



Kansas Register

Kris W. Kobach, Secretary of State

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State of Kansas

**Department of Administration
Office of the Chief Financial Officer**

Public Notice

Under requirements of K.S.A. 65-34,117(c), as amended, records of the Office of the Chief Financial Officer show the unobligated balances are \$ 5,473,795.48 in the Underground Petroleum Storage Tank Release Trust Fund and \$ 2,491,924.41 in the Aboveground Petroleum Storage Tank Release Trust Fund at March 31, 2016.

Annette Witt, Manager
Office of the Chief Financial Officer

Doc. No. 044438

State of Kansas

State Conservation Commission

Notice of Meeting

The State Conservation Commission will meet at 8 a.m. Monday, April 25, 2016, at the Kansas Department of Agriculture, 1320 Research Park Drive, Room 124, Manhattan, Kansas. To request a copy of the agenda please contact the Division of Conservation, Kansas Department of Agriculture, 1320 Research Park Drive, Manhattan, Kansas, 66502, or 785-564-6620. Requests for special accommodations should be made at least three days in advance of the meeting date.

Rob Reschke
Executive Director

Doc. No. 044439

State of Kansas

Children's Cabinet and Trust fund

Notice of Meeting

The Kansas Children's Cabinet and Trust Fund will conduct a meeting from 9:30 a.m. to 1 p.m. Friday, April 22, 2016, in Marvin Auditorium at the Topeka-Shawnee County Public Library, 1515 S.W. 10th Ave., Topeka. For a copy of the agenda please contact Dyogga.Adegbore@dcf.ks.gov or call her at 785-368-7044.

Janice Suzanne Smith
Executive Director

Doc. No. 044440

(Published in the Kansas Register April 14, 2016.)

Heartland Works, Inc.

Request for Proposals (Revised)

Heartland Works, Inc. is accepting proposals for Lease Office Space in Manhattan,

Kansas. To receive a request for proposal, including all specifications, call 785-234-0500. Proposals must be received by 3 p.m. *Thursday, May 5, 2016*. All real estate companies, brokers, agencies and/or property owners are encouraged to submit proposals.

David Brennan
Executive Director

Doc. No. 044460

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State of Kansas

**Department for Aging and Disability Services
Department of Health and Environment
Division of Health Care Finance**

**Notice of Proposed Nursing Facility Medicaid Rates
for State Fiscal Year 2017;
Methodology for Calculating Proposed Rates,
and Rate Justifications;
Request for 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 for Aging and Disability Services administers the nursing facility program, which includes hospital long-term care units, and the nursing facility for mental health program. The Secretary acts on behalf of the Kansas Department of Health and Environment, Division of Health Care Finance (DHCF), 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 for Aging and Disability Services (KDADS) is publishing the proposed Medicaid per diem rates for Medicaid-certified nursing facilities for State Fiscal Year 2017, the methodology underlying the establishment of the proposed nursing facility rates, and the justifications for those proposed rates. KDADS and DHCF are also providing notice of the state's intent to submit proposed amendments to the Medicaid State Plan to the U. S. Department of Health and Human Services' Centers for Medicare and Medicaid Services (CMS) on or before September 30, 2016.

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 maintained by DHCF are being revised:
1. Attachment 4.19D, Part I, Subpart C, Exhibit C-1, inclusive;
 2. 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 provisions set out in this notice cover two scenarios. One scenario pertains to the methodology that will be used if the current Quality Care Assessment sunsets on June 30, 2016, as provided for in K.S.A. 75-7435. The second scenario is the methodology that will be implement-

ed if Senate Bill 457 from the 2016 Kansas Legislative Session is enacted without significant changes to the Quality Care Assessment parameters included when this bill was introduced. The outcome of this legislation will determine the version of the Medicaid State Plan provisions that the state will submit to CMS on or before September 30, 2016. Since the majority of the provisions outlined apply to both scenarios, those provisions have not been repeated for each case. Instead, the differences in the provisions for each scenario are identified in the applicable sections. The proposed Medicaid State Plan amendment that the state ultimately submits to CMS may differ from the version contained in this notice.

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

Secretary of Aging and Disability Services
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 11 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

(continued)

cost report. The requirements for filing the calendar year cost report are found in K.A.R. 129-10-17.

When a non-arm's 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 ongoing operation. In this situation, the related provider or owner shall be required to file the calendar year end cost report. The new operator or owner is responsible for obtaining the cost report information from the prior operator for the months during the calendar year in which the new operator was not involved in running the facility. The cost report information from the old and new operators shall be combined to prepare a 12-month calendar year end cost report.

Projected Cost Reports:

The filing of projected cost reports are limited to: 1) newly constructed facilities; 2) existing facilities new to the Medicaid program; or 3) a provider re-entering the Medicaid program that has not actively participated or billed services for 24 months or more. The requirements are found in K.A.R. 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 base cost data under scenario one where the Quality Care Assessment sunsets on June 30, 2016 will be the combined calendar year cost data from each available report submitted by the current provider during 2010, 2011, and 2012. The base cost data under scenario two where Quality Care Assessment parameters contained in Senate Bill 457 are implemented will be the combined calendar year cost data from each available report submitted by the current provider during 2013, 2014, and 2015.

If the current provider has not submitted a calendar year report during the base cost data period, 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 common inflation point. Under scenario one where the Quality Care Assessment sunsets June 30, 2016, the common endpoint for this adjustment will be December 31, 2012. Under scenario two where Quality Care Assessment parameters from Senate Bill 457 are adopted this common endpoint will be June 30, 2016. 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 the same common inflation endpoint used to adjust cost data from the base cost data period for providers that are already on the annual cost reporting schedule. 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 inflation endpoint (December 31, 2012 under scenario one and June 30, 2016 under scenario two). 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 previ-

ous provider during the base cost data period (2010-2012 for scenario one and 2013-2015 for scenario two). 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 the same common inflation endpoint used to adjust cost data from the base cost data period for providers that are already on the annual cost reporting schedule. This adjustment will be based on the 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 the inflation endpoint (December 31, 2012 under scenario one and June 30, 2016 under scenario two). 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 the base cost data period.

All cost data used to set rates for facilities reentering the program shall be adjusted to the same common inflation endpoint used to adjust cost data from the base cost data period for providers that are already on the annual cost reporting schedule. This adjustment will be based on the 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 the inflation endpoint (December 31, 2012 under scenario one and June 30, 2016 under scenario two). 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.

Rates will be adjusted for case mix twice annually using case mix data from the two quarters preceding the rate effective date. The case mix averages used for the rate adjustments will be the simple average of the case mix averages for each quarter. The resident listing cut-off for calculating the average CMIs for each quarter will be the first day of the quarter. The following are the dates for the resident listings and the rate periods in which the average Medicaid CMIs will be used in the semi-annual rate-setting process.

<u>Rate Effective Date:</u>	<u>Cut-Off Dates for Quarterly CMI:</u>
July 1	January 1 and April 1
January 1	July 1 and October 1

The resident listings will be mailed to providers prior to the dates the semi-annual 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 cut off 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 ac-

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tual 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 the inflation endpoint (December 31, 2012 under scenario one and June 30, 2016 under scenario two). The inflation will be based on the IHS Global Insight, CMS Nursing Home without Capital Market Basket index.

The IHS Global Insight, CMS Nursing Home without Capital Market Basket 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 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 most recent calendar year historic cost reports from the base data period in the database from all active nursing facility providers (2012 reports will be used under scenario one and 2015 reports will be used under scenario two). 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 ad-

ministrators 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, 2016.

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 the inflation endpoint (December 31, 2012 under scenario one and June 30, 2016 under scenario two). 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 Global Insight, CMS Nursing Home without Capital Market Basket 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
Direct Health Care	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 eight 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 120% of the median, then the upper payment limit for the statewide average CMI would be \$78 (D=130% x \$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

(continued)

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 facility's Medicaid CMI is determined by averaging the facility average Medicaid CMI from the two quarters preceding the rate effective data. The Medicaid CMI is then divided by the statewide average CMI for the cost data period. Finally, this result, 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 semi-annually 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 Health 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 result 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 semi-annual adjustment 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 re-enrollment in the Medicaid program. The original property fee was comprised of two components, a property allowance and a property value factor. The differentiation of fee into these components was eliminated effective July 1, 2002. At that time each facility's fee was re-established based on the sum of the property allowance and value factor.

The property fees in effect on June 1, 2008 were inflated with 12 months of inflation effective July 1, 2008. The inflation factor was from the IHS Global Insight, CMS Nursing Home without Capital Market Basket. 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 inflated 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. 129-10-25).

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 \$2.25 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 \$0.20 per diem add-on. Providers that achieve a turnover rate at or below the 75th percentile will earn a \$2.25 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 \$0.20. Finally, providers that have a Medicaid occupancy percentage of 60% or more will receive a \$1.00 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
CMI adjusted staffing ratio ≥ 75th percentile (5.09), or CMI adjusted staffing < 75th percentile but improved ≥ 10%	\$2.25 \$0.20
Staff turnover rate ≤ 75th percentile, 44% or Staff turnover rate > 75th percentile but reduced ≥ 10%	\$2.25 \$0.20
Medicaid occupancy ≥ 60%	\$1.00
Total Incentive Points Available	\$5.90

The Culture Change/Person-Centered Care Incentive Program

The Culture Change/Person-Centered Care Incentive Program (PEAK 2.0) includes six different incentive levels to recognize homes that are either pursuing culture

change, have made major achievements in the pursuit of culture change, have met minimum competencies in person-centered care, have sustained person-centered care, or are mentoring others in person-centered care.

Each incentive level has a specific pay-for-performance incentive per diem attached to it that homes can earn by meeting defined outcomes. The first three levels (Level 0 – Level 2) are intended to encourage quality improvement for homes that have not yet met the minimum competency requirements for a person-centered care home. Homes can earn both of these incentives simultaneously as they progress toward the minimum competency level.

Level 3 recognizes those homes that have attained a minimum level of core competency in person-centered care. Level 4 and Level 5 are reserved for those homes that have demonstrated sustained person-centered care for multiple years and have gone on to mentor other homes in their pursuit of person-centered care. The table below provides a brief overview of each of the levels.

Level & Per Diem Incentive	Summary of Required Nursing Home Action	Incentive Duration
Level 0 The Foundation \$0.50	Home completes the KCCI evaluation tool according to the application instructions. Home participates in all required activities noted in "The Foundation" timeline and workbook. Homes that do not complete the requirements at this level must sit out of the program for one year before they are eligible for reapplication.	Available beginning July 1 of enrollment year. Incentive granted for one full fiscal year.
Level 1 Pursuit of Culture Change \$0.50	Homes should submit the KCCI evaluation tool (annually). Home submits an action plan addressing 4 PEAK 2.0 cores in Domains 1-4. The home self-reports progress on the action planned cores via phone conference with the PEAK team. The home may be selected for a random site visit. The home must participate in the random site visit, if selected, to continue incentive payment. Homes should demonstrate successful completion of 75% of core competencies selected. A home can apply for Levels 1 & 2 in the same year. Homes that do not achieve Level 2 with three consecutive years of participation at Level 1 must return to a Level 0 or sit out for two years depending on KDADS and KSU's recommendation.	Available beginning July 1 of enrollment year. Incentive granted for one full fiscal year.
Level 2 Culture Change Achievement \$1.00	This is a bridge level to acknowledge achievement in Level 1. Homes may receive this level at the same time they are working on other PEAK core areas at Level 1. Homes may receive this incentive for up to 3 years. If Level 3 is not achieved at the end of the third year, homes must start back at Level 0 or 1 depending on KDADS and KSU's recommendation.	Available beginning July 1 following confirmed completion of action plan goals. Incentive is granted for one full fiscal year.
Level 3 Person-Centered Care Home \$2.00	Demonstrates minimum competency as a person-centered care home (see KDADS full criteria). This is confirmed through a combination of the following: High score on the KCCI evaluation tool.	

	Demonstration of success in other levels of the program. Performing successfully on a Level 2 screening call with the KSU PEAK 2.0 team. Passing a full site visit.	Available beginning July 1 following confirmed minimum competency as a person-centered care home. Incentive is granted for one full fiscal year. Renewable bi-annually.
Level 4 Sustained Person-Centered Care Home \$3.00	Homes earn person-centered care home award two consecutive years.	Available beginning July 1 following confirmation of the upkeep of minimum person-centered care competencies. Incentive is granted for two fiscal years. Renewable bi-annually.
Level 5 Person-Centered Care Mentor Home \$4.00	Homes earn sustained person-centered care home award and successfully engage in mentoring activities suggested by KDADS (see KDADS mentoring activities). Mentoring activities should be documented.	Available beginning July 1 following confirmation of mentor home standards. Incentive is granted for two fiscal years. Renewable bi-annually.

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

outcomes 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 3.56, which is 120% of the statewide NFMH median of 2.97. They will receive one point if the ratio is less than 120% of the NFMH median but greater than or equal to 3.27, 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 \$18.60, or 90% of the statewide median of \$20.67.

(continued)

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 39%, 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 39% but equal to or below 61%, 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 74%, the 75th percentile statewide will earn two points. Providers with staff retention rates below 74% but at or above 62%, the 50th percentile statewide, will earn one point.

The table below summarizes the incentive factor outcomes and points:

Quality/Efficiency Outcome	Incentive Points
CMI adjusted staffing ratio ≥ 120% (3.56) of NF-MH median (2.97), or CMI adjusted staffing ratio between 110% (3.27) and 120%	2, or 1
Total occupancy ≤ 90%	1
Operating expenses < \$18.60, 90% of NF-MH median, \$20.67	1
Staff turnover rate ≤ 75th percentile, 39% Staff turnover rate ≤ 50th percentile, 61% Contracted labor < 10% of total direct health care labor costs	2, or 1
Staff retention ≥ 75th percentile, 74% Staff retention ≥ 50th percentile, 62%	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.

<u>Total Incentive Points:</u>	<u>Incentive Factor Per Diem:</u>
Tier 1: 6-8 points	\$7.50
Tier 2: 5 points	\$5.00
Tier 3: 4 points	\$2.50
Tier 4: 0-3 points	\$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 12-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.

<u>Rate Effective Date:</u>	<u>Review Period End Date:</u>
July 1	March 31st

October 1	June 30th
January 1	September 30th
April 1	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 1, Subpart U: Quality Care Assessment Per Diem Pass-Through:

To compensate providers for increased expenses incurred due to the quality care assessment, a per diem pass-through will be determined and paid to each Medicaid provider. The per diem will be added to the nursing facility Medicaid per diem rate. 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 will be eligible for the quality care assessment pass-through per diem.

2) Per Diem Pass-Through Calculation. The quality care assessment pass-through per diem will be determined by multiplying the quarterly quality care assessment paid by each qualifying provider by four to determine an annualized assessment expense. The annualized assessment expense will be divided by the total resident days from the calendar year cost report preceding the start of the fiscal year. For example, during fiscal year 2017 (July 1, 2016 through June 30, 2017), the resident day total from the calendar year 2015 cost report will be used to determine the per diem pass-through.

For providers filing a projected cost report the projected resident day total will be used to initially calculate the pass-through per diem. The per diem pass-through will be adjusted retroactively for an historical cost report covering the projection period.

Iia. Proposed Medicaid Per Diem Rates for Kansas Nursing Facilities Under Scenario One: Quality Care Assessment Sunsets June 30, 2016

A. Cost Center Limitations: The state proposes the following cost center limitations for scenario one where the Quality Care Assessment sunsets June 30, 2016. These limits will be used in setting rates effective July 1, 2016.

Cost Center	Limit Formula	Per Day Limit
Operating	110% of the Median Cost	\$32.25
Indirect Health Care	115% of the Median Cost	\$47.78
Direct Health Care	130% of the Median Cost	\$103.69
Real and Personal Property Fee	105% of the Median Fee	\$9.38

These amounts were determined according to the “Reimbursement Limitations” section. The Direct Health-care Limit is calculated based on a CMI of 1.0144, which is the statewide average.

B. Case Mix Index: These proposed rates are based upon each nursing facility’s Medicaid CMI calculated as the average of the quarterly Medicaid CMI averages with a cutoff dates of January 1, 2016 and April 1, 2016. The CMI calculations use the July 1, 2014 Kansas Medicaid/Medikan CMI Table. In Section II.C below, each nursing facility’s Medicaid average CMI is listed beside its proposed per diem rate.

C. Proposed Rates: 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.

Facility Name	City	Daily Rate	Medicaid CMI
Village Manor	Abilene	150.95	0.9702
Alma Manor	Alma	153.11	0.8742
Life Care Center of Andover	Andover	149.51	1.1275
Victoria Falls SNF	Andover	160.80	0.9897
Anthony Community Care Center	Anthony	144.78	0.9487
Medicalodges Arkansas City	Arkansas City	150.13	0.9936
Arkansas City Presbyterian Manor	Arkansas City	158.68	0.9841
Arma Health and Rehabilitation	Arma	119.08	1.2317
Medicalodges Atchison	Atchison	166.98	1.0442
Atchison Senior Village	Atchison	156.16	0.9143
Dooley Center	Atchison	165.56	0.7664
Attica Long Term Care	Attica	152.04	0.9204
Good Samaritan Society-Atwood	Atwood	157.37	0.9588
Lake Point Nursing Center	Augusta	142.63	1.0070
Baldwin Care Center	Baldwin City	131.20	0.9252
Quaker Hill Manor	Baxter Springs	131.05	1.0660
Great Plains of Republic County, Inc	Belleville	175.34	0.9752
Belleville Healthcare Center	Belleville	116.82	0.9835
Mitchell County Hosptial LTCU	Beloit	167.85	0.9500
Hilltop Lodge Nursing Home	Beloit	139.17	0.9360
Bonner Springs Nursing and Rehabilitation Center	Bonner Springs	145.21	1.0350
Hill Top House	Bucklin	162.84	1.0409
Buhler Sunshine Home, Inc.	Buhler	171.02	1.0304
Life Care Center of Burlington	Burlington	135.12	1.0417
Caney Nursing Center	Caney	89.50	0.7979
Eastridge Nursing Home	Centralia	171.18	0.9928
Heritage Health Care Center	Chanute	129.01	1.0663
Diversicare of Chanute	Chanute	134.98	0.9945
Chapman Valley Manor	Chapman	138.47	0.9483
Cheney Golden Age Home Inc.	Cheney	156.85	1.1225
Cherryvale Care Center	Cherryvale	117.51	1.0501
Chetopa Manor	Chetopa	130.34	1.1262

The Shepherd’s Center	Cimarron	135.73	0.9125
Medicalodges Clay Center	Clay Center	162.65	0.9805
Clay Center Presbyterian Manor	Clay Center	181.36	1.1084
Clearwater Nursing and Rehabilitation Center	Clearwater	162.79	1.1879
Park Villa Nursing Home	Clyde	144.13	1.0293
Coffeyville Regional Medical Center	Coffeyville	178.69	0.0000
Windsor Place	Coffeyville	148.60	1.0236
Medicalodges Coffeyville	Coffeyville	172.45	1.0175
Colby Health and Rehabilitation	Colby	136.37	1.2435
Prairie Senior Living Complex	Colby	163.95	0.9294
Pioneer Lodge	Coldwater	141.10	0.9287
Medicalodges Columbus	Columbus	156.42	0.9647
Mt Joseph Senior Village, LLC	Concordia	139.21	1.0698
Sunset Home, Inc.	Concordia	148.19	1.0331
Spring View Manor	Conway Springs	127.53	0.9383
Golden Living Center-Chase Co.	Cottonwood Falls	135.45	1.0833
Diversicare of Council Grove	Council Grove	126.78	0.9806
Hilltop Manor Nursing Center	Cunningham	131.92	1.1648
Westview of Derby	Derby	126.85	1.0092
Derby Health and Rehabilitation	Derby	184.95	1.1953
Hillside Village	DeSoto	148.14	0.9623
Lane County Hospital-LTCU	Dighton	170.47	0.9600
Trinity Manor	Dodge City	153.81	0.9711
Good Samaritan Society-Dodge City	Dodge City	136.08	0.8852
Manor of the Plains	Dodge City	158.05	0.9478
Medicalodges Douglass	Douglass	151.81	0.9602
Golden Living Center-Downs	Downs	130.47	1.0640
Country Care Home	Easton	134.34	0.9759
Golden Living Center-Parkway	Edwardsville	142.48	1.0289
Golden Living Center-Kaw River	Edwardsville	165.82	1.0247
Golden Living Center-Edwardsville	Edwardsville	129.93	0.7804
Lakepoint Nursing Center-El Dorado	El Dorado	132.85	1.0300
Golden Living Center-El Dorado	El Dorado	142.43	1.0279
Morton Co Senior Living Community	Elkhart	139.37	0.0000
Woodhaven Care Center	Ellinwood	140.26	0.9863
Good Samaritan Society-Ellis	Ellis	152.73	1.0319
Good Sam Society-Ellsworth Village	Ellsworth	141.97	0.9996
Emporia Presbyterian Manor	Emporia	172.39	1.0543
Holiday Resort	Emporia	130.90	0.9767
Flint Hills Care Center, Inc.	Emporia	117.84	0.9650
Enterprise Estates Nursing Center, I	Enterprise	130.14	0.9840
Golden Living Center-Eskridge	Eskridge	107.18	0.7353
Medicalodges Eudora	Eudora	136.69	0.9484
Eureka Nursing Center	Eureka	146.09	1.1601
Kansas Soldiers’ Home	Fort Dodge	162.94	0.9771
Medicalodges Fort Scott	Fort Scott	154.03	0.9637
Fort Scott Manor	Fort Scott	123.54	0.9353
Fowler Residential Care	Fowler	167.94	0.9413
Frankfort Community Care Home, Inc.	Frankfort	138.20	0.9343
Medicalodges Frontenac	Frontenac	139.04	1.0239
Galena Nursing Home	Galena	128.51	0.0000
Garden Valley Retirement Village	Garden City	139.55	1.0079
Homestead Health & Rehab	Garden City	153.36	0.9097

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Meadowbrook Rehab Hosp., LTCU	Gardner	195.03	1.1791	Golden Living Center-Lansing	Lansing	145.42	0.9992
Medicalodges Gardner	Gardner	141.17	0.9030	Twin Oaks Health & Rehab	Lansing	178.98	0.9921
Anderson County Hospital	Garnett	168.61	0.8408	Diversicare of Larned	Larned	129.08	0.9135
Golden Heights Living Center	Garnett	138.60	0.8993	Lawrence Presbyterian Manor	Lawrence	161.44	0.9185
Medicalodges Girard	Girard	125.97	0.9106	Brandon Woods at Alvamar	Lawrence	170.22	0.9456
The Nicol Home, Inc.	Glasco	147.00	0.9354	Pioneer Ridge Retirement Community	Lawrence	167.53	1.0319
Medicalodges Goddard	Goddard	162.79	1.0248	Medicalodges Leavenworth	Leavenworth	151.44	0.8647
Bethesda Home	Goessel	162.41	0.9463	Delmar Gardens of Lenexa	Lenexa	134.00	0.9681
Good Samaritan Society- Sherman County	Goodland	154.38	0.9796	Lakeview Village	Lenexa	187.86	1.0846
Cherry Village Benevolence	Great Bend	139.13	0.9227	The Covenant Place of Lenexa	Lenexa	182.37	1.0283
Great Bend Health and Rehab Center	Great Bend	129.13	1.0135	Leonardville Nursing Home	Leonardville	128.01	0.8734
Halstead Health and Rehab Center	Halstead	144.19	0.9534	Wichita County Health Center	Leoti	159.48	0.8540
Haviland Health and Rehabilitation	Haviland	85.43	0.7292	Good Samaritan Society-Liberal	Liberal	139.39	0.9984
Good Samaritan Society-Hays	Hays	144.61	0.9885	Wheatridge Park Care Center	Liberal	148.52	0.8985
Via Christi Village-Hays	Hays	155.23	0.9308	Lincoln Park Manor, Inc.	Lincoln	142.01	0.9899
Diversicare of Haysville	Haysville	142.11	1.1205	Bethany Home Association	Lindsborg	172.51	0.9370
Legacy at Herington	Herington	137.47	0.9612	Linn Community Nursing Home	Linn	136.80	0.9613
Schowalter Villa	Hesston	186.57	0.9932	Sandstone Heights Nursing Home	Little River	172.97	0.9509
Maple Heights of Hiawatha	Hiawatha	126.16	0.9656	Logan Manor Community Health Service	Logan	165.80	1.0460
Highland Healthcare and Rehab Center	Highland	122.89	1.0502	Louisburg Care Center	Louisburg	135.73	1.0222
Dawson Place, Inc.	Hill City	140.87	0.9100	Good Samaritan Society-Lyons	Lyons	147.52	0.9271
Salem Home	Hillsboro	149.66	0.9100	Meadowlark Hills	Manhattan	170.38	0.9890
Parkside Homes, Inc.	Hillsboro	158.97	0.9662	Stoneybrook Retirement Community	Manhattan	165.84	0.9949
Medicalodges Jackson County	Holton	151.12	1.0004	Via Christi Village Manhattan, Inc	Manhattan	144.68	0.9858
Mission Village Living Center	Horton	100.05	0.7955	St. Luke Living Center	Marion	141.45	0.8917
Sheridan County Hospital	Hoxie	170.48	0.9270	Riverview Estates, Inc.	Marquette	138.48	0.8856
Pioneer Manor	Hugoton	179.20	0.9234	Cambridge Place	Marysville	135.56	0.9976
Diversicare of Hutchinson	Hutchinson	135.68	0.9776	McPherson Health and Rehabilitation	McPherson	114.11	1.2003
Good Sam Society- Hutchinson Village	Hutchinson	159.59	0.9821	The Cedars, Inc.	McPherson	163.30	0.9790
Hutchinson Health and Rehabilitation	Hutchinson	124.14	1.1225	Meade District Hospital, LTCU	Meade	184.88	0.9780
Wesley Towers	Hutchinson	177.52	0.9963	Trinity Nursing & Rehab Ctr	Merriam	152.05	1.0909
Ray E. Dillon Living Center	Hutchinson	167.95	0.9369	Great Plains of Ottawa County, Inc.	Minneapolis	144.38	0.9145
Medicalodges Independence	Independence	160.83	1.0738	Good Samaritan Society- Minneapolis	Minneapolis	137.49	0.9355
Montgomery Place Nursing Center, LLC	Independence	135.64	1.0771	Minneola District Hospital-LTCU	Minneola	177.54	0.9729
Pleasant View Home	Inman	152.60	0.8880	Bethel Home, Inc.	Montezuma	155.56	0.8853
Windsor Place at Iola, LLC	Iola	148.90	1.0160	Moran Manor	Moran	124.54	1.0496
Hodgeman Co Health Center- LTCU	Jetmore	184.28	1.0988	Pine Village	Moundridge	158.12	1.0328
Stanton County Hospital- LTCU	Johnson	163.30	0.8607	Moundridge Manor, Inc.	Moundridge	155.77	0.8821
Valley View Senior Life	Junction City	155.02	0.9960	Mt. Hope Nursing Center	Mt. Hope	142.24	1.0021
Medicalodges Post Acute Care Center	Kansas City	166.51	1.1358	Villa Maria, Inc.	Mulvane	141.19	0.9708
Kansas City Presbyterian Manor	Kansas City	182.09	1.0438	Golden Living Center-Neodesha	Neodesha	127.61	1.0737
Lifecare Center of Kansas City	Kansas City	148.36	1.1208	Ness County Hospital Dist.#2	Ness City	165.80	0.9188
Providence Place	Kansas City	183.11	1.0095	Asbury Park	Newton	166.85	0.9727
Kansas City Transitional Care Ctr	Kansas City	203.55	1.1958	Kansas Christian Home	Newton	153.75	0.9519
Kensington Health and Rehabilitation	Kensington	119.30	1.1680	Newton Presbyterian Manor	Newton	168.52	0.9628
The Wheatlands	Kingman	136.71	0.9039	Bethel Care Center	North Newton	174.83	1.0500
Medicalodges Kinsley	Kinsley	170.75	0.9270	Andbe Home, Inc.	Norton	144.67	0.9099
Kiowa District Manor	Kiowa	161.63	0.9063	Village Villa	Nortonville	124.34	1.0202
Rush Co. Memorial Hospital	LaCrosse	142.34	0.9181	Logan County Manor	Oakley	168.98	0.9324
Locust Grove Village	LaCrosse	140.34	0.8653	Good Samaritan Society- Decatur Co.	Oberlin	147.72	0.9495
High Plains Retirement Village	Lakin	173.54	0.9098	Villa St. Francis	Olathe	179.36	1.0932
				Pinnacle Ridge Nursing and Rehabilitation Center	Olathe	165.34	1.1814
				Royal Terrace Nursing & Rehab Ctr.	Olathe	142.12	0.9312

