding disorder or hemolytic disease;
- (3) previous history of significant obstetrical complications, including any of the following:
 - (A) RH sensitization;
- (B) a previous uterine wall surgery, including caesarean section;
 - (C) seven or more term pregnancies;
 - (D) a previous placental abruption; or
 - (E) a previous preterm birth; and
 - (4) medical indication of any of the following:
 - (A) Pregnancy-induced hypertension;
 - (B) polyhydramnios or oligohydramnios;
 - (C) a placental abruption;
 - (D) chorioamnionitis;
 - (E) a known fetal anomaly;
 - (F) multiple gestations;
 - (G) an intrauterine growth restriction;
 - (H) fetal distress;
 - (I) alcoholism or drug addiction;
 - (J) thrombophlebitis; or
 - (K) pyelonephritis.
- (j) Each patient found to be at high obstetrical risk based on the maternity risk assessment shall be referred to a qualified physician.
- (k) Each licensee shall ensure that the policies and procedures include a program of education that prepares patients and their families for childbirth, including the following:
 - (1) Anticipated changes during pregnancy;
 - (2) the need for prenatal care;

- (3) nutritional requirements during pregnancy;
- (4) the effects of smoking, alcohol, and substance use;
- (5) the signs of preterm labor;
- (6) preparation for labor and delivery, including pain management and obstetrical complications and procedures;
 - (7) breast-feeding and care of the newborn;
- (8) signs of depression during pregnancy and after childbirth and instructions for treatment;
- (9) instruction on understanding the patient and newborn health record information;
 - (10) sibling preparation; and
- (11) preparation needed for discharge of the patient and the newborn following delivery.
- (l) Each licensee shall ensure that the policies, procedures, and clinical protocols are followed for each patient during labor, delivery, and postpartum care.
- (m) Each patient shall be admitted for labor and delivery by a physician, a certified nurse-midwife, a certified professional midwife, or a certified midwife.
- (n) At least one clinical staff member shall be available for each patient in labor.
- (o) At least two employees shall be available for each patient during delivery. One shall be a clinical staff member. The other shall be another clinical staff member or a licensed practical nurse (LPN) practicing within the scope of the LPN's training and experience and working under the direct supervision of a licensed physician, a certified nurse-midwife, or a registered professional nurse.
- (p) A clinical staff member shall monitor the progress of the labor and the condition of each patient and fetus as clinically indicated to identify abnormalities or complications at the earliest possible time.
- (q) The patient or newborn shall be transferred to a medical care facility if a clinical staff member determines that medical or surgical intervention is needed.
- (r) The patient's family or support persons shall be instructed as needed to assist the patient during labor and delivery.
- (s) The surgical procedures performed at the birth center shall be limited to the following:
 - (1) Episiotomy;
 - (2) repair of episiotomy or laceration; and
 - (3) circumcision.
- (t) Each clinical director shall develop and implement policies and procedures for the discharge of postpartum patients and their newborns, which shall be followed by all clinical staff members.
- (1) An individual, written discharge plan shall be developed for each patient and newborn, including follow-up visits and needed referrals. Each patient shall receive a copy of the plan at the time of discharge.
- (2) Each patient and each newborn shall be discharged no later than 24 hours after birth and in accordance with policies, procedures, and clinical protocols.
- (3) Each birth or death certificate shall be completed and filed as required by state law.
- (4) A follow-up visit shall be conducted by a designated clinical staff member between 24 hours and 72 hours after discharge of the patient to perform the following:
 - (A) A health assessment of the patient;
 - (B) a health assessment of the newborn; and

- (C) the required newborn screening tests.
- (5) The policies and procedures shall include a program of postpartum education and care, including the following:
 - (A) Newborn care;
 - (B) postpartum examinations;
 - (C) family planning; and
- (D) a plan for well-woman routine gynecologic health care. (Authorized by K.S.A. 65-508; implementing K.S.A. 65-507, K.S.A. 65-508, and K.S.A. 2009 Supp. 65-67a10; effective July 9, 2010.)
- **28-4-1311.** Transfers. (a) Each licensee shall develop and implement policies, procedures, and clinical protocols for the transfer of patients and newborns. Each licensee shall ensure that these policies, procedures, and clinical protocols are readily accessible and followed.
- (b) The policies, procedures, and clinical protocols shall include a written plan on file designating who will be responsible for the transfer of a patient or newborn. The plan shall include the following:
- (1)(A) A written agreement with an obstetrician and a pediatrician or with a group of practitioners that includes at least one obstetrician and at least one pediatrician; or
- (B) a written agreement with a medical care facility providing obstetrical and neonatal services; and
- (2) a plan for transporting a patient or a newborn by an emergency medical services (EMS) entity.
- (c) Each licensee shall ensure that all employees attending labor and delivery have immediate access to a working telephone or another communication device and to contact information for transferring a patient or a newborn in case of an emergency. (Authorized by and implementing K.S.A. 65-508; effective July 9, 2010.)
- **28-4-1312.** Health-related requirements. (a) To-bacco use prohibited. Each licensee shall ensure that to-bacco products are not used at any time in the birth center.
- (b) Health of licensee and employees working in the birth center.
- (1) Each licensee, if an individual, and each individual working at the birth center shall meet the following requirements:
- (A) Be free from physical, mental, and emotional conditions to the extent necessary to protect the health, safety, and welfare of the patients and newborns;
- (B) be free from the influence of alcohol or illegal substances, or impairment due to the use of prescription or nonprescription drugs; and
- (C) be free from all infectious or contagious diseases, as specified in K.A.R. 28-1-6.
- (2) Each licensee, if an individual, and each individual working in the birth center shall have a health assessment conducted within six months before employment or upon employment. Subsequent health assessments shall be given periodically in accordance with the policies of the birth center.
- (3) The results of each health assessment shall be recorded on forms provided by the department, and a copy shall be kept in each licensee's or employee's record at the birth center.

- (4) If an individual who works in the birth center experiences a significant change in physical, mental, or emotional health, including any indication of substance abuse, an assessment of the individual's current health status may be required by the secretary or the licensee. A licensed health care provider qualified to diagnose and treat the condition shall conduct the health assessment. A written report of the assessment shall be kept in the individual's employee record and shall be submitted to the secretary on request.
- (c) Tuberculin testing of licensee and employees working in the birth center.
- (1) Each licensee, if an individual, and each individual working in the birth center shall have a record of a tuberculin test or chest X-ray obtained not more than six months before employment or upon employment. The results of the tuberculin test or chest X-ray shall be recorded on the health assessment form.
- (2) Additional tuberculin testing shall be required if any individual working in the birth center is exposed to an active case of tuberculosis or if the birth center serves an area identified by the local health department or the secretary as a high-risk area for tuberculosis exposure.
- (d) Hepatitis B. Each licensee, if an individual, and each individual working in the birth center whose job duties include exposure to or the handling of blood shall be immunized against hepatitis B or shall provide written documentation of refusal of the immunization. (Authorized by and implementing K.S.A. 65-508; effective July 9, 2010.)

28-4-1313. Environmental standards. (a) Premises.