Good Samaritan Society-Olathe	Olathe	165.88	0.9594	Apostolic Christian Home	Sabetha	137.03	0.9529
Evergreen Community of Johnson County	Olathe	178.95	0.9514	Smoky Hill Rehabilitation Center	Salina	123.24	0.9391
Aberdeen Village, Inc.	Olathe	186.15	1.0329	Kenwood View Health and Rehab Center	Salina	142.16	1.0076
Nottingham Health & Rehab	Olathe	179.53	1.1096	Legacy at Salina	Salina	135.71	0.9834
Onaga Health and Rehabilitation	Onaga	117.74	1.2356	Pinnacle Park Nursing and Rehabilitation Center	Salina	129.18	1.0521
Peterson Health Care	Osage City	121.20	0.9614	Salina Presbyterian Manor	Salina	169.46	0.9936
Osage Nursing & Rehab Center	Osage City	140.69	1.1113	Holiday Resort of Salina	Salina	154.10	0.9776
Life Care Center of Osawatomie	Osawatomie	148.03	1.1089	Satanta Dist. Hosp. LTCU	Satanta	167.34	0.9142
Parkview Care Center	Osborne	135.32	0.9292	Park Lane Nursing Home	Scott City	172.41	0.9182
Hickory Pointe Care & Rehab Ctr	Oskaloosa	138.73	1.0086	Pleasant Valley Manor	Sedan	112.89	0.9043
Oswego Health and Rehabilitation	Oswego	138.69	1.3558	Diversicare of Sedgwick	Sedgwick	144.47	1.0278
Ottawa Retirement Village	Ottawa	132.27	1.0460	Crestview Nursing & Residential Living	Seneca	109.65	0.9933
Brookside Manor	Overbrook	125.14	0.9256	Life Care Center of Seneca	Seneca	126.59	1.0382
Garden Terrace at Overland Park	Overland Park	148.52	1.0295	Wallace County Community Center	Sharon Springs	154.09	0.9231
Promise Skilled Nursing of Overland Park	Overland Park	175.92	1.5314	Shawnee Gardens Nursing Center	Shawnee	129.49	0.9651
Leisure Terrace	Overland Park	157.64	0.9729	Sharon Lane Health Services	Shawnee	134.21	1.0032
Villa Saint Joseph	Overland Park	183.53	1.0318	Smith County Memorial Hospital LTCU	Smith Center	162.36	0.9515
Delmar Gardens of Overland Park	Overland Park	160.35	0.9766	Smith Center Health and Rehabilitation	Smith Center	113.00	1.0834
Overland Park Nursing & Rehab	Overland Park	160.61	1.0665	Mennonite Friendship Manor, Inc.	South Hutchinson	163.81	0.9583
Indian Creek Healthcare Center	Overland Park	159.26	1.0833	Golden Living Center-Spring Hill	Spring Hill	146.11	1.0441
Village Shalom, Inc.	Overland Park	178.28	0.9424	Good Samaritan Society-Cheyenne Cnty	St Francis	164.00	0.9876
Tallgrass Creek, Inc.	Overland Park	182.87	0.0000	Prairie Mission Retirement Village	St. Paul	137.13	1.0639
Riverview Manor, Inc.	Oxford	106.46	0.9589	Leisure Homestead at St. John	St. John	132.09	0.8817
Medicalodges Paola	Paola	107.86	0.6449	Community Hospital of Onaga, LTCU	St. Mary's	160.23	0.9364
North Point Skilled Nursing Center	Paola	155.05	1.1472	Leisure Homestead at Stafford	Stafford	139.98	1.0666
Elmhaven East	Parsons	124.44	0.9921	Sterling Presbyterian Manor	Sterling	164.93	0.8861
Elmhaven West	Parsons	131.01	1.0314	Solomon Valley Manor	Stockton	156.97	1.0144
Parsons Presbyterian Manor	Parsons	159.01	0.9971	Seasons of Life Living Center	Syracuse	171.48	0.9763
Good Samaritan Society-Parsons	Parsons	144.02	0.9509	Tonganoxie Nursing Center	Tonganoxie	138.03	1.0234
Peabody Health and Rehabilitation	Peabody	120.30	1.0718	Brewster Health Center	Topeka	175.61	0.9709
Franklin Healthcare of Peabody	Peabody	87.67	0.6677	Topeka Presbyterian Manor Inc.	Topeka	173.27	0.9758
Phillips County Retirement Center	Phillipsburg	129.89	0.9556	Legacy on 10th Avenue	Topeka	131.51	0.9204
Medicalodges Pittsburg South	Pittsburg	149.73	0.9333	McCrite Plaza Health Center	Topeka	154.45	0.9728
Golden Living Center-Pittsburg	Pittsburg	130.45	1.0114	Rolling Hills Health Center	Topeka	161.70	1.0296
Via Christi Village Pittsburg, Inc	Pittsburg	126.58	0.9532	Manorcare Health Services of Topeka	Topeka	155.62	1.0517
Rooks County Senior Services, Inc.	Plainville	161.21	1.0420	Tanglewood Nursing and Rehabilitation	Topeka	129.48	1.0597
Brighton Gardens of Prairie Village	Prairie Village	182.35	0.0000	Brighton Place West	Topeka	100.87	0.7426
Pratt Regional Medical Center	Pratt	166.99	1.0218	Countryside Health Center	Topeka	104.38	0.8372
Pratt Health and Rehabilitation	Pratt	125.66	1.3203	Providence Living Center	Topeka	91.15	0.7301
Prescott Country View Nursing Center	Prescott	131.61	1.0124	Brighton Place North	Topeka	83.96	0.6985
Prairie Sunset Manor	Pretty Prairie	153.76	0.9336	Aldersgate Village	Topeka	181.32	1.0817
Protection Valley Manor	Protection	118.03	0.7685	Plaza West Care Center, Inc.	Topeka	172.19	1.0527
Gove County Medical Center	Quinter	185.73	1.0701	Lexington Park Nursing and Post Acute Center	Topeka	187.30	1.0550
Grisell Memorial Hosp Dist #1-LTCU	Ransom	158.28	0.9677	Greeley County Hospital, LTCU	Tribune	162.59	0.8775
Richmond Healthcare and Rehabilitation Center	Richmond	138.73	0.9378	The Legacy at Park View	Ulysses	173.56	0.9381
Fountainview Nursing and Rehab Center	Rose Hill	134.45	1.1175	Valley Health Care Center	Valley Falls	115.92	0.6273
Rossville Healthcare & Rehab Center	Rossville	136.77	1.0344	Trego Co. Lemke Memorial LTCU	Wakeeney	161.16	0.8249
Wheatland Nursing & Rehab Center	Russell	138.69	1.0653	Trego Manor	Wakeeney	155.64	0.9687
Russell Regional Hospital	Russell	174.87	0.9067	Golden Living Center-Wakefield	Wakefield	143.70	0.9678
Sabetha Nursing Center	Sabetha	136.95	1.0256				

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Good Samaritan Society-Valley Vista	Wamego	153.09	0.9462
The Centennial Homestead, Inc.	Washington	140.29	0.9932
Wathena Nursing & Rehab Center	Wathena	132.45	0.9760
Coffey County Hospital	Waverly	166.77	0.8973
Golden Living Center-Wellington	Wellington	129.65	0.9539
Wellington Health and Rehab	Wellington	122.50	1.1052
Wellsville Manor	Wellsville	125.93	0.9994
Westy Community Care Home	Westmoreland	116.40	0.8475
Wheat State Manor	Whitewater	155.54	0.9867
Medicalodges Wichita	Wichita	155.72	1.0507
Meridian Rehab and Health Care Center	Wichita	135.75	1.0292
Catholic Care Center Inc.	Wichita	164.97	0.9825
Kansas Masonic Home	Wichita	169.11	1.0749
Homestead Health Center, Inc.	Wichita	175.78	0.9962
Woodlawn Rehab and Health Care Ctr	Wichita	105.72	1.0048
Wichita Presbyterian Manor	Wichita	171.49	0.9855
Sandpiper Healthcare and Rehab Center	Wichita	134.06	1.0065
Lakepoint Nursing and Rehabilitation	Wichita	144.89	0.9996
Manorcare Health Services of Wichita	Wichita	148.01	1.1043
Legacy at College Hill	Wichita	136.32	0.9040
Rolling Hills Health and Rehab	Wichita	122.70	1.1705
Golden Living Center-Wichita	Wichita	131.03	0.8588
The Health Care Center at Larksfield Place	Wichita	175.99	1.0942
Life Care Center of Wichita	Wichita	153.19	1.0828
Via Christi Hope	Wichita	137.61	0.0000
Family Health & Rehabilitation Center	Wichita	156.68	0.9489
Caritas Center	Wichita	149.18	0.7575
Regent Park Rehab and Healthcare	Wichita	190.39	1.1206
Avita Health & Rehab of Reeds Cove	Wichita	182.45	1.0365
Via Christi Village Ridge	Wichita	174.34	0.9526
Via Christi Village McLean, Inc.	Wichita	144.75	1.0040
Golden Living Center-Wilson	Wilson	136.93	1.0731
F W Huston Medical Center	Winchester	139.48	0.9589
Winfield Senior Living Community	Winfield	141.58	1.0112
Cumbernauld Village, Inc.	Winfield	178.25	0.9501
Winfield Rest Haven II LLC	Winfield	163.68	0.9628
Kansas Veterans' Home	Winfield	156.35	0.9422
Yates Center Health and Rehabilitation	Yates Center	122.82	1.2217

IIIa. Justifications for the Proposed Rates Under Scenario One: Quality Care Assessment Sunsets June 30, 2016

1. The proposed rates are calculated according to the rate-setting methodology in the Kansas Medicaid State Plan and pending amendments thereto.
2. The proposed rates are calculated according to a methodology which satisfies the requirements of K.S.A. 39-708c(x) and the DHCF regulations in K.A.R. Article 129-10 implementing that statute and applicable federal law.
3. The State's analyses project that the proposed rates:
 - a. Would result in payment, in the aggregate of 80.96% of the Medicaid day weighted average inflated al-

- lowable nursing facility costs statewide; and
 - b. Would result in a maximum allowable rate of \$193.10; with the total average allowable cost being \$146.24.
 - c. Estimated average rate July 1, 2016 \$146.24
 - d. Average payment rate July 1, 2015 \$158.33
- | | |
|-------------------|-----------|
| Amount of change | \$(12.09) |
| Percent of change | -7.64% |
4. Estimated annual aggregate expenditures in the Medicaid nursing facility services payment program will decrease approximately \$50 million from last year.
 5. The state estimates that the proposed rates will continue to make quality care and services available under the Medicaid State Plan at least to the extent that care and services are available to the general population in the geographic area. The state's analyses indicate:
 - a. Service providers operating a total of 324 nursing facilities and hospital-based long-term care units (representing 95.3% of all the licensed nursing facilities and long-term care units in Kansas) 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 84.16%;
 - d. The statewide average Medicaid occupancy rate for participating facilities is 61.61%; and
 - e. The proposed rates would cover 86.66% of the estimated Medicaid direct 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 proposed methodology will result in compliance with the federal regulation.

IIIb. Proposed Medicaid Per Diem Rates for Kansas Nursing Facilities Under Scenario Two: Quality Care Assessment Parameters of Senate Bill 457 are Implemented

A. Cost Center Limitations: The state proposes the following cost center limitations for scenario two where the Quality Care Assessment parameters included in Senate Bill 457 and implemented. These limits will be used in setting rates effective July 1, 2016.

Cost Center	Limit Formula	Per Day Limit
Operating	110% of the Median Cost	\$32.92
Indirect Health Care	115% of the Median Cost	\$52.69
Direct Health Care	130% of the Median Cost	\$117.08
Real and Personal Property Fee	105% of the Median Fee	\$9.70

These amounts were determined according to the "Reimbursement Limitations" section. The Direct Health-care Limit is calculated based on a CMI of 1.0168, which is the statewide average.

B. Case Mix Index: These proposed rates are based upon each nursing facility's Medicaid CMI calculated as the average of the quarterly Medicaid CMI averages with a cutoff dates of January 1, 2016 and April 1, 2016. The CMI calculations use the July 1, 2014 Kansas Medicaid/

Medikan CMI Table. In Section II.C below, each nursing facility's Medicaid average CMI is listed beside its proposed per diem rate.

C. Proposed Rates: 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.

Facility Name	City	Daily Rate	Medicaid CMI
Village Manor	Abilene	181.56	0.9702
Alma Manor	Alma	181.44	0.8742
Life Care Center of Andover	Andover	170.34	1.1275
Victoria Falls SNF	Andover	189.25	0.9897
Anthony Community Care Center	Anthony	163.36	0.9487
Medicalodges Arkansas City	Arkansas City	178.97	0.9936
Arkansas City Presbyterian Manor	Arkansas City	192.32	0.9841
Arma Health and Rehabilitation	Arma	153.04	1.2317
Medicalodges Atchison	Atchison	201.54	1.0442
Atchison Senior Village	Atchison	190.37	0.9143
Dooley Center	Atchison	206.95	0.7664
Attica Long Term Care	Attica	195.21	0.9204
Good Samaritan Society-Atwood	Atwood	200.53	0.9588
Lake Point Nursing Center	Augusta	174.34	1.0070
Baldwin Care Center	Baldwin City	158.83	0.9252
Quaker Hill Manor	Baxter Springs	157.42	1.0660
Great Plains of Republic County, Inc	Belleville	211.52	0.9752
Belleville Healthcare Center	Belleville	141.73	0.9835
Mitchell County Hospital LTCU	Beloit	195.19	0.9500
Hilltop Lodge Nursing Home	Beloit	161.65	0.9360
Bonner Springs Nursing and Rehabilitation Center	Bonner Springs	173.30	1.0350
Hill Top House	Bucklin	189.91	1.0409
Buhler Sunshine Home, Inc.	Buhler	216.48	1.0304
Life Care Center of Burlington	Burlington	166.20	1.0417
Caney Nursing Center	Caney	112.47	0.7979
Eastridge Nursing Home	Centralia	213.09	0.9928
Heritage Health Care Center	Chanute	155.79	1.0663
Diversicare of Chanute	Chanute	173.45	0.9945
Chapman Valley Manor	Chapman	163.48	0.9483
Cheney Golden Age Home Inc.	Cheney	202.24	1.1225
Cherryvale Care Center	Cherryvale	143.87	1.0501
Chetopa Manor	Chetopa	160.35	1.1262
The Shepherd's Center	Cimarron	174.26	0.9125
Medicalodges Clay Center	Clay Center	197.40	0.9805
Clay Center Presbyterian Manor	Clay Center	208.57	1.1084
Clearwater Nursing and Rehabilitation Center	Clearwater	192.19	1.1879
Park Villa Nursing Home	Clyde	159.87	1.0293
Coffeyville Regional Medical Center	Coffeyville	216.53	0.0000
Windsor Place	Coffeyville	179.89	1.0236
Medicalodges Coffeyville	Coffeyville	196.83	1.0175
Colby Health and Rehabilitation	Colby	158.28	1.2435
Prairie Senior Living Complex	Colby	209.92	0.9294
Pioneer Lodge	Coldwater	170.25	0.9287
Medicalodges Columbus	Columbus	181.33	0.9647
Mt Joseph Senior Village, LLC	Concordia	159.30	1.0698
Sunset Home, Inc.	Concordia	174.49	1.0331
Spring View Manor	Conway Springs	152.96	0.9383
Golden Living Center-Chase Co.	Cottonwood Falls	159.97	1.0833
Diversicare of Council Grove	Council Grove	158.01	0.9806
Hilltop Manor Nursing Center	Cunningham	169.47	1.1648
Westview of Derby	Derby	160.36	1.0092
Derby Health and Rehabilitation	Derby	219.63	1.1953
Hillside Village	DeSoto	178.70	0.9623
Lane County Hospital-LTCU	Dighton	206.17	0.9600
Trinity Manor	Dodge City	185.81	0.9711
Good Samaritan Society-Dodge City	Dodge City	179.64	0.8852
Manor of the Plains	Dodge City	187.66	0.9478
Medicalodges Douglass	Douglass	178.25	0.9602
Golden Living Center-Downs	Downs	158.10	1.0640
Country Care Home	Easton	161.87	0.9759
Golden Living Center-Parkway	Edwardsville	171.06	1.0289
Golden Living Center-Kaw River	Edwardsville	183.73	1.0247
Golden Living Center-Edwardsville	Edwardsville	146.56	0.7804
Lakepoint Nursing Center-El Dorado	El Dorado	166.25	1.0300
Golden Living Center-El Dorado	El Dorado	178.08	1.0279
Morton Co Senior Living Community	Elkhart	173.92	0.0000
Woodhaven Care Center	Ellinwood	173.87	0.9863
Good Samaritan Society-Ellis	Ellis	177.31	1.0319
Good Sam Society-Ellsworth Village	Ellsworth	164.38	0.9996
Emporia Presbyterian Manor	Emporia	207.30	1.0543
Holiday Resort	Emporia	162.17	0.9767
Flint Hills Care Center, Inc.	Emporia	136.34	0.9650
Enterprise Estates Nursing Center	Enterprise	155.44	0.9840
Golden Living Center-Eskridge	Eskridge	128.64	0.7353
Medicalodges Eudora	Eudora	162.98	0.9484
Eureka Nursing Center	Eureka	169.03	1.1601
Kansas Soldiers' Home	Fort Dodge	196.83	0.9771
Medicalodges Fort Scott	Fort Scott	175.06	0.9637
Fort Scott Manor	Fort Scott	151.56	0.9353
Fowler Residential Care	Fowler	203.15	0.9413
Frankfort Community Care Home, Inc.	Frankfort	176.09	0.9343
Medicalodges Frontenac	Frontenac	161.73	1.0239
Galena Nursing Home	Galena	154.86	0.0000
Garden Valley Retirement Village	Garden City	160.87	1.0079
Homestead Health & Rehab	Garden City	185.99	0.9097
Meadowbrook Rehab Hosp., LTCU	Gardner	235.37	1.1791
Medicalodges Gardner	Gardner	171.22	0.9030
Anderson County Hospital	Garnett	198.20	0.8408
Golden Heights Living Center	Garnett	168.80	0.8993
Medicalodges Girard	Girard	144.30	0.9106
The Nicol Home, Inc.	Glasco	168.39	0.9354
Medicalodges Goddard	Goddard	198.58	1.0248
Bethesda Home	Goessel	197.70	0.9463
Good Samaritan Society-Sherman County	Goodland	188.24	0.9796
Cherry Village Benevolence	Great Bend	166.96	0.9227
Great Bend Health and Rehab Center	Great Bend	160.63	1.0135
Halstead Health and Rehab Center	Halstead	191.80	0.9534

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Haviland Health and Rehabilitation	Haviland	108.49	0.7292	Lincoln Park Manor, Inc.	Lincoln	171.59	0.9899
Good Samaritan Society-Hays	Hays	183.06	0.9885	Bethany Home Association	Lindsborg	207.27	0.9370
Via Christi Village-Hays	Hays	184.64	0.9308	Linn Community Nursing Home	Linn	154.88	0.9613
Diversicare of Haysville	Haysville	183.51	1.1205	Sandstone Heights Nursing Home	Little River	208.45	0.9509
Legacy at Herington	Herington	166.94	0.9612	Logan Manor Community Health Service	Logan	185.92	1.0460
Schowalter Villa	Hesston	224.00	0.9932	Louisburg Care Center	Louisburg	170.03	1.0222
Maple Heights of Hiawatha	Hiawatha	154.71	0.9656	Good Samaritan Society-Lyons	Lyons	172.62	0.9271
Highland Healthcare and Rehab Center	Highland	143.65	1.0502	Meadowlark Hills	Manhattan	189.33	0.9890
Dawson Place, Inc.	Hill City	177.59	0.9100	Stoneybrook Retirement Community	Manhattan	181.03	0.9949
Salem Home	Hillsboro	179.32	0.9100	Via Christi Village Manhattan, Inc	Manhattan	166.82	0.9858
Parkside Homes, Inc.	Hillsboro	199.05	0.9662	St. Luke Living Center	Marion	170.68	0.8917
Medicalodges Jackson County	Holton	184.41	1.0004	Riverview Estates, Inc.	Marquette	181.92	0.8856
Mission Village Living Center	Horton	134.84	0.7955	Cambridge Place	Marysville	178.37	0.9976
Sheridan County Hospital	Hoxie	206.50	0.9270	McPherson Health and Rehabilitation	McPherson	136.06	1.2003
Pioneer Manor	Hugoton	221.41	0.9234	The Cedars, Inc.	McPherson	199.67	0.9790
Diversicare of Hutchinson	Hutchinson	183.32	0.9776	Meade District Hospital, LTCU	Meade	220.99	0.9780
Good Sam Society-Hutchinson Village	Hutchinson	204.46	0.9821	Trinity Nursing & Rehab Ctr	Merriam	190.87	1.0909
Hutchinson Health and Rehabilitation	Hutchinson	133.83	1.1225	Great Plains of Ottawa County, Inc.	Minneapolis	160.07	0.9145
Wesley Towers	Hutchinson	214.66	0.9963	Good Samaritan Society-Minneapolis	Minneapolis	160.07	0.9355
Ray E. Dillon Living Center	Hutchinson	215.24	0.9369	Minneola District Hospital-LTCU	Minneola	213.58	0.9729
Medicalodges Independence	Independence	189.58	1.0738	Bethel Home, Inc.	Montezuma	188.21	0.8853
Montgomery Place Nursing Center, LLC	Independence	155.65	1.0771	Moran Manor	Moran	155.75	1.0496
Pleasant View Home	Inman	179.74	0.8880	Pine Village	Moundridge	185.76	1.0328
Windsor Place at Iola, LLC	Iola	183.23	1.0160	Moundridge Manor, Inc.	Moundridge	189.58	0.8821
Hodgeman Co Health Center-LTCU	Jetmore	222.90	1.0988	Mt. Hope Nursing Center	Mt. Hope	174.08	1.0021
Stanton County Hospital- LTCU	Johnson	197.05	0.8607	Villa Maria, Inc.	Mulvane	162.94	0.9708
Valley View Senior Life	Junction City	179.77	0.9960	Golden Living Center-Neodesha	Neodesha	146.80	1.0737
Medicalodges Post Acute Care Center	Kansas City	191.43	1.1358	Ness County Hospital Dist.#2	Ness City	201.55	0.9188
Kansas City Presbyterian Manor	Kansas City	212.80	1.0438	Asbury Park	Newton	199.36	0.9727
Lifecare Center of Kansas City	Kansas City	175.73	1.1208	Kansas Christian Home	Newton	185.48	0.9519
Providence Place	Kansas City	228.70	1.0095	Newton Presbyterian Manor	Newton	204.19	0.9628
Kansas City Transitional Care Ctr	Kansas City	258.61	1.1958	Bethel Care Center	North Newton	211.30	1.0500
Kensington Health and Rehabilitation	Kensington	166.54	1.1680	Andbe Home, Inc.	Norton	178.45	0.9099
The Wheatlands	Kingman	162.51	0.9039	Village Villa	Nortonville	149.10	1.0202
Medicalodges Kinsley	Kinsley	197.21	0.9270	Logan County Manor	Oakley	208.49	0.9324
Kiowa District Manor	Kiowa	202.27	0.9063	Good Samaritan Society-Decatur Co.	Oberlin	197.06	0.9495
Rush Co. Memorial Hospital	LaCrosse	189.47	0.9181	Villa St. Francis	Olathe	216.07	1.0932
Locust Grove Village	LaCrosse	170.86	0.8653	Pinnacle Ridge Nursing and Rehabilitation Center	Olathe	190.02	1.1814
High Plains Retirement Village	Lakin	208.32	0.9098	Royal Terrace Nursing & Rehab Ctr.	Olathe	207.62	0.9312
Golden Living Center-Lansing	Lansing	174.96	0.9992	Good Samaritan Society-Olathe	Olathe	204.94	0.9594
Twin Oaks Health & Rehab	Lansing	210.12	0.9921	Evergreen Community of Johnson Count	Olathe	214.43	0.9514
Diversicare of Larned	Larned	167.17	0.9135	Aberdeen Village, Inc.	Olathe	223.04	1.0329
Lawrence Presbyterian Manor	Lawrence	186.47	0.9185	Nottingham Health & Rehab	Olathe	217.83	1.1096
Brandon Woods at Alvamar	Lawrence	208.43	0.9456	Onaga Health and Rehabilitation	Onaga	156.20	1.2356
Pioneer Ridge Retirement Community	Lawrence	204.52	1.0319	Peterson Health Care	Osage City	136.83	0.9614
Medicalodges Leavenworth	Leavenworth	176.09	0.8647	Osage Nursing & Rehab Center	Osage City	164.82	1.1113
Delmar Gardens of Lenexa	Lenexa	160.30	0.9681	Life Care Center of Osawatomie	Osawatomie	178.95	1.1089
Lakeview Village	Lenexa	226.17	1.0846	Parkview Care Center	Osborne	159.33	0.9292
The Covenant Place of Lenexa	Lenexa	181.13	1.0283	Hickory Pointe Care & Rehab Ctr	Oskaloosa	159.85	1.0086
Leonardville Nursing Home	Leonardville	165.70	0.8734	Oswego Health and Rehabilitation	Oswego	144.60	1.3558
Wichita County Health Center	Leoti	193.14	0.8540	Ottawa Retirement Village	Ottawa	151.39	1.0460
Good Samaritan Society-Liberal	Liberal	170.89	0.9984	Brookside Manor	Overbrook	154.60	0.9256
Wheatridge Park Care Center	Liberal	196.93	0.8985				

Garden Terrace at Overland Park	Overland Park	175.32	1.0295	Life Care Center of Seneca	Seneca	162.82	1.0382
Promise Skilled Nursing of Overland	Overland Park	229.44	1.5314	Wallace County Community Center	Sharon Springs	189.23	0.9231
Leisure Terrace	Overland Park	180.77	0.9729	Shawnee Gardens Nursing Center	Shawnee	163.32	0.9651
Villa Saint Joseph	Overland Park	189.93	1.0318	Sharon Lane Health Services	Shawnee	169.17	1.0032
Delmar Gardens of Overland Park	Overland Park	190.18	0.9766	Smith County Memorial Hospital LTCU	Smith Center	201.79	0.9515
Overland Park Nursing & Rehab	Overland Park	194.57	1.0665	Smith Center Health and Rehabilitation	Smith Center	141.52	1.0834
Indian Creek Healthcare Center	Overland Park	182.60	1.0833	Mennonite Friendship Manor, Inc.	South Hutchinson	205.18	0.9583
Village Shalom, Inc.	Overland Park	208.50	0.9424	Golden Living Center-Spring Hill	Spring Hill	173.57	1.0441
Tallgrass Creek, Inc.	Overland Park	221.41	0.0000	Good Samaritan Society-Cheyenne Cnty	St Francis	194.81	0.9876
Riverview Manor, Inc.	Oxford	128.88	0.9589	Prairie Mission Retirement Village	St. Paul	166.15	1.0639
Medicalodges Paola	Paola	125.16	0.6449	Leisure Homestead at St. John	St. John	157.68	0.8817
North Point Skilled Nursing Center	Paola	185.50	1.1472	Community Hospital of Onaga, LTCU	St. Mary's	205.87	0.9364
Elmhaven East	Parsons	152.09	0.9921	Leisure Homestead at Stafford	Stafford	159.02	1.0666
Elmhaven West	Parsons	168.09	1.0314	Sterling Presbyterian Manor	Sterling	206.82	0.8861
Parsons Presbyterian Manor	Parsons	199.96	0.9971	Solomon Valley Manor	Stockton	199.73	1.0144
Good Samaritan Society-Parsons	Parsons	178.62	0.9509	Seasons of Life Living Center	Syracuse	208.58	0.9763
Peabody Health and Rehabilitation	Peabody	152.00	1.0718	Tonganoxie Nursing Center	Tonganoxie	162.35	1.0234
Franklin Healthcare of Peabody	Peabody	108.88	0.6677	Brewster Health Center	Topeka	209.46	0.9709
Phillips County Retirement Center	Phillipsburg	159.92	0.9556	Topeka Presbyterian Manor Inc.	Topeka	214.34	0.9758
Medicalodges Pittsburg South	Pittsburg	177.51	0.9333	Legacy on 10th Avenue	Topeka	158.62	0.9204
Golden Living Center-Pittsburg	Pittsburg	153.41	1.0114	McCrite Plaza Health Center	Topeka	177.25	0.9728
Via Christi Village Pittsburg, Inc	Pittsburg	141.25	0.9532	Rolling Hills Health Center	Topeka	184.77	1.0296
Rooks County Senior Services, Inc.	Plainville	186.06	1.0420	Manorcare Health Services of Topeka	Topeka	180.04	1.0517
Brighton Gardens of Prairie Village	Prairie Village	199.54	0.0000	Tanglewood Nursing and Rehabilitation	Topeka	158.35	1.0597
Pratt Regional Medical Center	Pratt	206.35	1.0218	Brighton Place West	Topeka	118.49	0.7426
Pratt Health and Rehabilitation	Pratt	153.09	1.3203	Countryside Health Center	Topeka	114.15	0.8372
Prescott Country View Nursing Center	Prescott	161.24	1.0124	Providence Living Center	Topeka	102.52	0.7301
Prairie Sunset Manor	Pretty Prairie	189.92	0.9336	Brighton Place North	Topeka	96.33	0.6985
Protection Valley Manor	Protection	150.34	0.7685	Aldersgate Village	Topeka	215.76	1.0817
Gove County Medical Center	Quinter	224.03	1.0701	Plaza West Care Center, Inc.	Topeka	203.15	1.0527
Grisell Memorial Hosp Dist #1-LTCU	Ransom	196.68	0.9677	Lexington Park Nursing and Post Acute Center	Topeka	224.13	1.0550
Richmond Healthcare and Rehabilitation Center	Richmond	165.27	0.9378	Greeley County Hospital, LTCU	Tribune	196.74	0.8775
Fountainview Nursing and Rehab Center	Rose Hill	185.51	1.1175	The Legacy at Park View	Ulysses	206.11	0.9381
Rossville Healthcare & Rehab Center	Rossville	174.26	1.0344	Valley Health Care Center	Valley Falls	142.92	0.6273
Wheatland Nursing & Rehab Center	Russell	169.62	1.0653	Trego Co. Lemke Memorial LTCU	Wakeeney	192.47	0.8249
Russell Regional Hospital	Russell	209.83	0.9067	Trego Manor	Wakeeney	186.78	0.9687
Sabetha Nursing Center	Sabetha	170.14	1.0256	Golden Living Center-Wakefield	Wakefield	175.98	0.9678
Apostolic Christian Home	Sabetha	167.51	0.9529	Good Samaritan Society-Valley Vista	Wamego	188.96	0.9462
Smoky Hill Rehabilitation Center	Salina	149.75	0.9391	The Centennial Homestead, Inc.	Washington	173.92	0.9932
Kenwood View Health and Rehab Center	Salina	181.90	1.0076	Wathena Nursing & Rehab Center	Wathena	164.05	0.9760
Legacy at Salina	Salina	161.09	0.9834	Coffey County Hospital	Waverly	194.03	0.8973
Pinnacle Park Nursing and Rehabilitation Center	Salina	166.28	1.0521	Golden Living Center-Wellington	Wellington	154.51	0.9539
Salina Presbyterian Manor	Salina	197.04	0.9936	Wellington Health and Rehab	Wellington	131.60	1.1052
Holiday Resort of Salina	Salina	197.11	0.9776	Wellsville Manor	Wellsville	146.80	0.9994
Satanta Dist. Hosp. LTCU	Satanta	201.62	0.9142	Westy Community Care Home	Westmoreland	130.21	0.8475
Park Lane Nursing Home	Scott City	196.80	0.9182	Wheat State Manor	Whitewater	179.83	0.9867
Pleasant Valley Manor	Sedan	141.95	0.9043	Medicalodges Wichita	Wichita	188.36	1.0507
Diversicare of Sedgwick	Sedgwick	183.04	1.0278	Meridian Rehab and Health Care Center	Wichita	168.63	1.0292
Crestview Nursing & Residential Living	Seneca	157.31	0.9933	Catholic Care Center Inc.	Wichita	188.87	0.9825

(continued)

Kansas Masonic Home	Wichita	206.36	1.0749
Homestead Health Center, Inc.	Wichita	223.72	0.9962
Woodlawn Rehab and Health Care Ctr	Wichita	121.96	1.0048
Wichita Presbyterian Manor	Wichita	216.94	0.9855
Sandpiper Healthcare and Rehab Center	Wichita	165.39	1.0065
Lakepoint Nursing and Rehabilitation	Wichita	170.21	0.9996
Manorcare Health Services of Wichita	Wichita	155.84	1.1043
Legacy at College Hill	Wichita	173.02	0.9040
Rolling Hills Health and Rehab	Wichita	152.39	1.1705
Golden Living Center-Wichita	Wichita	153.55	0.8588
The Health Care Center at Larksfield Place	Wichita	218.32	1.0942
Life Care Center of Wichita	Wichita	193.49	1.0828
Via Christi Hope	Wichita	188.29	0.0000
Family Health & Rehabilitation Center	Wichita	188.82	0.9489
Caritas Center	Wichita	186.05	0.7575
Regent Park Rehab and Healthcare	Wichita	220.74	1.1206
Avita Health & Rehab of Reeds Cove	Wichita	200.39	1.0365
Via Christi Village Ridge	Wichita	196.64	0.9526
Via Christi Village McLean, Inc.	Wichita	188.09	1.0040
Golden Living Center-Wilson	Wilson	180.25	1.0731
F W Huston Medical Center	Winchester	154.87	0.9589
Winfield Senior Living Community	Winfield	184.44	1.0112
Cumbernauld Village, Inc.	Winfield	204.23	0.9501
Winfield Rest Haven II LLC	Winfield	179.36	0.9628
Kansas Veterans' Home	Winfield	190.86	0.9422
Yates Center Health and Rehabilitation	Yates Center	150.01	1.2217

IIIb. Justifications for the Proposed Rates Under Scenario Two: Quality Care Assessment Provisions of Senate Bill 457 are Implemented

1. The proposed rates are calculated according to the rate-setting methodology in the Kansas Medicaid State Plan and pending amendments thereto.
2. The proposed rates are calculated according to a methodology which satisfies the requirements of K.S.A. 39-708c(x) and the DHCF regulations in K.A.R. Article 129-10 implementing that statute and applicable federal law.
3. The State's analyses project that the proposed rates:
 - e. Would result in payment, in the aggregate of 97.24% of the Medicaid day weighted average inflated allowable nursing facility costs statewide; and
 - f. Would result in a maximum allowable rate of \$216.39; with the total average allowable cost being \$176.01.
 - g. Estimated average rate July 1, 2016 \$176.01
 - h. Average payment rate July 1, 2015 \$158.33
 - Amount of change \$17.68
 - Percent of change 11.17%
4. Estimated annual aggregate expenditures in the Medicaid nursing facility services payment program will increase approximately \$77 million from last year.
5. The state estimates that the proposed rates will continue to make quality care and services available under

the Medicaid State Plan at least to the extent that care and services are available to the general population in the geographic area. The state's analyses indicate:

- f. Service providers operating a total of 324 nursing facilities and hospital-based long-term care units (representing 95.3% of all the licensed nursing facilities and long-term care units in Kansas) participate in the Medicaid program;
 - g. 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;
 - h. The statewide average occupancy rate for nursing facilities participating in Medicaid is 84.16%;
 - i. The statewide average Medicaid occupancy rate for participating facilities is 61.61%; and
 - j. The proposed rates would cover 86.66% of the estimated Medicaid direct 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 proposed methodology will result in compliance with the federal regulation.

IV. Request for Comments; Request for Copies

The state requests providers, beneficiaries and their representatives, and other concerned Kansas residents to review and comment on the proposed rates, the methodology used to calculate the proposed rates, the justifications for the proposed rates, and the intent to amend the Medicaid State Plan. Persons and organizations wishing to submit comments must mail, deliver, or fax their signed, written comments before the close of business on Monday, May 16, 2016 to:

Melissa Warfield
 Director of Fiscal and Program Evaluation
 Kansas Department for Aging and Disability Services
 New England Building
 503 S. Kansas Ave.
 Topeka, KS 66603-3404
 Fax: 785-296-0256

V. Notice of Intent to Amend the Medicaid State Plan

The state intends to submit proposed Medicaid State Plan amendments to CMS on or before September 30, 2016.

Tim Keck
 Interim Secretary for Aging
 and Disability Services

Doc. No. 044442

State of Kansas

Department of Transportation

Notice to Consulting Firms

The Kansas Department of Transportation (KDOT) is seeking qualified consulting firms prequalified in category 322 – Bridge Inspection for the project listed below. A pdf (1Mb maximum size) of the interest response must be emailed to David J. Nagy, P.E., Assistant to the Director of Design/Contracts Engineer, at DavidN@ksdot.

org. Interest and experience responses are limited to four pages. The subject line of the reply email and the pdf file name must read "106 C-4864-01 Pin & Hanger Project LOI- Firm Name." The Letter of Interest (LOI) is required and must be received by noon April 22, 2016, for the consulting firm to be considered. View categories at <http://www.ksdot.org/divengdes/prequal/default.asp>.

Project 106 C-4864-01, which is the Local Project's Pin & Hanger Ultra Sonic inspection program for FFY2016 (13 Bridges), FFY2017 (37 Bridges), FFY2018 (13 Bridges), FFY2019 (19 Bridges), and FFY2020 (31 Bridges). The Pin & Hanger bridges are either on a one, two, or three year inspection cycle located throughout the state. The following link is a Google Map fusion table showing the locations of the bridges with pin and hanger connections:

https://www.google.com/fusiontables/DataSource?docid=1UR-bFAVuf1qhXqI5d8sae6LBiFoBJ5tk9m_ZK_JT

The Consultant Shortlist Committee will shortlist three to five of the most highly qualified firms based on the Letter of Interest for interviews. The shortlisting of the firms will be based on the site assessment, project approach, work distribution, coordination, past performance, schedule, team personnel, equipment, and experience of the team/firm with similar projects. The contract will utilize a single phase agreement that will have an annual component/work order, which it is anticipated to be executed by May 15, 2016.

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 actual costs 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 which 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 J. Nagy, P.E., Assistant to the Director of Design/Contracts Engineer, at DavidN@ksdot.org.

Jim L. Kowach, P.E., Director
Division of Engineering and Design

Doc. No. 044431

**State of Kansas
Department of Transportation**

Notice of Public Auction

The Kansas secretary of Transportation will offer for sale at public auction at 11 a.m. Tuesday, May 17, 2016, the following parcel:

**Project: 54-76 K -8243-02
Tract 3180 – 20u, 20uu, 20uuu
2.39 acres +/-, Pratt Co., Cairo, Kansas**

A tract of land in the Southwest Quarter Sec 32-T27s-R11w
A complete legal description is available on request.
An inspection of the property will take place at 10

a.m. on the day of the sale. The sale will be conducted on the premises. In case of inclement weather call the number below for an alternate sale location and adjusted auction time.

The minimum acceptable bid is \$2,100.

Terms of Sale:

Payment of \$210, representing ten percent (10%) of the minimum acceptable bid, is due at the time of the sale. The balance of the purchase price must be paid on or before 3 p.m. Friday, June 17, 2016. The successful bidder will receive a bill of sale on the day of the sale and a quit claim deed after balance is paid. If the balance of the purchase price is not paid on or before 3 p.m. Friday, June 17, 2016, the ten percent (10%) down payment will be forfeited to the seller.

For additional terms and information contact Kurt Daniels, Bureau of Right of Way, at 1-877-461-6817.

The seller reserves the right to reject any and all bids and is not responsible for accidents.

Sold Subject to the Following:

The tract will be sold subject to the easement for the right of ingress and egress, reconstruction and maintenance of all existing utilities and appurtenances thereto, as well as the following restrictive covenant: Grantees, for their heirs and assigns, do hereby covenant and agree, said covenant to run with the land, that the land conveyed herein shall not be used for billboards, signboards or other outdoor advertising purposes.

The prospective buyer is encouraged to research the chain of title of the tract.

The Kansas Department of Transportation makes no representations concerning the condition, value or suitability of use for this property or the improvements, attachments, fixtures, apparatuses and appliances thereof, if any. The property and said improvements, etc. will be sold in the present as is condition, without warranties or guarantees of any kind.

The Kansas Department of Transportation insures the acceptance of any bid pursuant to this notice will be without discrimination on the grounds of sex, race, color, religion, physical handicap or national origin.

Mike King
Secretary of Transportation

Doc. No. 044450

**State of Kansas
Board of Regents Universities**

Notice to Bidders

The universities of the Kansas Board of Regents encourage interested vendors to visit the various universities' purchasing offices' websites for a listing of all transactions, including construction projects, for which the universities' purchasing offices, or one of the consortia commonly utilized by the universities, are seeking information, competitive bids or proposals. The referenced construction projects may include project delivery construction procurement act projects pursuant to K.S.A. 76-7,125 et seq.

(continued)

Emporia State University – Bid postings: www.emporia.edu/busaff/. Additional contact info: phone 620-341-5145, fax: 620-341-5073, email: tshepher@emporia.edu. Mailing address: Emporia State University Purchasing, Campus Box 4021, 1 Kellogg Circle, Emporia, KS 66801-5415.

Fort Hays State University – Bid postings: www.fhsu.edu/purchasing/bids. Additional contact info: phone 785-628-4251, fax: 785-628-4046, email: purchasing@fhsu.edu. Mailing address: Fort Hays State Purchasing Office, 601 Park St., 318 Sheridan Hall, Hays, KS 67601.

Kansas State University – Bid postings: www.k-state.edu/purchasing/rfq. Additional contact info: phone: 785-532-6214, fax: 785-532-5577, email: kspurch@k-state.edu. Mailing address: Division of Financial Services/Purchasing, 21 Anderson Hall, Kansas State University, Manhattan, KS 66506.

Pittsburg State University – Bid postings: www.pittstate.edu/office/purchasing. Additional contact info: phone: 620-235-4169, fax: 620-235-4166, email: purch@pittstate.edu. Mailing address: Pittsburg State University, Purchasing Office, 1701 S. Broadway, Pittsburg, KS 66762-7549.

University of Kansas – Electronic bid postings: <http://www.procurement.ku.edu/>. Paper bid postings and mailing address: KU Purchasing Services, 1246 W. Campus Road, Room 20, Lawrence, KS 66045. Additional contact info: phone: 785-864-5800, fax: 785-864-3454, email: purchasing@ku.edu.

University of Kansas Medical Center – Bid postings: <http://www2.kumc.edu/finance/purchasing/bids.html>. Additional contact info: phone: 913-588-1100, fax: 913-588-1102. Mailing address: University of Kansas Medical Center, Purchasing Department, Mail Stop 2034, 3901 Rainbow Blvd., Kansas City, KS 66160.

Wichita State University – Bid postings: www.wichita.edu/purchasing. Additional contact info: phone: 316-978-3080, fax: 316-978-3528. Mailing address: Wichita State University, Office of Purchasing, 1845 Fairmount Ave., Campus Box 12, Wichita, KS 67260-0012.

Kathy Herrman
Chair of Regents Purchasing Group
Director of Purchasing
Fort Hays State University

Doc. No. 043663

State of Kansas

Department of Revenue
Division of Vehicles

Notice of Intent to Establish a New
Motor Vehicle Dealer License

Notice has been received from Salinausedcars.com, LLC, dba Kawasaki of Salina, of their intent to establish a new and used vehicle dealership inclusive of selling Kawasaki franchised vehicles at 632 S. Ohio, Salina, Kansas.

Pursuant to K.S.A. 8-2430(a)(5), any existing new motor vehicle dealer may protest the proposed establishment of the new Kawasaki dealership, Salinausedcars.com, LLC, dba Kawasaki of Salina, at 632 S. Ohio, Salina, Kansas, if that existing new motor vehicle dealer has a franchise agreement for the same line-make vehicle as that which is to be sold or offered for sale by Salinausedcars.com, LLC, dba Kawasaki of Salina, inclusive of selling Kawasaki franchised vehicles at 632

S. Ohio, Salina, 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 Kawasaki 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 the Division of Vehicles within 30 days of this notice. Such petitions or complaints must be directed to the Kansas Department of Revenue, Director of Vehicles, 10th Floor, Docking State Office Building, Topeka, KS 66612.

Lisa Kaspar
Director of Vehicles

Doc. No. 044443

State of Kansas

Board of Technical Professions

Notice of Meeting

The Kansas State Board of Technical Professions board meeting will be held at 10 a.m. Friday, April 29, 2016, at the Landon State Office Building, 900 S.W. Jackson, Suite 507, Topeka, Kansas. All meetings are open to the public. For more information call 785-296-3053.

Shelby L. Lopez
Executive Director

Doc. No. 044449

State of Kansas

Department of Administration
Procurement and Contracts

Notice to Bidders

Sealed bids for items listed will be received by the director of Procurement and Contracts until 2 p.m. on the date indicated. For more information call 785-296-2376:

04/29/2016	EVT0004349	Seamless Epoxy Coatings
05/04/2016	EVT0004343	Agent Licensing Exam Services
05/04/2016	EVT0004345	Dump Truck and/or Anti-Ice Tanks
05/04/2016	EVT0004351	Street Sweeper, Mechanical Pick Up Type
05/05/2016	EVT0004321	Rest Area Maintenance – District 3
05/06/2016	EVT0004318	Security Camera System
05/12/2016	EVT0004337	Administrative Services Organization
05/12/2016	EVT004340	Supply Chain Study

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

<http://admin.ks.gov/offices/procurement-and-contracts/bid-solicitations>

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

<http://admin.ks.gov/offices/procurement-and-contracts/additional-files-for-bid-solicitations>

04/27/2016	A-013038 TMA-1902	Kansas Judicial Center Reroof
05/05/2016	A-013034	Larned Juvenile Correctional Facility, New Sally Port
05/05/2016	A-013050	Lasing Correctional Facility Vocational Training Center Metal Roof Retrofit

Information regarding prequalification, projects and bid documents can be obtained by calling 785-296-8899 or online at <http://admin.ks.gov/offices/ofpm/dcc>.

Tracy T. Diel, Director
Procurement and Contracts

Doc. No. 044456

State of Kansas

Pooled Money Investment Board

Notice of Investment Rates

The following rates are published in accordance with K.S.A. 75-4210. These rates and their uses are defined in K.S.A. 2014 Supp. 12-1675(b)(c)(d) and K.S.A. 2014 Supp. 12-1675a(g).

Effective 4-11-16 through 4-17-16	
Term	Rate
1-89 days	0.37%
3 months	0.27%
6 months	0.38%
12 months	0.60%
18 months	0.71%
2 years	0.74%

Scott Miller
Director of Investments

Doc. No. 044437

State of Kansas

Kansas Insurance Department

Notice of Hearing on Proposed Administrative Regulation

A public hearing will be conducted at 2 p.m. June 24, 2016, in the third floor conference room, Kansas Insurance Department, 420 S.W. 9th, Topeka, Kansas, to consider the adoption of a proposed rule and regulation.

The 60-day notice of the public hearing shall constitute a public comment period for the purpose of receiving written public comments on the proposed rules and regulation. All interested parties may submit written comments prior to the hearing to Diane Minear, Kansas Insurance Department, 420 S.W. 9th, Topeka, KS 66612-1678, via facsimile at 785-291-3190, or via email at dminear@ksinsurance.org. All interested parties will be given a reasonable opportunity to present their views orally on the adoption of the proposed regulation during the hearing.

A summary of the proposed regulation and its economic impact follows:

K.A.R. 40-4-41. Utilization review organizations; standards. This amendment to the existing regulation is to update the utilization review standards applicable to those entities without URAC accreditation.

This amendment will not have an economic impact on utilization review organizations or health insurers in Kansas.

There will be no economic impact on the Kansas Insurance Department or other governmental agencies.

Any individual with a disability may request accommodation in order to participate in the public hearing and may request any proposed regulation and the economic impact statement in an accessible format. Requests for accommodation to participate in the hearing should be made at least 5 working days in advance by contacting Diane Minear at 785-296-2676 or via email at dminear@ksinsurance.org. Any individual desiring a copy of any regulation and/or the policy and procedure that is being adopted by reference, if applicable, may obtain a copy from our website, www.ksinsurance.org (under the Legal Issues link), or by contacting Diane Minear. The charge for copies is fifty cents per page.

Ken Selzer
Kansas Insurance Commissioner

Doc. No. 044435

State of Kansas

Kansas Housing Resources Corporation

Notice of Hearing on the 2016 Weatherization State Plan

The Kansas Housing Resources Corporation (KHRC) will conduct a public hearing at 10 a.m. Tuesday, April 26, 2016, at the KHRC office, 611 S. Kansas Ave., Suite 300, Topeka, to provide an opportunity for citizens to comment upon the draft of the 2016 Weatherization State Plan.

The 2016 State of Kansas Weatherization State Plan draft includes only pages intended for public comment and can be found on KHRC's website, www.kshousingcorp.org/weatherization.aspx. The 2016 State Plan includes changes in service provider territory coverage and minor adjustment in state monitoring requirements. Limited hard copies will be available at the public hearing site and upon request. Written comments must be received by 10 a.m. April 26, 2016. The public hearing comment period ends no later than noon April 26, 2016.

Parking is available along Kansas Avenue and the hearing will be less than the two hour limit. If you are in need of a sign language interpreter, an assistive listening device, large print, or other material for accommodations to attend this meeting, you must notify KHRC at least one week prior to the meeting. Requests may be addressed to Katelyn Smith, KHRC, 611 S. Kansas Ave., Suite 300, Topeka, KS 66603-3803, by telephone at 785-217-2052, or via the Kansas relay service.

Al Dorsey
Division Director

Doc. No. 044453

State of Kansas

Secretary of State

Notice of Forfeiture

In accordance with Kansas statutes, the following business entities organized under the laws of Kansas and the foreign business entities authorized to do business in Kansas were forfeited during the month of March 2016 for failure to timely file an annual report and pay the annual report fee.

Please Note: The following list represents business entities forfeited in March. Any business entity listed may have filed for reinstatement and be considered in good standing. To check the status of a business entity go to the Kansas Business Center's Business Entity Search Station at <https://www.kansas.gov/bess/flow/main?execution=e2s4> (select Business Entity Database) or contact the Business Services Division at 785-296-4564.

Domestic Business Entities

Adaptive Sports KC Foundation, Kansas City, KS
Aiche Club, Lawrence, KS
Association of Government Accountants Topeka Chapter, Topeka, KS
Beginning Experience Of Wichita, Inc., Wichita, KS
Beyond The Walls Life Ministry Inc., Topeka, KS
Bob Campbell Post No. 1361 Veterans of Foreign Wars of The United States, Hutchinson, KS
Brighter Horizons Child Development Center Inc., Kansas City, KS
Center for Financial Training-Great Plains Region, Inc., Wichita, KS
Central Kansas Youth for Christ, Inc., Manhattan, KS
Children Around the World, Inc., Wichita, KS
Cis Fast D & D, Inc., Newton, KS
Coffey County Interagency Council, Inc., Burlington, KS
Community Learning Center, Inc., Winfield, KS
Disabled American Veterans Memorial Chapter No. 1, Inc., Kansas City, KS
DJA Olathe, L.P., Montreal, Quebec
Edwardsville Animal Rescue Inc., Edwardsville, KS
Edwardsville Temple Community Outreach Center Inc., Kansas City, KS
Extended Solution Inc., Topeka, KS
Faith Christian Academy, Inc., Munden, KS
Git Real Foundation, Baldwin City, KS
Gupton's Pets & Supplies, Inc., Wichita, KS
Hell Creek Ranch, Inc., El Dorado Springs, MO
Hernandez Construction LLC, Kansas City, KS
Judy's School of Dance, Inc., Hutchinson, KS
Kansas Family Advisory Network, Inc., Wichita, KS
Kansas Home Watch Services LLC, Ozawkie, KS
KC Cancer Equity Alliance, Inc., Kansas City, MO
Lowry-Funston Post 1980, Veterans of Foreign Wars of the United States, Emporia, KS
Lyndon American Legion Post 125 Inc., Lyndon, KS
Manna House, Inc., Dodge City, KS
Marcole Enterprises, Inc., Kansas City, KS
Meadowlark Elementary Parent Teacher Organization Inc., Andover, KS
Meals on Wheels of McPherson, Kansas, Inc., McPherson, KS
Metcalf Youth Outreach, Inc., Wichita, KS
Midwest Legacy LLC, Wichita, KS
Mort Family Motors LLC, Andover, KS
National Association of Belt Buckle Collectors, Inc., Wichita, KS
Paramount Consulting Group, Inc., Overland Park, KS
Percussion on the Plains, Inc., Leawood, KS
Perkins Development Inc., Howard, KS
Promised Land Grain LLC, Colby, KS
Sammy Rivera Ministries Inc., Wichita, KS
Stilwell Community Organization, Inc., Stilwell, KS
Tennessee Champions Corporation, Ozawkie, KS
The First Christian Church of Lyons, Kansas, Lyons, KS
The Governor's Scholars Award Program, Inc., Topeka, KS

The Lawrence Community Shelter, Inc., Lawrence, KS
The LCD Ninja LLC, Wichita, KS
Tobacco Free Kansas Coalition, Inc., Topeka, KS
Turner Lions Club, Inc., Tonganoxie, KS
U.S.D. #249 Education Foundation Fund, Fontenac, KS
Under the Rainbow Club, Kansas City, KS
Veterans Hope Housing Center Corp., Wichita, KS
Veterans of The Battle of the Bulge-Kansas Chapter, Inc., Topeka, KS
Whispering Creek Rescue Foundation, Waverly, KS
Youth Symphony Association of Kansas City, Inc., Kansas City, MO
Yummy Buffet Inc., New York, NY

Foreign Business Entities

Advisory Credit Management, Inc., Ft. Lauderdale, FL
Alliance for a Free Society, Inc., Andover, KS
Carondelet Home Care Services, Inc., Overland Park, KS
Carondelet Medical Enterprises, Inc., Kansas City, MO
Carondelet Physician Services, Inc., Kansas City, MO
Community Health Charities of Kansas and Missouri, Inc., Overland Park, KS
Denver Options, Inc., Denver, CO
Fund for the Public Interest, Inc., Denver, CO
International Electric, Inc., Shawnee, KS
Mom Haven 8, LP, Columbia, SC
Pi Kappa Phi Properties, Inc., Charlotte, NC
SBA Global Logistic Services, Inc., Woodbury, NY

Kris W. Kobach
Secretary of State

Doc. No. 044455

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 17, 28-18a-1 through 33, 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-16-051

Pending Permits for Confined Feeding Facilities

Name and Address of Applicant	Legal Description	Receiving Water
Mike Gesling Bartlett Cattle Company LP - Bartlett III 4900 Main St., Suite 1200 Kansas City, MO 64112	All of Section 36, T28S, R33W, Haskell County	Cimarron River Basin
Kansas Permit No. A-CIHS-C004		Federal Permit No. KS0115291

This is a reissuance permit for an existing facility for approximately 411 acres of open lots for the confined feeding of 60,000 head (60,000 animal units) of cattle weighing greater than 700 pounds. There are six drainage areas with runoff contained in an earthen retention structure in each area. This facility has an approved Nutrient Management Plan on file with KDHE.

Public Notice No. KS-AG-R-16-011/012

Per K.S.A. 65-171d, the following registrations have been received for proposed confined feeding facilities:

Name and Address of Registrant	Legal Description	County
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Roger L. Strathman Strathman Farms, LLC 1301 31st Road Baileyville, KS 66404	NW/4 of Section 18, T03S, R11E	Nemaha
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Name and Address of Registrant	Legal Description	County
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Clinton Strahm Timberview Farms – Curt’s Feedlot 1732 208th Road Bern, KS 66408	SE/4 of Section 35, T01S, R13E	Nemaha
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Public Notice No. KS-Q-16-035/039

The requirements of the draft permit public noticed below are pursuant to the Kansas Surface Water Quality Standards, K.A.R. 28-16-28 (b-g), and Federal Surface Water Criteria.

Name and Address of Applicant	Receiving Stream	Type of Discharge
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Chemical Waste Management 8808 N. 127th St. East Valley Center, KS 67147	Whitewater River via Prairie Creek via Unnamed Tributary	Groundwater Remediation Project
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Kansas Permit No. I-WA24-PO02 Federal Permit No. KS0100846

Legal Description: SW¼, S26, T25S, R2E, Sedgwick County, KS

The proposed action consists of issuing a new Kansas/NPDES Water Pollution Control permit for discharge at a new groundwater remediation project. Chlorinated hydrocarbon contaminated groundwater from various wells and trenches from a former waste management and landfill facility will be collected in an above ground storage tank and batch treated with an air stripper prior to discharge. The proposed permit contains limits for trichloroethene, tetrachloroethene, 1,2-dichloroethane, 1,1,2-trichloroethane, chloroethylene, and pH, as well as monitoring for sulfates, heavy metals, whole effluent toxicity, volatile organic chemicals, and flow.

Name and Address of Applicant	Receiving Stream	Type of Discharge
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Ellis, City of 815 Jefferson Ellis, KS 67637	Big Creek	Treated Domestic Wastewater
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Kansas Permit No. M-SH06-OO02 Federal Permit No. KS0094145

Legal Description: NE¼, SE¼, NW¼, S9, T13S, R20W, Ellis County, KS

The proposed action consists of modification of an existing Kansas/NPDES Water Pollution Control permit for an existing facility. The proposed modification includes minor changes as needed to satisfy restrictions in uploading Discharge Monitoring Report (DMR) data to the EPA ICIS-NPDES program using electronic reporting tools and to update the Schedule of Compliance for the facility upgrades in progress. The change for electronic reporting purposes has been to redesignate the influent monitoring location from to allow reporting of influent data when there is no discharge. The schedule of compli-

ance update requires the permittee to initiate operation of the facility upgrades by December 1, 2016, and meet final permit requirements by July 1, 2017. All other terms and conditions of the permit remain in full force and effect.

Name and Address of Applicant	Receiving Stream	Type of Discharge
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Independent Salt Company P.O. Box 36 Kanopolis, KS 67454	Smoky Hill River via Unnamed Tributary via Pipeline	Process Wastewater
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Kansas Permit No. I-SH19-PO07 Federal Permit No. KS0096857

Legal Description: NW¼, S5, T16S, R07W, Ellsworth County, KS

Facility Name: Independent Salt Company

Facility Location: 1126 20th Road, Kanopolis, KS 67454

The proposed action consists of reissuing an existing Kansas/NPDES Water Pollution Control permit for discharge at a mining facility. This facility is engaged in the mechanical mining of underground salt, used for highway deicing. Groundwater seepage from the mine shafts (#1 and #2), is collected in an underground tank and pumped into a surface storage tank and is directed via pipeline to Outfall 001A1, into the Smoky Hill River. The facility has a backup reverse osmosis (RO) system, to treat the wastewater, if needed, to meet the permit limitations. The proposed permit requires monitoring for chlorides, sulfates, selenium and flow.

Name and Address of Applicant	Receiving Stream	Type of Discharge
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Montgomery County Commission P.O. Box 446 Independence, KS 67301	Little Caney River via Bee Creek via Cotton Creek via Unnamed Tributary	Treated Domestic Wastewater
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Kansas Permit No. M-VE21-OO02 Federal Permit No. KS0086207

Legal Description: NE¼, SW¼, S18, T34S, R14E, Montgomery County, KS

The proposed action consists of reissuing of an existing Kansas/NPDES Water Pollution Control permit for an existing facility. The proposed permit contains limits for biochemical oxygen demand and total suspended solids as well as monitoring for ammonia, E. coli, pond level and pH.

Name and Address of Applicant	Receiving Stream	Type of Discharge
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The Sherwin Williams Company 630 E. 13th St. Andover, KS 67002	Four Mile Creek via Republican Creek	Cooling Water
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Kansas Permit No. I-WA01-CO01 Federal Permit No. KS0080411

Legal Description: SW¼, S8, T27S, R3E, Butler County, KS

The proposed action consists of reissuing of an existing Kansas/NPDES Water Pollution Control permit for an existing facility. This facility manufactures industrial coatings, oil and water-based trade sales coatings, general services administration coatings, lacquers, enamels and primers. Reverse Osmosis (RO) unit is used to further purify city water which is then used in a lab. RO condensate trickles on the north dock with a flow rate of less than 1 gpm. All process wastewaters are collected and shipped off site in sealed containers for treatment and disposal. The proposed permit contains generic language to protect waters of the state.

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

(continued)

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 St., Suite 420, Topeka, KS 66612-1367.

All comments regarding the draft documents or application notices received on or before May 14, 2016, will be considered in the formulation of the final determinations regarding this public notice. Please refer to the appropriate Kansas document number (KS-AG-16-051, KS-AG-R-16-011/012, KS-Q-16-035/039) 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.