- (1) Each licensee shall ensure that the birth center is connected to public water and sewerage systems where available.
- (2) If a center uses a nonpublic source for the water supply, the water shall be safe for drinking and shall be tested annually by a department-certified laboratory. If a well is used, the well shall be approved by an agent of the local environmental protection program (LEPP).
- (A) A copy of the test results and the approval shall be kept on file at the birth center.
- (B) Each private sewerage system shall be maintained in compliance with all applicable state and local laws.
- (3) Outdoor areas on the premises shall be well drained and kept free of hazards, litter, and trash.
 - (b) General building requirements.
- (1) Each licensee shall ensure that the birth center is located in a building that meets the following criteria:
- (A) Meets the requirements specified in K.S.A. 65-508 and amendments thereto, all applicable building codes, and local ordinances;
 - (B) is a permanent structure; and
 - (C) is free from known environmental hazards.
- (2) Each birth center shall be accessible to and usable by individuals with disabilities.
- (c) Structural requirements. Each licensee shall ensure that the following requirements are met:
- (1) Space shall be provided for the services to be offered, including the following:
 - (A) A secure space for the storage of medical records;
 - (B) waiting or reception area;

- (C) family area, including play space for children;
- (D) designated toilet and lavatory facilities for employees, families of patients, or the public separate from designated toilet, lavatory, and bathing facilities for each patient:
 - (E) a birthing room or rooms;
 - (F) employee area;
 - (G) utility and work room;
 - (H) a designated storage area;
 - (I) space for the provision of laboratory services; and
 - (J) space for food preparation and storage.
- (2) The birth center shall be heated, cooled, and ventilated for the comfort of the patients and newborns and shall be designed to maintain a minimum temperature of 68 degrees Fahrenheit and a maximum temperature of 90 degrees Fahrenheit. If natural ventilation is used, all opened windows or doors shall be screened. If mechanical ventilation or cooling systems are employed, the system shall be maintained in working order and kept clean. Intake air ducts shall be designed and installed so that dust and filters can be readily removed.
- (3) Each interior door that can be locked shall be designed to permit the door to be opened from each side in case of an emergency.
- (4) All floors shall be smooth and free from cracks, easily cleanable, and not slippery. All floor coverings shall be kept clean and maintained in good repair.
- (5) All walls shall be smooth, easily cleanable, and sound. Lead-free paint shall be used on all painted surfaces.
- (6) All areas of the birth center shall have light fixtures capable of providing at least 20 foot-candles of illumination. Additional illumination shall be available to permit observation of the patient and the newborn, cleaning, and maintenance. The light fixtures shall be maintained in working order and kept clean.
- (7) Each birthing room shall have emergency lighting for use during a power outage.
- (8) Each birth center shall be equipped with a scrub sink equipped with an elbow, knee, or foot control.
- (9) Each birthing room shall be located on the ground level and shall provide unimpeded, rapid access to an exit of the building that will accommodate patients, newborns, emergency personnel, emergency transportation vehicles, and equipment.
- (10) Each birthing room shall meet the following requirements:
 - (A) Have at least 180 square feet of floor space; and
- (B) provide enough space for the equipment, employees, supplies, and emergency procedures necessary for the physical and emotional care of the patient and the newborn. (Authorized by and implementing K.S.A. 65-508; effective July 9, 2010.)
- **28-4-1314.** Birth center and birthing room furnishings, equipment, and supplies. (a) Each licensee shall provide furnishings, equipment, and other supplies in the quantity necessary to meet the needs of patients, newborns, and employees and to provide a safe, homelike environment.
- (b) Each licensee shall provide the specialized furnishings, equipment, and supplies necessary for the clinical

staff members to perform the clinical services offered by the birth center. No specialized clinical services shall be provided unless the birth center is equipped to allow the clinical staff members to safely perform those services.

- (c) All furnishings, equipment, and supplies shall be kept clean and free from safety hazards.
- (d) The furnishings shall include, at a minimum, the following:
 - (1) A bed or table for delivery;
 - (2) at least one chair; and
 - (3) a wall clock with a second hand.
- (e) The equipment and supplies shall include, at a minimum, the following:
 - (1) An examination light;
 - (2) a sphygmomanometer;
 - (3) a stethoscope;
 - (4) a doppler unit or fetoscope;
 - (5) a clinical thermometer;
 - (6) disposable nonporous gloves in assorted sizes;
 - (7) an infant scale;
- (8) a mechanical suction device or a bulb suction device;
- (9) a tank of oxygen with a flowmeter and a mask, a cannula, or an equivalent;
- (10) all necessary emergency medications and intravenous fluids with supplies and equipment for administration:
- (11) resuscitation equipment for patients and newborns, which shall include resuscitation bags and oral airways;
- (12) a laryngoscope and a supply of endotracheal tubes of assorted sizes appropriate for a newborn;
 - (13) a firm surface suitable for resuscitation;
- (14) sterilized instruments for delivery, episiotomy, and repair of an episiotomy or a laceration;
 - (15) an infant warmer that provides radiant heat;
- (16) a readily accessible emergency cart or tray for the patient and for the newborn that meets the following requirements:
- (A) Is equipped for the clinical staff members to carry out the written emergency procedures of the birth center;
 - (B) is securely placed; and
 - (C) has a written log of routine maintenance;
 - (17) clean bed linens and towels; and
 - (18) emergency lighting.
- (f) All equipment, furnishings, and supplies shall be used as intended and shall be securely stored when not in use to prevent injury or misuse. (Authorized by and implementing K.S.A. 65-508; effective July 9, 2010.)
- **28-4-1315. Maintenance.** (a) Each licensee shall ensure that the building is kept clean at all times and free from accumulated dirt and from vermin infestation.
- (b) Each licensee shall develop and implement a maintenance plan to ensure that all of the following conditions are met:
- (1) A schedule for cleaning the birth center is established.
- (2) All floors and walking surfaces are kept free of hazards, maintained in good repair, and kept clean at all times.

- (3) Housekeeping services are provided to maintain a sanitary environment.
- (4) Each birthing room, including equipment, is cleaned after each delivery and before reuse.
- (5) The toilets, lavatories, sinks, and other facilities are clean at all times.
- (6) The mops and other cleaning tools are cleaned after each use and stored in a well-ventilated place on racks.
- (7) All pesticides and other poisons are used in accordance with product instructions and stored in a locked area
- (8) Safe storage for cleaning and laundry supplies is provided.
- (9) Each indoor trash container is emptied, as needed, to control odor and to prevent the overflowing of contents.
- (10) The methods used to dispose of trash, including biomedical waste, human tissue, and sharp instruments, are safe and sanitary.
- (11) Hot and cold running water is supplied to each sink and all bathing facilities.
- (12) The hot water temperature does not exceed 120 degrees Fahrenheit.
- (13) Toilet paper, soap, and either paper towels or hand dryers are available in each restroom and each bathroom in the birth center. (Authorized by and implementing K.S.A. 65-508; effective July 9, 2010.)
- **28-4-1316. Safety.** (a) Each licensee shall ensure the safety of all patients, newborns, employees, and visitors according to the following requirements:
- (1) Each birth center shall have a working telephone on the premises and available for use at all times. Emergency telephone numbers shall be posted by each telephone or shall be readily accessible. These telephone numbers shall include telephone numbers for the fire department, hospital, ambulance, and police.
- (2) Each exit shall be marked. No exit shall be blocked at any time.
- (3) All drugs, chemicals, and medications shall be kept in locked storage and secured in specifically designated and labeled cabinets, drawers, closets, storerooms, or refrigerators and shall be made accessible only to authorized employees.
- (b) Each licensee shall ensure the development and implementation of a disaster plan to provide for the evacuation and safety of patients, newborns, employees, and visitors in case of fire, tornadoes, storms, floods, power outages, and other types of emergencies specific to the geographic area in which the birth center is located.
- (1) The disaster plan shall be posted in a conspicuous place in each indoor room.
- (2) Each employee shall be informed of and shall follow the disaster plan.
- (3) A review of the disaster plan, including fire and tornado drills, shall be conducted with the employees at least once every six months, and the date of each review shall be recorded.
- (4) Fire and tornado drills shall be conducted with the employees at least quarterly, and the date of each drill shall be recorded.