Susan Mosier, M.D.
Secretary of Health
and Environment

Doc. No. 044454

State of Kansas

Department of Health and Environment

Request for Comments

The Kansas Department of Health and Environment (KDHE) is soliciting comments regarding a proposed air quality operating permit. Henke Manufacturing Corporation has applied for a Class I operating permit renewal in accordance with the provisions of K.A.R. 28-19-510 et al. The purpose of a Class I permit is to identify the sources and types of regulated air pollutants emitted from the facility; the emission limitations, standards and requirements applicable to each source; and the monitoring, record keeping and reporting requirements applicable to each source as of the effective date of permit issuance.

Henke Manufacturing Corporation, 3070 Wilson Ave., Leavenworth, KS 66048, owns and operates a heavy duty snow plow manufacturing facility located at 3070 Wilson Ave., Leavenworth, KS 66048.

A copy of the proposed permit, permit application, all supporting documentation, and all information relied upon during the permit application review process are available for public review during normal business hours, 8 a.m. to 5 p.m., at the KDHE, Bureau of Air, 1000 S.W. Jackson, Suite 310, Topeka, and at the KDHE North-

east District Office, 800 W. 24th St., Lawrence. To obtain or review the proposed permit and supporting documentation contact Amanda Spade, 785-296-5231, at the KDHE central office or Pat Simpson, 785-842-4600 at the KDHE Northeast District Office. The standard departmental cost will be assessed for any copies requested.

Written comments or questions regarding the proposed permit may be directed to Amanda Spade, KDHE, Bureau of Air, 1000 S.W. Jackson, Suite 310, Topeka, KS 66612-1366. In order to be considered in formulating a final permit decision, written comments must be received no later than noon Monday, May 16, 2016.

A person may request a public hearing be held on the proposed permit. The request for a public hearing shall be in writing and set forth the basis for the request. The written request must be submitted to Amanda Spade, KDHE, Bureau of Air, no later than noon on Monday, May 16, 2016, in order for the secretary of Health and Environment to consider the request.

The U.S. Environmental Protection Agency has a 45-day review period, which will start concurrently with the public comment period, within which to object to the proposed permit. If the EPA has not objected in writing to the issuance of the permit within the 45-day review period, any person may petition the administrator of the EPA to review the permit. The 60-day public petition period will directly follow the EPA's 45-day review period. Interested parties may contact KDHE to determine if the EPA's 45-day review period has been waived.

Any such petition shall be based only on objections to the permit that were raised with reasonable specificity during the public comment period provided for in this notice, unless the petitioner demonstrates that it was impracticable to raise such objections within such period, or unless the grounds for such objection arose after such period. Contact Ward Burns, U.S. EPA, Region 7, Air Permitting and Compliance Branch, 11201 Renner Blvd., Lenexa, KS 66219, 913-551-7960, to determine when the 45-day EPA review period ends and the 60-day petition period commences.

Susan Mosier, M.D.
Secretary of Health
and Environment

Doc. No. 044441

State of Kansas

Department of Health and Environment

Request for Comments

The Kansas Department of Health and Environment (KDHE) and the Unified Government of Wyandotte County/Kansas City, Kansas' Department of Air Quality (DAQ) are soliciting comments regarding a proposed air quality operating permit. ReConserve, Inc. has applied for a Class I operating permit in accordance with the provisions of K.A.R. 28-19-510 et al. The purpose of a Class I permit is to identify the sources and types of regulated air pollutants emitted from the facility; the emission limitations, standards and requirements applicable to each source; and the monitoring, record keeping and reporting requirements applicable to each source as of the effective date of permit issuance.

ReConserve, Inc. of Santa Monica, California, owns and operates an animal feed ingredient processing plant located at 41 N. James St., Kansas City, KS 66118.

A copy of the proposed permit, permit application, all supporting documentation, and all information relied upon during the permit application review process are available for public review during normal business hours at the KDHE, Bureau of Air, 1000 S.W. Jackson, Suite 310, Topeka, and at the DAQ, 619 Ann Ave., Kansas City. To obtain or review the proposed permit and supporting documentation contact Sherry Walker, 785-296-1570, at the KDHE central office or Mark Weckwerth, 913-573-6700, at the DAQ. The standard departmental cost will be assessed for any copies requested.

Written comments or questions regarding the proposed permit may be directed to Mark Weckwerth, DAQ, 619 Ann Ave., Kansas City, KS 66101. In order to be considered in formulating a final permit decision, written comments must be received no than later noon May 16, 2016.

A person may request a public hearing be held on the proposed permit. The request for a public hearing shall be in writing and set forth the basis for the request. The written request must be submitted to Mark Weckwerth at the address listed above, or by fax to 913-342-5634, and must be received by noon May 16, 2016, in order for the secretary of Health and Environment to consider the request.

The U.S. Environmental Protection Agency has a 45-day review period, which will start concurrently with the public comment period, within which to object to the proposed permit. If the EPA has not objected in writing to the issuance of the permit within the 45-day review period, any person may petition the administrator of the EPA to review the permit. The 60-day public petition period will directly follow the EPA's 45-day review period. Interested parties may contact KDHE to determine if the EPA's 45-day review period has been waived.

Any such petition shall be based only on objections to the permit that were raised with reasonable specificity during the public comment period provided for in this notice, unless the petitioner demonstrates that it was impracticable to raise such objections within such period, or unless the grounds for such objection arose after such period. Contact Ward Burns, U.S. EPA, Region 7, Air Permitting and Compliance Branch, 11201 Renner Blvd., Lenexa, KS 66219, 913-551-7960, to determine when the 45-day EPA review period ends and the 60-day petition period commences.

Susan Mosier, M.D.
Secretary of Health
and Environment

Doc. No. 044444

State of Kansas

Secretary of State

Certification of New State Laws

I, Kris W. Kobach, Secretary of State of the State of Kansas, do hereby certify that each of the following bills is a correct copy of the original enrolled bill now on file in my office.

Kris W. Kobach
Secretary of State

(Published in the Kansas Register April 14, 2016.)

Substitute for SENATE BILL No. 99

AN ACT concerning the uniform act regulating traffic; relating to height, weight and length of vehicles and loads; exceptions to maximums; amending K.S.A. 8-1905 and 8-1909 and K.S.A. 2015 Supp. 8-1904 and repealing the existing sections.

Be it enacted by the Legislature of the State of Kansas:

Section 1. K.S.A. 2015 Supp. 8-1904 is hereby amended to read as follows: 8-1904. (a) No vehicle including any load thereon shall exceed a height of 14 feet, except that a vehicle transporting cylindrically shaped bales of hay as authorized by K.S.A. 8-1902(e), and amendments thereto, may be loaded with such bales secured to a height not exceeding 14½ feet. Should a vehicle so loaded with bales strike any overpass or other obstacle, the operator of the vehicle shall be liable for all damages resulting therefrom. The secretary of transportation may adopt rules and regulations for the movement of such loads of cylindrically shaped bales of hay.

(b) No motor vehicle including the load thereon shall exceed a length of 45 feet extreme overall dimension, excluding the front and rear bumpers, except as provided in subsection (d).

(c) Except as otherwise provided in K.S.A. 8-1914 and 8-1915, and amendments thereto, and subsections (d), (e), (f), (g) and (h) and (i), no combination of vehicles coupled together shall exceed a total length of 65 feet.

(d) The length limitations in subsection (b) shall not apply to a truck tractor. No semitrailer which is being operated in combination with a truck tractor shall exceed 59½ feet in length. No semitrailer or trailer which is being operated in a combination consisting of a truck tractor, semitrailer and trailer shall exceed 28½ feet in length.

(e) The limitations in this section governing maximum length of a semitrailer or trailer shall not apply to vehicles operating in the daytime when transporting poles, pipe, machinery or other objects of a structural nature which cannot readily be dismembered, except that it shall be unlawful to operate any such vehicle or combination of vehicles which exceeds a total length of 85 feet unless a special permit for such operation has been issued by the secretary of transportation or by an agent or designee of the secretary pursuant to K.S.A. 8-1911, and amendments thereto. For the purpose of authorizing the issuance of such special permits at motor carrier inspection stations, the secretary of transportation may contract with the superintendent of the Kansas highway patrol for such purpose, and in such event, the superintendent or any designee of the superintendent may issue such special permit pursuant to the terms and conditions of the contract. The limitations in this section shall not apply to vehicles transporting such objects operated at nighttime by a public utility when required for emergency repair of public service facilities or properties or when operated under special permit as provided in K.S.A. 8-1911, and amendments thereto, but in respect to such night transportation every such vehicle and the load thereon shall be equipped with a sufficient number of clearance lamps on both sides and marker lamps upon the extreme ends of any projecting load to clearly mark the dimensions of such load.

(f) The limitations of this section governing the maximum length of combinations of vehicles shall not apply to a combination of vehicles consisting of a truck tractor towing a house trailer, if such combination of vehicles does not exceed an overall length of 97 feet.

(g) The length limitations of this section shall not apply to stinger-steered automobile or boat transporters or one truck and one trailer vehicle combination, loaded or unloaded, used in transporting a combine, forage cutter or combine header to be engaged in farm custom harvesting operations, as defined in K.S.A. 8-143(d), and amendments thereto. A stinger-steered automobile or boat transporter or one truck and one trailer vehicle combination, loaded or unloaded, used in transporting a combine, forage cutter or combine header to be engaged in farm custom harvesting operations, as defined in K.S.A. 8-143(d), and amendments thereto, shall not exceed an overall length limit of 75 feet, exclusive of front and rear overhang. *A stinger-steered automobile transporter shall not exceed an overall length limit of 80 feet, exclusive of front and rear overhang.*

(h) The length limitations of this section shall not apply to drive-away saddlemount or drive-away saddlemount with fullmount vehicle transporter combination. A drive-away saddlemount or drive-away

(continued)

saddlemount with fullmount vehicle transporter combination shall not exceed an extreme overall dimension of 97 feet.

(i) The length limitations of this section shall not apply to a one truck-tractor two trailer combination or one truck-tractor semitrailer trailer combination used in transporting equipment utilized by custom harvesters under contract to agricultural producers to harvest wheat, soybeans or milo, during the months of April through November, but the length of the property-carrying units, excluding load, shall not exceed 81½ feet.

Sec. 2. K.S.A. 8-1905 is hereby amended to read as follows: 8-1905.

(a) The load upon any vehicle operated alone, or the load upon the front vehicle of a combination of vehicles, shall not extend more than three (3) feet beyond the front wheels of such vehicle or the front bumper of such vehicle if it is equipped with a bumper.

(b) Any vehicle or combination of vehicles transporting passenger vehicles or other motor vehicles may carry a load which extends no more than three (3) four feet beyond the front and four (4) six feet beyond the rear of the transporting vehicle or combination of vehicles.

Sec. 3. K.S.A. 8-1909 is hereby amended to read as follows: 8-1909.

(a) No vehicle or combination of vehicles shall be moved or operated on any highway when the gross weight on two or more consecutive axles exceeds the limitations prescribed in the following table:

Distance in feet between the extremes of any group of 2 or more consecutive axles	Maximum load in pounds carried on any group of 2 or more consecutive axles							
	2 axles	3 axles	4 axles	5 axles	6 axles	7 axles	8 axles	
4.....	34,000							
5.....	34,000							
6.....	34,000							
7.....	34,000							
8 and less	34,000	34,000						
More than 8	38,000	42,000						
9.....	39,000	42,500						
10.....	40,000	43,500						
11.....		44,000						
12.....		45,000	50,000					
13.....		45,500	50,500					
14.....		46,500	51,500					
15.....		47,000	52,000					
16.....		48,000	52,500	58,000				
17.....		48,500	53,500	58,500				
18.....		49,500	54,000	59,000				
19.....		50,000	54,500	60,000				
20.....		51,000	55,500	60,500	66,000			
21.....		51,500	56,000	61,000	66,500			
22.....		52,500	56,500	61,500	67,000			
23.....		53,000	57,500	62,500	68,000			
24.....		54,000	58,000	63,000	68,500	74,000		
25.....		54,500	58,500	63,500	69,000	74,500		
26.....		55,500	59,500	64,000	69,500	75,000		
27.....		56,000	60,000	65,000	70,000	75,500		
28.....		57,000	60,500	65,500	71,000	76,500	82,000	
29.....		57,500	61,500	66,000	71,500	77,000	82,500	
30.....		58,500	62,000	66,500	72,000	77,500	83,000	
31.....		59,000	62,500	67,500	72,500	78,000	83,500	
32.....		60,000	63,500	68,000	73,000	78,500	84,500	
33.....			64,000	68,500	74,000	79,000	85,000	
34.....			64,500	69,000	74,500	80,000	85,500	
35.....			65,500	70,000	75,000	80,500		
36.....			66,000	70,500	75,500	81,000		
37.....			66,500	71,000	76,000	81,500		
38.....			67,500	72,000	77,000	82,000		
39.....			68,000	72,500	77,500	82,500		
40.....			68,500	73,000	78,000	83,500		
41.....			69,500	73,500	78,500	84,000		
42.....			70,000	74,000	79,000	84,500		
43.....			70,500	75,000	80,000	85,000		
44.....			71,500	75,500	80,500	85,500		
45.....			72,000	76,000	81,000			
46.....			72,500	76,500	81,500			
47.....			73,500	77,500	82,000			
48.....			74,000	78,000	83,000			

	2 axles	3 axles	4 axles	5 axles	6 axles	7 axles	8 axles
49.....			74,500	78,500	83,500		
50.....			75,500	79,000	84,000		
51.....			76,000	80,000	84,500		
52.....			76,500	80,500	85,000		
53.....			77,500	81,000	85,500		
54.....			78,000	81,500			
55.....			78,500	82,500			
56.....			79,500	83,000			
57.....			80,000	83,500			
58.....				84,000			
59.....				85,000			
60.....				85,500			

except that two consecutive sets of tandem axles may carry a gross load of 34,000 pounds each if the overall distance between the first and last axles is 36 feet or more.

(1) The gross weight on any one axle of a vehicle shall not exceed the limits prescribed in K.S.A. 8-1908, and amendments thereto.

(2) Except as otherwise provided by subsection (e), for vehicles and combinations of vehicles on the interstate system the table in this section shall not authorize a maximum gross weight of more than 80,000 pounds.

(3) The table in this section shall not apply to truck tractor and dump semitrailer or truck trailer combination when such are used as a combination unit exclusively for the transportation of sand, salt for highway maintenance operations, gravel, slag stone, limestone, crushed stone, cinders, coal, blacktop, dirt or fill material, when such vehicles are used for transportation to a construction site, highway maintenance or construction project or other storage facility, except that such vehicles or combination of vehicles shall not be exempted from any application of the table as may be required to determine applicable axle weights for triple and quad axles as defined in K.S.A. 8-1908, and amendments thereto. As used in this subpart paragraph (3), the term "dump semitrailer" means any semitrailer designed in such a way as to divest itself of the load carried thereon.

(b) Any vehicle registered under the laws of this state which vehicle is designed and used primarily for the transportation of property or for the transportation of 10 or more persons may, at the time of its registration, be subjected by the director of vehicles to investigation or test as may be necessary to enable such director to determine whether such vehicle may safely be operated upon the highways in compliance with all provisions of this act. Every such vehicle shall meet the following requirements:

(1) It shall be equipped with brakes as required in K.S.A. 8-1734, and amendments thereto.

(2) Every motor vehicle to be operated outside of business and residence districts shall have motive power adequate to propel such vehicle and any load thereon or to be drawn thereby, at a speed which will not impede or block the normal and reasonable movement of traffic. Exception to this requirement shall be recognized when reduced speed is necessary for safe operation or when a vehicle or combination of vehicles is necessarily or in compliance with law or police direction proceeding at reduced speed.

(c) It shall be unlawful for any person to operate any vehicle or combination of vehicles with a gross weight in excess of the limitations set forth in article 19 of chapter 8 of Kansas Statutes Annotated, and amendments thereto, except as provided in K.S.A. 8-1911, and amendments thereto.

(d) As used in this section, "interstate system" means the national system of interstate and defense highways.

(e) A vehicle, if operated by an engine fueled primarily by natural gas, may exceed any vehicle weight limit under this section, up to a maximum gross vehicle weight of 82,000 pounds, by an amount that is equal to the difference between:

(1) The weight of the vehicle attributable to the natural gas tank and fueling system carried by that vehicle; and

(2) the weight of a comparable diesel tank and fueling system.

Sec. 4. K.S.A. 8-1905 and 8-1909 and K.S.A. 2015 Supp. 8-1904 are hereby repealed.

Sec. 5. This act shall take effect and be in force from and after its publication in the Kansas register.

(Published in the Kansas Register April 14, 2016.)

SENATE BILL No. 314

AN ACT concerning the local food and farm task force; extending the expiration date; amending K.S.A. 2015 Supp. 2-3805 and repealing the existing section.

Be it enacted by the Legislature of the State of Kansas:

Section 1. K.S.A. 2015 Supp. 2-3805 is hereby amended to read as follows: 2-3805. (a) There is hereby established the local food and farm task force. The local food and farm task force shall be comprised of seven members, as follows:

(1) Three members appointed by the governor, including the chairperson of the task force;

(2) one member representing the Kansas department of agriculture appointed by the secretary of agriculture;

(3) one member representing the Kansas state university extension systems and agriculture research programs appointed by the dean of the college of agriculture of Kansas state university; and

(4) one member of the house committee on agriculture and natural resources appointed by the chairperson of the house committee on agriculture and natural resources and one member of the senate committee on agriculture appointed by the chairperson of the senate committee on agriculture. The legislative members shall be from different political parties.

(b) Members shall be appointed to the task force on or before August 1, 2014. The first meeting of the task force shall be called by the chairperson on or before September 1, 2014. Any vacancy in the membership of the task force shall be filled by appointment in the same manner prescribed by this section for the original appointment.

(c) (1) The task force may meet at any time and at any place within the state on the call of the chairperson. A quorum of the task force shall be four members. All actions of the task force shall be by motion adopted by a majority of those members present when there is a quorum.

(2) The staff of the Kansas department of agriculture and the legislative research department shall provide such assistance as may be requested by the task force. To facilitate the organization and start-up of such plan and structure, the Kansas department of agriculture shall provide administrative assistance.

(d) The local food and farm task force shall prepare a local food and farm plan containing policy and funding recommendations for expanding and supporting local food systems and for assessing and overcoming obstacles necessary to increase locally grown food production. The task force chairperson shall submit such plan to the senate committee on agriculture and the house committee on agriculture and natural resources at the beginning of the 2016 regular session of the legislature. The plan shall include:

(1) Identification of financial opportunities, technical support and training necessary for local and specialty crop production;

(2) identification of strategies and funding needs to make fresh and affordable locally grown foods more accessible;

(3) identification of existing local food infrastructures for processing, storing and distributing food and recommendations for potential expansion; and

(4) strategies for encouragement of farmers' markets, roadside markets and local grocery stores in unserved and underserved areas.

(e) The task force shall cease to exist on December 31, 2015.

(a) There is hereby established the local food and farm task force. The local food and farm task force shall be comprised of seven members, as follows:

(1) Three members appointed by the governor, including the chairperson of the task force;

(2) one member representing the Kansas department of agriculture appointed by the secretary of agriculture;

(3) one member representing the Kansas state university extension systems and agriculture research programs appointed by the dean of the college of agriculture of Kansas state university; and

(4) one member of the house committee on agriculture and natural resources appointed by the chairperson of the house committee on agriculture and natural resources and one member of the senate committee on agriculture appointed by the chairperson of the senate committee on agriculture. The legislative members shall be from different political parties.

(b) Members shall be appointed to the task force on or before August 1, 2016. The first meeting of the task force shall be called by the chairperson on or before September 1, 2016, or as soon as appointments are made. Any vacancy

in the membership of the task force shall be filled by appointment in the same manner prescribed by this section for the original appointment.

(c) (1) The task force may meet at any time and at any place within the state on the call of the chairperson. A quorum of the task force shall be four members. All actions of the task force shall be by motion adopted by a majority of those members present when there is a quorum.

(2) The staff of the Kansas department of agriculture and the legislative research department shall provide such assistance as may be requested by the task force. To facilitate the organization and start-up of such plan and structure, the Kansas department of agriculture shall provide administrative assistance.

(3) Members of the task force attending regular meetings authorized by the task force, and requesting reimbursement, shall be paid amounts for mileage as provided by K.S.A. 75-3223(c), and amendments thereto, for no more than four meetings.

(d) The local food and farm task force shall prepare a local food and farm plan containing policy and funding recommendations for expanding and supporting local food systems and for assessing and overcoming obstacles necessary to increase locally grown food production. The task force chairperson shall submit such plan to the senate committee on agriculture and the house committee on agriculture and natural resources at the beginning of the 2017 regular session of the legislature. The plan shall include:

(1) Identification of financial opportunities, technical support and training necessary to expand production and sales of locally grown agricultural products;

(2) identification of strategies and funding needs to make locally grown foods more accessible;

(3) identification of factors affecting affordability and profitability of locally grown foods;

(4) identification of existing local food infrastructures for processing, storing and distributing food and recommendations for potential expansion; and

(5) strategies for encouragement of farmers' markets, roadside markets and local grocery stores in unserved and underserved areas.

(e) This section shall expire on July 1, 2017.

Sec. 2. K.S.A. 2015 Supp. 2-3805 is hereby repealed.

Sec. 3. This act shall take effect and be in force from and after its publication in the Kansas register.

(Published in the Kansas Register April 14, 2016.)

HOUSE BILL No. 2134

AN ACT concerning consumer credit; relating to security freezes on protected consumer reports; amending K.S.A. 2015 Supp. 50-702 and repealing the existing section.

Be it enacted by the Legislature of the State of Kansas:

New Section 1. (a) A consumer reporting agency shall place a security freeze for a protected consumer if the consumer reporting agency receives a request from the protected consumer's representative for the placement of the security freeze and the protected consumer's representative:

(1) Submits the request to the consumer reporting agency at the address or other point of contact and in the manner specified by the consumer reporting agency;

(2) provides to the consumer reporting agency sufficient proof of identification of the protected consumer and the representative;

(3) provides to the consumer reporting agency sufficient proof of authority to act on behalf of the protected consumer; and

(4) pays to the consumer reporting agency a fee as provided in subsection (g).

(b) If a consumer reporting agency does not have a record pertaining to a protected consumer when the consumer reporting agency receives a request under subsection (a), the consumer reporting agency shall create a record for the protected consumer.

(c) Within 30 days after receiving a request that meets the requirements of subsection (a), a consumer reporting agency shall place a security freeze for the protected consumer.

(d) Unless a security freeze for a protected consumer is removed in accordance with subsection (f) or (i), a consumer reporting agency shall not release the protected consumer's consumer report, any information derived from the protected consumer's consumer report, or any record created for the protected consumer.

(continued)

(e) A security freeze for a protected consumer placed under subsection (c) shall remain in effect until:

(1) The protected consumer or the protected consumer's representative requests the consumer reporting agency to remove the security freeze in accordance with subsection (f); or

(2) the security freeze is removed in accordance with subsection (i).

(f) (1) If a protected consumer or a protected consumer's representative wishes to remove a security freeze for a protected consumer, the protected consumer or the protected consumer's representative shall:

(A) Submit a request for the removal of the security freeze to the consumer reporting agency at the address or other point of contact and in the manner specified by the consumer reporting agency;

(B) provide to the consumer reporting agency sufficient proof of identification of the protected consumer and:

(i) For a request by the protected consumer, proof that the sufficient proof of authority for the protected consumer's representative to act on behalf of the protected consumer is no longer valid; or

(ii) for a request by the representative of a protected consumer, sufficient proof of identification of the representative and sufficient proof of authority to act on behalf of the protected consumer; and

(C) pay to the consumer reporting agency a fee as provided in subsection (g).

(g) (1) Except as otherwise provided in subsection (g)(2), a consumer reporting agency shall not charge a fee for any service performed under this section.

(2) A consumer reporting agency may charge a reasonable fee, not exceeding \$10, for each placement or removal of a security freeze for a protected consumer, except a consumer reporting agency shall not charge any fee under this section if:

(A) The protected consumer's representative has obtained a police report or provided an affidavit of alleged fraud against the protected consumer and provides a copy of the report or the affidavit to the consumer reporting agency; or

(B) a request for the placement or removal of a security freeze is for a protected consumer who is under the age of 18 years at the time of the request and the consumer reporting agency has a consumer report pertaining to the protected consumer.

(h) This section shall not apply to:

(1) A person administering a credit file monitoring subscription service to which the protected consumer has subscribed or the representative of the protected consumer has subscribed on behalf of the protected consumer;

(2) a person providing the protected consumer or the protected consumer's representative with a copy of the protected consumer's consumer report on request of the protected consumer or the protected consumer's representative; or

(3) a person or entity listed in K.S.A. 2015 Supp. 50-723(i)(1) and (6) through (12) or 50-724(a)(1) through (5), and amendments thereto.

(i) A consumer reporting agency may remove a security freeze for a protected consumer or delete a record of a protected consumer if such security freeze was placed or the record was created based on a material misrepresentation of a fact by the protected consumer or the protected consumer's representative.

(j) Any person who fails to comply with any requirement imposed under this section with respect to any protected consumer shall be liable pursuant to the provisions of the fair credit reporting act.

(k) This section shall be part of and supplemental to the fair credit reporting act.

Sec. 2. K.S.A. 2015 Supp. 50-702 is hereby amended to read as follows: 50-702. The following words and phrases when used in the fair credit reporting act shall have the meanings ascribed to them in this section.

(a) The term "person" means any individual, partnership, corporation, trust, estate, cooperative, association, government or governmental subdivision or agency, or other entity.

(b) The term "consumer" means an individual.

(c) The term "consumer report" means any written, oral, or other communication of any information by a consumer reporting agency bearing on a consumer's credit worthiness, credit standing, credit capacity, character, general reputation, personal characteristics, or mode of living which is used or expected to be used or collected in whole or in part for the purpose of serving as a factor in establishing the consumer's eligibility for credit or insurance to be used primarily for personal, family, or household purposes, or employment purposes, or other purposes authorized under K.S.A. 50-703, and amendments thereto. The term does not include:

(1) Any report containing information solely as to transactions or

experiences between the consumer and the person making the report;

(2) any authorization or approval of a specific extension of credit directly or indirectly by the issuer of a credit card or similar device; or

(3) any report in which a person who has been requested by a third party to make a specific extension of credit directly or indirectly to a consumer conveys that decision with respect to such request, if the third party advises the consumer of the name and address of the person to whom the request was made and such person makes the disclosures to the consumer required under K.S.A. 50-714, and amendments thereto.

(d) The term "investigative consumer report" means a consumer report or portion thereof in which information on a consumer's character, general reputation, personal characteristics, or mode of living is obtained through personal interviews with neighbors, friends, or associates of the consumer reported on or with others with whom the consumer is acquainted or who may have knowledge concerning any such items of information. However, such information shall not include specific factual information on a consumer's credit record obtained directly from a creditor of the consumer or from a consumer reporting agency when such information was obtained directly from a creditor of the consumer or from the consumer.

(e) The term "consumer reporting agency" means any person which, for monetary fees, dues, or on a cooperative nonprofit basis, regularly engages in whole or in part in the practice of assembling or evaluating consumer credit information or other information on consumers for the purpose of furnishing consumer reports to third parties, and which uses any means or facility of interstate commerce for the purpose of preparing or furnishing consumer reports.

(f) The term "file," when used in connection with information on any consumer, means all of the information on that consumer recorded and retained by a consumer reporting agency regardless of how the information is stored.

(g) The term "employment purposes" when used in connection with a consumer report means a report used for the purpose of evaluating a consumer for employment, promotion, reassignment or retention as an employee.

(h) The term "medical information" means information or records obtained, with the consent of the individual to whom it relates, from licensed physicians or medical practitioners, hospitals, clinics, or other medical or medically related facilities.

(i) The term "clear and proper identification" means information generally deemed sufficient to identify a person.

(j) The term "security freeze" means a notice placed on a consumer report, at the request of the consumer and subject to certain exceptions, that prohibits a consumer reporting agency from releasing the consumer's consumer report or credit score relating to the extension of credit.

(k) The term "protected consumer" means an individual who is:

(1) Under the age of 16 years at the time a request for the placement of a security freeze is made under section 1, and amendments thereto; or

(2) an individual for whom a guardian or conservator has been appointed.

(l) The term "record" means a compilation of information about a protected consumer that satisfies all of the following:

(1) The compilation identifies the protected consumer; and

(2) the compilation is created by a consumer reporting agency solely for the purpose of complying with section 1, and amendments thereto.

(m) The term "security freeze for a protected consumer" means one of the following:

(1) If a consumer reporting agency does not have a file pertaining to a protected consumer, a restriction placed on the protected consumer's record that prohibits the consumer reporting agency from releasing the protected consumer's record; or

(2) if a consumer reporting agency has a file pertaining to the protected consumer, a restriction placed on the protected consumer's consumer report that prohibits the consumer reporting agency from releasing the protected consumer's consumer report or any information derived from the protected consumer's consumer report.

(n) The term "sufficient proof of authority" means documentation that shows a representative has authority to act on behalf of a protected consumer, including any of the following:

(1) An order issued by a court;

(2) a lawfully executed and valid power of attorney; or

(3) a written, notarized statement signed by a representative that expressly describes the authority of the representative to act on behalf of a protected consumer.

(o) The term "sufficient proof of identification" means information or documentation that identifies a protected consumer or a representative of a protected consumer, including any of the following:

(1) A social security number or a copy of a social security card issued by the social security administration; or

(2) a certified or official copy of a birth certificate issued by the entity authorized to issue the birth certificate.

Sec. 3. K.S.A. 2015 Supp. 50-702 is hereby repealed.

Sec. 4. This act shall take effect and be in force from and after January 1, 2017, and its publication in the Kansas register.

(Published in the Kansas Register April 14, 2016.)