- (c) Heating appliances, when used, shall be used as intended, safely located, equipped with a protective barrier as needed to prevent injury, and maintained in operating condition. If combustible fuel is used, the appliance shall be vented to the outside.
- (d) Each licensee shall develop and implement policies and procedures regarding the storage and handling of firearms and other weapons on the premises.
- (e) Pets and any other animals shall be prohibited in the birth center, with the exception of service animals. (Authorized by and implementing K.S.A. 65-508; effective July 9, 2010.)
- **28-4-1317.** Food service. (a) Each licensee shall ensure that the birth center has arrangements to provide patients with nutritious liquids and foods. Foods may be provided by means of any of the following:
- (1) Obtained from a food service establishment or a catering service licensed by the secretary of the Kansas department of agriculture;
 - (2) prepared on-site by employees; or
- (3) provided by any patient's family for the sole use of that patient and the patient's family.
- (b) All food that is designed to be served hot and is prepared on-site by employees shall be heated, maintained, and served at a temperature of at least 140 degrees Fahrenheit. A tip-sensitive thermometer shall be used to determine whether food is cooked and held at the proper temperature.
- (c) Each licensee shall ensure that the food is handled and stored in a sanitary manner, which shall include meeting all of the following requirements:
- (1) All perishable foods and liquids shall be continuously maintained at 41 degrees Fahrenheit or lower in the refrigerator or 0 degrees Fahrenheit or lower in a freezer. A clearly visible, accurate thermometer shall be provided in each refrigerator and in each freezer.
- (2) At least one refrigerator shall be designated for only food storage.
- (3) All food stored in the refrigerator shall be covered, wrapped, or otherwise protected from cross-contamination. Raw meat shall be stored in the refrigerator in a manner that prevents meat fluids from dripping on other foods. Unused, leftover perishable foods shall be dated,

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refrigerated immediately after service, and eaten within three days.

- (4) Surfaces used for food preparation or eating shall be made of smooth, nonporous material.
- (5) All table service designed for repeat use shall be made of smooth, durable, and nonabsorbent material and shall be free from cracks or chips.
- (6) All nondisposable table service shall be sanitized using either a manual method or a mechanical dish-
- (A) If using a manual washing method, each licensee shall meet both of the following requirements:
- (i) A three-compartment sink with hot and cold running water to each compartment and a drainboard shall be used for washing, rinsing, sanitizing, and air-drying.
- (ii) An appropriate chemical test kit, a thermometer, or another device shall be used for testing the sanitizing solution and the water temperature.
- (B) If using a mechanical dishwashing machine, each licensee shall ensure that the machine is installed and operated in accordance with the manufacturer's instructions and shall be maintained in good repair.
- (d) Prepackaged, disposable formula units shall be used when newborns are not breast-fed. (Authorized by and implementing K.S.A. 65-508; effective July 9, 2010.)

28-4-1318. Laundry. Each licensee shall ensure that all of the following requirements are met:

- (a) If laundry is done at the birth center, the laundry sinks, appliances, and countertops or tables used for laundry shall be located in an area separate from food preparation areas and shall be installed and used in a manner that safeguards the health and safety of the patients, newborns, employees, and visitors.
- (b) Space shall be provided and areas shall be designated for the separation of clean and soiled clothing, linen, and towels.
- (c) If laundry facilities are not available at the birth center, all laundry shall be cleaned by a commercial laundry. (Authorized by and implementing K.S.A. 65-508; effective July 9, 2010.)

Amended

Revoked

3-4-4

4-10-2d

Roderick L. Bremby Secretary of Health and Environment

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48-4-2 AGENO Reg. No. 49-45-1 49-45-2 49-45-3 49-45-4 49-45-5 49-45-6 49-45-7 49-45-8 49-45-20 49-45-20 49-45-29 49-45-31 49-45-31 49-45-35 49-45-37 49-55-1 through 49-55-12 AGENC D Reg. No. 50-2-21a AGENC DIVISIO	Amended CY 49: DEPARTI Action Amended New Amended Amended Amended New Amended	V. 29, p. 18 MENT OF LABOR Register V. 27, p. 1466 V. 27, p. 1467 V. 29, p. 675, 676 MENT OF LABOR— IPLOYMENT Register V. 29, p. 701 MENT OF LABOR— S COMPENSATION	66-8-3 66-8-4 66-8-7 66-9-4 66-10-1 66-10-9 66-10-14 66-11-1a 66-11-1a 66-11-15 66-12-1 66-14-1 66-14-2 66-14-3 66-14-7 66-14-10 AGENO THE 1 Reg. No. 67-3-5 AGEN Reg. No. 68-1-1b 68-1-1b 68-1-3a	Amended Action Action Amended New Amended	V. 28, p. 1537 V. 28, p. 1537 V. 29, p. 794 V. 28, p. 1538 V. 29, p. 794 V. 28, p. 1538 V. 29, p. 794 V. 28, p. 1538 V. 28, p. 1538 V. 28, p. 1539 V. 28, p. 45 V. 29, p. 794 DISPENSING OF TRUMENTS Register V. 29, p. 465 V. 29, p. 465 V. 29, p. 465 V. 29, p. 1491 V. 28, p. 1491 V. 28, p. 1491 V. 28, p. 1491 V. 28, p. 147	74-7-4 74-11-6 AGEN BANK CC MOF Reg. No. 75-6-1 75-6-9 75-6-31 75-6-34 75-6-36 75-6-37 75-6-38 A SE Reg. No. 81-3-2 81-3-6 81-5-7 81-5-14 81-7-2 81-14-1 81-14-2 81-14-5 81-14-9 AGEN Reg. No. 82-3-107	Amended Amended Amended NCY 75: OFFICE O MMISSIONER— RTGAGE LENDIN Action Amended Amended Revoked Revoked New New New New Action Amended	V. 28, p. 648 V. 28, p. 648 V. 28, p. 648 V. 28, p. 648 DF THE STATE -CONSUMER AND NG DIVISION Register V. 28, p. 1367 V. 28, p. 1367 V. 28, p. 1368 V. 27, p. 1360 V. 27, p. 1801 V. 28, p. 606 V. 27, p. 1156 V. 27, p. 1156 V. 27, p. 1156 V. 27, p. 1156 V. 27, p. 1163 ORPORATION ION Register V. 27, p. 1518
48-4-2 AGENO Reg. No. 49-45-1 49-45-2 49-45-3 49-45-4 49-45-5 49-45-6 49-45-7 49-45-9 49-45-20 49-45-20 49-45-21 49-45-31 49-45-31 49-45-35 49-45-37 49-55-12 AGENC D Reg. No. 50-2-21a AGENC DIVISION Reg. No. 51-9-7	Amended CY 49: DEPARTI Action Amended New Amended Amended Amended Amended To be well a to be	V. 29, p. 18 MENT OF LABOR Register V. 27, p. 1466 V. 27, p. 1467 V. 29, p. 675, 676 MENT OF LABOR— IPLOYMENT Register V. 29, p. 701 MENT OF LABOR— S COMPENSATION Register V. 28, p. 1536	66-8-3 66-8-4 66-8-6 66-8-7 66-9-4 66-10-1 66-10-9 66-10-14 66-11-1a 66-11-1a 66-11-1-1 66-11-1-1 66-11-1 66-12-1 66-14-1 66-14-2 66-14-3 66-14-4 66-14-5 66-14-7 66-14-10 Reg. No. 67-3-5 AGEN Reg. No. 68-1-1b 68-1-1h 68-1-3a 68-2-20 68-2-22	Amended Action Action Amended New Amended Amended Amended Amended Amended Amended	V. 28, p. 1537 V. 28, p. 1537 V. 29, p. 794 V. 28, p. 1538 V. 29, p. 794 V. 28, p. 1538 V. 29, p. 794 V. 28, p. 1538 V. 28, p. 1538 V. 28, p. 1539 V. 28, p. 45 V. 29, p. 794 DISPENSING OF FRUMENTS Register V. 28, p. 1187 OF PHARMACY Register V. 29, p. 465 V. 29, p. 1491 V. 28, p. 1491 V. 28, p. 1491 V. 28, p. 1491 V. 28, p. 1765 V. 28, p. 1491	74-7-4 74-11-6 AGEN BANK CC MOF Reg. No. 75-6-1 75-6-9 75-6-31 75-6-34 75-6-37 75-6-38 A SE Reg. No. 81-3-2 81-3-6 81-5-7 81-5-14 81-7-2 81-14-1 81-14-2 81-14-5 81-14-9 AGEN Reg. No. 82-3-107 82-3-108 82-3-111	Amended Amended NCY 75: OFFICE O MMISSIONER— RTGAGE LENDIN Action Amended Amended Revoked Revoked New New New New CENCY 81: OFFICE CURITIES COMM Amended	V. 28, p. 648 V. 28, p. 648 V. 28, p. 648 V. 28, p. 648 DF THE STATE -CONSUMER AND NG DIVISION Register V. 28, p. 1367 V. 28, p. 1367 V. 28, p. 1368 V. 27, p. 1368 U. 27, p. 156 V. 27, p. 156 V. 28, p. 571 V. 27, p. 1156 V. 27, p. 1157 V. 27, p. 1157 V. 27, p. 1163 ORPORATION ION Register V. 27, p. 1518 V. 27, p. 1518 V. 27, p. 1518 V. 27, p. 1519 V. 27, p. 1520
48-4-2 AGENO Reg. No. 49-45-1 49-45-2 49-45-3 49-45-4 49-45-5 49-45-6 49-45-7 49-45-9 49-45-20 49-45-20 49-45-21 49-45-31 49-45-31 49-45-35 49-45-37 49-55-12 AGENC D Reg. No. 50-2-21a AGENC DIVISION Reg. No. 51-9-7	Amended CY 49: DEPARTI Action Amended New Amended Amended Amended To be	V. 29, p. 18 MENT OF LABOR Register V. 27, p. 1466 V. 27, p. 1467 V. 29, p. 675, 676 MENT OF LABOR— IPLOYMENT Register V. 29, p. 701 MENT OF LABOR— S COMPENSATION Register V. 28, p. 1536	66-8-3 66-8-4 66-8-7 66-8-7 66-9-4 66-10-1 66-10-9 66-10-14 66-11-1a 66-11-1a 66-11-1b 66-11-4 66-11-5 66-12-1 66-14-3 66-14-4 66-14-5 66-14-7 66-14-10 AGENO THE 1 Reg. No. 67-3-5 AGEN Reg. No. 68-1-1b 68-1-1h 68-1-3a 68-2-22 68-7-12b	Amended Action Amended	V. 28, p. 1537 V. 28, p. 1537 V. 29, p. 794 V. 29, p. 1538 V. 29, p. 1538 V. 29, p. 1538 V. 29, p. 1538 V. 28, p. 1539 V. 28, p. 45 V. 29, p. 794 OF EXAMINERS IN DISPENSING OF FRUMENTS Register V. 28, p. 1187 OF PHARMACY Register V. 29, p. 465 V. 28, p. 1491 V. 28, p. 1491 V. 28, p. 1491 V. 28, p. 1491 V. 27, p. 1518	74-7-4 74-74-74-74-74-74-74-74-74-74-74-74-74-7	Amended Amended Amended NCY 75: OFFICE O MMISSIONER— RTGAGE LENDIN Action Amended Amended Revoked Revoked Revoked New New New New Action Amended NCY 82: STATE C COMMISSI Action Amended Amended Amended Amended Amended Amended	V. 28, p. 648 V. 28, p. 648 V. 28, p. 648 V. 28, p. 648 PECONSUMER AND NG DIVISION Register V. 28, p. 1367 V. 28, p. 1367 V. 28, p. 1368 V. 27, p. 1156 V. 27, p. 1801 V. 28, p. 606 V. 27, p. 1156 V. 27, p. 1157 V. 27, p. 1157 V. 27, p. 1150 V. 27, p. 1163 ORPORATION ION Register V. 27, p. 1518 V. 27, p. 1519 V. 27, p. 1520 V. 29, p. 181