HOUSE BILL No. 2447

AN ACT concerning crimes, punishment and criminal procedure; relating to the secretary of corrections; program credits; delinquent time lost on parole; amending K.S.A. 2015 Supp. 21-6821 and 75-5217 and repealing the existing sections.

Be it enacted by the Legislature of the State of Kansas:

Section 1. K.S.A. 2015 Supp. 21-6821 is hereby amended to read as follows: 21-6821. (a) The secretary of corrections is hereby authorized to adopt rules and regulations providing for a system of good time calculations. Such rules and regulations shall provide circumstances upon which an inmate may earn good time credits and for the forfeiture of earned credits. Such circumstances may include factors related to program and work participation and conduct and the inmate's willingness to examine and confront past behavioral patterns that resulted in the commission of the inmate's crimes.

(b) For purposes of determining release of an inmate, the following shall apply with regard to good time calculations:

(1) Good behavior by inmates is the expected norm and negative behavior will be punished; and

(2) the amount of good time which can be earned by an inmate and subtracted from any sentence is limited to:

(A) For a crime committed on or after July 1, 1993, an amount equal to 15% of the prison part of the sentence;

(B) for a nondrug severity level 7 through 10 crime committed on or after January 1, 2008, an amount equal to 20% of the prison part of the sentence; or

(C) for a drug severity level 3 or 4 crime committed on or after January 1, 2008, but prior to July 1, 2012, or a drug severity level 3 through 5 crime committed on or after July 1, 2012, an amount equal to 20% of the prison part of the sentence.

(c) The postrelease supervision term of a person sentenced to a term of imprisonment that includes a sentence for a sexually violent crime as defined in K.S.A. 22-3717, and amendments thereto, a sexually motivated crime in which the offender has been ordered to register pursuant to K.S.A. 22-3717(d)(1)(D)(vii), and amendments thereto, electronic solicitation, K.S.A. 21-3523, prior to its repeal, or K.S.A. 2015 Supp. 21-5509, and amendments thereto, or unlawful sexual relations, K.S.A. 21-3520, prior to its repeal, or K.S.A. 2015 Supp. 21-5512, and amendments thereto, shall have any time which is earned and subtracted from the prison part of such sentence and any other consecutive or concurrent sentence pursuant to good time calculation added to such inmate's postrelease supervision term.

(d) An inmate shall not be awarded good time credits pursuant to this section for any review period established by the secretary of corrections in which a court finds that the inmate has done any of the following while in the custody of the secretary of corrections:

(1) Filed a false or malicious action or claim with the court;

(2) brought an action or claim with the court solely or primarily for delay or harassment;

(3) testified falsely or otherwise submitted false evidence or information to the court;

(4) attempted to create or obtain a false affidavit, testimony or evidence; or

(5) abused the discovery process in any judicial action or proceeding.

(e) (1) For purposes of determining release of an inmate who is serving only a sentence for a nondrug severity level 4 through 10 crime or a drug severity level 3 or 4 crime committed on or after January 1, 2008, but prior to July 1, 2012, or an inmate who is serving only a sentence for a nondrug severity level 4 through 10 crime or a drug severity level 3 through 5 crime committed on or after July 1, 2012, the secretary of corrections is hereby authorized to adopt rules and regulations regarding program credit calculations. Such rules and regulations

shall provide circumstances upon which an inmate may earn program credits and for the forfeiture of earned credits and such circumstances may include factors substantially related to program participation and conduct. In addition to any good time credits earned and retained, the following shall apply with regard to program credit calculations:

(A) A system shall be developed whereby program credits may be earned by inmates for the successful completion of requirements for a general education diploma, a technical or vocational training program, a substance abuse treatment program or any other program designated by the secretary which has been shown to reduce offenders' risk after release; and

(B) the amount of time which can be earned and retained by an inmate for the successful completion of programs and subtracted from any sentence is limited to not more than 90 120 days.

(2) Any time which is earned and subtracted from the prison part of the sentence of any inmate pursuant to program credit calculation shall not be added to such inmate's postrelease supervision term, if applicable, except that the postrelease supervision term of a person sentenced to a term of imprisonment that includes a sentence for a sexually violent crime as defined in K.S.A. 22-3717, and amendments thereto, a sexually motivated crime in which the offender has been ordered to register pursuant to K.S.A. 22-3717(d)(1)(D)(vii), and amendments thereto, electronic solicitation, K.S.A. 21-3523, prior to its repeal, or K.S.A. 2015 Supp. 21-5509, and amendments thereto, or unlawful sexual relations, K.S.A. 21-3520, prior to its repeal, or K.S.A. 2015 Supp. 21-5512, and amendments thereto, shall have any time which is earned and subtracted from the prison part of such sentence and any other consecutive or concurrent sentence pursuant to program credit calculation added to such inmate's postrelease supervision term.

(3) When separate sentences of imprisonment for different crimes are imposed on a defendant on the same date, a defendant shall only be eligible for program credits if such crimes are a nondrug severity level 4 through 10, a drug severity level 3 or 4 committed prior to July 1, 2012, or a drug severity level 3 through 5 committed on or after July 1, 2012.

(4) Program credits shall not be earned by any offender successfully completing a sex offender treatment program.

(5) The secretary of corrections shall report to the Kansas sentencing commission and the Kansas reentry policy council the data on the program credit calculations.

(f) The state of Kansas, the secretary of corrections and the secretary's agents or employees shall not be liable for damages caused by any negligent or wrongful act or omission in making the good time and program credit calculations authorized by this section.

(g) ~~The secretary of corrections shall make the good time and program credit calculations authorized by the amendments to this section by this act no later than January 1, 2016.~~

(1) ~~The secretary of corrections shall make the good time and program credit calculations authorized by section 1 of chapter 54 of the 2015 Session Laws of Kansas no later than January 1, 2016.~~

(2) ~~The secretary of corrections shall make the program credit calculations authorized by the amendments to this section by this act no later than January 1, 2017.~~

(h) The amendments to this section by section 1 of chapter 54 of the 2015 session laws of Kansas and this act shall be construed and applied retroactively.

Sec. 2. K.S.A. 2015 Supp. 75-5217 is hereby amended to read as follows: 75-5217. (a) At any time during release on parole, conditional release or postrelease supervision, the secretary of corrections may issue a warrant for the arrest of a released inmate for violation of any of the conditions of release, or a notice to appear to answer to a charge of violation. Such notice shall be served personally upon the released inmate. The warrant shall authorize any law enforcement officer to arrest and deliver the released inmate to a place as provided by subsection (g). Any parole officer may arrest such released inmate without a warrant, or may deputize any other officer with power of arrest to do so by giving such officer a written or verbal arrest and detain order setting forth that the released inmate, in the judgment of the parole officer, has violated the conditions of the inmate's release. A written arrest and detain order delivered to the official in charge of the institution or place to which the released inmate is brought for detention shall be sufficient warrant for detaining the inmate. After making an arrest the parole officer shall present to the detaining authorities a similar arrest and detain order and statement of the circumstances of violation. Pending a hearing, as provided in this section, upon any charge of violation the released inmate shall remain incarcerated in the institution or place to

(continued)

which the inmate is taken for detention.

(b) Upon such arrest and detention, the parole officer shall notify the secretary of corrections, or the secretary's designee, within five days and shall submit in writing a report showing in what manner the released inmate had violated the conditions of release. After such notification is given to the secretary of corrections, or upon an arrest by warrant as herein provided and the finding of probable cause pursuant to procedures established by the secretary of a violation of the released inmate's conditions of release, the secretary or the secretary's designee may cause the released inmate to be brought before the prisoner review board, its designee or designees, for a hearing on the violation charged, under such rules and regulations as the board may adopt, or may dismiss the charges that the released inmate has violated the conditions of release and order the released inmate to remain on parole, conditional release or post release supervision. *A dismissal of charges may be conditioned on the released inmate agreeing to the withholding of credit for the period of time from the date of the issuance of the secretary's warrant and the offender's arrest or return to Kansas as provided by subsection (f).* It is within the discretion of the board whether such hearing requires the released inmate to appear personally before the board when such inmate's violation results from a conviction for a new felony or misdemeanor. An offender under determinative sentencing whose violation does not result from a conviction of a new felony or misdemeanor may waive the right to a final revocation hearing before the board under such conditions and terms as may be prescribed by rules and regulations promulgated by the secretary of corrections. Relevant written statements made under oath shall be admitted and considered by the board, its designee or designees, along with other evidence presented at the hearing. If the violation is established to the satisfaction of the board, the board may continue or revoke the parole or conditional release, or enter such other order as the board may see fit. The revocation of release of inmates who are on a specified period of postrelease supervision shall be for a six-month period of confinement from the date of the revocation hearing before the board or the effective date of waiver of such hearing by the offender pursuant to rules and regulations promulgated by the board, if the violation does not result from a conviction for a new felony or misdemeanor. Such period of confinement may be reduced by not more than three months based on the inmate's conduct, work and program participation during the incarceration period. The reduction in the incarceration period shall be on an earned basis pursuant to rules and regulations adopted by the secretary of corrections.

(c) If the violation results from a conviction for a new felony, upon revocation, the inmate shall serve a period of confinement, to be determined by the prisoner review board, which shall not exceed the remaining balance of the period of postrelease supervision, even if the new conviction did not result in the imposition of a new term of imprisonment.

(d) If the violation results from a conviction for a new misdemeanor, upon revocation, the inmate shall serve a period of confinement, to be determined by the prisoner review board, which shall not exceed the remaining balance of the period of postrelease supervision.

(e) In the event the released inmate reaches conditional release date as provided by K.S.A. 22-3718, and amendments thereto, after a finding of probable cause, pursuant to procedures established by the secretary of corrections of a violation of the released inmate's conditions of release, but prior to a hearing before the prisoner review board, the secretary of corrections shall be authorized to detain the inmate until the hearing by the board. The secretary shall then enforce the order issued by the board.

(f) If the secretary of corrections issues a warrant for the arrest of a released inmate for violation of any of the conditions of release and the released inmate is subsequently arrested in the state of Kansas, either pursuant to the warrant issued by the secretary of corrections or for any other reason, the released inmate's sentence shall not be credited with the period of time from the date of the issuance of the secretary's warrant to the date of the released inmate's arrest, *except as provided by subsection (i).*

If a released inmate for whom a warrant has been issued by the secretary of corrections for violation of the conditions of release is subsequently arrested in another state, and the released inmate has been authorized as a condition of such inmate's release to reside in or travel to the state in which the released inmate was arrested, and the released inmate has not absconded from supervision, the released inmate's sentence shall not be credited with the period of time from the date of the issuance of the warrant to the date of the released inmate's arrest, *except as provided by subsection (i).* If the released inmate for whom a warrant

has been issued by the secretary of corrections for violation of the conditions of release is subsequently arrested in another state for reasons other than the secretary's warrant and the released inmate does not have authorization to be in the other state or if authorized to be in the other state has been charged by the secretary with having absconded from supervision, the released inmate's sentence shall not be credited with the period of time from the date of the issuance of the warrant by the secretary to the date the released inmate is first available to be returned to the state of Kansas, *except as provided by subsection (i).* If the released inmate for whom a warrant has been issued by the secretary of corrections for violation of a condition of release is subsequently arrested in another state pursuant only to the secretary's warrant, the released inmate's sentence shall not be credited with the period of time from the date of the issuance of the secretary's warrant to the date of the released inmate's arrest, regardless of whether the released inmate's presence in the other state was authorized or the released inmate had absconded from supervision, *except as provided by subsection (i).*

The secretary may issue a warrant for the arrest of a released inmate for violation of any of the conditions of release and may direct that all reasonable means to serve the warrant and detain such released inmate be employed including, but not limited to, notifying the federal bureau of investigation of such violation and issuance of warrant and requesting from the federal bureau of investigation any pertinent information it may possess concerning the whereabouts of the released inmate.

(g) Law enforcement officers shall execute warrants issued by the secretary of corrections, and shall deliver the inmate named in the warrant to the jail used by the county where the inmate is arrested unless some other place is designated by the secretary, in the same manner as for the execution of any arrest warrant.

(h) For the purposes of this section, an inmate or released inmate is an individual under the supervision of the secretary of corrections, including, but not limited to, an individual on parole, conditional release, postrelease supervision, probation granted by another state or an individual supervised under any interstate compact in accordance with the provisions of the uniform act for out-of-state parolee supervision, K.S.A. 22-4101 et seq., and amendments thereto.

(i) *Time not credited to the released inmate's sentence pursuant to subsection (f) shall be credited if the violation charges are dismissed without an agreement providing otherwise or the violations are not established to the satisfaction of the board.*

Sec. 3. K.S.A. 2015 Supp. 21-6821 and 75-5217 are hereby repealed.

Sec. 4. This act shall take effect and be in force from and after its publication in the Kansas register.

State of Kansas

Department of Agriculture Division of Water Resources

Permanent Administrative Regulations

Article 1.—DEFINITIONS

5-1-1. Definitions. As used in these regulations and the Kansas water appropriation act and by the division of water resources in the administration of the Kansas water appropriation act, unless the context clearly requires otherwise, each of the following terms shall have the meaning specified in this regulation:

(a) "Above-baseflow stage" means streamflow that is in response to a significant runoff event during which period the water level elevation of the stream is greater than the elevation of the adjacent water table.

(b) "Acceptable quality surface water" means surface water that will not degrade the quality of the groundwater source into which the surface water is discharged.

(c) "Application" means the formal document submitted on the form prescribed by the chief engineer for a permit to appropriate water for beneficial use and filed

in the office of the chief engineer pursuant to K.S.A. 82a-708a and 82a-709, and amendments thereto.

(d) "Approval of application" means a permit to proceed with construction of diversion works and the diversion and use of water in accordance with the terms and conditions specified in the permit. Approval of application shall not constitute any permit that may be required by other state laws.

(e) "Aquifer storage" means the act of storing water in an aquifer by artificial recharge for subsequent diversion and beneficial use.

(f) "Aquifer storage and recovery system" means the physical infrastructure that meets the following conditions:

(1) Is constructed and operated for artificial recharge, storage, and recovery of source water; and

(2) consists of apparatus for diversion, treatment, recharge, storage, extraction, and distribution.

(g) "Artificial recharge" means the use of source water to artificially replenish the water supply in an aquifer.

(h) "Authorized representative" means any staff employee designated by the chief engineer to perform duties and functions on behalf of the chief engineer.

(i) "Bank storage" means water absorbed by and temporarily stored in the banks and bed of a stream during above-baseflow stage.

(j) "Bank storage well" means a well used to divert or withdraw water from bank storage.

(k) "Basin storage area" means the portion of the aquifer used for aquifer storage that has defined horizontal boundaries and is delimited by a maximum index level and a minimum index level.

(l) "Basin storage loss" means that portion of artificial recharge naturally flowing or discharging from the basin storage area.

(m) "Basin term permit" means a term permit to appropriate surface water from a stream within a specific drainage basin, or a portion of it, for a reasonable quantity of water, not to exceed a maximum of 100 acre-feet per calendar year, for use in either of the following:

- (1) Drilling oil and gas wells; or
- (2) construction projects within the specified basin.

(n) "Battery of wells" means two or more wells connected to a common pump by a manifold, or not more than four wells in the same local source of supply within a 300-foot-radius circle that are being operated by pumps not to exceed a total maximum rate of diversion of 800 gallons per minute and that supply water to a common distribution system.

(o) "Beneficial uses of water" are the following:

- (1) Domestic uses;
- (2) stockwatering;
- (3) municipal uses;
- (4) irrigation;
- (5) industrial uses;
- (6) recreational uses;
- (7) waterpower;
- (8) artificial recharge;
- (9) hydraulic dredging;
- (10) contamination remediation;
- (11) dewatering;
- (12) fire protection;
- (13) thermal exchange; and

(14) sediment control in a reservoir.

(p) "Complete and accurate water use report" means a water use report that the water right owner has filed pursuant to K.S.A. 82a-732, and amendments thereto, that provided all of the information required on the form prescribed by the chief engineer, including the following:

(1) The quantity of water diverted during the calendar year;

(2) if the diversion of water was required to be metered during the calendar year for which the report is being filed, the information required by K.A.R. 5-3-5e;

(3) if the water was used for irrigation purposes, the number of acres that were irrigated; and

(4) if the water was diverted from a sand and gravel pit operation, the size of the surface area of the pit in acres at the end of the calendar year for which the report was filed.

(q) "Completed substantially as shown on aerial photograph, topographic map, or plat," as used to define the authorized point of diversion, means within 300 feet of the location as shown on the aerial photograph, topographic map, or plat accompanying the application.

(r) "Confined Dakota aquifer system" means that portion of the Dakota aquifer system overlain by a confining layer resulting in the aquifer normally being under greater than atmospheric pressure.

(s) "Conjunctive use" means the safe-yield management and operation of an aquifer in coordination with a surface water system to enhance the use of the total water supply availability in accordance with the provisions of the water appropriation act.

(t) "Contamination remediation" means the diversion of water by a state agency, or under a written agreement or order of an appropriate state agency, for the purpose of improving the water quality.

(u) "Dakota aquifer system" shall include the Dakota formation, the Kiowa formation, the Cheyenne sandstone, and, where hydraulically connected, the Morrison formation.

(v) "Dakota aquifer system well" means a well or proposed well screened in whole or in part in the Dakota aquifer system.

(w) "Dam" means any artificial barrier, together with all appurtenant works, that does or could impound water.

(x) "Dewatering" means the removal of surface water or groundwater to achieve either of the following:

(1) Facilitate the construction of a building, pipeline, or other facility; or

(2) protect a building, levee, mining activity, or other facility.

(y) "Direct diversion of surface water" means the diversion of surface water directly from a stream by means of a pump, headgate, siphon, or similar installation, for application to beneficial use without storing it behind a dam, levee, or similar type of structure.

(z) "Diversion" means the act of bringing water under control by means of a well, pump, dam, or other device for delivery and distribution for the proposed use.

(aa) "Diversion works" means any well, pump, power unit, power source, dam, and any other devices necessary to bring water under control for delivery to a distribution system by which the water will be distributed

(continued)

to the proposed use and any other equipment required as a condition of the permit, including a check valve, water level measurement tube, meter, or other measuring device.

(bb) "Division" means the division of water resources of the Kansas department of agriculture.

(cc) "Dry hydrant" means a permanent, unpressurized intake pipe used to remove water from a pond, stream, reservoir, or other surface water supply by means of suction or vacuum supplied by a fire truck or other portable pumping device.

(dd) "Field inspection" means that for the purpose of issuing a certificate of appropriation pursuant to K.S.A. 82a-714 and amendments thereto, the chief engineer conducts a test of the rate of diversion of the diversion works under the normal and maximum conditions that the diversion works actually applied water to beneficial use during the perfection period. The chief engineer also collects all other information necessary to prepare a certificate, including the following:

(1) A description of the location and size of the place where water was actually applied to beneficial use during the perfection period in accordance with the terms, conditions, and limitations of the approval of application;

(2) information on the quantity and rate of water that was applied to the authorized use during the perfection period; and

(3) the actual location of the point or points of diversion from which water was diverted in accordance with the terms, conditions, and limitations of the approval of application.

(ee) "Fire protection" means the use of water for fire protection by a fire department for public protection in general.

(ff) "Fish farming" means the controlled cultivation and harvest of aquatic animals.

(gg) "Flow-straightening vanes" means vanes, or any other devices installed at the upstream throat of a measuring chamber for the purpose of aligning all velocity components of flow parallel with the flow in the measuring chamber at the water flowmeter sensor location.

(hh) "Full irrigation" means the application of water to crops during the growing season. Full irrigation shall include water for preirrigation.

(ii) "Groundwater" means water below the surface of the earth.

(jj) "Growing season" means the average frost-free period of the year.

(kk) "Household purposes" means the use of water by a person for cooking, cleaning, washing, bathing, human consumption, rest room facilities, fire protection, and other uses normally associated with the operation of a household.

(1) "Fire protection" shall be considered to be use of water for "household purposes" if either of the following conditions is met:

(A) Water is available from a "dry hydrant" that has been installed on a pond located within 1,000 feet of the residence.

(B) Water can be pumped from a well located within 1,000 feet of the residence for fire protection.

(2) Household purposes shall also include the replace-

ment of the potential net evaporation from a domestic pond of up to ½ acre in surface area if both of the following conditions are met:

(A) The pond is utilized for aesthetic purposes as an integral part of the landscaping of a house.

(B) Any portion of the pond is located within 300 feet of the closest edge of the house.

(3) The maximum reasonable annual quantity of groundwater that may be pumped into a pond to be withdrawn later for domestic fire protection shall not exceed 0.06 acre-feet plus the average annual potential net evaporation of a pond at that location in the state having a surface area of 0.2 of an acre.

(4) Household purposes shall also include the use of 1½ acre-feet of water or less per calendar year by an industrial user, restaurant, hotel, motel, church, camp, correctional facility, educational institution, or similar entity for household purposes.

(ll) "Hydraulic dredging" means the removal of saturated aggregate from a stream channel, pit, or quarry by means of hydraulic suction and the pumping of the aggregate and water mixture as a slurry to a location where at least 95 percent of the water returns directly to the source of supply.

(mm) "Immediate vicinity," as used in specifying the place of use for a water right in which the water is authorized to be used for municipal purposes, means within 2,640 feet of the corporate limits of the municipality, rural water district, or other entity.

(nn) "In compliance" means that a water flowmeter does not meet any of the criteria of K.A.R. 5-1-9 for being out of compliance.

(oo) "Index level" means elevations established spatially throughout a basin storage area to be used to represent the maximum volume of a basin storage area, and storage available for recovery based upon accounting methodology, and conditions of the permit.

(pp) "Indirect use" means the total of the seepage loss and the average annual potential net evaporation loss from the surface of water originally impounded in a reservoir for beneficial use.

(qq) "Industrial use" means the use of water in connection with the manufacture, production, transport, or storage of products, or the use of water in connection with providing commercial services, including water used in connection with steam electric power plants, greenhouses, fish farms, poultry operations that are not incidental to the operation of a traditional farmstead pursuant to K.S.A. 82a-701(c) and amendments thereto, secondary and tertiary oil recovery, air conditioning, heat pumps, equipment cooling, and all uses of water associated with the removal of aggregate for commercial purposes except the following:

(1) The evaporation caused by exposing the groundwater table or increasing the surface area of a stream, lake, pit, or quarry by excavation or dredging, unless the evaporation has a substantially adverse impact on the area groundwater supply; and

(2) hydraulic dredging.

(rr) "Irrigation use" means the use of water for the following:

(1) The growing of crops;

(2) the watering of gardens, orchards, and lawns ex-

ceeding two acres in area; and

(3) the watering of golf courses, parks, cemeteries, athletic fields, racetrack grounds, and similar facilities.

(ss) "Maximum index level" means the maximum elevation for storage within a basin storage area or, if the basin storage area is subdivided, a smaller subdivided area.

(tt) "Measuring chamber" means a cylindrical chamber in which a water flowmeter is installed that is calibrated to match the measuring element of the water flowmeter and the nominal size of the pipe in which it is installed.

(uu) "Minimum index level" means 20 feet above the bedrock elevation or an alternatively proposed minimum elevation for storage within a basin storage area or, if the basin storage area is subdivided, a smaller subdivided area.

(vv) "Municipal use" means the various uses made of water delivered through a common distribution system operated by any of the following:

- (1) A municipality;
- (2) a rural water district;
- (3) a water district;
- (4) a public wholesale water supply district;
- (5) any person or entity serving 10 or more hookups for residences or mobile homes; or
- (6) any other similar entity distributing water to other water users for various purposes.

Municipal use shall also include the use of water by restaurants, hotels, motels, churches, camps, correctional facilities, educational institutions, and similar entities using water that does not qualify as a domestic use.

(ww) "Nonvolatile memory" means the ability of a water flowmeter to retain the values stored in the mechanical or electronic memory if all power, including backup battery power, is removed.

(xx) "Normal operating range" means the range of flow rates for which the water flowmeter will meet the accuracy requirements of K.A.R. 5-1-4 (a), as certified by the water flowmeter manufacturer.

(yy) "Off-season irrigation" means the application of water to land for the purpose of storing moisture in the soil for future use by a crop that will not be irrigated during the growing season.

(zz) "Operator," as used in the regulation of sand and gravel pits, means any person who engages in mining sand or gravel, or both.

(aaa) "Perennial stream" means a stream, or part of a stream, that normally flows during all of the calendar year, except during a drought.

(bbb) "Perfect" means the actions taken by a water user to develop an approval of application into a water right. These actions shall consist of the completion of the diversion works and the actual application of water to the authorized beneficial use in accordance with the terms, conditions, and limitations of the approval of application.

(ccc) "Point of diversion" means the point at which water is diverted or withdrawn from a source of water supply.

(ddd) "Point of diversion of a dewatering site" means the geographic center of the area from which water is temporarily removed to lower the static water level or streamflow to allow one construction project or one excavation to take place. Each one-quarter linear mile of construction trench, or part thereof, shall have at least one

point of diversion.

(eee) "Point of diversion of a remediation site" means the geographic center of the area from which water is being removed to be treated or injected into a single disposal well.

(fff) "Point of diversion for storage of surface water in a reservoir created by a dam" means the point at which the longitudinal axis of the dam crosses the centerline of the stream impounded by the reservoir.

(ggg) "Potential annual runoff" means the mean annual runoff for the watershed of the reservoir.

(hhh) "Preirrigation" means the application of water to the land for a crop before planting to ensure adequate moisture for early plant growth.

(iii) "Primary well" means a well for which a standby well is available.

(jjj) "Prior right" means a vested right, an appropriation right with earlier priority, or a permit with earlier priority than that of a subsequent appropriation right or permit.

(kkk) "Proven reserves" means extractable sand and gravel deposits for which good estimates of the quantity and quality have been made by various means, including core drilling.

(lll) "Recharge" means the natural infiltration of surface water or rainfall into an aquifer from its catchment area.

(mmm) "Recharge credit" means the quantity of water that is stored in the basin storage area and that is available for subsequent appropriation for beneficial use by the operator of the aquifer storage and recovery system.

(nnn) "Recreation storage" means the storage and use of water within the reservoir for recreational use as defined in this regulation. Water stored for recreational use in a reservoir shall be considered to be an indirect use of water.

(ooo) "Recreational use" means a use of water in accordance with a water right that provides entertainment, enjoyment, relaxation, and fish and wildlife benefits.

(ppp) "Rediversion of water" means releasing or withdrawing water that had been previously impounded behind a dam, levee, or similar type of structure, by use of a pump, outlet tube, headgate, or similar type of device, and the application of the water directly to beneficial use.

(qqq) "Register" means an integral or remote device that displays the quantity of water passing the water flowmeter sensor and is part of the water flowmeter.

(rrr) "Remediation site" means the geographic area where contamination is being removed from groundwater.

(sss) "Reservoir" means the area upstream from a dam that contains, or will contain, impounded water.

(ttt) "Reservoir capacity" means the volume of water that can be stored below the lower of either of the following:

- (1) The elevation of the principal spillway tube; or
- (2) the lowest uncontrolled spillway in the reservoir.

(uuu) "Reservoir having a total water volume of less than 15 acre-feet," as used in K.S.A. 82a-728 and amendments thereto, means a reservoir having a capacity of 15 acre-feet or less as measured at the principal spillway tube or the lowest uncontrolled spillway, whichever is lower.

(vvv) "Safe yield" means the long-term sustainable yield of the source of supply, including hydraulically connected surface water or groundwater.

(www) "Sand and gravel pit operation" means a proj-

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ect that meets the following conditions:

(1) Excavates overburden for mining sand or gravel, or both, exposing the underlying groundwater table to evaporation; and

(2) has a perimeter equal to or greater than its depth.

(xxx) "Sediment control in a reservoir" means a beneficial use of water that meets both of the following criteria:

(1) The water is stored in a reservoir that has no other authorized type of beneficial use, except domestic use.

(2) The water is stored only in the part of the reservoir designed and constructed for the storage of sediment.

(yyy) "Source water" means water used for artificial recharge that meets the following conditions:

(1) Is available for appropriation for beneficial use;

(2) is above base-flow stage in the stream;

(3) is not needed to satisfy minimum desirable stream-flow requirements; and

(4) will not degrade the ambient groundwater quality in the basin storage area.

(zzz) "Specialty crop" means a crop other than a normal Kansas field crop. This term shall include turf grass, trees, vegetables, ornamentals, and other similar crops.

(aaaa) "Standby well" means a well that can withdraw water from the same source of supply as the primary well and that is used only when water is temporarily unavailable from the primary well or wells authorized to be used on the same place of use because of mechanical failure, maintenance, or power failure. A standby well may also be used for fire protection or a similar type of emergency.

(bbbb) "Static water level" means the depth below land surface at which the top of the groundwater is found when not affected by recent pumping.

(cccc)(1) "Stockwatering" means the watering of livestock and other uses of water directly related to either of the following:

(A) The operation of a feedlot with the capacity to confine 1,000 or more head of cattle; or

(B) any other confined livestock operation or dairy that would divert 15 or more acre-feet of water per calendar year.

(2) Stockwatering shall not include the irrigation of feed grains or other crops.

(3) For the purposes of this subsection, a group of feedlots or other confined feeding operations shall be considered to be one feedlot or confined feeding operation if both of these conditions are met:

(A) There are common feeding or other physical facilities.

(B) The group of facilities is under common management.

(dddd) "Straight pipe" means a straight length of pipe free of all internal obstructions, including size changes, valves, cooling coils, injection ports, sand or foreign material, and any other condition that would cause a disturbance of the internal velocity profile in the pipe. Internal obstructions shall not include properly designed, constructed, and installed straightening vanes and inspection ports.

(eeee) "Stream channel aquifer" means unconsolidated water-bearing deposits in river valleys, flood plains, and terraces that are separate and distinct from any other aquifer and capable of yielding water in sufficient quantities for beneficial use.

(ffff) "Surface water" means water in creeks, rivers, or

other watercourses and in reservoirs, lakes, and ponds.

(gggg) "Term permit" means a permit to appropriate water that is issued for a specified period of time and exceeds the criteria for a temporary permit specified in K.S.A. 82a-727, and amendments thereto, and K.A.R. 5-9-3 through K.A.R. 5-9-5. At the end of the specified time, or any authorized extension approved by the chief engineer, the term permit shall be automatically dismissed, and any priority it may have had shall be forfeited.

(hhhh) "The production and return of saltwater in connection with the operation of oil and gas wells in accordance with the written approval granted therefor by the Kansas corporation commission pursuant to K.S.A. 55-901, and amendments thereto" means only that saltwater actually produced during the primary production of oil and gas wells and shall not include the following:

(1) Saltwater used in the drilling of an oil and gas well; and

(2) saltwater injected into an enhanced recovery injection well, unless that saltwater was produced in the primary production of the oil and gas well, separated from the oil and gas, and then subsequently reinjected.

(iiii) "Thermal exchange" means the use of water for climate control in a nondomestic building and in a manner that is essentially nonconsumptive to the source of supply.

(jjjj) "Totalizer" means the mechanical or electronic portion of the register that displays the total quantity of water that has passed the water flowmeter sensor.

(kkkk) "Unconfined Dakota aquifer system" means that portion of the Dakota aquifer system not overlain by a confining layer in which the aquifer is in equilibrium with atmospheric pressure.

(llll) "Unconsolidated regional aquifer" means a body of mostly unconsolidated and heterogeneous water-bearing deposits that are hydraulically and geologically contiguous and are capable of yielding water in sufficient quantities for beneficial use.

(mmmm) "Waste of water" means any act or omission that causes any of the following:

(1) The diversion or withdrawal of water from a source of supply that is not used or reapplied to a beneficial use on or in connection with the place of use authorized by a vested right, an appropriation right, or an approval of application for a permit to appropriate water for beneficial use;

(2) the unreasonable deterioration of the quality of water in any source of supply, thereby causing impairment of a person's right to the use of water;

(3) the escaping and draining of water intended for irrigation use from the authorized place of use; or

(4) the application of water to an authorized beneficial use in excess of the needs for this use.

(nnnn) "Waterpower use" means the use of falling water for hydroelectric or hydromechanical power.

(oooo) "Water balance" means the method of determining the amount of water in storage in a basin storage area by accounting for inflow to, outflow from, and changes in storage in that basin storage area.

(pppp) "Water flowmeter" means the combination of a flow-sensing device, measuring chamber, integral or remote display device or register, and any connecting parts required to make a working assemblage to measure, re-

cord, and allow determination of flow rate and total quantity of water flowing past the water flowmeter sensor.

(qqqq) "Water storage device" means a reservoir, elevated water tank, pressurized water tank, including a bladder tank, or other container into which water is pumped and stored before beneficial use.

(rrrr) "Water use correspondent" means a person designated in writing, on a form prescribed by the chief engineer, by one of the owners of a water right to file the water use reports required by K.S.A. 82a-732 and amendments thereto, on behalf of the owner or owners of that water right. (Authorized by and implementing K.S.A. 82a-706a; modified, L. 1978, ch. 460, May 1, 1978; amended May 1, 1980; amended May 1, 1981; amended May 1, 1983; amended May 1, 1986; amended Dec. 3, 1990; amended May 31, 1994; amended Sept. 22, 2000; amended Oct. 24, 2003; amended Oct. 31, 2008; amended April 29, 2016.)

Article 12. — AQUIFER STORAGE AND RECOVERY

5-12-1. Aquifer storage and recovery permitting. (a)

An operator may store water in an aquifer storage and recovery system under a permit to appropriate water for artificial recharge if the water appropriated is source water. The requirements of this article shall be in addition to any requirements of the Kansas department of health and environment concerning underground injection wells, including article 46 of the regulations adopted by the Kansas department of health and environment.

(b) Each application for a permit to appropriate water for artificial recharge shall describe the horizontal and vertical extent of the basin storage area in which the source water will be stored.

(1) The horizontal extent shall be determined by a closed boundary within which the recharge system used to store the water will be physically located. The recharge system may include recharge pits, recharge trenches, recharge wells, or other similar systems that cause source water to enter the storage volume of the basin storage area, either by gravity flow or by injection. The basin storage area may be subdivided into smaller areas representative of the areas that may be recharged by the individual recharge systems.

(2) The vertical extent shall be defined by a minimum index level and a maximum index level for the basin recharge storage area, or for each subdivided area within the basin storage area if the basin storage area is subdivided. The maximum index water level shall represent the maximum storage potential for the basin storage area.

(c) Each application for a permit to appropriate water for artificial recharge shall specify the maximum annual quantity and maximum rate of diversion of source water.

(d)(1) Each application for a permit to appropriate water for artificial recharge shall include a methodology for accounting for water stored in a basin storage area both on an annual basis and on a cumulative basis so that recharge credits can be calculated. If more than one application for a permit to appropriate water for artificial recharge relates to the same aquifer storage and recovery system, each application shall use the same methodology for accounting for water stored in the basin storage area. The accounting of the water balance of all water entering

and leaving the basin storage area shall be determined by using sound engineering methods based on actual measurements, generally accepted engineering methodology, or a combination of both.

(2) Approval of any application for a permit to appropriate water for artificial recharge shall be contingent upon the chief engineer's approval of the method for accounting for the basin storage area.

(e) Each applicant for recovery of water stored by the holder of a permit to appropriate water for artificial recharge to store water in a basin storage area shall obtain a permit separate from the aquifer storage permit to appropriate water for beneficial use for each well used to recover the water stored. The maximum annual quantity of water that may be appropriated for this purpose shall be no more than the maximum cumulative recharge credits available to the operator of the aquifer storage and recovery system. These credits shall be determined by the accounting methodology approved under a permit to appropriate water for artificial recharge pertaining to the aquifer storage and recovery system. In determining whether diversion of the annual quantity impairs other water rights, the following data may be considered by the chief engineer:

(1) The maximum storage volume available in the basin storage area;

(2) the spatial distribution of recharge and withdrawal systems;

(3) the maximum rate of diversion at which the water will be withdrawn; and

(4) any other relevant information.

Recharge credits may be accumulated over more than one year, and any amount of recharge credits available may be withdrawn in accordance with the permit if the withdrawal does not impair other water rights.

(f) The approval of application, if the water to be diverted is the water artificially recharged into the basin storage area, shall be conditioned upon the following:

(1) Generally accepted engineering methodology;

(2) a maximum annual quantity that does not exceed the recharge credits; and

(3) an annual reporting that complies with K.A.R. 5-12-2. (Authorized by K.S.A. 82a-706a; implementing K.S.A. 2015 Supp. 82a-711 and K.S.A. 82a-712; effective Sept. 22, 2000; amended April 29, 2016.)

David W. Barfield,
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Division of Water Resources

Doc. No. 044433

State of Kansas

Department of Agriculture Division of Animal Health

Permanent Administrative Regulations

Article 18. — ANIMAL FACILITY INSPECTION PROGRAM—LICENSE AND REGISTRATION FEES

9-18-31. Euthanasia methods; prohibition. The following portion of the American veterinary medical as-
(continued)

sociation's document titled "AVMA guidelines for the euthanasia of animals: 2013 edition" is hereby adopted by reference: pages 5-102, excluding the section titled "references" on pages 84-97 and any portion that applies to any animal that is not an "animal" as defined in K.S.A. 47-1701 and amendments thereto. For the purposes of this document, the terms "animal" and "euthanasia" shall have the meanings specified in K.S.A. 47-1701, and amendments thereto.

Each licensee who euthanizes any animals shall follow the recommendations and guidelines for the handling and care of animals during the euthanasia process as identified in this document and shall use only the acceptable methods of euthanasia for a particular species to be euthanized specified in this document. Inhaled carbon monoxide shall not be used as a method of euthanasia of dogs and cats. (Authorized by K.S.A. 47-1712; implementing K.S.A. 2015 Supp. 47-1718; effective April 29, 2016.)

Article 26.—EUTHANASIA

9-26-1. (Authorized by K.S.A. 47-1712; implementing K.S.A. 47-1718; effective Nov. 15, 1996; amended, T-9-7-1-03, July 1, 2003; amended Oct. 31, 2003; revoked April 29, 2016.)

Jackie McClaskey
Secretary of Agriculture

Doc. No. 044434

State of Kansas

Board of Emergency Medical Services

Permanent Administrative Regulations

Article 1.—DEFINITIONS

109-1-1. Definitions. Each of the following terms, as used in the board's regulations, shall have the meaning specified in this regulation: (a) "AEMT" means advanced emergency medical technician.

(b) "Advanced life support" and "ALS" mean the statutorily authorized activities and interventions that may be performed by an emergency medical technician intermediate, emergency medical technician-defibrillator, emergency medical technician-intermediate/defibrillator, advanced emergency medical technician, or paramedic.

(c) "Air ambulance" means a fixed-wing or rotor-wing aircraft that is specially designed, constructed or modified, maintained, and equipped to provide air medical transportation and emergency care of patients.

(d) "Air medical director" means a physician as defined by K.S.A. 65-6112, and amendments thereto, who meets the following requirements:

(1) Is trained and experienced in care consistent with the air ambulance service's mission statement; and

(2) is knowledgeable in altitude physiology and the complications that can arise due to air medical transport.

(e) "Air medical personnel" means the attendants listed on the attendant roster, health care personnel identified on the service health care personnel roster of the air ambulance service, specialty patient care providers specific to the mission, and the pilot or pilots necessary for the

operation of the aircraft.

(f) "Airway maintenance," as used in K.S.A. 65-6121 and amendments thereto and as applied to the authorized activities of an emergency medical technician-intermediate, means the use of any invasive oral equipment and procedures necessary to ensure the adequacy and quality of ventilation and oxygenation.

(g) "Basic life support" and "BLS" mean the statutorily authorized activities and interventions that may be performed by a first responder, emergency medical responder, or emergency medical technician.

(h) "CECBEMS" means the national continuing education coordinating board for emergency medical services.

(i) "Certified mechanic," as used in K.A.R. 109-2-2, means an individual employed or contracted by the ambulance service, city or county, qualified to perform maintenance on licensed ambulances and inspect these vehicles and validate, by signature, that the vehicles meet both mechanical and safety considerations for use.

(j) "Class," as used in these regulations, means the period during which a group of students meets.

(k) "Clinical preceptor" means an individual who is responsible for the supervision and evaluation of students in clinical training in a health care facility.

(l) "Continuing education" means a formally organized learning experience that has education as its explicit principal intent and is oriented towards the enhancement of emergency medical services practice, values, skills, and knowledge.

(m) "Contrived experience," as used in K.A.R. 109-11-3a, means a simulated ambulance call and shall include dispatch communications, responding to the scene, assessment and management of the scene and patient or patients, biomedical communications with medical control, ongoing assessment, care, and transportation of the patient or patients, transference of the patient or patients to the staff of the receiving facility, completion of records, and preparation of the ambulance for return to service.

(n) "Coordination" means the submission of an application for approval of initial courses of instruction or continuing education courses and the oversight responsibility of those same courses and instructors once the courses are approved.

(o) "Course of instruction" means a body of prescribed EMS studies approved by the board.

(p) "Critical care transport" means the transport by an ambulance of a critically ill or injured patient who receives care commensurate with the care rendered by health care personnel as defined in this regulation or a paramedic with specialized training as approved by service protocols and the medical director.

(q) "Educator" means instructor-coordinator, as defined in K.S.A. 65-6112 and amendments thereto.

(r) "Emergency" means a serious medical or traumatic situation or occurrence that demands immediate action.

(s) "Emergency call" means an immediate response by an ambulance service to a medical or trauma incident that happens unexpectedly.

(t) "Emergency care" means the services provided after the onset of a medical condition of sufficient severity that the absence of immediate medical attention could reasonably be expected to cause any of the following:

- (1) Place the patient's health in serious jeopardy;
 - (2) seriously impair bodily functions; or
 - (3) result in serious dysfunction of any bodily organ or part.
- (u) "EMS" means emergency medical services.
- (v) "EMR" means emergency medical responder.
- (w) "EMT" means emergency medical technician.
- (x) "EMT-D" means emergency medical technician-defibrillator.
- (y) "EMT-I" means emergency medical technician-intermediate.
- (z) "EMT-I/D" means emergency medical technician-intermediate/defibrillator.
- (aa) "Field internship preceptor" means an individual who is responsible for the supervision and evaluation of students in field training with an ambulance service.
- (bb) "Ground ambulance" means a ground-based vehicle that is specially designed and equipped for emergency medical care and transport of sick and injured persons and meets the requirements in K.A.R. 109-2-8.
- (cc) "Health care personnel" and "health care provider," as used in these regulations, means a physician, physician assistant, licensed professional nurse, advanced practice registered nurse, or respiratory therapist.
- (dd) "Incompetence," as applied to attendants and as used in K.S.A. 65-6133 and amendments thereto, means a demonstrated lack of ability, knowledge, or fitness to perform patient care according to applicable medical protocols or as defined by the authorized activities of the attendant's level of certification.
- (ee) "Incompetence," as applied to instructor-coordinators and training officers and as used in K.S.A. 65-6133 and K.S.A. 65-6129c and amendments thereto, means a pattern of practice or other behavior that demonstrates a manifest incapacity, inability, or failure to coordinate or to instruct attendant training programs.
- (ff) "Incompetence," as applied to an operator and as used in K.S.A. 65-6132 and amendments thereto, means either of the following:
- (1) The operator's inability or failure to provide the level of service required for the type of permit held; or
 - (2) the failure of the operator or an agent or employee of the operator to comply with a statute or regulation pertaining to the operation of a licensed ambulance service.
- (gg) "Instructor-coordinator" and "I-C" mean any of the following individuals who are certified to instruct and coordinate attendant training programs:
- (1) Emergency medical technician;
 - (2) emergency medical technician-intermediate;
 - (3) emergency medical technician-defibrillator;
 - (4) physician;
 - (5) physician's assistant;
 - (6) advanced practice registered nurse;
 - (7) licensed professional nurse;
 - (8) advanced emergency medical technician; or
 - (9) paramedic.
- (hh) "Interoperable" means that one system has the ability to communicate or work with another.
- (ii) "Lab assistant" means an individual who is assisting a primary instructor in the instruction and evaluation of students in classroom laboratory training sessions.
- (jj) "Long-term provider approval" means that the

sponsoring organization has been approved by the executive director to provide any continuing education program as prescribed in K.A.R. 109-5-3.

(kk) "Mentoring educator" means an instructor-coordinator, as defined in K.S.A. 65-6112 and amendments thereto, who has obtained additional credentials prescribed by the board.

(ll) "Out of service," as used in K.A.R. 109-2-5, means that a licensed ambulance is not immediately available for use for patient care or transport.

(mm) "Primary instructor" means an instructor-coordinator or training officer who is listed by the sponsoring organization as the individual responsible for the competent delivery of cognitive, psychomotor, and affective objectives of an approved initial course of instruction or continuing education program and who is the person primarily responsible for evaluating student performance and developing student competency.

(nn) "Prior-approved continuing education" means material submitted by a sponsoring organization, to the board, that is reviewed and subsequently approved by the executive director, in accordance with criteria established by regulations, and that is assigned a course identification number.

(oo) "Public call" means the request for an ambulance to respond to the scene of a medical emergency or accident by an individual or agency other than any of the following:

- (1) A ground ambulance service;
- (2) the Kansas highway patrol or any law enforcement officer who is at the scene of an accident or medical emergency;
- (3) a physician, as defined by K.S.A. 65-6112 and amendments thereto, who is at the scene of an accident or medical emergency; or
- (4) an attendant who has been dispatched to provide emergency first response and who is at the scene of an accident or medical emergency.

(pp) "Retroactively approved continuing education" means credit issued to an attendant after attending a program workshop, conference, seminar, or other offering that is reviewed and subsequently approved by the executive director, in accordance with criteria established by the board.

(qq) "Roster" means a document whose purpose is to validate attendance at an educational offering and that includes the following information:

- (1) Name of the sponsoring organization;
- (2) location where the educational offering occurred;
- (3) signature, time of arrival, and time of departure of each attendee;
- (4) course identification number issued by the board;
- (5) title of the educational offering;
- (6) date of the educational offering; and
- (7) printed name and signature of the program manager.

(rr) "Service director" means an individual who has been appointed, employed, or designated by the operator of an ambulance service to handle daily operations and to ensure that the ambulance service is in conformance with local, state, and federal laws and ensure that quality patient care is provided by the service attendants.

(ss) "Service records" means the documents required

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to be maintained by state regulations and statutes pertaining to the operation and education within a licensed ambulance service.

(tt) "Single-program provider approval" means that the sponsoring organization has been granted approval to offer a specific continuing education program.

(uu) "Site coordinator" means a person supervising, facilitating, or monitoring students, facilities, faculty, or equipment at a training site.

(vv) "Sponsoring organization" means any professional association, accredited postsecondary educational institution, permitted ambulance service, fire department, other officially organized public safety agency, hospital, corporation, or emergency medical services regional council approved by the executive director to offer initial courses of instruction and continuing education programs as either a long-term provider or a single-program provider.

(ww) "Syllabus" means a summary of the content of a course of instruction that includes the following:

- (1) A summary of the course goals and objectives;
- (2) student prerequisites, if any, for admission into the course;
- (3) instructional and any other materials required to be purchased by the student;
- (4) student attendance policies;
- (5) student requirements for successful course completion;
- (6) a description of the clinical and field training requirements, if applicable;
- (7) student discipline policies; and
- (8) instructor, educator, mentoring educator, trainer, or training officer information, which shall include the following:

(A) The name of the instructor, educator, mentoring educator, trainer, or training officer;

(B) the office hours of the instructor, educator, mentoring educator, trainer, or training officer or the hours during which the instructor, educator, mentoring educator, trainer, or training officer is available for consultation; and

(C) the electronic mail address of the instructor, educator, mentoring educator, trainer, or training officer.

(xx) "Sufficient application" means that the information requested on the application form is provided in full, any applicable fee has been paid, all information required by statute or regulation has been submitted to the board, and no additional information is required to complete the processing of the application.

(yy) "Teach" means instruct or coordinate training, or both.

(zz) "Training officer I" means a person who has been certified by the board to coordinate attendant continuing education training programs for accredited postsecondary educational institutions, permitted ambulance services, fire departments, other officially organized public safety agencies, hospitals, corporations, professional associations, or emergency medical services regional councils.

(aaa) "Trainer" means a person who is certified by the board to function as a continuing education training program coordinator, continuing education training program instructor, or both.

(bbb) "Training officer II" means a person who is certified by the board to function as a continuing education

training program coordinator and as a primary instructor of first responder initial courses of instruction.

(ccc) "Training program accreditation" means the approval granted by the executive director to any of the following, to conduct EMS initial courses of instruction on a long-term basis: accredited postsecondary educational institutions, permitted ambulance services, fire departments, other officially organized public safety agencies, hospitals, or corporations.

(ddd) "Unprofessional conduct," as applied to attendants and as used in K.S.A. 65-6133 and amendments thereto, means conduct that violates those standards of professional behavior that through professional experience have become established by the consensus of the expert opinion of the members of the emergency medical services profession as reasonably necessary for the protection of the public. This term shall include any of the following:

- (1) Failing to take appropriate action to safeguard the patient;
- (2) performing acts beyond the activities authorized for the level at which the individual is certified;
- (3) falsifying a patient's or an ambulance service's records;
- (4) verbally, sexually, or physically abusing a patient;
- (5) violating statutes or regulations concerning the confidentiality of medical records or patient information obtained in the course of professional work;
- (6) diverting drugs or any property belonging to a patient or an agency;
- (7) making a false or misleading statement on an application for certification renewal or any agency record;
- (8) engaging in any fraudulent or dishonest act that is related to the qualifications, functions, or duties of an attendant; or

(9) failing to cooperate with the board and its agents in the investigation of complaints or possible violations of the emergency medical services statutes or board regulations, including failing to furnish any documents or information legally requested by the board. Attendants who fail to respond to requests for documents or requests for information within 30 days from the date of request shall have the burden of demonstrating that they have acted in a timely manner.

(eee) "Unprofessional conduct," as applied to instructor-coordinators and training officers and as used in K.S.A. 65-6133 and K.S.A. 65-6129c and amendments thereto, means any of the following:

- (1) Engaging in behavior that demeans a student. This behavior shall include ridiculing a student in front of other students or engaging in any inhumane or discriminatory treatment of any student or group of students;
- (2) verbally or physically abusing a student;
- (3) failing to take appropriate action to safeguard a student;
- (4) falsifying any document relating to a student or the emergency medical service agency;
- (5) violating any statutes or regulations concerning the confidentiality of student records;
- (6) obtaining or seeking to obtain any benefit, including a sexual favor, from a student through duress, coercion, fraud, or misrepresentation, or creating an environment that subjects a student to unwelcome sexual advances, which shall include physical touching or verbal expressions;

(7) an inability to instruct because of alcoholism, excessive use of drugs, controlled substances, or any physical or mental condition;

(8) reproducing or duplicating a state examination for certification without board authority;

(9) engaging in any fraudulent or dishonest act that is related to the qualifications, functions, or duties of an instructor-coordinator or training officer;

(10) willfully failing to adhere to the course syllabus; or

(11) failing to cooperate with the board and its agents in the investigation of complaints or possible violations of the board's statutes or regulations, including failing to furnish any documents or information legally requested by the board. Instructor-coordinators and training officers who fail to respond to requests for documents or requests for information within 30 days of the request shall have the burden of demonstrating that they have acted in a timely manner. (Authorized by K.S.A. 2015 Supp. 65-6110, 65-6111, and 65-6133; implementing K.S.A. 2015 Supp. 65-6110, 65-6111, K.S.A. 65-6129b, K.S.A. 2015 Supp. 65-6129c, 65-6132, and 65-6133; effective May 1, 1985; amended May 1, 1986; amended, T-88-12, May 18, 1987; amended, T-88-24, July 15, 1987; amended May 1, 1988; amended July 17, 1989; amended March 16, 1992; amended Jan. 31, 1994; amended Jan. 30, 1995; amended Jan. 31, 1997; amended Nov. 12, 1999; amended Jan. 27, 2012; amended March 15, 2013; amended April 29, 2016.)

Article 2.—AMBULANCE SERVICES; PERMITS AND REGULATIONS

109-2-1. Ambulance service operator. (a) Each operator of an ambulance service shall perform the following:

(1) Notify the board of any change in the service director within seven days of the change; and

(2) designate a person as the ambulance service director to serve as an agent of the operator.

(b) The ambulance service director shall meet the following requirements:

(1) Be responsible for the operation of the ambulance service;

(2) be available to the board regarding permit, regulatory, and emergency matters;

(3) be responsible for maintaining a current list of the ambulance service's attendants;

(4) notify the board of each addition or removal of an attendant from the attendant roster within 90 days of the addition or removal;

(5) notify the board of any known resignation, termination, incapacity, or death of a medical adviser once known and the plans for securing a new medical director; and

(6) submit written notification of each change in the medical director within 30 days of the change. (Authorized by K.S.A. 2015 Supp. 65-6110, 65-6111, and 65-6132; implementing K.S.A. 2015 Supp. 65-6110 and K.S.A. 65-6130; effective May 1, 1985; amended July 17, 1989; amended Jan. 31, 1997; amended Jan. 27, 2012; amended April 29, 2016.)

109-2-2. Application for ambulance service permit and ambulance license; permit renewal and license renewal. (a)(1) An applicant may apply for only one ambu-

lance service permit for each ambulance service that the applicant seeks to operate. Each applicant shall indicate the type of service for the permit requested as ground ambulance service or air ambulance service.

(2) An applicant may apply for only one ambulance license for each ambulance that the applicant seeks to operate.

(3) Any operator may apply for a temporary license for an ambulance. Each temporary license shall be valid for 60 days. Any temporary license may be extended by the executive director.

(b) All ambulance service permit and ambulance license application and renewal forms shall be submitted in a format required by the executive director.

(c)(1) Each initial and each renewal applicant for a ground ambulance service permit and ambulance license shall meet one of the following requirements:

(A) Obtain a mechanical and safety inspection from a person doing business as or employed by a vehicle maintenance service or a city, county, or township or from a certified mechanic as defined in K.A.R. 109-1-1, for each ambulance within 180 days before the date of ambulance service application renewal; or

(B) have a long-term vehicle maintenance program with requirements equivalent to or exceeding the requirements of the mechanical and safety inspection form.

(2) In order for an ambulance license to be renewed, the mechanical safety inspection forms shall not contain any deficiencies identified that would compromise the safe transport of patients.

(d) Each initial and each renewal application for an air ambulance shall include a valid standard airworthiness certificate for each aircraft, evidence of an air safety training program, and an informational publication.

(e)(1) Each new ground ambulance shall meet one of the following requirements:

(A) Be required to have a mechanical or safety inspection submitted on forms required by the board or shall require documentation from the manufacturer indicating that the vehicle has undergone a predelivery inspection without deficiencies; or

(B) have a long-term vehicle maintenance program with requirements equivalent to or exceeding the requirements of the mechanical and safety inspection form.

(2) Each used or retrofitted ground ambulance shall be required to have a mechanical and safety inspection.

(f) Each ambulance service permit and non-temporary ambulance license shall expire on April 30 of each year. Any such permit or license may be renewed annually in accordance with this regulation. If the board receives a complete application for renewal of an ambulance service permit or an ambulance license on or before April 30, the existing permit or license shall not expire until the board has taken final action upon the renewal application or, if the board's action is unfavorable, until the last day for seeking judicial review.

(g) If the board receives an insufficient initial application or renewal application for an ambulance service permit or ambulance license, the applicant or operator shall be notified by the board of any errors or omissions. If the applicant or operator fails to correct the deficiencies and

(continued)

submit a sufficient application within 30 days from the date of written notification, the application may be considered by the board as withdrawn.

(h) An application for ambulance service permit or permit renewal shall be deemed sufficient if all of the following conditions are met:

(1) The applicant or operator either completes all forms provided with the application for ambulance service permit or permit renewal or provides all requested information online. No additional information is required by the board to complete the processing of the application.

(2) Each operator submits the list of supplies and equipment carried on each ambulance validated by the signature of the ambulance service's medical director to the board each year with the operator's application for an ambulance service permit.

(3) The applicant or operator submits payment of the fee in the correct amount for the ambulance service permit or permit renewal and ambulance license fees.

(4) Each operator provides the inspection results to the board on forms provided by the executive director with the application for renewal.

(i) Each publicly subsidized operator shall provide the following statistical information to the board with the application for renewal of a permit:

(1) The number of emergency and nonemergency ambulance responses and the number of patients transported for the previous calendar year;

(2) the operating budget and, if any, the tax subsidy;

(3) the charge for emergency and nonemergency patient transports, including mileage fees; and

(4) the number of full-time, part-time, and volunteer staff.

(j) Each private operator shall provide the following statistical information to the board with the application for renewal of a permit:

(1) The number of emergency and nonemergency ambulance responses and the number of patients transported for the previous calendar year;

(2) the charge for emergency and nonemergency patient transports, including mileage fees; and

(3) the number of full-time, part-time, and volunteer staff.

(k) As a condition of issuance of an initial ambulance service permit, each ambulance service operator shall provide with the application the ambulance service's operational policies and approved medical protocols pursuant to K.A.R. 109-2-5.

(l) The operator of each ground ambulance service or air ambulance service shall develop a list of the supplies and equipment that are carried on each ambulance. This list shall include the supplies and equipment required by the board for the license type and any additional supplies or equipment necessary to carry out the patient care activities as indicated in the ambulance service's medical protocols, in accordance with K.S.A. 65-6112 and amendments thereto. (Authorized by K.S.A. 2015 Supp. 65-6110 and 65-6111; implementing K.S.A. 2015 Supp. 65-6110, K.S.A. 65-6127, and K.S.A. 65-6128; effective May 1, 1985; amended July 17, 1989; amended Jan. 31, 1997; amended Dec. 29, 2000; amended Jan. 27, 2012; amended Jan. 3, 2014; amended April 29, 2016.)

109-2-6. Types of ambulance services and staffing.

(a) Permits shall be issued for two types of ambulance

service. These types shall be known as air ambulance and ground ambulance.

(b) Each air ambulance service shall meet the following requirements:

(1) Provide advanced life support or critical care transport as defined in K.A.R. 109-1-1;

(2) have at least one licensed air ambulance; and

(3) not be subject to public call as defined in K.A.R. 109-1-1.

(c)(1) Each ground ambulance service shall meet the following requirements:

(A) Provide basic life support at a minimum as defined in K.A.R. 109-1-1;

(B) have at least one licensed ambulance that meets all requirements of K.A.R. 109-2-8;

(C) staff each ambulance with, at a minimum, either two attendants or one attendant and a health care provider, as defined in K.A.R. 109-1-1, and ensure that an attendant certified pursuant to K.S.A. 65-6119, 65-6120, or 65-6121, and amendments thereto, or a health care provider is in the patient compartment during patient transport; and

(D) have a method of receiving calls and dispatching ambulances that ensures that an ambulance leaves the station within an annual average of five minutes from the time an emergency call is received by the ambulance service.

(2) Any ground ambulance service operator may provide advanced life support or critical care transport as defined in K.A.R. 109-1-1 and described in K.S.A. 65-6123, 65-6120, and 65-6119, and amendments thereto, if all of the following conditions are met:

(A) At a minimum, an attendant certified pursuant to K.S.A. 65-6119, 65-6120, or 65-6123, and amendments thereto, or a health care provider is in the patient compartment during patient transport.

(B) The ambulance or personnel, or both, are adequately equipped.

(C) The treatment is approved by medical protocols or medical control pursuant to K.S.A. 65-6119, 65-6120, and 65-6123, and amendments thereto. (Authorized by K.S.A. 2015 Supp. 65-6110; implementing K.S.A. 2015 Supp. 65-6110, K.S.A. 65-6128, and K.S.A. 2015 Supp. 65-6135; effective May 1, 1985; amended May 1, 1987; amended, T-88-24, July 15, 1987; amended May 1, 1988; amended Aug. 27, 1990; amended Feb. 3, 1992; amended Jan. 31, 1997; amended July 7, 2014; revoked April 29, 2016.)