48-4-2 AGENO Reg. No. 49-45-1 49-45-2 49-45-3 49-45-4 49-45-5 49-45-6 49-45-7 49-45-8 49-45-9 49-45-20 49-45-21 49-45-31 49-45-31 49-45-31 49-45-31 49-55-1 through 49-55-12 AGENC DIVISION Reg. No. 51-9-7 AGE	Amended CY 49: DEPARTI Action Amended To be well a to be	V. 29, p. 18 MENT OF LABOR Register V. 27, p. 1466 V. 27, p. 1467 V. 29, p. 675, 676 MENT OF LABOR— IPLOYMENT Register V. 29, p. 701 MENT OF LABOR— S COMPENSATION Register V. 28, p. 1536 D OF NURSING	66-8-3 66-8-4 66-8-7 66-9-4 66-10-1 66-10-9 66-10-14 66-11-1a 66-11-1a 66-11-1a 66-11-1b 66-11-4 66-11-5 66-12-1 66-14-1 66-14-3 66-14-4 66-14-5 66-14-7 66-14-10 AGENO THE 1 Reg. No. 67-3-5 AGEN Reg. No. 68-1-1b 68-1-1h 68-1-3a 68-2-20 68-2-22 68-7-12b 68-7-14	Amended Revoked Amended Action Action Amended	V. 28, p. 1537 V. 28, p. 1537 V. 29, p. 794 V. 29, p. 1538 V. 29, p. 1538 V. 29, p. 1538 V. 29, p. 1538 V. 28, p. 1538 V. 28, p. 1539 V. 28, p. 45 V. 29, p. 794 DF EXAMINERS IN DISPENSING OF TRUMENTS Register V. 28, p. 1187 OF PHARMACY Register V. 29, p. 465 V. 28, p. 1491 V. 27, p. 1518 V. 28, p. 1491 V. 27, p. 1518 V. 28, p. 1492	74-7-4 74-74-74-74-74-74-74-74-74-74-74-74-74-7	Amended Amended Amended NCY 75: OFFICE O MMISSIONER— RTGAGE LENDIN Action Amended Amended Revoked Revoked Revoked New New New New Action Amended MCY 82: STATE C COMMISSI Action Amended	V. 28, p. 648 V. 28, p. 648 V. 28, p. 648 V. 28, p. 648 P-CONSUMER AND NG DIVISION Register V. 28, p. 1367 V. 28, p. 1367 V. 28, p. 1368 V. 27, p. 1156 V. 27, p. 1163 ORPORATION ION Register V. 27, p. 1518 V. 27, p. 1519 V. 27, p. 1520 V. 29, p. 181 V. 27, p. 1521
48-4-2 AGENO Reg. No. 49-45-1 49-45-2 49-45-3 49-45-4 49-45-5 49-45-6 49-45-7 49-45-8 49-45-9 49-45-20 49-45-21 49-45-31 49-45-31 49-45-31 49-45-31 49-55-1 through 49-55-12 AGENO DIVISION Reg. No. 51-9-7 AGE Reg. No.	Amended CY 49: DEPART! Action Amended To be well a to be	V. 29, p. 18 MENT OF LABOR Register V. 27, p. 1466 V. 27, p. 1467 V. 29, p. 675, 676 MENT OF LABOR— IPLOYMENT Register V. 29, p. 701 MENT OF LABOR— S COMPENSATION Register V. 28, p. 1536 O OF NURSING Register	66-8-3 66-8-4 66-8-6 66-8-7 66-9-4 66-10-1 66-10-9 66-10-14 66-11-1a 66-11-1a 66-11-15 66-12-1 66-14-1 66-14-2 66-14-3 66-14-4 66-14-5 66-14-7 66-14-10 AGENO THE 1 Reg. No. 67-3-5 AGEN Reg. No. 68-1-1b 68-1-1a 68-1-22 68-2-22 68-7-12b 68-7-14	Amended Action New NCY 68: BOARD Action Amended	V. 28, p. 1537 V. 28, p. 1537 V. 29, p. 794 V. 29, p. 1538 V. 29, p. 1538 V. 29, p. 794 V. 28, p. 1538 V. 29, p. 1538 V. 28, p. 1539 V. 28, p. 45 V. 29, p. 794 V. 28, p. 45 V. 29, p. 794 DF EXAMINERS IN DISPENSING OF TRUMENTS Register V. 29, p. 1187 OF PHARMACY Register V. 29, p. 465 V. 28, p. 1491 V. 27, p. 1518 V. 28, p. 1492 V. 27, p. 435	74-7-4 74-11-6 AGEN BANK CC MOF Reg. No. 75-6-1 75-6-9 75-6-31 75-6-34 75-6-36 75-6-37 75-6-38 A SE Reg. No. 81-3-2 81-3-6 81-3-2 81-3-6 81-5-7 81-5-14 81-7-2 81-14-1 81-14-2 81-14-5 81-14-9 AGEN Reg. No. 82-3-107 82-3-108 82-3-111 82-3-311a 82-3-135a 82-3-135b	Amended Amended Amended NCY 75: OFFICE O MMISSIONER— RTGAGE LENDIN Action Amended Amended Revoked Revoked New New New New SENCY 81: OFFICE CURITIES COMM Amended	V. 28, p. 648 V. 28, p. 648 V. 28, p. 648 V. 28, p. 648 DF THE STATE -CONSUMER AND NG DIVISION Register V. 28, p. 1367 V. 28, p. 1367 V. 28, p. 1368 V. 27, p. 1368 V. 27, p. 1801 V. 28, p. 610 V. 27, p. 1157 V. 27, p. 1801 V. 28, p. 610 V. 27, p. 1163 ORPORATION ION Register V. 27, p. 1518 V. 27, p. 1519 V. 27, p. 1520 V. 29, p. 181 V. 29, p. 181 V. 27, p. 1521 V. 27, p. 1521 V. 27, p. 1521
48-4-2 AGENO Reg. No. 49-45-1 49-45-2 49-45-3 49-45-4 49-45-5 49-45-6 49-45-7 49-45-8 49-45-9 49-45-20 49-45-21 49-45-31 49-45-31 49-45-31 49-45-31 49-55-1 through 49-55-12 AGENC DIVISION Reg. No. 51-9-7 AGE	Amended CY 49: DEPARTI Action Amended To be well a to be	V. 29, p. 18 MENT OF LABOR Register V. 27, p. 1466 V. 27, p. 1467 V. 29, p. 675, 676 MENT OF LABOR— IPLOYMENT Register V. 29, p. 701 MENT OF LABOR— S COMPENSATION Register V. 28, p. 1536 D OF NURSING	66-8-3 66-8-4 66-8-7 66-9-4 66-10-1 66-10-9 66-10-14 66-11-1a 66-11-1a 66-11-1a 66-11-1b 66-11-4 66-11-5 66-12-1 66-14-1 66-14-3 66-14-4 66-14-5 66-14-7 66-14-10 AGENO THE 1 Reg. No. 67-3-5 AGEN Reg. No. 68-1-1b 68-1-1h 68-1-3a 68-2-20 68-2-22 68-7-12b 68-7-14	Amended Revoked Amended Action Action Amended	V. 28, p. 1537 V. 28, p. 1537 V. 29, p. 794 V. 29, p. 1538 V. 29, p. 1538 V. 29, p. 1538 V. 29, p. 1538 V. 28, p. 1538 V. 28, p. 1539 V. 28, p. 45 V. 29, p. 794 DF EXAMINERS IN DISPENSING OF TRUMENTS Register V. 28, p. 1187 OF PHARMACY Register V. 29, p. 465 V. 28, p. 1491 V. 27, p. 1518 V. 28, p. 1491 V. 27, p. 1518 V. 28, p. 1492	74-7-4 74-11-6 AGEN BANK CC MOF Reg. No. 75-6-1 75-6-9 75-6-31 75-6-34 75-6-36 75-6-37 75-6-38 A SE Reg. No. 81-3-2 81-3-6 81-5-7 81-5-14 81-7-2 81-14-1 81-14-2 81-14-5 81-14-9 AGEN Reg. No. 82-3-107 82-3-108 82-3-111 82-3-311a 82-3-3135a 82-3-135b 82-3-138	Amended Amended Amended NCY 75: OFFICE O MMISSIONER— RTGAGE LENDIN Action Amended Amended Revoked Revoked New New New SENCY 81: OFFICE CURITIES COMIN Action Amended NCY 82: STATE C COMMISSI Action Amended	V. 28, p. 648 V. 28, p. 648 V. 28, p. 648 V. 28, p. 648 DF THE STATE -CONSUMER AND NG DIVISION Register V. 28, p. 1367 V. 28, p. 1367 V. 28, p. 1368 V. 27, p. 1368 V. 27, p. 1801 V. 28, p. 606 V. 27, p. 1156 V. 27, p. 1157 V. 27, p. 1157 V. 27, p. 1157 V. 27, p. 1163 ORPORATION ION Register V. 27, p. 1518 V. 27, p. 1519 V. 27, p. 1519 V. 27, p. 1520 V. 29, p. 181 V. 27, p. 1521 V. 27, p. 1521 V. 27, p. 1521 V. 27, p. 1521
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88-29-11 88-29-11 88-29-12 88-29-12 88-29-18 88-29-18 88-29-19 88-29-19	Amended Amended (T) Amended ENCY 91: DEPAR EDUCATIO	V. 28, p. 1564 V. 28, p. 1105 V. 28, p. 1105 V. 28, p. 1565 V. 28, p. 1106 V. 28, p. 1106 V. 28, p. 1107 V. 28, p. 1107 V. 28, p. 1108 V. 28, p. 1568 CTMENT OF ON Register V. 28, p. 1222	94-2-16 94-2-8 through 94-2-16 94-2-19 94-2-20 94-2-20 94-2-21 94-2-21 94-3-1	Amended Amended (T) Amended Amended (T) Amended Amended (T) Amended Amended (T)	V. 27, p. 1524-1526 V. 27, p. 1095 V. 27, p. 1527 V. 27, p. 1096 V. 27, p. 1527 V. 27, p. 1096 V. 27, p. 1528 V. 27, p. 1097	100-55-4 100-55-7 100-55-9 100-69-1 100-69-1 100-69-12 100-72-1 100-72-2 100-72-7 100-73-1 100-73-1	Amended Amended Amended Revoked Amended New Amended Amended Amended Amended Amended Amended Amended Amended	V. 27, p. 209 V. 29, p. 651 V. 28, p. 572 V. 27, p. 1672 V. 27, p. 1672 V. 28, p. 572 V. 29, p. 704 V. 28, p. 112 V. 29, p. 705 V. 28, p. 273 V. 28, p. 923
88-29-11 88-29-11 88-29-12 88-29-12 88-29-18 88-29-18 88-29-19 AG Reg. No. 91-1-200 91-1-201 91-1-202	Amended Amended (T) Amended Amended (T) Amended Amended (T) Amended Amended (T) Amended ENCY 91: DEPAR EDUCATIO Action Amended Amended Amended Amended Amended Amended	V. 28, p. 1564 V. 28, p. 1105 V. 28, p. 1105 V. 28, p. 1565 V. 28, p. 1106 V. 28, p. 1107 V. 28, p. 1566 V. 28, p. 1107 V. 28, p. 1567 V. 28, p. 1567 V. 28, p. 1108 V. 28, p. 1568 RTMENT OF DN Register V. 28, p. 1222 V. 27, p. 1028 V. 28, p. 1223	94-2-16 94-2-8 through 94-2-16 94-2-19 94-2-20 94-2-20 94-2-21 94-2-21 94-3-1 94-3-1 94-3-2 94-3-2	Amended Amended (T)	V. 27, p. 1524-1526 V. 27, p. 1095 V. 27, p. 1095 V. 27, p. 1527 V. 27, p. 1527 V. 27, p. 1527 V. 27, p. 1528 V. 27, p. 1528 V. 27, p. 1529 V. 27, p. 1698 V. 27, p. 1529 V. 27, p. 1529 V. 27, p. 1529 V. 27, p. 1529 V. 27, p. 1098	100-55-4 100-55-7 100-65-9 100-69-1 100-69-1 100-69-12 100-72-1 100-72-2 100-72-7 100-73-1 100-73-2 100-73-9	Amended Amended Amended Revoked Amended New Amended	V. 27, p. 209 V. 29, p. 651 V. 28, p. 572 V. 27, p. 1672 V. 27, p. 1672 V. 28, p. 572 V. 29, p. 704 V. 28, p. 112 V. 29, p. 705 V. 28, p. 273 V. 28, p. 923 V. 28, p. 1282 V. 29, p. 598
88-29-11 88-29-11 88-29-12 88-29-12 88-29-18 88-29-19 88-29-19 AG Reg. No. 91-1-200 91-1-201 91-1-202 91-1-203	Amended Amended (T) Amended Amended (T) Amended Amended (T) Amended Amended (T) Amended ENCY 91: DEPAF EDUCATIO Action Amended Amended Amended Amended Amended Amended	V. 28, p. 1564 V. 28, p. 1105 V. 28, p. 1105 V. 28, p. 1565 V. 28, p. 1106 V. 28, p. 1566 V. 28, p. 1107 V. 28, p. 1567 V. 28, p. 1108 V. 28, p. 1568 RTMENT OF DN Register V. 28, p. 1222 V. 27, p. 1028 V. 28, p. 1223 V. 28, p. 1223 V. 28, p. 1225	94-2-16 94-2-8 through 94-2-16 94-2-19 94-2-20 94-2-20 94-2-21 94-2-21 94-3-1 94-3-2 94-3-2 94-3-2	Amended Amended (T) Amended	V. 27, p. 1524-1526 V. 27, p. 1095 V. 27, p. 1095 V. 27, p. 1527 V. 27, p. 1527 V. 27, p. 1527 V. 27, p. 1528 V. 27, p. 1528 V. 27, p. 1529 V. 27, p. 1530	100-55-4 100-55-7 100-65-9 100-69-1 100-69-1 100-69-12 100-72-1 100-72-2 100-72-7 100-73-1 100-73-2 100-73-9	Amended Amended Amended Revoked Amended New Amended	V. 27, p. 209 V. 29, p. 651 V. 28, p. 572 V. 27, p. 1672 V. 27, p. 1672 V. 28, p. 572 V. 29, p. 704 V. 28, p. 112 V. 29, p. 705 V. 28, p. 273 V. 28, p. 923 V. 28, p. 1282 V. 29, p. 598 V. 27, p. 315 DRAL SCIENCES