109-2-7. (Authorized by K.S.A. 2013 Supp. 65-6110; implementing K.S.A. 2013 Supp. 65-6110, K.S.A. 65-6128, and K.S.A. 2013 Supp. 65-6135; effective May 1, 1985; amended May 1, 1987; amended, T-88-24, July 15, 1987; amended May 1, 1988; amended Aug. 27, 1990; amended Feb. 3, 1992; amended Jan. 31, 1997; amended July 7, 2014; revoked April 29, 2016.)

109-2-8. Standards for ground ambulances and equipment. (a) Each ground ambulance shall meet the vehicle and equipment standards that are applicable to that type of ambulance.

(b) Each ground ambulance shall have the ambulance license prominently displayed in the patient compartment.

(c) The patient compartment size shall meet or exceed the following specifications:

- (1) Headroom: 60 inches; and
- (2) length: 116 inches.
- (d) Each ambulance shall have a heating and cooling system that is controlled separately for the patient and the driver compartments. The air conditioners for each compartment shall have separate evaporators.
- (e) Each ambulance shall have separate ventilation systems for the driver and patient compartments. These systems shall be separately controlled within each compartment. Fresh air intakes shall be located in the most practical, contaminant-free air space on the ambulance. The patient compartment shall be ventilated through the heating and cooling systems.
- (f) The patient compartment in each ambulance shall have adequate lighting so that patient care can be given and the patient's status monitored without the need for portable or hand-held lighting. A reduced lighting level shall also be provided. A patient compartment light and step-well light shall be automatically activated by opening the entrance doors. Interior light fixtures shall be recessed and shall not protrude more than 1 ½ inches.
- (g) Each ambulance shall have an electrical system to meet maximum demand of the electrical specifications of the vehicle. All conversion equipment shall have individual fusing that is separate from the chassis fuse system.
- (h) Each ground ambulance shall have lights and sirens as required by K.S.A. 8-1720 and K.S.A. 8-1738, and amendments thereto.
- (i) Each ground ambulance shall have an exterior patient loading light over the rear door, which shall be activated both manually by an inside switch and automatically when the door is opened.
- (j) The operator shall mark each ground ambulance licensed by the board as follows:
 - (1) The name of the ambulance service shall be in block letters, not less than four inches in height, and in a color that contrasts with the background color. The service name shall be located on both sides of the ambulance and shall be placed in such a manner that it is readily identifiable to other motor vehicle operators.
 - (2) Any operator may use a decal or logo that identifies the ambulance service in place of lettering. The decal or logo shall be at least 10 inches in height and shall be in a color that contrasts with the background color. The decal or logo shall be located on both sides of the ambulance and shall be placed in such a manner that the decal or logo is readily identifiable to other motor vehicle operators.
 - (3) Each ground ambulance initially licensed by the board before January 1, 1995 that is identified either by letters or a logo on both sides of the ground ambulance shall be exempt from the minimum size requirements in paragraphs (1) and (2) of this subsection.
- (k) Each ground ambulance shall have a communications system that is readily accessible to both the attendant and the driver and is in compliance with K.A.R. 109-2-5(a).
- (l) An operator shall equip each ground ambulance as follows:
 - (1) At least two annually inspected ABC fire extinguishers or comparable fire extinguishers with at least five pounds of dry chemical, which shall be secured. One fire extinguisher shall be easily accessible by the driver, and the other shall be easily accessible by the attendant;
 - (2) either two portable, functional flashlights or one flashlight and one spotlight;
 - (3) one four-wheeled or six-wheeled, all-purpose, multilevel cot with an elevating head and at least two safety straps with locking mechanisms;
 - (4) one urinal;
 - (5) one bedpan;
 - (6) one emesis basin or convenience bag;
 - (7) one complete change of linen;
 - (8) two blankets;
 - (9) one waterproof cot cover;
 - (10) one pillow; and
 - (11) a no-smoking sign posted in the patient compartment and the driver compartment.
- (m) The operator shall equip each ground ambulance with the following internal medical systems:
 - (1) An oxygen system with at least two outlets located within the patient compartment and at least 2,000 liters of storage capacity, with a minimum oxygen level of 200 psi. The cylinder shall be in a compartment that is vented to the outside. The pressure gauge and regulator control valve shall be readily accessible to the attendant from inside the patient compartment; and
 - (2) a functioning, on-board, electrically powered suction aspirator system with a vacuum of at least 300 millimeters of mercury at the catheter tip. The unit shall be easily accessible with large-bore, nonkinking suction tubing and a large-bore, semirigid, nonmetallic oropharyngeal suction tip.
- (n) The operator shall equip each ground ambulance with the following medical equipment:
 - (1) A portable oxygen unit of at least 300-liter storage capacity, complete with pressure gauge and flowmeter and with a minimum oxygen level of 200 psi. The unit shall be readily accessible from inside the patient compartment;
 - (2) a functioning, portable, self-contained battery or manual suction aspirator with a vacuum of at least 300 millimeters of mercury at the catheter tip and a transparent or translucent collection bottle or bag. The unit shall be fitted with large-bore, nonkinking suction tubing and a large-bore, semirigid, nonmetallic oropharyngeal suction tip, unless the unit is self-contained;
 - (3) a hand-operated, adult bag-mask ventilation unit, which shall be capable of use with the oxygen supply;
 - (4) a hand-operated, pediatric bag-mask ventilation unit, which shall be capable of use with oxygen supply;
 - (5) oxygen masks in adult and pediatric sizes;
 - (6) nasal cannulas in adult and pediatric sizes;
 - (7) oropharyngeal airways in adult, pediatric, and infant sizes;
 - (8) a blood pressure manometer with extra-large, adult, and pediatric cuffs and a stethoscope;
 - (9) an obstetric kit with contents as described in the ambulance service's medical protocol;
 - (10) sterile burn sheets;
 - (11) sterile large trauma dressings;
 - (12) assorted sterile gauze pads;
 - (13) occlusive gauze pads;
 - (14) rolled, self-adhering bandages;
 - (15) adhesive tape at least one inch wide;
 - (16) bandage shears;

(continued)

(17) one liter of sterile water, currently dated or one liter of sterile saline, currently dated; and

(18) currently dated medications, as authorized by the scope of practice and protocols.

(o) The operator shall equip each ground ambulance with the following patient-handling and splinting equipment:

(1) If required by protocol, a long spinal-immobilization device, complete with accessories to immobilize a patient;

(2) a set of extremity splints including one arm and one leg splint, in adult and pediatric sizes;

(3) a set of rigid cervical collars in assorted adult and pediatric sizes;

(4) if required by protocol, foam wedges or other devices that serve to stabilize the head, neck, and back as one unit; and

(5) patient disaster tags.

(p) The operator shall equip each ground ambulance with the following blood-borne and body fluid pathogen protection equipment in a quantity sufficient for crew members:

(1) Surgical or medical protective gloves;

(2) protective goggles, glasses or chin-length clear face shields;

(3) filtering masks that cover the mouth and nose;

(4) nonpermeable, full-length, long-sleeve protective gowns;

(5) a leakproof, rigid container clearly marked as "Bio-hazard" for the disposal of sharp objects; and

(6) a leakproof, closeable container for soiled linen and supplies.

(q) If an operator's medical protocols or equipment list is amended, a copy of these changes shall be submitted to the board by the ambulance service operator within 15 days of implementation of the change. Equipment and supplies obtained on a trial basis or for temporary use by the operator shall not be required to be reported to the board by an operator. (Authorized by K.S.A. 2015 Supp. 65-6110; implementing K.S.A. 2015 Supp. 65-6110 and K.S.A. 65-6128; effective May 1, 1985; amended, T-88-24, July 15, 1987; amended May 1, 1988; amended July 17, 1989; amended Aug. 16, 1993; amended Jan. 31, 1997; amended Jan. 27, 2012; amended Feb. 13, 2015; amended April 29, 2016.)

109-2-11. Standards for air ambulances and equipment.

(a) The operator shall ensure that the patient compartment in each air ambulance is configured in such a way that air medical personnel have adequate access to the patient in order to begin and maintain care commensurate with the patient's needs. The operator shall ensure that the air ambulance has adequate access and necessary space to maintain the patient's airway and to provide adequate ventilatory support by an attendant from the secured, seat-belted position within the air ambulance.

(b) Each air ambulance operator shall have a policy that addresses climate control of the aircraft for the comfort and safety of both the patient and air medical personnel. The air medical crew shall take precautions to prevent temperature extremes that could adversely affect patient care.

(c) The operator shall equip each air ambulance with the following:

(1) Either two portable functioning flashlights or a flashlight and one spotlight;

(2) either a cot with an elevating head and at least three safety straps with locking mechanisms or an isolette;

(3) one emesis basin or convenience bag;

(4) one complete change of linen;

(5) one blanket;

(6) one waterproof cot cover; and

(7) a no-smoking sign posted in the aircraft.

(d) Each air ambulance shall have a two way communications system that is readily accessible to both the medical personnel and the pilot and that meets the following requirements:

(1) Allows communication between the aircraft and air traffic control systems; and

(2) allows air medical personnel to communicate at all times with medical control, exclusive of the air traffic control system.

(e) The pilot or pilots shall be sufficiently isolated from the patient care area to minimize in-flight distractions and interference.

(f) The operator shall equip each air ambulance with an internal medical system that includes the following:

(1) An internal oxygen system with at least one outlet per patient located inside the patient compartment and with at least 2,500 liters of storage capacity with a minimum of 200 psi. The pressure gauge, regulator control valve, and humidifying accessories shall be readily accessible to attendants and medical personnel from inside the patient compartment during in-flight operations;

(2) an electrically powered suction aspirator system with an airflow of at least 30 liters per minute and a vacuum of at least 300 millimeters of mercury. The unit shall be equipped with large-bore, nonkinking suction tubing and a semirigid, nonmetallic oropharyngeal suction tip; and

(3) oxygen flowmeters and outlets that are padded, flush-mounted, or located to prevent injury to air medical personnel, unless helmets are worn by all crew members during all phases of flight operations.

(g) The operator shall equip each air ambulance with the following:

(1) A portable oxygen unit of at least 300-liter storage capacity complete with pressure gauge and flowmeter with a minimum of 200 psi. The unit shall be readily accessible from inside the patient compartment;

(2) a portable, self-contained battery or manual suction aspirator with an airflow of at least 28 liters per minute and a vacuum of at least 300 millimeters of mercury. The unit shall be fitted with large-bore, nonkinking suction tubing and a semirigid, nonmetallic, oropharyngeal suction tip;

(3) medical supplies and equipment that include the following:

(A) Airway management equipment, including tracheal intubation equipment, adult, pediatric, and infant bag-valve masks, and ventilatory support equipment;

(B) a cardiac monitor capable of defibrillating and an extra battery or power source;

(C) cardiac advanced life support drugs and therapeutic modalities, as indicated by the ambulance service's medical protocols;

(D) neonate specialty equipment and supplies for neonatal missions and as indicated by the ambulance service's medical protocols;

(E) trauma advanced life support supplies and treatment modalities, as indicated in the ambulance service's medical protocols; and

(F) a pulse oximeter and an intravenous infusion pump; and

(4) blood-borne and body fluid pathogen protection equipment as described in K.A.R. 109-2-8.

(h) If an operator’s medical protocols are amended, the operator shall submit these changes to the board with a letter of approval pursuant to K.S.A. 65-6112 (r), and amendments thereto, within 15 days of implementation of the change.

(i) Equipment and supplies obtained on a trial basis or for temporary use by the operator shall not be required to be reported to the board by the operator. If the operator’s medical equipment list is amended, the operator shall submit these changes to the board within 15 days with a letter of approval from the ambulance service’s medical director.

(j) Each air ambulance operator shall ensure that each air ambulance has on board, at all times, appropriate survival equipment for the mission and terrain of the ambulance service’s geographic area of operations.

(k) Each air ambulance operator shall ensure that the aircraft has an adequate interior lighting system so that patient care can be provided and the patient’s status can be monitored without interfering with the pilot’s vision. The air ambulance operator shall ensure that the aircraft cockpit is capable of being shielded from light in the patient care area during night operations or that red lighting or a reduced lighting level is also provided for the pilot and air ambulance personnel.

(l) Each aircraft shall have at least one stretcher that meets the following requirements:

(1) Accommodates a patient who is up to six feet tall and weighs 212 pounds;

(2) is capable of elevating the patient’s head at least 30 degrees for patient care and comfort;

(3) has three securing straps for adult patients; and

(4) has a specifically designed mechanism for securing pediatric patients.

(m) Each air ambulance operator shall ensure that all equipment, stretchers, and seating are so arranged as not to block rapid egress by air medical personnel or patients from the aircraft. The operator shall ensure that all equipment on board the aircraft is affixed or secured in either approved racks or compartments or by strap restraint while the aircraft is in operation.

(n) The aircraft shall have an electric inverter or appropriate power source that is sufficient to power patient -specific medical equipment without compromising the operation of any electrical aircraft equipment.

(o) When an isolette is used during patient transport, the operator shall ensure that the isolette is able to be opened from its secured in-flight position in order to provide full access to the infant.

(p) Each air ambulance operator shall ensure that all medical equipment is maintained according to the manufacturer’s recommendations and does not interfere with the aircraft’s navigation or onboard systems.

(q)(1) Each operator of an air ambulance service shall staff each air ambulance with a pilot and one of the following groups of individuals, who shall remain in the patient compartment during patient transport:

(A) At least two of the following: physician, physician assistant, advanced practice registered nurse, or profes-

sional nurse; or

(B) one of the individuals listed in paragraph (q)(1)(A) and one of the following:

(i) A paramedic; or

(ii) an optional staff member commensurate with the patient’s care needs, as determined by the ambulance service’s medical director or as described in the ambulance service’s medical protocols, who shall be health care personnel as defined in K.A.R. 109-1-1. The medical personnel shall remain in the patient compartment during patient transport.

(2)(A) When providing critical care transports as defined in K.A.R. 109-1-1, at least one of the medical personnel specified in paragraphs (q)(1)(A) and (B) shall be currently certified in advanced cardiac life support by a certifying entity approved by the board.

(B) When performing neonatal or pediatric missions, at least one of the medical personnel specified in paragraphs (q)(1)(A) and (B) shall be currently certified in advanced life support for neonatal and pediatric patients by a certifying entity approved by the board.

(C) When responding to the scene of an accident or medical emergency, not including transports between medical facilities, at least one of the medical personnel specified in paragraphs (q)(1)(A) and (B) shall be certified in one of the following areas by a certifying entity approved by the board:

(i) International trauma life support-advanced (ITLSA);

(ii) transport professional advanced trauma course (TPATC);

(iii) trauma nurse core course (TNCC);

(iv) certified flight registered nurse (CFRN);

(v) certified transport registered nurse (CTRN);

(vi) pre-hospital trauma life support (PHTLS);

(vii) advanced care and trauma transport (ACTT);

(viii) critical care emergency medical technician paramedic (CCEMTP); or

(ix) flight paramedic-certification (FP-C). (Authorized by and implementing K.S.A. 2015 Supp. 65-6110; effective May 1, 1987; amended July 17, 1989; amended Jan. 31, 1997; amended Jan. 27, 2012; amended July 7, 2014; amended April 29, 2016.)

Article 7.—FEES

109-7-1. Schedule of fees. (a) Attendant, I-C, training officer, and ambulance service application fees shall be nonrefundable.

(b) First responder and emergency medical responder fees:

(1) application for certification fee.....	15.00
(2) certification renewal application fee for a renewal that expires on a biennial basis if received before certificate expiration.....	20.00
(3) certification renewal application fee if received within 31 calendar days after certificate expiration ...	40.00
(4) certification renewal application fee if received on or after the 32nd calendar day after certificate expiration.....	80.00

(c) Paramedic fees:

(1) application for certification.....	65.00
(2) certification renewal application fee if received	

(continued)

before certificate expiration	50.00
(3) certification renewal application fee if received within 31 calendar days after certificate expiration.....	100.00
(4) certification renewal application fee if received on or after the 32nd calendar day after certificate expiration.....	200.00
(d) EMT, EMT-I, EMT-D, and EMT-I who is also certified as an EMT-D, and AEMT fees:	
(1) application for certification.....	50.00
(2) certification renewal application fee if received before certificate expiration	30.00
(3) certification renewal application fee if received within 31 calendar days after certificate expiration.....	60.00
(4) certification renewal application fee if received on or after the 32nd calendar day after certificate expiration.....	120.00
(e) Instructor-coordinator and training officer fees:	
(1) application for certification.....	65.00
(2) certification renewal application fee if received before certificate expiration	30.00
(3) certification renewal application fee if received within 31 calendar days after certificate expiration.....	60.00
(4) certification renewal application fee if received on or after the 32nd calendar day after certificate expiration.....	120.00
(f) Ambulance service fees:	
(1) Service permit application fee	100.00
(2) service permit renewal fee if received on or before permit expiration.....	100.00
(3) service permit renewal fee if received after permit expiration.....	200.00
(4) vehicle license application fee	40.00
(5) temporary license for an ambulance	10.00
(g) Each application for certification examination shall include payment of the prescribed application for certification fee to the board.	
(h) Payment of fees may be made by either of the following:	
(1) an individual using a personal, certified, or cashier's check, a money order, a credit card, or a debit card; or	
(2) An ambulance service, fire department, or municipality using warrants, payment vouchers, purchase orders, credit cards, or debit cards.	
(i) Payment submitted to the board for application for certification fee or renewal fee for more than one attendant, training officer, or I-C shall not be accepted, unless the fee amount is correct. (Authorized by K.S.A. 2015 Supp. 65-6110, K.S.A. 2015 Supp. 65-6111, K.S.A. 65-6127, K.S.A. 2015 Supp. 65-6129, K.S.A. 65-6129b, and K.S.A. 2015 Supp. 65-6129c; implementing K.S.A. 2015 Supp. 65-6111, K.S.A. 65-6127, K.S.A. 65-6128, K.S.A. 2015 Supp. 65-6129, K.S.A. 65-6129b, and K.S.A. 2015 Supp. 65-6129c; effective July 1, 1990; amended Feb. 3, 1992; amended Nov. 1, 1996; amended, T-109-8-8-00, Aug. 8, 2000; amended Nov. 13, 2000; amended Oct. 31, 2003; amended March 9, 2012; amended April 29, 2016.)	

Joseph House
Executive Director

Doc. No. 044432

State of Kansas

Board of Nursing

Permanent Administrative Regulations

Article 2.—REQUIREMENTS FOR APPROVED NURSING PROGRAMS

60-2-101. Requirements for initial approval. (a) Administration and organization.

(1) The nursing education program or the institution of which it is a part shall be a legally constituted body. The controlling body shall be responsible for general policy and shall provide for the financial support of the nursing education program.

(2) Authority and responsibility for administering the nursing education program shall be vested in the nurse administrator of the nursing education program.

(3) The program shall be accredited, be part of an institution that is accredited, or be in the process of being accredited by an agency that is approved by the United States department of education.

(b) Application. Each new or converted nursing education program shall submit an initial application 60 days before a scheduled board meeting. The application shall include the following:

- (1) The course of study and credential to be conferred;
- (2) the name and title of the administrator of the nursing education program;
- (3) the name of the controlling body;
- (4) the name and title of the administrator of the controlling body;
- (5) all sources of financial support;
- (6) a proposed curriculum with the total number of hours of both theoretical and clinical instruction;
- (7) the number, qualifications, and assignments of faculty members;
- (8) a proposed date of initial admission of students to the program;
- (9) the number of admissions each year and the number of students per admission;
- (10) the admission requirements;
- (11) a description of clinical facilities;
- (12) copies of the current school bulletin or catalog;
- (13) the name of each hospital and affiliating agency providing facilities for clinical experience. Each such hospital and affiliating agency shall be licensed or approved by the appropriate entity or entities; and
- (14) signed contracts or letters from clinical facilities stating that they will provide clinical experiences for the program's students.

(c) Surveys. Each nursing education program shall be surveyed for initial approval by the board. An on-site visit shall be conducted by the board to validate information submitted in the program's initial application before granting initial approval.

(1) During an initial survey, the nurse administrator of the program shall make available the following:

- (A) Administrators, prospective faculty and students, clinical facility representatives, and support services personnel to discuss the nursing education program;
- (B) minutes of faculty meetings;

- (C) faculty and student handbooks;
- (D) policies and procedures;
- (E) curriculum materials;
- (F) a copy of the nursing education program's budget; and

(G) affiliating agency contractual agreements.

(2) The nurse administrator of the nursing education program or designated personnel shall take the survey team to inspect the nursing educational facilities, including satellite program facilities and library facilities.

(3) Upon completion of the survey, the nurse administrator shall be asked to correct any inaccurate statements contained in the survey report, limiting comments to errors, unclear statements, and omissions.

(d) Approval. Each nursing education program seeking approval shall perform the following:

(1) Submit a progress report that includes the following:

(A) Updated information in all areas identified in the initial application;

(B) the current number of admissions and enrollments;

(C) the current number of qualified faculty; and

(D) detailed course syllabi; and

(2) have a site visit conducted by the board's survey team after the first graduation.

(e) Denial of approval. If a nursing education program fails to meet the requirements of the board within a designated period of time, the program shall be notified by the board's designee of the board's intent to deny approval. (Authorized by K.S.A. 65-1129; implementing K.S.A. 65-1119; effective Jan. 1, 1966; amended Jan. 1, 1968; amended Jan. 1, 1972; amended Jan. 1, 1973; amended, E-74-29, July 1, 1974; modified L. 1975, Ch. 302, Sec. 2; modified, L. 1975, Ch. 396, Sec. 1, May 1, 1975; amended May 1, 1987; amended April 4, 1997; amended June 14, 2002; amended Jan. 24, 2003; amended Nov. 7, 2008; amended April 29, 2016.)

Article 3.—REQUIREMENTS FOR LICENSURE AND STANDARDS OF PRACTICE

60-3-102. Duplicate of initial license. When an individual's initial license has been lost or destroyed, a duplicate may be issued by the board upon payment of the fee specified in K.S.A. 65-1118, and amendments thereto. (Authorized by K.S.A. 65-1129; implementing K.S.A. 2015 Supp. 74-1106; effective Jan. 1, 1966; amended Jan. 1, 1972; modified, L. 1975, Ch. 302, Sec. 11, May 1, 1975; amended Nov. 21, 1994; amended April 29, 2016.)

60-3-103. Change of name. If an applicant for licensure or a licensee changes that individual's name after submitting an application or obtaining a license, the applicant or licensee shall submit legal documentation or an affidavit indicating the change of name upon a form approved by the board. The applicant or licensee shall submit the document to the board within 30 days of the change, pursuant to K.S.A. 65-1117 and amendments thereto. (Authorized by K.S.A. 65-1129; implementing K.S.A. 2015 Supp. 65-1117; effective Jan 1, 1966; amended May 1, 1975; amended April 29, 2016.)

60-3-110. Unprofessional conduct. Any of the following shall constitute "unprofessional conduct":

(a) Performing acts beyond the authorized scope of the

level of nursing for which the individual is licensed;

(b) assuming duties and responsibilities within the practice of nursing without making or obtaining adequate preparation or maintaining competency;

(c) failing to take appropriate action or to follow policies and procedures in the practice situation designed to safeguard each patient;

(d) inaccurately recording, falsifying, or altering any record of a patient or agency or of the board;

(e) physical abuse, which shall be defined as any act or failure to act performed intentionally or carelessly that causes or is likely to cause harm to a patient. This term may include any of the following:

(1) The unreasonable use of any physical restraint, isolation, or medication that harms or is likely to harm a patient;

(2) the unreasonable use of any physical or chemical restraint, medication, or isolation as punishment, for convenience, in conflict with a physician's order or a policy and procedure of the facility or a state statute or regulation, or as a substitute for treatment, unless the use of the restraint, medication, or isolation is in furtherance of the health and safety of the patient;

(3) any threat, menacing conduct, or other nontherapeutic or inappropriate action that results in or might reasonably be expected to result in a patient's unnecessary fear or emotional or mental distress; or

(4) failure or omission to provide any goods or services that are reasonably necessary to ensure safety and well-being and to avoid physical or mental harm;

(f) commission of any act of sexual abuse, sexual misconduct, or sexual exploitation related to the licensee's practice;

(g) verbal abuse, which shall be defined as any word or phrase spoken inappropriately to or in the presence of a patient that results in or might reasonably be expected to result in the patient's unnecessary fear, emotional distress, or mental distress;

(h) delegating any activity that requires the unique skill and substantial specialized knowledge derived from the biological, physical, and behavioral sciences and judgment of the nurse to an unlicensed individual in violation of the Kansas nurse practice act or to the detriment of patient safety;

(i) assigning the practice of nursing to a licensed individual in violation of the Kansas nurse practice act or to the detriment of patient safety;

(j) violating the confidentiality of information or knowledge concerning any patient;

(k) willfully or negligently failing to take appropriate action to safeguard a patient or the public from incompetent practice performed by a registered professional nurse or a licensed practical nurse. "Appropriate action" may include reporting to the board of nursing;

(l) leaving an assignment that has been accepted, without notifying the appropriate authority and allowing reasonable time for replacement;

(m) engaging in conduct related to licensed nursing practice that is likely to deceive, defraud, or harm the public;

(n) diverting drugs, supplies, or property of any patient or agency;

(continued)

(o) exploitation, which shall be defined as misappropriating a patient's property or taking unfair advantage of a patient's physical or financial resources for the licensee's or another individual's personal or financial advantage by the use of undue influence, coercion, harassment, duress, deception, false pretense, or false representation;

(p) solicitation of professional patronage through the use of fraudulent or false advertisements, or profiting by the acts of those representing themselves to be agents of the licensee;

(q) advertising nursing superiority or advertising the performance of nursing services in a superior manner;

(r) failing to comply with any disciplinary order of the board;

(s) failing to submit to a mental or physical examination or an alcohol or drug screen, or any combination of these, when so ordered by the board pursuant to K.S.A. 65-4924 and amendments thereto, that the individual is unable to practice nursing with reasonable skill and safety by reason of a physical or mental disability or condition, loss of motor skills or the use of alcohol, drugs, or controlled substances, or any combination of these;

(t) failing to complete the requirements of the impaired provider program of the board;

(u) failing to furnish the board, its investigators, or its representatives with any information legally requested by the board;

(v) engaging in nursing practice while using a false or assumed name or while impersonating another person licensed by the board;

(w) practicing without a license or while the license has lapsed;

(x) allowing another person to use the licensee's license to practice nursing; or

(y) knowingly aiding or abetting another in any act that is a violation of any health care licensing act. (Authorized by K.S.A. 65-1129; implementing K.S.A. 2015 Supp. 65-1120; effective May 1, 1982; amended Sept. 27, 1993; amended Sept. 6, 1994; amended Oct. 25, 2002; amended April 29, 2016.)

60-3-113. Reporting of certain misdemeanor convictions by the licensee. Pursuant to K.S.A. 65-1117 and amendments thereto, each licensee shall report to the board any misdemeanor conviction for any of the following substances or types of conduct, within 30 days from the date the conviction becomes final:

- (a) Alcohol;
- (b) any drugs;
- (c) deceit;
- (d) dishonesty;
- (e) endangerment of a child or vulnerable adult;
- (f) falsification;
- (g) fraud;
- (h) misrepresentation;
- (i) physical, emotional, financial, or sexual exploitation of a child or vulnerable adult;
- (j) physical or verbal abuse;
- (k) theft;
- (l) violation of a protection from abuse order or protection from stalking order; or
- (m) any action arising out of a violation of any state or federal regulation. (Authorized by K.S.A. 2015 Supp. 65-

1117 and K.S.A. 65-1129; implementing K.S.A. 2015 Supp. 65-1117; effective Nov. 7, 2008; amended April 29, 2016.)

Article 7.—REQUIREMENTS FOR LICENSURE AND STANDARDS OF PRACTICE

60-7-102. Duplicate of initial license. When an individual's initial license has been lost or destroyed, a duplicate may be issued by the board upon payment of the fee specified in K.S.A. 65-4208, and amendments thereto. (Authorized by K.S.A. 65-4203; implementing K.S.A. 65-4208; modified, L. 1975, Ch. 302, Sec. 9, May 1, 1975; amended April 20, 2001; amended April 29, 2016.)