88-29-11 88-29-11 88-29-12 88-29-18 88-29-18 88-29-19 88-29-19 AG Reg. No. 91-1-200 91-1-201 91-1-202 91-1-203 91-1-204	Amended Amended (T) Amended Amended (T) Amended Amended (T) Amended Amended (T) Amended ENCY 91: DEPAR EDUCATIO Action Amended	V. 28, p. 1564 V. 28, p. 1105 V. 28, p. 1105 V. 28, p. 1565 V. 28, p. 1106 V. 28, p. 1106 V. 28, p. 1107 V. 28, p. 1567 V. 28, p. 1107 V. 28, p. 1567 V. 28, p. 1108 V. 28, p. 1568 CTMENT OF DN Register V. 28, p. 1222 V. 27, p. 1028 V. 28, p. 1223 V. 28, p. 1223 V. 28, p. 1225 V. 28, p. 1229	94-2-16 94-2-8 through 94-2-16 94-2-19 94-2-20 94-2-20 94-2-21 94-2-21 94-3-1 94-3-1 94-3-2 94-3-2 94-4-1 94-4-1	Amended Amended (T)	V. 27, p. 1524-1526 V. 27, p. 1095 V. 27, p. 1096 V. 27, p. 1527 V. 27, p. 1527 V. 27, p. 1528 V. 27, p. 1528 V. 27, p. 1097 V. 27, p. 1529 V. 27, p. 1098 V. 27, p. 1529 V. 27, p. 1529 V. 27, p. 1529 V. 27, p. 1530 V. 27, p. 1530 V. 27, p. 1530	100-55-4 100-55-7 100-65-9 100-69-1 100-69-1 100-69-12 100-72-1 100-72-2 100-72-7 100-73-1 100-73-2 100-73-9	Amended Amended Amended Amended Revoked Amended New Amended	V. 27, p. 209 V. 29, p. 651 V. 28, p. 572 V. 27, p. 1672 V. 27, p. 1672 V. 28, p. 572 V. 29, p. 704 V. 28, p. 112 V. 29, p. 705 V. 28, p. 273 V. 28, p. 923 V. 28, p. 1282 V. 29, p. 598 V. 27, p. 315 DRAL SCIENCES
88-29-11 88-29-11 88-29-12 88-29-12 88-29-18 88-29-19 88-29-19 AG Reg. No. 91-1-200 91-1-201 91-1-202 91-1-203	Amended Amended (T) Amended Amended (T) Amended Amended (T) Amended Amended (T) Amended ENCY 91: DEPAF EDUCATIO Action Amended Amended Amended Amended Amended Amended	V. 28, p. 1564 V. 28, p. 1105 V. 28, p. 1105 V. 28, p. 1565 V. 28, p. 1106 V. 28, p. 1566 V. 28, p. 1107 V. 28, p. 1567 V. 28, p. 1567 V. 28, p. 1108 V. 28, p. 1108 V. 28, p. 1108 V. 28, p. 1108 V. 28, p. 1222 V. 27, p. 1028 V. 28, p. 1222 V. 27, p. 1028 V. 28, p. 1223 V. 28, p. 1225 V. 28, p. 1229 V. 28, p. 1229 V. 28, p. 1232	94-2-16 94-2-8 through 94-2-16 94-2-19 94-2-20 94-2-20 94-2-21 94-2-21 94-3-1 94-3-1 94-3-2 94-3-2 94-4-1 94-4-2 94-4-2	Amended Amended (T) Amended	V. 27, p. 1524-1526 V. 27, p. 1095 V. 27, p. 1096 V. 27, p. 1527 V. 27, p. 1527 V. 27, p. 1528 V. 27, p. 1528 V. 27, p. 1097 V. 27, p. 1529 V. 27, p. 1529 V. 27, p. 1529 V. 27, p. 1529 V. 27, p. 1530 V. 27, p. 1530 V. 27, p. 1530	100-55-4 100-55-7 100-65-9 100-69-1 100-69-1 100-69-12 100-72-1 100-72-2 100-72-7 100-73-1 100-73-2 100-73-9 AGENC	Amended Amended Amended Amended Revoked Amended New Amended Amended Amended Amended Amended Amended Amended Amended EY 102: BEHAVIO REGULATORY	V. 27, p. 209 V. 29, p. 651 V. 28, p. 572 V. 27, p. 1672 V. 27, p. 1672 V. 28, p. 572 V. 29, p. 704 V. 28, p. 112 V. 29, p. 705 V. 28, p. 273 V. 28, p. 273 V. 28, p. 1282 V. 29, p. 598 V. 27, p. 315 DRAL SCIENCES BOARD
88-29-11 88-29-11 88-29-12 88-29-18 88-29-18 88-29-19 88-29-19 AG Reg. No. 91-1-200 91-1-201 91-1-202 91-1-203 91-1-204 91-1-205 91-1-207 91-1-209	Amended Amended (T) Amended Amended Amended Amended Action Amended	V. 28, p. 1564 V. 28, p. 1105 V. 28, p. 1105 V. 28, p. 1565 V. 28, p. 1106 V. 28, p. 1106 V. 28, p. 1107 V. 28, p. 1567 V. 28, p. 1107 V. 28, p. 1567 V. 28, p. 1108 V. 28, p. 1568 CTMENT OF DN Register V. 28, p. 1222 V. 27, p. 1028 V. 28, p. 1223 V. 28, p. 1223 V. 28, p. 1225 V. 28, p. 1229	94-2-16 94-2-8 through 94-2-16 94-2-19 94-2-20 94-2-20 94-2-21 94-2-21 94-3-1 94-3-1 94-3-2 94-3-2 94-4-1 94-4-2 94-4-2	Amended Amended (T)	V. 27, p. 1524-1526 V. 27, p. 1095 V. 27, p. 1095 V. 27, p. 1096 V. 27, p. 1527 V. 27, p. 1528 V. 27, p. 1528 V. 27, p. 1528 V. 27, p. 1529 V. 27, p. 1530 V. 27, p. 1530 V. 27, p. 1530 V. 27, p. 1530 ISSION ON	100-55-4 100-55-7 100-55-9 100-69-1 100-69-2 100-69-10 100-72-1 100-72-2 100-72-7 100-73-1 100-73-2 100-73-9 AGENC Reg. No. 102-1-8a 102-1-12	Amended Amended Amended Amended Revoked Amended New Amended Amended Amended Amended Amended Amended Amended Amended EY 102: BEHAVIO REGULATORY Action New Amended	V. 27, p. 209 V. 29, p. 651 V. 28, p. 572 V. 27, p. 1672 V. 27, p. 1672 V. 28, p. 572 V. 29, p. 704 V. 28, p. 112 V. 29, p. 705 V. 28, p. 273 V. 28, p. 128 V. 29, p. 598 V. 27, p. 315 **PRAL SCIENCES** **BOARD** **Register** V. 28, p. 114 V. 27, p. 407