60-7-106. Unprofessional conduct. Any of the following shall constitute "unprofessional conduct":

(a) Performing acts beyond the authorized scope of mental health technician practice for which the individual is licensed;

(b) assuming duties and responsibilities within the practice of mental health technology without adequate preparation or without maintaining competency;

(c) failing to take appropriate action or to follow policies and procedures in the practice situation designed to safeguard the patient;

(d) inaccurately recording, falsifying, or altering any record of a patient, an agency, or the board;

(e) physical abuse, which shall be defined as any act or failure to act performed intentionally or carelessly that causes or is likely to cause harm to a patient. This term may include any of the following:

(1) The unreasonable use of any physical restraints, isolation, or medication that harms or is likely to harm a patient;

(2) the unreasonable use of any physical or chemical restraint, medication, or isolation as a punishment, for convenience, in conflict with a physician's order or a policy and procedure of the facility or a statute or regulation, or as a substitute for treatment, unless the use of the restraint, medication, or isolation is in furtherance of the health and safety of the patient;

(3) any threat, menacing conduct, or other nontherapeutic or inappropriate action that results in or might reasonably be expected to result in a patient's unnecessary fear or emotional or mental distress; or

(4) any failure or omission to provide any goods or services that are reasonably necessary to ensure safety and well-being and to avoid physical or mental harm;

(f) the commission of any act of sexual abuse, sexual misconduct, or sexual exploitation related to the licensee's practice;

(g) verbal abuse, which shall be defined as any word or phrase spoken inappropriately to or in the presence of a patient that results in or might reasonably be expected to result in the patient's unnecessary fear, emotional distress, or mental distress;

(h) delegating any activity that requires the unique skill and substantial specialized knowledge derived from the biological, physical, and behavioral sciences and judgment of the mental health technician to an unlicensed individual in violation of the mental health technician's licensure act or to the detriment of patient safety;

(i) assigning the practice of mental health technology

to a licensed individual in violation of the mental health technician's licensure act or to the detriment of patient safety;

(j) violating the confidentiality of information or knowledge concerning any patient;

(k) willfully or negligently failing to take appropriate action to safeguard a patient or the public from incompetent practice performed by a licensed mental health technician. "Appropriate action" may include reporting to the board of nursing;

(l) leaving an assignment that has been accepted, without notifying the appropriate authority and without allowing reasonable time for the licensee's replacement;

(m) engaging in conduct related to mental health technology practice that is likely to deceive, defraud, or harm the public;

(n) diverting drugs, supplies, or property of any patient or agency or violating any law or regulation relating to controlled substances;

(o) exploitation, which shall be defined as misappropriating a patient's property or taking unfair advantage of a patient's physical or financial resources for the licensee's or another individual's personal or financial advantage by the use of undue influence, coercion, harassment, duress, deception, false pretense, or false representation;

(p) solicitation of professional patronage through the use of fraudulent or false advertisements, or profiting by the acts of those representing themselves to be agents of the licensee;

(q) failing to comply with any disciplinary order of the board;

(r) if the licensee is participating in an impaired provider program approved by the board, failing to complete the requirements of the program;

(s) failing to submit to a mental or physical examination or an alcohol or drug screen, or any combination of these, when so ordered by the board pursuant to K.S.A. 65-4924 and amendments thereto, that the individual is unable to practice mental health technology with reasonable skill and safety by reason of a physical or mental disability or condition, loss of motor skills or the use of alcohol, drugs, or controlled substances, or any combination of these;

(t) failing to furnish the board of nursing, or its investigators or representatives, with any information legally requested by the board of nursing;

(u) engaging in mental health technology practice while using a false or assumed name or while impersonating another person licensed by the board;

(v) practicing without a license or while the individual's license has lapsed;

(w) allowing another person to use the licensee's license to practice mental health technology;

(x) knowingly aiding or abetting another in any act that is a violation of any health care licensing act;

(y) having a mental health technician license from a licensing authority of another state, agency of the United States government, territory of the United States, or country denied, revoked, limited, or suspended or being subject to any other disciplinary action. A certified copy of the record or order of denial, suspension, limitation, revocation, or any other disciplinary action issued by the

licensing authority of another state, agency of the United States government, territory of the United States, or country shall constitute prima facie evidence of such a fact;

(z) failing to report to the board of nursing any adverse action taken against the licensee by another state or licensing jurisdiction, a peer review body, a health care facility, a professional association or society, a governmental agency, a law enforcement agency, or a court for acts or conduct similar to acts or conduct that would constitute grounds for disciplinary action under this regulation; or

(aa) cheating on or attempting to subvert the validity of the examination for a license. (Authorized by K.S.A. 65-4203 implementing K.S.A. 2015 Supp. 65-4209; effective, T-88-48, Dec. 16, 1987; effective Sept. 27, 1993; amended Sept. 6, 1994; amended April 20, 2007; amended April 29, 2016.)

Article 9.—CONTINUING EDUCATION FOR NURSES

60-9-105. Definitions. For the purposes of these regulations, each of the following terms shall have the meaning specified in this regulation:

(a) "Approval" means the act of determining that a providership application or course offering meets applicable standards based on review of either the total program or the individual offering.

(b) "Approved provider" means a person, organization, or institution that is approved by the board and is responsible for the development, administration, and evaluation of the continuing nursing education (CNE) program or offering.

(c) "Authorship" means a person's development of a manuscript for print or a professional paper for presentation. Each page of text that meets the definition of continuing nursing education (CNE), as defined in K.S.A. 65-1117 and amendments thereto, and is formatted according to the American psychological association's guidelines shall equal three contact hours.

(1) Authorship of a manuscript means a person's development of an original manuscript for a journal article or text accepted by a publisher for statewide or national distribution on a subject related to nursing or health care. Proof of acceptance from the editor or the published work shall be deemed verification of this type of credit. Credit shall be awarded only once per topic per renewal period.

(2) Authorship of a professional research paper means a person's completion of a nursing research project as principal investigator, co-investigator, or project director and presentation to other health professionals. A program brochure, course syllabus, or letter from the offering provider identifying the person as a presenter shall be deemed verification of this type of credit. Credit shall be awarded only once each renewal period.

(d) "Behavioral objectives" means the intended outcome of instruction stated as measurable learning behaviors.

(e) "Certificate" means a document that is proof of completion of an offering consisting of one or more contact hours.

(f) "CE transcript" means a document that is proof of completion of one or more CNE offerings. Each CE tran-

(continued)

script shall be maintained by a CNE provider.

(g) "Clinical hours" means planned learning experiences in a clinical setting. Three clinical hours equal one contact hour.

(h) "College course" means a class taken through a college or university, as described in K.S.A. 65-1119 and amendments thereto, and meeting the definition of CNE in K.S.A. 65-1117, and amendments thereto. One college credit hour equals 15 contact hours.

(i) "Computer-based instruction" means a learning application that provides computer control to solve an instructional problem or to facilitate an instructional opportunity.

(j) "Contact hour" means 50 total minutes of participation in a learning experience that meets the definition of CNE in K.S.A. 65-1117, and amendments thereto. Fractions of hours over 30 minutes to be computed towards a contact hour shall be accepted.

(k) "Distance learning" means the acquisition of knowledge and skills through information and instruction delivered by means of a variety of technologies.

(l) "Independent study" means a self-paced learning activity undertaken by the participant in an unstructured setting under the guidance of and monitored by an approved provider. This term shall include self-study programs, distance learning, and authorship.

(m) "Individual offering approval" and "IOA" mean a request for approval of an education offering meeting the definition of CNE, pursuant to K.S.A. 65-1117 and amendments thereto, but not presented by an approved provider or other acceptable approving body, as described in K.S.A. 65-1119 and amendments thereto.

(n) "In-service education" and "on-the-job training" mean learning activities in the work setting designed to assist the individual in fulfilling job responsibilities. In-service education and on-the-job-training shall not be eligible for CNE credit.

(o) "Offering" means a single CNE learning experience designed to enhance knowledge, skills, and professionalism related to nursing. Each offering shall consist of at least 30 minutes to be computed towards a contact hour.

(p) "Orientation" means formal or informal instruction designed to acquaint employees with the institution and the position. Orientation shall not be considered CNE.

(q) "Program" means a plan to achieve overall CNE goals.

(r) "Refresher course" means a course of study providing review of basic preparation and current developments in nursing practice.

(s) "Total program evaluation" means a systematic process by which an approved provider analyzes outcomes of the overall CNE program in order to make subsequent decisions. (Authorized by and implementing K.S.A. 2015 Supp. 65-1117 and K.S.A. 65-1119; effective Sept. 2, 1991; amended March 9, 1992; amended April 26, 1993; amended April 3, 1998; amended April 20, 2001; amended Oct. 25, 2002; amended March 6, 2009; amended May 10, 2013; amended April 29, 2016.)

60-9-106. Continuing nursing education for license renewal. (a) At the time of license renewal, any licensee may be required to submit proof of completion of 30 contact hours of approved continuing nursing education (CNE). This proof shall be documented as follows:

(1) For each approved CNE offering, a certificate or a

transcript that clearly designates the number of hours of approved CNE that have been successfully completed, showing the following:

(A) Name of CNE offering;

(B) provider name or name of the accrediting organization;

(C) provider number or number of the accrediting organization, if applicable;

(D) offering date;

(E) number of contact hours awarded; and

(F) the licensee's name and license number as shown on the course roster; or

(2) an approved Kansas state board of nursing IOA, which shall include approval of college courses that meet the definition of continuing education in K.S.A. 65-1117, and amendments thereto.

(b) The required 30 contact hours of approved CNE shall have been completed during the most recent prior licensing period between the first date of the licensing period and the date that the licensee submits the renewal application as required in K.S.A. 65-1117, and amendments thereto, and K.A.R. 60-3-108. Contact hours accumulated in excess of the 30-hour requirement shall not be carried over to the next renewal period.

(c) Acceptable CNE may include any of the following:

(1) An offering presented by an approved long-term or single provider;

(2) an offering as designated in K.S.A. 65-1119, and amendments thereto;

(3) an offering for which a licensee has submitted an IOA, which may include credit requested for a college course that meets the definition of continuing education in K.S.A. 65-1117, and amendments thereto. Before licensure renewal, the licensee may submit an application for an IOA to the board, accompanied by the following:

(A) An agenda representing exact learning time in minutes;

(B) official documentation of successfully completed hours, which may include a certificate of completion or an official college transcript; and

(C) learning or behavior objectives describing learning outcomes;

(4) a maximum of 15 contact hours for the first-time preparation and presentation as an instructor of an approved offering to licensed nurses. Two contact hours of instructor credit shall be granted for each hour of presentation;

(5) an offering utilizing a board-approved curriculum developed by the American heart association, emergency nurses association, or Mandt, which may include the following:

(A) Advanced cardiac life support;

(B) emergency nursing pediatric course;

(C) pediatric advanced life support;

(D) trauma nurse core course;

(E) neonatal resuscitation program; or

(F) Mandt program;

(6) independent study;

(7) distance learning offerings;

(8) a board-approved refresher course if required for licensure reinstatement as specified in K.A.R. 60-3-105 and K.A.R. 60-11-116;

(9) participation as a member of a nursing organization

board of directors or the state board of nursing, including participation as a member of a committee reporting to the board. The maximum number of allowable contact hours shall be six and shall not exceed three contact hours each year. A letter from an officer of the board confirming the dates of participation shall be accepted as documentation of this type of CNE; or

(10) any college courses in science, psychology, sociology, or statistics that are prerequisites for a nursing degree.

(d) Fractions of hours over 30 minutes to be computed towards a contact hour shall be accepted.

(e) Contact hours shall not be recognized by the board for any of the following:

(1) Identical offerings completed within a renewal period;

(2) offerings containing the same content as courses that are part of basic preparation at the level of current licensure or certification;

(3) in-service education, on-the-job training, orientation, and institution-specific courses;

(4) an incomplete or failed college course or any college course in literature and composition, public speaking, basic math, algebra, humanities, or other general education requirements unless the course meets the definition of CNE;

(5) offerings less than 30 minutes in length; or

(6) a board-approved refresher course for license renewal. (Authorized by and implementing K.S.A. 2015 Supp. 65-1117; effective Sept. 2, 1991; amended April 3, 1998; amended April 20, 2001; amended July 20, 2007; amended May 10, 2013; amended April 29, 2016.)

Article 17. — ADVANCED NURSING EDUCATION PROGRAM

60-17-102. Requirements for initial approval. (a) Each hospital and agency serving as an affiliating agency and providing facilities for clinical experience shall be licensed or accredited by the appropriate credentialing groups.

(b) (1) The advanced nursing education program or the institution of which it is a part shall be a legally constituted body. The controlling body shall be responsible for general policy and shall provide the financial support for the advanced nursing education program.

(2) Authority and responsibility for administering the advanced nursing education program shall be vested in the nurse administrator of the advanced nursing education program.

(c) Each new advanced nursing education program shall submit, at least 60 days before a scheduled board meeting, an initial application, which shall include all of the following:

(1) The course of study and credential to be conferred;

(2) the name and title of the nurse administrator of the advanced nursing education program;

(3) the name of the controlling body;

(4) the name and title of the administrator for the controlling body;

(5) the organizational chart;

(6) all sources of financial support, including a three-year budget;

(7) a proposed curriculum, indicating the total number of hours of both theoretical and clinical instruction;

(8) the program objectives or outcomes;

(9) the number, qualifications, and assignments of faculty;

(10) the faculty policies;

(11) the admission requirements;

(12) a copy of the current school bulletin or catalog;

(13) a description of clinical facilities and client census data;

(14) contractual agreements by affiliating agencies for clinical facilities, signed at least three months before the first date on which students may enroll;

(15) the program evaluation plan; and

(16) a proposed date of initial admission of students to the program.

(d) Each advanced nursing education program shall be surveyed for approval by the board, with the exception of nurse anesthesia programs, as determined by K.A.R. 60-13-103.

(1) During a survey, the nurse administrator of the program shall make available all of the following:

(A) Administrators, prospective faculty and students, affiliating agencies, representatives, preceptors, and support services personnel to discuss the advanced nursing education program;

(B) minutes of faculty meetings;

(C) faculty and student handbooks;

(D) policies and procedures;

(E) curriculum materials;

(F) a copy of the advanced nursing education program's budget; and

(G) affiliating agency contractual agreements.

(2) The nurse administrator of the advanced nursing education program or designated personnel shall take the survey team to inspect the nursing educational facilities, including satellite program facilities and library facilities.

(3) Upon completion of the survey, the nurse administrator shall be asked to correct any inaccurate statements contained in the survey report, limiting these comments to errors, unclear statements, or omissions.

(e) Each institution contemplating the establishment of an advanced nursing education program shall be surveyed and accredited by the board before the admission of students.

(f) If an advanced nursing education program fails to meet the requirements of the board within a designated period of time, the program shall be notified by the board's designee of the board's intent to deny approval. (Authorized by and implementing K.S.A. 2015 Supp. 65-1133; effective March 31, 2000; amended April 20, 2007; amended April 29, 2016.)

Mary Blubaugh, MSN, RN
Executive Administrator

Doc. No. 044457

INDEX TO ADMINISTRATIVE REGULATIONS

This index lists in numerical order the new, amended and revoked administrative regulations and the volume and page number of the *Kansas Register* issue in which more information can be found. Temporary regulations are designated with a (T) in the Action column. This cumulative index supplements the 2009 Volumes of the *Kansas Administrative Regulations* and the 2015 Supplement of the *Kansas Administrative Regulations*.

AGENCY 1: DEPARTMENT OF ADMINISTRATION

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1-16-4	Amended	V. 35, p. 44
1-16-8	Amended	V. 35, p. 44
1-16-15	Amended	V. 35, p. 45
1-16-18	Amended	V. 35, p. 45
1-16-18a	Amended	V. 35, p. 46
1-45-22	Amended	V. 34, p. 1227

AGENCY 4: DEPARTMENT OF AGRICULTURE

Reg. No.	Action	Register
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4-5-2	Revoked	V. 35, p. 238
4-5-4	New	V. 35, p. 238

AGENCY 5: DEPARTMENT OF AGRICULTURE—DIVISION OF WATER RESOURCES

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5-22-7	Amended	V. 35, p. 199
5-25-21	New	V. 35, p. 200

AGENCY 7: SECRETARY OF STATE

Reg. No.	Action	Register
7-23-14	Amended	V. 34, p. 1032
7-23-15	New	V. 34, p. 1033

AGENCY 14: DEPARTMENT OF REVENUE—DIVISION OF ALCOHOLIC BEVERAGE CONTROL

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14-19-40	New (T)	V. 34, p. 824
14-19-40	New	V. 34, p. 1053
14-20-42	New (T)	V. 34, p. 825
14-20-42	New	V. 34, p. 1054
14-21-23	New (T)	V. 34, p. 825
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AGENCY 16: ATTORNEY GENERAL

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16-14-1 through 16-14-9	New	V. 34, p. 1228, 1229

AGENCY 28: DEPARTMENT OF HEALTH AND ENVIRONMENT

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28-4-94	New	V. 34, p. 420
28-16-28b	Amended	V. 34, p. 190
28-16-28c	Amended	V. 34, p. 194
28-16-28d	Amended	V. 34, p. 196
28-16-28e	Amended	V. 34, p. 197
28-16-28f	Amended	V. 34, p. 199
28-16-58	Amended	V. 34, p. 200
28-19-274	New	V. 34, p. 1140

AGENCY 30: KANSAS DEPARTMENT FOR CHILDREN AND FAMILIES

Reg. No.	Action	Register
30-10-19	Revoked	V. 35, p. 46
30-44-2	Amended	V. 35, p. 63
30-44-6	New	V. 35, p. 63

AGENCY 40: KANSAS INSURANCE DEPARTMENT

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40-1-28	Amended	V. 34, p. 216
40-1-37	Amended	V. 34, p. 120
40-1-48	Amended	V. 34, p. 120
40-2-20	Amended	V. 34, p. 1202
40-4-29a	Amended	V. 34, p. 996
40-4-37e	Amended	V. 34, p. 120
40-9-118	Amended	V. 34, p. 103
40-9-126	New	V. 34, p. 103

AGENCY 60: BOARD OF NURSING

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60-4-103	Amended	V. 34, p. 260

AGENCY 61: BOARD OF BARBERING

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61-3-7	Amended	V. 34, p. 190
61-3-22	Amended	V. 34, p. 190

AGENCY 65: BOARD OF EXAMINERS IN OPTOMETRY

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65-5-6	Amended	V. 34, p. 480
65-5-10	Revoked	V. 34, p. 481
65-5-11	Revoked	V. 34, p. 481
65-5-13	New	V. 34, p. 481

AGENCY 66: BOARD OF TECHNICAL PROFESSIONS

Reg. No.	Action	Register
66-14-1	Amended	V. 34, p. 617
66-14-2	Amended	V. 34, p. 617
66-14-3	Amended	V. 34, p. 618
66-14-5	Amended	V. 34, p. 618
66-14-7	Amended	V. 34, p. 618
66-14-10	Amended	V. 34, p. 618
66-14-11	Amended	V. 34, p. 619

AGENCY 68: BOARD OF PHARMACY

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68-2-22	Amended	V. 34, p. 70
68-16-1 through 68-16-9	Revoked	V. 34, p. 70
68-20-10a	Amended	V. 34, p. 70
68-20-31	New (T)	V. 34, p. 103
68-20-31	New	V. 34, p. 480

AGENCY 69: BOARD OF COSMETOLOGY

Reg. No.	Action	Register
69-11-1	Amended	V. 34, p. 996
69-15-1	Amended	V. 34, p. 996
69-15-14	Amended	V. 34, p. 997
69-15-30	Amended	V. 34, p. 998

AGENCY 71: KANSAS DENTAL BOARD

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71-6-5	Amended	V. 35, p. 140

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74-1-4	Amended	V. 35, p. 84
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74-4-8	Amended	V. 35, p. 85
74-4-9	Amended	V. 35, p. 86

74-5-2	Amended	V. 35, p. 87
74-5-2a	Amended	V. 35, p. 88
74-5-2b	New	V. 35, p. 88
74-5-101 through 74-5-104	Amended	V. 35, p. 88, 89
74-5-201 through 74-5-203	Amended	V. 35, p. 89
74-5-301	Amended	V. 35, p. 90
74-5-401	Amended	V. 35, p. 90
74-5-403	Amended	V. 35, p. 90
74-5-405a	Amended	V. 35, p. 90
74-5-406	Amended	V. 35, p. 90
74-5-407	Amended	V. 35, p. 91
74-11-6	Amended	V. 35, p. 91
74-11-7	Amended	V. 35, p. 91
74-15-1	Amended	V. 35, p. 92

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81-2-1	Amended	V. 34, p. 1303
81-3-1	Amended	V. 34, p. 1304
81-3-2	Amended	V. 34, p. 1052
81-3-5	Amended	V. 34, p. 1305
81-3-6	Amended	V. 34, p. 1306
81-3-7	Amended	V. 34, p. 1310
81-4-1	Amended	V. 34, p. 1311
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81-5-15	Amended	V. 34, p. 1312
81-5-17	Amended	V. 34, p. 1313
81-5-21	Amended	V. 34, p. 1313
81-6-1	Amended	V. 34, p. 1313
81-7-1	Amended	V. 34, p. 1314
81-7-2	Amended	V. 34, p. 1314
81-14-1	Amended	V. 34, p. 1315
81-14-2	Amended	V. 34, p. 1052
81-14-5	Amended	V. 34, p. 1316
81-14-11	Amended	V. 34, p. 1321
81-21-1	Revoked	V. 34, p. 1053
81-22-1	Revoked	V. 34, p. 1053
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81-24-2	Revoked	V. 34, p. 1053
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81-26-2	Revoked	V. 34, p. 1053
81-27-1	Revoked	V. 34, p. 1053
81-27-2	Revoked	V. 34, p. 1053
81-29-1	Revoked	V. 34, p. 1053
81-29-2	Revoked	V. 34, p. 1053

AGENCY 82: STATE CORPORATION COMMISSION

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82-2-506	Revoked	V. 34, p. 900
82-2-507	Revoked	V. 34, p. 900
82-3-100	Amended	V. 34, p. 900
82-3-106	Amended	V. 34, p. 900
82-3-109	Amended	V. 34, p. 901
82-3-203	Amended	V. 34, p. 902
82-3-207	Amended	V. 34, p. 902
82-3-208	Amended	V. 34, p. 902
82-3-209	Amended	V. 34, p. 902
82-3-304	Amended	V. 34, p. 1100
82-3-312	Amended	V. 34, p. 903
82-3-1100 through 82-3-1120	Revoked	V. 34, p. 903
82-4-3a	Amended (T)	V. 34, p. 373
82-4-3a	Amended	V. 34, p. 846

82-4-3f Amended V. 34, p. 515
 82-4-3g Amended V. 34, p. 518

AGENCY 85: ABSTRACTERS' BOARD OF EXAMINERS

Reg. No.	Action	Register
85-4-1	Amended	V. 34, p. 177
85-7-1	Amended	V. 34, p. 177

AGENCY 86: REAL ESTATE COMMISSION

Reg. No.	Action	Register
86-1-5	Amended	V. 34, p. 1159

AGENCY 88: BOARD OF REGENTS

Reg. No.	Action	Register
88-3-8a	Amended (T)	V. 34, p. 961
88-3-8a	Amended	V. 34, p. 1266
88-3-12	Revoked (T)	V. 34, p. 961
88-3-12	Revoked	V. 34, p. 1267
88-24-2	Amended	V. 34, p. 247
88-26-1 through 88-26-8	Amended	V. 34, p. 247-250
88-26-7	Amended (T)	V. 34, p. 961
88-26-7	Amended	V. 34, p. 1267
88-26-9 through 88-26-16	Revoked	V. 34, p. 250
88-28-6	Amended	V. 34, p. 250
88-29-1	Amended	V. 34, p. 313
88-29-5	Amended	V. 34, p. 314
88-29-6	Amended	V. 34, p. 314
88-29-7	Amended	V. 34, p. 315
88-29-7a	Amended	V. 34, p. 315
88-29-11	Amended	V. 34, p. 315
88-29a-1	Amended	V. 34, p. 316
88-29a-5	Amended	V. 34, p. 318
88-29a-6	Amended	V. 34, p. 318
88-29a-7	Amended	V. 34, p. 318
88-29a-7a	Amended	V. 34, p. 319
88-29b-1	Amended	V. 34, p. 319
88-29b-4	Amended	V. 34, p. 320
88-29b-5	Amended	V. 34, p. 321
88-29b-6	Amended	V. 34, p. 322
88-29b-7	Amended	V. 34, p. 323
88-29b-7a	Amended	V. 34, p. 324

AGENCY 91: DEPARTMENT OF EDUCATION

Reg. No.	Action	Register
91-42-1	Amended (T)	V. 35, p. 163
91-42-2	Amended (T)	V. 35, p. 163
91-42-3 through 91-42-7	New (T)	V. 35, p. 164-166

AGENCY 92: DEPARTMENT OF REVENUE

Reg. No.	Action	Register
92-23-9 through 92-23-23	Revoked	V. 35, p. 63, 64
92-23-25	Revoked	V. 35, p. 64
92-23-30	Revoked	V. 35, p. 64
92-23-31	Revoked	V. 35, p. 64
92-23-37 through 92-23-40	Revoked	V. 35, p. 64
92-23-41 through 92-23-59	New	V. 35, p. 64-67
92-23-70 through 92-23-75	New	V. 35, p. 67, 68
92-56-1	Amended	V. 34, p. 1140
92-56-2	Amended	V. 34, p. 1141

92-56-4 Amended V. 34, p. 1356

AGENCY 93: DEPARTMENT OF REVENUE—DIVISION OF PROPERTY VALUATION

Reg. No.	Action	Register
93-9-1	New	V. 34, p. 260

AGENCY 100: BOARD OF HEALING ARTS

Reg. No.	Action	Register
100-28a-1a	New (T)	V. 34, p. 1334
100-28a-6	Amended (T)	V. 34, p. 1334
100-28a-9	Amended (T)	V. 34, p. 1335
100-28a-9a	New (T)	V. 34, p. 1335
100-28a-10	Amended (T)	V. 34, p. 1335
100-28a-11	Amended (T)	V. 34, p. 1336
100-28a-12	Amended (T)	V. 34, p. 1336
100-28a-13	Amended (T)	V. 34, p. 1336
100-28a-14	Amended (T)	V. 34, p. 1337
100-28a-15	Amended (T)	V. 34, p. 1337
100-28a-17	Amended (T)	V. 34, p. 1337

AGENCY 105: BOARD OF INDIGENTS' DEFENSE SERVICES

Reg. No.	Action	Register
105-5-2	Amended	V. 34, p. 1248
105-5-3	Amended	V. 34, p. 1248
105-5-6	Amended	V. 34, p. 1248
105-5-7	Amended	V. 34, p. 1249
105-5-8	Amended	V. 34, p. 1249
105-11-1	Amended	V. 34, p. 1249

AGENCY 109: BOARD OF EMERGENCY MEDICAL SERVICES

Reg. No.	Action	Register
109-2-8	Amended	V. 34, p. 71
109-5-1	Amended	V. 34, p. 1299
109-5-1a through 109-5-1d	Amended	V. 34, p. 1299, 1300
109-5-2	Revoked	V. 34, p. 1300
109-8-1	Amended	V. 34, p. 1300
109-10-1	Revoked	V. 34, p. 344
109-10-1c	Amended	V. 34, p. 344
109-10-1e	Amended	V. 34, p. 345
109-10-2	Revoked	V. 34, p. 345
109-10-7	Amended	V. 34, p. 345
109-11-3a	Amended	V. 34, p. 345
109-11-4a	Amended	V. 34, p. 346
109-11-6a	Amended	V. 34, p. 346
109-11-10	Revoked	V. 34, p. 347

AGENCY 111: KANSAS LOTTERY

A complete index listing all regulations filed by the Kansas Lottery from 1988 through 2000 can be found in the Vol. 19, No. 52, December 28, 2000 *Kansas Register*. A list of regulations filed from 2001 through 2003 can be found in the Vol. 22, No. 52, December 25, 2003 *Kansas Register*. A list of regulations filed from 2004 through 2005 can be found in the Vol. 24, No. 52, December 29, 2005 *Kansas Register*. A list of regulations filed from 2006 through 2007 can be found in the Vol. 26, No. 52, December 27, 2007 *Kansas Register*. A list of regulations filed from 2008 through November 2009 can be found in the Vol. 28, No. 53, December 31, 2009 *Kansas Register*. A list of regulations filed from December 1, 2009, through December 21, 2011, can be found in the Vol. 30, No. 52, December 29, 2011 *Kansas Register*. A list of regulations filed from December 22, 2011, through November 6, 2013, can be found in the Vol. 32, No. 52, December 26, 2013 *Kansas Register*. A list of regulations filed from November

7, 2013, through December 31, 2015, can be found in the Vol. 34, No. 53, December 31, 2015 *Kansas Register*.

Reg. No.	Action	Register
111-4-3417 through 111-4-3421	New	V. 35, p. 131-135
111-4-3422	New	V. 35, p. 157
111-4-3423	New	V. 35, p. 157
111-7-66	Amended	V. 35, p. 158
111-7-68	Amended	V. 35, p. 159
111-7-73	Amended	V. 35, p. 159
111-7-75	Amended	V. 35, p. 159
111-17-21	Amended	V. 35, p. 160
111-17-24	New	V. 35, p. 136
111-17-25	New	V. 35, p. 161
111-401-35 through 111-401-37	Amended	V. 35, p. 162
111-401-185 through 111-401-188	Amended	V. 35, p. 139
111-401-190 through 111-401-194	Amended	V. 35, p. 140

AGENCY 115: DEPARTMENT OF WILDLIFE, PARKS AND TOURISM

Reg. No.	Action	Register
115-1-1	Amended	V. 34, p. 1204
115-2-1	Amended	V. 34, p. 1206
115-4-11	Amended	V. 34, p. 1208
115-4-13	Amended	V. 34, p. 1210
115-7-1	Amended	V. 34, p. 1211
115-7-2	Amended	V. 34, p. 103
115-7-10	Amended	V. 34, p. 1212
115-8-1	Amended	V. 35, p. 274
115-9-6	Amended	V. 34, p. 104
115-30-1	Amended	V. 34, p. 104

AGENCY 117: REAL ESTATE APPRAISAL BOARD

Reg. No.	Action	Register
117-7-1	Amended	V. 34, p. 420
117-8-3	New	V. 35, p. 199

AGENCY 123: DEPARTMENT OF CORRECTIONS—DIVISION OF JUVENILE SERVICES

Reg. No.	Action	Register
123-6-105	Amended	V. 34, p. 868
123-6-105a	New	V. 34, p. 868
123-15-107	New	V. 24, p. 1183

AGENCY 127: KANSAS HOUSING RESOURCES CORPORATION

Reg. No.	Action	Register
127-2-2	Amended	V. 34, p. 347

AGENCY 129: DEPARTMENT OF HEALTH AND ENVIRONMENT—DIVISION OF HEALTH CARE FINANCE

Reg. No.	Action	Register
129-5-1	Amended (T)	V. 34, p. 100
129-5-1	Amended	V. 34, p. 340
129-5-10 through 129-5-21	New	V. 34, p. 943, 944
129-10-18	Amended	V. 35, p. 46
129-10-19	New	V. 35, p. 49

AGENCY 132: KANSAS 911 COORDINATING COUNCIL

Reg. No.	Action	Register
132-1-1	New	V. 34, p. 103

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