88-29-11 88-29-11 88-29-12 88-29-18 88-29-18 88-29-19 88-29-19 AG Reg. No. 91-1-200 91-1-201 91-1-203 91-1-204 91-1-205 91-1-207 91-1-207 91-1-209 91-1-209	Amended Amended (T) Amended Amended (T) Amended Amended (T) Amended Amended (T) Amended ENCY 91: DEPAF EDUCATIO Action Amended	V. 28, p. 1564 V. 28, p. 1105 V. 28, p. 1105 V. 28, p. 1565 V. 28, p. 1106 V. 28, p. 1106 V. 28, p. 1566 V. 28, p. 1567 V. 28, p. 1567 V. 28, p. 1568 V. 28, p. 1568 CTMENT OF DN Register V. 28, p. 1222 V. 27, p. 1028 V. 28, p. 1223 V. 28, p. 1223 V. 28, p. 1225 V. 28, p. 1225 V. 28, p. 1225 V. 28, p. 1222 V. 27, p. 1037 V. 27, p. 1037 V. 27, p. 1037 V. 27, p. 1038	94-2-16 94-2-8 through 94-2-16 94-2-19 94-2-20 94-2-20 94-2-21 94-2-21 94-3-1 94-3-1 94-3-2 94-3-2 94-4-1 94-4-1 94-4-2	Amended Amended (T) Amended Bency 97: COMM VETERANS' A	V. 27, p. 1524-1526 V. 27, p. 1095 V. 27, p. 1096 V. 27, p. 1527 V. 27, p. 1527 V. 27, p. 1528 V. 27, p. 1528 V. 27, p. 1528 V. 27, p. 1097 V. 27, p. 1529 V. 27, p. 1098 V. 27, p. 1529 V. 27, p. 1530 V. 27, p. 1530 V. 27, p. 1530 V. 27, p. 1530 SISSION ON	100-55-4 100-55-7 100-55-9 100-69-1 100-69-2 100-69-12 100-72-1 100-72-2 100-72-7 100-73-1 100-73-2 100-73-9 AGENC Reg. No. 102-1-8a 102-1-12 102-1-13	Amended Amended Amended Amended Revoked Amended New Amended Attion New Amended Amended Amended Amended	V. 27, p. 209 V. 29, p. 651 V. 28, p. 572 V. 27, p. 1672 V. 27, p. 1672 V. 28, p. 572 V. 29, p. 704 V. 28, p. 112 V. 29, p. 705 V. 28, p. 273 V. 28, p. 923 V. 28, p. 1282 V. 29, p. 598 V. 27, p. 315 DRAL SCIENCES BOARD Register V. 28, p. 114 V. 27, p. 407 V. 28, p. 1101
88-29-11 88-29-11 88-29-12 88-29-18 88-29-18 88-29-19 88-29-19 AG Reg. No. 91-1-200 91-1-201 91-1-202 91-1-203 91-1-204 91-1-205 91-1-207 91-1-209 91-1-210 91-1-210	Amended Amended (T) Amended	V. 28, p. 1564 V. 28, p. 1105 V. 28, p. 1105 V. 28, p. 1565 V. 28, p. 1106 V. 28, p. 1566 V. 28, p. 1107 V. 28, p. 1567 V. 28, p. 1108 V. 28, p. 1568 CTMENT OF N Register V. 28, p. 1222 V. 27, p. 1028 V. 28, p. 1223 V. 28, p. 1225 V. 28, p. 1225 V. 28, p. 1225 V. 28, p. 1229 V. 28, p. 1229 V. 28, p. 1229 V. 28, p. 1237 V. 27, p. 1037 V. 27, p. 1037 V. 27, p. 1038 V. 28, p. 1233	94-2-16 94-2-8 through 94-2-16 94-2-19 94-2-19 94-2-20 94-2-21 94-2-21 94-3-1 94-3-2 94-3-2 94-4-1 94-4-2 94-4-2 Reg. No.	Amended Amended (T) Amended Gency 97: COMM VETERANS' A Action	V. 27, p. 1524-1526 V. 27, p. 1095 V. 27, p. 1095 V. 27, p. 1096 V. 27, p. 1527 V. 27, p. 1528 V. 27, p. 1528 V. 27, p. 1528 V. 27, p. 1529 V. 27, p. 1097 V. 27, p. 1529 V. 27, p. 1098 V. 27, p. 1529 V. 27, p. 1530 ISSION ON FFAIRS Register	100-55-4 100-55-7 100-55-9 100-69-1 100-69-1 100-69-12 100-72-1 100-72-2 100-73-1 100-73-1 100-73-2 100-73-9 AGENC Reg. No. 102-1-8a 102-1-13 102-1-13	Amended Amended Amended Amended Revoked Amended New Amended Artion New Amended	V. 27, p. 209 V. 29, p. 651 V. 28, p. 572 V. 27, p. 1672 V. 27, p. 1672 V. 28, p. 572 V. 29, p. 704 V. 28, p. 112 V. 29, p. 705 V. 28, p. 273 V. 28, p. 923 V. 28, p. 1282 V. 29, p. 598 V. 27, p. 315 DRAL SCIENCES BOARD Register V. 28, p. 114 V. 27, p. 407 V. 28, p. 1101 V. 28, p. 1120 V. 29, p. 1426
88-29-11 88-29-11 88-29-12 88-29-18 88-29-18 88-29-19 88-29-19 AG Reg. No. 91-1-200 91-1-201 91-1-203 91-1-204 91-1-205 91-1-207 91-1-207 91-1-209 91-1-209	Amended Amended (T) Amended Amended (T) Amended Amended (T) Amended Amended (T) Amended ENCY 91: DEPAF EDUCATIO Action Amended	V. 28, p. 1564 V. 28, p. 1105 V. 28, p. 1105 V. 28, p. 1565 V. 28, p. 1106 V. 28, p. 1566 V. 28, p. 1107 V. 28, p. 1567 V. 28, p. 1567 V. 28, p. 1568 V. 28, p. 1108 V. 28, p. 1108 V. 28, p. 1208 V. 28, p. 1222 V. 27, p. 1028 V. 28, p. 1222 V. 27, p. 1028 V. 28, p. 1223 V. 28, p. 1225 V. 28, p. 1225 V. 28, p. 1229 V. 28, p. 1232 V. 27, p. 1037 V. 27, p. 1037 V. 27, p. 1038 V. 28, p. 1233 V. 27, p. 1038 V. 28, p. 1233 V. 27, p. 1038	94-2-16 94-2-8 through 94-2-16 94-2-19 94-2-20 94-2-20 94-2-21 94-2-21 94-3-1 94-3-1 94-3-2 94-3-2 94-4-1 94-4-1 94-4-2	Amended Amended (T) Amended Bency 97: COMM VETERANS' A	V. 27, p. 1524-1526 V. 27, p. 1095 V. 27, p. 1095 V. 27, p. 1096 V. 27, p. 1527 V. 27, p. 1528 V. 27, p. 1528 V. 27, p. 1528 V. 27, p. 1529 V. 27, p. 1530 ISSION ON FFAIRS Register V. 28, p. 459	100-55-4 100-55-7 100-55-9 100-69-1 100-69-2 100-69-12 100-72-1 100-72-2 100-72-7 100-73-1 100-73-2 100-73-9 AGENC Reg. No. 102-1-8a 102-1-12 102-1-13	Amended Amended Amended Amended Revoked Amended New Amended Attion New Amended Amended Amended Amended	V. 27, p. 209 V. 29, p. 651 V. 28, p. 572 V. 27, p. 1672 V. 27, p. 1672 V. 28, p. 572 V. 29, p. 704 V. 28, p. 112 V. 29, p. 705 V. 28, p. 123 V. 28, p. 1282 V. 29, p. 598 V. 27, p. 315 DRAL SCIENCES BOARD Register V. 28, p. 114 V. 27, p. 407 V. 28, p. 1110 V. 28, p. 1110 V. 28, p. 1110 V. 28, p. 1111 V. 28, p. 1111 V. 28, p. 1111 V. 28, p. 1112 V. 29, p. 340
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